THRIVE 2026

COMPASSION IN ACTION.
COMMUNITY AT HEART.







Soledad Community
HEALTH CARE DISTRICT

OCTOBER 29, 2026
AGENDA

Agenda

SOLEDAD COMMUNITY HEALTH CARE DISTRICT
Regular Meeting of the Board of Directors
October 29, 2026 @ 4:00 p.m.

Board members and members of the public may attend this meeting in person at the District Office located at 612 Main Street, Soledad, Ca 93960 in the Creekside Room

1. Call to Order

2. Roll Call
   Anne Trebino
   Rosemary Guidotti
   Ken Klemme
   Francisco Barajas
   Graig Stephens

3. Pledge of Allegiance

4. Reading of the District's Mission Statement – To be read by a District Board Member
   "To anticipate and provide services to meet the health care needs of the people we serve." **4:05 p.m.**

5. President's Welcome **4:10 p.m.**
   A. Introductions and Welcome – Graig Stephens

6. Public Comment
   Members of the public are welcome to participate in the meetings of the Board **4:15 p.m.**
   Comments of the public will be accepted during the Public Comment portion of the agenda.
   No action or comments will be taken by the Board on matters not on the agenda. Public comments on agenda items should be made at the time each item is considered. When the Board President recognizes a member of the public for oral comment, such comment shall be three (3) minutes or less, at the discretion of the Board President. We would like a calm presentation so that the importance of what you are presenting is not overshadowed by the manner of the presentation.

7. Consent Items **4:20 p.m.**

   A. Regular Meeting Minutes of September 17, 2026

   B. Special Meeting Minutes of September 23, 2026

   BOARD ACTION: _____

8. Adjournment to Closed Session **4:25 p.m.**

   A. <u>CONFERENCE WITH LABOR NEGOTIATORS</u>
   (Government Code § 54957.6): The Board will meet with the CEO, Interim General Counsel, and District Negotiation Team members to discuss negotiations. Agency designated representatives: Dr. Ida Lopez Chan, David G. Ritchie, Charisma Amador. Employee organization: SEIU 2015

B. <u>CONFERENCE WITH LEGAL COUNSEL</u>
Conference with Legal Counsel – Existing Litigation pursuant to Government Code (§ 54956.9)
Name of Case: (SUSAN PHAN vs. SOLEDAD COMMUNITY HEALTH CARE DISTRICT FOUNDATION et. al.)

C. <u>CONFERENCE WITH LEGAL COUNSEL – ANTICIPATED LITIGATION</u> (Significant exposure to litigation pursuant to Gov't. Code § 54956.9(d)(2) or (3).) The Board will meet with the CEO and General Counsel to discuss anticipated litigation. Number of potential cases: (1)

D. <u>PUBLIC EMPLOYEE PERFORMANCE EVALUATION</u>
(Government Code §54957(b)) Title: (Specify position title of employee being reviewed):
<u>Dr. Ida Lopez Chan, Chief Executive Officer</u>
Public Employee Performance Evaluation (Government Code §54957(b)) Title: (CEO)
Conference with Labor Negotiator (Government Code §54957.6) Agency designated representative: (Specify name of designated representatives attending the closed session):
_____

Employee organization: (Specify name of organization representing employee or employees in question): _____, OR

Unrepresented employee: (Specify position title of unrepresented employee who is the subject of the negotiations): **<u>Dr. Ida Lopez Chan</u>**

9. Return to Open Session: Report from Closed Session **5:25 p.m.**

10. Peer Review Policy – Charisma Amador/Dr. Ida Lopez Chan **5:30 p.m.**

BOARD ACTION: _____

11. Treasurer's Report –
    A. Review of Operating Entities and the District, Mr. Brent Green, CPA **5:35 p.m.**
    Financial Statements (*Board will consider the approval of the Treasurer's Report*)

BOARD ACTION: _____

12. Monthly Budget Review – 2026-2027 **5:50 p.m.**

13. Consideration and Approval of the 2027 Board of Directors Regular Meeting Schedule – Dr. Ida Lopez Chan **5:55 p.m.**

BOARD ACTION: _____

14. Consideration and Approval of Proposed Room Rate Increases **6:00 p.m.**

BOARD ACTION: _____

15. Regular Staff Reports – **6:05 p.m.**
    A. Director of Communications – Adriana Gonzalez
    B. Foundation – Rosemary Guidotti
    C. Director of Integrated Client Services – Brian Weaver
    D. District CEO Report – Dr. Ida Lopez Chan

16. Adjournment to the next meeting
    Regular District Board Meeting – Thursday, November 19, 2026 at 4:00 P.M.

Note: Requests for a disability related modification or accommodation, including auxiliary aids or services, in order to attend or participate in a meeting should be made to the District Recording Secretary during regular business hours at 831-678-2462. Notification received 48 hours before the meeting will enable the district to make reasonable accommodations. Open session meeting materials provided to the Board of Directors after the agenda packets are distributed are available at the office of the Recording Secretary located at 612 Main Street, Soledad, California.

Soledad Community Health Care District
Regular Meeting of the Board of Directors
September 17, 2026 @ 4:00 p.m.

MINUTES

1. **Call to order at 4:00 p.m. by President, Graig Stephens**

2. **Board of Directors Roll Call.**

Directors Present: Vice President, Anne Trebino
Secretary, Rosemary Guidotti
Treasurer, Ken Klemme
Board Member, Francisco Barajas
President, Graig Stephens

Directors Absent: None

Staff Present: CEO, Ida Lopez Chan
District Recording Secretary, Sophie Piña
Director of Communications, Adrianna Gonzalez
Business Office Clerk, Maria Estrada
Administrator, Brian Weaver

District CPA: Brent Green

We have a Quorum

3. **Pledge of Allegiance:** Graig Stephens

4. **Mission Statement:** Rosemary Guidotti

5. **President's Welcome:** Graig Stephens welcomed everyone to the meeting.

6. **Public Comment –** None

7. **Consent Agenda -**

Motion: The board motioned to approve Consent Items, A, B & C.

A. Regular Meeting Minutes of August 20, 2026

B. Consideration and potential approval of a lease agreement (5 years) for (3) printers with Smile Business Products, Inc., in an amount not to exceed a total of $4,567.20.

C. Consideration and potential approval of switching cellphone and fax carrier from AT&T to Verizon, in an amount not to exceed $20 plus tax per month.

M/S: Trebino/Klemme
Ayes: Trebino, Guidotti, Klemme, Barajas, Stephens
Nays:
Abstain:
Absent:
Motion: Passed

8. **Soledad Community Health Care District Deferred Compensation Plans – Ericka Skeldon, Senior Principal, Executive Director Fiduciary Consulting Group at Morgan Stanley -** Ericka Skeldon of Fiduciary Consulting Group provided an overview of the district's retirement plans, including the 457, 401A, and transitioning 403B plans. The presentation covered investment performance, asset allocation, cash flow, fees, and fiduciary oversight. For the 457 plans, the reported rate of return was 10.57% for the second quarter of 2026, 8.0% year-to-date through June 30, 2026, and 16.65% for the prior 12-month period. The Board discussed participant-directed investments, target-date funds, and the availability of Nationwide representatives to assist employees with investment and retirement planning. The Board was informed that the 403B plan is being closed out and remaining assets have been transferred to the plan administrator.

9. **Adjournment to Closed Session –**

   A. **CONFERENCE WITH LABOR NEGOTIATORS**
   (Government Code § 54957.6): The Board will meet with the CEO, Interim General Counsel, and District Negotiation Team members to discuss negotiations. Agency designated representatives: Dr. Ida Lopez Chan, David G. Ritchie, Charisma Amador. Employee organization: SEIU 2015

   B. **CONFERENCE WITH LEGAL COUNSEL – ANTICIPATED LITIGATION**
   (Significant exposure to litigation pursuant to Gov't. Code § 54956.9(d)(2) or (3).)
   The Board will meet with the CEO and General Counsel to discuss anticipated litigation.
   Number of potential cases: (1)

   C. **PUBLIC EMPLOYEE PERFORMANCE EVALUATION**
   (Government Code §54957(b)) Title: (Specify position title of employee being reviewed):
   Dr. Ida Lopez Chan, Chief Executive Officer

10. **Return to Open Session and report out from closed session, if any –** There was no reportable action taken in closed session. The Board discussed future CEO compensation, including potential cost-of-living adjustments and performance-based compensation. The Board expressed appreciation for the CEO's performance and discussed establishing a consistent, ongoing compensation structure tied to defined financial and performance measures. Legal counsel advised that compensation changes must be placed on a properly agendized item before the Board can take action. Staff and legal counsel will work

with the Board Chair and CEO to develop potential contract amendments and compensation options for consideration at the next regular Board meeting.

11. **Treasurer's Report –**

Motion: The board approved the Financial Statements for review for Operating Entities and the District.
M/S: Barajas/Klemme
Ayes: Trebino, Guidotti, Klemme, Barajas, Stephens
Nays:
Abstain:
Absent:
Motion: Passed

12. **Monthly Budget Review – 2026-2027 –** The board discussed and reviewed.

13. **Regular Staff Reports –**

Director of Communications – The board received Adriana's communication report. The mammography screening event had 23 participants. The next mammography event is scheduled for October 1, 2026.

Foundation – The Foundation was accepted to participate in MC Gives again this year. One of the available billboards has been rented to See Monterey.

Eden Valley – Brian reported continued improvement in the Medicare and managed-care skilled payer mix. Discussions are underway with Kaiser and Health Net regarding potential contracts that could increase the average daily skilled census. Eden Valley continues to address staffing needs and work toward increasing census. Recent state complaint visits resulted in no deficiencies for three previously pending complaints. A new complaint visit occurred during the week, with results pending. The facility continues to operate with a CMS four-star rating.

Soledad Medical Clinic – Brian reported that clinic visits were reduced as part of the district strategy to improve the PPS reimbursement rate. Management continues to monitor provider visit volumes and reimbursement opportunities.

CEO – Ida discussed continued efforts to address the district's outstanding loans and financing options. Ida reported that the current lender has identified a debt-service-coverage issue, which has made refinancing more challenging. Alternative funding sources and potential partnerships are being explored, including possible grant funding, county support, and leasing opportunities for the Women's Health Center. The Board also discussed cost-saving measures, including changes to the telephone system that are expected to save approximately $12,000 annually. Ida reported continued work on a comprehensive, District-wide emergency preparedness plan. The plan is being developed in coordination with local community partners. An all-staff meeting is scheduled to review the plan and conduct a walkthrough of emergency procedures.

