QUEEN OF THE VALLEY FOUNDATION MISSION

Through giving we help to heal.
We build relationships with those who share
Queen of the Valley Foundation’s values
of Compassion, Dignity, Justice, Excellence and Integrity,
by inviting our donors to give generously for the
health of our community.

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True heroism is remarkably sober,
very undramatic.
It is not the urge to surpass all others
at whatever cost, but the urge to serve
others at whatever cost.

-Arthur Ashe
Many hospitals have displayed banners that read “Heroes Work Here.” All frontline workers and medical personnel have indeed been heroes during our unprecedented global pandemic over the past year. But you had to have been here to understand exactly what this meant at the Queen.

As soon as we received official word that the first COVID-positive patients were on their way, our staff sprang into action. Here are just a few of their heroic efforts:

- Assembling isolation tents outside the ER for screening possible COVID patients
- Converting a hospital wing to an isolation unit to increase the capacity of negative pressure rooms
- Facing the fear of contracting a fatal infection, with nationwide shortages of Personal Protective Equipment (PPE)
- Absorbing extra shifts during surges, without the time to mourn the inevitable deaths of those who succumbed to this deadly virus
- Being away from family when needed at home during these uncertain times, and juggling work with childcare demands
- Finding ways to comfort patients who couldn’t see their families
- Doing all this with the added stress of local wildfires

We have an incredible family of caregivers and leaders who prove that our pledge to know, care for, and ease the way of our patients is much more than a slogan on the wall. And, as supporters of the Queen, you’re part of this remarkable family. Your time and resources have helped to fund our caregivers’ heroic performances.

The year 2021 is already looking up, starting with the hiring of our new Chief Executive, Terry Wooten. We look forward to many brighter days ahead!

Elaine John
CHIEF PHILANTHROPY OFFICER, QUEEN OF THE VALLEY MEDICAL CENTER
PRESIDENT AND CEO, QUEEN OF THE VALLEY FOUNDATION

This past year was challenging for hospitals around the world. Although I was not in Napa, I have heard countless stories of the heroism and resiliency of the caregivers and medical staff at the Queen. They pulled together during a time of confusion and uncertainty to ensure the community was cared for.

After working for the Sisters of St. Joseph and Sisters of Providence for 25 years, I’m grateful to be given this opportunity to continue to serve at the Queen, a ministry focused on the mission and serving the community.

In the upcoming year, my priority will be to get ourselves back on track, not only from a services standpoint but also for the wellness of our caregivers. After such a challenging year, we must allow them the opportunity to reenergize and refocus. After all, they’re the heart and soul of what we do every day.

I’ll be spending my first 100 days asking a lot of questions, meeting with members of our leadership team, and building a vision and strategy for our future. I’ll also be getting to know you, our valued donors. You’re the ones who help us identify the needs—be it cutting-edge equipment or specialty physicians—and raise the funds to make them possible.

I’m excited to be moving to the Napa Valley—as a food and wine enthusiast, I’ve come here many times as a visitor. I look forward to making it my home and to doing great work together with you.

Terry Wooten
CHIEF EXECUTIVE
During the best of times, the Queen’s Community Health Investment program serves Napa County’s most vulnerable populations, putting into practice Providence’s credo to “Know me, care for me, and ease my way.” But 2020 was not the best of times. The program’s already extensive mission was compounded by the global COVID-19 pandemic, which disproportionately affected people of color and lower-income families, many of whom had members working on the front lines.

Serving these populations takes on even greater importance during a global health crisis. The Community Health Investment and CARE Network programs joined Napa County efforts throughout the pandemic, pivoting services to include outreach, education, testing, assistance with prevention and quarantine, and vaccination.

“During COVID, our programs extended to serve the entire community,” says Aura Silva, Manager of the CARE Network.

For example, the Queen immediately engaged with the Napa Valley Community Organizations Active in Disaster. The program’s caregivers assisted in giving vaccinations at OLE Health Clinics, Providence Clinics, Snow Elementary School, and homeless shelters across Napa—as of this writing, they had delivered more than 4,700 vaccines county-wide. In a single month in 2020, they donated 2,000 masks, 1,500 bottles of sanitizer, and 2,500 thermometers to the Napa Valley Farmworker Foundation in preparation for the wine industry’s crush season.

