

**FILED**

**MAY - 8 2025**

**CLERK OF THE SUPERIOR COURT  
BY: K. BESANA, DEPUTY CLERK**

1 JEFFREY E. GORDER  
2 [REDACTED]  
3 Redding, CA 96003  
4 Telephone: [REDACTED]  
5 Email: [REDACTED]

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7  
8 SUPERIOR COURT OF THE STATE OF CALIFORNIA

9 COUNTY OF SHASTA

10 JEFFREY E. GORDER

Case No.: 207689

11 Plaintiff,

COMPLAINT FOR TEMPORARY  
RESTRAINING ORDER, PRELIMINARY  
INJUNCTION AND PERMANENT  
INJUNCTION

12 v.

13 DAVID J. RICKERT, COUNTY OF SHASTA  
14 and its BOARD OF SUPERVISORS,

15 Defendants  
16  
17

18  
19 1. Plaintiff, Jeffrey E. Gorder (Plaintiff), brings this civil action against Defendants  
20 David J. Rickert (CEO Rickert), the County of Shasta (County) and its Board of Supervisors  
21 (Board) and alleges as follows:

22 **INTRODUCTION**

23  
24 2. On December 10, 2024, the Board voted to authorize CEO Rickert to consider hiring a  
25 healthcare consultant to address certain healthcare needs in the County. On January 28, 2025,  
26 CEO Rickert advised the Board that he had decided to hire Chriss Street (Street) as a healthcare

1 consultant. On February 4, 2025, the Board voted to authorize CEO Rickert to sign the personal  
2 services agreement (Agreement) with Street. On February 21, 2025, CEO Rickert and Street  
3 signed the Agreement. The Agreement obligates the County to pay Street \$150/hour for his  
4 services with a cap of \$40,000 unless additional payments are agreed to by the County. The term  
5 of the Agreement is six (6) months. Street has already started to perform services under the  
6 Agreement.  
7

8           3. The Agreement is an illegal and/or wasteful expenditure of public funds as prohibited  
9 by Code of Civil Procedure (CCP) section 526a. Plaintiff is informed and believes that: (1)  
10 Street had advanced notice of the County's intent to seek the services of a healthcare consultant  
11 which put him at a competitive advantage over other prospective consultants in violation of the  
12 County Contracts Manual which requires true competitive bidding for personal services  
13 agreements involving the County; (2) the scope of work for the healthcare consultant determined  
14 by the Board could have been carried out by current County staff in the Health and Human  
15 Services Agency (HHS) and Public Health Department and so it was wasteful of County funds  
16 to outsource the work to a consultant at additional County cost; (3) the scope of work for the  
17 healthcare consultant determined by the Board has for many years been carried out by various  
18 healthcare organizations in the County and continues to be carried out to this day, so expending  
19 additional County tax money for a consultant to duplicate that work is wasteful; and (4) Street's  
20 proposal will not significantly effectuate the scope of work determined by the Board and so  
21 providing him with County tax dollars to carry out his proposal is wasteful.  
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24           4. Plaintiff seeks a temporary restraining order and preliminary and permanent  
25 injunctions to prevent and prohibit the County and Street from taking any further actions to carry  
26

1 out the terms of the Agreement. In addition, Plaintiff seeks an order that CEO Rickert and  
2 Chairman of the Board, Kevin Crye (Crye) are jointly and severally required to reimburse the  
3 County general fund for any payments that have already been made to Street under the illegal  
4 and/or wasteful Agreement.  
5

## 6 **PARTIES**

7 5. Plaintiff is a tax-paying resident of the County and has paid both sales and property  
8 taxes in the County during the one-year period prior to the filing of this Complaint. CEO  
9 Rickert is the Chief Executive Officer of the County; the County is a political subdivision of the  
10 State of California; and the Board is the governing body for the County.  
11

## 12 **JURISDICTION AND VENUE**

13 6. This Court has jurisdiction over the subject matter of this action under CCP 526a.  
14 Venue is proper in this Court because the agreement was authorized and approved by the Board  
15 in the County on February 4, 2025. CEO Rickert and Street signed the agreement in the County  
16 on February 21, 2025. The decision is final and any administrative process is complete.  
17

## 18 **FACTUAL BACKGROUND**

### 19 **A. Street's Prior Involvement with the County**

20 7. When current Chairman of the Board, Kevin Crye (Crye) was elected to the Board in  
21 November, 2022, the County CEO position was being staffed on an interim basis. One of Crye's  
22 stated priorities when he took office in January, 2023 was to hire a full-time CEO. I am  
23 informed and believe that Crye encouraged Street to apply for the position and promoted Street  
24 to some fellow Board members in early 2023, including Supervisors Mary Rickert and Tim  
25 Garman. I am informed and believe that Crye met Street during Crye's campaign for Supervisor  
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1 in 2022 and that Street assisted Crye during his campaign. Street applied and interviewed for the  
2 position. Eventually, on March 14, 2023, Street was offered the CEO position conditioned on  
3 passing a background check. On or about March 21, 2023, during the pendency of the  
4 background check, I am informed and believe that Street was accused of harassing a juvenile  
5 female at the YMCA. I am informed and believe that the Redding Police Department (RPD)  
6 responded and initiated an investigation. The alleged incident at the YMCA was reported on by  
7 some County media organizations. On March 28, 2023, the Board stated it had received the  
8 background check on Street and Street had five (5) business days to respond. On April 6, 2023,  
9 the Board rescinded the employment offer to Street without explanation.  
10

11  
12 8. After Street's employment offer was rescinded, he went on a vendetta against the  
13 County. His first accusation was that the County had engaged in at least one illegal financial  
14 transaction and was covering up a severe financial crisis. Street claimed that he had learned of  
15 the illegal transaction and financial crisis during preparation for his CEO interviews. Street  
16 made these accusations in a public interview with a local media organization and at the April 11,  
17 2023 Board meeting. County Auditor Nolda Short responded to Street's allegations at the same  
18 Board meeting and refuted his claims about an illegal financial transaction and a severe financial  
19 crisis in the County. To Plaintiff's knowledge, nothing more was ever heard from Street publicly  
20 about these issues.  
21

22  
23 9. Street's next retaliatory action against the County was to file a letter with the Board on  
24 April 24, 2023 in which he accused the County of racism during the CEO recruitment process.  
25 Street claimed that during his interview with County Department Heads he was asked about his  
26 ethnicity which is Hispanic. He claimed that the County discriminated against him in the hiring  
27

1 process because it feared that his Hispanic ethnicity would somehow lead him to uncover  
2 pervasive corruption and racism at the County Sheriff's Office and Board. Street also claimed  
3 that former Supervisor Mary Rickert conspired with others to frame him at the YMCA by  
4 initiating a "sting" operation involving an underage female so that he wouldn't be hired as  
5 County CEO. Street claimed that he had filed a "criminal referral" against Supervisor Rickert  
6 with RPD alleging that she had filed a false police report against him. Street made other  
7 unsubstantiated allegations, including the claim that Supervisor Mary Rickert was aware of  
8 Medi-Cal fraud that was ongoing in the County in order to facilitate large salaries going to  
9 County executives, and that he had been spied on by former Supervisor Joe Chimenti's staff  
10 member and former Sheriff Eric Magrini's son "which may have involved using a child under  
11 court custody in a "sting" operation to claim Chriss Street family (sic) committed child abuse"  
12 (a copy of Street's 4/24/23 letter to the Board which was provided to Plaintiff as part of a Public  
13 Records Act (PRA) request is attached hereto as Exhibit A). Street requested that the Board join  
14 him in making a complaint to the County Grand Jury regarding his unsubstantiated allegations.  
15  
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17

18 10. Despite Street's obvious animus towards the County and his unsubstantiated claims  
19 against County Officials, I am informed and believe that Crye continued to work with Street  
20 behind the scenes on a number of projects and issues from April, 2023 to the present.  
21

22 11. I am informed and believe that in 2023 Crye tried to pressure CEO Rickert to hire  
23 Street for a position within the County which was ultimately unsuccessful due to push-back by  
24 County staff. I am informed and believe that CEO Rickert told former Supervisors Mary Rickert  
25 and Tim Garman that he would never hire Street for a position in the County.  
26

1 12. I am informed and believe that in 2023 and 2024 Crye tried to arrange a number of  
2 personal services agreements between Street and the County whereby Street would provide  
3 certain services to the County. I am informed and believe that County staff pushed back against  
4 these proposed agreements because they would have been wasteful and unnecessary and,  
5 therefore, those agreements were never entered into.  
6

7 13. I am informed and believe that in 2024 Street applied to be the Chief Financial  
8 Officer (CFO) of HHSA. I am informed and believe that Crye and CEO Rickert tried to pressure  
9 County staff to hire Street for the position but that staff pushed back because staff believed that  
10 such an agreement was intended as a quid pro quo for personal services Street had provided to  
11 Crye and was therefore illegal. Street was never hired.  
12

13 14. I am informed and believe that Crye made it known to County staff that he wanted to  
14 get Street a position with the County in order to compensate Street for the work Street had been  
15 doing for Crye.  
16

17 15. In sum, I am informed and believe that prior to the decision to hire Street as a  
18 healthcare consultant, CEO Rickert and Crye made numerous efforts to award County contracts  
19 to Street as well as a County employment position to Street in order to satisfy Crye's desire to  
20 compensate Street for work Street had done and would continue to do for Crye. I am also  
21 informed and believe that CEO Rickert was under great pressure from Crye to find a County  
22 position or agreement for Street in order to reimburse Street for work he had done for Crye.  
23

24 **B. Crye's Decision to Seek a Healthcare Consultant**

25 16. At the December 10, 2024 Board meeting, Crye sponsored and introduced the idea of  
26 hiring a healthcare consultant to address certain healthcare needs in the County. Crye read a  
27

1 carefully crafted motion by which he moved that “staff identify qualified consultants to assist  
2 staff in addressing a lack of health care options in Shasta County and create a **scope of work** for  
3 a contract with a qualified consultant to bring back to the Board for discussion and approval of  
4 the **scope of work** and selection of a consultant.” Crye said that he had been working with Dr.  
5 Paul Dhanuka (Dhanuka), a local physician who was elected to the Redding City Council in  
6 November, 2024, and they had been “walking properties” together, apparently with the goal of  
7 implementing Dhanuka’s plan to develop a substance-abuse and mental health treatment facility  
8 in addition to a medical school where healthcare professionals would be trained. Crye indicated  
9 that he and Dhanuka were looking to increase the number of medical professionals in the County,  
10 including primary care physicians, as well as developing a facility where people could be treated  
11 for substance use and mental health disorders. Crye stated that he was looking to move forward  
12 with the healthcare consultant “quickly” because he did not believe that existing healthcare  
13 organizations in the County were doing much of anything to address pressing healthcare needs.  
14 Crye stated that he didn’t want a full-time staff person with benefits to work on this problem but  
15 wanted a consultant who could come aboard very quickly for a budget of no more than \$40,000  
16 to \$50,000 and for a term of no more than three to six months. Crye said the reason he wanted to  
17 consultant agreement to be no more than \$50,000 was because that would allow CEO Rickert to  
18 enter into the agreement on his own without having to go to the Board for approval. I am  
19 informed and believe that prior to December 10, 2024, no effort was made to ascertain whether  
20 the project could be conducted within the County Health and Human Services Agency (HHS  
21 which includes the County Public Health Department, nor was any effort made to ascertain what  
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1 healthcare organizations in the County were currently doing to increase the number of healthcare  
2 providers in the County.

