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MCHD CONFIDENTIAL SURVEY RESULTS

INTRODUCTION

Mountain Communities HealthCare District requested that a confidential survey of willing employees be performed in an attempt to provide employees with a secure venue to express their perspectives, both positive or negative, regarding the operation, leadership, and milieu of Mountain Communities Healthcare District.

METHODOLOGY

An email was sent to all staff on April 22, 2026 inviting their participation in the survey. Interviews were conducted from that day until May 25, 2026. Two other emails were sent out to be sure that as many willing employees were given the opportunity to participate as possible. Staff were given the option to arrange a time for interviews that was most convenient for them. Almost all interviews were conducted face to face, with a small number being completed by phone or a series of emails for staff that were more comfortable, or for their convenience, with that modality.

The given mandate of the Survey was explained at the beginning of each interview and any questions about the purpose, confidential nature, and the plan for dissemination of the completed product discussed with each staff member. While a few had some apprehension, Staff were assured that their responses would be handled in a manner that would allow them to maintain their anonymity. It was also explained that if specific

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personnel were mentioned in a sensitive or negative way, or if HIPAA issues were mentioned, those particular results would still be provided to Administration, but could not be included in the body of a public report.

Interviews were initiated with open-ended questions that provided maximum latitude for staff responses, with subsequent, more specific questions in order to complete the interviews. All interviews were conducted privately in secure environments. Interviews ranged from 1.5 hours to 15 minutes, averaging approximately 30 minutes per employee, based upon their need to explore all issues they wished to address. Upon the completion of the interview, they were encouraged to reach out by email or phone if they decided they wanted to offer any other information to the survey process.

RESULTS

84 employees provided input for the survey, slightly over 30% of the entire roster that was provided to me. My impression also is that this represents most of the full-time, regularly present employees. All Departments of MCMS were represented in that population sample except for Ambulance.

The responses were organized into pertinent sections and are compiled as can be seen in Attachment 1, **MCHD Survey Results**. Specific comments that were significant were also tabulated separately in Attachment 2, **Significant Comments from Survey**. Administration was invited to respond to some or all of the results included in Attachments 1 and 2.

Staff consistently expressed excitement and enthusiasm for the opportunity to provide input in this manner. One employee quite succinctly expressed this general sentiment in an email, which she gave me permission to include an anonymous version of in this report, Attachment 4, **Sample Letter reflecting staff sentiment**, as a fair representation of the general response of staff.

A separate report has been prepared that included personnel or HIPAA sensitive comments and has been provided to Administration and the Board for their examination and possible action if warranted.

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ANALYSIS AND ADMINISTRATION RESPONSES

Interestingly, this process seemed quite therapeutic and informative to the staff. Almost all expressed positive sentiment about “being heard” and about being given the opportunity to have input in possibly improving the facility operations, and, to be able to give kudos and tell stories about the many personalities here, and how much of a familial environment exists stretching from Administration and across all units.

Attachment 1, **MCHD STAFF SURVEY RESULTS**, summarize general and pervasive areas of interest to staff. The specific staff members, rated 1-7, provide information about individual staff and are included in the confidential report provided to administration, as some of the comments represent sensitive HIPAA or personnel issues. Responses were categorized as positive, negative, or critically negative in which the responder believes they represent significant concern. Columns G and H provide percentile responses for the population that made specific comments in each area. Columns I and J provide percentiles that represent comments made based upon the whole survey population of 84.

To expand specific concerns and/or praises for the facility, Attachments 1 and 2 were provided to Administration to request consideration of providing Administrative responses to the various issues raised in the survey. Those issues, and Administration’s responses are illustrated in Attachment 4, **SIGNIFICANT COMMENTS FROM SURVEY, ADMINISTRATIVE RESPONSE**

CONSIDERATIONS

This surveyor suggests the following areas for consideration as possible ways to either educate the staff about each area of concern, or as possible areas to explore, expand, and improve upon:

1. Expand efforts to ensure staff are well-educated regarding their insurance benefits and the appropriate usage of the various elements of the insurance plan. Continue aggressively exploring any emerging options to improve the health insurance program. Consider conducting a state-wide survey of insurance benefits available to similar hospitals to determine if there might be a better available program for a hospital similar in size and function to MCHD.

