

BOARD OF DIRECTORS MEETING
Lower Umpqua Hospital District (LUHD)
Wednesday, March 25, 2026, 7:30 a.m.
Main Conference Room or
Via Teams audio conference call
Dial: 1-323-694-9833
Audio conference ID: 124 229 680#



MINUTES

Board members in attendance include Ron Kreskey, Chair, Cheryl Young, Vice Chair, Leon Bridge, Treasurer, Brenda Fraley, Secretary, and Sheri Aasen, Director.

Others in attendance include Stephanie Miller, John Chivers, Melissa Cribbins, Hospital Attorney, Jennifer Green, Elise Dumo, Jen Anderson, Holly Tavernier, Kaley Sweet, Mary Chambers, Renae Mefferd, Tonya Galliher UFCW 555 representative, and Julia Floyd.

Those employees and members of the public joining by phone include Rhiannon Manicke and other unidentified district employees.

I. CALL TO ORDER & INTRODUCTIONS

Board Chair Kreskey called the meeting to order at 7:30 am.

The Board welcomes new Chief Financial Officer Elise Dumo.

II. VISITOR'S AGENDA

No visitors.

III. CONSENT AGENDA – Approve the following:

- A. Board of Directors Meeting Agenda March 25, 2026
- B. Board of Directors Meeting Minutes February 25, 2026
- C. Committee Minutes
 - 1. CQC Consent Agenda – March 12, 2026
 - 2. Financial Advisory Committee Minutes – February 24, 2026

After discussion, board member Young moved to approve the Consent Agenda. Board member Bridge seconded the motion. Motion passed (5-0) with the following vote: Kreskey – Yes, Young – Yes, Bridge – Yes, Fraley – Yes, Aasen – Yes.

IV. REPORTS & PRESENTATIONS

- A. Quality/Risk Report – Julia Floyd
 - 1. See report.
- B. Compliance Report – Renae Mefferd
 - 1. See report.
 - 2. Electronic Health Record (EHR) surveillance system – as part of our due diligence the EHR surveillance system is in place to ensure HIPPA compliance. We are required to report when a HIPPA violation occurs.
- C. Nursing Services Report – Jennifer Green
 - 1. See report.
 - 2. Preop process improvement – tracking surgical case cancellations – the main cause for less than 24-hour cancellations are patients violating their

preop medication protocols. Most cancellations are for general surgery which comprise 60% of cases.

- D. Medical Staff – Dr. Jason Sargent
 - 1. There is nothing to report from medical staff meeting.
- DI. Public Relations/Foundation – Kaley Sweet
 - 1. See report.
- DII. Human Resources – Holly Tavernier
 - 1. See report.
- DIII. Ancillary Services – Jen Anderson
 - 1. See report.
 - 2. Correction: 641 mammography's were performed in the first year.
- DIV. Finance Report – John Chivers
 - 1. See report.
 - 2. Question – Is a Medicaid payment adjustment needed like with Medicare? Typically, we only owe \$0-50K, so a monthly set-aside is not required. Medicaid has not settled with us since 2017.
 - 3. Dashboard – Top 3 indicators of financial health: Operating Cash, Operating Cas Days, Current Ratio.
 - 4. Reports – All results are strong.
- DV. Administrator Report – John Chivers
 - 1. Employee Retention Tax Credit (ERTC) update: The IRS notified us that our credit with interest has been processed. We anticipate receiving \$4.6M by the end of April. This will further improve our cash balance.
 - 2. Budget 2026-2027– work continues on the budget; we have met with all managers to review revenue and volumes forecasts; prioritization of capital budget will be started this week.
 - 3. Question: What is status of the DEXA machine? Discussions continue about which machine is best for our needs. OHA must review and approve our facility change request before the room remodel can begin.

V. NEW BUSINESS

A. Policy:

1. P3 Organizational Chart

Motion: After discussion, Board member Bridge moved to approve updated policy P 3 Organizational Chart as presented. Board member Aasen seconded the motion. Motion passed (5-0) with the following vote: Kreskey – Yes, Young – Yes, Bridge – Yes, Fraley – Yes, Aasen – Yes.

2. P90 Dress Code

Motion: After discussion, Board member Young moved to approve updated policy P 90 Dress Code as presented. Board member Aasen seconded the motion. Motion passed (5-0) with the following vote: Kreskey – Yes, Young – Yes, Bridge – Yes, Fraley – Yes, Aasen – Yes.

B. Next Board Meeting: Wednesday April 29, 2026, 7:30am

Board Chair Keskey closed the regular session at 8:25 am and called the Executive Session to order.

VI. EXECUTIVE SESSION

192.660. (1) ORS 192.610 to 192.690 do not prevent the governing body of a public body from holding executive session during a regular, special, or emergency meeting, after the presiding officer has identified the authorization under ORS 192.610 to 192.690 for holding the executive session.

(2) The governing body of a public body may hold an executive session:

(a) To consider the employment of a public officer, employee, staff member, or individual agent.

VII. RETURN TO REGULAR SESSION AND POSSIBLE ACTION BY THE BOARD

Board Chair Kreskey adjourned the Executive Session and called the regular session back into order at 8:30 am.

Further Board action was required.

Motion: Board member Aasen moved to approve the bona fide job offer for CEO Designee Jennifer Green. Board member Bridge seconded the motion. Motion passed (5-0) with the following vote: Kreskey – Yes, Young – Yes, Bridge – Yes, Fraley – Yes, Aasen – Yes.

Board Chair Kreskey presented the bona fide job offer for Chief Executive Officer to Jennifer Green. She will review and respond back to Holly Tavernier.

VIII. ADJOURNMENT

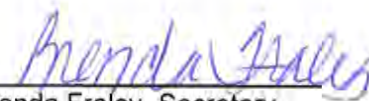
Motion: Board member Bridge moved to adjourn the meeting. Board member Young seconded the motion. Motion passed (5-0) with the following vote: Kreskey – Yes, Young – Yes, Bridge – Yes, Fraley – Yes, Aasen – Yes.

Board Chair Kreskey declared the meeting adjourned at 8:38 am.