3 17. Supervisor Mary Rickert was taken aback by the idea of hiring a healthcare  
4 consultant because she was deeply familiar with the numerous healthcare organizations in the  
5 County and the work they had been doing over many years to address healthcare needs in the  
6 County, including the need to increase the number of physicians in the County. Supervisor  
7 Rickert specifically mentioned the Shasta Health Assessment and Redesign Collaborative  
8 (SHARC), of which she was a member, and the Health Alliance of Northern California (HANC),  
9 County organizations that have been working to improve access to quality healthcare in the  
10 County for many years. SHARC is composed of representatives from almost all healthcare  
11 organizations in the County, including the CEOs of Shasta Regional Medical Center, Mercy  
12 Medical Center, Shasta Community Health Center, Hill Country Health and Wellness Center,  
13 Mayers Memorial Hospital, Partnership HealthPlan, and others. Laura Burch, the leader of the  
14 HHSA, and Dr. James Mu, the County Public Health Officer (PHO) were also members of  
15 SHARC. Supervisor Rickert said that she believed the County would be wasting money by  
16 hiring a healthcare consultant when the work was already being done by SHARC and others.  
17  
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19 18. After discussion, the Board voted to authorize CEO Rickert to search for a healthcare  
20 consultant with the understanding that before hiring a consultant he would meet with SHARC,  
21 HANC and other healthcare professionals to find out what work was already being done to  
22 recruit physicians to the County and improve access to healthcare in general. This was meant to  
23 ensure that efforts would not be duplicated and County dollars would not be wasted.  
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19. What perhaps no one other than Crye was aware of, I am informed and believe that Crye was working behind the scenes on the healthcare issue not only with Dhanuka but with Street. It appears that Crye and Street collaborated to draft the language for the motion that Crye introduced at the December 10, 2024 meeting to hire a healthcare consultant. That assumption is based on the fact that by December 2, 2024, eight days before the healthcare consultant idea was first introduced to the public by Crye’s motion, Street had already finalized a “**SCOPE OF WORK**” (the identical language contained in Crye’s motion) which he would carry out as a healthcare consultant for the County. In that document, Street stated that the “County of Shasta is responding to the primary care physician crisis by engaging a subject matter expert...” Street wrote that recruitment efforts by local medical organizations “have not been effective,” something Crye also stated despite his apparent lack of awareness of successful efforts that have been made over many years by SHARC and its member organizations. (A copy of Street’s SCOPE OF WORK is attached hereto as Exhibit B. Street’s SCOPE OF WORK was provided to Plaintiff as part of a PRA request. It is unclear at this point when CEO Rickert was given Street’s SCOPE OF WORK and CEO Rickert has offered no explanation as to how Street knew of the plan to hire a healthcare consultant before it was presented publicly on December 10, 2024.)

20. Street’s SCOPE OF WORK is basically Dhanuka’s idea of developing a medical school and “Chemical Dependency Hospital. Given that Street apparently had advanced notice of Crye’s intention to seek the services of a healthcare consultant, it is not surprising that Street’s proposal stated his project would take no more than six months at a cost of \$40,000 for services,

1 and up to \$8,500 in out-of-pocket expenses, all conveniently within CEO Rickert's signing  
2 authority of \$50,000 as requested by Crye at the December 10, 2024 Board meeting.

3 21. On January 7, 2025, a new Board convened with three new Supervisors taking their  
4 seats. CEO Rickert requested that the Board provide more direction about the qualifications it  
5 was looking for in a healthcare consultant and the scope of work to be undertaken. CEO Rickert  
6 stated that he was looking in part for **"somebody who is not just a medical professional but  
7 somebody who has experience and a proven track record of implementing medical capital  
8 projects."** In addition, CEO Rickert wanted clarification as to whether he would be making the  
9 decision on the consultant or whether the Board wanted to decide. Crye was quick to respond  
10 that he was fine with CEO Rickert making the decision and he didn't think a "medical  
11 professional" was needed. I am informed and believe that Street is not a "medical professional."  
12

13 22. With regard to clarification on the "scope of work" that would be performed by the  
14 consultant, the Board decided that the "scope of work" would be as follows: (1) How to ensure  
15 that the County has sufficient medical providers for the foreseeable future; and (2) What are the  
16 most cost-effective ways to reduce premature death in the County. The Board emphasized that  
17 the main priority for the consultant to address was how to ensure that the County has sufficient  
18 medical providers for the foreseeable future. There was nothing mentioned about "capital or  
19 shovel-ready projects." The Board decided that CEO Rickert could make the hiring decision.  
20  
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### 22 **C. CEO Rickert's Initial Search for Prospective Healthcare Consultants**

23 23. I am informed and believe that on December 13, 2024, CEO Rickert attended a  
24 meeting of SHARC and heard about the efforts of its member organizations which been ongoing  
25 for many years to improve County residents' access to healthcare, increase the healthcare  
26

1 workforce, and generally promote the overall health, welfare and longevity of County residents  
2 (Attached hereto as Exhibit C is the AGENDA for that meeting which includes a list of many of  
3 the members of SHARC, including PHO James Mu, M.D. This was received by Plaintiff as part  
4 of a PRA.) I am informed and believe that Robin Schurig (Schurig), Executive Director of  
5 HANC led a discussion about the December 10, 2024 meeting of the Board regarding the  
6 healthcare needs of the County, as well as a discussion about the work of the “Healthcare  
7 Workforce Development” Committee.  
8

9  
10 24. I am informed and believe that on or about January 16, 2025, CEO Rickert met with  
11 Jenee Bauer, Director of Physician Services for Mercy Medical Center Redding, Mercy Medical  
12 Center Mt. Shasta, and St. Elizabeth Community Hospital in Red Bluff. Ms. Bauer is  
13 responsible for workforce recruitment efforts for those facilities. She is responsible for  
14 recruiting physicians, nurse practitioners and physician-assistants. I am informed and believe Ms.  
15 Bauer shared with CEO Rickert the successes her team had achieved over the past two years  
16 which I am informed and believe included recruiting 28 physicians and 10 Advanced Practice  
17 Providers (AAPs, which include Nurse Practitioners and Physician Assistants) to Shasta,  
18 Siskiyou and Tehama Counties. Of those 38 recruits, I am informed and believe that 10 were  
19 located in Tehama County, 11 were located in Siskiyou County, and 17 were located in Shasta  
20 County. I am informed and believe that Ms. Bauer looked forward to partnering with the  
21 County to enhance her recruitment efforts and strengthen the community’s ability to retain  
22 skilled medical professionals (Jenee Bauer’s summary of recruitment successes and efforts  
23 which was provided to CEO Rickert is attached hereto as Exhibit D, also provided in response to  
24 a PRA request).  
25  
26

1 25. I am informed and believe that at some point during his information-gathering  
2 process, CEO Rickert consulted with Acting Director of HHS, Christy Coleman. It is unknown  
3 whether CEO Rickert talked to Ms. Coleman about whether the Public Health Department under  
4 the leadership of PHO Dr. James Mu could work on the project rather than hiring a consultant.  
5

6 26. I am informed and believe that sometime before January 17, 2025, CEO Rickert  
7 contacted Dhanuka to discuss County healthcare needs. It is not clear who referred CEO Rickert  
8 to Dhanuka or why he wanted to talk to Dhanuka.  
9

10 27. I am informed and believe that by January 17, 2025, CEO Rickert had generated a  
11 list of nine (9) prospective healthcare consultants he wanted to contact to see if they would be  
12 interested in interviewing for the position. Because Crye had presented this issue as an urgent  
13 one that needed to be addressed immediately, CEO Rickert concluded it was not feasible for the  
14 County to issue a formal Request for Proposal (RFP) which I am informed and believe is the  
15 preferred method the County uses to obtain outside services. Rather, CEO Rickert decided to  
16 utilize an informal interview process which County Counsel advised was authorized by the  
17 County Contracts' Manual. Given the short time frame for a turnaround on his efforts, CEO  
18 Rickert decided to hold the interviews on January 22, 2025. This extremely short time frame  
19 from the request for an interview to the interview itself meant that prospective consultants  
20 would have very limited time of about five days to develop a proposal.  
21  
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#### 23 **D. Street's Involvement with Dhanuka**

24 28. On January 21, 2025, Dhanuka had Street present to the Redding City Council at a  
25 regular Council meeting Dhanuka's plan to develop a medical school, which Dhanuka and Crye  
26 had been discussing and working on for many months. It is unclear how long Street and  
27

1 Dhanuka had been working together but Street said he “had joined the effort that Dhanuka had  
2 begun to make the County a regional healthcare hub.” I am informed and believe that Street  
3 presented the same PowerPoint slides to the Council that would become part of his presentation  
4 to CEO Rickert during his interview for the County healthcare consultant position the next day,  
5 January 22, 2025.  
6

