



**Board Meeting Agenda
November 27, 2023 at 6:30 p.m.**

In Person	Morrow County Grain Growers – Conference Room 350 Main Street, Lexington, OR 97839
Zoom	https://us06web.zoom.us/j/82577122266?pwd=gx3PziuX3nTfwZYBT7CGOK8dnTHJ6X.1 Meeting ID: 825 7712 2266 Passcode: 644755

1. Call to Order

2. Public Comments

Maximum of 3 minutes per person/topic. Multiple items on the same topic need to be combined through one speaker. A maximum of 30 minutes may be allotted for public comment.

3. Approval of Meeting Minutes

- A. October 30, 2023 – Regular Session
- B. November 16, 2023 – Special Session

4. CEO Report & Dashboard – Emily Roberts

5. Financial Report – Nicole Mahoney

6. Consent Agenda

- A. EMS Stats – October 2023

7. New Business

- A. Surplus OHV Park Equipment

8. Old Business

9. Executive Session

- A. ORS 192.660(2)(f) to consider information or records that are exempt from public inspection pertaining to ongoing or anticipated litigation exempt from disclosure under ORS 192.345(1).
- B. ORS 192.660(2)(f) to consider information or records that are exempt from public inspection pertaining to ongoing or anticipated litigation exempt from disclosure under ORS 192.345(1).
- C. ORS 192.660(2)(f) to consider information or records that are exempt from public inspection pertaining to trade secrets exempt from disclosure under ORS 192.345(2).

Promise of Excellence

Compassion: Being motivated with a desire to assist patients and staff with empathy and kindness and committed to going the extra mile to ensure patients and staff feel comfortable and welcomed.

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.

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10. Adjourn

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Meeting	Board of Directors		
Date / Time	October 30, 2023 at 6:30 p.m.	Location	Pioneer Memorial Clinic Conference Room, 130 Thompson Ave, Heppner, OR 97836
Chair	Diane Kilkenny, Board Vice Chair	Recorder	Sam Van Laer, Julie Baker
Board Members	Present: Diane Kilkenny, John Murray, Stephen Munkers, Trista Seastone		
Attendees	Staff: Emily Roberts, Nicole Mahoney, Julie Baker, Tiffany LaHue, John LaHue, Katelin Tellechea, Kami Ridling, Heidi Wimer, Diane Hardy, Mindy Smith, Lisa Paquet, Heather Smith (Zoom), Kathleen Greenup (Zoom), Dr. Everts (Zoom), Jodi Ferguson (Zoom), Sam Van Laer Guests: Eric Volk (WIPFLI) Press: Andrea Di Salvo (Heppner-Gazette)		

Mission
Bring essential health services to our rural communities that meet the unique needs of the people we serve.

Vision
Be the first choice for quality, compassionate care, and lead the way in promoting wellness and improving health in our communities.

Values
Integrity, Compassion, Quality, Respect, Financial Responsibility

Agenda Item	Minutes
1. Call to Order	Diane Kilkenny called the meeting to order at 6:30 p.m. Kilkenny stated that public comment can be submitted in writing or at the next meeting as there will not be public comment tonight due to the WIPFLI presentation. WIPFLI will present before the other agenda items.
2. Audited Financial Presentation - WIPFLI	Eric Volk, Independent Auditor with WIPFLI, presented the District's financial audit (see Board packet). MOTION: John Murray moved to approve the audited financials. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.
3. Financial Report - Nicole Mahoney	Nicole Mahoney relayed that the actual tax certifications for FY 2023-24 have been received from the County and came in slightly less than estimated by the Assessor for the budget because of a lower total assessed value. She explained that tax compression due to Measures 5 and 50 sets limits on the amount of tax that can be levied. The District is subject to loss of tax revenue due to compression in the amount of \$42,000 on the tax base and \$239,000 on the operating levy. For the operating levy that is currently up for a renewal vote, 91% of the District's tax compression is from the City of Boardman and only 7% is from the City of Heppner with the remainder spread across the county in small amounts. Mahoney updated the Board on the tax revenue anticipation line of credit which allows the District to borrow up to \$2.5 million in anticipation of tax revenues not yet received. The District has only drawn \$500,000 and does not foresee the need to draw any further funds due to the increased collections from accounts receivable. The District anticipates the \$500,000 being paid back in November after the first tax