APPROVED THIS 29th day of April 2026



Ronald Kreskey, Chair



Brenda Fraley, Secretary



Director of Quality/Risk Management Update

LUHD Board of Directors March 25, 2026

Regulatory Update

- Radiology State Survey was held on March 11, 2026
 - 1 - Level 2 (less critical) Non-compliance
 - Corrective action has been completed.
 - Documentation of correction to be submitted within 30 days

Risk Management

Incident / Unusual Occurrence Reports

January 2026 - 25 incidents; 1 (4%) reported anonymous

Meditech Classifications:

- 13 Medication events
- 3 Safety/ Security
- 1 Fall
- 1 Equipment
- 1 Treatment & Therapies
- 1 Nutrition & Dietary
- 1 Behavior
- 1 Lab
- 1 Non-patient medication events
- 1 Surgical Incident
- 1 Diagnosis/Document/Patient Record

Grievances - Grievance Committee met on January 20, 2026

February 2026 - 5 grievances

- 2 Complaint about Providers
- 2 Care Concerns
- 1 Billing Issue

Respectfully submitted,

Julia Floyd BSN, RN, CPHQ, RHCNOC
Director of Quality/Risk Management



Compliance Program Update

LUHD Board Meeting March 25, 2025

Compliance and Ethics *Currently in progress*

- Ongoing...
 - Participating in 340B Compliance Committee.
 - Issue: PACU titrates or administers medications in a short period of time in the recovery phase. Each time a drug is administered it drops a charge for a new vial, even though the medication administration is used from the original vial that was pulled.
 - Temporary stop gap in place (pharmacy will manually remove extra charges reconciling with the Omnicell)
 - Preferred resolution being considered is building a location of PACU which would allow charging on "pull" of medication from Omnicell (Meditech ticket was entered for further investigation of this)
- Updates...
 - Implementation of the passive EHR surveillance system is now complete and activated.

Reports of potential non-compliance received since last reporting period (02/25/2026)

- 0 reports received by third party vendor (anonymous hotline or website)
- 0 reports received in-person reported directly to compliance officer

Respectfully submitted,

Rena Mefferd, RN
Compliance Officer



CNO UPDATE

LUHD Board of Directors

March 25, 2026

Nursing:

New Hires

- Kiralye Gould is moving from on call to Full Time Day shift CNA

Current Openings

- One Full-time RN NOC ACU
- One Part-time RN DAYS ACU
- One Full-time CNA ED
- One on call CNA ED (weekend shifts)
- One Full-time CNA NOC ACU

Respiratory Therapy

- Department is fully staffed.

Process Improvement/Updates:

1. Preop Process Improvement

- Tracking Surgical Case Cancellation with **less than** 24-hours notification. Data analysis to determine patterns and trends for solution development.
- Development of Total Joint pre-op education.
- Primary Care provider risk stratification

2. Cataracts:

- 04/06/2026 First Clinic Day
- 05/04/2026 First Surgical Day

3. Pain Management:

- Currently in the implementation phase. Surgical cases to start (tentative) late May to early June.

Respectfully submitted,

Jennifer Green, BSN RN RHCNOC
Chief Nursing Officer



CONTACT DETAILS

Public Relations

Lower Umpqua Hospital District

public_relations@luhonline.com

(541) 271 6336

MARKETING & COMMUNICATIONS

BOARD OF DIRECTORS

March, 2026

- **ANNUAL CALENDAR**

- March Awareness -
 - National Nutrition Month, National Social Work Month, Colorectal Cancer Screening Month, HR in Healthcare Week
- April -LUHD Employee Forums 4/20-23

- **DIGITAL ADVERTISING**

- Continuing Digital, Display, Streaming Audio, Social - Focus on Orthopedics, General Surgery and new Service Lines
 - Streaming Ads - 12,256 Impressions with 11,937 completions (97.4%)
 - Social - 54,726 Impressions with 1,107 clicks (2.02%) industry standard for healthcare is 0.8-1.6%
- Contract with Fathom AI to focus on SEO and Content Marketing strategy. AI is reshaping marketing strategy due to 'online search behavior' specifically with search footnotes.

- **WEBSITE UPDATE**

- Updated Public Grievance information per Oregon Government Ethics Commission

- **PRINT ADVERTISING**

- Gold Printing - Updated District Business Cards
- Oregon Coast Mailer, Everything Umpqua Spring Edition
- Partners in Care - Finalizing Spring Edition

- **COMMUNITY OUTREACH & EVENTS**

- Donation to the Memorial Day Parade/Reedsport, Old Towne Reedsport Merchant Association, Reedsport Police K9 Snow

- **FAMILY RESOURCE CENTER**

- 140 Services provided for 75 individuals in March
- \$230 Sunrise Tokens distributed
- 9 Applicants for the Free Dental Clinic March 20 & 21
- Presenting to North Bend Salvation Army via Zoom 4/45
- Attending Douglas County Senior Seminar - Senior Center 4/27 11:30-1:00PM



LOWER UMPQUA HOSPITAL FOUNDATION

BOARD OF DIRECTORS

March 25, 2026

- **GENERAL INFORMATION**

- No meeting held in March.

- **GRANTS**

- Submitted Proposals for Community Initiated Project (CIPs) to Senator Wyden & Senator Merkley, and Representative Val Hoyle (FY27)
 - 'Imaging for Impact: LUHD Radiology Initiative'
 - 'Revitalizing Infrastructure: LUHD Sewer Line Restoration Project'
- RHTP Webinar 3/25 Discussing Request for Grant Proposal (RFGP) process and registration for OregonBuys portal to apply for funding.

- **PROJECT UPDATE**

- Reedsport 5K Salmon Run Planning - Routes finalized, Event Permits Submitted
- Roundhouse Foundation connected us with Pacific Communities Health District Foundation Executive Director, Karla Clem, regarding community pharmacy project.
- 3D Mammography - 1 Year Later
 - 641 Mammos performed in the first year. Year 1 goal was 400!

- **SCHOLARSHIP COMMITTEE**

- Submitted Local Scholarship Update to RCCS - Applications out to students Feb. 1
 - Student Due Date March 2, Decisions Due by May 15, and Award Night is June 2nd.

- **EVENTS COMMITTEE**

- Putt for Pink 2026 - Saturday, August 8th Reedsport Golf Course
- Dunes Family Health Care Reception - Saturday, May 30th
- Reedsport 5K Salmon Run & Walk - Saturday, September 12th

Next Meeting is April 8th at 11:30am @ LUH Business Office Conference Room



CHIEF HUMAN RESOURCES OFFICER REPORT

Board of Directors March 25, 2026

Employee Hiring & Recruitment:

January/February: (As of 3/19/2026):

- CNA – Per-Diem, Acute Care (Hinkle)
- RN – Full-Time, Acute Care (Odom)
- RN – Per-Diem, Acute Care (Lefler)
- RN – Per-Diem, Acute Care (Wisbey)
- Chief Financial Officer – (Dumo)
- PA-C – Full-Time, Dunes Family Health Care (Johnson)
- RN – Per-Diem, Acute Care (Najera)

We currently have these positions open on our job board, website and Indeed (no per-diem positions are listed below):

- CNA – Full-Time, Nights – Acute Care
- Medical Assistant- Full-time- Dunes Family Health Care
- RN – Part-Time, Days – Acute Care
- Radiology Tech (X-Ray/CT/MRI) – Full-Time – Radiology
- Scrub Tech – Full-Time – Surgical Services
- Occupational Therapist – Full-Time - Rehabilitation
- Physical Therapist – Full-Time – Rehabilitation
- Physical Therapy Assistant – Full-Time – Rehabilitation

Provider Recruitment:

- We had two general surgeon candidates on-site for interviews and we continue to work through that process.

