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For more information, contact
Heather at (707) 269-4275 or
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Humboldt Chief Executive,
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... is an innovative workforce. Working in a diverse environment can mean better talent acquisition, increased productivity, and higher job satisfaction. Eureka Natural Foods is proud of the women who work throughout our company. In these times, women have played a vital role in showing strength, intelligence, and resilience when it is needed most. To the women of Eureka Natural Foods and Humboldt, we thank you.



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She has successfully lead the MRCH team through multiple accreditation surveys both federal and state as well as 7 straight years of Healthcare Industry recognized 'Quest for Zero' top tier Quality Awards.

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36 Year RN, "I like being a nurse, I look forward to the adventure that is each new day. It is tremendously satisfying to assist people in figuring out their health problems and taking some steps to solve them."

I am also, a wife, a mother, a daughter, a daughter in-law, a sister, a sister in-law, an aunt, a niece, and a friend.

Cara Sanchez
Medical Staff Manager
3 Year team member of MRCH

A Veteran of the United States Air Force, Certified in Healthcare Management and passionate about patient care and our community. She assisted MRCH in becoming a Trauma Designated Hospital.

Proud Mother of 4 and Grandmother of 2



Deborah Fonesca
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She started at MRCH as an X-ray Tech after graduating with her Degree in Radiology Technology. She cross trained in CT and MRI getting licensed in both and assumed her management role in 2011. She strives to always be moving forward and exemplifies hard-work and dedication.

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PHOTO BY JOSÉ QUEZADA, HUMEDIA, LLC

Dr. Roberta Luskin-Hawk,

chief executive officer
St. Joseph Health, Humboldt County

BY JOSÉ QUEZADA
HUMEDIA, LLC

Roberta Luskin-Hawk has served as CEO of St. Joseph Health, Humboldt County, since 2018, leading St. Joseph Hospital, Eureka, a 139-bed regional medical center, and Redwood Memorial Hospital Fortuna, a 25-bed critical access hospital. Previously, she served as regional president/CEO for Presence Saint Joseph Hospital, Chicago, and Presence Saint Francis Hospital in Evanston, Illinois. Luskin-Hawk's administrative career follows her clinical career as an infectious disease specialist,

educator, clinical researcher and physician leader. She co-founded one of Chicago's first inpatient HIV units at Saint Joseph in 1987, which served thousands of patients from Chicago and its suburbs. In 1989, Luskin-Hawk successfully sought National Institutes of Health funding and founded AIDS Research Alliance, Chicago, an independent, not-for-profit clinical research consortium, where she served as principal investigator for 15 years. Luskin-Hawk earned her bachelor's degree in biology from the University of Illinois at Urbana-Champaign and her

Doctor of Medicine degree with honors from the University of Illinois College of Medicine. She completed her internal medicine residency, where she served as chief resident, at Michael Reese Hospital and Medical Center, and she completed her infectious disease fellowship at the University of Chicago Medical Center.

Luskin-Hawk was born in Chicago, where her family ran a jewelry business.

"My family really had nothing to do with the health field," she said.

Her extensive professional

career includes being a founder and principal investigator at the AIDS Research Center in Chicago, Illinois, later working on AIDS clinical research with Dr. Anthony Fauci on a grant she wrote for funding from the National Institutes of Health, National Institute of Allergy and Infectious Diseases.

Q) What sparked you to be in the health care industry?

A) Luskin-Hawk says her grandfather arrived in America in a boat with his family from Russia "with no money."

"His family was able to save enough money for his brother

to go to medical school. That did not work out, but there was just enough money left for my grandfather to go to school to become a pharmacist. I would have him tell me the story of coming over in the boat over and over. My aunt also died of breast cancer at a young age."

These events, her grandfather's persistence in crossing over for a better life and her aunt's passing affected her decision to enter the health field.

"I really wanted to make a difference," she said.

Q) Beside the current pandemic, what is a top community health care issue?

A) "That's a big question, so what helps us to determine that is we conduct an annual community health needs assessment with our partners in the community."

Luskin-Hawk says gathering the data and assessing it helps community health professionals plan strategies and

programs "to address prevention and education regarding common health issues."

Luskin-Hawk added that "much of it (resource appropriation) is for addressing obesity and diabetes."

Another issue she identified is the need for the education and training of more primary care physicians to be able to work with local families. A primary care provider typically acts as first contact and principal point of continuing care for a patient. The physician case manages and coordinates with other specialists the care that the patient may need.