7 29. Street stated that “we think the answer (to the shortage of healthcare providers) is to  
8 develop our own medical school.” Dhanuka stated that Street would be looking to bring in  
9 federal funding for this project and that Street “wants to work on this with the County.”  
10 Dhanuka also mentioned the Chemical-Dependency/Mental Health facility he wants developed  
11 and said that the County should work on that facility as well. Dhanuka said he “wanted the  
12 County to pay for the facility” and “the County should bear the financial burden” for the projects  
13 he was proposing. Dhanuka was not looking for any action or vote on the part of the City  
14 Council, he was just hoping that it would “support” the project and say “it’s a good idea.”  
15  
16

17 30. After the presentation, while most City Council members supported Dhanuka  
18 personally and agreed that increasing the number of physicians in the County was important,  
19 Councilwoman Audette stated that the effort to increase the number of medical professionals in  
20 the County has been an ongoing effort over many years by many organizations including the  
21 Chamber of Commerce, the Economic Development Corporation, local Hospitals, Shasta  
22 College, Simpson University, etc. She said specifically that she knew that SHARC had been  
23 engaged in that effort since 2009 and “its exact purpose is everything you’re talking about - it’s  
24 what they do.” She said that what Dhanuka and Street were talking about “already exists” with  
25 SHARC but she encouraged them to keep it alive in the public conversation. Councilwoman  
26

1 Erin Resner said that she supports the idea but would never support a project Street was involved  
2 with because he had undertaken numerous “witch hunts” against local government officials and  
3 non-profit leaders and she believed it would be a liability to the City were it to become involved  
4 with Street.  
5

6 **E. CEO Rickert’s Interviews with Prospective Healthcare Consultants**

7 31. I am informed and believe that of the nine people CEO Rickert contacted to request  
8 interviews, all were healthcare consultants or current or recently retired healthcare executives  
9 with substantial healthcare experience in the County, with the exception of Street. It is not clear  
10 how CEO Rickert was informed that Street was interested in the healthcare consultant position or  
11 why CEO Rickert thought Street was potentially qualified, but Street ended up on the final list of  
12 nine prospective consultants. I am informed and believe that Street is not now, nor has he ever  
13 been, a healthcare consultant; nor is he a member now, nor has he ever been, a member of a local  
14 healthcare organization such as SHARC, HANC, etc. In fact, I am informed and believe that  
15 Street has not had any significant work experience in the healthcare industry for over twenty-five  
16 (25) years.  
17

18  
19 32. According to CEO Rickert, of the nine (9) prospective consultants he contacted, six  
20 (6) declined for a variety of reasons, including the limited budget and the short time frame for  
21 completion (two (2) said that a scope of work of the kind proposed would not even be  
22 considered for less than \$150,000), and one was unavailable for contact because of the short time  
23 frame and the intervening Holidays. In the end, only two (2) of the nine (9) consultants  
24 contacted said they could meet the scope of work within the time-frame and budget - Street and a  
25 healthcare consulting firm named Facktor which is a nationwide firm with over 70 consultants  
26

1 headquartered in Los Angeles (Facktor's proposal is attached hereto as Exhibit E, provided  
2 pursuant to PRA request).

3 33. One of the prospective consultants that CEO Rickert contacted was Doreen  
4 Bradshaw, a past Executive Director of HANC for many years and a long-time professional in  
5 the County healthcare space. She declined to interview "because of the scope of the project,  
6 uncertainty of the healthcare landscape, and short timeline to conduct a meaningful process," but  
7 she did agree to review the "scope of work" the County was asking the consultant to perform.

8 (Doreen Bradshaw's emailed response to CEO Rickert in that regard is attached hereto as Exhibit  
9 F, received by Plaintiff as part of his PRA request for all records related to CEO Rickert's search  
10 for a healthcare consultant). Ms. Bradshaw opined that "the scope of the project needed to be  
11 narrowed" because the effort to increase healthcare providers is sufficiently challenging itself  
12 without adding in the daunting task of trying to reduce premature deaths in the County. She  
13 stated that "there are a number of projects already addressing this" and so to prioritize both  
14 objectives was too broad. She strongly suggested that CEO Rickert and the County work closely  
15 with SHARC on the project because they "have been doing countywide health planning and  
16 redesign" for over fifteen years, including working on developing the healthcare workforce. She  
17 stated that the numerous healthcare agencies that comprise SHARC would offer a tremendous  
18 amount of knowledge and expertise. She said that "a lot is being done locally to address these  
19 challenges (e.g. increasing the number of doctors and reducing premature death in the County)...  
20 and if it was an easy fix they would have done it by now." She did not think the County had the  
21 ability on its own to make a fix that would bring in more providers through one "shovel ready  
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1 project with grants;” rather, “the changes need to be systemic and policy needs to support those  
2 changes.”

3 34. I am informed and believe that on January 22, 2025, the day after his presentation to  
4 the Redding City Council described earlier on pages 12-13, Street interviewed with CEO Rickert  
5 for the healthcare consultant position. I am informed and believe that Street provided CEO  
6 Rickert with the same PowerPoint slides he used at the City Council presentation. Plaintiff is  
7 unaware if Street provided CEO Rickert with his December 2, 2024 SCOPE OF WORK at this  
8 time.  
9

10 35. I am informed and believe that CEO Rickert had a conference call with a Partner of  
11 Facktor on or about January 24, 2025, and Facktor sent its proposal to CEO Rickert on or about  
12 January 27, 2025 (See Exhibit E for Facktor’s proposal).  
13

14 **F. Decision to Hire Street as Healthcare Consultant**

15 36. On January 28, 2025, CEO Rickert announced at the Board meeting that he had  
16 decided to hire Street as the healthcare consultant because Street “put forward the most  
17 comprehensive proposal” and had healthcare management experience along with extensive  
18 financial experience.  
19

20 37. On February 4, 2025, Crye brought the issue of Street’s hiring before the Board,  
21 apparently because there had been significant criticism of the hiring of Street both from the  
22 public and the media. Crye said he wanted there to be complete transparency about the process.  
23 Crye said the process began with discussions between him and Dhanuka throughout Dhanuka’s  
24 campaign about the need to get an in-patient substance abuse and mental health treatment facility  
25 and increase the number of physicians in the County. Crye said that CEO Rickert had conducted  
26

1 a thorough search for a consultant and the public needed to get on board and not criticize. CEO  
2 Rickert addressed the “scope of work” the Board had directed the consultant to address but for  
3 some reason added in the new criteria that the consultant should present a “shovel-ready solution”  
4 for the Board to consider. It is not clear where CEO Rickert came up with the idea of a “shovel-  
5 ready solution” because that was not in the “scope of the work” the Board approved on January 7,  
6 2025, but it is important to note that Street’s proposal included new capital projects as promoted  
7 by Dhanuka as the means of meeting the scope of work rather than working with existing  
8 resources.  
9

10  
11 38. CEO Rickert described the interview process and said he recommended Street  
12 because had a background in healthcare and government finance, was familiar with local data  
13 and trends and had already reviewed local healthcare assessments. CEO Rickert provided  
14 Street’s PowerPoint slides in the Board packet but did not include Street’s “SCOPE OF WORK.”  
15 Supervisor Allen Long could not support the recommendation because there was no information  
16 as to why Street failed the background check for the CEO position and he did not believe that  
17 Street had the requisite experience in the healthcare industry. In addition, Supervisor Long did  
18 not see the relevance of Street’s background with regard to the goal of bringing more physicians  
19 to the County. Supervisor Long did not think throwing \$40,000 at the issue when other  
20 consultants wanted \$150,000 would move the needle. Considering that SHARC and other  
21 healthcare organizations had been doing this work for years, Long believed the healthcare  
22 consultant project was redundant and wasteful.  
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25 **G. Plaintiffs’ Efforts to Obtain Clarification About Street’s Proposal**  
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1 California courts recognize the importance of taxpayer suits to ensure government  
2 accountability: “[T]he individual citizen must be able to take the initiative through taxpayers’  
3 suits to keep government accountable on the state as well as on the local level.” (*Vasquez v. Cal.*  
4 (2003) 105 Cal.App.4<sup>th</sup> 849, 854.)

6 43. California courts broadly and liberally construe Section 526a to promote its remedial  
7 purpose. (See *Blair v. Pitchess* (1971) 5 Cal.3d 258, 267-68.) In that connection, taxpayer  
8 actions are permitted for both “actual or threatened expenditures of public funds.” (*Waste Mgmt.*  
9 *of Alameda County, Inc. v. County of Alameda* (2000) 79 Cal.App.4<sup>th</sup> 1223, 1240, disapproved  
10 on other grounds.) Taxpayer actions may be used to challenge an agency’s decision to enter into  
11 an illegal contract. (See, e.g., *Miller v. McKinnon* (1942) 20 Cal.2d 83, 89; *A.J. Fistes Corp. v.*  
12 *GDL Best Contractors, Inc.* (2019) 38 Cal.App.5<sup>th</sup> 677, 689). An injunction preventing the  
13 illegal or wasteful expenditure of funds is explicitly authorized. (CCP 526a, subd. (a).)

15 **FIRST CAUSE OF ACTION**

16 **(Taxpayer Action for Illegal and Wasteful Expenditure – Code Civ. Proc. 526a)**

17 44. Petitioner hereby incorporates each and every paragraph set forth above.

19 45. The decision to enter into the Agreement with Street constitutes an illegal act and a  
20 waste of and/or injury to the County’s funds and/or property under CCP 526a. The Board and  
21 CEO Rickert authorized the Agreement with Street despite the fact that Street had demonstrated  
22 himself to be a potential liability to the County and despite the fact that Street had apparently  
23 received advanced notice of the County’s intention to hire a healthcare consultant, including the  
24 scope of work sought, the financial constraints of the proposed consultancy, and the time by  
25 which the consultancy project was to be completed, all of which gave Street a competitive

1 advantage over other prospective consultants in violation of the County's Contracts Manual,  
2 Administrative Policy 6-101 (Policy). Section 5.3 of the Policy encourages competitive  
3 procurement because it "assures the public that all prospective consultants/contractors have had  
4 an equal and fair opportunity to be considered." Here, Street was chosen as the consultant  
5 because of his relationship with Crye and Crye's intention to commit the County to Dhanuka's  
6 plan to build a medical school and a chemical-dependency treatment center, as well as to reward  
7 Street for his work for Crye over the previous two years. The process of engaging other potential  
8 consultants was apparently nothing but a ruse used to cover the underlying intention to hire  
9 Street. As such, the spirit of the competitive bidding process was violated.