Meeting Adjourned at 6:17 p.m. – The board will reconvene on October 29, 2026, for a Regular District Board Meeting at 4:00p.m.

Prepared By: _____
Sophie Piña, District Board Secretary

Approved By: _____
Graig Stephens, Board President

Soledad Community Health Care District
Special Meeting of the Board of Directors
September 23, 2026 @ 4:00 p.m.

MINUTES

1. **Call to order at 4:10 p.m. by President, Graig Stephens**

2. **Board of Directors Roll Call.**

Directors Present: Vice President, Anne Trebino
Secretary, Rosemary Guidotti
Treasurer, Ken Klemme
Board Member, Francisco Barajas
President, Graig Stephens

Directors Absent: None

Staff Present: CEO, Ida Lopez Chan
District Recording Secretary, Sophie Piña
Human Resources Administrator, Charisma Amador
Business Office Clerk, Maria Estrada

District CPA: Brent Green

We have a Quorum

3. **Pledge of Allegiance:** Graig Stephens

4. **Mission Statement:** Rosemary Guidotti

5. **President's Welcome:** Graig Stephens welcomed everyone to the meeting.

6. **Public Comment –** None

7. **Adjournment to Closed Session –**

   A. **CONFERENCE WITH LEGAL COUNSEL**
   Conference with Legal Counsel – Existing Litigation pursuant to Government Code (§ 54956.9) Name of Case: (SUSAN PHAN vs. SOLEDAD COMMUNITY HEALTH CARE DISTRICT FOUNDATION et. al.)

   B. **PUBLIC EMPLOYEE PERFORMANCE EVALUATION**
   (Government Code §54957(b)) Title: (Specify position title of employee being reviewed):
   Dr. Ida Lopez Chan, Chief Executive Officer

8. **Return to Open Session and report out from closed session, if any –** There was no reportable action taken in closed session.

9. **Meeting Adjourned at 5:54 p.m.** – The board will reconvene on October 29, 2026, for a Regular District Board Meeting at 4:00p.m.

Prepared By: _____
Sophie Piña, District Board Secretary

Approved By: _____
Graig Stephens, Board President

Soledad Community Health Care District

Balance Sheet

As of September 30, 2026

	30-Sep-26	30-Sep-25	Variance
Assets			
Current Assets			
Cash & Cash Equivalents	947,679	3,004,411	(2,056,732)
Assets Limited as to Use - Current	105	3,189	(3,084)
Patient Accounts Receivable - Net	1,752,175	1,657,717	94,458
Other Receivables	63,829	56,607	7,222
Inventories	113,948	109,573	4,375
Prepaid Expenses & Deposits	190,108	245,867	(55,759)
	3,067,844	5,077,364	(2,009,520)
Fixed Assets:			
Buildings & Improvements	10,888,154	10,888,154	-
Equipment	3,180,917	3,027,243	153,674
	14,069,071	13,915,397	153,674
Accum Depr	(9,349,348)	(8,931,514)	(417,834)
	4,719,723	4,983,883	(264,160)
Total Assets	**7,787,567**	**10,061,247**	**(2,273,680)**
Liabilities:			
Current Liabilities:			
Accounts Payable	283,525	370,494	(86,969)
Accrued Payroll & Benefits	576,171	523,720	52,451
Deferred Revenue	-	90,875	
West Coast Community Bank - Line of Credit	-	250,000	
Current Portion - Third Party Settlement	507,805	3,634,790	(3,126,985)
Current Portion - Long-term Debt	357,787	365,208	(7,421)
	1,725,288	5,235,087	(3,168,924)
Long-Term Debt	6,713,204	4,098,030	2,615,174
Total Liabilities	**8,438,492**	**9,333,117**	**(553,750)**
Net Assets (Assets Minus Liabilities)	**(650,925)**	**728,130**	**(1,379,055)**
Summary of Net Assets			
Beginning of Year - July 1st	(149,088)	1,055,407	
Increase <Decrease> in Net Assets	(501,837)	(327,277)	
End of Period	**(650,925)**	**728,130**	
Number of Days of Cash on Hand	**22.23**	**70.46**	

Soledad Community Health Care District

Statement of Revenues, Expenses, and Changes in Net Assets

For the Three Months Ended: September 30, 2026

	30-Sep-26	30-Sep-25	Variance
Operating Revenues:			
Medical Services	3,118,948	3,450,088	(331,140)
Other Operating Revenues	5,475	64,902	(59,427)
	3,124,423	3,514,990	(390,567)
Operating Expenses:			
Salaries & Wages	1,864,173	1,870,670	(6,497)
Professional Fees	672,478	632,903	39,575
Employee Benefits	338,178	432,185	(94,007)
Supplies	291,232	404,364	(113,132)
Utilities	102,045	108,945	(6,900)
Other Operating Expenses	70,748	76,759	(6,011)
Insurance	72,377	69,098	3,279
Purchased Services	50,389	85,704	(35,315)
Rents and Leases	14,229	11,585	2,644
	3,475,849	3,692,213	(216,364)
Operating Income <Loss> Before Depreciation	(351,426)	(177,223)	(174,203)
Less Depreciation	(84,456)	(108,522)	24,066
Operating Income <Loss> After Depreciation	(435,882)	(285,745)	(150,137)
Non-Operating Revenues <Expenses>			
District Property Tax Revenues	193	-	193
Grants & Contributions	9,195	-	9,195
Investment Income	11,061	10,174	887
Interest Expense	(86,404)	(51,706)	(34,698)
	(65,955)	(41,532)	(24,423)
Increase <Decrease> in Net Assets	**(501,837)**	**(327,277)**	**(174,560)**
Summary of Income by Operation			
Eden Valley Care Center	74,440	149,454	(75,014)
Clinic & Women's Health Center	(463,018)	(12,448)	(450,570)
District	(113,259)	(464,283)	351,024
	(501,837)	**(327,277)**	**(174,560)**
Other Items:			
Salaries to Gross Revenues	59.77%	54.22%	
Professional Fees to Gross Revenues	21.56%	18.34%	

Soledad Community Health Care District

Account Summaries

Description	30-Sep-26	30-Sep-25	Variance
Cash & Cash Equivalents:			
West Coast Community Bank	789,313	1,597,473	(808,160)
Mechanics Bank	128,787	364,366	(235,579)
US Bank	4,792	11,555	(6,763)
LAIF	18,506	17,766	740
Petty Cash	6,281	6,281	-
Pacific Valley Bank	-	1,006,970	(1,006,970)
Totals	**947,679**	**3,004,411**	**(2,056,732)**
Accounts Receivable			
Eden Valley - Net	1,455,111	1,302,159	152,952
Clinic - Net	297,064	355,558	(58,494)
Totals	**1,752,175**	**1,657,717**	**94,458**
Summary of Income by Month			
July	77,215	(169,563)	
August	(274,475)	(51,932)	
September	(304,577)	(105,782)	
October			
November			
December			
January			
February			
March			
April			
May			
June			
Totals	**(501,837)**	**(327,277)**	**(174,560)**
Grants Received		-	
	(501,837)	**(327,277)**	
Gross Revenues by Type			
Medical Clinic	1,177,739	37.76%	
Medi-Cal	1,105,378	35.44%	56.94%
Medicare	605,691	19.42%	31.20%
Other	228,240	7.32%	11.76%
Private	1,900	0.06%	0.10%
	3,118,948	100.00%	100.00%

Soledad Community Health Care District

Account Summaries

Eden Valley Care Center by Dept	30-Sep-26	30-Sep-25	Variance
Revenues - Net			
Medi-Cal	1,105,378	1,172,744	(67,366)
Medicare	605,691	554,433	51,258
Other Insurance	228,240	269,015	(40,775)
Private	1,900	30,375	(28,475)
Other Income	6,121	61,325	(55,204)
	1,947,330	2,087,892	(140,562)
Expenses:			
Medicare Certified Unit	833,387	808,328	25,059
General Administration	203,255	195,084	8,171
Dietary	156,885	187,906	(31,021)
Physical, Occupational & Speech Therapy	143,122	142,735	387
Employee Benefits	125,465	165,713	(40,248)
Activities, Education & Soda Shop	91,069	103,799	(12,730)
Housekeeping and Laundry	77,019	89,688	(12,669)
Plant Operations & Maintenance	73,462	85,998	(12,536)
Taxes, Insurance, Depreciation, Interest	61,063	46,005	15,058
Medical Records, Central Supply, Pharmacy	57,973	53,769	4,204
Nursing Administration	50,190	59,413	(9,223)
	1,872,890	1,938,438	(65,548)
Net Income <Loss>	**74,440**	**149,454**	**(75,014)**

Eden Valley Care Center by Type	30-Sep-26	30-Sep-25	Variance
Revenues - Net			
Medi-Cal	1,105,378	1,172,744	(67,366)
Medicare	605,691	554,433	51,258
Other Insurance	228,240	269,015	(40,775)
Private	1,900	30,375	(28,475)
Other Income	6,121	61,325	(55,204)
	1,947,330	2,087,892	(140,562)
Expenses:			
Salaries	1,221,002	1,192,683	28,319
Benefits	218,134	259,375	(41,241)
Supplies	146,091	169,578	(23,487)
Professional Fees	103,530	123,334	(19,804)
Utilities	69,207	75,448	(6,241)
Insurance	47,168	31,636	15,532
Other Operating Expenses	31,200	37,064	(5,864)
Purchased Services	26,112	38,286	(12,174)
Depreciation	10,446	11,034	(588)
	1,872,890	1,938,438	(65,548)
Net Income <Loss>	**74,440**	**149,454**	**(75,014)**

Soledad Community Health Care District

Account Summaries

Soledad Medical Clinic / Women's Health Center	30-Sep-26	30-Sep-25	Variance
Revenues - Net			
Gross Revenues	1,177,739	1,423,521	(245,782)
Other Revenues	4,638	5,518	(880)
	1,182,377	1,429,039	(246,662)
Expenses:			
Salaries	611,165	404,946	206,219
Professional Fees	300,666	216,380	84,286
Doctors	223,059	248,977	(25,918)
Supplies	143,803	230,092	(86,289)
Employee Benefits	105,133	94,934	10,199
Interest Expense	86,404	51,706	34,698
Depreciation	74,010	97,488	(23,478)
Utilities	32,838	33,497	(659)
Other Operating Expenses	28,948	23,890	5,058
Purchased Services	21,648	30,021	(8,373)
Insurance	17,721	9,556	8,165
	1,645,395	1,441,487	203,908
Net Income <Loss>	**(463,018)**	**(12,448)**	**(450,570)**

