

## **BOARD OF TRUSTEES SPECIAL MEETING**

WEDNESDAY, AUGUST 13, 2025 5:00pm to 7:00pm

#### **Conference Center at Highland Care Pavilion**

1411 East 31<sup>st</sup> Street Oakland, CA 94602 Ronna Jojola Gonsalves, Clerk of the Board (510) 535-7515

### LOCATION:

Open Session, In Person: HCP Conference Center, see above address

## **MEMBERS**

Alan E. Fox Greg Garrett
Lilavati Indulkar, MD Donna Linton
Nicholas Moss, MD Nely Obligacion
Rachel Richman David Sayen
Sblend A. Sblendorio

#### **BOARD OF TRUSTEES SPECIAL MEETING AGENDA**

<u>SPECIAL NOTE:</u> Per Brown Act requirements, Trustees of the Alameda Health System will attend board and committee meetings in person at the location(s) noticed on this agenda. Staff and members of the public may attend in person at the location noticed on this agenda.

## **Public Comment Instructions**

If you wish to address the Board regarding an item on the agenda or in their purview, please see the Clerk of the Board to sign up.

Each speaker will be allotted between one and three minutes to speak, depending on the number of speakers present.

# **OPEN SESSION / ROLL CALL**

### **PUBLIC COMMENT**

#### A. CONSENT AGENDA: ACTION

A1. Approve the Resolution to authorize Mark Fratzke to submit the Behavioral Health
Community Infrastructure Program grant application for San Leandro Hospital and
authorize Mark Fratzke to enter into and execute and deliver all other
documentation necessary to secure the grant funds

A2. Approve the Resolution to authorize Mark Fratzke to submit the Behavioral Health Community Infrastructure Program grant application for Saint Rose Hospital authorize Mark Fratzke to enter into and execute and deliver all other documentation necessary to secure the grant funds

# **CLOSED SESSION**

1. Public Employee Performance Evaluation; Conference with Labor Negotiator Pursuant to Government

Code Sections 54957(b)(1) and 54957.6

Title: Chief Executive Officer

Agency Designated Representative: David Sayen, President Board of Trustees

(Reconvene to Open Session)

**General Counsel Report on Action Taken in Closed Session** 

**OPEN SESSION** 

TRUSTEE COMMENTS

# **ADJOURNMENT**

## **Our Mission**

Caring, Healing, Teaching, Serving All

## **Strategic Vision**

AHS will be recognized as a world-class patient and family centered system of care that promotes wellness, eliminates disparities and optimizes the health of our diverse communities.

# **Values**

Compassion, Commitment, Teamwork, Excellence, Integrity, and Respect.

#### **Meeting Procedures**

All items appearing on the agenda are subject to action by the Board of Trustees. Staff recommendations are subject to action and change by the Board of Trustees.

The Board of Trustees is the Policy Body of the Alameda Health System. The Board has several standing Committees where Board matters are the subject of discussion at which members of the public are urged to testify. Board procedures do not permit: 1) persons in the audience at a Committee meeting to vocally express support or opposition to statements by Board Members or by other persons testifying; 2) ringing and use of cell phones, pagers, and similar sound-producing electronic devices; 3) signs to be brought into the meeting or displayed in the room; 4) standing in the meeting room. Citizens are encouraged to testify at Committee meetings and to write letters to the Clerk of the Board or to its members, 1411 East 31st Street Oakland, CA 94602.

Members of the public are advised that all Board and Committee proceedings are recorded (audio), including comments and statements by the public in the course of the meetings.

Copies of the audio recordings will be made available to the public. Copies of the agendas and supporting documents can be found here: <a href="http://www.alamedahealthsystem.org/meeting-agendas-and-minutes/">http://www.alamedahealthsystem.org/meeting-agendas-and-minutes/</a>. By attending and participating in Board/Committee meetings, members of the public consent to audio recording of any statements they may make during the proceedings.

# **Disability Access**

To request accommodation or assistance to participate in the meeting please contact the Clerk of the Board. Requests made at least 48 hours in advance of the meeting will help to ensure availability.

In order to accommodate persons with severe allergies, environmental illness, multiple chemical sensitivity or related disabilities, attendees at public meetings are reminded that other attendees may be sensitive to perfumes and various other chemical-based scented products. Please help us to accommodate these individuals.

