



**Board Meeting Agenda  
October 27, 2025 at 6:30 pm**

<b>In Person</b>	Pioneer Memorial Clinic Conference Room, Heppner, OR 97836
<b>Microsoft Teams</b>	<a href="https://teams.microsoft.com/l/meetup-join/19%3ameeting_YjAxNTAzMWEtMDU1OC00MDc5LWl1OTYtOGYwNzdkYWZhNmNl%40thread.v2/0?context=%7b%22Tid%22%3a%22e541c19f-8c9d-4cb9-aad3-eccb12f05ad8%22%2c%22Oid%22%3a%227db07a04-b00f-4acb-9d4f-73ba8b98e06f%22%7d">https://teams.microsoft.com/l/meetup-join/19%3ameeting_YjAxNTAzMWEtMDU1OC00MDc5LWl1OTYtOGYwNzdkYWZhNmNl%40thread.v2/0?context=%7b%22Tid%22%3a%22e541c19f-8c9d-4cb9-aad3-eccb12f05ad8%22%2c%22Oid%22%3a%227db07a04-b00f-4acb-9d4f-73ba8b98e06f%22%7d</a> Meeting ID: 217 705 740 938 2 Passcode: aM9j7Eu3

- 1. Call to Order and Pledge of Allegiance**
- 2. Public Comment (Maximum of 3 minutes per person. Maximum of 30 minutes for comments)**
- 3. Approval of Meeting Minutes**
  - A. September 29<sup>th</sup> 2025 meeting
- 4. Consent Agenda**
  - A. CEO Dashboard – Bob Houser
  - B. Quality Report- Dr. Seals
  - C. EMS Stats – Bob Houser
- 5. Reports**
  - A. CEO Report – Bob Houser
  - B. Financial Report – Jodi Ferguson
- 6. Med Staff Report – No report, Med Staff does not meet until Nov.20<sup>th</sup>.**
  - A. Approve Staff Privileges Re-Appointment of:**
    - None
  - B. Approve staff Privileges Appointment of:**
    - None
- 7. Old Business**
  - A. Decision on the usage of the church building, sell or keep?
- 8. New Business**
  - A. Posting of CEO Job opportunity.

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**Promise of Excellence**

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**Respect:** Recognizing and valuing the dignity and uniqueness of everyone. Respect creates a work environment based on teamwork, encouragement, trust, concern, honesty, and responsive communication among all employees and our patients.

**Integrity:** Encompassing honesty and consistently adhering to the principles of professionalism and accountability with our patients, fellow employees, and community partners. Integrity is at the heart of everything we do.

**Excellence:** Creating standards of performance that surpass ordinary expectations. We want to make this the place where patients want to come, our providers want to practice, and people want to work!

- 9. Executive Session:** Members of the news media may attend executive sessions, with limited exceptions. News media are instructed not to report about what happened in executive sessions.
- A. Discussion of litigation or litigation likely to be filed. To be held under ORS 192.660(22)(h)
  - B. Discussion of preliminary negotiations involving matters of lease agreement with Irrigon Fire Department. To be held under ORS 192.660(2) (e).

**10. Return to Open Session**

**11. Adjourn**

- 12. Next meeting to be held November 24<sup>th</sup>, 2025 at Port of Morrow, Sand Hollow Conference Room, Boardman, Oregon 97818. Eric Volk, with Wipfli auditing firm will do the board education on hospital finances at 5:30 pm and present the year end 2024-2025 cost report during the regular meeting.**

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<b>Meeting</b>	Board of Directors		
<b>Date / Time</b>	September 29, 2025, 6:30 pm	<b>Location</b>	Ione Fire Station, 140 W Main Street, Ione, OR 97843 Zoom
<b>Chair</b>	Janet Greenup	<b>Recorder</b>	Julie Baker
<b>Board Members</b>	<b>Present:</b> Stephen Munkers, Janet Greenup, Russel Nichols, Jason Hanna		
<b>Attendees</b>	<b>Staff:</b> Bob Houser, Julie Baker, Jodi Ferguson, Tonja Lemmon, Jamie Houck, Sheryl Angell, Staci Hedman, Katelin Tellechea, Jimmy Wimer, Natalia Wight, Kalah Barnett, Juli Kennedy, Lisa Spencer, Tina Montgomery, Tina Davidson, Heidi Turrell Carr, Paola Macias Flores <b>Guests:</b> N/A <b>Press:</b> Gazette Times		

<p><b>Mission</b> Bring essential health services to our rural communities that meet the unique needs of the people we serve.</p>	<p><b>Vision</b> Be the first choice for quality, compassionate care, and lead the way in promoting wellness and improving health in our communities.</p>	<p><b>Values</b> Integrity, Compassion, Quality, Respect, Financial Responsibility</p>
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Agenda Item	Minutes
<p><b>1. Call to Order &amp; Pledge of Allegiance</b></p> <p><b>2. Public Comment</b></p> <p><b>3. Approval of Meeting Minutes</b> A. August 25th 2025 meeting</p> <p><b>4. Consent Agenda</b> A. CEO Dashboard – Bob Houser B. EMS Stats – Bob Houser</p> <p><b>5. Reports</b> A. CEO Report – Bob Houser B. Financial Report – Jodi Ferguson     1. Update on year end closeout     2. Final audit presented at Oct. 27<sup>th</sup> board mtg.</p> <p><b>6. Medical Staff Report</b> A. Approve Staff Privileges Re-Appointment of:     • Jeffrey Westin, MD</p>	<p>1. Chair Janet called the meeting to order at 6:30 pm</p> <p>2. Public Comment: None</p> <p>3. Approval of Meeting Minutes <b>MOTION:</b> Jason Hanna moved to approve the minutes for the A. August 25th 2025 meeting. Russ Nichols seconded the motion. The motion passed by all Board members present.</p> <p>4. Consent Agenda A. Houser discussed the CEO Dashboard (see packet), including turnover and vacancy rates for the District. Hanna asked about the data cited for comparable states regarding turnover and vacancy, they are cited as 2020-2021. He requested the citations be reviewed for more current comparable dates.</p> <p>Houser also discussed one new position open for the District, a Care Coordinator at Pioneer Memorial Hospital.</p> <p>Houser discussed NRC Patient Experience Surveys. Board held a discussion around how to increase these numbers. Jamie Houck shared that the District sent out mailed paper surveys prior to June, and went live with NRC and phone/email/text surveys around June or July. She stated that they expect to see an increase in survey responses with this new method of contact. Discussion held around the surveys, resulting in a recommendation from the Board for staff to provide verbal reminders and post flyers regarding the surveys. Greenup requested a copy of the questions asked for the Board.</p>