To this end, Luskin-Hawk described a St. Joseph Health, Humboldt County partnership with the Open Door Community Health Centers developing a Family Medicine Residency Program.

"We currently are working with 12 physicians that

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Women belong in all places where decisions are being made. It shouldn't be that women are the exception.
- Ruth Bader Ginsberg





PHOTO BY JOSÉ QUEZADA, HUMEDIA, LLC

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are getting internship and education opportunities, learning all aspects of family medicine care,” Luskin-Hawk said, adding, “We will be able to bring more primary care services to more people in the community.”

Luskin-Hawk also points to a recent resurgence of a Humboldt State University (HSU) Nursing Bridge Program. The bridge program supports College of the Redwood nursing program graduates (or other individuals working as nurses or nurse aides who already possess some type of nursing degree) who want to move to the next academic level at Humboldt State University.

Humboldt State’s LVN to RN curriculum is designed specifically for the local area, focusing on “physical and psychosocial health needs and disparities within the region’s rural and tribal communities,” according to the program description. St. Joseph Hospital, Eureka, committed \$2 million toward bringing the once-eliminated program back in operation

after a years-long hiatus.

Q) What advice would you give to a high school student interested in entering the health care field?

A) “Follow your heart! A career in health is the intersection between humanity and science. It can fulfill double interests. (It is) a career of science and knowledge and a career of service, a career of taking care of others. There is a lot to be said for that. I would want them to know these are the kind of jobs that fill the soul. I want them to know that a health career can make a lot of difference all of the time. You can touch people’s lives every single day. I would want to tell them that there are a lot of jobs in health care, and there is more and more training available now to develop the skills” for a good-paying job in the health care industry.

Q) As a leader in the health field, what have been challenges and responding to COVID-19?

A) “COVID made us have

to change everything. We had to plan for and institute safe infection procedures and practices for all staff and patients. We had to keep assuring enough PPE (Personal Protection Equipment) supplies were in supply. We were on the phone every morning with 51 other Providence St. Joseph Health ministries across the country (St. Joseph Health, Humboldt County, is one of the ministries). By being in constant communication with such a large network, she said, “We were able to share information and collaborate on resources daily,” shifting materials and resources between the hospitals that had supplies at-the-ready to the hospitals that needed support on any given day.

“But,” she said, “we also had to sit down as a team and to figure out how to take care of both COVID patients and regular health care patients.”

Luskin-Hawk said she “had a great team that was able to design a special Negative Pressure Respiratory Care Unit,” a location for COVID-19 patients

to have their air constantly filtered out of the room and sent safely outdoors through an extensive HEPA filtering system.

“I believe we have a state-of-the-art health care environment for patients,” she said.

Luskin-Hawk believes her health infection and anti-viral research background helped her connect with a certified research laboratory. Her past experience and connections to colleagues resulted in a COVID-19 research therapy drug coming to Humboldt County much earlier than other locations in the United States.

“I know it (the research drug) helped save lives here,” said Luskin-Hawk.

Q) If there was one community healthy living behavior you could affect, what would it be?

A) Luskin-Hawk believes the impact of substance abuse has had a significantly negative effect on the general health of the community. She offered simple advice and encouragement for “everyone to just take the time to take care of their individual mental and physical health, whatever it may be for them alone.”

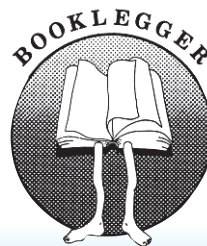
She added: “And simply go along with following other public health guidelines regarding regular health screenings, smoking, diet and cancer screening.”



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many changes while maintaining a love of books, readers, and their community. The store has recently reopened to in-store shopping after a lengthy construction project. The owners and staff are committed to keeping Booklegger a welcoming and healthy place to shop.



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PHOTO BY JOSÉ QUEZADA, HUMEDIA, LLC

Cheyenne Spetzler,

chief operating officer and founder Open Door Community Health Centers

BY JOSÉ QUEZADA
HUMEDIA, LLC

Cheyenne Spetzler has been involved with Open Door Clinics since 1979 and was instrumental in the founding of Open Door Community Health Centers. Open Door started as a single clinic in Arcata in 1971. It now has 12 community health centers across Humboldt and Del Norte counties — a service area larger than the state of Connecticut — serving more than 55,000 patients a year and employing almost 600 members of the community. Open Door provides a variety of health care programs, including family practice, pediatrics, women's health, prenatal and birth, family planning, geriatrics, dental care, urgent care, mental and

behavioral health, STD testing and counseling, HIV/AIDS care, alternative medicine, health education and smoking cessation.