But such broad outreach is only part of the story. The CARE Network ensured that individual needs were met as they arose, with staff who went beyond the call of duty to respond. In one case, a COVID patient was discharged to his home in the Lake Berryessa area. His entire family had to remain quarantined until they could be cleared by Napa County Public Health, with no one nearby to deliver food, diapers, or other necessities. Because of the remote location, no grocery stores would deliver, and money was running out. “It was an easy decision to intervene and assist,” says Alex Cortes, one of the CARE Network social workers. “I went to Wal-Mart to buy groceries and diapers for their daughter and drove to Lake Berryessa to deliver them.”

“The CARE Network also partnered with Napa County Housing and Homeless Services and Abode Services to provide care management to the most vulnerable unhoused individuals during the pandemic. Its caregivers worked with clients who lacked understanding or resources for Zoom or telephone meetings to assist them with “tele-health” medical visits.

Community Health Investment caregivers also conducted widespread education efforts, such as participating in Napa County’s bilingual Facebook COVID discussions; collaborating with Napa County Public Health and the Napa Valley Farmworker Foundation to educate vineyard workers on the science behind the vaccine; training employees at local Family Resource Centers; and educating parents in Napa’s Title One Schools.

Inpatient Service Growth Projections

Outpatient Service Growth Projections

**SG2 DATA

Gross Revenue Payor Mix

PUTTING MISSION INTO PRACTICE

Gross Revenue Mix

NAPA COUNTY FOUR-YEAR POPULATION PROJECTIONS

Total Hospital Operating Expenses

2020 ACTUAL = $237,790,182

51.1% Salaries, Wages & Benefits
15.0% Supply Expense
10.6% Other Expenses
8.6% Medical Purchased & Contracted Services
8.2% Physician & Other Professional Services
6.5% Repairs, Maintenance & Utilities

Total Hospital Operating Expenses

QUEEN OF THE VALLEY FOUNDATION
One of the greatest prices paid for the COVID pandemic is restrictions it places on seeing our loved ones. This is particularly true in hospitals, where families are prevented from visiting not just COVID patients, but all patients.

“That human connection, that support system really makes a difference to patients’ progress,” says Mackenzie Heizer, R.N. “Not having that really negatively impacts our patients’ spirits and their recovery times.”

Bill Duff was admitted to the Queen in late October for hypoxia and pulmonary toxicity from the medication he’d been taking for prostate cancer. Although he’d repeatedly tested negative for the virus, COVID precautions still limited his contact with family members.

Last Halloween, Bill’s wife, Paula, was able to visit him to discuss hospice and other end-of-life issues; Bill was on palliative care and understood that it was time for such conversations. Paula had read that the Queen would be holding a drive-by event for loved ones in the Herman Family Pavilion circular drive; tables were set up with candy for the children in cars. She marveled that Bill’s third-floor room looked directly out onto the drive and excitedly called her daughter, Andrea, to bring Bill’s three-year-old granddaughter by for a quick wave to her beloved “Poppy.”

“I said, you have to come,” Paula remembers. “The nurse got Bill out of bed and into a chair, which was a feat unto itself. Then, as Andrea’s car approached, he was able to stand long enough at the window that he and Dotty could each blow a kiss to the other. What a blessing that he got that room overlooking the drive!”

Down in the car, Andrea Duff says, Dotty was dressed as her favorite Disney character — Elsa from the animated film “Frozen.” “She was so excited to go visit Poppy at the hospital, since she hadn’t been able to see him in quite a while,” she said. “She’s normally really shy but she eagerly leaned out of the window.” Despite the three-story height difference, Dotty could see her grandfather and they eagerly exchanged blown kisses. “She had the biggest smile on her face, she was so happy,” Andrea says. “Dad always wanted to take care of his grandkids and make them smile.”

There was something else that made the day even more special: Andrea and Bill later remembered that they’d all been at the Queen three years before, to the day, as Andrea was in labor and delivery giving birth to Dotty.

Bill Duff was discharged from the Queen in early November and went home on hospice, where he had another five months with his family, including in-person visits with Dotty and his other three grandchildren. “He lived eight years after his original diagnosis, and there were many good times,” Paula says. “We’re blessed with that.” His prostate cancer was related to his exposure to Agent Orange during his service in Vietnam.