<ul style="list-style-type: none"> <li>• Eileen McElligott, FNP</li> <li>• Jon Watson, PA-C</li> <li>• Jamie Reed, LCSW</li> </ul> <p>B. Approve staff Privileges Appointment of:</p> <ul style="list-style-type: none"> <li>• Stuart Clive, MD/ER</li> <li>• Thomas Long, MD/ Lab Medical Director</li> </ul> <p><b>7. Old Business</b></p> <p>A. Qualifications for CEO job description. Any additions?</p> <p>B. Update on appraisal of church (see attached)</p> <p>C. Update on destruction of old records &amp; storage facilities</p> <p><b>8. New Business</b></p> <p>A. Request to purchase on site server to host Thrive – (see attached)</p> <p>B. Employee Benefit Plan Renewal</p> <p><b>9. Executive Session</b></p> <p>Members of the news media may attend executive sessions, with limited exceptions. News media are instructed not to report about what happened in executive sessions.</p> <p>A. Discussion of litigation or litigation likely to be filed. To be held under ORS 192.660(22)(h)</p> <p>B. Discussion of preliminary negotiations involving matters of lease agreement with Irrigon Fire Department. To be held under ORS 192.660(2) (e).</p> <p><b>10. Return to Open Session</b></p>	<p>B. Houser reviewed EMS Stats (in packet). Discussion was held regarding transfers/transports time vs response time. Houser said the numbers look good.</p> <p><b>5. Reports</b></p> <p>A. Houser provided a CEO Update (see packet). Houser shared that provider Lori Lammers FNP has a delayed start date at Irrigon Medical Clinic, but remains excited to join the clinic. He discussed that Dr. Jack’s position will require an MA, he would like this position to be filled and trained prior to Dr. Jack’s start date in December. He shared there are around five applications for the CFO position, and the interview process will start next week. Service Excellence Council (SEC) updates were include in the CEO Update, Houser discussed the invitation to the District Holiday Banquet. Discussion continued around the holiday banquet, which has a budget of approximately \$6,500. Hanna asked where the budget comes from, Houser replied the Administration portion of the budget. The Board agreed to say a few words at the Banquet. Houser discussed that the State approved a waiver for an outstanding survey finding regarding doors in the hospital through February. Two glass doors have been ordered and will total approximately \$18,000 with installation. He said new flooring will be ordered for a janitor’s closet to meet standards of material. Once this is complete, he anticipates approval for the room to be used for PFTs once the closet flooring is complete. He added that room 204 has been approved for the Dexa Ultrasound, this is an infinite waiver.</p> <p>B. Jodi Ferguson presented financials (see packet), including an update on year end and close out. Hanna asked if Travelers and Contract employees were more expensive? Ferguson said this is not necessarily the case, referring to the change in benefits and salaries when Contract fees go up. Discussion held around professional fees verse benefits fees.</p> <p><b>6. No Medical Staff Report</b></p> <p><b>MOTION:</b> Russ Nichols moved to approve credentials and privileges as presented for Jeffrey Westin, MD, Eileen McElligott, FNP, Jon Watson, PA-C and Jamie Reed, LCSW. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.</p> <p><b>MOTION:</b> Russ Nichols moved to approve credentials and privileges as presented for Stuart Clive, MD/ER and Thomas Long, MD/ Lab Medical Director. Jason Hanna seconded the motion. The motion passed unanimously by all Board members present.</p> <p><b>7. Old Business</b></p>
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A. Houser presented qualifications for CEO position (see packet), the Board had no objections. Discussion held around timing of posting. Houser recommended a posting timeline which included to post the position in November and review candidates around the start of 2026. The Board had no objections.

B. Houser presented an appraisal of the Nazarene Church building owned by the District (see packet) and asked the Board to consider what they would like to do with the building. Discussion held regarding the building. Nichols asked if the space was needed, Houser shared it is in the process of being cleaned out. Nichols

C. Update on destruction of old records & storage facilities.

Houser and Baker provided an update of destruction on the old records, which opened up space in both the shed and records vault in the hospital. Baker said the records will be on a regular schedule of destruction going forward.

#### 8. New Business

A. Houck presented the request to purchase on site server to host Thrive (see packet). Houck explained the District has had to change Electronic Medical Record (EMR) software over the past 2-3 years from Centriq to Thrive and from Thrive to Cerner. Centriq is stored on a District server, Thrive is currently stored on a cloud-based system. The District needs to determine the need to stay on the cloud or move Thrive to our own servers. Houck shared that to store on an internal server would save the District approximately \$40,000 over five years. Patrick Feller, IT, recommends the onsite server for hosting.

Hann asked about the security of internal servers, Houck addressed that District security is top notch and she had no concerns as we have stored Centriq internally for years without an issue. Hanna asked if this was a budgeted expense. Houck said it was not, as Thrive came to the District unexpectedly that the service would no longer host at no cost. Discussion held around budget and reduced costs for access to Thrive. Hanna questioned how long it would take to install our server. Houck said it would be about 4-6 weeks for the server to arrive, then time would be needed to install and roll over data. Discussion held on logistics and financials of the request.

**MOTION:** Russ Nichols moved to approve the request for option 1 as presented in the packet, an onsite MCHD server. Jason Hanna seconded the motion. The motion passed unanimously by all Board members present.

B. Houser discussed the employee benefit plan renewal and reviewed the financials. He stated that in current year budget, this package was budgeted for a 15% increase, however came in at a 7.5% increase. Discussions held around rates and costs to both the employees and the District. Ferguson will review and verify numbers presented to the Board, and provide a further update.

	<p>9. At 7:35 pm Greenup called to order Executive Session under:</p> <ul style="list-style-type: none"> <li>A. Discussion of litigation or litigation likely to be filed. To be held under ORS 192.660(22)(h)</li> <li>B. Discussion of preliminary negotiations involving matters of lease agreement with Irrigon Fire Department. To be held under ORS 192.660(2) (e).</li> </ul> <p>Members of the news media may attend Executive Sessions, with limited exceptions. News media are instructed not to report about what happened in Executive Sessions.</p> <p>10. Open Session called to order at 8:00 pm. Discussion held by Board regarding a need to make a public motion for what was discussed in Executive Session.</p> <p><b>MOTION:</b> Jason Hanna moved reject both offers discussed in Executive Session under A and B. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.</p>
<p><b>D. Adjourn</b></p>	<p>With no further business to come before the Board, regular session adjourned at 8:01 pm. Minutes taken and submitted by Julie Baker. Approved _____.</p>

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# MORROW COUNTY HEALTH DISTRICT

Excellence in Healthcare

## October 2025 Meeting (September Stats)

HUMAN RESOURCES	
<b>Turnover Rate</b> (Rolling 3 Months: July-August-September)	4.1%
<b>Vacancy Rate</b>	17.95%
<b>Number of Open Positions</b>	21
<b>Newly Created Open Positions</b>	1

FINANCIAL		
<b>Days Cash on Hand</b>	12	Goal ≥ 90
<b>Days in AR Cerner</b>	95	Goal ≤ 60
<b>Days in AR (All)</b>	111	

The average hospital turnover rate for 2020 was 19.5% (Statista).  
 The annual total separations rate for health care and social assistance for 2021 was 39.4% (Bureau of Labor Statistics).

RURAL HEALTH CLINICS				
MEASURE	PMC	ICC	IMC	BIC
<b>Third Next Available</b> (Current Month)	18	4	6	N/A
<b>Total Visits</b> (Previous Month)	164	171	216	68

"Third Next Available" is an industry standard measurement of primary care access. It is defined as the average length of time in days between the day a patient makes a request for an appointment with a provider and the third available appointment for a new patient physical, routine exam, or return visit exam. Values shown are clinic averages.