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2. Provide the information available in this report to the staff as a whole. It is encouraged to allow that dissemination to occur independently from the Administration.
3. Slightly increase regular Administrative presence in the various units of the hospital to continue improving the collegial environment. If indicated, and permissible, increase information to staff about Administrative responses to situations that directly affect a given department.
4. Explore the possibility of occasional teambuilding efforts within departments and with the Department Heads as indicated.
5. Review staffing levels in specific units and provide information to staff as appropriate.
6. Conduct a similar survey process semi-annually to continue the type of positive responses seen in the current survey and to maximize information to Administration about the wellness and morale of the staff and milieu.
7. Increase HR presence, education to staff about HR scope of practice and limitations, and maintain and increase appropriate Public Relations practices to encourage an understanding and trust in HR.
8. Explore ways to enhance onboarding, orientation, and retention of new staff including:
 - a. Enhancing the online presence allowing applications for employment.
 - b. Provide brief introductions between new staff, Administration, HR, **and** a representative of the MD/hospitalist staff, to improve outcomes as new staff integrate into the hospital milieu.
 - c. Explore ways to increase support, mentorship, education, and integration of new Grad staff across the medically aligned departments, including increased mentorship efforts. Many staff believe this would greatly enhance retention and recruitment.
 - d. Explore ways to enhance MD/hospitalist staff as a team, and to provide a more effective way to regular review and improve potential bioethics issues as they arise.
 - e. Thoroughly educate new staff regarding the various benefits available to them, including the Health Insurance, as well as periodically to the staff as a whole.
 - f. Increase information about use of PTO, sick leave, and other benefits during the onboarding process.

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- g. Explore developing an enhanced skills lab, proficiency tests and reviews, and availability of additional training materials to be made available to staff at will, possibly by an increase of online materials. Increase availability of EMR training.
 - h. Explore increasing cross-training between departments to strengthen staffing, staff availability and flexibility, increased options for staff to migrate between departments to enhance retention, and to increase the ability of the organization to react to crises cohesively and quickly.
9. Increase facility-wide awareness of efforts to recognize and honor outstanding staff for every department.
 10. Review, encourage and require consistent Care Plan Protocols for both SNF and Med/Surg and work towards 100 % compliance, along with enhancing staff communication, teamwork, and improved end of shift report consistency. Examine Acuity triaging continuity across departments and provide additional training if indicated.
 11. Consider increasing the scope, footprint, and responsibilities of the Interdepartmental Committee to increase the voice of, and cooperation between departments, potentially meeting not only individual department needs more effectively, but to also the ability to provide unique input to the facility as a whole.
 12. Explore and review current technological needs for Lab, Radiology, and Med/Surg to be sure that we are using the best technology available to us. Provide information to the departments about the status of each department's technology status.
 13. Explore the possibility of a confidential intermediary in the HR process that staff could access if they are apprehensive or feel the need for initial anonymity.
 14. Review and explore enhancing Administration's efforts to provide regular updates to staff regarding policy changes, hospital changes, emerging situations. It appears that Administration does a great job with this, but it is more of an issue of staff accessing and absorbing the information.
 15. Explore Lab Services developing a comprehensive, dynamic Reference Lab Handout that clarifies available lab tests, appropriate orders, and appropriate names for each of the available tests.
 16. Explore the possibility of an outside Lab consultant to provide recommendations regarding equipment and procedures.
 17. Consider disseminating updated employee parking regulations to all staff.

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SUMMARY

Overall, the organization fared very well in this survey. Staff morale, contentment with their job, wages, and most of their benefits were found to be outstanding. Many staff talked about how proud and grateful they are to work here, how “wonderful” and unique this hospital is, and how much they love their job.

Administration and the hospitalists (including Med/Surg, ER, and OR) also enjoy a very favorable impression from the majority of the staff. There is a strong sense of team in most departments. Specifically, wages and Aaron Rogers as CEO were overwhelmingly supported by the body as a whole. A CEO enjoying an almost 94% approval rating is unheard of. Most staff mentioned, and are very aware and appreciative of, the “turnaround” the hospital has enjoyed over the last decade or so. There is a prevailing belief that Administration has fought for, and been very successful in improving their workplace, wages, and most benefits. At the same time, there are some staff that represent an overall negative view of the organization (4.8%).

There are some (surprisingly few for such an old plant) considerations about the actual building itself. I believe that staff have some awareness of what Administration is doing to address these, but as always, dynamic and free flow of information will always improve these perceptions.

Insurance does pose an ongoing challenge. I believe it is important to be able to show the staff a comparison from other similar facilities in order to understand the challenges MCHD faces in finding and providing decent insurance. Staff also needs to know about ongoing efforts to do whatever is possible to improve the coverage.