Soledad Community Health Care District	30-Sep-26	30-Sep-25	Variance
Revenues - Net			
Property Tax Revenues	193	-	193
Other Revenues	14,972	8,233	6,739
	15,165	8,233	6,932
Expenses:			
Salaries	32,006	273,041	(241,035)
Professional Fees	45,223	42,944	2,279
Other Operating Expenses	24,829	27,390	(2,561)
Employee Benefits	14,910	77,876	(62,966)
Insurance	7,488	27,906	(20,418)
Purchased Services	2,629	18,665	(16,036)
Supplies	1,339	4,694	(3,355)
	128,424	472,516	(344,092)
Net Income <Loss>	**(113,259)**	**(464,283)**	**351,024**

Soledad Community Health Care District

Account Summaries

Summary of Income by Month	September	July - Aug	Total
Eden Valley Care Center	39,817	45,069	84,886
Soledad Medical Clinic / Women's Health Center	(282,495)	(106,513)	(389,008)
District	(33,743)	(79,516)	(113,259)
Sub-Total	(276,421)	(140,960)	(417,381)
Depreciation	(28,156)	(56,300)	(84,456)
Totals	**(304,577)**	**(197,260)**	**(501,837)**

Summary of Professional Services:

	Eden Valley	Clinic	District
Healthcare Medical Billing & Financial	36,300		
ADP - Payroll Processing	17,085	8,095	
Medical Director	16,500		
Point Click Care	8,669		
Dietary Consultant	7,910		
Inovalon	5,069		
Pharmacy Consultant	4,592		
Net Health System Inc.	2,104		
Wellsky	1,710		
Cloud @ Work	1,043	1,043	
Miscellaneous	976	737	97
Beyond Limits	934	935	
Dimension Funding	638	812	639
Natividad Medical Center		91,800	
Athena		91,030	
JWT - Audit		61,000	
Healthcare Management Strategies		37,615	
Central Valley Imaging		7,599	
Legal Expense			40,887
Wulff, Hansen & co.			3,600
	103,530	**300,666**	**45,223**

Soledad Community Health Care District

Account Summaries

Summary of Cash Flows:

Cash Flows for the Fiscal Period Ended: September 30, 2026

Increase <Decrease> in Net Assets		(501,837)
Add:	Depreciation	84,456
	Increase in Accounts Payable	43,929
Less:	Decrease in Accrued Payroll	(16,755)
	Increase in Prepaid Expenses	(20,162)
	Payment of Long-Term Debt	(87,216)
	Increase in Accounts Receivable	(207,896)
	Payrment of Third Party Settlements	(121,509)
Increase <Decrease> in Cash		**(826,990)**

SOLEDAD COMMUNITY HEALTH CARE DISTRICT

Budget to Actual Summary

Operating Budget FY 2026-2027

	Eden Valley Actual YTD	Clinic Actual YTD	District Actual YTD	Total Actual YTD	Total Budget YTD	Variance
Operational Revenues:						
Gross Patient Revenues	1,941,209	1,177,739	-	3,118,948	3,310,950	(192,002)
Other Operating Revenues	3,447	-	2,028	5,475	101,100	(95,625)
	1,944,656	**1,177,739**	**2,028**	**3,124,423**	**3,412,050**	**(287,627)**
Operational Expenditures:						
Salaries	1,221,002	611,165	32,006	1,864,173	1,773,815	(90,358)
Professional Fees	103,530	523,725	45,223	672,478	635,405	(37,073)
Supplies	146,091	143,803	1,339	291,233	292,735	1,502
Employee Benefits	218,134	105,133	14,910	338,177	319,800	(18,377)
Utilities	69,207	32,838	-	102,045	102,500	455
Insurance & Taxes	50,617	29,526	7,488	87,631	79,125	(8,506)
Purchased Services	26,112	21,648	2,629	50,389	64,045	13,656
Other Operating Expenses	25,612	15,477	14,405	55,494	51,325	(4,169)
Rents & Leases	2,139	1,666	10,424	14,229	11,800	(2,429)
	1,862,444	**1,484,981**	**128,424**	**3,475,849**	**3,330,550**	**(145,299)**
Gross Margin	**82,212**	**(307,242)**	**(126,396)**	**(351,426)**	**81,500**	**(432,926)**
General & Administrative						
Allocation of District Expenditures	77,054	51,370	(128,424)	-	-	-
Depreciation	10,446	74,010	-	84,456	81,325	(3,131)
Total General & Administrative	**87,500**	**125,380**	**(128,424)**	**84,456**	**81,325**	**(3,131)**
Net Margin	**(5,288)**	**(432,622)**	**2,028**	**(435,882)**	**175**	**(436,057)**
Other Income <Expenditure>						
Property Tax Revenues	-	-	193	193	-	193
Grants and Contributions	2,674	1,049	5,472	9,195	5,625	3,570
Investment Income	-	3,589	7,472	11,061	7,460	3,601
Interest Expense	-	(86,404)	-	(86,404)	(80,095)	(6,309)
	2,674	**(81,766)**	**13,137**	**(65,955)**	**(67,010)**	**1,055**
Net Surplus <Deficit>	**(2,614)**	**(514,388)**	**15,165**	**(501,837)**	**(66,835)**	**(435,002)**

Summary of Net Surplus <Deficit>

	Eden Valley Actual YTD	Clinic Actual YTD	District Actual YTD	Total Actual YTD
Per Budget	(29,460)	(49,110)	11,735	(66,835)
Actual	(2,614)	(514,388)	15,165	(501,837)
Variance - Positive <Negative>	**26,846**	**(465,278)**	**3,430**	**(435,002)**

SOLEDAD COMMUNITY HEALTH CARE DISTRICT

Eden Valley Care Center - Budget to Actual

Operating Budget FY 2026-2027 — **September 30, 2026**

	Eden Valley Care Center	3 Months Budget YTD	3 Months Actual YTD	Variance
Operational Revenues:				
Gross Patient Revenues	7,825,200	1,956,300	1,941,209	(15,091)
Other Operating Revenues	119,400	29,850	3,447	(26,403)
	7,944,600	**1,986,150**	**1,944,656**	**(41,494)**
Operational Expenditures:				
Salaries	4,575,665	1,143,915	1,221,002	(77,087)
Employee Benefits	814,640	203,660	218,134	(14,474)
Supplies	608,935	152,235	146,091	6,144
Professional Fees	459,000	114,750	103,530	11,220
Utilities	280,000	70,000	69,207	793
Other Operating Expenses	110,830	27,710	25,612	2,098
Insurance & Taxes	112,500	28,125	50,617	(22,492)
Purchased Services	112,780	28,195	26,112	2,083
Rents & Leases	16,000	4,000	2,139	1,861
	7,090,350	**1,772,590**	**1,862,444**	**(89,854)**
Gross Margin	**854,250**	**213,560**	**82,212**	**(131,348)**
General & Administrative				
Allocation of District Expenditures	940,170	235,045	77,054	157,991
Depreciation	41,900	10,475	10,446	29
Total General & Administrative	**982,070**	**245,520**	**87,500**	**158,020**
Net Margin	**(127,820)**	**(31,960)**	**(5,288)**	**26,672**
Other Income <Expenditure>				
Grants and Contributions	10,000	2,500	2,674	174
Investment Income	-	-		-
	10,000	**2,500**	**2,674**	**174**
Net Surplus <Deficit>	**(117,820)**	**(29,460)**	**(2,614)**	**26,846**

SOLEDAD COMMUNITY HEALTH CARE DISTRICT

Medical Clinic - Budget to Actual

Operating Budget FY 2026-2027 **September 30, 2026**

	Medical Clinic Womens Health	3 Months Budget YTD	3 Months Actual YTD	Variance
Operational Revenues:				
Gross Patient Revenues	5,418,600	1,354,650	1,177,739	(176,911)
Other Operating Revenues	273,000	68,250	-	(68,250)
	5,691,600	**1,422,900**	**1,177,739**	**(245,161)**
Operational Expenditures:				
Professional Fees	1,869,620	467,405	523,725	(56,320)
Salaries	1,629,645	407,410	611,165	(203,755)
Supplies	548,350	137,090	143,803	(6,713)
Employee Benefits	285,970	71,490	105,133	(33,643)
Utilities	130,000	32,500	32,838	(338)
Purchased Services	84,600	21,150	21,648	(498)
Insurance & Taxes	64,000	16,000	29,526	(13,526)
Other Operating Expenses	45,500	11,375	15,477	(4,102)
Rents & Leases	7,200	1,800	1,666	134
	4,664,885	**1,166,220**	**1,484,981**	**(318,761)**
Gross Margin	**1,026,715**	**256,680**	**(307,242)**	**(563,922)**
General & Administrative				
Allocation of District Expenditures	626,780	156,695	51,370	105,325
Depreciation	283,400	70,850	74,010	(3,160)
Total General & Administrative	**910,180**	**227,545**	**125,380**	**102,165**
Net Margin	**116,535**	**29,135**	**(432,622)**	**(461,757)**
Other Income <Expenditure>				
Grants and Contributions	5,000	1,250	1,049	(201)
Investment Income	2,400	600	3,589	2,989
Interest Expense	(320,380)	(80,095)	(86,404)	(6,309)
	(312,980)	**(78,245)**	**(81,766)**	**(3,521)**
Net Surplus <Deficit>	**(196,445)**	**(49,110)**	**(514,388)**	**(465,278)**