Spetzler was raised in Missouri, and moved with her mother and siblings to Glendora, California, when her father, an electrician, transferred to a job with General Mills.

Q) What sparked you to be in the health care industry?

A) “You aren’t going to like the answer. I wanted to become an anthropologist, so I kept studying towards getting an anthropology degree, which brought me up to Humboldt. ... Herrmann (Spetzler) was the one who first got into health care.”

Spetzler’s husband had worked as an interim director of Mental Health for Orange County before moving to Lake Tahoe, where he took a job as the director a network of alcohol recovery clinics. During this time, she was attending community college while raising the couple’s young children. After a while, the Spetzlers had to choose to either follow her studies in San Diego or move to Humboldt County.

“We liked being free as little kids growing up in the Midwest, as did Herrmann living in the Midwest after emigrating here from Germany. We wanted the same things for our kids, so we moved here,” she said.

Spetzler said her husband took the job at Open Door even

though it “paid less than unemployment.” She began writing grant proposals supporting the clinic in 1977 — the year her husband joined the clinic — and started working at the clinic in 1979 running the front office with her infant son, Gabe, at her side. “Herrmann angered somebody, and she quit,” Spetzler recalled. “He said, ‘You gotta come in, because I don’t know how it’s gonna get done.’”

Spetzler remembered that when “Gabe grew old enough to start unloading file cabinets, I told Herrmann, ‘(Gabe) has to go to day care, you have to pay me.’ So, I started being paid.”

Spetzler calls health care “a puzzle.” “I love puzzles,” she added. “Health care is an interesting puzzle, and health care is a good one — how to put infrastructure in place. Herrmann would come up with 50 ideas a week. My struggle was to be able to manage the number of ideas he could come up with into a number I could pull off without embarrassing the family!” (laughing).

Q) Beside the current pandemic, what is a top community health care issue?

A) Equal access to care for people. We don't have a lot of good infrastructure because the health care system is fragmented. For instance, we don't have a pipeline that brings trained professionals to the tasks as they're put forward. Rural areas particularly suffer from being able to recruit qualified health care professionals.

"Then, there is the economic development issue; if you don't have good health care, then nobody wants to live in your community. That's the approach Herrmann and I took. From an economic development perspective, if you don't have good health care, you don't have good economic development."

Q) What advice would you give to a high school student interested in entering the health care field?

A) "Health care is a place you can make a difference."

Spetzler noted that youth are "idealistic and want to pick something that is going to make a difference."

"I think the problem with health care means that you have to be paying attention and doing well in school at a time when that might not be the main focus. If you want to make a difference, you're going to have to pay attention, especially in science and math," to be able to become a licensed provider, she said.

Spetzler added: "Right now, there is a lot of opportunity in health care, from every perspective. You can approach health care from the IT (information technology) perspective or you can approach health care from technical (perspective), like a radiology technician. You don't have to be a nurse or you don't have to

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PHOTO BY JOSÉ QUEZADA, HUMEDIA, LLC

>>FROM PAGE 7

be a doctor or you don't have to be a physician's assistant."

But she points out that you have to make a decision on what to do "and focus."

Q) As a leader in the health field, what have been challenges in responding to COVID-19?

A) "I (had) not anticipated a weak response of the American health care system. I think that we drill and we practice

and we think about pandemics and what to do and we never imagined doing that, especially in the early times (of the infection), without masks, without PPE (Personal Protective Equipment), without hand sanitizer. Those things were not available. So, you are looking at how do you provide care for people when you can't keep your staff safe and you don't know how bad it is going to be? And you have a health care system that pays you for seeing people, so how are you going to

sustain your workforce? How are you going to keep your focus on trying to improve things when all you're doing is struggling to get through the next day? I think one of the big challenges, if not the biggest, is the unknown. We don't know. We don't know how bad the pandemic is going to be in Humboldt County."

Spetzler acknowledged that the PPE supply chain (for staff) "is pretty good right now, but if we have to bring everybody back into the clinic, we don't know how well the supply chain will hold up. If we get widespread COVID in the entire United States, what happens to the supply chain?"

"One of the really good things I attribute the success of Open Door to is the practice of telemedicine since 1999," said Spetzler, who attributes the success of Open Door's telemedicine program to her late husband.

Spetzler admits that at first she thought telemedicine was "archaic."