PIONEER MEMORIAL HOSPITAL	
<b>Hospital Admit Days (IP, SS, NSS, OBS, R)</b> (Previous Month)	210
<b>Emergency Department Visits</b> (Previous Month)	88
<b>Hospital Outpatient Visits</b> (Previous Month)	298

HOME HEALTH & HOSPICE	
<b>Hospice Days</b> (Previous Month)	111
<b>Home Health Visits</b> (Previous Month)	123

## NRC Patient Experience Real-Time Survey

The real-time survey platform was implemented on June 1st, 2025. Stats show a cumulative report of all responses since implementation. Starting on June 1, 2026 stats will show a 12 month rolling period. Patients are contacted via text, e-mail, or phone with a 24 hour delay between attempts to give them the opportunity to complete the survey. Patients contact information must be captured correctly in CERNER to receive the survey.

What is the NRC Net Promoter Score? It is a metric that reflects how likely a patient is to recommend a healthcare organization to others.

Would you recommend this provider's office to your family and friends? (Net Promoter Score)	
June 1, 2025 to October 15, 2025	
<b>Boardman Immediate Care</b>	<b>66.7%</b> Responses = 33
<b>Ione Community Clinic</b>	<b>93.5%</b> Responses = 93
<b>Irrigon Medical Clinic</b>	<b>74.8%</b> Responses = 127
<b>Pioneer Memorial Clinic</b>	<b>86.4%</b>

Would you recommend this service/department to your friends or family? (Net Promoter Score)	
June 1, 2025 to October 15, 2025	
<b>Emergency Department</b>	<b>65.2%</b> Responses = 46
<b>NRC Benchmark</b>	<b>80.5%</b>
<b>(EMS)</b>	<b>100.0%</b> Responses = 8
<b>(EMS)</b>	
<b>NRC Benchmark</b>	<b>82.5%</b>
<b>Lab</b>	<b>71.4%</b>

	Responses = 81
<b>All Clinics Combined</b>	<b>82.0%</b>
	Responses = 334
<b>NRC Benchmark</b>	86.1%

	Responses = 35
<b>NRC Benchmark</b>	<b>80.5%</b>
<b>Radiology</b>	<b>60.0%</b>
	Responses = 20
<b>NRC Benchmark</b>	<b>80.5%</b>

## NRC HCAHPS

All HCAHPS are captured via a paper survey that is mailed to all admitted inpatients at Pioneer Memorial Hospital. CMS requires paper surveys for HCAHPS at this time.

<b>June 1, 2025 to October 15, 2025</b>	
<b>Inpatient</b>	<b>100.0%</b>
	Responses = 3
<b>NRC Average</b>	71.5%

<b>June 1, 2025 to October 15, 2025</b>	
<b>Inpatient</b>	<b>100.0%</b>
	Responses = 3
<b>NRC Average</b>	72.4%



# RHC Quality Measures Update

CHRISTINE SEALS MD

MCHD CMO

BOARD PRESENTATION FOR 10.27.25

# Diabetes Out-of-Control: HgA1C

2025 Data	Pioneer Memorial Clinic	Ione Community Clinic	Irrigon Medical Clinic	Clinic Totals Overall	Target
Diabetes HbA1c Poor Control [6 Points]	16.7%	14.29%	21.3%	20.5%	20.0%

As of 10/20/25

## ▶ PMC

- ▶ 24 total patients in Denominator
- ▶ Meeting Target- Improved 1% since Aug

## ▶ ICC

- ▶ 7 total patients, measure N/A (must have 10 or more in denominator to count)

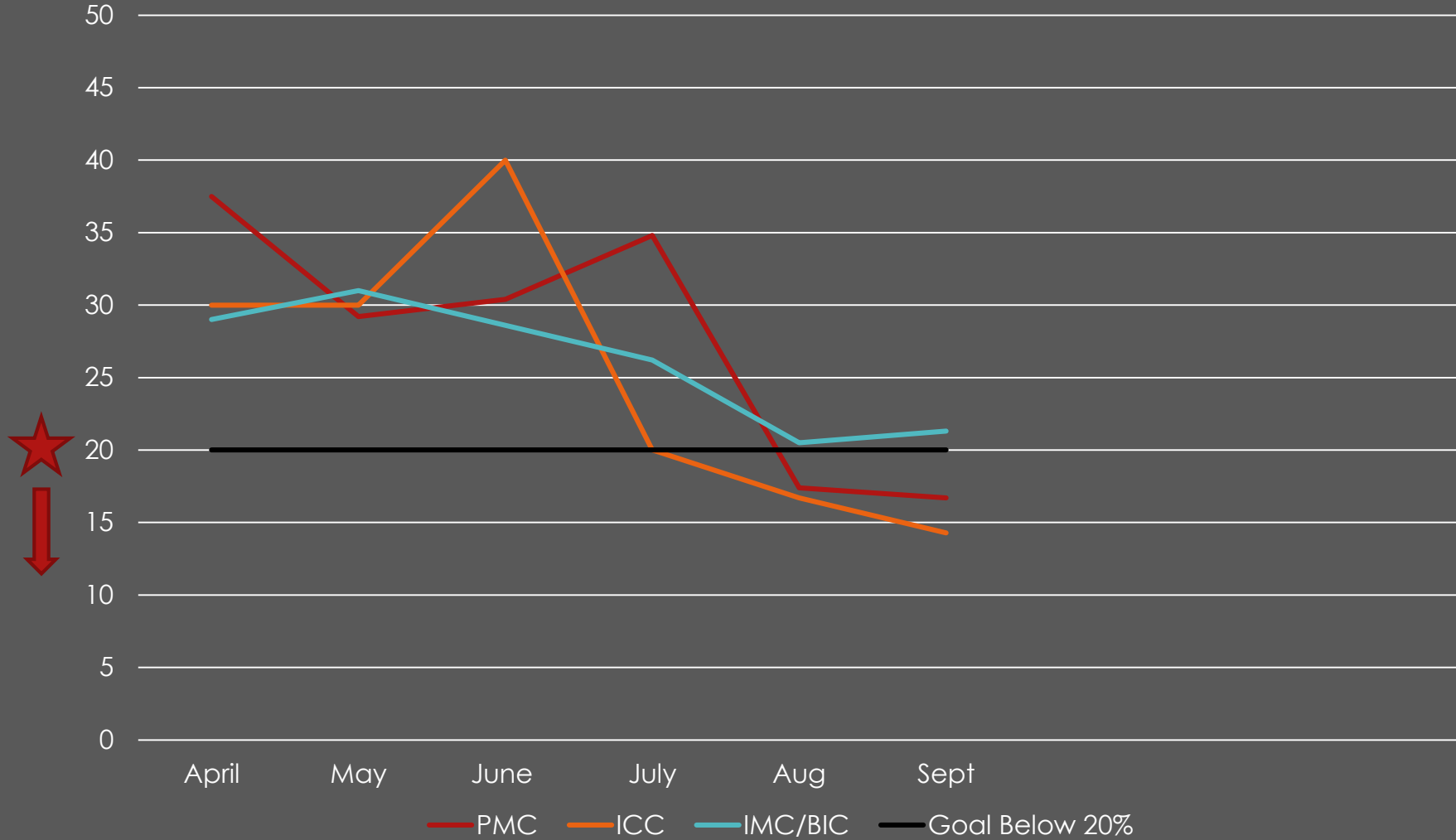
## ▶ IMC/BIC

- ▶ 47 total patients in Denominator
- ▶ 3 new Diabetic patients uncontrolled moved us from met to unmet but very close