Employee Turnover:

- The next quarter will be reported at the April Board Meeting.

High School Program, External Meetings, Trainings:

- Our 3 RCCS students continue to excel through our Healthcare Careers program this semester.

Other:

- The HR department has been continuing to work on integrating new HR modules including Leaves of Absence and Performance Management. We are meeting twice weekly with UKG through this process.
- I continue to work on several confidential matters as well as policy updates, unemployment hearings, legal matters, employee disciplinary actions, union issues, employee/provider/temporary staffing recruitment and retention.
- I remain involved in VIRT, Workplace Environment Committee, Events Committee, Emergency Operations Committee, Comprehensive Quality Council, and New Hire Orientation. I am a Board Member for Special Districts Association of Oregon, a Reedsport Rotary Club Board Member and a member of the Douglas County SHRM Chapter.

Respectfully Submitted,

Holly Tavernier
Chief Human Resources Officer



ANCILLARY SERVICES REPORT

Board of Directors March 25, 2026

- **Information Technology**
 - The phone system rollout has been very successful, with strong positive feedback on functionality and call clarity across the organization.
 - Our next step is to transition incoming fax services into the same system to further streamline communications and improve efficiency.

- **Radiology**
 - Nuclear Medicine-
 - The sealed radioactive sources have been safely removed from the room and received by the vendor. The Nuclear Medicine Technologist is in the process of notifying the appropriate state regulatory agency, in accordance with compliance requirements. Arrangements are underway for the removal of the associated equipment. Sierra is currently coordinating with Medical Imaging Consultant Specialists to schedule and complete the machine decommissioning and removal. No immediate issues or delays are anticipated at this time. Further updates will be provided as the process progresses.
 - DEXA (Bone Density)
 - Sierra has provided the machine specification drawings to the project architect to support the design and planning of the remodel for the proposed space. The architect will incorporate these specifications into the updated layout to ensure proper accommodation of the equipment. Further updates will be shared as design progress continues.
 - Mammography
 - The first year of the mammogram program we performed 461 exams!

Respectfully submitted,

Jennifer Anderson, RHIT, MBA, CPC, CFPC
Chief Ancillary Services Officer

Board of Directors
Monthly Financial Report
Month Ending February 28, 2026



Operations:

(Page 4)

(1) We had another excellent month with Gross Charges coming in at \$6.72 million or 3.6% better than budget. We are at \$54.39 million for the year – 4.7% better than budget. It should be noted that we did not implement a charge increase this fiscal year.

(2) Our expected collection rate was a little off budget at 47.46%. This included another \$100,000 allowance for our likely 2025-26 Medicare year-end payable bringing the total set-aside for the year to \$550,000. Our year-to-date expected collection rate is 50.0% -- slightly better than the budgeted 49.6%.

(3) This led to net patient revenue of \$3.19 million (1.0% less than budget).

(4) Other operating revenue (\$386,000) continues to run better than budget (0.7%), primarily due to the **(5)** Retail Pharmacy (\$328,000 – 0.9% better than budget).

(6) Total Operating Revenue of \$3.72 million was 0.2% better than budget. Note that February is a short month and we budget each month equally.

(Next page - 5)

(7) Total Operating Expenses of \$3.90 million exceeded budget by 0.9%. A review of each expense category showed no significant variances than expected.

(8) We had an operating loss of \$183,000 compared to a budgeted loss of \$159,000 for a \$24,000 (15.3%) negative variance.

(9) Non-operating revenue of \$285,000 beat the budget of \$228,000 by \$56,000 – 24.7%. Of note was \$48,600 in grant revenue received related to our Retail Pharmacy remodel.

(10) Total Surplus for the month was \$101,000 (2.7% margin) compared to the budget of \$69,000 (1.9% margin).

(11) Again, the total margin reflects another \$100,000 allowance (reduction) for Medicare bringing the total to \$550,000 for the year. For the year we have a total Surplus of \$2.24 million (7.0% margin) compared to the budget of \$553,000 (1.9% margin).

(Next page - 6)

Balance Sheet:

Assets:

(1) Cash (\$6.16 million) is down by \$520,000 due to the following issue with Traditional Medicare: Back last July, Medicare had an issue with its payment software where Critical Access Hospitals that are paid under “Method 2” – such as us – were being systemically underpaid. This went on for several months. In January of this year, they informed all impacted hospitals that the situation had been resolved, but we had to re-register all of our providers with them. The initial instructions were to re-register the providers effective November 1, when in fact, we had to re-register effective July 1. This has since been corrected; however, Medicare is running about an extra month behind making payments to providers. They owe us approximately \$750,000 more than they would typically owe us at month end.

(2) Net Patient Accounts Receivable (\$6.32 million) increased by \$465,000 due to the same reason that I just explained.

(3) The expected collection rate declined slightly to 40.90% from 41.53%. Our model treats older outstanding items as less likely to be collected regardless of the real collection status. The Medicare issue explained above basically accounts for this difference.

(4) Total ‘Other’ Accounts Receivable of \$552,000 are up by \$171,000 net primarily due to an increase in the amount of taxes owed to us by the county. This amount currently shows as a payable due to the timing of when we receive the bulk of our taxes.

(6) We have a total of \$18.08 million in Current Assets.

(7) Property Plant and Equipment increased by \$81,000 due to the acquisition of an Ultrasound (\$37,000), a partial payment on our new water tank of \$36,000 and a partial payment on our new phone system of \$6,000.

(8) Third-party settlements increased \$100,000 to \$1.22 million. This is the additional \$100,000 set aside for our 2025-26 Medicare cost report that I mentioned earlier.

(9) We have assets totaling \$22.10 million.

(Next page - 7)

Liabilities and Fund Balance:

(1) Accounts Payable and (2) Accrued Liabilities decreased a combined \$96,000 to \$978,000.

(3) Accrued Payroll increased \$59,000.

(4) We booked an additional \$146,000 to cover our February Provider Tax that will be due in May.

(5) We have Current Liabilities of \$3.69 million which results in a very favorable Current Ratio of 4.9.

(6) Total Debt decreased by \$34,000 due to making normal principal payments bringing the new total to \$1.38 million.