	<p>payments are received. Mahoney reports it is a common practice for Critical Access Hospitals to get revenue anticipation notes and it was not because of a budget shortfall. The \$2.5 million is not recorded as a liability since it is a line of credit, but the \$500,000 will be in October. The District needed the line of credit for this fiscal year's operations because tax revenues are not received until the 5th month of this fiscal year.</p> <p>Eric Volk discussed cost-based reimbursement. Critical Access Hospitals are eligible for allowable cost plus 1% reimbursement, however this does not cover all costs just the Medicare and Medicaid share of patients. Eric further explained that in general, ambulance services are not profitable, especially rural providers. Critical Access Hospitals are the only entities able to receive cost-based reimbursement for ambulance services, but only if there is no other ambulance provider within 35 miles.</p> <p>The Financial Report was presented by Nicole Mahoney (see Board packet). Mahoney reviewed the September financial statements.</p>
<p>4. Approval of Meeting Minutes</p>	<p>MOTION: John Murray moved to approve the minutes for the September 25, 2023 regular session as presented. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.</p> <p>MOTION: John Murray moved to approve the minutes for the October 2, 2023 special session as presented. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.</p>
<p>5. CEO Report & Executive Team Dashboard - Emily Roberts</p>	<p>The Executive Team Dashboard was presented by Emily Roberts (see Board packet).</p>
<p>6. Consent Agenda A. EMS Stats - September 2023</p>	<p>Emily Roberts presented the Consent Agenda (see Board packet). Transfers are split out from emergency calls. Response times are excellent and better than the parameters listed in the ASA.</p> <p>MOTION: John Murray moved to accept the Consent Agenda as presented. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.</p>
<p>7. New Business</p>	
<p>A. Cerner Agreement</p>	<p>The Cerner Agreement is not included in the Board packet and was sent to the Board in advance of the meeting. The District is bound by a non-disclosure agreement and is only able to disclose the Agreement via a public records request to view the document.</p> <p>Emily Roberts reports that the District requested substantial changes to the original contract proposal. This includes moving the location to Oregon for venue of law and arbitration, and adding language that only allows the CEO to execute purchase agreements with Cerner so no one can change the terms or extend the</p>

	<p>agreement inadvertently. Additionally, the original proposal listed price increases as CPI plus 5%, however, Roberts is trying to negotiate this to a lower rate.</p> <p>Roberts reports that the Executive Team has been looking at different EHRs. EPIC is significantly out of the District’s price range. The Team looked at every EHR system that is being used in Oregon hospitals. Cerner seems to be the next best option from EPIC. The safety issues with the current EHR should not persist on Cerner. The soonest Go Live date for Cerner implementation would be July 1, 2024, but only if the Agreement is signed by November 9, 2023. Legal counsel is working towards getting out of the current Thrive EHR contract.</p> <p>The Board discussed Thrive’s pain points. These pain points have been evaluated on the Cerner system to ensure they will not persist after transition.</p> <p>MOTION: John Murray made a motion to move forward with the Cerner Agreement assuming legal can move forward with a contract exit plan for Thrive. Stephen Munkers seconded the motion. The Board asked about the timeline for implementation and training. Roberts explained the process and reports it is much better than Thrive was and believes the project timeline provided by Cerner to be reasonable. The plan includes hard stops and steps that must be completed to move forward through the implementation process. The motion passed unanimously by all Board members present.</p>
<p>B. Community Benefit Request - Lone Community Church</p>	<p>Lone Community Church is requesting an AED and LifeVac.</p> <p>MOTION: John Murray moved to approve the AED and LifeVac community benefit for Lone Community Church. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.</p>
<p>C. Community Benefit Request - Irrigon Elementary School</p>	<p>Irrigon Elementary School is requesting \$2,089.60 for student sleeping bags for outdoor school. The students would keep the sleeping bags. The outdoor school event has already occurred since the initial request for funds.</p> <p>MOTION: John Murray moved to pay the unfunded balance of the initial request. Trista Seastone seconded the motion. The motion passed unanimously by all Board members present.</p>
<p>D. Community Benefit - Food Pantry Donations</p>	<p>Emily Roberts recommends a \$1,500 donation to each food bank in Boardman, Irrigon, and Heppner.</p> <p>MOTION: John Murray moved to make a \$1,500 donation to the Boardman, Irrigon, and Heppner food banks. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.</p>
<p>E. 2024 Board Meeting Calendar</p>	<p>Emily Roberts presented the proposed 2024 Board Meeting Calendar.</p>

	MOTION: John Murray moved to accept the proposed 2024 Board Meeting Calendar. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.
8. Old Business	None.
9. Executive Session	<p>At 7:52 p.m. Diane Kilkenny prescribed a five-minute break. At 7:57, Kilkenny called to order Executive Sessions under:</p> <ul style="list-style-type: none"> A. ORS 192.660(2)(f) to consider information or records that are exempt from public inspection pertaining to ongoing or anticipated litigation exempt from disclosure under ORS 192.345(1). B. ORS 192.660(2)(f) to consider information or records that are exempt from public inspection pertaining to trade secrets exempt from disclosure under ORS 192.345(2). C. ORS 192.660(2)(i) to review and evaluate the employment-related performance of a public employee who does not request an open hearing. <p>The Executive Session adjourned at 9:30 p.m.</p>
10. Open Session	MOTION: John Murray moved to appoint Trista Seastone and Stephen Munkers to develop a CEO evaluation form with input from consultant Mary Sheehan. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.
11. Adjourn	<p>With no further business to come before the Board, regular session adjourned at 9:17 p.m.</p> <p>Minutes taken and submitted by Sam Van Laer and Julie Baker. Approved _____.</p>