12 46. The Agreement is also wasteful in that:

13 a. The scope of work could have been efficiently and effectively undertaken by current  
14 County staff in the HHS and Public Health Department, without the necessity of utilizing  
15 additional County funds to hire an outside consultant.

16 b. The scope of work was already being undertaken by numerous healthcare  
17 organizations within Shasta County, including SHARC, Mercy Medical Center, Shasta  
18 Community Health Center, Shasta College and Shasta Regional Medical Center.

19 c. Street's proposal would not meet the objectives articulated by the Board and included  
20 within the scope of work the consultant was to carry out.

21 d. CEO Rickert rejected the proposal submitted by a far more qualified healthcare  
22 consultant, Facktor, a nationwide healthcare consultancy firm with over 70 consultants and a  
23 proven track-record of healthcare consultancy work.

1 47. Defendant's wrongful conduct under CCP 526a, unless and until enjoined and  
2 restrained by order of this court, will cause great and irreparable injury to Plaintiff in that his tax  
3 dollars will continue to be spent in furtherance of an illegal and/or wasteful Agreement. In  
4 addition, Plaintiff's trust in the County's bidding process for outside services will continue to  
5 suffer if the principle of fairness and equal competition in that process is not upheld. There is no  
6 adequate remedy at law for these injuries.  
7

8  
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10  
11 **PRAYER FOR RELIEF**

12 Wherefore, Complainant prays that the Court issue the following relief:

13 1. A Temporary Restraining Order (TRO) prohibiting Defendants and Street from taking  
14 any further actions, spending any public funds or using any public resources under the  
15 Agreement, until the hearing on a request for a preliminary injunction.  
16

17 2. A preliminary injunction prohibiting Defendants and Street from taking any further  
18 actions, spending any public funds, or using any public resources in furtherance of the  
19 Agreement until trial.

20 3. A permanent injunction prohibiting Defendants and Street from taking any acts,  
21 spending any public funds, or using any public resources in furtherance of the Agreement.  
22

23 4. That Plaintiff be reimbursed for his reasonable costs associated with this action.

24 5. For such other and further relief as the Court deems just and proper.  
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Dated: 4/23, 2025

Respectfully submitted,  
By:   
JEFFREY E. GORDER,

In Pro Per

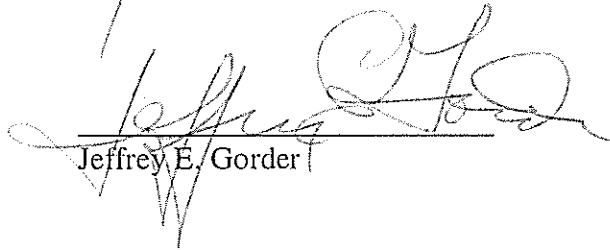
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**VERIFICATION**

I, Jeffrey E. Gorder, am the Plaintiff in the above action. I have read this Complaint and know its contents. The same is true of my own knowledge, except as to those matters that are alleged in the complaint on information and belief, and as to those matters I believe them to be true.

I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed in Shasta County, California on 4/23, 2025

  
\_\_\_\_\_  
Jeffrey E. Gorder

# EXHIBIT

A

## **Chriss W. Street Report on Racism in Shasta County CEO Recruitment to Hide Public Corruption Dated 4-24-23**

Chriss W. Street hereby requests Shasta County Supervisors join in a referral to the Shasta County Grand Jury to investigate racism in the recruitment of a Shasta County Executive Officer ("CEO")<sup>1</sup> in a scheme to allegedly hide known public corruption.

Chriss Street is informed, believes and alleges the following:

During final Shasta County CEO interviews with a group of Shasta County department heads, Chriss Street was asked about his ethnicity and answered Hispanic. Street called Shasta County recruitment agent WBCP and told its President Wendi Brown<sup>2</sup> he was not seeking any racial advantage from his Hispanic ethnicity and that the question was potential for bias. Ms. Brown acknowledged all other Shasta County CEO finalist ethnicity was not questioned, but stated there was no bias or reason for concern.

Ms. Brown knew or should have known Shasta County was blocking release of an Ellis & Makus LLP investigative report that threatened to expose racial animus and potential corruption by Shasta County Assistant CEO Eric Magrini during his tenure as Shasta County Sheriff. Sheriff Magrini's practices from December 2019 to February 2021 were so repugnant, Sheriff's Administration Association and Shasta County Deputy Sheriff's Association both for the first time both issued Sheriff Magrini letters of "No Confidence."<sup>3</sup>

Both "No Confidence" letters from Sheriff leadership and Sheriff officers were due to knowledge of Sheriff Magrini's alleged corrupt and illegal attempt during the Black Lives Matter movement to take pressure off Shasta County Supervisors, including Third District Supervisor Mary Rickert, by fraudulently trying to make 20-year veteran and highly-decorated Deputy a "sacrificial lamb" by claiming Sargent Jose Gonzalez was unjustified in the 2020 shooting death of "Thomas Barbosa, 41, after he fled from law enforcement, drove off a cliff, and refused deputies' commands while holding a knife."<sup>4</sup>

Sheriff Magrini who had a bad relationship with "Joe Gonzalez" from working together on the Shasta County SWAT Team, demonstrated his racial animus toward Hispanics by referring around the Sheriff's Office to Sergeant Jose Gonzalez as: "That little spic."<sup>5</sup>

Sheriff Magrini's "sacrificial lamb" scheme almost succeeded, but for Sheriff Captain John Patrick Kropholler, third ranking Department member, directly going against his boss Sheriff Magrini, by releasing to the court exculpatory evidence concealed by Sheriff Magrini as proof that Sargent Gonzalez was justified in shooting death of Barbosa.<sup>6</sup>

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<sup>1</sup> <https://www.shastacounty.gov/personnel>

<sup>2</sup> <https://wbcpsc.com/>

<sup>3</sup> <https://krctv.com/news/local/no-confidence-and-ethics-concerns-come-to-light-as-former-sheriff-magrini-starts-new-job>

<sup>4</sup> <https://krctv.com/news/local/igo-deputy-involved-shooting-in-2020-deemed-justified-following-review>

<sup>5</sup> Witness name redacted but will testify if given whistleblower protection.

<sup>6</sup> <https://krctv.com/news/local/igo-deputy-involved-shooting-in-2020-deemed-justified-following-review>

## **Chriss W. Street Report on Racism in Shasta County CEO Recruitment to Hide Public Corruption Dated 4-24-23**

Sheriff Magrini retaliated with ethnic animus against Captain Kropholler by calling attention to his German heritage and drawing a Hitler moustache on his Department picture to encourage Black Lives Mater to attack Kropholler as a NAZI,<sup>7</sup> then suspended Captain Kropholler on an employee harassment charge.<sup>8</sup> After Magrini became Assistant CEO, new Sheriff Michael Johnson cleared Captain Kropholler of charges.<sup>9</sup>

Supervisor Mary Rickert had a long history of conspiring with Sheriff Magrini in an unethical and illegal scheme to access a tremendous number of "101 Specials." The 101 refers to the call sign of Shasta County Sheriff Magrini broadcast on Sheriff radios.

Third District Supervisor Rickert took full advantage of "101 Specials" as part of a culture understood by Deputy Sheriffs as quid pro quo "favors given, and favors taken." The Shasta County Sheriff dispatch logs evidence that Supervisor Mary Rickert unethically used "101 Specials" to have Deputy Sheriffs on patrol prioritize doing "personal errands" for her. Those dispatch logs also evidence Supervisor Mary Rickert appears to have illegally used "101 Specials" to do favors for her political donors and may have used "101 Specials" to intimidate and/or retaliate against political adversaries.

Supervisor Mary Rickert became very defensive and then hostile during final Shasta County CEO recruitment interviews of Chriss W. Street when she realized Street had figured out that the Shasta County 2021-2022 Audit ended June 30, 2022<sup>10</sup> failed to disclose General Reserve cash was a third of the safety Target<sup>11</sup>, and that Street knew the Shasta County Mental Health Board that she sits on was under federal and state investigative audit for potentially defrauding Medi-Cal by understaffing grant programs.

Third District Supervisor Mary Rickert learned from Shasta County CEO interviews that Street was Hispanic. Despite Supervisor Rickert voting against Street, Supervisors Jones, Garman, Kelstrom and Crye voted for Chriss W. Street for Shasta County CEO.

Chriss W. Street is informed, believes and alleges that Shasta County Third District Supervisor Mary Rickert leaked confidential information to Shasta County Assistant CEO Eric Magrini that Chriss W. Street is Hispanic.

Both Shasta County Supervisor Mary Rickert and Assistant CEO Eric Magrini had valid reasons to fear that if Chriss W. Street as a Hispanic became Shasta County CEO, he would investigate and disclose the facts related to the false and potentially fraudulent effort to make "that little spic" Sergeant Jose Gonzalez a "sacrificial lamb"; the scheme to retaliate against Sheriff Captain Pat Kropholler to coverup the "sacrificial lamb"

<sup>7</sup> <https://krcrtv.com/news/local/former-deputy-sues-shasta-county-sheriffs-office-for-hostile-work-environment>

<sup>8</sup> Id.

<sup>9</sup> Id.

<sup>10</sup> [https://www.shastacounty.gov/sites/default/files/fileattachments/auditor-controller/page/2643/2022\\_shasta\\_county\\_final\\_acfr.pdf](https://www.shastacounty.gov/sites/default/files/fileattachments/auditor-controller/page/2643/2022_shasta_county_final_acfr.pdf)

<sup>11</sup> [https://www.shastacounty.gov/sites/default/files/fileattachments/auditor-controller/page/2643/2022\\_shasta\\_county\\_final\\_acfr.pdf](https://www.shastacounty.gov/sites/default/files/fileattachments/auditor-controller/page/2643/2022_shasta_county_final_acfr.pdf) Page 77-78

## **Chriss W. Street Report on Racism in Shasta County CEO Recruitment to Hide Public Corruption Dated 4-24-23**

scheme, and the Shasta County culture of quid pro quo "favors given, and favors taken" that facilitated Third District Supervisor Mary Rickert being able to take full advantage of "101 Specials" for personal benefits, political enhancements, and to potentially use as a retaliatory weapon against opponents.