Tracking Type:	*2025 EOCCO Visit ICC (use this for reporting)		*2025 EOCCO Visit IMC (use this for reporting)		*2025 EOCCO Visit PMC (use this for reporting)		All Specified	
	Value	%	Value	%	Value	%	Value	%
<b>1. Clinical EHR-Based: Diabetes HbA1c Poor Control</b>								
A. [DENOMINATOR]: Total Patients 18-75 with a diagnosis of Diabetes and a visit during the measurement period.	7	100 %	47	100 %	24	100 %	78	100 %
1. Last HbA1C > 9% during the measurement period.	1	14.29 %	9	19.15 %	3	12.5 %	13	16.67 %
2. No HbA1c in the measurement period	1	14.29 %	1	2.13 %	1	4.17 %	3	3.85 %
B. [NUMERATOR]: HbA1C Poor Control (>9% or No HbA1c in the measurement period)	2	28.57 %	10	21.28 %	4	16.67 %	16	20.51 %
C. Total denominator without exclusions/exceptions	7	100 %	48	100 %	26	100 %	81	100 %
1. Exclusion	0	0%	1	2.08 %	1	3.85 %	2	2.47 %

Report as of 10.1.2025

# Diabetes Patients Out of control: Lower is Better



# Wellness Visits ages 3-6

2025 Data	Pioneer Memorial Clinic	Ione Community Clinic	Irrigon Medical Clinic	Clinic Totals Overall	Target
Child and Adolescent Well-Care Visits - Age 3-6 [4 Points]	42.86%	0.00%	57.14%	NA	70.2%

Off Dashboard As of 10/7/25

Numerator	Denominator	Your Rate	Target	Meeting Target	Needed to meet target
<b>PMC</b>					
6	14	42.86%	70.2%	N	4
<b>ICC</b>					
0	0	0.00%	70.2%	N	N/A
<b>IMC/BIC</b>					
8	14	57.14%	70.2%	N	2

## ▶ PMC

- ▶ 14 Patients in Denominator
- ▶ Improving since July 35.7%
- ▶ 4 more to meet target

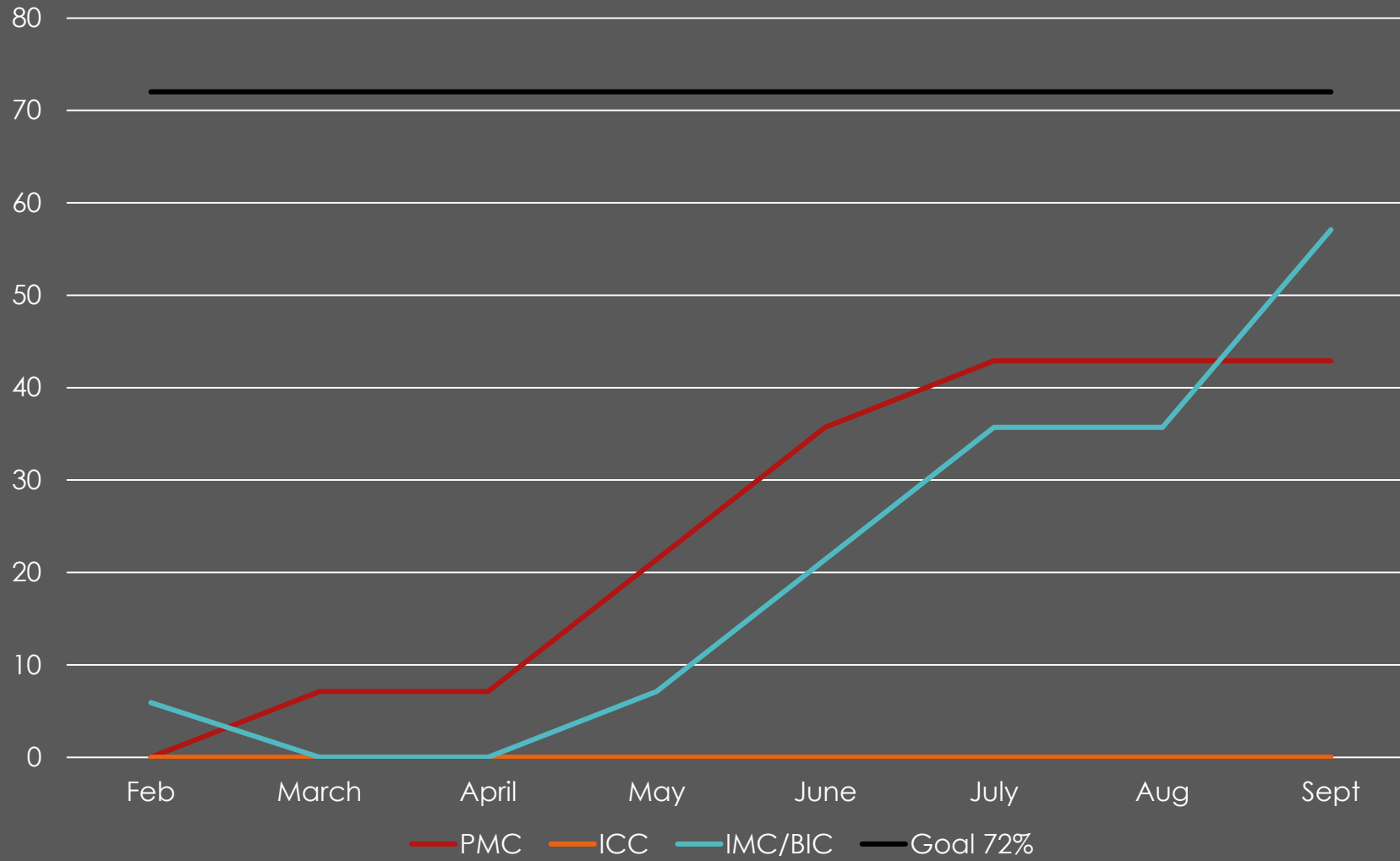
## ▶ ICC

- ▶ There are no patients, measure N/A

## ▶ IMC/BIC

- ▶ 14 Patients in Denominator
- ▶ Improving since July 21.4%
- ▶ 2 more to meet target

## 3-6 Wellness Visits



# Wellness Visits ages 7-21

2025 Data	Pioneer Memorial Clinic	Ione Community Clinic	Irrigon Medical Clinic	Clinic Totals Overall	Target
Child and Adolescent Well-Care Visits - Age 7-21 [2 Points]	25.00%	38.98%	36.63%	NA	41.2%

Off Dashboard AS of 10/7/25

Numerator	Denominator	Your Rate	Target	Meeting Target	Needed to meet target
<b>PMC</b>					
22	88	25.00%	41.20%	N	15
<b>ICC</b>					
23	59	38.98%	41.20%	N	2
<b>IMC/BIC</b>					
63	172	36.63%	41.20%	N	8