(7) Liabilities total \$5.07 million.

(8) Our total Fund Balance is \$17.03 million, which includes the fiscal year opening balance of \$14.79 million and current operating results of \$2.24 million.

(9) We have Liabilities and Fund Balance combined of \$22.10 million.

(Next page - 8)

Dashboard:

Shows the results of several Key Indicators. Probably the most important indicators of general financial health are (1) Cash and (2) Days Cash on Hand and (3) Current Ratio. All are currently green.

(Next 2 pages – 9,10)

Volumes:

Most volumes came in higher than budget and beat their historical averages for February, the exceptions being Acute Care (66 vs 68), ICU (0 vs 4) and Occupational Therapy (146 vs 180).

(Next 2 pages – 11,12)

Productivity:

(1) Improved from last month's 97.2% to 97.7%. We are at 98.9% for the year.

LUHD
 UNAUDITED OPERATING STATEMENT
 Through 8 Periods Ended February 28, 2026

	CURR MO BUDGET	2026 FEB	CM VAR-\$	CM VAR-%	2025 FEB	YTD BUDGET	YTD ACTUAL	YTD VAR-\$	YTD VAR-%	YTD LY
Revenue										
Patient Revenue										
① Gross Charges	\$6,484,698	\$6,717,288	\$232,590	3.6%	\$6,078,295	\$51,877,586	\$54,338,910	\$2,461,324	4.7%	46,758,308
Deductions	(\$3,266,117)	(\$3,529,295)	(\$263,178)	8.1%	(\$3,093,396)	(\$26,128,936)	(\$27,168,487)	(\$1,039,551)	4.0%	(22,900,587)
③ Net Patient Revenue	\$3,218,581	\$3,187,993	(\$30,588)	-1.0%	\$2,984,899	\$25,748,650	\$27,170,423	\$1,421,773	5.5%	23,857,721
	49.63%	47.46%			49.11%	49.63%	50.00%			51.02%
Provider Tax	\$108,890	\$146,000	\$37,110	34.1%	\$100,000	\$871,123	\$1,155,545	\$284,422	32.7%	801,778
Net After Provider Tax	\$3,327,472	\$3,333,993	\$6,521	0.2%	\$3,084,899	\$26,619,773	\$28,325,968	\$1,706,195	6.4%	24,659,499
	51.31%	49.63%			50.75%	51.31%	52.13%			52.74%
Non-Patient Revenue										
⑤ Misc Revenue	\$58,362	\$58,021	(\$341)	-0.6%	\$51,565	\$466,899	\$943,607	\$476,708	102.1%	461,293
Retail Pharmacy	\$325,000	\$327,890	\$2,890	0.9%	\$284,788	\$2,600,000	\$2,909,694	\$309,694	11.9%	2,633,922
Other Recoveries										
④ Total Non-Patient Revenue	\$383,362	\$385,911	\$2,549	0.7%	\$336,353	\$3,066,899	\$3,853,301	\$786,402	25.6%	3,095,215
⑥ Total Revenue	\$3,710,834	\$3,719,904	\$9,070	0.2%	\$3,421,252	\$29,686,672	\$32,179,269	\$2,492,597	8.4%	27,754,714
Operating Expenses										
Payroll	\$1,584,886	\$1,583,387	(\$1,499)	-0.1%	\$1,460,880	\$12,679,091	\$12,746,267	\$67,176	0.5%	11,863,604
Supplies	\$575,766	\$539,646	(\$36,120)	-6.3%	\$423,363	\$4,606,131	\$4,777,893	\$171,762	3.7%	4,078,321
Benefits	\$553,231	\$578,450	\$25,219	4.6%	\$526,548	\$4,425,845	\$4,427,930	\$2,085	0.0%	4,128,273
Professional Fees	\$397,947	\$382,734	(\$15,213)	-3.8%	\$353,817	\$3,183,575	\$3,303,773	\$120,198	3.8%	3,195,567
Purchased Services	\$233,066	\$266,175	\$33,109	14.2%	\$208,026	\$1,864,531	\$1,993,864	\$129,333	6.9%	1,755,387
Contract Labor	\$100,418	\$122,918	\$22,501	22.4%	\$173,319	\$803,340	\$1,207,251	\$403,911	50.3%	1,028,003
Provider Tax	\$108,890	\$146,000	\$37,110	34.1%	\$100,000	\$871,123	\$1,155,545	\$284,422	32.7%	801,778
Depreciation	\$76,711	\$52,089	(\$24,622)	-32.1%	\$66,783	\$613,684	\$429,253	(\$184,431)	-30.1%	539,832
Repairs & Maintenance	\$40,548	\$35,596	(\$4,952)	-12.2%	\$31,180	\$324,380	\$328,721	\$4,341	1.3%	309,734
Rentals & Leases	\$38,757	\$41,282	\$2,525	6.5%	\$36,472	\$310,057	\$310,830	\$773	0.2%	263,084
GASB Depreciation	\$39,015	\$38,266	(\$749)	-1.9%	\$34,513	\$312,118	\$296,018	(\$16,100)	-5.2%	293,041
Insurance	\$30,988	\$34,303	\$3,315	10.7%	\$28,751	\$247,905	\$258,358	\$10,453	4.2%	236,099
Utilities	\$28,013	\$29,319	\$1,307	4.7%	\$26,754	\$224,100	\$244,015	\$19,915	8.9%	212,466
Minor Equipment	\$23,161	\$28,115	\$4,954	21.4%	\$33,838	\$185,287	\$143,778	(\$41,509)	-22.4%	103,264
Dues and Subscriptions	\$10,955	\$13,356	\$2,401	21.9%	\$6,557	\$87,640	\$107,400	\$19,760	22.5%	86,793

