

**Healthcare Equity Advisory Council**  
Tuesday, February 17, 2026

**DRAFT MINUTES**

**Community Council Members Present**

Alejandra Valencia – Chair  
Kimberly Thomas-Kelley  
Emily Bridges  
Liz Diaz-Querol, MD  
Celia Daniels  
Kimberly Cofield  
Martha Shapiro  
Juana Zaragoza

**Administrative Council Members Present**

Loretta Denering, DrPH  
John Fankhauser, MD  
Vikram Kumar, MD  
Rigoberto Vargas  
Shannon Burke  
Deanna Handel

**Community Council Members Absent**

Bianca Farmer  
Yvonne Gutierrez  
Jacqueline Avena  
Hugo Tapia

**Administrative Council Members Absent**

Lizeth Barretto  
Kristina Swaim

**Interpreter**

Martha Teissiner

**Minutes**

Andrew Berner

**1. CALL TO ORDER**

The meeting was called to order at 5:38p.m. by Alejandra Valencia.

**2. ROLL CALL**

**3. APPROVAL OF MINUTES:** December 16, 2025, meeting minutes were reviewed.

**ACTION:** Council Member Dr. Kumar motioned approval first, and Council Member Celcia Daniels second. Martha Shapiro and Rigo Vargas abstained. Motion approved.

**4. PUBLIC COMMENTS FOR AGENDIZED ITEMS & ITEMS NOT ON THE AGENDA**

None

**1. INTRODUCTION OF DR. LORETTA DENERING, AS THE NEW HEAC CHAIR - 5 MIN**

**2. REPORT ON 2026 BROWN ACT CHANGES – MARTY KNUTSON, ASSISTANT COUNTY COUNSEL, 10 MIN**

The 2026 Brown Act updates (SB 707) significantly expand remote-access, language-access, and transparency requirements for eligible legislative bodies. Depending on the government body, agencies must provide two-way remote participation, adopt disruption-handling policies, translate agendas for applicable language groups, ensure accessible online posting, including for emergencies, and

maintain systems for electronic requests for agendas and documents. The Act also standardizes rules for remote participation by the public and members, expands “just cause” provisions, clarifies accommodations for disability-related remote attendance, and requires distribution of the Brown Act to all legislative body members.

During discussion, several clarifying questions were raised. When asked whether there are references available for better understanding of the Brown Act, it was noted that substantive discussions should occur publicly at meetings rather than behind closed doors, consistent with the core principle that the people’s business must be conducted openly. Regarding the impact or consequences of a Brown Act violation, the response emphasized that consequences depend on the nature of the violation, the intent of those involved, and its frequency. Penalties may include fines, and actions taken in violation of the Act, such as decisions made in private, may be subject to being invalidated or forced to be redone; contracts approved unlawfully, for example, could be voided. A question about participating in a meeting from a public place raised concerns about the potential for outside influence on a member’s decision-making, underscoring the need to maintain neutrality, avoid inappropriate input, and uphold the integrity of deliberations.

### **3. REPORT ON SANTA PAULA HOSPITAL – DR. JOHN FANKHAUSER, 10 MIN**

Amid growing statewide and national financial pressures on public health systems, Santa Paula Hospital (SPH) faces major challenges as Medi-Cal eligibility and state-directed payments decline, contributing to an anticipated \$400 million reduction for the Ventura County Medical System over the next six years. These pressures come alongside costly seismic compliance requirements, and with retrofit costs estimated at \$25 million, the County Board of Supervisors decided not to submit the required application, meaning SPH will no longer be able to operate an emergency department after December 31, 2029. In response, the County is evaluating alternative care models, including a micro-hospital or expanded urgent care options, with formal recommendations expected this summer.

Leaders emphasized that while the hospital has served the community for 60 years, and serves a disproportionately low-income population, the broader system must remain financially viable. High-acuity patients already bypass SPH, but the mission to provide high-quality care remains unchanged. Community members are encouraged to share concerns with the agency committed to outreach and clarity that services will continue at SPH for the next four years.

Service changes are unavoidable but the health system remains committed to those living on the financial margins. Questions regarding workforce retention were met with assurances that space is being prepared for staff transitions at VCMC.

Early-stage exploration of replacement care models continues, grounded in long-term financial sustainability. Ambulatory services will remain, as the closure affects the hospital facility, not outpatient programs.

### **4. HEAC FEBRUARY WORKSHOP, “WHAT IS GOOD COMMUNICATION?” – DR. GABRIELA CAZARES AND SARAH GARCIA, 30 MIN**

The February 2026 HEAC presentation revisited the group's ongoing work around trust in health care, summarizing themes gathered from participant reflections on what builds or breaks trust across historical, cultural, personal, system-level, and environmental factors. Key patterns included the lasting impact of historical harms, the need for culturally respectful care, the importance of being heard and taken seriously, and the influence of system barriers such as access challenges and inconsistent follow-through. Cross-cutting themes, dismissal vs. belief, words vs. actions, and the role of vulnerability, shaped a draft definition of trust emphasizing transparency, accountability, cultural relevance, competent care, and alignment between institutional promises and actions. The session concluded with an activity to develop community agreements to support respectful dialogue and strengthen trust-building within HEAC throughout 2026

#### **5. BOARD MEMBER COMMENTS AND ANNOUNCEMENTS – 10 MIN**

Dr. Vikram Kumar (Ambulatory Care) – Provided updates as part of the Ambulatory Care presentation, including system-wide patient demographics and service utilization trends.

Rigoberto Vargas (Public Health) – Highlighted the work of the Public Health outreach team, noting their expanded efforts to educate residents about Medi-Cal enrollment, staying enrolled, and re-enrollment support.

Luis Gonzales (Behavioral Health) – Shared that Behavioral Health's Office of Health Equity will be featured across clinic sites and that the department has completed its cultural competency plan submitted to DHCS.

Dr. John Fankhauser (Hospitals) – Acknowledged Black History Month, recognizing both the Black community's contributions to the health system and the historical impact of racism in medicine and health care.

Martha Shapiro (Senior Concerns) – Announced her continued work with Senior Concerns and mentioned her weekly column in the Ventura County Star; invited suggestions for future column topics.

#### **6. CALL FOR FUTURE AGENDA ITEM(S) - 5 MIN**

Roger Robinson, HSA Director, is scheduled to speak at the April meeting on HR1.

#### **7. ADJOURN**

Meeting adjourned at 7:02 pm. Next meeting is scheduled for Tuesday, April 21, 2026.