## ▶ PMC

- ▶ 96 Patients in Denominator
- ▶ Improving since July 18.4%
- ▶ Clinic teams actively working the gap lists

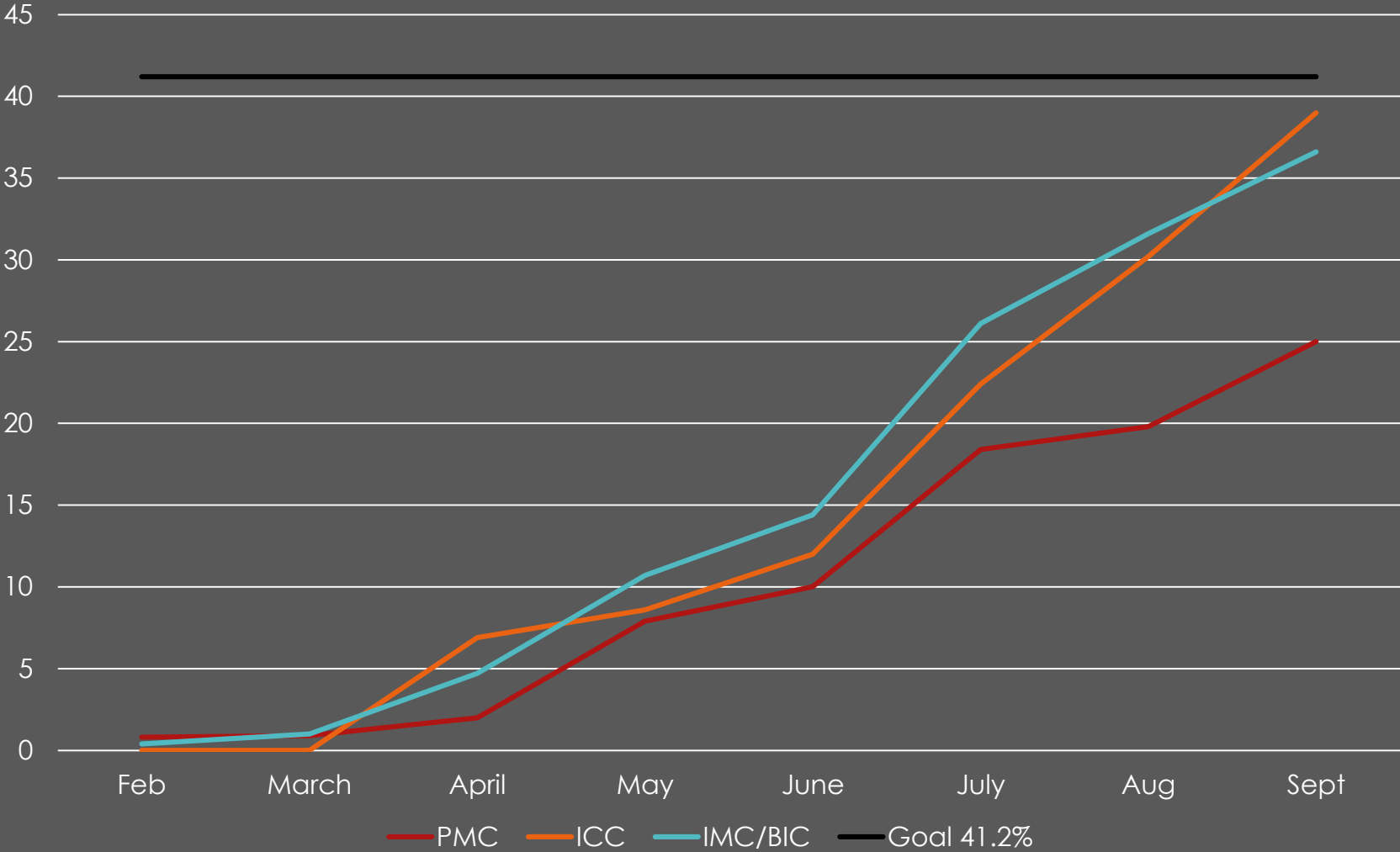
## ▶ ICC

- ▶ 53 Patients in Denominator
- ▶ Very Close and Improving since July 22.4%
- ▶ 2 patients needed to meet

## IMC/BIC

- ▶ 174 Patients in the denominator
- ▶ Improving since July 26.1%

# 7-21 Wellness Visits



# Depression screening and follow up

2025 Data	Pioneer Memorial Clinic	Ione Community Clinic	Irrigon Medical Clinic	Clinic Totals Overall	Target
Depression Screening and Follow-up Plan [4 Points]	75.56%	57.25%	74.03%	69.7%	73.8%

Off Dashboard AS of 10/20/25

## ▶ PMC

- ▶ 135 Patients in Denominator
- ▶ Meeting Target – Marked improvement from Aug 48.23% due to data collection improvements