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Meeting	Board of Directors		
Date / Time	November 16, 2023 at 1:00 p.m.	Location	Pioneer Memorial Clinic Conference Room 130 Thompson Street, Heppner, OR 97836
Chair	Diane Kilkenny, Board Vice Chair	Recorder	Sam Van Laer
Board Members	Present: Diane Kilkenny, John Murray, Stephen Munkers, Trista Seastone		
Attendees	Staff: Emily Roberts, Nicole Mahoney, Sam Van Laer Guests: None Press: None		

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Agenda Item	Minutes
1. Call to Order	Diane Kilkenny called the meeting to order at 1:04 p.m.
2. Open Session	
A. Vice Chair Position	<p>Diane Kilkenny announced that Marie Shimer has resigned from the Board of Directors for personal reasons. The Board thanks her for her service and wishes her the best. As Vice Chair, Diane Kilkenny fills the Chair position when the position is absent or vacant. The Board will need to elect a new Vice Chair and is asked to formally elect Diane Kilkenny as Chair.</p> <p>MOTION: John Murray moved to elect Trista Seastone as Board Vice Chair. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.</p> <p>MOTION: John Murray moved to elect Diane Kilkenny as Board Chair. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.</p>
B. Process to Fill Board Vacancy	<p>Diane Kilkenny discussed the process for filling Board vacancies. The position is open to all Morrow County Residents and will be posted in the North Morrow Times, Heppner-Gazette, and on the Morrow County Health District website and Facebook page.</p> <p>The application will include a position description, Board bylaws, and the District mission statement and strategic plan. The application will include inquiries into candidates' experience, community involvement, specialized skills, vision for the District, and if the candidate has any conflicts of interest. The candidate screening process will be dependent on the number of applications received.</p> <p>MOTION: John Murray made the motion to move forward with the above described process to fill the Board vacancy. Stephen Munkers seconded the motion. The motion passed unanimously by all Board members present.</p>
3. Adjourn	With no further business to come before the Board, regular session adjourned at 1:19 p.m.

Minutes taken and submitted by Sam Van Laer. Approved _____.

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DRAFT



November 2023

HUMAN RESOURCES	
Turnover Rate (Rolling 3 Months)	4.9%
Vacancy Rate	3.8%
Number of Open Positions	8
Newly Created Open Positions	1

FINANCIAL		
Days Cash on Hand	20	Goal ≥ 90
Days in AR	80	Goal ≤ 60

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
Third Next Available (Current Month)	5	1	11	N/A
Total Visits (Previous Month)	353	92	492	133

"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.

CAHPS (PATIENT SATISFACTION SCORES)

Using any number from 0 to 10, where 0 is the worst provider possible and 10 is the best provider possible, what number would you use to rate this provider?

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
Boardman Immediate Care	86% N = 7	25% N = 4	100% N = 2
Ione Community Clinic	100% N = 9	92% N = 13	86% N = 14
Irrigon Medical Clinic	91% N = 35	77% N = 22	58% N = 36
Pioneer Memorial Clinic	67% N = 24	73% N = 41	77% N = 51
NRC Average	84%		

Would you recommend this provider's office to your family and friends?

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
Boardman Immediate Care	86% N = 7	25% N = 4	100% N = 2
Ione Community Clinic	100% N = 9	100% N = 13	100% N = 13
Irrigon Medical Clinic	97% N = 35	86% N = 21	79% N = 34
Pioneer Memorial Clinic	92% N = 24	87% N = 39	88% N = 51
NRC Average	91%		

Using any number from 0 to 10, where 0 is the worst facility possible and 10 is the best facility possible, what number would you use to rate this emergency department?

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
ER Adult	100%	71%	65%
	N = 2	N = 7	N = 20
NRC Average	65%		
Bed Size 6 - 24 Average	79%		

Would you recommend this emergency department to your friends and family?

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
ER Adult	100%	75%	61%
	N = 2	N = 8	N = 18
NRC Average	66%		
Bed Size 6 - 24 Average	77%		

Using any number from 0 to 10, where 0 is the worst facility possible and 10 is the best facility possible, what number would you use to rate this emergency department?

	Qtr 1 2023	Qtr 4 2022	Qtr 3 2022
ER Pediatric	100%	0%	75%
	N = 1	N = 1	N = 4
NRC Average	*Insufficient data to benchmark.		

Would you recommend this emergency department to your friends and family?

	Qtr 1 2023	Qtr 4 2022	Qtr 3 2022
ER Pediatric	100%	0%	50%
	N = 1	N = 1	N = 4
NRC Average	*Insufficient data to benchmark.		

Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay?

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
Inpatient	75%	67%	67%
	N = 4	N = 6	N = 3
NRC Average	72%		
Bed Size 6 - 24 Average	81%		

Would you recommend this hospital to your friends and family?

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
Inpatient	50%	33%	33%
	N = 4	N = 6	N = 3
NRC Average	72%		
Bed Size 6 - 24 Average	80%		

Using any number from 0 to 10, where 0 is the worst hospital possible and 10 is the best hospital possible, what number would you use to rate this hospital during your stay?