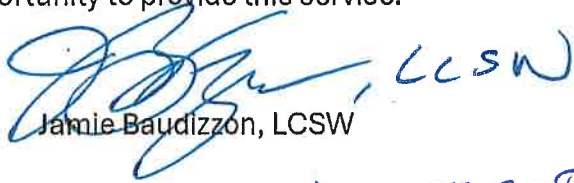
There are some concerns about onboarding, support, and long-term retention of new employees as the hospital continues to grow at an impressive rate. It is my opinion that these concerns can be adequately remedied by some tweaks and enhancements to those processes (please refer to #8, **Considerations** section, of this report).

My own perspectives about this organization derive from over 37 years of experience providing consultative services to this facility, staff, and patients. Ironically, I was initially contracted with this facility to provide a similar analysis. Sadly, the hospital was in severe crisis, very disorganized and without focus 37 years ago. It is incredibly heartwarming for me to compare results and findings and be able to recognize the impressive growth and improvement this hospital has made. Trinity Hospital is an absolutely vital, necessary, and

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irreplaceable asset to this community. I am proud to be able to be a part of ensuring this organization's ongoing existence, growth, improvement, and success.

Please do not hesitate to contact me with any questions or requests for clarifications that you may have. I also invite the many responders to reach out to me confidentially with questions or additional input you may have. Thank you for this amazing opportunity to provide this service.

 LCSW

Jamie Baudizzon, LCSW

→ 530-941-4422

Attachment 2

SIGNIFICANT COMMENTS FROM SURVEY

	# of Responses
1. Need increased MD time and attention on SNF	2
2. Need teamwork, teambuilding for staff	15
3. Aaron great CEO, amazing job getting hospital back on track. phenomenal. Aaron tough but fair, definitely committed to growing hospital, best this hospital has had, cares for employees, has great open door policy, fabulous, firm but fair, no nonsense, firm but fair, very approachable, family oriented, flexibility, always listens to employees , saved my job when he didn't have to, loves the hospital, outstanding administrator, best boss I've ever had, has really improved staff retention	53
4. Roger Freer has really improved the hospital, awesome	3
5. Admin needs to be more timely and responsive.	10
6. Admin needs to be seen more often on the units.	15
7. Staff is great, familial atmosphere, good team.	62
8. Radiology needs more staffing	3
9. Need ways for staff input like this survey ongoing, staff input, need safe way to vent, need a confidential liaison if things are tense with HR issues, work on communication	44
10. Care Plans need to be implemented, monitored and followed on 100% of med surge patients for quality of care, and it is not happening.	3
11. Enjoy/love my job, best job I've ever had (3), took a pay cut to work here (1)	44
12. Heating and cooling on SNF is a serious problem.	3
13. Staff punished if they use overtime	1
14. Orientation on med/surge should be more guided, improved, increased	8
15. The hospital is wonderful, best we've ever been	38
16. Very afraid of the inappropriate 24 hour shifts on acute, "going to lead to a catastrophe"	2
17. New Grad nurses need more support.	6
18. Mary Cole is wonderful, has transformed pt and clinic	5
19. The health insurance is not good, deductibles are overwhelming, MERP and spending card helps but not enough, cumbersome paperwork	27
20. Gina on med surg is great to the new staff	1
21. Good wages, best in California for my department (1)	69
22. I trust going to HR, very helpful, informative, knowledgeable	30

23. Belen great to work with, really supports and fights for nurses, needs more help, possibly another layer of admin for med/surg, snf, er/or	28
24. Heidi is a breath of fresh air	4
25. Amber is great to work with	1
26. Christian is a character, big personality, great with staff and pts., knows a lot beyond the typical, have great respect for him as a clinician	17
27. Dr. Shipsey good to patients, gets along with him, cares, has really improved in staff interactions, strong provider, trusts his medicine	24
28. Staffing needs improved, clinic needs more support staff (1)	8
29. Our clinic is not covered by our health insurance?	1
30. Care Plans need to be implemented, monitored and followed on 100% of med surge patients, and it is not happening. Better communication, beefed up end of shift reports, orders checked more often also needed.	5
31. SNF does a great job with training, Brian is wonderful	4
32. Med/surg staff great, very helpful	6
33. Hospital needs a skills lab, more extensive proficiency tests	7
34. Mikki Butler Is great to work with	6
35. Fearful to bring concerns to admin without anonymity	18
36. There should be more interaction, cross-training experience between hospital and clinic	2
37. We need an interdepartmental committee/team to gain insights for improvement in hospital functioning	5
38. "Nursing staff beyond reproach"	2
39. Med/surg desperately needs new suction machines	1
40. Politics should be kept out of the workplace	6
41. We need to develop technology for online employee applications, more work for recruitment	4
42. ER/OR staff are great, kudos for Sabo, Sommers, Flowers	9
43. Need better plan for staff borrowing between units, needs larger pool of available staff	2
44. Lab needs improved technology, supplies, suggest an independent review from outside consultant as the entire system could be upgraded to be more accurate, responsive, efficient, and economical, issues with expired supplies and timely ordering, increased training re: appropriate safety with needles	5
45. Vicky is a wonderful person	5
46. People would like the insurance more if they understood it.	4
47. Employee appreciation programs tend to ignore some ancillary departments and should be expanded to be more inclusive	5