The AHS Board of Trustees is committed to protecting the private health information (PHI) of our patients. We ask that speakers refrain from disclosing or discussing the PHI of others. Please also know that, should you decide to disclose your PHI, the Trustees will still likely refer your matter, to the extent it involves PHI, to the executive staff for a confidential review of the facts and for confidential handling. If you would like more information regarding the confidentiality of PHI as it relates to the Health Insurance Privacy and Accountability Act, please refer to 45CFR Section 164.101, et.seq.

A1. Approve the Resolution to authorize Mark Fratzke to submit the Behavioral Health Community Infrastructure Program grant application for San Leandro Hospital and authorize Mark Fratzke to enter into and execute and deliver all other documentation necessary to secure the grant funds







# Bond BHCIP Round 1: Launch Ready Form 10

RESOLUTION NO. 2025-005 (Project Name: San Leandro Hospital - Behavioral Health Expansion)

A RESOLUTION OF THE BOARD OF DIRECTORS OF	
Alameda Health System	AUTHORIZING
APPLICATION TO AND PARTICIPATION IN THE BEHA	VIORAL HEALTH
<b>CONTINUUM INFRASTRUCTURE PROGRAM ("BHCIP</b>	")

- A. The California Department of Health Care Services, through its contractor Advocates for Human Potential, Inc., ("Department") has issued a Request for Applications, dated July 15, 2024 ("RFA"), for the BHCIP Round 1 (2024) Launch Ready Program ("Program"). The Department has issued the RFA for Program grant funds pursuant to California Welfare and Institutions Code sections 5965-5967.01 ("Behavioral Health Infrastructure Bond Act of 2024").
- B. [Alameda Health System ], a
  [California Public Hospital Authority ] corporation ("Applicant"),
  desires to apply for Program grant funds and has submitted an application for
  Program grant funds ("Application") to the Department for review and
  consideration.
- C. The Department is authorized to administer BHCIP pursuant to the Behavioral Health Infrastructure Bond Act of 2024. Program funding allocations are subject to the terms and conditions of the RFA, the Application, Program Funding Agreement ("Program Funding Agreement"), and all other legal requirements of the Program.

### THEREFORE, IT IS RESOLVED THAT:

WHEREAS:

- 1. Applicant is hereby authorized and directed to submit an Application to the Department in response to the RFA, and to apply for Program grant funds in a total amount not to exceed \$ 14,883,715.05.
- 2. If the Application is approved, Applicant is hereby authorized and directed to enter into, execute, and deliver a Program Funding Agreement for the total award amount, and all other documents required or deemed necessary or appropriate to secure the Program grant funds from the Department and to participate in the Program, and all amendments thereto (collectively, the

3.	Applicant acknowledges and agrees that it is conditions specified in the Program Funding A expenditures, information, and timelines repenforceable through the Program Funding A for the allowable expenditures and activities in Agreement.	Agreement. Any and all activities, presented in the Application are greement. Funds are to be used
4.	[Mark Fratzke, Chief Operations Officer	1
	(the "Authorized Signatory"), is authorized t	to execute the Application and the
	Program Documents on behalf of Applicant for	or participation in the Program.
PASSED A	AND ADOPTED this <u>13</u> day of <u>August</u> of the Corporation's Board of D	Directors:
certify that governing	rsigned, <b>[ David Saven, President Board (]</b> of t the foregoing is a true and full copy of a resolution body adopted at a duly convened meeting on the esolution has not been altered, amended, or rep	ution of the Corporation's the date above-mentioned, and
SIGNATUI	IRE·	DATE:
	1 \	

"Program Documents").

NAME: \_\_\_\_\_

[NOTICE AND INSTRUCTIONS APPEAR ON THE FOLLOWING PAGE]

TITLE: \_\_\_\_\_

#### NOTICE AND INSTRUCTIONS

- Notice. The Department is providing this template Authorizing Resolution as informational guidance only. The Department encourages each Applicant to consult with professional legal counsel during the development of its own formal, legally binding statement that it is authorized to apply to and participate in the Program.
  - a. Please note, however, that any limitations or conditions on the authority of the signatory or signatories to execute the Application or the Program Documents may result in the Department rejecting the Authorizing Resolution.
- Accuracy, Verification. The Department will verify that this Authorizing Resolution comports with Applicant's operative organizational documents (e.g., Articles of Incorporation, bylaws). Applicant must timely notify the Department, in writing, of any discrepancies between its Authorizing Resolution and its organizational documents, along with a written explanation of same.
- 3. Dollar Amounts of Grant Awards. The Department recommends identifying an authorized dollar amount that is exactly the amount requested in the Application. If Applicant is ultimately awarded an amount that differs from the amount identified in the Authorizing Resolution, the Department will require a new Authorizing Resolution from Applicant before execution of a Program Funding Agreement.
- Authorized Signatory or Signatories, Designee. Applicant may authorize multiple signatories, so long as there is clarifying language as to whether the signatories are authorized to execute the Program Documents individually or collectively.
- 5. **Vote Count.** Please fill out the field by every voting category (i.e., Ayes, Nays, Abstain, Absent). If none, please indicate zero (0) for that field. The vote count must comport with relevant provisions in Applicant's operative organizational documents (e.g., authorized number of directors, quorum).
- 6. Certification of Authorizing Resolution. The individual who certifies the Authorizing Resolution cannot also be authorized to execute the Program Documents on behalf of Applicant. The individual who certifies this Authorizing Resolution must be either 1) the Secretary of the corporation; 2) the Chairperson/President of the Board of Directors, if different than the Authorized Signatory; or 3) all members of the Board of Directors of the corporation.