LUHD
 UNAUDITED OPERATING STATEMENT
 Through 8 Periods Ended February 28, 2026

	CURR MO	2026	CM	CM	2025	YTD	YTD	YTD	YTD	YTD
	BUDGET	FEB	VAR-\$	VAR-%	FEB	BUDGET	ACTUAL	VAR-\$	VAR-%	LY
Education/Training	\$10,338	\$4,540	(\$5,798)	-56.1%	\$6,515	\$82,700	\$61,954	(\$20,746)	-25.1%	29,799
GASB Interest Expense	\$6,714	\$2,101	(\$4,613)	-68.7%	\$4,426	\$53,708	\$34,659	(\$19,049)	-35.5%	50,110
Advertising	\$4,917	\$1,616	(\$3,301)	-67.1%	\$3,141	\$39,333	\$25,368	(\$13,965)	-35.5%	38,437
Licenses & Fees	\$2,287	\$1,125	(\$1,162)	-50.8%	\$4,186	\$18,297	\$23,763	\$5,466	29.9%	20,194
Travel	\$3,292	\$2,216	(\$1,076)	-32.7%	\$1,903	\$26,333	\$21,434	(\$4,899)	-18.6%	20,801
Total Operating Expenses	\$3,869,897	\$3,903,234	\$33,337	0.9%	\$3,530,972	\$30,959,179	\$31,898,074	\$938,895	3.0%	29,054,587
Income / (Loss) from Operations	(\$159,063)	(\$183,330)	(\$24,267)	15.3%	(\$109,720)	(\$1,272,507)	\$281,195	\$1,553,702	-122.1%	(1,299,873)
Operating Margin:	-4.3%	-4.9%			-3.2%	-4.3%	0.9%			-4.7%
Non-Operating Revenue / (Expense)										
Interest	(\$1,917)	(\$1,294)	\$623	-32.5%	(\$1,858)	(\$15,333)	(\$11,407)	\$3,926	-25.6%	(16,305)
Sale of Assets	\$0	\$0	\$0	NA	\$5,600	\$0	(\$58,259)	(\$58,259)	NA	14,257
Donations	\$174	\$0	(\$174)	-100.0%	\$0	\$1,393	\$1,178	(\$215)	-15.5%	1,698
Grants	\$0	\$48,636	\$48,636	NA	\$0	\$0	\$125,757	\$125,757	NA	50,884
Interest Income	\$13,000	\$20,325	\$7,325	56.3%	\$13,430	\$104,000	\$166,896	\$62,896	60.5%	99,792
Taxes	\$216,936	\$216,936	(\$0)	0.0%	\$203,893	\$1,735,490	\$1,735,488	(\$2)	0.0%	1,631,717
Total Non-Op Inc / (Exp)	\$228,194	\$284,603	\$56,409	24.7%	\$221,065	\$1,825,550	\$1,959,653	\$134,103	7.3%	1,782,043
Net Surplus / Deficit	\$69,130	\$101,273	\$32,143	46.5%	\$111,345	\$553,043	\$2,240,848	\$1,687,805	305.2%	482,170
Total Margin:	1.9%	2.7%			3.3%	1.9%	7.0%			1.7%
2025 MEDICARE PAYABLE ADJUSTMENTS		\$100,000					\$550,000			
2025 MEDICAID PAYABLE ADJUSTMENTS		\$0					\$0			
SURPLUS/DEFICIT PRIOR TO ADJUSTMENTS		\$201,273					\$2,790,848			

5

LUHD
BALANCE SHEET - ASSETS
Unaudited
2/29/2026

	2026	2026	2025	CHANGE FM	CHANGE FM
	JAN	FEB	FEB	Prior Month	Prior Year
Assets					
Current Assets					
1 Cash, Unrestricted excl YTD Tax Receipts	\$4,262,543	\$3,711,538	\$1,597,155	(\$551,005)	\$2,114,383
Cash, Unrestricted from Tax Receipts YTD	\$2,412,781	\$2,443,723	\$2,354,165	\$30,942	\$89,558
Total Cash, Unrestricted	\$6,675,324	\$6,155,261	\$3,951,320	(\$520,063)	\$2,203,941
Patient Accounts Receivable	\$14,102,523	\$15,453,983	\$11,656,679	\$1,351,460	\$3,797,304
Less Allowance	(\$8,245,867)	(\$9,132,544)	(\$6,741,631)	(\$886,677)	(\$2,390,913)
Net Patient Accounts	\$5,856,656	\$6,321,439	\$4,915,048	\$464,783	\$1,406,391
41.53%		40.90%	42.17%		
Other A/R					
A/R Other	\$733,555	\$718,583	\$638,067	(\$14,972)	\$80,516
Edward Hulton (Net)	\$93,645	\$93,645	\$93,645	\$0	\$0
A/R Taxes	(\$446,119)	(\$260,125)	(\$392,233)	\$185,994	\$132,108
Total Other A/R	\$381,081	\$552,103	\$339,479	\$171,022	\$212,624
Inventory	\$617,962	\$622,978	\$642,707	\$5,016	(\$19,729)
Provider Tax	\$601,522	\$292,000	\$200,000	(\$309,522)	\$92,000
Prepaid Expenses	\$346,380	\$362,057	\$338,610	\$15,677	\$23,447
ERTC Receivable	\$3,770,975	\$3,770,975	\$3,304,089	\$0	\$466,886
Total Current Assets	\$18,249,900	\$18,076,813	\$13,691,253	(\$173,087)	\$4,385,560
	\$0				
Fixed and Non-Current Assets					
7 Property, Plant & Equip	\$18,315,696	\$18,396,287	\$17,802,752	\$80,591	\$593,535
Construction in Progress	\$30,000	\$30,627	\$0	\$627	\$30,627
Less Accumulated Depr	(\$14,726,772)	(\$14,778,861)	(\$13,894,500)	(\$52,089)	(\$884,361)
GASB assets	\$2,126,999	\$2,114,246	\$2,137,668	(\$12,753)	(\$23,422)
Less GASB Accumulated Depr	(\$1,129,891)	(\$1,155,404)	(\$1,227,349)	(\$25,513)	\$71,945
Net P, P & E	\$4,616,032	\$4,606,895	\$4,818,571	(\$9,137)	(\$211,676)
Other Non-Current Assets					
8 Restricted Cash	\$622,801	\$638,308	\$410,500	\$15,507	\$227,808
Third-Party Settlements	(\$1,117,740)	(\$1,217,740)	(\$875,487)	(\$100,000)	(\$342,253)
Total Non-Current Assets	(\$494,939)	(\$579,432)	(\$464,987)	(\$84,493)	(\$114,445)
Total Fixed and Non-Current Assets	\$4,121,093	\$4,027,463	\$4,353,584	(\$93,630)	(\$326,121)
9 Total Assets	\$22,370,993	\$22,104,276	\$18,044,837	(\$266,717)	\$4,059,439