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
Hospital	50%	100%	100%
	N = 2	N = 1	N = 1
NRC Average	71%		
Bed Size 6 - 24 Average	81%		

Would you recommend this hospital to your friends and family?

	Qtr 3 2023	Qtr 2 2023	Qtr 1 2023
Hospital	50%	0%	100%
	N = 2	N = 1	N = 1
NRC Average	72%		
Bed Size 6 - 24 Average	80%		

Score is equal to or greater than the NRC Average
Score is less than the NRC Average, but may not be significantly
Score is significantly less than the NRC Average

11/21/23 05:14 PM

MORROW COUNTY HEALTH DISTRICT
 BALANCE SHEET
 FOR THE MONTH ENDING: 10/31/23

	Current Year	Prior Year	Net Change
ASSETS			
CURRENT ASSETS			
CASH & INVESTMENTS			
CASH & INVESTMENTS	1,737,098.03	5,798,553.47	(4,061,455.44)
TOTAL CASH & INVESTMENTS	1,737,098.03	5,798,553.47	(4,061,455.44)
PATIENT ACCOUNTS RECEIVABLE			
A/R HOSPITAL SWING CLINIC	511,785.38	2,000,830.47	(1,489,045.09)
A/R HOME HEALTH & HOSPICE	119,993.10	295,744.53	(175,751.43)
A/R THRIVE	2,809,177.53	.00	2,809,177.53
GROSS PATIENT RECEIVABLES	3,440,956.01	2,296,575.00	1,144,381.01
LESS CLEARING ACCOUNTS	(50.00)	(50.00)	.00
LESS ALLOW FOR CONTRACTUAL	103,358.00	41,788.00	61,570.00
LESS ALLOW FOR UNCOLLECTIBLE	300,382.00	270,503.00	29,879.00
NET PATIENT ACCOUNTS RECEIVABLE	3,037,266.01	1,984,334.00	1,052,932.01
OTHER RECEIVABLES			
EMPLOYEE ADVANCES	(2,268.64)	(3,197.38)	928.74
EMPLOYEE PURCHASES RECEIVABLE	.00	5,077.41	(5,077.41)
RECEIVABLE 340B SUNRX	54,316.57	43,176.28	11,140.29
TAXES RECEIVABLE - PRIOR YEAR	53,310.49	48,250.01	5,060.48
TAXES RECEIVABLE - CURRENT YR	1,192,828.64	1,026,226.64	166,602.00
OTHER RECEIVABLE	24,744.12	14,040.00	10,704.12
MC/MD RECEIVABLE	1,284,719.12	.00	1,284,719.12
ASSISTED LIVING RECEIVABLE	12,383.66	13,098.47	(714.81)
TOTAL OTHER RECEIVABLE	2,620,033.96	1,146,671.43	1,473,362.53
INVENTORY & PREPAID			
INVENTORY AND PREPAID	626,019.24	492,611.10	133,408.14
TOTAL INVENTORY & PREPAID	626,019.24	492,611.10	133,408.14
TOTAL CURRENT ASSETS	8,020,417.24	9,422,170.00	(1,401,752.76)
LONG TERM ASSETS			
LAND	135,700.55	135,700.55	.00
LAND IMPROVEMENTS	322,353.71	322,353.71	.00
BUILDING & IMPROVEMENTS	5,979,588.17	5,893,274.48	86,313.69
EQUIPMENT	8,512,367.55	8,323,770.73	188,596.82
AMORTIZABLE LOAN COSTS	.00	.12	(.12)
CONSTRUCTION IN PROGRESS	468,675.40	394,838.47	73,836.93
LESS ACCUM DEPRECIATION	10,715,634.08	9,996,218.22	719,415.86
TOTAL LONG TERM ASSETS	4,703,051.30	5,073,719.84	(370,668.54)
TOTAL ASSETS	12,723,468.54	14,495,889.84	(1,772,421.30)