SOLEDAD COMMUNITY HEALTH CARE DISTRICT

District - Budget to Actual

Operating Budget FY 2026-2027 — **September 30, 2026**

	District	3 Months Budget YTD	3 Months Actual YTD	Variance
Operational Revenues:				
Gross Patient Revenues	-	-	-	-
Contractual Adjustments	-	-	-	-
Other Operating Revenues	12,000	3,000	2,028	(972)
	12,000	**3,000**	**2,028**	**(972)**
General & Administrative (District)				
Salaries	889,960	222,490	32,006	190,484
Employee Benefits	178,590	44,650	14,910	29,740
Professional Fees	213,000	53,250	45,223	8,027
Insurance	140,000	35,000	7,488	27,512
Purchased Services	58,800	14,700	2,629	12,071
Other Expenses	48,950	12,240	14,405	(2,165)
Rents & Leases	24,000	6,000	10,424	(4,424)
Supplies	13,650	3,410	1,339	2,071
	1,566,950	**391,740**	**128,424**	**263,316**
Gross Margin	**(1,554,950)**	**(388,740)**	**(126,396)**	**262,344**
General & Administrative				
Allocation of District Expenditures	(1,566,950)	(391,740)	(128,424)	(263,316)
Depreciation	-	-	-	-
Total General & Administrative	**(1,566,950)**	**(391,740)**	**(128,424)**	**(263,316)**
Net Margin	**12,000**	**3,000**	**2,028**	**(972)**
Other Income <Expenditure>				
Property Taxes	470,000	-	193	193
Grants and Contributions	7,500	1,875	5,472	3,597
Investment Income	27,450	6,860	7,472	612
	504,950	**8,735**	**13,137**	**4,402**
Net Surplus <Deficit>	**516,950**	**11,735**	**15,165**	**3,430**

Soledad Community
HEALTH CARE DISTRICT

NOTICE OF REJECTION OF CLAIM

Merla Cabot Liao
C/O Dominic Mendoza, Esq.
D. Mendoza Law
1411 Rimpau Ave. Suite 202
Corona, CA 92879

Dear Merla Cabot Liao:

NOTICE IS HEREBY GIVEN that the claim which you presented to the Board of Directors or an officer of this healthcare district on October 29, 2026 was REJECTED

_____ by Board action

_____ by operation of law

on October 29, 2026.

WARNING

Subject to certain exceptions, you have only six (6) months from the date this notice was personally delivered or deposited in the mail to file a State court action on this claim. See Government Code Section 945.6.

You may seek the advice of an attorney of your choice in connection with this matter. If you desire to consult an attorney, you should do so immediately.

NOTE

If you file a court action in this matter and a court concludes that your action is not based on good faith, this Hospital intends to seek attorney's fees and all of its expenses incurred in defending the action as permitted by California law, including but not limited to Code of Civil Procedures §1038. We encourage you to seek legal advice promptly to determine whether your claim has merit.

Dated: October 29, 2026

By: _____
(signature)

Graig Stephens
(name)

Board President
(title)

Soledad Community
HEALTH CARE DISTRICT

BOARD OF DIRECTORS

2027 MEETING SCHEDULE

REGULAR BOARD MEETINGS • THURSDAYS AT 4:00 P.M.

MONTH	MEETING DATE	SCHEDULE
January	January 28	4th Thursday
February	February 25	4th Thursday
March	March 25	4th Thursday
April	April 22	4th Thursday
May	May 27	4th Thursday
June	June 24	4th Thursday
July	July 22	4th Thursday
August	August 19	**3rd Thursday**
September	September 23	4th Thursday
October	October 28	4th Thursday
November	November 18	**3rd Thursday — Before Thanksgiving**
December	—	**In Recess**

Approved by the Board of Directors on 10/28/26

Meeting dates are subject to change.

Eden Valley Care Center

Soledad Community HEALTH CARE DISTRICT
Since 1948
Here to Serve Your Needs

Brian Weaver
Administrator

Mayra Jenkins
Director of Nursing

Hoang T. Pham, MD
Medical Director

Dr. Ida Lopez Chan
CEO

Member, Association of California Health Care Districts

Member, California Special District Association

Member, National Association of Rural Health Clinics

October 29, 2026

RE: Room Rate Increase Effective 1/1/2027

Dear _____,

At Eden Valley Care Center, we pride ourselves in providing the highest quality of care to all of our residents.

On October 29, 2026 Eden Valley initiated a review of our financial status and price practices to ensure that we are doing everything possible to be fiscally responsible so that we may continue to provide healthcare services to the Soledad community and surrounding areas, presently and well into the future.

As a result, effective 1/1/2027, the daily rates will increase. The two-bed daily rate will increase to $575.00 per day and the single bed rate will increase to $604.00 per day. In our analysis, we surveyed other skilled nursing facilities in our area and found that the increases being made will bring our rates closer to the average rates.

In all of this be rest assured that our greatest and most important endeavor is to continue providing high quality care to your loved one.

Please feel free to contact me should you have any questions.

Sincerely,

Dr. Ida Lopez Chan,
Chief Executive Officer

CC: Board of Directors

Eden Valley Care Center — Daily Room Rate Comparison

Room Type	2023 Daily Rate	2024 Daily Rate	2025 Daily Rate	2023–2024 Increase	2024–2025 Increase	Overall 2023–2025
Two-Bed Room	$425	$450	$475	**$25 / 5.88%**	**$25 / 5.56%**	**$50 / 11.76%**
Single-Bed Room	$455	$480	$504	**$25 / 5.49%**	**$24 / 5.00%**	**$49 / 10.77%**

Section 4000 – Board
POLICY TITLE: Peer Review
POLICY NUMBER: 4215

SOLEDAD COMMUNITY HEALTH CARE DISTRICT
Peer Review Policy

Background and Purpose

Definitions

The purpose of this policy is to establish a consistent and legally compliant process for evaluating physician clinical performance, reviewing concerns regarding professional competence or conduct, protecting patients, and identifying and completing mandatory reporting obligations.

This policy establishes requirements for:

1. Routine and focused physician peer review.
2. Investigation and escalation of significant clinical concerns.
3. Documentation and oversight of professional review actions.
4. Determination and timely submission of required reports to the National Practitioner Data Bank (NPDB), the Medical Board of California, and other applicable licensing or regulatory authorities.
5. Oversight of employed and contracted physicians providing services in District-operated outpatient and skilled nursing settings.

The District shall implement this policy in conjunction with applicable California law, federal law, facility licensing and certification requirements, contractual arrangements, and governing documents.

Policy/Protocols

Soledad Community Health Care District (the District) is committed to safe, effective, and high-quality patient care.

The District shall maintain a documented physician peer review process that is objective, clinically appropriate, confidential to the extent permitted by law, and consistently applied.

Peer review shall support quality improvement and professional accountability. It shall also provide a structured process for identifying matters that require formal investigation, protective action, or mandatory reporting.

No physician may avoid a required reporting obligation by resigning, voluntarily relinquishing privileges, accepting a restriction, entering into an informal agreement, or having an action characterized as administrative or non-disciplinary when applicable law requires reporting.

The District shall not submit the policy itself to the NPDB for approval. The NPDB is a reporting system; the District shall submit qualifying reports when required by law.

Scope

This policy applies, as legally applicable, to physicians holding an MD or DO license who provide services through the District, including:

- Soledad Medical Clinic and other District-operated outpatient clinics.
- Eden Valley Care Center and other District-operated skilled nursing services.
- Other District-operated clinical programs and facilities.

The policy applies to District-employed physicians and physicians providing services under independent contractor agreements, professional services agreements, staffing arrangements, or other contractual relationships.

The applicable review process shall be determined by the nature of the physician's relationship with the District, the facility's authority over the physician, applicable credentialing and privileging arrangements, and governing law.

This policy does not independently create clinical privileges, establish a medical staff, or authorize the District to impose restrictions or disciplinary action beyond its legal and contractual authority.

Where separate facility-specific requirements apply, the District shall adopt supplemental procedures or policies consistent with this policy and applicable law.

Definitions

Peer Review: A structured evaluation of a physician's qualifications, clinical performance, medical outcomes, professional conduct, or other matters within the scope of applicable peer review law.

Routine Peer Review: A regularly scheduled evaluation using established clinical measures and consistent review criteria to identify trends and opportunities for improvement.

Ongoing Professional Practice Evaluation (OPPE): Periodic monitoring of professional practice data, where applicable to the facility's credentialing and privileging framework.

Focused Professional Practice Evaluation (FPPE): A targeted evaluation of a physician's performance when additional assessment is required, including upon granting privileges where applicable or when a specific concern has been identified.

Formal Investigation: An investigation conducted by an authorized peer review body under applicable law and governing procedures. Whether an investigation has begun for reporting purposes depends on the applicable legal standard and actual circumstances, not solely on the label assigned to the activity.

Clinical Privileges: The authorization to provide specified clinical services within a facility, program, network, or other covered health care setting.

Adverse Professional Review Action: An action based on professional competence or professional conduct that adversely affects clinical privileges or other covered professional authorization and satisfies the applicable reporting criteria.

NPDB: The National Practitioner Data Bank, administered by the U.S. Department of Health and Human Services, which receives reports concerning qualifying adverse professional review actions and other reportable events.

California 805 Report: A report required under California Business and Professions Code Section 805 when specified professional review actions occur.

California 805.01 Report: A separate report required in specified circumstances following a formal investigation and a final decision or recommendation regarding proposed disciplinary action.

Governance and Authority

Board of Directors

The Board shall:

- Approve this policy and material amendments.
- Establish or approve the appropriate governance structure for physician peer review, consistent with its authority.
- Designate the official or body authorized to make professional review decisions.
- Receive reports concerning program effectiveness, compliance, and significant issues, subject to applicable confidentiality restrictions.
- Ensure that matters requiring Board action are considered under the District's governing documents and applicable law.

The Board's role shall be consistent with the District's legal status, facility licensing requirements, and the authority delegated to other officials or bodies.

Section 4000 – Board

Chief Executive Officer

The CEO or designee shall:

- Oversee implementation of this policy.
- Ensure that a qualified physician reviewer and appropriate administrative support are designated.
- Ensure that reporting responsibilities are assigned to identified individuals.
- Refer potential reportable actions for timely legal and compliance review.
- Ensure that appropriate procedures exist for maintaining records, tracking deadlines, and documenting completed reports.

Medical Director

The Medical Director or designated physician reviewer shall:

- Provide clinical oversight of routine peer review.
- Evaluate concerns involving clinical performance and patient safety.
- Ensure that reviewers have appropriate clinical qualifications.
- Recommend education, additional monitoring, focused evaluation, or formal investigation when warranted.
- Document clinical findings and recommendations.
- Refer matters requiring action beyond delegated authority to the authorized decision-making body.