6

LUHD
 BALANCE SHEET - LIABILITIES AND FUND BALANCE
 Unaudited
 2/29/2026

	2026	2026	2025	CHANGE FM Prior	CHANGE FM
	JAN	FEB	FEB	Month	Prior Year
Liabilities & Fund Balance					
Current Liabilities					
1 Accounts Payable	\$1,015,872	\$927,235	\$1,125,334	(\$88,637)	(\$198,099)
2 Accrued Liabilities	\$58,613	\$51,183	\$46,798	(\$7,430)	\$4,385
Douglas County	\$93,645	\$93,645	\$93,645	\$0	\$0
Line of Credit	\$0	\$0	\$0	\$0	\$0
Accrued Interest (GASB)	\$0	\$0	\$0	\$0	\$0
Refunds Payable	\$231,207	\$227,196	\$251,416	(\$4,011)	(\$24,220)
3 Accrued Payroll	\$1,861,481	\$1,920,205	\$1,584,765	\$58,724	\$335,440
Medicare Advance Pmt	\$0	\$0	\$0	\$0	\$0
SBA PPP Loan	\$0	\$0	\$0	\$0	\$0
4 Deferred Revenue: Misc Small Grants	\$179,701	\$179,701	\$46,223	\$0	\$133,478
Provider Tax	\$584,477	\$292,000	\$200,000	(\$292,477)	\$92,000
Total Current Liabilities	\$4,024,996	\$3,691,165	\$3,348,181	(\$333,831)	\$342,984
Long-Term Liabilities					
Total Commercial Debt	\$573,329	\$553,353	790,459	(\$19,976)	(\$237,106)
Total GASB Debt	\$844,401	\$830,218	763,249	(\$14,183)	\$66,969
Total Debt	\$1,417,730	\$1,383,571	\$1,553,708	(\$34,159)	(\$170,137)
Other Liabilities					
Tail	\$0	\$0	\$0	\$0	\$0
Total Liabilities	\$5,442,726	\$5,074,736	\$4,901,889	(\$367,990)	\$172,847
Fund Balance					
Fund Balance	\$14,788,692	\$14,788,692	\$12,660,777	\$0	\$2,127,915
Current Operations	\$2,139,577	\$2,240,848	\$482,171	\$101,271	\$1,758,677
Total Fund Balance	\$16,928,269	\$17,029,540	\$13,142,948	\$101,271	\$3,886,592
Total Liabilities & Fund Balance	\$22,370,995	\$22,104,276	\$18,044,837	(\$266,719)	\$4,059,439

DASHBOARD LEGEND

STABLE	At or above	98% of Target
CAUTIONS	At or above	92% of Target
NEEDS ATTENTION	Below	92% of Target

FINANCIAL HEALTH INDICATORS	2025-26 BUDGET/TARGET	Feb-26	Jan-26	Dec-25	Nov-25	Oct-25	Sep-25	Aug-25	Jul-25
Patient Days	223	242	241	239	224	264	252	215	189
Average Daily Census	8.0	8.6	7.8	7.7	7.5	8.5	8.4	6.9	6.1
Operating Room Cases	49	48	43	34	24	39	39	39	49
ER Services	386	374	406	428	393	436	429	503	526
Clinic Visits (Dunes/RMC)	1,411	1,266	1,607	1,307	1,269	1,598	1,510	1,484	1,656
OP Visits (Excl ED & Clinics)	1,750	1,701	1,741	1,743	1,583	1,528	1,910	1,773	1,558
Operating Cash	\$5,461,629	\$6,155,261	\$6,675,324	\$6,337,421	\$4,956,909	\$5,260,486	\$4,542,955	\$4,703,737	\$4,715,006
Operating Cash Days	45	49	55	51	40	43	37	38	39
Days in AR	55	66	65	62	59	59	58	58	55
Current Ratio	3.9	4.9	4.5	4.6	4.3	4.7	4.4	4.7	4.8
Net Patient Revenue	\$3,218,581	\$3,187,993	\$3,590,542	\$3,571,515	\$3,015,071	\$3,846,280	\$2,967,263	\$3,430,194	\$3,561,577
Operating Expense	\$3,869,897	\$3,903,234	\$3,982,740	\$4,165,810	\$3,755,499	\$4,058,101	\$3,964,785	\$3,983,499	\$3,948,406
Hospital Gain/Loss	\$69,130	\$101,273	\$430,905	\$214,009	\$85,564	\$872,439	(\$32,473)	\$180,041	\$389,092
Productivity	100.0%	97.7%	97.3%	100.3%	98.1%	96.6%	97.8%	101.5%	100.6%

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LOWER UMPQUA HOSPITAL

VOLUME STATISTICS

February-26	BUDGET	FEB 2026 ACTUAL	LAST MONTH	HISTORICAL AVE	FEB 2021	FEB 2022	FEB 2023	FEB 2024	FEB 2025	YTD BUDGET	YTD ACTUAL		
IP SERVICES													
PATIENT DAYS:													
MED/SURG:													
ACUTE:	71	66	-7.5%	82	68	67	70	67	71	63	619	633	2.2%
ICU:	2	0	-100.0%	0	4	5	2	9	3	0	13	4	-70.0%
SWING:	134	149	10.9%	136	90	23	36	94	132	165	1,166	1,030	-11.7%
O/P HOLD:	16	27	70.0%	23	16	16	14	15	15	22	138	199	44.4%
TOTAL PATIENT DAYS:	223	242	8.4%	241	178	111	122	185	221	250	1,937	1,866	-3.6%
SURGICAL SERVICES:													
CASES:	49	48	-3.0%	43	48	58	45	49	42	44	429	315	-26.6%
EMERGENCY SERVICES:													
ER VISITS:	386	374	-3.0%	406	332	237	302	346	380	394	3,347	3,495	4.4%
AMBULANCE PATIENTS:	100	104	4.4%	111	90	81	86	84	109	92	864	948	9.7%
ANCILLARY SERVICES:													
LABORATORY TESTS:													
BILLED TESTS:	4,704	5,444	15.7%	6,280	4,473	4,006	4,299	4,666	4,530	4,865	40,821	45,450	11.3%
RADIOLOGY STUDIES:													
RADIOLOGY:	381	390	2.4%	410	352	366	346	326	335	388	3,305	3,199	-3.2%
CT:	147	223	51.6%	241	130	112	102	142	126	169	1,276	1,782	39.6%
MRI:	26	41	58.5%	49	28	29	28	22	28	33	223	315	41.2%
NUCLEAR MED :	1	0	-100.0%	0	2	4	5	3	0	0	11	0	-100.0%
ULTRASOUND:	52	78	49.7%	92	56	78	21	77	51	55	452	601	33.0%
ECHO	0	0	0.0%	0	3	13	0	0	0	0	0	0	0.0%
TOTAL RADIOLOGY:	607	732	20.6%	792	572	602	502	570	540	645	5,267	5,897	12.0%
REHAB VISITS:													
PHYSICAL THERAPY:	610	532	-12.8%	538	494	461	416	414	618	563	5,293	3,984	-24.7%
OCCUPATIONAL THERAPY:	169	146	-13.6%	148	180	159	164	211	167	198	1,467	1,299	-11.5%
SPEECH THERAPY:	37	71	90.8%	79	40	41	26	33	48	53	323	553	71.3%
TOTAL REHAB:	816	749	-8.2%	765	714	661	606	658	833	814	7,084	5,836	-17.6%
PAYROLL DATA:													
WORKED HOURS (PAYROLL):	27,753	29,498	6.3%	30,886	26,799	25,386	27,317	25,803	27,570	27,922	240,855	238,926	-0.8%
WORKED HOURS (REGISTRY):	868	1,052	21.1%	1,216	656	13	340	868	387	1,673	7,534	10,795	43.3%
TOTAL PAYROLL:	28,621	30,550	6.7%	32,102	27,456	25,399	27,657	26,671	27,957	29,594	248,389	249,720	0.5%
DUNES VISITS:													
Sargent - Phy - Employee	174	182	4.7%	177	99	0	0	160	154	181	1,509	1,368	-9.4%
Irvine - Phy - Employee	125	235	87.4%	220	89	0	0	171	116	160	1,089	1,142	4.9%
Coe - Phy - Employee	205	255	24.1%	231	123	0	0	183	194	237	1,783	1,869	4.8%
Vanasche - ML - Employee	26	0	-100.0%	0	23	0	0	40	73	0	228	404	77.4%
Dotson - ML - Employee	166	182	9.4%	206	98	0	0	102	219	169	1,443	1,556	7.8%
Berry - ML - Employee	161	83	-48.6%	184	65	0	0	0	154	173	1,401	1,276	-8.9%
Bailey - LCSW - Employee	54	76	39.9%	68	0	0	0	0	0	0	471	563	19.4%
Danforth - PA-C - Employee	150	232	54.6%	0	40	0	0	202	0	0	1,302	1,736	33.3%
Jones - PA-C - Employee	138	0	-100.0%	0	0	0	0	0	0	0	1,198	128	-89.3%
Serrano - Phy - Employee	61	0	-100.0%	0	0	0	0	0	0	0	533	325	-39.0%
Mello - LCSW - Employee	0	21	0.0%	0	0	0	0	0	0	0	0	59	0.0%
VACANT - -	0	0	0.0%	0	0	0	0	0	0	0	0	0	0.0%
VACANT - -	0	0	0.0%	0	0	0	0	0	9	0	0	0	0.0%
TOTAL DUNES:	1,201	1,266	5.4%	1,407	706	0	0	1,113	1,136	1,282	10,425	10,426	0.0%