Chriss W. Street has alleged in a criminal referral prominently naming Third District Supervisor Mary Rickert and filed with the Redding Police Department under Penal Code 148.5, that makes it a crime to file a false police report, that conspirators involved the Shasta Family YMCA to file a complaint that Redding Police determined was "unfounded", to portray Street as child molestation to prevent Chriss W. Street from becoming Shasta County CEO and exposing public corruption.<sup>12</sup>

Chriss W. Street has also noticed the Shasta County Superior Court and Marshal's Office regarding Shasta County Assistant CEO Eric Magrini, a former Supervisor Joe Chimenti staff member, and Assistant CEO Magrini's son in a scheme to spy on Chriss Street. Chriss W. Street alleged that the scheme may have involved using a child under court custody in a "sting" operation to claim Chriss Street family committed child abuse.

Dated April 24, 2023

\_\_\_\_ Chriss W. Street \_\_\_\_\_

Chriss W. Street  
Business Address:

Privacy Information

Delivered by Email to Shasta County Supervisors via CEO Mary Williams and Shasta County Grand Jury via Public Information Officer David Maung.

WBCP Inc. President Wendi Brown

Chriss W. Street signed letters sent through USPS.

---

<sup>12</sup> Refer to Redding Police Department, Shasta County Supervisors, and the Shasta County Grand Jury

# EXHIBIT

## B

# SCOPE OF WORK

Name of Company: Chriss Street & Company  
Project Name: Initiative: Expand Primary Care Physician Coverage  
Project Manager: Chriss W. Street  
Date: 12/02/2024

## PROJECT BACKGROUND AND DESCRIPTION STATEMENT

County of Shasta Supervisors are informed of the healthcare crisis caused by the ratio of primary care physicians to county population being substantially less than the ratio for the State of California and the United States. It is established health science that primary care physicians detect health problems early, reducing preventable costly emergency room visits and hospitalizations. As a result, Shasta County residents pay higher healthcare costs, suffer higher health issues, and suffer elevated risk for dying prematurely.

County of Shasta is responding to the primary care physician crisis by engaging a subject matter expert to:

- 1) conduct an assessment of the variance of primary physician coverage to resident ratios across the County of Shasta;
- 2) analyze the effectiveness of the current strategies to increase primary care physician coverage;
- 3) develop an alternative strategy to create a rural medical school in Shasta County to train and license approximately 50 new primary care physicians per year;
- 4) develop capability to co-locate California licensed Chemical Dependency Hospital;
- 5) present a plan for federal funding for the Shasta County medical school from existing US Health and Human Services rural underserved communities development grants;
- 6) present a plan for federal funding for the Shasta County medical school as an Agriculture Department economic and community development demonstration project.

Subject matter expert projects the project will take up to six months at a cost of \$40,000 for services, and up to \$8,500 in out-of-pocket expenses.

Task No.	Task	Equipment & Services Needed	Delivery Date	Reporting Head
1	Primary Care Physician Coverage Assessment	Transportation to the 8 Community Health Centers Across Shasta County	12/17/2024	Chriss Street

eligibility for entry into residency programs by the Accreditation Council for Graduate Medical Education (ACGME).

**PROJECT GOALS**

<b>GOAL</b>
Increase Primary Care Physician Ratio to Population in Shasta County
<b>HOW GOAL WILL BE ACHIEVED</b>
1) Assess Primary Care Physician Ratios in 5 Supervisor Districts; 2) Assess Variation of Primary Care Physician Ratios for Rural Communities in 5 Supervisor Districts;
<b>GOAL</b>
Develop Strategy to Increase Number of Primary Care Physicians in Shasta County
<b>HOW GOAL WILL BE ACHIEVED</b>
1) Assess Primary Care Physician Recruitment Success/Failure 2) Assess Facilities for Utilization as a Shasta County Rural Medical School; 3) Asses Co-locating Chemical Dependency Recovery Hospital and rural medical school; 4) Develop a Feasibility Analysis for Demand, Cost and Technical Requirements to Launch a Shasta County Rural Medical School; 5) Assess Feasibility of US Departments of Health & Human Services and Agriculture to Fund Shasta County Rural Medical School
<b>GOAL</b>
Develop Strategy for HHS and Agriculture Departments grant funding for Shasta Medical School
<b>HOW GOAL WILL BE ACHIEVED</b>
Develop demand, operational and financial models to Implement Shasta County Rural Medical School as a Regional Economic and Community Development Asset

**PROJECT MEETINGS**

<b>Scheduled Status Meetings</b>		
<b>Meeting Date</b>	<b>Purpose</b>	<b>Frequency</b>
01/30/2025	Progress Meeting with County CEO	every 45 days

I verify that I am a representative of the below entity, and that I have the authority to bind such entity.

<b>Project Approval &amp; Signatures</b>	
<b>Project Name:</b>	Initiative To Expand Primary Care Physician Coverage
<b>Project Manager:</b>	Chriss W. Street

<b>Project Approval &amp; Signatures</b>
--

2	Assess Increased County Costs from Low Primary Care Physician Coverage		01-30-2024	Chriss Street
3	Assessment of Federal, State and Local Funding to Increased Primary Care Physician Coverage; development of business plan for formation, operation, and licensure for Rural Medical School; and development of strategy to attain Rural Medical School Accreditation	Travel To California DEPARTMENT OF HEALTH CARE SERVICES, California Congressional Leaders, and US Departments Of Health And Human Services And Agriculture Department	04/15/2025	Chriss Street
4	Prepare Grant Funding Applications to Increase Shasta County Primary Care Physician Coverage; and to Fund formation and start-up costs for implementing a Shasta County Rural Medical School	Undetermined travel to HHS and Agriculture Department seminars and offices in Washington DC	05/15/2025	Chriss Street

#### PROBLEM STATEMENT

To resolve the Shasta County access to primary health care crisis, it is necessary to expand the primary care physician workforce. Increased recruitment efforts have not been effective.

Subject matter expert has determined that US Senate Health, Education, Labor, and Pensions Committee reported out S. 2840 legislation on a 14-7 super-bipartisan vote on November 8, 2023. The bill seeks to expand primary care physician coverage for medically-underserved areas such as rural communities. This bill could fund Shasta County medical school. Similar legislation in the House of Representatives to expand rural community primary care physician coverage is being co-led by Congressman David G. Valadao (CA-22: Visalia) as extension to Conrad State 30 and Physician Access Reauthorization Act.

Shasta County rural medical school focusing in primary care physician training must also be capable of accreditation from Liaison Committee on Medical Education (LCME).

Subject matter expert will assess local resources and develop a plan to complete LCME accreditation as an independent medical education programs leading to the MD degree, and

The purpose of this document is to provide a vehicle for documenting the initial planning efforts for the project. It is used to reach a satisfactory level of mutual agreement among the Project Manager and Project Sponsors with respect to the objectives and scope of the project before significant resources are committed and expenses incurred.

I have reviewed the information contained in this Project Scope Statement and agree:

Name	Title/Role	Signature	Date
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# EXHIBIT

## C

**Shasta Health  
Assessment and  
Redesign Collaborative  
(SHARC)**

1890 Park Marina Dr. Suite 110  
Redding, CA 96001  
530-604-3089

Could you get me contact information  
for these individuals?

Friday, December 13, 2024  
11:30 AM - 1:00 PM

Dean Germino - e

Dr. Paul Dhawika

Privacy Information

AGENDA

Privacy Information

LOCATION  
HANC Office

**Laura Burch**  
Shasta County Health and Human Services  
**Jo Campbell, Vice-Chair**  
Hill Country Health and Wellness Center

**Tami Fraser**  
Shingletown Medical Center  
**Shannon Gerig**  
Mountain Valleys Health Centers

**Ryan Harris**  
Mayers Memorial  
**Randall Hempling**  
Partnership Board Commissioner

**Sam Itani**  
Shasta Regional Medical Center

**Dave Jones**  
Partnership Board Commissioner

**David Kehoe**  
Community Member

**Patrick Moriarty**  
Community Member

**Don Reece, M.D.**  
Dermatologist

**Tim Sharp**  
Partnership HealthPlan

**Todd Smith, Chair**  
Mercy Medical Center

**Brandon Thornock**  
Shasta Community Health Center

**Welcome and Introductions**

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1. Prop 1/BHCIP Proposal ad hoc committee idea -- Kimberly Johnson, Arch Collaborative

**Agenda Modifications**

**SHARC Business**

1. Approve 11/8/2024 Minutes (A2) ACTION-All
2. Membership (Robin)
  - a. Acknowledge Mary Rickert's time on SHARC, discuss new Board of Supervisors representative
  - b. Tribal representation
  - c. Superintendent of Schools
  - d. Non-voting member list
3. Doctor's Day recognition of years of service and retirements (Robin)
4. Support for Assisted Living Medi-Cal Waiver (Robin)
5. Discussion at 12/11/2024 Board of Supervisors meeting re: healthcare in Shasta County (Robin/All)

**SHARC Committee Reports**

1. Integrated Care -- Met 12/4/2024 (A3) -- Jo
  - Discussion of justice-involved ECM services
2. Healthcare Workforce Development -- Met 11/19/24 (A4) -- Robin
  - Shasta Tehama Trinity Adult Education presentation

**Discussion**

1. Partnership HealthPlan Update -- Tim

**Member Updates**

**Next Meeting**

Friday, January 10<sup>th</sup>  
11:30-1:00  
HANC office and on Zoom

**Adjourn**

**Non-Voting Members**

**T Abraham**  
Hospital Council of Northern  
and Central California

**James Mu, M.D.**  
Shasta County Public Health

**Mary Rickert**  
Shasta County Board of Supervisors

**Staff Support**

**Amy Cavalleri**

**Gabe Deckert**

**Robin Schurig**

Health Alliance of Northern California

Improving care and health for Shasta  
County and the region by working  
together to achieve the Triple Aim --  
"better care and better health at lower  
cost."

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# EXHIBIT

## D

**David Rickert**

---

**From:** David Rickert  
**Sent:** Wednesday, December 18, 2024 8:54 AM  
**To:** Jenee Bauer CA-Redding  
**Cc:** Brook Lowther  
**Subject:** RE: Mercy Medical Center Redding Physician Recruitment Information

Jenee,

I look forward to meeting with you. I will have my assistant Brook set up a meeting.