Peer Review Committee

The District may establish a Peer Review Committee through an approved charter or other governing document.

Before the committee begins formal proceedings, the District shall define its membership, authority, procedures, conflict-of-interest rules, documentation requirements, and relationship to the Board and facility leadership.

The committee shall act only within its delegated authority.

Human Resources, Compliance

Designated administrative personnel shall support documentation, deadline tracking, records management, and coordination of applicable employment and compliance processes.

Human Resources shall not independently determine clinical competence or make clinical privilege decisions unless such authority is lawfully delegated and the individual is appropriately qualified.

Reporting responsibility shall be assigned to an authorized official and shall not depend solely on the availability of any one department or employee.

Routine Peer Review

Review Frequency

The District shall establish an annual physician peer review schedule, with additional review as needed based on clinical risk, regulatory requirements, facility-specific standards, or identified performance concerns.

Applicable OPPE and FPPE requirements shall be incorporated into the appropriate credentialing and privileging framework.

Case Selection

Cases may be selected through:

- Random or representative medical record sampling.
- Clinical quality indicators.
- Adverse events and patient safety reports.
- Patient complaints involving clinical care.
- Documentation audits.
- Utilization or prescribing concerns.
- Referral and follow-up patterns.
- Other approved quality assurance activities.

Review Criteria

As appropriate to the physician's specialty and practice setting, reviews may consider:

- Compliance with applicable standards of care.
- Assessment, diagnosis, and treatment planning.
- Medication management and prescribing practices.

- Documentation quality and timeliness.
- Appropriate testing, referrals, consultations, and follow-up.
- Patient safety events and preventable complications.
- Communication and coordination of care.
- Compliance with approved clinical protocols.
- Professional conduct relevant to patient care.
- Compliance with applicable scope-of-practice, credentialing, and privileging requirements.

Reviewers shall consider relevant clinical circumstances and available evidence. An adverse outcome alone shall not automatically establish substandard care.

Routine Review Findings

Findings may include:

1. Meets established expectations.
2. Opportunities for improvement.
3. Additional information or focused review required.
4. Referral for formal investigation or other authorized action.

Findings and recommendations shall be documented in the appropriate record.

Routine peer review shall remain distinct from formal investigation where required by law. The District shall not use routine review terminology to avoid an investigation or reporting obligation that has otherwise arisen.

Focused Review Escalation

A focused review shall be considered when credible information identifies a potential clinical performance concern requiring additional assessment.

The process shall include, as appropriate:

1. Documentation of the concern and date identified.
2. Assessment of immediate patient safety risks.
3. Referral to the Medical Director, designated physician reviewer, or authorized official.
4. Collection and review of relevant records and information.

5. Independent clinical review when appropriate.

6. An opportunity for the physician to provide relevant information, subject to applicable procedures.

7. Written findings and recommendations.

8. A determination regarding closure, additional monitoring, education, or referral for formal investigation.

When an issue may involve mandatory reporting, the matter shall be referred promptly to the designated reporting official and legal counsel.

The District shall not delay a required report while waiting for an internal review, hearing, appeal, or employment process to conclude.

Formal Investigation and Professional Review Action

Formal investigations shall be initiated and conducted only by an individual or body with appropriate authority under applicable law and approved governing documents.

A formal investigation may be appropriate when information raises substantial concerns regarding a physician's competence, professional conduct, or patient safety.

The investigation shall be conducted according to established procedures and may include:

- Written identification of the concerns.
- Review of relevant clinical records and supporting documentation.
- Interviews or written statements, as appropriate.
- Independent expert review.
- Physician responses and supporting information.
- Findings and recommendations.
- Documentation of decisions and their effective dates.

Any proposed restriction, suspension, revocation, denial, nonrenewal, or other adverse action shall be considered by the authorized decision-making body.

Interim protective action may be taken when necessary to protect patients, but only by an authorized individual or body and in accordance with applicable law and governing documents.

All potential actions shall be evaluated for reporting consequences before implementation whenever practicable. If a reporting deadline has already begun, the District shall take immediate steps to comply.

Section 4000 – Board

Physician Notice and Procedural Rights

The District shall provide physicians with notice and an opportunity to respond, appeal, or request a hearing when required by applicable law, facility requirements, contracts, bylaws, or other governing documents.

The applicable procedure shall identify:

- The nature of the concern or proposed action.
- The applicable response and hearing procedures.
- Relevant deadlines.
- The decision-making authority.
- Any available appeal rights.

Emergency protective measures may be implemented when legally authorized, subject to required subsequent review.

This policy does not independently create or eliminate rights established by law or contract.

NPDB Reporting Requirements

General Standard

The District shall determine whether it is an eligible reporting entity for the action at issue and whether the action meets the applicable NPDB reporting criteria.

The designated reporting official shall consult the current NPDB Guidebook and obtain legal review when reportability is uncertain.

Adverse Clinical Privileges Action

When applicable, the District shall report qualifying professional review actions involving physicians' clinical privileges, including actions that:

- Adversely affect clinical privileges for more than 30 days because of professional competence or professional conduct that adversely affects, or could adversely affect, patient health or welfare.
- Involve acceptance of a physician's surrender or restriction of clinical privileges while the physician is under investigation for possible professional incompetence or improper professional conduct.
- Involve surrender or restriction in return for not conducting an investigation or professional review proceeding that otherwise would be required to be reported.

Qualifying denials, nonrenewals, restrictions, and summary suspensions shall be evaluated under current NPDB requirements.

The District shall not assume that an action is nonreportable because it is described as administrative, precautionary, voluntary, temporary, or non-disciplinary.

Reporting Deadline

Qualifying adverse clinical privileges actions generally must be reported to the NPDB within 30 calendar days, as required by applicable federal law and regulations.

The reporting official shall calculate the deadline based on the applicable event and NPDB rules. The official shall not assume that an internal appeal or subsequent Board review automatically extends the deadline.

Surrender, Resignation, and Contract Termination

Any physician resignation, leave of absence, withdrawal of an application, surrender of privileges, contract termination, or nonrenewal occurring during a potential investigation shall be reviewed promptly.

The District shall evaluate the substance of the action, the physician's status, the nature of the investigation, and the applicable reporting criteria.

The District shall not enter into an agreement intended to circumvent a mandatory reporting requirement.

Contract termination or nonrenewal alone does not automatically trigger an NPDB clinical privileges report. The reporting determination must be based on the actual facts and applicable law.

NPDB Submission and Follow- Up

The designated official shall:

- Submit the required report through the NPDB's authorized reporting process.
- Verify the accuracy of the physician's identifying information and the action description.
- Retain submission confirmation and supporting documentation.
- Provide copies to state licensing authorities when required.
- Submit corrections, revisions, or void reports when required by the NPDB.
- Maintain documentation of the reporting determination and its legal basis.

Section 4000 – Board

The District shall maintain the organizational registration and authorized-user access necessary to submit reports, if the District qualifies as a reporting entity.

California Reporting Requirements

Business and Professions Code Section 805

The District shall separately evaluate whether an action requires a report under California Business and Professions Code Section 805.

Potential triggers include, as applicable:

- Denial or rejection of an application for staff privileges or membership for a medical disciplinary cause or reason.
- Termination or revocation of staff privileges, membership, or employment for a medical disciplinary cause or reason.
- Restrictions imposed or voluntarily accepted for a cumulative total of 30 days or more in a 12-month period for a medical disciplinary cause or reason.
- Resignation, leave of absence, or withdrawal or abandonment of an application for privileges or renewal after notice of a qualifying pending investigation.
- Summary suspension remaining in effect for more than 14 days.

A qualifying Section 805 report generally must be filed within 15 days of the applicable event. The District shall follow the current statutory language and official Medical Board reporting instructions.

Business and Professions Code Section 805.01

The District shall separately evaluate whether Section 805.01 applies when a formal investigation results in a final decision or recommendation regarding specified proposed disciplinary action.

Section 805.01 addresses specified allegations, including certain cases involving incompetence or gross or repeated deviation from the standard of care involving death or serious bodily injury, dangerous substance use, specified controlled-substance prescribing conduct, and sexual misconduct with a patient.

When applicable, the required report generally must be filed within 15 days after the qualifying final decision or recommendation. An 805.01 report does not replace an 805 report when the latter is also required.

The District shall refer potentially qualifying matters to legal counsel immediately to determine the required reporting pathway.

Section 4000 – Board

Responsible Reporting Official

The CEO shall designate the official or officials responsible for completing applicable state reports, consistent with statutory requirements.

The District shall maintain a primary reporting official and a backup, with access to current forms and filing instructions.

Separate Reporting Obligations

The NPDP and California reporting requirements shall be tracked independently.

A report submitted to one agency shall not be treated as satisfying an obligation to report to another agency unless the applicable law expressly provides otherwise.

Reporting Log and Compliance Audit

The District shall maintain a secure reporting log for all matters potentially subject to mandatory reporting.

The log shall include, as applicable:

- Physician name and license information.
- Facility and clinical setting.
- Employment or contractual relationship.
- Date the concern was identified.
- Date an inquiry or formal investigation began.
- Date and nature of any proposed or final action.
- Effective date of any restriction or suspension.
- Applicable NPDB reporting deadline.
- Applicable Section 805 or 805.01 deadline.
- Name of the responsible reporting official.
- Legal review or determination of reportability.
- Submission date and confirmation.
- Required follow-up, revision, or correction.

The District shall conduct periodic audits of the reporting log to identify missed deadlines, incomplete records, and opportunities for improvement.

Potentially reportable actions shall be escalated immediately rather than waiting for the next scheduled audit.

Confidentiality and Record Retention

Peer review records shall be maintained securely and disclosed only as authorized or required by law.

The District shall apply applicable California peer review confidentiality and privilege protections only to records and proceedings that qualify under governing law.

Labeling a record as confidential or as a peer review document does not, by itself, establish legal privilege.

Records shall be retained under the District's approved retention schedule and any applicable legal, regulatory, litigation, or investigation hold.

Mandatory reporting records and confirmations shall be retained in a manner that permits the District to demonstrate compliance.

Conflicts of Interest and Nonretaliation

Individuals participating in peer review shall disclose actual or potential conflicts of interest and shall not participate in deliberations or decisions when a material conflict disqualifies them under applicable procedures.

The District prohibits retaliation against individuals who, in good faith, report patient safety concerns or participate in authorized peer review.