"It was weird. I fought against it a lot because it was expensive, and I couldn't see the value of it," she said. "But, once we got to the point that everything had to pivot to not being in-person, the fact that we knew how to do it meant that our organization pivoted in one week — from being entirely face-to-face with patients to almost entirely seeing patients by video. We

had the infrastructure to pivot in just one week.

"We still have lots of people working remotely. I'm working remotely today," she said. "Not knowing what to plan for next week is a big challenge, not being able to see people (staff) in person is as well. People are starting to feel the effects of not getting regular health care, so we'll see how that turns out."

Q) If there was one community healthy living behavior you could affect, what would it be?

A) "I think there is a lot of illness and stress that's caused by the lack of social justice in our world and our community. So, sometimes I think the path to health is better treatment for all people. Some of that is access to health care."

She also pointed out individuals have to "do for themselves what they have to do to be healthy." Spetzler pointed to her own life as an example — "I'm sorry that I'm not still playing soccer. I think that in the days when you had that to look forward to, and you spent quite a bit of your week and weekends running around chasing a ball, that was very health promoting. Being outside, being active, being involved with sports. Just that one thing."

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PHOTO BY JOSÉ QUEZADA, HUMEDIA, LLC

Dr. Ellen Mahoney, surgeon and medical director, St. Joseph Hospital Eureka Cancer Program

BY JOSÉ QUEZADA
HUMEDIA, LLC

Dr. Ellen Mahoney was raised in Monterey, where her “father was an insurance agent and mother was a housewife.”

With the help of a scholarship from a nun, she was able to attend the private Santa Catalina High School, which she says, “was an experience that launched me into Stanford. I don’t know I would have gone to Stanford if not for that high school. ... It was a turning point in my life and education.”

Mahoney says originally, she intended to be a doctor “but got immediately distracted by the protests against the Vietnam War.”

Instead, she first got a degree in psychology, then turned around and completed her pre-med requirements, “because I’d actually decided I really did

want to do medicine.”

When she was 28 and five months pregnant, Mahoney was in the midst of the interview process for medical schools. “A lot of medical schools did not know what to make of me. I got a couple of offers, including Stanford (University School of Medicine), so I decided to stay there,” Mahoney said.

Later, as a student intern doing clinical rotations (trying different specialties) there, Mahoney discovered she was “really attracted to surgery.”

“I liked the people involved. I liked the problems. I liked the feedback loop. I liked everything about it,” said Mahoney, who also completed her residency at Stanford and was then offered a fellowship clinical faculty position at the school in addition to having a private practice in Palo Alto.

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Eureka The Greater Eureka Chamber of Commerce Business HQ

For 129 years the Greater Eureka Chamber of Commerce has been the voice for the North Coast business community. Our mission is to be an advocate for trade, commerce, jobs and tourism.

Businesses throughout the county have needed and relied on the support of the Chamber more than ever in 2020. Under the leadership of Board Chair, Jennifer Budwig and President/CEO, Donna Wright, we have been proud to serve your needs in these trying times. We have worked to ensure that you have been informed of essential information and to promote your businesses in the difficult and changing times of Covid. Rest assured that every effort has been made to guarantee your success.





PHOTO BY JOSÉ QUEZADA, HUMEDIA, LLC

"I was the first woman surgeon to practice in Palo Alto," she said. "It was an interesting time, because the internet was being developed in Silicon Valley and, just because I was a woman, I was getting a fair number of breast cancer cases. But, I was also doing everything. I was doing big cancer operations for the university."

At the same time, Mahoney was tasked with launching Stanford's trauma program, which she did. Mahoney oversaw a team of eight doctors who would "operate all day on cancer cases and operate all night on trauma cases."

"For three years, I was the highest volume surgeon at Stanford," she said. It all came to a halt, however, when Mahoney herself needed to have several surgeries on her back, and had to step back from her work at Stanford as she recovered.

During that same time, Mahoney says her husband, who's also a surgeon, realized that he'd spent half his career working "in a medically overserved community in the Stanford area." He wanted to work in an underserved community for the second half of his career, and Mahoney says that's when they relocated to Humboldt County.

Mahoney spent her initial time on the North Coast recuperating from her back ailments. "But," she said, "then I began to look around and the more I started seeing that this is the other end of the spectrum of

medical care — from the really elite research university side to the absolutely gritty, hard work of being a rural doctor."