Sincerely,

David J. Rickert  
County Executive Officer  
County of Shasta  
1450 Court Street, 308A  
Redding, California 96001

**From:** Jenee Bauer CA-Redding <[REDACTED] Privacy Information>  
**Sent:** Tuesday, December 17, 2024 11:57 AM  
**To:** David Rickert <drickert@shastacounty.gov>  
**Cc:** Todd Smith CA-Redding <[REDACTED] Privacy Information>  
**Subject:** Mercy Medical Center Redding Physician Recruitment Information

**EXTERNAL SENDER:** Do not follow links or open attachments unless you recognize the sender and know the content is safe.

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Dear Mr. Rickert,

I hope this message finds you well. My name is Jenee Bauer, and I serve as the Director of Physician Services for Mercy Medical Center Redding, Mercy Medical Center Mt. Shasta, and St. Elizabeth Community Hospital. In this role, I oversee community recruitment efforts as well as Medical Staff Services for these facilities.

I believe Todd may have shared some of the successes we've achieved in physician and APP recruitment over the past few years. Our recruitment team is deeply committed to attracting top talent and ensuring that our community continues to benefit from high-quality medical care.

Every three years, our corporation engages an external agency, 3D Health, to conduct a comprehensive review of the medical services available within our geographic area and to assess the community's healthcare needs (attached for your review). Due to regulatory requirements, this community need assessment must be completed every three years to justify the allocation of recruitment incentives to physicians. While some specialties in the assessment may appear to have an overstated need, these results are critical in guiding our recruitment strategy.

I would welcome the opportunity to discuss our recruitment efforts in more detail and explore ways to collaborate with you and other local entities. Together, we can work toward not only enhancing recruitment but also strengthening our community's ability to retain skilled medical professionals.

Thank you for your time, and I look forward to connecting with you soon.

Warm regards,

Jenee Bauer, BS, CPMSM, CPCS

Director of Physician Services

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CommonSpirit Health

Mercy Medical Center Redding

St. Elizabeth Community Hospital

Mercy Medical Center Mt. Shasta

Caution: This email is both proprietary and confidential, and not intended for transmission to (or receipt by) any unauthorized person(s). If you believe that you have received this email in error, do not read any attachments. Instead, kindly reply to the sender stating that you have received the message in error. Then destroy it and any attachments.

Thank you.

# CommonSpirit Redding Recruitment

CommonSpirit

Jenee Bauer, CPMSM, CPCS  
Director of Physician Services

Dignity Health



Jenee Bauer, BS, CPMSM, CPCS

North State Service Area

5061

Privacy Information

Meeting  
1-16-2025

# The Recruitment Team...

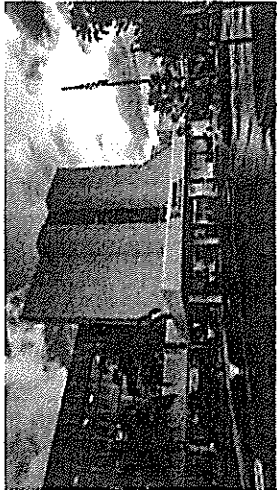
**Hannah Young**  
Community Recruitment  
MMCR/SECH/MMCMS

**Brian Nystrom**  
DHMF Recruitment  
MMCR/SECH/SNMH

**Jenee Bauer**  
Director of Physician Services  
Community Recruitment  
MMCR/SECH/MMCMS



# Mercy Medical Center Redding



Mercy Medical Center Redding offers comprehensive health care to nearly 500,000 residents in a six-county region. It is one of only two Level II trauma centers and the only Level III neonatal ICU north of Sacramento. Mercy Medical Center Redding is a 266-bed regional medical center providing inpatient and outpatient services as well as specialized cardiovascular care, stroke care, orthopedics, neurological surgery, comprehensive cancer care, maternity care, and a robust robotic surgery program. In addition, the hospital's network of care includes Mercy Home Health and Hospice and Dignity Health Connected Living, which serves nearly 72,000 meals a year. The medical staff has over 250 active members who partner with skilled professionals, support staff and helpful volunteers to provide innovative medical services to the North State communities. Mercy serves as a local community hospital as well as a referral center for a vast region from the Oregon border two hours north, halfway to Sacramento (two hours to the south), east to Nevada and west to the Pacific Ocean. Mercy Medical Center Redding is sponsored by the Sisters of Mercy of Auburn, along with St. Elizabeth Community Hospital in Red Bluff and Mercy Medical Center Mt. Shasta.

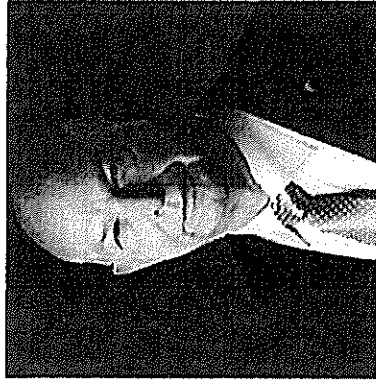
## Mercy Medical Center Redding Leadership Team



**Todd Smith**  
Hospital President



**Robert Folden**  
Vice President, COO



**Dr. Jerry Myers**  
Chief Medical Officer



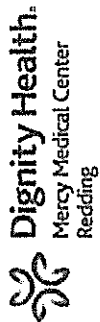
**Ed Price**  
Chief Nursing Officer<sup>4</sup>

- Key Services
- Level II Trauma Center and Regional Emergency Care
- Cardiovascular Care
- Cardiac and Pulmonary Rehabilitation
- Family Birth Center
- Transcatheter-Capable Stroke Center
- Neurology
- Center for Joint and Spine Health
- Inpatient and Outpatient Oncology Care
- Level III Neonatal Intensive Care Unit
- Pediatric Care
- Wound Healing and Hyperbaric Medicine Center
- General Medical Services
- da Vinci<sup>®</sup>, Mazor X, MAKO Robotic Surgery
- Home Health and Hospice
- Residency Programs – Family Practice, Nursing, Pharmacy
- Telemedicine Services – Neurology, Stroke Care, Behavioral Health, Radiology and Pediatrics.
- Awards and Affiliations
- Stanford Cardiac Surgery in affiliation with The Merry Redding Heart Center
- Honor Roll Recognition for Maternal Care and Safe Obstet Care
- Blue Distinction Center for Spine Surgery
- American Heart Association's Gold Plus Get With The Guidelines – Stroke Quality Achievement Award I Target, Stroke<sup>®</sup> Elite Plus award I Target, Type 2 Diabetes Honor Roll award.
- Blue Distinction Center for Knee and Hip Replacement
- Healthcare Equality Index (HEI) Designated LGBTQ+ Healthcare Equality Top Performer 2022



To learn more, click the QR code and speak to our Patient Relations - Hannah Young

2175 Rosaline Avenue | Redding | 530.225.6000  
dignityhealth.org



# Aging Medical Staff

# 2023 Community Needs

Facility	Category	Average Age Over 60	Total Staff	% Over 60
MMCR	Active	51	261	30%
	Courtesy	56	126	44%
MMCR	Total	54	387	34%
SECH	Active	51	60	32%
	Courtesy	55	114	40%
SECH	Total	53	174	37%
MMCMS	Active	50	75	29%
	Courtesy	53	55	40%
MMCMS	Total	52	130	34%

Oct-24

Specialty	MMCR Demand	MMCR Surplus/(Deficit)	SECH Demand	SECH Surplus/(Deficit)	MMCMS Demand	MMCMS Surplus/(Deficit)
<b>Primary Care</b>						
General Primary Care	106.7	(60.7)	39.5	(30.5)	21.4	(7.9)
OB/GYN	25	(20)	9.2	(6.7)	4.4	(1.9)
Pediatrics	26.6	(19.6)	10.7	(5.7)	4.5	(3)
<b>Total Primary Care</b>	<b>158.3</b>	<b>(100.3)</b>	<b>59.4</b>	<b>(42.9)</b>	<b>30.3</b>	<b>(12.8)</b>
<b>Medical Sub-Specialties</b>						
Cardiology	17.4	(13.4)	6.4	(6.4)	4.1	(4.1)
Dermatology	7.2	(5.6)	2.7	(2.7)	1.5	(1.5)
Endocrinology	2.8	(.9)	1.1	(1.1)	0.6	(0.6)
Gastroenterology	7.8	(2.8)	2.9	(2.9)	1.6	(1.6)
Hematology/Oncology	8.8	(6.3)	3.2	(3.2)	2	(2)
Nephrology	5.9	(5.9)	2.2	(2.2)	1.3	(1.3)
Neurology	8.8	(6.8)	3.2	(3.2)	1.8	(1.8)
Psychiatry	11.1	(5.4)	4.1	(4.1)	2.1	(2.1)
Pulmonary	6	(4.0)	2.2	(2.2)	1.3	(1.3)
Rheumatology	2.7	(2.7)	1	(1)	0.6	(0.6)
<b>Total Medical Specialties</b>	<b>95.1</b>	<b>(61.2)</b>	<b>36</b>	<b>(36)</b>	<b>20.3</b>	<b>(20.3)</b>
<b>Surgical Sub-Specialties</b>						
General Surgery	11.4	(2.4)	4.2	(2.2)	2.4	1.1
Neurosurgery	3.4	(1.4)	1.3	(1.3)	0.7	(0.7)
Orthopedic Surgeon	12.6	(3.4)	4.7	(3.2)	2.6	(0.1)
Otolaryngology	7	(4)	2.6	(2.6)	1.4	(1.4)
Plastic Surgery	5.3	(3.3)	2	(2)	1.1	(1.1)
Urology	5.2	(1.2)	1.9	(1.9)	1.2	(1.2)
<b>Total Surgical Sub-Specialties</b>	<b>66.3</b>	<b>(19.5)</b>	<b>24.4</b>	<b>(19.9)</b>	<b>14.1</b>	<b>(6.1)</b>

# Redding Recruitment Summary FY24

## FY24 Facts

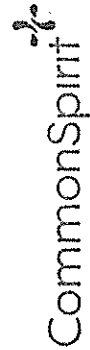
- 37 Site Visits for Redding
- Site Visit cost \$259,000
- 21 Providers Accepted
- Recruitment Incentives cost \$918,000
- Total Spent \$1,177,000

## Reasons for past successes...Best Practices!

- ★ Leadership Engagement-Initial Zoom call, site visit day and dinner
- ★ Recruitment Team - Utilize hospital leadership, medical staff, and incorporate key departments into recruitment
- ★ Site Visit Experience
- ★ Community Tours with local realtors
- ★ Aligning candidates with like-minded members of the Medical Staff...we call this an "instafriend"
- ★ Community Partners
- ★ Annual community resident recruitment events
- ★ Created local resources- websites and Hospital Fact Sheets that are shared with candidates before site visit