UNAUDITED - SUBJECT TO CHANGE

11/21/23 05:14 PM

MORROW COUNTY HEALTH DISTRICT
 BALANCE SHEET
 FOR THE MONTH ENDING: 10/31/23

	Current Year	Prior Year	Net Change
LIABILITIES			
CURRENT LIABILITIES			
ACCOUNTS PAYABLE			
ACCOUNTS PAYABLE	398,311.28	306,681.84	91,629.44
MISC PAYABLE	.00	(.04)	.04
SHORT TERM NOTES PAYABLE	500,000.00	.00	500,000.00
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ACCOUNTS PAYABLE TOTAL	898,311.28	306,681.80	591,629.48
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ACCRUED WAGES & LIABILITIES			
ACCRUED WAGES & LIABILITIES	1,316,821.89	940,805.56	376,016.33
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TOTAL ACCRUED WAGES & LIABILITIES	1,316,821.89	940,805.56	376,016.33
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OTHER LIABILITIES			
ACCRUED INTEREST	2,560.21	3,052.04	(491.83)
SUSPENSE ACCOUNT	4,524.63	1,236.55	3,288.08
TCAA SUSPENSE	2,475.00	1,935.00	540.00
DEFERRED INCOME	1,505.82	1,505.82	.00
UNEARNED REVENUE FOR COVID 19	.00	1,108,671.42	(1,108,671.42)
MC/MD SETTLEMENT PAYABLE	.00	260,144.00	(260,144.00)
CONTINGENCY SETTLEMENT PAYABLE	100,000.00	200,000.00	(100,000.00)
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TOTAL OTHER LIABILITIES	111,065.66	1,576,544.83	(1,465,479.17)
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TOTAL CURRENT LIABILITIES	2,326,198.83	2,824,032.19	(497,833.36)
	=====	=====	=====
LONGTERM LIABILITIES			
BEO 2019 BOILERS LOAN	34,024.02	61,944.17	(27,920.15)
BEO 2018 BOARDMAN BLDG LOAN	82,805.02	100,331.29	(17,526.27)
BEO 2018 OMNICELL/US LOAN	.00	59,310.97	(59,310.97)
BEO 2020 AMBULANCE LOAN	44,981.86	75,214.18	(30,232.32)
MORROW CO 2018 BOARDMAN BLDG	45,183.18	55,201.24	(10,018.06)
MORROW CO 2013 IMC LOAN	.00	6,051.01	(6,051.01)
BEO IMC EXPANSION 2018	272,027.45	317,734.78	(45,707.33)
GEODC 2021 HOUSE LOAN	71,675.91	79,702.15	(8,026.24)
MORROW CO 2021 CHURCH LOAN	53,132.50	59,558.86	(6,426.36)
BEO 2008 HOSP REMODEL LOAN	.00	33,596.26	(33,596.26)
BEO REFINANCE LOAN	762,486.77	789,098.95	(26,612.18)
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TOTAL LONG TERM LIABILITIES	1,366,316.71	1,637,743.86	(271,427.15)
	=====	=====	=====
EQUITY/FUND BALANCE			
GENERAL FUND UNRESTRICTED BAL	10,406,359.52	10,398,041.30	8,318.22
EQUITY/FUND BAL PERIOD END	(1,375,406.52)	(363,927.51)	(1,011,479.01)
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TOTAL LIAB & EQUITY/FUND BAL	12,723,468.54	14,495,889.84	(1,772,421.30)
	=====	=====	=====

UNAUDITED - SUBJECT TO CHANGE

PIONEER MEMORIAL CLINIC - OCTOBER 2023

Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Dr. Schaffer	Patient Hours Available		8	8	8	7				8	8	7	8				8	8	8	8											8	8	110
	Patients Seen		15	16	14	9				11	7	6	9				6	13	11	10											12	16	155
	No Shows		2	0	2	1				0	0	0	0				0	0	0	0											2	0	7
	Patient Cancellations		0	0	0	2				2	0	0	1				0	0	0	0											2	1	8
	Clinic Cancellations		0	0	0	0				0	0	0	0				0	0	0	0											0	0	0
	Pts. Per Available Hour		1.9	2.0	1.8	1.3				1.4	0.9	0.9	1.1				0.8	1.6	1.4	1.3											1.5	2.0	1.4
	No Show Rate		12%	0%	13%	8%				0%	0%	0%	0%				0%	0%	0%	0%											13%	0%	4%
	Patient Cancel Rate			0%	0%	0%	17%			15%	0%	0%	10%				0%	0%	0%	0%											13%	6%	5%
Clinic Cancel Rate			0%	0%	0%	0%			0%	0%	0%	0%				0%	0%	0%	0%											0%	0%	0%	

Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Amanda Roy, PA	Patient Hours Available				6.5	6.5	8					6.5	6.5						6	8	8					7.5	7.5	7					78
	Patients Seen				15	9	12					13	15						12	16	13					16	20	14					155
	No Shows				1	4	1					2	1						0	1	0					1	0	1					12
	Patient Cancellations				0	0	1					1	1						1	0	0					0	0	1					5
	Clinic Cancellations				0	0	0					0	0						0	0	0					0	0	0					0
	Pts. Per Available Hour				2.3	1.4	1.5					2.0	2.3						2.0	2.0	1.6					2.1	2.7	2.0					2.0
	No Show Rate				6%	31%	7%					13%	6%						0%	6%	0%					6%	0%	6%					7%
	Patient Cancel Rate				0%	0%	7%					6%	6%						8%	0%	0%					0%	0%	6%					3%
Clinic Cancel Rate				0%	0%	0%					0%	0%						0%	0%	0%					0%	0%	0%					0%	

Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Rebecca Humphries	Patient Hours Available			8	3.5	5	8				3	3	4							2	8			8	4	8	7.5					6	78
	Patients Seen			1	2	3	5				2	1	3							2	5			6	1	3	6					3	43
	No Shows			0	1	1	1				0	0	1							0	4			1	0	0	0					0	9
	Patient Cancellations			0	0	0	3				0	0	1							0	0			1	0	0	2					0	7
	Clinic Cancellations			0	0	0	0				0	0	0							0	0			0	0	0	0					0	0
	Pts. Per Available Hour			0.1	0.6	0.6	0.6				0.7	0.3	0.8							1.0	0.6			0.8	0.3	0.4	0.8					0.5	0.6
	No Show Rate			0%	33%	25%	11%				0%	0%	20%							0%	44%			13%	0%	0%	0%					0%	15%
	Patient Cancel Rate			0%	0%	0%	33%				0%	0%	20%							0%	0%			13%	0%	0%	25%					0%	12%
Clinic Cancel Rate			0%	0%	0%	0%				0%	0%	0%							0%	0%			0%	0%	0%	0%					0%	0%	

Occ. Health	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
MA Chargeable Visit	Patients Seen		0	0	0	0	0				0	0	0				0	0	0	0	0			0	0	0	0	0			0	0	0

PMC TOTALS	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total	
	Patient Hours Available		8	16	18	18.5	16				11	11	13.5	18.5				8	8	14	18	16			8	4	15.5	15	7			8	14	266
	Patients Seen		15	17	31	21	17				13	8	19	27				6	13	23	28	18			6	1	19	26	14			12	19	353
	No Shows		2	0	4	6	2				0	0	2	2				0	0	0	1	4			1	0	1	0	1			2	0	28
	Patient Cancellations		0	0	0	2	4				2	0	1	3				0	0	1	0	0			1	0	0	2	1			2	1	20
	Clinic Cancellations		0	0	0	0	0				0	0	0	0				0	0	0	0	0			0	0	0	0	0			0	0	0
	Pts. Per Available Hour		1.9	1.1	1.7	1.1	1.1				1.2	0.7	1.4	1.5				0.8	1.6	1.6	1.6	1.1			0.8	0.3	1.2	1.7	2.0			1.5	1.4	1.3
	No Show Rate		12%	0%	11%	21%	9%				0%	0%	9%	6%				0%	0%	0%	3%	18%			13%	0%	5%	0%	6%			13%	0%	7%
	Patient Cancel Rate		0%	0%	0%	7%	17%				13%	0%	5%	9%				0%	0%	4%	0%	0%			13%	0%	0%	7%	6%			13%	5%	5%
	Clinic Cancel Rate		0%	0%	0%	0%	0%				0%	0%	0%	0%				0%	0%	0%	0%	0%			0%	0%	0%	0%	0%			0%	0%	0%

IONE COMMUNITY CLINIC - OCTOBER 2023

Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Eileen McElligott	Patient Hours Available										8		6.5				8	8		6.5				8	6		5				8	7	71
	Patients Seen										16		9				7	7		11				16	4		10				7	5	92
	No Shows										0		0				0	0		0				0	0		0				0	1	1
	Patient Cancellations										1		0				0	0		0				0	0		0				0	0	1
	Clinic Cancellations										0		0				0	0		0				0	0		0				0	0	0
	Pts. Per Available Hour										2.0		1.4				0.9	0.9		1.7				2.0	0.7		2.0				0.9	0.7	1.3
	No Show Rate										0%		0%				0%	0%		0%				0%	0%		0%				0%	17%	1%
	Patient Cancel Rate										6%		0%				0%	0%		0%				0%	0%		0%				0%	0%	1%
	Clinic Cancel Rate										0%		0%				0%	0%		0%				0%	0%		0%				0%	0%	0%

IRRIGON MEDICAL CLINIC - OCTOBER 2023

Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total	
Jamie Reed, CSWA	Patient Hours Available		8	8	8	7						8	8	8			8	8	8	8					8	8	8	8			8	8	135	
	Patients Seen		4	5	3	3							6	8	5			4	5	2	6					9	7	6	4			3	5	85
	No Shows		1	0	0	0							2	1	1			4	0	1	0					0	1	0	3			0	0	14
	Patient Cancellations		0	1	0	1							0	0	0			0	0	0	0					0	2	1	0			0	0	5
	Clinic Cancellations		0	0	0	0							0	0	0			0	0	0	0					0	0	0	0			0	0	0
	Pts. Per Available Hour		0.5	0.6	0.4	0.4							0.8	1.0	0.6			0.5	0.6	0.3	0.8					1.1	0.9	0.8	0.5			0.4	0.6	0.6
	No Show Rate		20%	0%	0%	0%							25%	11%	17%			50%	0%	33%	0%					0%	10%	0%	43%			0%	0%	13%
	Patient Cancel Rate		0%	17%	0%	25%							0%	0%	0%			0%	0%	0%	0%					0%	20%	14%	0%			0%	0%	5%
Clinic Cancel Rate		0%	0%	0%	0%							0%	0%	0%			0%	0%	0%	0%					0%	0%	0%	0%			0%	0%	0%	

Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total	
Jon Watson, PA	Patient Hours Available		8	8	8	4.3						8	8	8											8	8	8	8			8	8	100.3	
	Patients Seen		16	13	14	12							15	18	20											22	17	14	17			21	17	216
	No Shows		1	3	1	0							6	2	1											1	4	2	2			1	1	25
	Patient Cancellations		0	3	0	0							0	0	3											1	1	1	2			1	0	12
	Clinic Cancellations		0	0	0	0							0	0	0											0	0	0	0			0	0	0
	Pts. Per Available Hour		2.0	1.6	1.8	2.8							1.9	2.3	2.5											2.8	2.1	1.8	2.1			2.6	2.1	2.2
	No Show Rate		6%	16%	7%	0%							29%	10%	4%											4%	18%	12%	10%			4%	6%	10%
	Patient Cancel Rate		0%	16%	0%	0%							0%	0%	13%											4%	5%	6%	10%			4%	0%	5%
Clinic Cancel Rate		0%	0%	0%	0%							0%	0%	0%											0%	0%	0%	0%			0%	0%	0%	

Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Vicki Kent, FNP	Patient Hours Available					1.3	8						7.6	8						8	8												40.9
	Patients Seen					2	13						11	13						13	11												63
	No Shows					0	2						4	4						1	1												12
	Patient Cancellations					1	1						3	2						5	4												16
	Clinic Cancellations					0	0						0	0						0	0												0
	Pts. Per Available Hour					1.5	1.6						1.4	1.6						1.6	1.4												1.5
	No Show Rate					0%	13%						22%	21%						5%	6%												13%
	Patient Cancel Rate					33%	6%						17%	11%						26%	25%												18%
Clinic Cancel Rate					0%	0%						0%	0%						0%	0%												0%	

Provider	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
Justin Cameron, PA	Patient Hours Available			8	8	8	8					8	8	8	8		8	8	8	8					8	8	8	8			8	8	136
	Patients Seen			9	5	7	12					7	8	8	3		7	9	8	5					15	6	4	7			8	8	128
	No Shows			0	0	1	1					0	0	1	2		0	2	4	1					1	0	0	1			0	0	14
	Patient Cancellations			2	0	1	2					1	3	0	1		1	0	0	1					2	1	1	1			0	0	17
	Clinic Cancellations			0	0	0	0					0	0	0	0		0	0	0	0					0	0	0	0			0	0	0
	Pts. Per Available Hour			1.1	0.6	0.9	1.5					0.9	1.0	1.0	0.4		0.9	1.1	1.0	0.6					1.9	0.8	0.5	0.9			1.0	0.9	0.9
	No Show Rate			0%	0%	11%	7%					0%	0%	11%	33%		0%	18%	33%	14%					6%	0%	0%	11%			0%	0%	9%
	Patient Cancel Rate			18%	0%	11%	13%					13%	27%	0%	17%		13%	0%	0%	14%					11%	14%	20%	11%			0%	0%	11%
Clinic Cancel Rate			0%	0%	0%	0%					0%	0%	0%	0%		0%	0%	0%	0%					0%	0%	0%	0%			0%	0%	0%	

Occ. Health	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
MA Chargeable Visit	Patients Seen		0	0	0	0	0			0	0	0	0	0			0	0	0	0	0				0	0	0	0			0	0	0

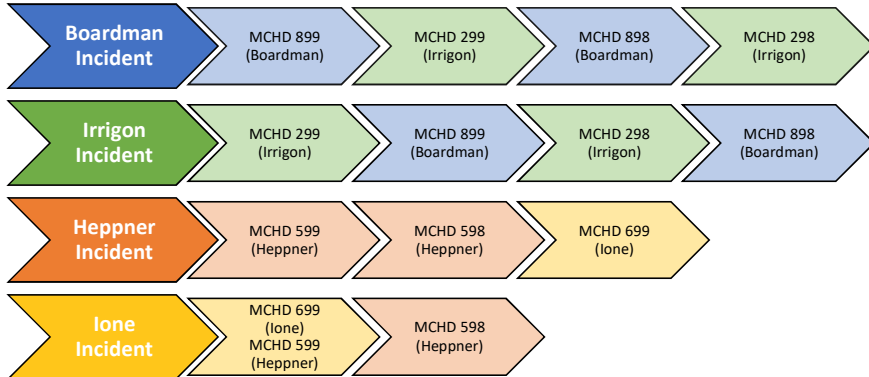
IMC TOTALS	Measure	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total	
	Patient Hours Available		16	24	24	20.6	16				8	16	24	23.6	24		16	16	16	24	8				8	24	24	24	16			16	24	412.2
	Patients Seen		20	27	22	24	25				15	25	34	27	21		11	14	10	24	11				22	41	27	27	11			24	30	492
	No Shows		2	3	1	1	3				6	2	3	6	7		4	2	5	2	1				1	5	3	2	4			1	1	65
	Patient Cancellations		0	6	0	3	3				0	1	6	3	3		1	0	0	6	4				1	3	4	4	1			1	0	50
	Clinic Cancellations		0	0	0	0	0				0	0	0	0	0		0	0	0	0	0				0	0	0	0			0	0	0	
	Pts. Per Available Hour		1.3	1.1	0.9	1.2	1.6				1.9	1.6	1.4	1.1	0.9		0.7	0.9	0.6	1.0	1.4				2.8	1.7	1.1	1.1	0.7			1.5	1.3	1.2
	No Show Rate		9%	8%	4%	4%	10%				29%	7%	7%	17%	23%		25%	13%	33%	6%	6%				4%	10%	9%	6%	25%			4%	3%	11%
	Patient Cancel Rate		0%	17%	0%	11%	10%				0%	4%	14%	8%	10%		6%	0%	0%	19%	25%				4%	6%	12%	12%	6%			4%	0%	8%
	Clinic Cancel Rate		0%	0%	0%	0%	0%				0%	0%	0%	0%	0%		0%	0%	0%	0%	0%				0%	0%	0%	0%	0%			0%	0%	0%