Both raised in Napa, Bill and Paula Duff were married 48 years. He’d been a 41-year employee of the C&H Sugar plant in Crockett, where he began by sweeping warehouse floors and ended as vice president of consumer products. About his longevity with the company, he liked to joke that he “couldn’t hold down a job.” Heizer, his nurse, remembers him as “very friendly and talkative, a pleasant patient and a good man.”

The Halloween event meant a lot to the entire Duff family, making a bad situation a little more joyful. “Dad got to see Dotty having a good time,” says Andrea, “which is what he lived for.”
When you’re expecting your first child and have a high-risk pregnancy, it’s already a little stressful. Now factor in a positive COVID test. Such was the case for Maria Gallegos, who was seeing her obstetrician, Susana Gonzalez, M.D., in August for regular check-ups and fetal monitoring due to her diabetes when she was diagnosed with preeclampsia.

At 34 weeks, Maria was immediately admitted into the Queen for observation, when she tested positive for the coronavirus, she was put into isolation. “Once a laboring or recovering mother tests positive, she can’t leave her room,” says Jennifer Baker, R.N., who was then working as a Staff Nurse II in the Intensive Care Nursery and is now Manager of OB/Neonatal Care Service. Every COVID-positive room has a COVID response cart outside its door, caregivers are outfitted in the most rigorous personal protective equipment (PPE), and expectant moms must wear masks, even during labor and delivery.

After two days, Maria was about to be released when another fetal monitoring showed that her baby wasn’t responding and she was rushed to the operating room for an emergency C-section. Her husband, Juan Manuel, was stuck in Chiles Valley because of the wildfires, but managed to arrive just in time for Maria’s surgery.

“Now you have an open environment and higher risk of infection,” Baker says of a COVID-positive patient in the operating room. Fortunately, Mateo Gallegos Rodriguez was born at a healthy 7.4 pounds and 19-3/4 inches. He was shown to his mother for about 30 seconds from an enclosed incubator before being whisked away. Because of her positive status, Maria couldn’t even touch her baby for his first 14 days, although Juan was allowed to hold him briefly.

Mateo’s unstable sugar levels meant that he had to be fed intravenously, so he was brought to the Intensive Care Nursery. He would remain there for 65 days as Maria recovered, went home, and regularly returned with breast milk to feed him. Over those two months a remarkable friendship developed. As a frontline worker, Baker also had to be away from her family for long stretches. “And now this mom is separated from her newborn,” she says. “So her baby becomes my baby. I will treat this child as if he’s my own.”

Baker and fellow nurse Sylvia Loya, R.N., held and interacted with Mateo, despite the barriers of PPE and face masks. They kept an iPad by his crib and sent daily photos and videos—his first smile, his first bath. They made footprint cards to show his growth. They decorated his crib. As Halloween approached, Sylvia bought him a tiny costume.

Although the situation was taxing and stressful for everyone, it brought family and staff together in a really special way. “I felt the love they all had for my child,” Maria says. “They responded so quickly to every little thing, and cared so much for our whole family.”

“We don’t usually have the luxury to bond with babies like this when their moms are around,” Baker says. “So, at a time when there was so much fear and anxiety and exhaustion, it was a positive. It was healing for a nurse’s heart.”
Reflecting on his accident, Mark Haberger says, “I’ve learned that things can happen very, very fast.” One afternoon last November, he was making some repairs to a greenhouse at Big Ranch Farms, the produce business he founded in 1994. Many Napa Valley residents will recognize Mark and his wife, Teresa, from buying their tomatoes and other produce at local farmers’ markets.

Mark had scaled a 12-foot orchard ladder to work on a greenhouse arch when the ladder’s leg suddenly sank into the dirt. He fell directly onto a three-quarter-inch-diameter wooden stake and, when he stood up, found himself fully impaled. Mark called to a worker nearby and instructed him to yank the stake out. Two workers then loaded him into the back of an SUV and sped him to the Queen, just a half-mile away.

Teresa, who’d been having lunch at nearby Bel Air Plaza, met them at the entrance to the Emergency Department. He had “no pain, just a lot of adrenaline,” Mark recalls. “I’m familiar with wounds, and I knew this one was bad.”