LOWER UMPQUA HOSPITAL

VOLUME STATISTICS

February-26	BUDGET	FEB 2026		LAST MONTH	HISTORICAL AVE	FEB					YTD BUDGET	YTD	
		ACTUAL				2021	2022	2023	2024	2025		BUDGET	ACTUAL
DUNES CHARGES:	\$427,957	\$470,358	9.9%	\$459,070		\$283,993	\$233,196	\$330,862	\$322,874	\$504,055	\$3,714,052	\$3,553,494	-4.3%
RMC VISITS:													
Shank G - Phy - Employee	51	70	36.8%	67	35	0	0	55	76	42	444	452	1.8%
Saunders - Phy - Employee	43	19	-55.5%	17	15	0	0	0	30	47	371	255	-31.2%
Ivanitsky - Phy - Employee	114	94	-17.2%	103	28	0	0	0	55	84	985	781	-20.7%
Abanulo - Phy - Contract	2	0	-100.0%	13	0				0	0	20	121	505.8%
Decker-Flint - CRNA - Contract	28	0	-100.0%						0	0	240		-100.0%
VACANT - -	0		0.0%						0	0	0		0.0%
VACANT - -	0		0.0%						0	0	0		0.0%
VACANT - -	0		0.0%						0	0	0		0.0%
	210	183	-12.7%	200	122	0	0	265	170	173	1,820	1,609	-11.6%
RMC CHARGES:	\$226,644	\$218,172	-3.7%	\$187,434	\$197,733	\$210,931	\$181,091	\$205,093	\$159,961	\$231,586	\$1,966,946	\$1,555,828	-20.9%
HOSPITAL CHARGES:	\$5,314,875	\$6,028,758	13.4%	\$6,516,228	\$3,972,547	\$3,234,352	\$3,164,320	\$3,927,545	\$4,193,862	\$5,342,654	\$46,125,523	\$49,229,589	6.7%
TOTAL FACILITY CHARGES:	\$5,969,476	\$6,717,288	12.5%	\$7,162,732	\$4,505,275	\$3,729,276	\$3,578,607	\$4,463,500	\$4,676,698	\$6,078,295	\$51,806,521	\$54,338,910	4.9%

10

LOWER UMPQUA HOSPITAL DISTRICT
PRODUCTIVITY REPORT

MONTH OF FEBRUARY 2026

DATA IS VALID

Dept#	Department	Unit of Service	BUDGETED	ACTUAL	ACTUAL	BUD	ACT	VOL	BUDGET			
			Hrs / UOS	Hrs / UOS	PROD %				VOL	TOTAL	TOTAL	ACTUAL
60050	OP NURSING	Visits	2.4018	3.5146	68.3%	100	79	79.0%	240	190	278	88
61700	RESPIRATORY THERAPY	Procedures	2.2033	2.4180	91.1%	304	245	80.6%	670	540	592	53
62400	AMBULANCE	Patients	20.1579	18.8857	106.7%	100	104	104.4%	2,007	2,096	1,964	(132)
70100	LABORATORY	Billed Tests	0.2518	0.2273	110.8%	4,704	5,444	115.7%	1,184	1,371	1,238	(133)
81000	NUTRITIONAL ED	Revenue	150.8333	86.6667	179.5%	1	1	100.0%	156	156	87	(69)
81100	DIETARY	Meals	1442.1667	1,366.4167	105.5%	1	1	100.0%	1,442	1,442	1,366	(76)
83000	MATERIALS MANAGEMENT	Adjusted Patient Days	600.7500	530.7833	113.2%	1	1	100.0%	601	601	531	(70)
83100	INFO TECH	Adjusted Patient Days	620.8333	661.7333	93.8%	1	1	100.0%	621	621	662	41
83200	CLINICAL INFORMATICS	Adjusted Patient Days	386.2500	375.9000	102.8%	1	1	100.0%	386	386	376	(10)
83900	ADMITTING	O/P Visits + Discharges	1518.4167	1,849.7333	82.1%	1	1	100.0%	1,518	1,518	1,850	331
84000	PRE SERVICE	O/P Visits + Discharges	601.5000	476.0333	126.4%	1	1	100.0%	602	602	476	(125)
84400	MEDICAL RECORDS	O/P Visits + Discharges	603.3333	644.3333	93.6%	1	1	100.0%	603	603	644	41
90000	GENERAL ACCOUNTING	Adjusted Patient Days	754.0833	675.2000	111.7%	1	1	100.0%	754	754	675	(79)
91000	PATIENT ACCOUNTING	O/P Visits + Discharges	1820.0000	1,828.4667	99.5%	1	1	100.0%	1,820	1,820	1,828	8
94000	HUMAN RESOURCES	Total Worked Hours	301.6667	286.2167	105.4%	1	1	100.0%	302	302	286	(15)
95000	ADMINISTRATION	Adjusted Patient Days	301.6667	297.2167	101.5%	1	1	100.0%	302	302	297	(4)
95100	MEDICAL STAFF SERVICES	Adjusted Patient Days	150.8333	160.0000	94.3%	1	1	100.0%	151	151	160	9
									13,359	13,454	13,310	(143)