2023	BOARDMAN						IRRIGON						HEPPNER						IONE		
	899			898			299			298			599			598			699		
	Dispatch to En Route	Response Time	Number of Runs	Dispatch to En Route	Response Time	Number of Runs	Dispatch to En Route	Response Time	Number of Runs	Dispatch to En Route	Response Time	Number of Runs	Dispatch to En Route	Response Time	Number of Runs	Dispatch to En Route	Response Time	Number of Runs	Dispatch to En Route	Response Time	Number of Runs
January	0.2	3.8	47	1.0	10.2	6	1.0	3.5	52	0.1	3.9	4	3.5	8.7	26	6.0	11.5	2	N/A	N/A	0
February	0.2	5.8	43	1.1	12.4	1	1.0	3.3	33	5.0	5.0	3	5.6	21.5	22	9.0	10.0	7	N/A	N/A	0
March	0.3	4.5	31	0.1	4.6	8	1.0	4.0	28	1.5	3.0	1	4.2	7.7	24	0.8	1.2	2	N/A	N/A	0
April	0.2	4.9	44	0.3	3.3	4	1.0	3.9	30	0.4	5.0	17	3.6	7.0	26	6.0	7.0	3	N/A	N/A	0
May	0.2	3.8	65	0.2	5.8	1	1.0	4.3	35	0.5	5.4	15	3.4	10.0	27	6.0	15.0	3	N/A	N/A	0
June	0.4	3.9	12	0.3	3.6	40	1.0	4.0	43	1.0	5.0	7	4.5	4.0	28	N/A	N/A	0	N/A	N/A	0
9-1-1 July	0.2	3.9	17	0.5	5.0	28	1.0	5.7	10	1.0	3.0	55	3.0	5.0	30	N/A	N/A	0	N/A	N/A	0
Transfers July	N/A	N/A	0	N/A	N/A	0	N/A	N/A	0	N/A	N/A	0	5.0	3.0	7	N/A	N/A	0	N/A	N/A	0
9-1-1 August	0.3	4.1	56	2.2	5.8	2	1.0	3.0	14	1.0	4.0	20	4.3	4.0	25	5.0	5.0	1	N/A	N/A	0
Transfers August	N/A	N/A	0	N/A	N/A	0	N/A	N/A	0	3.0	13.0	1	4.0	7.0	6	12.0	0.0	3	N/A	N/A	0
9-1-1 September	0.3	4.1	52	0.9	4.0	11	1.0	3.7	11	1.0	3.8	34	2.2	5.2	30	0.3	0.2	1	N/A	N/A	0
Transfers September	0.5	2.1	6	1.0	2.1	2	N/A	N/A	0	N/A	N/A	0	5.0	0.1	2	4.0	0.1	2	N/A	N/A	0
9-1-1 October	0.5	4.1	68	0.8	4.7	2	1.0	3.2	46	1.0	5.3	4	2.0	2.3	29	N/A	N/A	0	N/A	N/A	0
Transfers October	1.9	10.0	9	N/A	N/A	0	N/A	N/A	0	1.6	9.4	1	6.9	18.0	6	15.0	0.5	2	N/A	N/A	0
9-1-1 November																					
Transfers November																					
9-1-1 December																					
Transfers December																					
TOTAL			450			105			302			162			288			26			0

Dispatch to 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 EMS								
ATV 03-40	Side-by-side		Polaris	Ranger	4XARD058A84D159625	Fair 8/2023	1,832 miles	
ATV 06-31			Polaris	Polaris 500 - Blue	4XAMH50A358693942	Poor 8/2023	605 hrs/4,405 miles	
ATV 07-39			Polaris	Polaris 500 EFI - Blk/Slvr	4XAMH50A962077678	Fair 8/2023	2,905 miles/432 hours	
ATV 08-17			Ranger	Ranger Crew - Red	4XAWH68A582704320	Good 8/2023	623 miles	
ATV 08-17			Polaris	RZR - Red	4XAVH76A39D816513	Fair 8/2023	3,227 miles	
ATV 12-06		2012	ATV	Quad - Green	4XAZN5EA4CA500384	Good 8/2023	464 hours/4,024 miles	
ATV 12-06		2012	ATV	Quad - Bronz	4XAZN5EA4CA535507	Good 8/2023	441 hours/3,815 miles	

RZR Red - Inadeq