Last Name:	First Name:	Specialty:	Group:
Robl	Matthew	Anesthesia	Vivuity
Blessing	Akpofofe	Anesthesia	Vivuity
Kuttler	Eric	APP General Surgery	Dignity Health Medical Foundation
Armbuster	Joel	APP Orthopedics	Dignity Health Medical Foundation
Stephens	Matthew	APP Primary Care	California Family Medicine
Gertch	Anita	APP Primary Care	Anderson Walk-in Clinic
Hofman	Nashan	APP Primary Care	Anderson Walk-in Clinic
Nilson	Erik	APP Primary Care	Anderson Walk-in Clinic
Lancaster	Lain	Emergency Medicine	Vivuity
Messenger	Bryn	Family Medicine	Shasta Community Health Center
Shaw	Jill	Family Medicine	Dignity Health Family Medicine Residency
Schepps	Don	General Surgery	Dignity Health Medical Foundation
Kulyn	Jacob	Hospitalist	Vivuity
Mullen	Netanya	Neonatology	NICU Coverage
Cabrera	Kelsey	OBGYN	Sehail Womens Health
Schafer	Patrick	Orthopedic	Dignity Health Medical Foundation
Peralta	Janessa	Pediatrics	Shasta Community Health Center
LaBarbera	Jaclyn	Pediatrics	Shasta Community Health Center
Pickrell	David	Psychiatry	Redding Rancheria
Germano	Nicholas	Pulmonary Critical Care	Redding Critical Care
Hastings	Bradford	Radiology	MRG

Redding - 21 total recruits  
 Community & Hospital Physicians 13  
 Community & Hospital APPs 4  
 DHMF Physicians 2  
 DHMF APPS 2  
 \*4 to Red Bluff  
 \*6 to Mt. Shasta



# Redding Recruitment Summary FY25 to date

- July 1, 2024 - January 15, 2025
- 30 Site Visits for Redding
- Site Visit cost \$210,000
- 6 Site Visits scheduled within the next month
- 17 Providers Accepted working through contracting or have already started for Redding
- \$1,168,410 Spent on Recruitment

## New Processes for Continued Successes...

- Increased Recruitment Sourcing/Pipelines
- Continued review of postings and pipeline flow
- Creating positive media presence regarding recruitment in the North State
- Updating the recruitment video
- Increased focus on relationships with Residency Programs throughout CommonSpirit and increased touch points for local Residents
- Residency department incorporating better geographic matching info interview process

CommonSpirit

Last Name:	First Name:	Recruitment Status	Specialty:	Group:
Idinger	Donna	FY25	APP CV	Dignity Health
Hester	Stephanie	Open and active	APP Surgery	Dignity Health Medical Foundation
Waters	Samantha	Open and active	APP Surgery	Dignity Health Medical Foundation
Armbuster	Crystal	FY25	APP Womens Health	Selah
Vu	Minh	Open and active	CV Surgery	Stanford
Wickland	Shea	FY25	Family Medicine	Dignity Health Medical Foundation
Kilpatrick	Jaene	FY25	Family Medicine	Dignity Health Medical Foundation
Ali	Asghar	FY25	Family Medicine	Mountain Valley
Baldwin	Brandon	FY25	Family Medicine	CA Family Medicine
Daugherty	Dene	Open and active	General Surgery	Dignity Health Medical Foundation
Wall	Norman	Open and active	Nephrology	Shasta Critical Care
Lombardi	Donald	Open and active	Oncology	IROC
Sakfield	Brad	Open and active	Oncology	IROC
Anand	Kay	Open and active	Oncology	IROC
Kilpatrick	Matthew	FY25	Pathology	Shasta Pathology Associates
Mogul	Mark	FY25	Ped Hospitalist	Dignity Health Family Medicine Residency
Rendon	Karen	FY25	Rheumatology	Redding Rancheria

Redding - 17 total recruits  
 Community & Hospital Physicians 10  
 Community & Hospital APPs 2  
 DHMF Physicians 3  
 DHMF APPS 2  
 \*6 to Red Bluff  
 \*5 to Mt. Shasta

## David Rickert

---

**From:** Jenee Bauer CA-Redding <[redacted] Privacy Information>  
**Sent:** Thursday, January 16, 2025 3:10 PM  
**To:** David Rickert; Alexis Ross CA-REDDING  
**Subject:** Follow-up on Recruitment Efforts and Next Steps

**Follow Up Flag:** Follow up  
**Flag Status:** Flagged

**EXTERNAL SENDER:** Do not follow links or open attachments unless you recognize the sender and know the content is safe.

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Dave,

It was a pleasure meeting with you today and discussing recruitment efforts. I'm looking forward to further partnering with you.

As mentioned, I would like to introduce you to Alexis Ross, the Market Director for Community Benefit. Alexis has extensive knowledge in community outreach and can provide valuable insights regarding the opioid funding we discussed.

Additionally, as a reminder, please connect with your Director of Human Resources about assisting spouses or significant others with job opportunities when necessary. This will be an occasional need—approximately 15-20 times per year or less.

Our team is always eager to collaborate with strong community partners like you to enhance our recruitment efforts. We greatly appreciate your time and commitment to serving Redding.

Warm regards,

Jenee Bauer, BS, CPMSM, CPCS

Director of Physician Services

Phone: [redacted] Privacy Information


Cell: 530-838-1234  
CommonSpirit Health

Mercy Medical Center Redding  
St. Elizabeth Community Hospital  
Mercy Medical Center Mt. Shasta

Caution: This email is both proprietary and confidential, and not intended for transmission to (or receipt by) any unauthorized person(s). If you believe that you have received this email in error, do not read any attachments. Instead, kindly reply to the sender stating that you have received the message in error. Then destroy it and any attachments. Thank you.

# EXHIBIT

E



Health Center  
Program  
Feasibility

01.27.2025

**Facktor**

PREPARED FOR

**Shasta County  
Government, California**

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# I. About Us

## ■ Introduction

Facktor is pleased to submit this proposal to Shasta County to support their need for shovel-ready options to improve access to health care, including a robust workforce, to address the needs in the community. Shasta County currently operates a public health clinic in Redding and collaborates with health and social service providers serving Redding, Anderson, and Shasta Lake. Shasta County's intention is to leverage the existing resources in the community to bolster health care options for its residents.

## ■ Background

Facktor is a national, professional consulting firm whose principals and staff bring a deep and broad understanding of the state and federal resources available to support access to high quality health care in communities across the nation.

We specialize in the federally qualified health center (FQHC) program as well as local healthcare delivery and payment systems including hospitals, health plans, health information exchanges (HIE) and other healthcare related organizations.



Among the leading professional consulting firms with a focus on the healthcare industry, we offer subject matter experts in finance, mergers and acquisitions, development, regulatory compliance, clinical models, and building integrated service lines.

Facktor comprises a team of 70+ consultants and is now working in 40 states across the United States. The firm is headquartered in Los Angeles, California, and is considered the largest consulting agency in the country dedicated to the health center program, having served the industry since 2001.

## II. Scope of Services

### ■ Feasibility Study

Facktor will conduct a Feasibility Study to establish or expand a shovel-ready option to resolve or improve on a current lack of healthcare options and workforce. This project will identify considerations for creating or expanding a health care access point for FQHC or FQHC Look-Alike designation, and other potential options. This includes examination of the current landscape of health service providers in the region, followed by development of an analysis of steps needed to address compliance with state and federal requirements. Project components include:

- I. **Client Communications and Meetings:** Facktor proposes weekly meetings for the duration of the project to communicate with the County CEO on project scope and direction. Facktor will also meet to discuss the presentation to the Board on findings and options. *Assumes all meetings are virtual except one in-person meeting for one staff to present recommendations in an hour-long meeting.*
- II. **Stakeholder Meetings and Interviews:** Facktor will meet with stakeholders and decision makers to assess and obtain a comprehensive view of all existing health service capacity as well as potential goals and desired objectives in the context of expanding health care options and strengthening the health care workforce. *Assumes County identifies stakeholders based on Facktor recommendations and makes initial connection of stakeholders to Facktor team for meetings:*
- III. **Document & Data Review/Analysis:** Review of existing service area, health services capacity, governance, financing, and infrastructure to determine steps needed to establish or expand an FQHC or FQHC Look Alike. *Assumes all qualitative data (e.g. written reports, internal documents) is provided by Shasta County.* Identify key financial elements derived from a FQHC or FQHC Look Alike designation.
- IV. **Presentation:** Summary of key findings and recommended next steps (PowerPoint). We will present our key findings and recommended options for Board consideration. *Assumes one virtual update meeting and one in-person presentation including PowerPoint slides.*

### ■ Estimated Costs & Timeline

Project Component	Timeline	Estimated Hours	Estimated Cost
I. Client Communications and Meetings	Months 1-6	40	\$12,200
II. Stakeholder Meetings & Interviews	Months 1 -2	15	\$4,575
III. Document & Data Review/Analysis	Months 1 - 2	35	\$10,675
IV. Presentation (Develop and Present)	Months 5 - 6	32	\$9,760
<b>Subtotal Labor</b>	-	<b>122</b>	<b>\$37,210</b>

Facktor consultants bill from \$235/hr to \$405/hr depending on subject matter expertise and experience. \$305/hr is used in this cost estimate for ease of presentation. For details on fees, please see the next section of this document.

<b>Onsite Final Presentation</b>	<b>Estimated Cost</b>
Travel expenses (1 Consultant)	\$ 1,500
Discounted Rate for Consultant Travel Time (1 consultant)	\$ 1,320
Third-party data for feasibility study	\$ 2,500
<b>Subtotal Onsite Presentation Direct Costs</b>	<b>\$ 5,320</b>
<b>Total Estimated Costs</b>	<b>\$42,530</b>

Travel costs include expenses and travel time (e.g., flights, hotel, mileage, car rental) and travel time. Mileage is billed at the IRS-approved standard mileage rate. Staff travel time is billed at \$165/hour/staff person. Facktor will use best efforts to minimize out of pocket expenses.

