

# Healthcare District Legacy: A Story of Pause, Persistence, and Renewal

*Tulare Local Healthcare District*



## **A Community Commitment Since 1946**

The Tulare Local Healthcare District was established in 1946 by local residents to ensure reliable access to healthcare services through local public stewardship. Formed as a special healthcare district, its purpose was simple but enduring: to allow the community to guide healthcare decisions locally, transparently, and in alignment with the needs of the region it serves.

In the years following its formation, voters approved the development of a district hospital, which opened in 1951, becoming a cornerstone of care for Tulare and surrounding communities. From the beginning, the District's role extended beyond operating facilities—it carried the responsibility of safeguarding public assets, maintaining accountability, and planning for long-term healthcare access.

As Tulare grew, the hospital campus expanded over time. Community accounts point to an expansion era in the 1970s, followed by a major renovation and expansion in 1993 that added a new pediatric unit. Over the next two decades, the District continued adding services such as medical imaging, rehabilitation, and wellness programming.

That responsibility continues today.

## **2008–2009 | A Vision Takes Shape**

Plans are set in motion for a new inpatient tower at the hospital campus, then known as Tulare Regional Medical Center. After voters approved an \$85 million general obligation bond measure in 2005, the District began issuing bonds (including issuances in 2007 and 2009) to fund the project. Construction moves forward with optimism: modernizing care,

expanding capacity, and meeting California’s seismic safety requirements. The Tower rises quickly, becoming a visible promise of long-term investment in the community.

## 2010–2013 | Progress and Pressure

### Breaking Ground and Building Momentum

With financing secured and approvals in place, the project moves from planning into action. Ground is broken, and construction begins in earnest. Crews mobilize on site, foundations are poured, and the Tower starts to take physical form. Early progress reflects optimism and community investment, as the long-anticipated facility transitions from drawings to reality.



## 2014 | Construction Comes to a Slow

Construction on the Tower slows dramatically. What began as a symbol of progress becomes a stark reminder of uncertainty. The partially completed building stands idle—present, but unusable—while the District confronts a convergence of financial, operational, and management crises.



## 2015–2017 | Crisis and Scrutiny

This period brings intense public scrutiny. Investigations, lawsuits, and audits dominate headlines, alongside disputes with regulators and allegations of financial mismanagement. As instability deepened, physician relationships strained and access to care eroded. In 2017, the hospital ultimately closed for an extended period, disrupting services for the community and contributing to the departure of physicians and staff. That same year, the District filed for bankruptcy—an extraordinary step taken to stabilize operations and protect the hospital's long-term future.



## Healthcare Restored

Despite bankruptcy proceedings, the hospital reopens to patients in October 2018 under a new operational structure. Public statements at the time described the rapid reopening effort as “nothing short of miraculous,” accomplished in roughly 110 days after the District selected a new operating partner in late June 2018. This moment marks a turning point: care resumes, trust begins to rebuild, and the community regains access to essential services. The Tower, however, remains unfinished—its fate unresolved.



## 2019–2021 | Stabilization and Justice

### Laying the Groundwork

With the hospital operating again, attention shifts to accountability and long-term stability. Investigations lead to indictments and legal actions tied to the prior management era. Public statements in 2020 emphasize transparency and a renewed mission focused on safe, efficient, and community-centered healthcare.

Quietly, essential groundwork is being laid: governance reforms, financial controls, and careful stewardship of remaining assets—including the Tower.



Tulare Local  
Healthcare District

## **2022–2023 | Reassessment and Resolve**

### **From “What Happened?” to “What’s Next?”**

The District begins reassessing the Tower with clarity and discipline. Engineering studies, seismic evaluations, and phased activation strategies replace speculation. The conversation evolves from whether the Tower can be completed to how it can be completed responsibly.

## **2024 | From Planning to Execution**

### **Dedicated Oversight**

In 2024, the District strengthens its execution capacity by bringing on a new Construction Manager and focusing on the foundational work necessary to advance the Tower toward activation. Efforts during this year center on assessment, coordination, and planning—addressing regulatory requirements, evaluating existing conditions, and developing a phased strategy to make progress feasible and responsible.

During this period, the District begins shaping the framework for activating the Tower’s first and second floor. Through careful analysis and financial discipline, the District determines that pursuing this next phase is achievable within its current financial position, setting the stage for formal procurement and execution in the following year.

## **2025 | A Financial Turning Point**

### **Emerging from Bankruptcy**

In spring 2025, the District officially emerges from bankruptcy. News coverage marks this as a major milestone—freeing the District to pursue long-term financial strategies without court oversight. It is a symbolic and practical reset, validating years of corrective action.

With this financial stability in place, the District formally releases a Request for Proposals for General Contracting Services on October 17, 2025, advancing plans to activate the Tower’s first and second floor. This step marks a clear transition from planning to implementation and signals the beginning of the Tower’s renewal chapter.

## **Leadership and Stewardship**

### **The People Behind the Progress**

The District's progress is the result of sustained public service, shared responsibility, and professional execution. Oversight is provided by a five-member elected Board of Directors, each representing district residents and entrusted with guiding policy, governance, and long-term strategy.

#### **Board of Directors**

**Kevin Northcraft** — Board President

**Mike Jamaica** — Vice President

**Xavier Avila** — Secretary

**Kathy Nesper** — Board Member

**Jevon Price** — Treasurer

Together, the Board provides continuity and direction through some of the most challenging periods in the District's history, emphasizing accountability, transparency, and long-term viability.

Supporting the Board is a dedicated District staff responsible for daily operations, financial stewardship, management, and project execution.

#### **District Staff**

**Randy Dodd** — Chief Executive Officer

**Eva Edge** — Administrative Director

**Brett Scott** — Construction Manager

**Stephanie Trueblood** — Assistant Controller

**Shirley Trueblood** — Accounts Payable

This team blends institutional knowledge with disciplined oversight, ensuring that past lessons inform present decisions and future planning.

## **Looking Ahead**

### **From Structure to Service**

The Tower no longer represents what went wrong—it represents what endured. Each completed study, each reopened door, and each step toward compliance reflects a District that chose accountability over abandonment.

The story continues—but now with momentum.