## ▶ ICC

- ▶ 138 Patients in Denominator
- ▶ Improving since Aug 42.03%

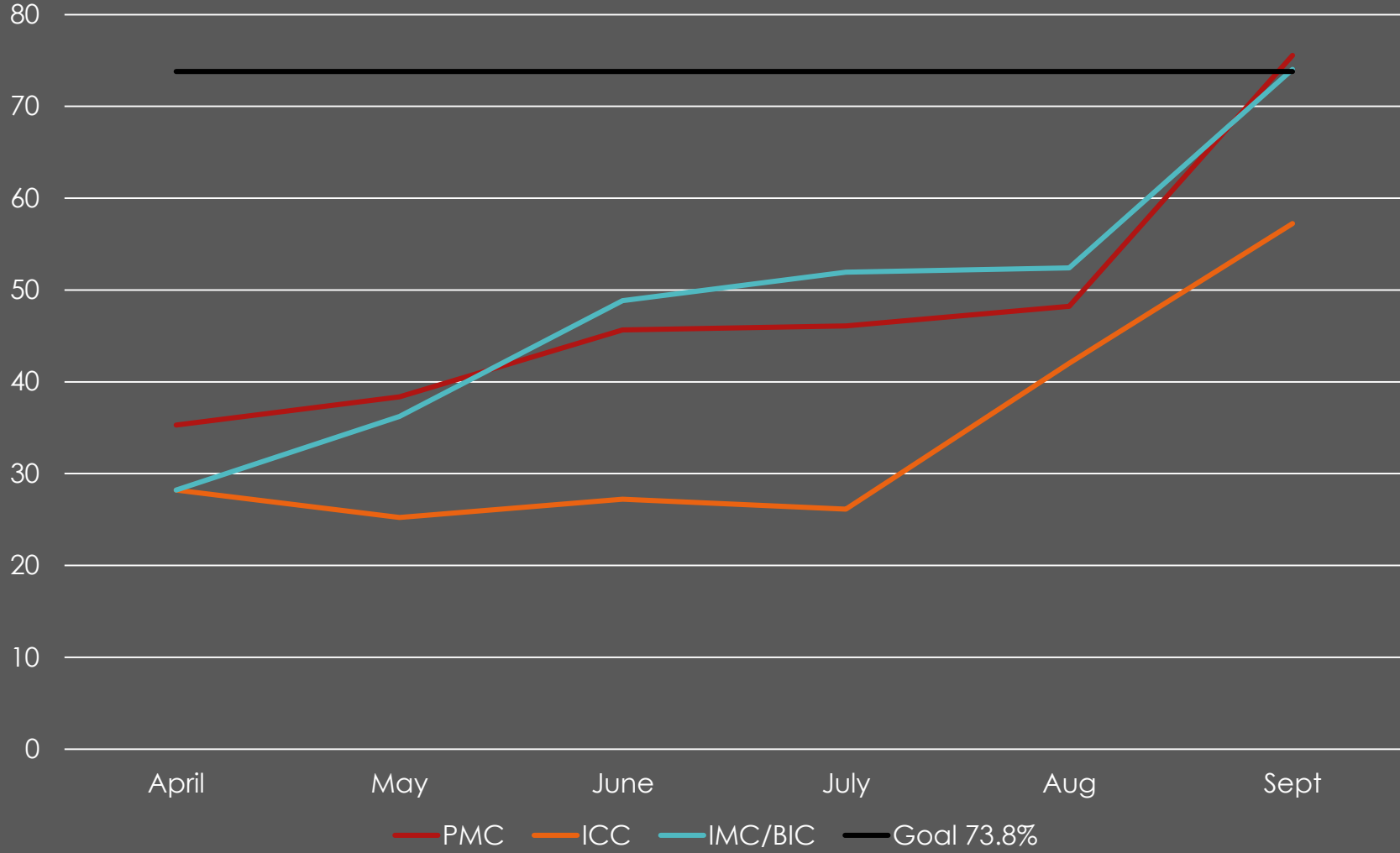
## IMC/BIC

- ▶ 253 Patients in Denominator
- ▶ Meeting Target- Marked improvement since Aug 52.40%

\*\*\*Declined Screenings Included in this months Data

Tracking Type:	*2025 EOCCO Visit ICC (use this for reporting)		*2025 EOCCO Visit IMC (use this for reporting)		*2025 EOCCO Visit PMC (use this for reporting)		All Specified	
Item	Value	%	Value	%	Value	%	Value	%
<b>2. Clinical EHR-Based: Depression Screening and Follow-up Plan</b>								
A. [DENOMINATOR]: Total Patients 12 years and older without a prior dx of bipolar w/qualifying encounter during the measurement period	138	100 %	253	100 %	135	100 %	517	100 %
1. Number of Patients Screened for Depression during measurement period	82	59.42 %	156	61.66 %	104	77.04 %	334	64.6 %
a. Number of Patients Screened Positive during the measurement period	21	25.61 %	36	23.08 %	20	19.23 %	76	22.75 %
1. Number of Patients who screened Positive and had a follow-up plan on the same day or taking antidepressants	13	61.9 %	29	80.56 %	17	85 %	59	77.63 %
2. [NUMERATOR]: Screened for Depression during measurement period, and if positive have a documented follow up on the date of the positive screen or pharmacological interventions	75	54.35 %	152	60.08 %	102	75.56 %	322	62.28 %
B. Total denominator without exclusions/exceptions	151	100 %	284	100 %	153	100 %	576	100 %
1. Exception	11	7.28 %	15	5.28 %	12	7.84 %	36	6.25 %
2. Exclusion	2	1.32 %	17	5.99 %	6	3.92 %	24	4.17 %

# Depression Screening



2025	IRRIGON								HEPPNER								IONE				LEXINGTON			
	299				298				599				598				699				499			
	En Route	Response Time	Number of Runs	Number of Transports	En Route	Response Time	Number of Runs	Number of Transports	En Route	Response Time	Number of Runs	Number of Transports	En Route	Response Time	Number of Runs	Number of Transports	En Route	Response Time	Number of Runs	Number of Transports	En Route	Response Time	Number of Runs	Number of Transports
January	0.0	0.0	0	0	1.1	2.0	31	20	1.0	2.6	25	16	1.7	5.0	3	1	0.0	0.0	0	0	0.0	0.0	0	0
Transfers January	0.0	0.0	0	0	0.0	0.0	0	0	0.0	0.0	0	0	2.4	10.8	5	5	0.0	0.0	0	0	0.0	0.0	0	0
9-1-1 February	0.3	1.5	1	1	1.2	3.0	28	20	1.0	2.9	12	8	1.5	14.6	1	1	0.0	0.0	0	0	0.0	0.0	0	0
Transfers February	17.5	20.0	2	2	0.0	0.0	0	0	0.0	0.0	0	0	8.7	14.8	1	1	0.0	0.0	0	0	1.5	17.2	2	2
9-1-1 March	0.6	4.6	2	2	1.0	3.0	41	27	1.3	3.0	17	8	0.5	4.0	2	0	0.0	0.0	0	0	0.0	0.0	0	0
Transfers March	0.0	0.0	0	0	0.0	0.0	0	0	5.0	15.0	1	1	7.3	8.0	3	3	0.0	0.0	0	0	3.0	8.1	2	2
9-1-1 April	0.8	1.1	4	4	1.0	2.4	34	23	1.0	2.4	28	18	0.7	6.8	3	1	0.0	0.0	0	0	0.0	0.0	0	0
Transfers April	4.1	9.2	2	2	2.0	4.4	2	0	0.0	0.0	0	0	1.5	12.4	4	4	0.0	0.0	0	0	0.0	0.0	0	0
9-1-1 May	1.3	4.5	2	2	1.0	3.8	39	20	1.0	3.0	30	19	2.0	4.1	1	0	0.0	0.0	0	0	0.0	0.0	0	0
Transfers May	0.0	0.0	0	0	0.0	0.0	0	0	4.0	23.0	1	1	5.0	20.0	4	4	0.0	0.0	0	0	0.0	0.0	0	0
9-1-1 June	1.5	4.8	3	3	1.7	5.3	24	10	1.0	2.8	22	17	2.1	6.6	4	3	0.0	0.0	0	0	0.0	0.0	0	0
Transfers June	0.0	0.0	0	0	0.0	0.0	0	0	24.6	4.5	1	1	19.9	1.2	8	8	0.0	0.0	0	0	0.0	0.0	0	0
9-1-1 July	3.0	10.0	4	3	1.0	1.7	36	24	1.0	18.0	23	13	3.0	12.0	3	0	0.0	0.0	0	0	0.0	0.0	0	0
Transfers July	0.0	0.0	0	0	0.0	0.0	0	0	0.0	0.0	0	0	9.0	23.5	3	3	0.0	0.0	0	0	0.0	0.0	0	0
9-1-1 August	2.7	8.0	1	0	1.0	3.0	36	23	1.0	3.0	14	10	0.0	0.0	0	0	0.0	0.0	0	0	0.0	0.0	0	0
Transfers August	0.0	0.0	0	0	0.0	0.0	0	0	7.0	1.0	2	2	1.5	2.0	6	6	0.0	0.0	0	0	0.0	0.0	0	0
9-1-1 September	3.0	5.0	7	3	1.0	3.0	34	14	1.0	15.0	26	12	1.0	1.0	1	1	0.0	0.0	0	0	0.0	0.0	0	0
Transfers September	0.0	0.0	0	0	0.0	0.0	0	0	0.0	0.0	0	0	1.0	5.0	3	3	0.0	0.0	0	0	0.0	0.0	0	0
9-1-1 October																								
Transfers October																								
9-1-1 November																								
Transfers November																								
9-1-1 December																								
Transfers December																								
<b>TOTAL</b>			28	22			305	181			202	126			55	44			0	0			4	4

En route means the length of time between when the ambulance is dispatched to when the ambulance leaves the garage.