Peer review shall be conducted consistently and without discrimination. Knowingly false statements, improper interference, or unauthorized disclosure of confidential information may be addressed under applicable District policies and law.

Implementation Requirements

Following Board approval, the District shall:

1. Obtain California health care counsel's review of this policy and the District's authority to conduct physician peer review.
2. Establish the required peer review governance structure, committee charter, and decision-making authority.
3. Develop or adopt applicable medical staff bylaws, credentialing and privileging procedures, and physician review procedures, as appropriate to each facility.

4. Designate the primary and backup reporting officials.

5. Establish the District's NPDB reporting access and verify eligibility and registration requirements.

6. Establish a reporting calendar and secure reporting log.

7. Train relevant leadership, physician reviewers, Compliance, Quality Assurance, and Human Resources personnel.

8. Review existing physician agreements and facility-specific policies for consistency with this policy.

9. Conduct an annual compliance review and update the policy as needed.

Policy Review and Amendments

This policy shall be reviewed at least annually and whenever changes in applicable law, regulatory requirements, facility certification, or District governance documents warrant revision.

Material amendments shall be submitted to the appropriate approving authority.

Adriana Gonzalez, Director of Communications



BOARD REPORT

October 2026

ACHD: Annual Conference

The SCHCD team and Board Directors Ken and Francisco attended the annual ACHD conference in Monterey, where they connected with health care districts from across the state and exchanged ideas about the challenges and opportunities facing local health care providers.

Attendees received promotional goodie bags featuring the Eden Valley logo, snacks, and tote bags donated by local partner See Monterey. The bags were a hit and helped showcase the District and its community partnerships throughout the conference.







Emergency preparedness

This month, SCHCD held three emergency preparedness discussions to strengthen coordination and community readiness. The first brought together District leadership and medical providers to review emergency preparedness procedures and responsibilities across our facilities.

The second meeting included Soledad City Manager Megan Hunter, Acting Police Chief Jorge Arreola, and Assistant Fire Chief Jason Luckenbach to discuss coordination during emergencies. The final meeting was held with Soledad Unified School District Superintendent Dr. Deborah Gorgulho to explore opportunities for collaboration and ensure our organizations are better prepared to support the community during an emergency.







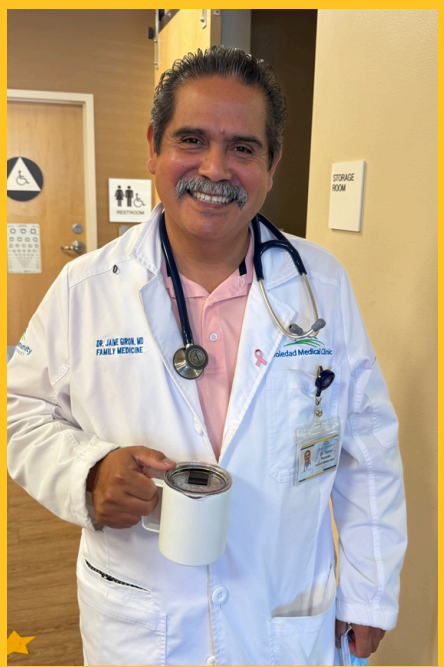
Breast Cancer Awareness Month Activities

Breast Cancer Awareness Month was recognized throughout the District with activities encouraging staff and students to show their support. Throughout October, employees were invited to wear pink on Fridays in recognition of the month. Staff also had the opportunity to select a festive, Halloween-themed breast cancer awareness pin, dedicate a pink ribbon in honor of a loved one, or share a message of encouragement and support.

Hartnell College students also joined in the activities, enjoying the opportunity to select their own unique awareness pins. These small but meaningful gestures helped bring awareness to breast cancer while encouraging participation and connection across the District.

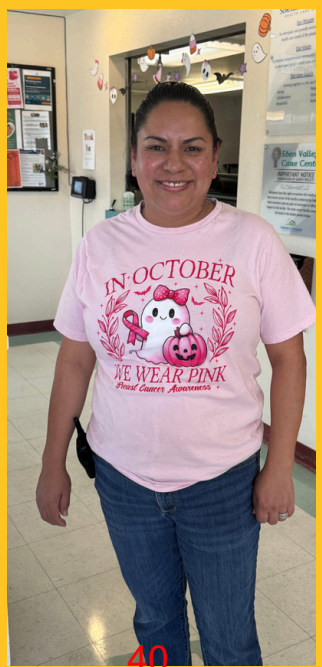












Breast Cancer Awareness Month Proclamation

On October 7, Soledad Medical Clinic was honored to receive a proclamation from the City of Soledad recognizing October as Breast Cancer Awareness Month. Brian Weaver represented the District and accepted the proclamation on behalf of the clinic team.

During his remarks, Brian emphasized the importance of early detection and encouraged community members to remind their loved ones to get screened when eligible or seek medical attention if concerns arise, reinforcing the District's commitment to preventive care and breast health awareness.



Community Partnerships & Legislative Affairs

Community Engagement & Partnerships

Throughout October, Dr. Ida Lopez Chan and Adriana Gonzalez represented SCHCD at several community events. On October 1, they attended the Salinas Valley Chamber of Commerce's Legacy of Leadership Awards, recognizing Dr. Deneen Guss and Harry Wardwell for their contributions to the community. The event provided opportunities to connect with local leaders.

On October 5, they attended Congresswoman Zoe Lofgren's fireside chat at the Soledad Community Center, where immigration and other community issues were discussed. That same day, Dr. Lopez Chan welcomed Katy Castagna, President and CEO of United Way Monterey County, for a District tour.







Resident Engagement & Enrichment

October was another month filled with creativity, meaningful activities, and opportunities for connection for our Eden Valley Care Center residents. Throughout the month, residents participated in seasonal activities, including pumpkin painting, coloring, and decorating their own breast cancer awareness ribbons in recognition of Breast Cancer Awareness Month. Residents also proudly wore their District-provided breast cancer awareness lapel pins, which featured a fun Halloween twist. These activities provided opportunities for residents to express their creativity, engage with one another, and celebrate the season.

Residents and staff also gathered for the quarterly memorial service to honor and remember those who have passed away. The Activities Department and Social Services team worked together to organize a heartfelt gathering that provided an opportunity for reflection, remembrance, and connection. We extend our appreciation to Board Director Rosemary Guidotti for attending and joining residents and staff for this meaningful occasion.









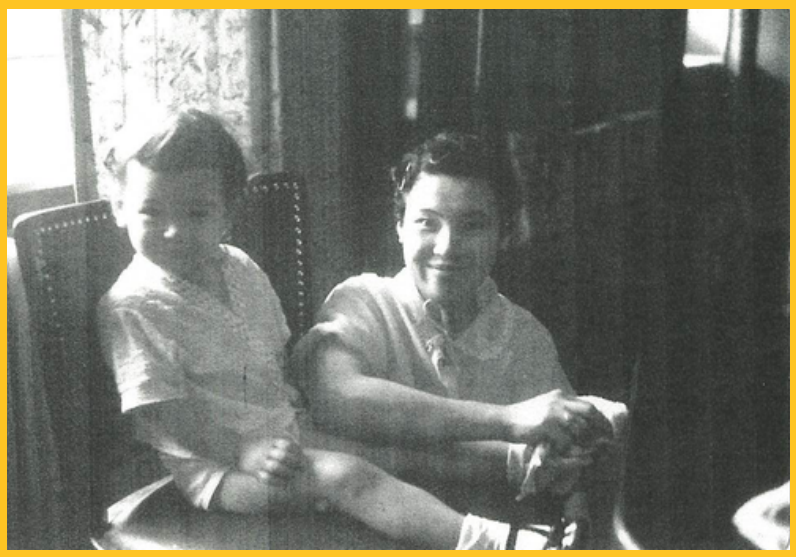












Dear Pam,

there are simply not enough words to thank you for all your attention, concern and compassion towards our mom, Emike Bergstedt. Without you, we believe she would have floundered. We would have too! You are a bright light that kept her out of the dark, in spite of her behavior. We are forever grateful for that and we will never forget you. God bless you Pam ♡ Jennifer Laughton and Amy Sak

Supporting our local students

This month, Eden Valley Care Center residents and staff proudly supported local high school students through two meaningful community activities. Residents and staff attended the Soledad High School Homecoming Parade, cheering on students and enjoying the festivities.

Eden Valley also supported King City High School's Future Health Professionals (HOSA) students by lending five wheelchairs for an emergency preparedness exercise on October 3. Students used the wheelchairs to evaluate campus emergency evacuation routes, identify potential accessibility barriers, and help ensure that individuals with mobility challenges can safely navigate emergency exits.





2026 MONTHLY CENSUS FOR EDEN VALLEY

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC
AVERAGE DAILY CENSUS												
MEDICARE	10	16	14	7	12	16	14	11	9			
PRIVATE	0	0	0	0	0	1	1	0	0.1			
MEDI-CAL	32	33	33	33	31	31	30	32	32			
HOSPICE	3	2	4	3	3	3	4	6	6			
TOTAL	45	51	51	43	46	51	49	49	47.1	0	0	0
OCCUPANCY												
DAYS IN MONTH	31	28	31	30	31	30	31	31	30	31	30	31
TOTAL POSSIBLE DAYS	1,643	1,484	1,643	1,770	1,829	1,770	1,829	1,829	1,770	1,829	1,770	1,829
TOTAL ACTUAL DAYS	1,361	1,415	1,561	1,309	1,431	1,516	1,501	1,519	1,426			
OCCUPANCY PERCENTAGE	83%	95%	95%	74%	78%	86%	82%	83%	81%	0%	0%	0%
NUMBER OF FACILITY BEDS	59	59	59	59	59	59	59	59	59	59	59	59
NUMBER OF BEDS AVAILABLE	14	8	8	16	13	8	10	10	11.9	59	59	59

