



COUNTY OF SANTA BARBARA CALIFORNIA

*Recognizing the week of
May 9th through 15th, 2021 as "National Hospital Week"
in Santa Barbara County.*

WHEREAS, "National Hospital Week" dates back to 1921, in Chicago, an observance originated to increase awareness and build trust following the Spanish influenza outbreak; and

WHEREAS, hospitals and health systems that ensure that health care services are available 24 hours a day, 7 days a week, providing acute inpatient care as well as outpatient, emergency, behavioural health, rehabilitation, long-term and home care services; and

WHEREAS, our Santa Barbara County hospitals are multidimensional organizations that partner with many other organizations in their communities to offer care with a focus on population health, prevention and wellness; and

WHEREAS, over the last year our hospital systems have been overwhelmed due to the COVID-19 pandemic. They have had to endure unimaginable circumstances and have had to adjust their entire way of performing their jobs; and

WHEREAS, "National Hospital Week" this year is a celebration and recognition of all the efforts they have put forth over the last year and serves as a reminder that hospitals are a foundational part of the community. They have the ability to serve people from all walks of life in every community no matter their background; and

WHEREAS, "National Hospital Week" celebrates hospitals and the men and women who over the last year and years past have supported the health of our communities through dedication and compassionate care during this ongoing pandemic; and

NOW, THEREFORE, IT IS HEREBY ORDERED AND RESOLVED that this Board of Supervisors declares May 9th through 15th, 2021, as "National Hospital Week" in Santa Barbara County and encourages all community members to recognize the significant impact our hospital systems have had on our community over the past year.

PASSED AND ADOPTED by the Board of Supervisors of Santa Barbara County, State of California this 4th day of May, 2021 by a unanimous vote of all members present.



[Signature]

Supervisor - 1st District

[Signature]

Supervisor - 2nd District

[Signature]

Supervisor - 3rd District

[Signature]

Supervisor - 4th District

[Signature]

Supervisor - 5th District

ATTEST: *[Signature]*

Clerk of the Board