48. Chad Smith was really great to work with.	5
49. Holiday pay, on-call pay could be improved	2
50. PT staff great, good team, close	6
51. The rumor about 24 hour shifts being forced is not true	2
52. Giselle Barros is blunt but wonderful!	3
53. We need annual employee update, policy change updates, EMR training, protocols for triaging acuity . new employee orientation needs to be improved	4
54. PTO policy is unfair	1
55. Need a reference lab handout clarifying lab tests, orders, and names	3
56. Rules about staff parking vs. patient spaces need to be enforced	1
57. Hospital operation growing so much we need more ancillary staff	1
58. Jennifer in Revenue is amazing	1

ATTACHMENT 3

Mr. Baudizzon,

I appreciate your time, patience, and understanding during the recent survey you've been conducting over the last few weeks. I think that is important to share with you the positive feedback that I am experiencing from an internal perspective, as well as take a moment to express my sincere appreciation for stepping up to help the entire MCHD Organization.

I believe that you may have been the "first step" in the beginning of some people's self healing or even a bridge, that others needed to cross over or get through, whatever was troubling them. It would seem that people have faith that someone is behind them or at least on their side, and they have the courage to speak up, try something new, help someone, work harder, or even choose a new path, etc. I have already seen improvement in attitudes as well as listened to others tell me their recent interactions with a co-worker they had troubles with in the past, are now a bit delightful and some even expressed that they were sharing new ideas with their team members. This baby wave has hit the radiology, ER, physical therapy, and clinics. Although it is just a few people in these departments, it is a beginning.

Thank you for your kindness and I hope the organization is open and receptive to your survey. I hope they take a moment and think about the one thing they could do to help everyone grow or be beneficial for the entire organization.

I would suggest a workshop from an outside trainer to provide Leadership courses, Respect in the Workplace, Basic computer training, etc. I can think of so many more this place needs.

I think it's one thing they could do for team building and to see everyone participate together. I better go, thank you again Sir.

I hope the rest of your day is pleasant.

560 Main St Lease to Buy 18 May 2026

I propose a lease to buy plan for the 560 Main Street that would pose little or no risk to the district.

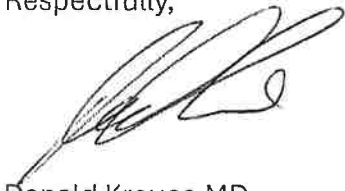
The background situation is as follows per Jill Cox, county supervisor.

1. The downtown properties are to be rezoned "Mixed Use" which would allow residential and business utilization.
2. The planning department would not enforce any Mixed Use utilization of downtown property until the rezoning is finalized.
3. The rezoning should occur by the end of 2026.
4. Mixed Use zoning would allow multiple residence use.
5. There have been no disagreements with the downtown rezoning plan.
6. Some downtown properties are already being used as Mixed Use.

As a starting point, I propose the following general framework:

1. \$450,000 Purchase price
2. \$3500 to lease/month
3. \$42000 renovation allowance for year. Renovation allowance deductible from lease.
4. If purchased by MCHD before one year, renovation cost above lease payment could be deducted from sale price.

Respectfully,



Donald Krouse MD



1010 Warnerville Road
Oakdale CA 95361
United States
(209) 847-4100

Trinity Hospital
60 Easter Ave
Weaverville CA 96093
United States
(530) 623-5541

Contact Name: Anthony Sabo

Contact Email: asabo@mcmedical.org

Contact Phone: (908) 892-5440

Equipment Quote

Quote #: EST11342

Quote Date: 4/23/2026

Expiration: 6/7/2026

Buying Group: NO GPO

Your Sales Consultant:

Conner Purnell

conner@kecklermedical.com - (209) 840-2438

Thank you for the opportunity to earn your business!