“This was a severe intra-abdominal penetrating injury that went all the way through his body and several major organs—a ‘level I’ trauma activation,” explains Nicholas Lopez, M.D., medical director for the Queen’s Emergency Department and the Napa Valley Emergency Medical Group. “We took a chest X-ray and ultrasound while alerting the trauma and respiratory therapy teams. They looked for signs of blood in the belly before starting a transfusion but, miraculously, there were none.

Mark was wheeled to an operating room where his care was taken over by Matthew Shepherd, M.D., the Queen’s medical director of Trauma and Acute Care Surgery, and his team. “It was pretty clear he had a major problem,” Shepherd says. “But somehow the stake had avoided two major blood vessels by a matter of centimeters. If he’d pierced his aorta, he would have bled out immediately.”

The three-hour surgery included an exploratory laparotomy—a large incision from chest to waist to examine every organ—and a major repair of his duodenum, three quarters of which was injured. Then, because Mark’s pancreas required a specialty intervention, he was transferred via helicopter to UC Davis Medical Center.

“To be impaled like that is usually a high mortality event,” Shepherd says. “If you believe in higher powers, there was intervention here.”

Mark remained at UC Davis for 70 days, first in the ICU and then the telemetry unit. “On January 4, Mark could only stand for 8 seconds before having to sit down,” Teresa remembers. “But on January 24, he walked out of the hospital without even a walker.” The team at UC Davis told her that Mark’s expert surgery at the Queen was what saved him.

Today Mark says he’s recovered 100 percent, without any disabilities or lingering effects. He’s well aware that if he hadn’t been close to the Queen, the only trauma center in Napa County, his outcome may have been very different. Dr. Shepherd credits another factor as well. “You should also interview his guardian angel,” he says. “Clearly, his time was not up.”
Not long after she moved to Napa in 1969, Anne Kramer contracted such a severe case of pneumonia that she was taken by ambulance to the hospital. That was her first experience with Queen of the Valley, but far from her last. Over the next five decades, the Queen would care for Anne’s family—now she’s returning the favor by leaving the hospital a bequest in her trust.

Anne moved here from San Diego when her first husband, a chief petty officer in the Navy, went to work at Mare Island, and they raised their son here. When she married a second time, to Lee Kramer, she adopted his two daughters. Life was healthy and good.

On Christmas morning 1978, however, Anne’s mother, Sarah Wilde, collapsed at home. Her Vallejo hospital had known for months that she needed a pacemaker for her heart condition, but couldn’t schedule the operation until January. Sarah was taken to the Queen as she awaited a bed in Vallejo. But after a week, her body could wait no longer. The Queen’s physicians installed the pacemaker and said they’d sort it out with Sarah’s hospital. That company never did pay the bill, but Anne’s family wasn’t charged for the operation or the seven-day stay at the Queen. Her mother lived another 18 years, until she was 80.

Lee had suffered severe neck pain since being blown out of a Jeep while serving in Vietnam. In 1990, he underwent spinal surgery by neurosurgeon Vincent Morgese, M.D. But Dr. Morgese suspected something else was wrong and ordered more tests. The diagnosis came back as amyotrophic lateral sclerosis (ALS, or Lou Gehrig’s Disease), an illness that’s usually fatal within five years.

Lee lived with the condition for another 18 years and stayed active until three days before his death. He served in the Golden West chapter of the ALS Association and became a valued online resource for those living with the disease.

Before he died in 2008, Lee and Anne agreed that they would leave a percentage of their estate to the Queen through a bequest in their living trust. “We wanted to be sure it would get done,” Anne says. “Not leave it up for someone else to do.”

The benefits of leaving a bequest are many. Even if your will or trust is already created, you can add a bequest through a simple codicil to your will or an amendment to your trust—and bequests are completely revocable if you change your mind. Because the Kramers’ bequest is based on a percentage of their estate, it doesn’t affect Anne during her lifetime.

Through the years, this community resource has continued to play an invaluable role in the Kramer family’s lives and health, attending to them not only with expertise but loving care. Three years ago, Anne’s son, Allan Praeger, was able to receive chemo treatments at the Queen, even though his doctor was affiliated with another hospital farther from home. “It’s extraordinary,” Anne says. “In every single interaction, they put the patient first. You become like family to them, and they to you. It truly feels like home.”
CUTTING-EDGE RESOURCES TO FIGHT ON THE FRONT LINES

Olive Romero still remembers getting the text in the middle of the night. In mid-February 2020, two patients had been transferred to the Queen from Travis Air Force Base, where they’d been flown after being quarantined on a cruise ship in Japan. They were the first patients to be released to a hospital in California after testing positive for COVID-19.