She noted: "I was gratified to find that there were amazing health professionals here, and very dedicated people. ... But, what I was seeing as lacking was organization, because a lot of the health organization in the area just happened, with a lot of small, personalized private practices that delivered great care, but there was no sort of underlying structure."

She went on to say that it may be OK for most things, "but not for cancer."

Mahoney said, "When I arrived in 2000, there was radiation at St. Joe's, which is great, and there were three different medical oncology practices in town, and there is the American Cancer Society, but no organized cancer support. I got a glimpse into how the field was evolving. So, I said we need to get these people together. We need to have everybody under one roof in an oncology medical home model, where a patient goes in one door, and behind the door are all the people that they need.

In time, and with the collaborative efforts of several local physicians, all three medical oncology practices were brought under the roof of St. Joseph Hospital, which already was offering radiation oncology.

"When that happened," Mahoney said, "there was enough

money generated from various programs that we could use for support that we were able to put in cancer support services, we revitalized the tumor board, which is a high point for anyone with cancer. ... Patients admitted to the tumor board can expect 40 professionals all chiming in with ideas, or the latest thing they've read. Basically, different ways to accomplish the goal for the patient.

"Cancer support services also has an oncology social worker and an oncology-certified dietician, an oncology-certified financial counselor. And we are all supported by an amazing cadre of nurses, some of whom were in (local) private practices (before merging)," said Mahoney.

Q) What sparked you to be in the health care industry?

A) "Maybe it's an impulse that arises in everyone, but I just thought that 'I've got this life' and I want to make sure it means something. That at the end of it I've left a better place than I found it. ... I just wanted to make sure that I made a difference, that I was all used up by the time I was done."

Q) Beside the current pandemic, what is a top community health care issue?

A) It used to be primary care, until Dr. David O'Brien (past president St. Joseph Hospital, Humboldt) and Open Door (Community Health Clinics) started the residency program. I think it's going to be solving our primary care problems.

Another challenge is getting the confidence of the public in the health care we provide. I tell people you can get the same thing here that you would get if you lived in San Mateo. A lot of them will come to believe it after treatment, but it is not necessarily everybody's first impulse, thinking that, 'If it's local, it must not be quite as good.' But, when you have cancer, you don't want to be using your energy to go back and forth, if at all possible.

Mahoney also believes for

many patients the cost of cancer care is a big challenge as is attracting specialists to the area.

"If you are a surgeon or rheumatologist down in the Bay Area, you are just one of several. You can go on vacation and nobody really notices because there is so much wealth, in terms of personnel, that you always have backup. But up here the area is much more dependent on each one of us, and our health and our ability to stay here," she said. "We don't have a deep bench in a lot of different specialties. The best thing is to find specialists that are mission-driven."

Q) What advice would you give to a high school student interested in entering the health care field?

A) There wasn't any other job where I felt I could make as big a difference in the lives of people that deserve a break. I know everybody has their own justification for whatever field they enter, but for me it was the combination of science and heart-felt care that led me in this direction.

Mahoney says she tells her staff all the time, "We want a patient who has been diagnosed with cancer, who is terrified, who will feel a virtual quilt wrapping around them of family saying, 'We're gonna get you through this, and we're going to make sure you have the best outcome that science can give you these days, and we're going to try to do it in the most personal way.' We can be that personal here because we are smaller.

Mahoney said she's had a couple of her young patients come back to tell her they want to become surgeons.

"There was something they recognized in me that they could see themselves doing," she said. "... You don't have to be the typical star student to get in as long as you're willing to work

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hard and you get some breaks.”

Q) As a leader in the health field, what have been challenges and responding to COVID-19?

A) COVID has changed everything about everything. We have had to have help from Public Health and the CDC (Centers for Disease Control and Prevention) about how to keep our (cancer) patients safe. They are already in a compromised state during treatment. Unlike what you may hear from the president, it is not a light flu, it would be lethal for them. We buckled down and had to suspend some services for a while ... but they are back now, including a new lung cancer CT

screening available for patients. We had to figure out how to reconfigure the hospital to make it safe. The next challenge was convincing the patients who were frightened that it was safe.

Q) If there was one community healthy living behavior you could affect, what would it be?

A) It would be smoking. Not just smoking tobacco, but smoking anything. I think that the people who use cannabis products, if they want to do that, the tinctures and edibles are a whole lot safer than the toxic things coming into your lungs. Anything you have to do to have tissue have to keep repairing itself, like smoking being a continual irritant to the lining of the breathing tubes, is going to create more cancer because you are giving your cells more chances to make mistakes.

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