2025 MONTHLY CENSUS FOR EDEN VALLEY

	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEPT	OCT	NOV	DEC
AVERAGE DAILY CENSUS												
MEDICARE	18	14	15	18	10	11	17	13	10	8	9	8
PRIVATE	1	1	1	0	0	0	1	1	0	1	1	1
MEDI-CAL	28	29	27	27	32	30	30	28	29	31	32	31
HOSPICE			1	1	1	1	1	3	4	5	4	3
TOTAL	47	44	44	46	43	42	49	45	43	45	46	43
OCCUPANCY												
DAYS IN MONTH	31	28	31	30	31	30	31	31	30	31	30	31
TOTAL POSSIBLE DAYS	1,643	1,484	1,643	1,770	1,829	1,770	1,829	1,829	1,770	1,829	1,770	1,829
TOTAL ACTUAL DAYS	1,411	1,218	1,336	1,336	1,331	1,263	1,527	1,405	1,348	1,387	1,388	1,350
OCCUPANCY PERCENTAGE	86%	82%	81%	75%	73%	71%	83%	77%	76%	76%	78%	74%
NUMBER OF FACILITY BEDS	59	59	59	59	59	59	59	59	59	59	59	59
NUMBER OF BEDS AVAILABLE	12	15	15	13	16	17	10	14	16	14	13	16

2026 PATIENT VISIT COUNTS

SMC STAFF	JAN	Avg Pt.Per Day	FEB	Avg Pt.Per Day	MAR	Avg Pt. Per Day	APR	Avg Pt. Per Day	MAY	Avg Pt. Per Day	JUN	Avg Pt. Per Day	JUL	Avg Pt. Per Day	AUG	Avg Pt. Per Day	SEPT	Avg Pt. Per Day	OCT	Avg Pt. Per Day	NOV	Avg Pt. Per Day	DEC	Avg Pt. Per Day
DR. GIRON	509	24	479	25	530	24	524	24	517	25	472	22	79	13	254	12	289	14						
DR. BELTRAN	237	22	232	23	243	24	293	23	228	25	270	23	166	12	123	10	182	14						
DR. PENA	328	23	256	23	344	23	200	20	0	0	0	0	227	13	138	12	173	13						
DR. ROD	123	25	127	32	140	28	112	28	96	32	155	31	93	23	114	16	78	26						
DR. GAMBOA	147	15			211	15	152	15	119	17	200	15	200	15	106	12	143	13						
DR. SAPETTO					215	17	363	21	364	23	330	21	249	16	202	13	251	16						
Ann Marie, NP	183	11	190	11	179	11	120	11	138	11	133	10	85	6	27	4	0	0						
Crystal LMFT															0		15	4						
X-RAY (SCHEDULED)	35	3	39	3	50	4	51	3	49	12	46	12	42	14	44	11	43	11						
X-RAY (PROVIDER)	56	4	43	4	57	4	13	3	17	6	19	6	6	3	16	4	4	2						
MA VISITS	88	5	76	5	83	5	52	4	58	4	46	3	58	3	75	4	57	3						
CARE MNGMT	10	3	41	3	23	2	32	2	22	2	22	2	37	2	9	1	43	3						
LABORATORY	239	14	261	15	230	14	320	15	231	13	255	13	232	13	181	10	223	12						
Walk -In (seen)	173	8	176	10	238	11	171	8	143		62	4	62	4	60	4	68	5						
Walk -In (not seen)	123	6	95	5	96	4	72	3	88		34	3	34	3	141	9	141	9						
WHC																								
DR. CHANDLER	45	15			30	15	17	17	0	0	20	20	25	13	0	0	0	0						
DR. ESTEVA	38	19	73	18	86	22	86	22	62	21	0	0	40	13	53	13	73	15						
DR. HOSSAIN	0	0	17	17	12	12	32	16	0	0	0	0	0	0	0	0	0	0						
DR. CHANG	71	18	59	20	44	22	67	22	39	20	49	25	51	13	25	13	31	16						
DR. ALBERT	131	22	126	21	86	22	114	19	17	17	115	19	43	14	96	12	85	14						
DR. TISSIER	65	22	41	21	40	20	38	19	41	21	0	0	12	12	23	12	13	13						
HU C	43	22	22	22	29	15	33	17	52	17	23	12	27	14	0	0	0	0						
JAIME MEYEROFF									53	18	20	20	0	0	0	0	0	0						
MALDONADO									46	15	54	18	0	0	57	10	68	11						
DR GUERRERO									20	20					0	0	0	0						
DR. NGUYEN													14	14	22	12	42	14						
LAB (WHC)	0	0			1	1	0	0	0	0	0	0	0	0	0	0	0	0						
ULTRASOUND (SCHEDULED)	69	6	75	7	95	7	81	7	79	8			51	6	43	7	59	8						
ULTRASOUND (PROVIDER)	2	1			0	0	0	0			90	8	0	0	29	10	6	6						
NST NURSE	31	4	21	5	17	4	11	3	10	3	1	1												
CPSP	98	7	90	7	118	7	102	7	115	7	106	6	53	8	85	7	80	6						
CPSP (Provider)	0	0			0		0	0	0	0			52	7	14	7	8	8						
MAMMOGRAPHY																								
TOTAL VISITS	***2,548***	***283***	***2,268***	***283***	***2,863***	***318***	***2,813***	***316***	***2,373***	***335***	***2,426***	***285***	***1,842***	***245***	***1,736***	***209***	***1,966***	***240***	-	-	-	-	-	-

2025 PATIENT VISIT COUNTS

SMC STAFF	JAN	Avg Pt.Per Day	FEB	Avg Pt.Per Day	MAR	Avg Pt. Per Day	APR	Avg Pt. Per Day	MAY	Avg Pt. Per Day	JUN	Avg Pt. Per Day	JUL	Avg Pt. Per Day	AUG	Avg Pt. Per Day	SEPT	Avg Pt. Per Day	OCT	Avg Pt. Per Day	NOV	Avg Pt. Per Day	DEC	Avg Pt. Per Day
DR. GIRON	478	22	427	22	500	23	489	22	577	25	368	23	262	22	498	24	471	24	519	25	477	25	496	24
DR. BELTRAN	245	20	0		0	1	0	0	0	0	174	19	194	19	153	22	190	21	219	24	184	23	228	23
DR. ROD	117	23	114	29	116	29	138	28	175	29	63	32	163	33	124	31	140	28	123	31	113	28	144	29
DR. PEÑA	355	21	307	22	322	21	375	21	375	22	320	21	346	20	381	22	360	23	315	24	358	24	372	22
OSKAR LIZARAGGA DAVIS PA-C	349	22	316	21	353	21	323	22	358	24	348	22	406	21	261	22	328	21						
DR. GAMBOA	149	15	198	17	211	16	50	17	185	17	128	14	114	14	195	16	102	13	166	14	133	15	152	15
Angeli Mateo, NP					86	22	468	21	49	25	0	0												
Ann Marie, NP	168	10	146	10	172	10	161	9	160	11	135	11	180	9	169	11	176	10	186	12	185	12	156	13
X-RAY (SCHEDULED)	63	13	45	15	56	14	57	14	59	15	48	16	60	15	72	18	56	14	0	0	40	3	43	3
X-RAY (PROVIDER)	42	8	30	10	40	8	53	13	37	7	31	10	22	7	41	10	31	8	13	13	43	4	35	2
MA VISITS	72	4	78	4	61	4	46	3	57	4	64	4	43	3	64	4	143	8	164	9	87	5	91	7
CARE MNGMT	28	2	21	2	30	2	34	2	25	2	29	3	35	2	34	2	32	2	67	3	21	2	27	2
LABORATORY	198	10	199	12	217	11	253	12	214	11	238	12	220	10	231	11	262	12	255	12	212	13	269	15
Walk -In (seen)	203	11	190	13	262	12	224	10	217	11	157	9	100	7	213	10	76	10	140	8	142	8	173	8
Walk -In (not seen)	68	4	89	6	70	3	52	4	98	5	49	4	50	4	72	4	30	4	73	4	123	8	136	6
WHC																								
DR. CHANG																	17	17	71	14	62	21	45	23
DR. CHANDLER	9	9	16	16	-	1	-	-	37	19	0	0	21	21	15	15	0		23	23	0	0	20	20
DR. ESTEVA	51	17	64	21	75	19	80	20	42	21	23	23	68	23	62	21	86	22	81	20	69	17	77	19
DR. ALBERT	55	18	52	52	72	18	120	17	95	0	124	21	115	16	75	19	118	20	94	19	106	21	172	22
DR. LAWSON	54	18	41	21	44	22	78	20	103	21	48	24	64	21	103	21	82	21	0					
DR. TAWADROS	22	22	33	17	38	19	0	0	0	0	0	0	0	0	0	0	0	0	0					
DR. GUERRERO	0		0		44	15	0	0	51	17	0	0	0	0	51	17	58	19	0					
DR. HOSSAIN	22	22			17	17	0	0	0	0	26	26	23	23	0	0	32	16	41	21	23	23	0	
MALDONADO	33	17	39	20	17	17	30	15	36	18	29	15	51	17	41	21	12	12	0					
MEYERHOFF	0		17	17	16	16	36	0	0	0	53	18	19	19	18	18	0	0	0					
HU C																			39	20	41	21	31	16
DR. TISSIER																			47	24	46	23	35	18
LAB(WHC)																					1	1	0	0
ULTRASOUND (SCHEDULED)	61	6	39	4	49	5	85	7	61	6	76	7	85	7	62	8	89	7	81	9	89	9	88	7
ULTRASOUND (PROVIDER)	2	2	11	2	0	0	1	1	0	0	0	0	0	0	0	0					1	1	0	0
MAMMOGRAPHY	0		0		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0		0	0		
CPSP	121	7	86	7	68	6	79	7	123	8	138	9	141	8	129	8	129	8	116	7	99	7	109	8
CPSP (Provider)							2	2	0	0	0	0	0	0	0	0								
NST NURSE	17	2	18	3	19	3	13	2	5	1	16	2	14	2	43	5	44	5	11	2	11	2	19	3
TOTAL VISITS	***2,982***	***275***	***2,576***	***329***	***2,955***	***342***	***3,247***	***256***	***3,139***	***283***	***2,685***	***328***	***2,796***	***310***	***3,107***	***326***	***3,064***	***343***	***2,844***	***338***	***2,666***	***316***	***2,918***	***305***

Care Compare Five-Star Ratings of Nursing Homes

Provider Rating Report for October 2026

Ratings for Eden Valley Care Center (555538) Soledad, California			
Overall Quality	**Health Inspection**	**Quality Measures**	**Staffing**
★★★★★	★★★★	★★★★★	★★★★

The Five-Star ratings provided above will be displayed for your nursing home on the Care Compare website on or around October 28, 2026. The health inspection rating incorporates data reported through September 30, 2026. The time periods for each of the quality measures that contribute to the Quality Measure (QM) rating can be found in the QM tables located later in this report. The staffing rating is based on payroll-based journal (PBJ) staffing data reported through the second calendar quarter of 2026.