Response time means the length of time between the notification to the ambulance and the arrival of the ambulance at the incident scene.\*

\*Note that response times are not adjusted for miles traveled.



**MORROW COUNTY  
HEALTH DISTRICT**  
Excellence in Healthcare

PO BOX 9  
Heppner OR 97836  
Tel: 541-676-9133  
Toll Free: 1-800-737-4113  
www.morrowcountyhealthdistrict.org

**TO: Morrow County Health District Board of Directors**

**FROM: Bob Houser, CEO, FACHE**

**SUBJECT: CEO REPORT TO THE BOARD**

**DATE: October 27th, 2025**

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1. **Recruitment/Staffing:** Lori Ann Lammers, FNP start date has been pushed back due to the loan company pulled back her loan when the government shut down occurred. Tentative start date now is Oct. 27<sup>th</sup>.
  - We interviewed the top 3 candidates for the position of CFO during the past several weeks and have made an offer to one of the candidates whom has accepted, Rick Worden is the CFO for MCHD. He will be sharing his time with MCHD and CCS until after Jan. 1<sup>st</sup> due to prior commitments to CCS. Rick brings over 18 years of CPA/accounting experience with him. Also a very special thank you to Jodi Ferguson who stepped up and assumed extra duties of the CFO as well as her own. She truly is a dedicated and professional staff member of our team.
  - We are advertising for a Lab Technical Supervisor as current supervisor, Jeremy Filipe has resigned due to his family, moving to Maine. His last day is November 21<sup>st</sup>.
  
2. **Additional employees needed:** Medical Assistant/Pioneer Memorial Clinic/Dr. Jack, Chief Executive Officer, and Patient Account Representative, Laboratory Technical Supervisor, Dietary Manager.
  
3. **Community Benefit Request:** None received at this time.
  
4. **Miscellaneous:**
  - A. We have been given the verbal OK to proceed with the cleaning and equipment set up in room 2015 from OHA lead surveyor and our architect. Our waiver request is being sent up the chain of command to the overall in charge with a recommendation of "NO REVIEW" is needed. PFT services will begin after the new equipment is set up, calibrated and in-service training has been completed. Staff is also working on setting up new charge codes in the billing side of our system.
  - B. Home Health Director, Lisa Spencer, will be meeting with Mike Hughes, Boardman Ambulance Director on 10/28/25 to present a proposal for Boardman Ambulance to transport patients in our Hospice program to Pioneer Memorial Hospital. We have two other agreements in place to allow our ambulances to go into other counties ASA to transfer Hospice patients. Boardman wishes to do this with its own ambulance service.

Pioneer Memorial Hospital & Nursing Facility	Pioneer Memorial Home Health & Hospice	Pioneer Memorial Clinic	Irrigon Medical Clinic	Ione Community Clinic	Morrow County Ambulance
P – (541) 676-9133	P – (541) 676-2946	P – (541) 676-5504	P – (541) 922-5880	P – (541) 422-7128	P – (541) 676-9133
F – (541) 676-2901	F – (541) 676-9017	F – (541) 676-9025	F – (541) 922-5881	F – (541) 422-7145	F – (541) 676-2901
TDD – (541) 676-2908					

- C. We have received notice from CMS that the Irrigon Medical Clinic will be getting a “recertification” unannounced survey sometime within the next several weeks. These types of surveys usually take place when a clinic is renewing its status as a RHC (rural health clinic). Trista Seastone, Clinic Director and Katelin Tellechea, Outpatient Services Director will be working on getting the necessary policies updated, if need be, and bringing staff up to speed regarding the upcoming survey. Dr. Christina Seals will also be involved as Medical Director and working with the providers at the clinic in preparation of the survey/inspection.

**CEO Itinerary:**

The CEO Itinerary for November is attached. Please keep in mind this itinerary can change from day to day but I can always be reached by call my cell phone, 541-620-0610.

# November 2025

November 2025							December 2025						
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa
2	3	4	5	6	7	8	7	8	9	10	11	12	13
9	10	11	12	13	14	15	14	15	16	17	18	19	20
16	17	18	19	20	21	22	21	22	23	24	25	26	27
23	24	25	26	27	28	29	28	29	30	31			
30													

SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY
Oct 26	27	28	29	30	31	Nov 1
	3 10:00 Disaster Drill walk-thru 1-4 pm Possible ONA negotiations	4	5 9-12 noon Possible ONA negotiations mtg.	6 8-9:00 CHIP Leadership mtg. 9-10:30 CHIP mtg	7	8
9	10 11-12:00 noon Compliance Comm. 8-9:00 am Disaster Drill (live)	11	12 8-9:00 am Trauma mtg	13 10:30 mtg with Lindsey/HR 7:30-9:00 (CAB) mtg - lone	14	15
16	17 3-4:00 Eastern Ore CEO conf. call	18	19 8-9:30 Willow Creek Development mtg.	20 8:00-9:00 Med Staff @ PMC 8:45-9 Medical Exec mtg National Rural Health	21	22
23	24 5:30-6:30 Board Ed. 6:30 pm Board mtg @ Port of Morrow	25	26 CEO gone the 26th-27.	27 Thanksgiving	28	29
30	Dec 1	2	3	4	5	6

<b>ASSETS</b>	<b>CURRENT YTD</b>
<i>CURRENT ASSETS</i>	
<b>TOTAL CASH &amp; INVESTMENTS</b>	<b>1,438,629</b>
ORACLE HEALTH A/R	3,111,348
THRIVE A/R	512,673
CENTRIQ HOSPITAL, SWING & CLINICS A/R	(603)
CENTRIQ HOME HEALTH & HOSPICE A/R	-
<b>GROSS PATIENT RECEIVABLES</b>	<b>3,623,418</b>
LESS CLEARING ACCOUNTS	50
LESS ALLOWANCE FOR UNCOLLECTABLE	(689,590)
LESS ALLOWANCE FOR CONTRACTUALS	151,429
<b>NET PATIENT ACCOUNTS RECEIVABLE</b>	<b>3,085,307</b>
ASSIGNED ACCOUNTS	-
EMPLOYEE ADVANCES	4,794
EMPLOYEE PURCHASES RECEIVABLE	2,407
RECEIVABLE-340B FR/SUN RX	24,177
TAXES RECEIVABLE-PRIOR YR	40,618
TAXES RECEIVABLE-CURRENT YEAR	993,719
OTHER RECEIVABLES	22,417
GRANTS RECEIVABLE	-
MC/MD RECEIVABLE	107,510
ASSISTED LIVING RECEIVABLE	5,113
<b>TOTAL OTHER RECEIVABLES</b>	<b>1,200,754</b>
INVENTORY-GENERAL	158,564
INVENTORY LAB & RX	282,212
PREPAID EXPENSES	-
PREPAID INSURANCE	49,865
PREPAID-OTHER	113,694
<b>TOTAL INVENTORY &amp; PREPAID</b>	<b>604,334</b>
<b>TOTAL CURRENT ASSETS</b>	<b>6,329,025</b>
<i>LONG TERM ASSETS</i>	
LAND	119,671
LAND IMPROVEMENTS	321,575
BUILDING & IMPROVEMENTS	5,922,706
EQUIPMENT	7,851,911
SUBSCRIPTION BASED ASSETS	3,518,584
CONSTRUCTION IN PROGRESS	440,005
LESS ACCUMULATED DEPRECIATION	(11,628,529)
<b>TOTAL LONG TERM ASSETS</b>	<b>6,545,922</b>
<b>TOTAL ASSETS</b>	<b>12,874,946</b>

