

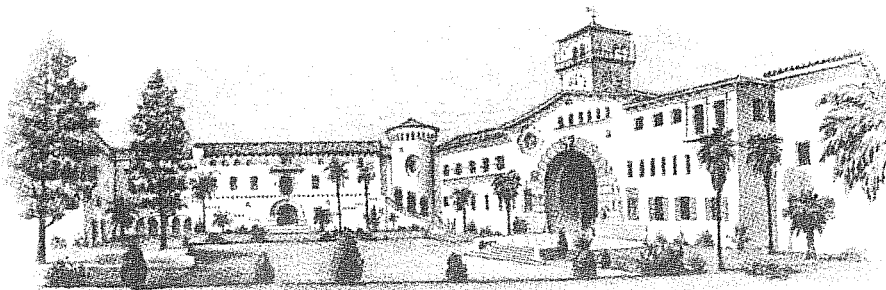
0105-08 10-00019
JAN 05 2010

SALUD CARBAJAL
First District Supervisor

JEREMY TITTLE
Executive Staff Assistant

MARY ELLEN WYLIE
Administrative Assistant

ERIC FRIEDMAN
Administrative Assistant



BOARD OF SUPERVISORS
105 East Anapamu Street
Santa Barbara, California 93101

TELEPHONE: (805) 568-2186
FAX: (805) 568-2534

E-mail:
supervisorcarbajal@sbcbsos1.org

COUNTY OF SANTA BARBARA

Date: December 21, 2009

Clerk of the Board of Supervisors
County of Santa Barbara
105 East Anapamu Street
Santa Barbara, CA 93101

RE: Committee, Commission or Board District Appointment

For placement on the Board of Supervisors agenda for the meeting of: Jan. 5, 2010

I would like to recommend the ☒ appointment/ ☐ reappointment of the following person to the Community Health Center Board:

Salutation: ☐ Mr ☐ Mrs ☒ Ms.
Full Name of Appointee: Marina Gordon
Address: 1212 Alta Vista #E
City/State/Zip: Santa Barbara, CA 93103
Home Phone: 805-259-6665
Work Phone: 805-562-1016
E-mail: mgordon@cencalhealth.org

Appointee will represent the First District on this commission.

Position was formerly held by: (New Commission)

☐ Check box only if this appointment is filling an unexpired vacancy.

First District Supervisor: Salud Carbajal

Signed by: Eric Friedman (pen SC)

COB Information Verification

- ☐ Letter of Resignation on file
☐ Vacancy Notice on file

Term:

- ☐ _____ years
☐ Beginning date _____
☐ Ending date _____

APPLICATION FOR COUNTY OF SANTA BARBARA BOARD, COMMISSION, OR COMMITTEE Return to: Clerk, Board of Supervisors County Administration Building 105 E. Anapamu Street, Room 407 Santa Barbara, CA 93101	DATE RECEIVED <input type="checkbox"/> Copy to Supervisor						
INSTRUCTIONS: Please complete each item below. Be sure to enter the title of the Board, Commission, or Committee (only one per application please) for which you desire consideration. For more complete information or assistance contact the Clerk, Board of Supervisors' Office. This application shall be maintained for a period of one year only. After one year it is necessary to file a new application for another year of eligibility. Please print in ink or type.							
1. APPLYING FOR: (Use specific title) Community Health Center Board, 1st District	2. Today's Date: December 15, 2009						
3. NAME: <table style="width: 100%; border: none;"> <tr> <td style="width: 33%; text-align: center;">Gordon</td> <td style="width: 33%; text-align: center;">Marina</td> <td style="width: 33%; text-align: center;">Suzanne</td> </tr> <tr> <td style="text-align: center; font-size: small;">Last</td> <td style="text-align: center; font-size: small;">First</td> <td style="text-align: center; font-size: small;">Middle</td> </tr> </table>	Gordon	Marina	Suzanne	Last	First	Middle	4. E-MAIL ADDRESS: mgordon@cencalhealth.org
Gordon	Marina	Suzanne					
Last	First	Middle					
6. ADDRESS: 1212 Alta Vista Rd #E <table style="width: 100%; border: none;"> <tr> <td style="width: 40%; text-align: center; font-size: small;">Number</td> <td style="width: 60%; text-align: center; font-size: small;">Street</td> </tr> </table> Santa Barbara, CA 93103 <table style="width: 100%; border: none;"> <tr> <td style="width: 40%; text-align: center; font-size: small;">City</td> <td style="width: 60%; text-align: center; font-size: small;">Zip Code</td> </tr> </table>	Number	Street	City	Zip Code	5. TELEPHONE: Home: (805) 259-6665 Business: (805) 562-1016		
Number	Street						
City	Zip Code						
7. References: Give names and addresses of three persons, not relatives, who have knowledge of your character, experience, community involvement, and abilities.							
NAME	ADDRESS	TELEPHONE NUMBER	OCCUPATION				
A. Robert Freeman, CenCal Health	110 Castilian Dr., Goleta, CA 93117	(805) 562-1011	Deputy Executive Director				
B. Mike Schrader, CenCal Health	110 Castilian Dr., Goleta, CA 93117	(805) 562-1012	Chief Operating Officer				
C. James Brewer, MD	2421 Bath St Ste A, Santa Barbara, CA	(805) 563-0167	Community Physician				
8. Are you or have you been employed by the County of Santa Barbara? <input type="checkbox"/> YES <input checked="" type="checkbox"/> No If YES, list: Department: _____ Title: _____ Date: _____							
9. Please check appropriate boxes (optional): Ethnic or racial identity: <input checked="" type="checkbox"/> White <input type="checkbox"/> Black (African American) <input type="checkbox"/> Hispanic <input type="checkbox"/> Asian/Pacific Islander <input type="checkbox"/> Native American/Alaskan Native <input type="checkbox"/> Other (Please specify)		10. Education completed: Bachelors of Science Degree, Biology 11. Indicate Supervisor who will receive a copy of this application: Salud Carbajal, County Supervisor					
12. EXPERIENCE: Please explain why you are interested in serving and what experience you bring to the Commission or Committee for which you are applying. Please see attached.							
13. ADDITIONAL INFORMATION: Give any information explaining your qualifications, experience, training, education, volunteer activities, community organization memberships, or personal interests that bear on your application for above Board, Commission, or Committee. Attach additional sheets as necessary. Please see attached.							
14. SIGNATURE OF APPLICANT <div style="display: flex; justify-content: space-between; align-items: center;"> x Marina Gordon </div>							