Helpline

The Five-Star Helpline will operate Monday - Friday **October 26 - 30, 2026.** Hours of operation will be from 9 am - 5 pm ET, 8 am - 4 pm CT, 7 am - 3 pm MT, and 6 am - 2 pm PT. The Helpline number is 1-800-839-9290. The Helpline will be available again **November 30 - December 4, 2026.** During other times, direct inquiries to BetterCare@cms.hhs.gov as Helpline staff help respond to e-mail inquiries when the telephone Helpline is not operational.

1600 Green Hills Road, Ste. 101
Scotts Valley, CA 95066-4981
831-430-5500

950 East Blanco Road, Ste. 101
Salinas, CA 93901-4487
831-755-6000

530 West 16th Street, Ste. B
Merced, CA 95240-4710
209-381-5300

October 1, 2026

Dear **Soledad Medical Clinic**,

On behalf of the Central California Alliance for Health, it is my pleasure to congratulate you on being selected as a recipient of the **2025 HEDIS® Award of Excellence**.

This recognition honors your clinic's exceptional commitment to delivering high-quality care to Alliance members and to achieving strong performance against standards established by the National Committee for Quality Assurance (NCQA). Your results reflect the dedication, consistency and teamwork required to translate quality goals into meaningful outcomes for the people we serve.

To qualify for this distinction, clinics are required to perform above the NCQA 50th percentile benchmark on at least three HEDIS® measures, with a minimum of 30 attributed members in each qualifying measure. In addition, clinics can have no more than one measure performing below the 50th percentile benchmark. Meeting these criteria reflects a sustained commitment to quality and distinguishes your clinic among our valued provider partners.

We are grateful for your partnership and for the care your team provides each day. Your achievement strengthens our shared efforts to improve the health and well-being of our communities and exemplifies the standard of excellence we seek to advance across the Alliance network.

Please accept our sincere appreciation and congratulations on this well-earned recognition. We look forward to continuing our partnership and building on this success in the years ahead.

Sincerely,

Mike Wang, MD
Chief Medical and Health Equity Officer
Central California Alliance for Health

HEDIS® MY 2025

Award of Excellence

CENTRAL CALIFORNIA ALLIANCE FOR HEALTH®

Presented to

Soledad Medical Clinic

for results in the
Healthcare Effectiveness Data and Information Set (HEDIS®) measures
in Monterey County.



Mike Wang, MD
Chief Medical and Health Equity Officer
Central California Alliance for Health

A PROCLAMATION OF THE CITY OF SOLEDAD RECOGNIZING OCTOBER 2026 AS BREAST CANCER AWARENESS MONTH

WHEREAS, October is nationally recognized as Breast Cancer Awareness Month, dedicated to increasing awareness of the impact of breast cancer and promoting the importance of early detection, education, and support; and

WHEREAS, early detection through regular screenings, increased awareness of risk factors, and access to timely medical care are essential to improving survival rates and saving lives; and

WHEREAS, the Soledad community has been deeply affected by breast cancer, including the tragic loss of Naomi Almanza Caldera, beloved wife of Councilmember Ben Caldera and devoted mother of Benjamin Jr., Vanessa, Andrew, and Samuel, who was active in "Embracing Hope" for cancer awareness; and

WHEREAS, breast cancer does not affect only those diagnosed, but also their families, friends, caregivers, healthcare providers, and communities who provide encouragement, compassion, and support throughout the journey; and

WHEREAS, the City of Soledad recognizes the courage and strength of breast cancer survivors, honors those who have lost their lives to the disease, and extends its support to individuals and families currently facing a breast cancer diagnosis.

NOW, THEREFORE, BE IT PROCLAIMED that the City Council of the City of Soledad hereby recognizes October 2026 as Breast Cancer Awareness Month and urges all residents to join in raising awareness, honoring those we have lost, supporting survivors, and promoting education and screenings to build a healthier and stronger community.

Dated on this 7th day of October 2026

CITY OF SOLEDAD INCORPORATED MARCH 8, 1921 CALIFORNIA

Anna M. Velazquez, Mayor

Fernando Cabrera, Mayor Pro Tem

Fernando Ansaldo-Sánchez, Councilmember

Evarista Bañuelos, Councilmember

Ben Caldera

NOVEMBER 2026

Eden Valley Care Center

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
1 9:00 COFFEE & NEWS 10:30 MOVE AND GROVE EXERCISE 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIEND 3:00 DIA DE LOS MUERTOS CRAFT	2 9:00 COFFEE & NEWS 10:15 THERAPEUTIC EXERCISE PROGRAM 1:15 FRIENDSHIP CIRCLE 1:30 NAIL CARE 2:00 HYDRATION & SNACKS 3:00 ARTS AND CRAFTS	3 9:00 COFFEE & NEWS 10:15 BALLOON TOSS 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIENDS 3:00 BUILD A SANDWICH DAY 6:00 BINGO	4 9:00 COFFEE & NEWS 10:30 COMMUNION 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIENDS 3:00 BEAN BAG TOSS	5 9:00 COFFEE & NEWS 10:15 THERAPEUTIC EXERCISE PROGRAM 1:15 NAIL CARE 2:00 REFRESHMENTS W/FRIENDS 3:00 SENSORY HOUR 6:00 LOTERIA	6 9:00 COFFEE & NEWS 10:00 PERFORMANCE BY ROSE 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIENDS 3:00 NACHOS AND MUSIC	7 9:00 COFFEE & NEWS 10:30 MOVE AND GROVE EXERCISE 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIEND 3:00 COLOR AND RELAX
8 9:00 COFFEE & NEWS 10:30 MORNING STRETCHES 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIENDS 3:00 FUN & GAMES	9 9:00 COFFEE & NEWS 10:15 THERAPEUTIC EXERCISE PROGRAM 1:15 FRIENDSHIP CIRCLE 1:30 NAIL CARE 2:00 HYDRATION & SNACKS 3:00 SAND CASTLES	10 9:00 COFFEE & NEWS 10:15 BALLOON TOSS 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIENDS 3:00 WORLD SCIENCE DAY 6:00 BINGO	11 Veterans Day 9:00 COFFEE & NEWS 10:30 COMMUNION 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIENDS 3:00 VETERANS CELEBRATION	12 9:00 COFFEE & NEWS 10:15 THERAPEUTIC EXERCISE PROGRAM 1:15 NAIL CARE 2:00 REFRESHMENTS W/FRIENDS 3:00 YOGA MINUTES 6:00 LOTERIA	13 9:00 COFFEE & NEWS 10:30 BOXING STRONG EXERCISE CLASS 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIENDS 3:00 HEALTHY SNACKS	14 9:00 COFFEE & NEWS 10:30 MORNING STRETCHES 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIENDS 3:00 FUN & GAMES
15 9:00 COFFEE & NEWS 10:30 MOVE AND GROVE EXERCISE 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIEND 3:00 COLOR AND RELAX	16 9:00 COFFEE & NEWS 10:15 THERAPEUTIC EXERCISE PROGRAM 1:15 FRIENDSHIP CIRCLE 1:30 NAIL CARE 2:00 HYDRATION AND SNACKS 3:00 PARACHUTE EXERCISE	17 9:00 COFFEE & NEWS 10:15 BALLOON TOSS 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIENDS 3:00 HOMEMADE BREAD DAY 6:00 BINGO	18 9:00 COFFEE & NEWS 10:30 COMMUNION 2:00 HYDRATION & SNACKS 2:00 REFRESHMENTS W/FRIENDS 3:00 SING ALONG	19 9:00 COFFEE & NEWS 10:15 THERAPEUTIC EXERCISE PROGRAM 1:15 SUNBATHING HOUR 2:00 REFRESHMENTS W/FRIENDS 3:00 WORDS OF WISDOM 6:00 LOTERIA	20 9:00 COFFEE & NEWS 10:30 BOXING STRONG EXERCISE CLASS 1:15 FRIENDSHIP CIRCLE 2:00 PERFORMANCE BY LOGAN 3:30 PARACHUTE EERCISE	21 9:00 COFFEE & NEWS 10:30 MOVE AND GROVE EXERCISE 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIEND 3:00 COLOR AND RELAX
22 9:00 COFFEE & NEWS 10:30 MOVE AND GROVE EXERCISE 1:15 FRIENDSHIP CIRCLE 2:00 PASTOR MULLEN & 1ST SOUTHERN BAPTIST CHURCH 3:00 TABLE GAME	23 9:00 COFFEE & NEWS 10:15 THERAPEUTIC EXERCISE PROGRAM 1:15 FRIENDSHIP CIRCLE 1:30 NAIL CARE 2:00 HYDRATION & SNACKS 3:00 TURKEY CRAFT DAY	24 9:00 COFFEE & NEWS 10:15 BALLOON TOSS 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIENDS 3:00 PIE TASTING DAY 6:00 BINGO	25 9:00 COFFEE & NEWS 10:30 COMMUNION 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIENDS 3:00 GRATITUDE TREE	26 Thanksgiving Day 9:00 COFFEE & NEWS 10:15 THERAPEUTIC EXERCISE PROGRAM 1:15 NAIL CARE 2:00 THANKSGIVING DAY SOCIAL	27 9:00 COFFEE & NEWS 10:30 BOXING STRONG EXERCISE CLASS 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIENDS 3:00 SAND CASTLES	28 9:00 COFFEE & NEWS 10:30 MORNING STRETCHES 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIENDS 3:00 FUN & GAMES
29 9:00 COFFEE & NEWS 10:30 MORNING STRETCHES 1:15 FRIENDSHIP CIRCLE 2:00 REFRESHMENTS W/FRIENDS 3:00 FUN & GAMES	30 9:00 COFFEE & NEWS 10:15 THERAPEUTIC EXERCISE PROGRAM 1:15 NAIL CARE 2:00 HYDRATION & SNACKS 3:00 CHRISTMAS DECORATING DAY					ACTIVITIES ARE SUBJECT TO CHANGE GARDEN/MOVIE TIME 11:00 AM & 4:00 PM GOLDEN MOMENTS THURS. 10:45 AM CREEKSIDE ROOM

Happy Thanksgiving