**LIABILITIES**

*CURRENT LIABILITIES*

**TOTAL ACCOUNTS PAYABLE** 336,549

MISC PAYABLE -

SHORT TERM NOTES PAYABLE -

**TOTAL OTHER PAYABLE** -

**TOTAL ACCRUED WAGES & LIABILITIES** 1,477,206

ACCRUED INTEREST 2,949

SUSPENSE ACCOUNT 104,157

TCAA SUSPENSE 560

DEFERRED INCOME 1,506

MC/MD SETTLEMENT PAYABLE 741,224

CONTINGENCY SETTLEMENT PAYABLE 100,000

**TOTAL OTHER LIABILITIES** 950,396

**TOTAL CURRENT LIABILITIES** 2,764,152

*LONG TERM LIABILITIES*

SUBSCRIPTION BASED LIABILITIES 2,954,705

BEO 2019 BOILER LOAN -

BEO 2018 BOARDMAN BLDG LOAN 47,176

BEO LOAN FOR AMBULANCE -

MORROW CO 2018 BRDMAN BLDG LN 25,564

BEO IMC EXPANSION 2018 178,411

GEODC 2021 HOUSE LOAN -

MORROW CO 2021 CHURCH LOAN 40,550

BEO REFINANCE OF USDA LOAN 708,155

BEO 2024 CAPITAL LOAN 912,587

**TOTAL LONG TERM LIABILITIES** 4,867,148

**EQUITY/FUND BALANCE**

GENERAL FUND UNRESTRICTED BAL 8,522,434

NET INCOME/LOSS (3,278,787)

**EQUITY/FUND BALANCE** 5,243,647

**TOTAL LIABILITIES & EQUITY/FUND BALANCE** 12,874,946

Unaudited - Subject to Change

CURRENT MONTH	LAST MONTH	DOLLAR VARIANCE		CURRENT YEAR TO DATE	BUDGET YEAR TO DATE	DOLLAR VARIANCE
<b>PATIENT SERVICES REVENUE</b>						
165,014	146,719	18,295	INPATIENT REVENUE	429,140	507,746	(78,607)
445,474	553,342	(107,867)	OUTPATIENT REVENUE	1,539,692	2,199,834	(660,142)
253,538	287,467	(33,929)	CLINIC REVENUE	773,678	816,893	(43,215)
173,115	14,481	158,634	HOME HEALTH & HOSPICE REVENUE	258,379	293,757	(35,377)
-	323	(323)	ORACLE HEALTH UNALIASED	323	-	323
<b>1,037,142</b>	<b>1,002,333</b>	<b>34,809</b>	<b>TOTAL GROSS PATIENT REVENUE</b>	<b>3,001,213</b>	<b>3,818,230</b>	<b>(817,018)</b>
2,198	2,900	(702)	PROVISION FOR BAD DEBTS	7,748	-	7,748
(97,753)	163,347	(261,100)	CONTRACTUALS & ADJUSTMENTS	(110,363)	733,106	(843,468)
<b>(95,555)</b>	<b>166,247</b>	<b>(261,802)</b>	<b>TOTAL REVENUE DEDUCTIONS</b>	<b>(102,615)</b>	<b>733,106</b>	<b>(835,721)</b>
<b>941,587</b>	<b>1,168,579</b>	<b>(226,993)</b>	<b>TOTAL NET PATIENT REVENUE</b>	<b>2,898,598</b>	<b>4,551,336</b>	<b>(1,652,738)</b>
<b>300,681</b>	<b>300,681</b>	<b>-</b>	<b>TAX REVENUE</b>	<b>902,043</b>	<b>902,969</b>	<b>(926)</b>
<b>8,915</b>	<b>4,765</b>	<b>4,150</b>	<b>OTHER OPERATING REVENUE</b>	<b>16,853</b>	<b>90,941</b>	<b>(74,088)</b>
<b>1,251,183</b>	<b>1,474,025</b>	<b>(222,842)</b>	<b>TOTAL OPERATING REVENUE</b>	<b>3,817,494</b>	<b>5,545,246</b>	<b>(1,727,753)</b>
<b>OPERATING EXPENSES</b>						
845,395	851,761	(6,366)	SALARIES & WAGES	2,529,468	3,018,394	(488,926)
261,663	265,574	(3,911)	EMPLOYEE BENEFITS & TAXES	789,110	1,081,912	(292,802)
178,254	144,094	34,161	PROFESSIONAL FEES	488,799	433,678	55,121
58,752	59,295	(543)	SUPPLIES & MINOR EQUIPMENT	225,088	343,169	(118,081)
3,299	6,181	(2,882)	EDUCATION	13,931	16,434	(2,503)
4,721	28,762	(24,041)	RECRUITING & ADVERTISING	33,821	26,176	7,645
29,006	22,080	6,926	REPAIRS & MAINTENANCE	74,634	60,764	13,871
169,839	210,376	(40,537)	PURCHASED SERVICES	554,372	473,410	80,962
77,868	81,326	(3,458)	DEPRECIATION	240,624	276,858	(36,233)
15,857	16,130	(273)	TRAVEL	47,471	47,441	30
14,489	17,906	(3,417)	UTILITIES, PHONE & PROPANE	49,752	51,720	(1,968)
18,707	18,707	-	INSURANCE	56,121	55,303	818
1,402	600	802	TAXES & LICENSES	4,284	7,282	(2,998)
22,932	23,098	(166)	INTEREST	68,759	70,922	(2,163)
4,576	6,829	(2,253)	DUES & SUBSCRIPTIONS	15,328	11,895	3,434
11,141	17,573	(6,432)	OTHER EXPENSES	39,639	58,437	(18,798)
<b>1,717,901</b>	<b>1,770,293</b>	<b>(52,392)</b>	<b>TOTAL OPERATING EXPENSES</b>	<b>5,231,203</b>	<b>6,033,795</b>	<b>(802,592)</b>
<b>(466,718)</b>	<b>(296,268)</b>	<b>(170,451)</b>	<b>GAIN/LOSS FROM OPERATIONS</b>	<b>(1,413,710)</b>	<b>(488,549)</b>	<b>(925,161)</b>
<b>174,526</b>	<b>124,566</b>	<b>49,960</b>	<b>NON-OPERATING NET GAIN/LOSS</b>	<b>430,892</b>	<b>538,904</b>	<b>(108,012)</b>
<b>(292,193)</b>	<b>(171,702)</b>	<b>(120,491)</b>	<b>NET INCOME/LOSS</b>	<b>(982,818)</b>	<b>50,355</b>	<b>(1,033,173)</b>