Quantity	Item	Unit Price Quoted	Extended Price Quoted
1	Miscellaneous Parts 8X4-GS2 StarTrol 8 Pod Dual Ceiling Mounted Light 140,000 lux @ a meter	\$9,986.00	\$9,986.00
1	Miscellaneous Parts Track Spanners (2) Track Spanners Required for Light Install	\$5,235.00	\$5,235.00
1	Project Management Project Management	\$3,210.00	\$3,210.00
1	De-installation De-installation of existing lights Quoted to take place in one trip	\$4,480.00	\$4,480.00
1	Installation Installation of New StarTrol Light. Including Additional Labor for install of (2) needed Track Spanners Quoted to take place in one trip	\$6,790.00	\$6,790.00

Shipping & handling is prepaid & added if not quoted above.

Subtotal	\$29,701.00
Tax Total	\$1,103.52
Total	\$30,804.52

Terms & Conditions

Terms: Net 30 Days

Deposit: 25% Deposit required on all orders greater than \$5,000.00 and 50% on all orders great than \$100,000.00 based on credit approval. Deposit due upon submission of purchase order.

FOB: Mfg, prepaid and added.

Sales Tax: Local sales tax will be added.

Storage: Customer will receive product at their facility and store until scheduled install.

Progress Billing: Any installation with duration of greater than 30 days will have progress billing.

Schedule of values with milestones will be provided.

Purchase orders should be issued to J.M. Keckler Medical.

Keckler Medical is proud to offer PREVENTIVE MAINTENANCE programs that ensure manufacturer warranty compliance. All of our service technicians are dedicated to keeping you operationally effective by offering 24-hour emergency equipment repair. Ask your Sales Consultant for more information today!



TRINITY COUNTY SHERIFF'S OFFICE

Media Arrest Summary, by Name

Arrest Time/Date: 15:57:52 01/24/26

Booking Number: 4392

Inmate Name: CHATEAUNEUF, AMELIE

Name Number: 185

Birth Date: 10/21/94

Address: 362 DEMOCRAT GULCH, WEAVERVILLE, CA

Arrest Type: BOOK

Arrested By: [REDACTED]

Agency: [REDACTED]

Arrest Location: FRONTIER FUEL AND MINI-MART

Arrest Number: 4389

Related Incidents: 26-00088

<u>Time/Date</u>	<u>Offense</u>	<u>Area</u>	<u>Statute</u>	<u>Court</u>	<u>Crime Class</u>
15:57:52 01/24/26	FAILURE TO APPEAR ON MISDEMEANOR CHARGE	B5	1320(A) PC M (50119)	TCSC	M
15:57:52 01/24/26	FAILURE TO APPEAR ON MISDEMEANOR CHARGE	B5	1320(A) PC M (50119)	TCSC	M
15:57:52 01/24/26	FAILURE TO APPEAR ON MISDEMEANOR CHARGE	B5	1320(A) PC M (50119)	TCSC	M
15:57:52 01/24/26	FAILURE TO APPEAR ON MISDEMEANOR CHARGE	B5	1320(A) PC M (50119)	TCSC	M
15:57:52 01/24/26	FAIL TO APPEAR: WRITTEN PROMISE: TRAFFIC	B5	40508(A) VC - M	TCSC	M
15:57:52 01/24/26	DRIVING ON A SUSPENDED LICENSE	B5	14601.1(A) VC - M	TCSC	M

Arrest Time/Date: 12:26:40 01/25/26

Booking Number: 4393

Inmate Name: COLEBANK, DUSTIN C

Name Number: 415

Birth Date: 10/14/96

Address: 1235 BRADY RD, HAYFORK, CA

Arrest Type: BOOK

Arrested By: [REDACTED]

Agency: [REDACTED]

Arrest Location: 127 MAIN ST WEAVERVILLE

Arrest Number: 4390

Related Incidents:

<u>Time/Date</u>	<u>Offense</u>	<u>Area</u>	<u>Statute</u>	<u>Court</u>	<u>Crime Class</u>
12:29:40 01/25/26	BATTERY W/SERIOUS BODILY INJURY	B1	243(D) PC F (13084)	TCSC	F
12:40:16 01/25/26	THRTN FORCE WIT OF CRIME		140(A) PC F (47015)	TCSC	F
12:27:53 01/25/26	ASSAULT W/DEADLY WEAPON:NOT F/ARM	B1	245(A)(1) PC F (13219)	TCSC	F

Arrest Time/Date: 14:31:34 01/27/26

Booking Number: 4400

Inmate Name: COLEBANK, DUSTIN C

Name Number: 415

Birth Date: 10/14/96