A2. Approve the Resolution to authorize Mark Fratzke to submit the Behavioral Health Community Infrastructure Program grant application for Saint Rose Hospital authorize Mark Fratzke to enter into and execute and deliver all other documentation necessary to secure the grant funds







# Bond BHCIP Round 1: Launch Ready Form 10

RESOLUTION NO. 2025-006 (Project Name: St. Rose Hospital - Behavioral Health Expansion)

A RESO	DLUTION OF THE BOARD OF DIRECTORS OF Alameda Health System   AUTHORIZING
	CATION TO AND PARTICIPATION IN THE BEHAVIORAL HEALTH NUUM INFRASTRUCTURE PROGRAM ("BHCIP")
CONTI	NOOW INTRASTRUCTURE PROGRAW ( BHCIP )
WHERE	EAS:
A.	The California Department of Health Care Services, through its contractor Advocates for Human Potential, Inc., (" <b>Department</b> ") has issued a Request for Applications, dated July 15, 2024 (" <b>RFA</b> "), for the BHCIP Round 1 (2024)

Launch Ready Program ("**Program**"). The Department has issued the RFA for Program grant funds pursuant to California Welfare and Institutions Code sections 5965-5967.01 ("**Behavioral Health Infrastructure Bond Act of** 

C. The Department is authorized to administer BHCIP pursuant to the Behavioral Health Infrastructure Bond Act of 2024. Program funding allocations are subject to the terms and conditions of the RFA, the Application, Program Funding Agreement ("Program Funding Agreement"), and all other legal requirements of the Program.

# THEREFORE, IT IS RESOLVED THAT:

2024").

- 1. Applicant is hereby authorized and directed to submit an Application to the Department in response to the RFA, and to apply for Program grant funds in a total amount not to exceed \$62,411,191.59.
- 2. If the Application is approved, Applicant is hereby authorized and directed to enter into, execute, and deliver a Program Funding Agreement for the total award amount, and all other documents required or deemed necessary or appropriate to secure the Program grant funds from the Department and to participate in the Program, and all amendments thereto (collectively, the

3.	Applicant acknowledges and agrees that it shall be subject to the terms and conditions specified in the Program Funding Agreement. Any and all activities, expenditures, information, and timelines represented in the Application are enforceable through the Program Funding Agreement. Funds are to be used for the allowable expenditures and activities identified in the Program Funding Agreement.
4.	[Mark Fratzke, Chief Operations Officer ]
	(the " <b>Authorized Signatory</b> "), is authorized to execute the Application and the Program Documents on behalf of Applicant for participation in the Program.
PASSED A	AND ADOPTED this <u>13</u> day of <u>August</u> , 202 <u>5</u> , by the following vote of the Corporation's Board of Directors:
	AYES: [#] NAYS: [#] ABSTAIN: [#] ABSENT: [#]
certify that governing	signed, <b>[David Sayen, President Board ()</b> of Applicant, does hereby attest and the foregoing is a true and full copy of a resolution of the Corporation's body adopted at a duly convened meeting on the date above-mentioned, and solution has not been altered, amended, or repealed.
SIGNATUR	RE: DATE:

"Program Documents").

NAME: \_\_\_\_\_

[NOTICE AND INSTRUCTIONS APPEAR ON THE FOLLOWING PAGE]

TITLE: \_\_\_\_\_

#### NOTICE AND INSTRUCTIONS

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- 5. **Vote Count.** Please fill out the field by every voting category (i.e., Ayes, Nays, Abstain, Absent). If none, please indicate zero (0) for that field. The vote count must comport with relevant provisions in Applicant's operative organizational documents (e.g., authorized number of directors, quorum).
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