“I was scared when I first saw that text,” remembers Romero, the Lab Director for Providence Queen of the Valley. “We still had no idea what this virus was about. But the moment I walked through the hospital doors, everything happened so quickly. Questions and concerns needed to be resolved. I had to gather myself as a leader and hide my fear from my team.”

Unlike the Ebola virus of a few years before, nothing was yet known about this disease, including how deadly it might be. Those on the front lines wore hazmat suits and other personal protective equipment (PPE), but their eyes expressed the uncertainty everyone felt.

“I remember seeing the staff’s faces when we would do huddles, the exhaustion and fear for their own health as well as their families,” Romero says. “Yet they still chose to come to work, even though it meant being quarantined from their loved ones until we got more information on how to properly engage with patients.”

As the hub for the Providence Northern California system, the Queen’s 4,000-square-foot lab offers state-of-the-art resources far beyond those of most regional hospitals. It’s one of the few that can do microbiology testing as well as blood cultures; infection control; and blood, urine, and stool sampling. One form of coronavirus treatment is the administration of convalescent plasma, and the Queen’s lab participated as an early adopter of this novel treatment. Its cutting-edge equipment includes a Maldi TOF machine that provides immediate microbial identification for faster diagnosis and treatment. The staff includes certified scientists, phlebotomists, histologists, pathologists, and technical assistants.

Within just two weeks of receiving our first COVID patient the Queen was able to offer walk-in, no-contact COVID testing for the broader Napa community, as well as serve two of Napa County’s largest state hospitals. While other local labs were requiring up to two weeks for test results, the Queen’s test turnaround time was 24 to 48 hours.

Romero also serves as the administrative director of Respiratory Therapy, which is a critical therapeutic for COVID patients. Because it’s an aerosol treatment, respiratory therapists were putting themselves at great risk. At least five percent of them contracted the virus from their work but, thankfully, all of them recovered.

“Don’t forget, we also had the wildfires to deal with in the fall,” Romero says. “That was a double-whammy for us, not being able to open windows and doors for fresh air.” Because of the generosity of Queen of the Valley Foundation, the hospital had plenty of ventilators, and no patient had to wait for one.

The world hadn’t been tested by a global pandemic in a century, but with foresight and proactive philanthropy, the Queen was able to respond to this new challenge efficiently and with grace. “Thanks to the generosity of the Queen’s board and our donors, we had everything we needed to fight this battle,” Romero says.

“Thanks to the generosity of the Queen’s board and our donors, we had everything we needed to fight this battle.”
NAPA VALLEY VINTNERS PUTS THE QUEEN’S ER ON THE “FAST TRACK”

Natalie Powers still has no memory of the “syncopal episode” that caused her to black out and fall backward at home one night in December. Her head hit the cement slab floor, causing a skull fracture, subdural hematoma, traumatic brain injury, and concussion.

As a trauma registrar, Natalie reports and analyzes data for the Queen’s trauma program. “I follow patients like myself and see the outcomes,” she says. “So it was a blessing that I didn’t realize what was going on.” Fortunately, her family was nearby and her daughter, an emergency technician, knew what to do. An ambulance rushed Natalie to the Queen’s emergency department (ED), where she was observed and treated for several hours. Because of increased occupancy due to COVID, the wait for a bed was longer than usual.

Napa Valley Vintners (NVV) has awarded the Queen a $500,000 grant to help support a $5 million modernization project in the Queen’s Gasser Emergency Center. This effort will include the creation of a separate “Fast Track” micro-unit where dedicated staff can immediately treat and release less critical patients, freeing up standard treatment rooms for those with more serious conditions. It was required that 50 percent of the grant award be raised in matching funds by Queen of the Valley Foundation; that match was completed in 2020.

On the night of Natalie’s accident, she was seen immediately by a team of physicians and sent for a CT scan. Neurosurgeons Nguyen Do, M.D. and Vincent Morgese, M.D. determined that she didn’t require surgery and Natalie was transferred to the telemetry department early the next morning. After four days there and nine days of acute rehabilitation, she was sent home and, within six months, her recovery was much quicker than expected. The hearing, vision, and mobility she’d lost have all returned.