<b>Title</b>	<b>Discounted Hourly Rate</b>
Partners	<del>\$435</del> \$410
Managing Directors	<del>\$420</del> \$395
Sr. Directors	<del>\$385</del> \$365
Directors	<del>\$355</del> \$335
Sr. Managers	<del>\$325</del> \$305
Managers	<del>\$295</del> \$280
Sr. Associates	<del>\$270</del> \$255
Associates	<del>\$250</del> \$235
Sr. Advisors	<del>\$280 - 420</del> \$260 - 395 <sup>1</sup>

Timetables and cost estimates are fully negotiable and based on current knowledge of Client, its operations, service area, and historical costs similar in scope.

### III. References

**Children's Service Center**  
Michael Hopkins, CEO  
mhopkins@e-csc.org

**Elevate Health Center**  
Senthil Durairaj, CEO  
durairas@gmail.com

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<sup>1</sup>Varies by consultant

# EXHIBIT

# F

## David Rickert

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**From:** Doreen Bradshaw <[REDACTED] Privacy Information>  
**Sent:** Tuesday, January 21, 2025 7:05 AM  
**To:** David Rickert  
**Subject:** Re: Interview for Healthcare Consultant

**EXTERNAL SENDER:** Do not follow links or open attachments unless you recognize the sender and know the content is safe.

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Thank you for contacting me regarding an interview for a healthcare consultant. I applaud the County for recognizing the need to improve access to healthcare and also the need to increase providers. Before I retired, I met a number of times with Dr. Mu to discuss this issue.

Per our conversation, I agreed to review the scope of work and am providing the following comments (some of which were expressed during our conversation):

1. I hope the County would work closely with the Shasta Health Assessment and Redesign Collaborative (SHARC) on this project. This group has been doing county wide health planning and redesign since 2006 and has had some success coordinating community wide projects for mental health service redesign, managed care implementation, health information exchange, workforce development, case management, service integration, etc. I believe over 65 agencies participate in a workgroup of SHARC so this group would be an excellent resource for this project.

. As you mentioned and I confirmed, there are a number of needs assessments already available to utilize existing data to inform this project. You mentioned assessments from Dignity Health and Hill Country. I believe there are others. Additionally, Partnership Healthplan also has to work with counties on a community needs assessment. I hope the County would not spend resources on assessing, but compiling existing information.

3. One factor worth noting is the Trump Administration's exploration of potential shifts in healthcare policy that would negatively affect non-for-profit and for profit hospitals, health centers and private providers, that address Medicaid spending and subsidies for the insurance exchange marketplace. It might be prudent to understand those changes and adjust the timing of this project to be in alignment with these big policy changes. Additionally, in California, it would also be good to review the impact of Prop 35 which was supposed to increase provider rates. That is really the bottomline of how we can get more providers. That and the fit of Shasta County for providers and their families.

4. As I mentioned during our call, the rural health delivery system is more challenged than urban healthcare systems because of fragmented practices not incorporated in a system of care, lack of population, resources, providers, etc. One of rural Northern California's (and Shasta County's) biggest successes was the implementation of managed care for our Medi-Cal population which is administered by Partnership Health Plan. This non-profit health plan, now serving 24 rural counties, is able to provide resources for providers, develop networks, etc. which has increased access to healthcare for our Medi-Cal population. I am not sure Shasta County has the ability on its own to make a fix that would bring more providers through one shovel ready project with grants. The changes need to be systemic and policy needs to support those changes. A lot is being done locally to address these challenges. If this was an easy fix, we would have done it by now. I am not sure a "shovel ready" project would fix this problem.

5. The scope of the project needs to be narrowed. Options to improve access to healthcare and increase providers is daunting on its own. Identification of cost-effective ways to reduce premature deaths in Shasta County should be clarified. There are a number of projects already addressing this. To prioritize both of these areas for solutions is too broad.

Understanding the healthcare delivery system is very complicated. While I am including only 5 points regarding this project, I could go on and on. I really urge the County to work with SHARC who has a lot of expertise and knowledge. This could be a great partnership that could navigate the upcoming changes and increase access to health care for all.

Thank you for reaching out. Because of the scope of this project, uncertainty of the healthcare landscape, and short timeline to conduct a meaningful process, I will be respectfully declining an interview at this time..

Sincerely,  
Doreen Bradshaw

On Fri, Jan 17, 2025 at 11:51 AM David Rickert <[drickert@shastacounty.gov](mailto:drickert@shastacounty.gov)> wrote:

Dear Doreen,

The Shasta County Board of Supervisors has directed me to retain the services of a healthcare consultant. You have been identified as a qualified and possibly interested candidate and are invited to interview for this position. If interested, please let me know your availability for an in-person interview at the following date and times (please indicate your preferred time slots with an "X" in the table below):

**Wednesday January 22<sup>nd</sup>**

8:10 - 9:00 am	
9:00 - 9:50 am	
10:00 - 10:50 am	
12:00 - 12:50 pm	
1:00 - 1:50 pm	
2:00 - 2:50 pm	
3:00 - 3:50 pm	
4:00 - 4:50 pm	

Once I finalize the list of candidates, I will confirm your time slot. At your interview, please bring an up-to-date resume and any documents you wish to be considered in the selection process. I do apologize for the short notification time.

The list of qualities the Board of Supervisors is looking for in a consultant are as follows:

**Qualifications:**

- a. A medical professional capable of consulting, with a proven record in the implementation medical capital projects.
- b. Experience in organizational management and development of medical delivery systems.
- c. Proven experience in developing and delivering on state and federal project grants.
- d. A strong foundation in cost structure and organizational management.
- e. Experience working with county government.
- f. Commitment to meeting the scope of work goals and contracted outcomes (both of which may be further defined in a written contract between County and Consultant).

**Scope of Work:**

- a. Identify and address options to resolve or improve the lack of healthcare options and providers in Shasta County.
- b. Produce a shovel ready solution for the Board of Supervisors to consider.
  - 1. Proposed solution must identify available state and federal grants to seed initial project costs.
  - 2. Proposed solution must provide for sustainable operating revenues beyond initial start-up costs.
- c. Meet on a regular basis with County CEO for guidance, input, and direction.
- d. Prepare and present project status updates to the Board of Supervisors.
- e. CEO and Board of Supervisors reserve the right to modify and refine direction on scope of work.
- f. Please answer the following questions in your proposed solution:
  - 1. How do we ensure that we have sufficient medical providers to serve our community for the foreseeable future?
  - 2. What are the most cost-effective ways to reduce premature death in Shasta County?
- g. The solution must be ready for presentation to the Board of Supervisors by the July 29<sup>th</sup>, 2025 board meeting.

Shasta County will reimburse consultant at a rate of \$150 per hour with a cap of \$40,000.

Sincerely,



**David J. Rickert**

County Executive Officer | County of Shasta

1450 Court Street, Suite 314  
Redding, CA 96001

Cell: 530-782-2693 | Office: 530-225-3736

EXHIBIT  
G

Lawsuit

From: JEFFREY GORDER (jegorder@prodigy.net)

To: drickert@shastacounty.gov

Date: Sunday, March 2, 2025 at 05:50 PM PST

Dear CEO Rickert,

I intend to file a lawsuit challenging the healthcare consultant agreement with Chriss Street sometime not long after March 11. I would be happy to meet with you to explain what evidence I already have that I intend to present at trial and, if you wish, discuss what is known about why Mr. Street's "SCOPE OF WORK" was dated December 2, 2024, about 8 days before the BOS publicly discussed the idea of hiring a healthcare consultant. If that's something you're interested in, let me know what your availability is during the upcoming week and I will work to find a mutually agreeable time.

Best Regards,

Jeff Gorder

Re: Potential Lawsuit Against the County for Violation of CCP 526a

From: JEFFREY GORDER (jegorder@prodigy.net)

To: drickert@shastacounty.gov

Date: Tuesday, February 25, 2025 at 10:49 PM PST

Dear Mr. Rickert,

I have yet to hear back from you regarding my email below. Please respond with the requested information by Friday, February 28 by the close of business. If I do not hear from you by that time I will conclude that you are not interested in providing any answers to the questions I asked below and are not interested in offering any clarification as to how Mr. Street knew about the County's intention to hire a healthcare consultant before the public was notified on December 10, 2024.

Best Regards,

Jeff Gorder

On Saturday, February 22, 2025 at 08:44:53 AM PST, JEFFREY GORDER <jegorder@prodigy.net> wrote:

Dear Mr. Rickert,

Pursuant to my PRA request, I received a number of documents related to your search for a healthcare consultant. One of those documents was the "SCOPE OF WORK" proposal from Chriss Street which was dated December 2, 2024, about one week before the issue of a healthcare consultant was first announced by Supervisor Crye at the December 10, 2024 meeting.

Based on the above-referenced document, it appears that Mr. Street had advanced notice of the County's intention to seek a healthcare consultant. Can you shed any light on how it was that Mr. Street was aware of the County's intention to retain a healthcare consultant before it was first brought to the public's attention on December 10, 2024? Specifically, did you provide Mr. Street with advanced notice of the County's intention? If so, why? If you did not, did Mr. Crye? If so, why did he? Also, why did you not include that December 2, 2024 "SCOPE OF WORK" in the "Packet" related to the February 4, 2025 BOS meeting along with the Power Point slides from Mr. Street which were included?

Thank you in advance for any information you can provide to clarify the above issues as I further evaluate the merits of a lawsuit against the County under CCP 526a.

Best Regards,

Jeff Gorder

On Tuesday, February 4, 2025 at 08:10:51 PM PST, JEFFREY GORDER <jegorder@prodigy.net> wrote:

Dear Mr. Rickert,

I am considering filing a taxpayer's lawsuit against the County regarding the approval to hire Chriss Street as a healthcare consultant. It is my strong belief that this represents crony government at its worst any may constitute an illegal expenditure or a waste of County funds as prohibited by Code of Civil Procedure 526a. In order to further evaluate the merits of this suit I have submitted a Public Records Request for a variety of writings and documents pertaining to your search for a healthcare consultant.

CEO Rickert, it is imperative that you retain all notes and writings of any kind that you created during your search for a healthcare consultant subsequent to the December 10, 2024 Board meeting, and any and all emails, texts, and writings of any kind between you and Supervisor Crye at any time regarding healthcare needs in Shasta County and the search for a healthcare consultant.

Very Truly Yours,

Jeff Gorder