Application Attachment

EXPERIENCE: Please explain why you are interested in serving and what experience you bring to the Commission or Committee for which you are applying.

It is critical to promote the well-being of the underserved residents of Santa Barbara County and to enhance the provision of health services in our community. I am interested in serving on the Santa Barbara County Community Health Board because of my experience in the area of health care planning for Medi-Cal residents of Santa Barbara County.

I have been employed through CenCal Health for nearly seven years and have experience in designing healthcare programs for the underserved. Our County has one of the highest percentages of uninsured children in the State of California. Through involvement in launching the Health Kids program, I was able to assist in changing the lives of many families by creating a network of physicians to provide health coverage to uninsured, low income children. Secondly, health coverage was extended to home health care givers through the In-Home Supportive Services program and I was proud to have been involved in the launch of this unique program. Recently, CenCal Health became the administrator of the Multi-purpose Senior Services Program. I was responsible for contracting with the types of vendors needed to provide services to frail, elderly residents in the safety of their home in a manner that promotes dignity and independence. Lastly, through my involvement in promoting CenCal Health's cultural and linguistic program to our provider community, I understand that the needs of the underserved population are unique. Health programs must be tailored to an individual's needs, which included face-to-face interpreter services and telephonic assistance in physician practices.

Due to worsening economic times, the number of people in our community in need of safety-net healthcare services is growing. I would like to take an active role in assisting the Public Health Department further extend and leverage their status as a Community Health Center, which will allow the regional clinics to extend their scope of services to over 30,000 residents in need of medical care. I believe that my interests and experience would prove valuable.

ADDITIONAL INFORMATION: Give any information explaining your qualifications, experience, training, education, volunteer activities, community organization memberships, or personal interests that bear on your application for above Board, Commission, or Committee.

Professional Experience and Qualification

As Director of Provider Services, I oversee and coordinate all aspects of staff activities including provider recruiting, credentialing, contracting, complaint resolution and providing information, education and training to health care providers who assist underserved residents. I also design appropriate programs for meeting the needs of providers and patients in our community and recommend modifications concerning issues related to improvement of provider relations. I chair several internal and external committees, including the Provider Advisory Board. As a CenCal Health Director, I am responsible for implementation of quality standards relating to providers and achieving department goals and objectives. In this role, my primary external contacts include all health care providers and their office staffs, CenCal Health Committees and Boards, the Public Health Department, and other community and government agencies.

Volunteer Activities and Community Organization Memberships

My volunteer activities continue to include the United Way Fun in the Sun mentoring program for homeless and poverty level children and providing assistance to families of children with special healthcare needs or disabilities.

Education

University of California, Santa Barbara, Bachelors of Science Degree in Biology.