Although NVV was unable to hold its annual Auction Napa Valley fundraiser in 2020 due to the pandemic—leading to its decision to discontinue the event—it has used reserve funds to continue its generous support for many community organizations while it regroups and develops future fundraising strategies. Since the inception of its annual auction, NVV has contributed more than $140 million to community organizations, including $13 million to Queen of the Valley Medical Center.

“The generosity of NVV in continuing its support for nonprofit partners makes our community a robust and safe environment in which to work and live,” says Queen of the Valley Foundation President and CEO Elaine John. “This Fast Track unit will reduce congestion and greatly improve the way we can efficiently provide patient care in our ED.”

FAST TRACK CAPABILITIES

• The Fast Track unit can be converted to an isolation wing if the existing wing and ICU beds are at capacity during a pandemic, or to an evacuation unit for medical services after natural disasters.

• It will also provide space for transitional patients awaiting placement in a geriatric assisted-living center or vulnerable patients awaiting mental health services or placement in local shelters.

• Our Emergency Department has earned the GEDA (Geriatric Emergency Department Accreditation) distinction, which focuses on creating a welcoming, warm, and safe environment for seniors and dementia patients who require emergency care.
DONORS

Gifts received from January 1, 2020 – December 31, 2020

VISIONARY $5,000,000 - $9,999,999
Mary Beth and Tim Harmon

PHILANTHROPIST $1,000,000 - $4,999,999
Barbara and Warren Vinick

GUARDIAN $500,000 - $999,999
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The text contains a list of donors to the Queen of the Valley Foundation. The list includes names and contributions ranging from $1,000 to $5,000,000. The contributors are organized into categories such as Visionary, Philanthropist, Guardian, Humanitarian, Benefacer, Contributor, Patron, Sponsor, Subscriber, and Underwriter. The contributions range from individual donations to contributions from corporate entities and foundations. The list is comprehensive and includes a wide range of donors, indicating a diverse group of supporters for the foundation.
Queen of the Valley Medical Center, a 208-bed hospital, level III trauma center based in the City of Napa opened its doors in 1958. The hospital’s core services include acute rehabilitation, bariatric surgery, cancer, cardiac, emergency, maternity and women’s care, neurosurgery, orthopedics, robotic surgery, stroke and urology. Synergy Health Club, a Providence-owned facility offering fitness and studio classes, is located on the hospital’s campus, and Providence owns an urgent care clinic in Napa as well.

Recent Awards Include:
• Healthgrades: Queen of the Valley was ranked among America’s 250 Best Hospitals in 2021, 2020 and 2019, placing it in the top 5 percent in the nation for consistently delivering clinical quality. The hospital was recognized by Healthgrades for five awards including as a Five-Star Recipient for Treatment of Sepsis for 4 Years in a Row (2018-2021) and one of Healthgrades America’s 100 Best Hospitals for Critical Care™ for 2 Years in a Row (2020-2021).
• Joint Commission: Queen of the Valley is a Primary Stroke Center and a Certified Joint Program.
• U.S. News & World Report: Queen of the Valley was named a High Performer in the following treatments and conditions in 2021: Heart Failure, Kidney Failure, Hip replacement and Pneumonia.

Learn more at providence.org
Because of you,
Queen of the Valley is able to deliver a level of sophisticated technology, equipment and services uncommon for a community of our size, including:

- Acute Rehabilitation
- Bariatric Services
- Cancer Center
- Cardiac Center
- Diabetes Care
- Emergency Services with Trauma Center
- Imaging Center
- Intensive Care Unit
- Laboratory
- Neurological Care affiliated with UCSF Department of Neurosurgery
- OB/ICN
- Orthopedics
- Palliative Care
- Robotics Surgery
- Stroke Center
- Wellness Center
- Wound Care

We apologize for any omissions, misspellings or misrepresentations in our donor gift lists. Please contact us to notify us of a correction and/or if you would like to opt out of future Foundation mailings.

We are standardizing the presentation of our donors’ names on the Queen’s Hall of Honor display in the main hospital lobby as well as in Foundation publications. If you have concerns about the way your name appears, please contact the Foundation office at 707-257-4044.

www.foundation.providence.org/ca/queen
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