ROLL-UPS

Dept#	Department	Unit of Service	BUDGETED	ACTUAL	ACTUAL	BUD	ACT	VOL	TOTAL	TOTAL	ACTUAL	HOURS	HOURS	VAR
			Hrs / UOS	Hrs / UOS	PROD %	VOL	VOL	VAR	FIXED	EARNED	HOURS	VS EARNED		
60000	NURSING ADMINISTRATION	Staff RN Hours	462.1667	495.0833	93.4%	1	1	100.0%	462	462	495	33		
87000	CARE COORDINATOR/UR	Adjusted Patient Days	173.3333	173.3333	100.0%	1	1	100.0%	173	173	173	0		
95050	INFECTION CONTROL/EMPL HEALTH	Adjusted Patient Days	150.8333	133.3333	113.1%	1	1	100.0%	151	151	133	(18)		
95150	RISK MANAGEMENT/QUALITY	Adjusted Patient Days	150.8333	133.3333	113.1%	1	1	100.0%	151	151	133	(17)		
									937	937	935	(2)		
60200	ICU/CCU	ICU/CCU Patient Days	37.5000	0.0000	0.0%	2	0	0.0%	58	0	0	0		
60700	ACUTE	Acute Patient Days	18.4520	42.7053	43.2%	71	66	92.5%	1,316	1,218	2,819	1,601		
60800	SWING BED	Swing Patient Days	7.2474	2.3642	306.5%	134	149	110.9%	974	1,080	352	(728)		
66000	OBSERVATION	Equivalent Patient Days	7.2474	0.0000	0.0%	16	27	170.0%	115	196	0	(196)		
62300	E/R	Visits	4.6540	4.0076	116.1%	386	374	97.0%	1,795	1,741	1,499	(242)		
									4,258	4,234	4,670	436		
60100	SURGERY	Cases	18.3876	22.3615	82.2%	49	48	97.0%	910	883	1,073	191		
60150	RECOVERY	Cases	10.3716	0.0000	0.0%	14	21	149.6%	146	218	0	(218)		
									1,055	1,100	1,073	(27)		

11

LOWER UMPQUA HOSPITAL DISTRICT
PRODUCTIVITY REPORT

MONTH OF FEBRUARY 2026

DATA IS VALID

Dept#	Department	Unit of Service	BUDGETED Hrs / UOS	ACTUAL Hrs / UOS	ACTUAL PROD %	BUD VOL	ACT VOL	VOL VAR	BUDGET			
									TOTAL FIXED	TOTAL EARNED	TOTAL ACTUAL HOURS	HOURS VAR VS EARNED
65900	SPEECH THERAPY	Visits	3.7320	2.1521	173.4%	37	71	190.8%	139	265	153	(112)
70910	PHYSICAL THERAPY	Visits	1.7750	2.1642	82.0%	610	532	87.2%	1,083	944	1,151	207
70920	OCCUPATIONAL THERAPY	Visits	1.6425	1.4334	114.6%	169	146	86.4%	278	240	209	(31)
					95.7%				1,499	1,449	1,513	64
66200	ECHO	Studies		0.0000	0.0%		0	100.0%	0	0	0	0
70410	RADIOLOGY DIAGNOSTIC	Studies (incl Mam & Dex)	2.0703	2.0957	98.8%	381	440	115.5%	789	911	922	11
70420	ULTRASOUND	Studies	2.6657	2.4081	110.7%	52	78	149.7%	139	208	188	(20)
70430	NUCLEAR MEDICINE	Studies		0.0000	0.0%		0	100.0%	0	0	0	0
70440	CT SCAN	Studies	0.0000	0.0000	0.0%	147	223	151.6%	0	0	0	0
					100.8%				927	1,119	1,110	(9)
70600	RETAIL PHARMACY	Cash	1219.0833	1,523.7675	80.0%	1	1	100.0%	1,219	1,219	1,524	305
70700	PHARMACY	Gross Charges	727.2500	628.3000	115.7%	1	1	100.0%	727	727	628	(99)
					90.4%				1,946	1,946	2,152	206
82000	HOUSEKEEPING	Adjusted Patient Days	1275.3333	1,178.7667	108.2%	1	1	100.0%	1,275	1,275	1,179	(97)
82100	BIO MED	Adjusted Patient Days	177.3333	121.9667	145.4%	1	1	100.0%	177	177	122	(55)
83500	PLANT OPERATIONS	Adjusted Patient Days	759.5000	625.3000	121.5%	1	1	100.0%	760	760	625	(134)
					114.9%				2,212	2,212	1,926	(286)
84100	COMMUNITY OUTREACH	Contacts	138.6667	129.8500	106.8%	1	1	100.0%	139	139	130	(9)
96000	PUBLIC RELATIONS	Adjusted Patient Days	150.8333	165.3333	91.2%	1	1	100.0%	151	151	165	14
					98.1%				290	290	295	6
85000	RMC MULTI-SPECIALTY CLINIC	Provider Visits	2.9409	4.4890	65.5%	237	183	77.1%	698	538	821	283
86000	DUNES RURAL HEALTH CLINIC	Provider Visits	2.0402	2.1668	94.2%	1,263	1,266	100.3%	2,576	2,583	2,743	160
					87.6%				3,274	3,121	3,565	444
HOSPITAL TOTALS					97.7%				29,758	29,862	30,550	688

(12)

NEW BUSINESS

LOWER UMPQUA HOSPITAL DISTRICT

BOARD ACTION REQUEST

BOARD MEETING DATE:

March 25, 2026

AGENDA ITEM SUBJECT:

Policy update P3 Organizational Chart

BACKGROUND:

The organizational chart has been updated to reflect Pharmacy reporting to CNO, Registration reporting directly to CFO, and Pre-Service reporting to Clinics Manager.

FISCAL IMPACT:

None.

BOARD OPTIONS:

1. Approve this action request as presented.
2. Approve this action request with modifications.
3. Oppose this action request.

STAFF RECOMMENDATION:

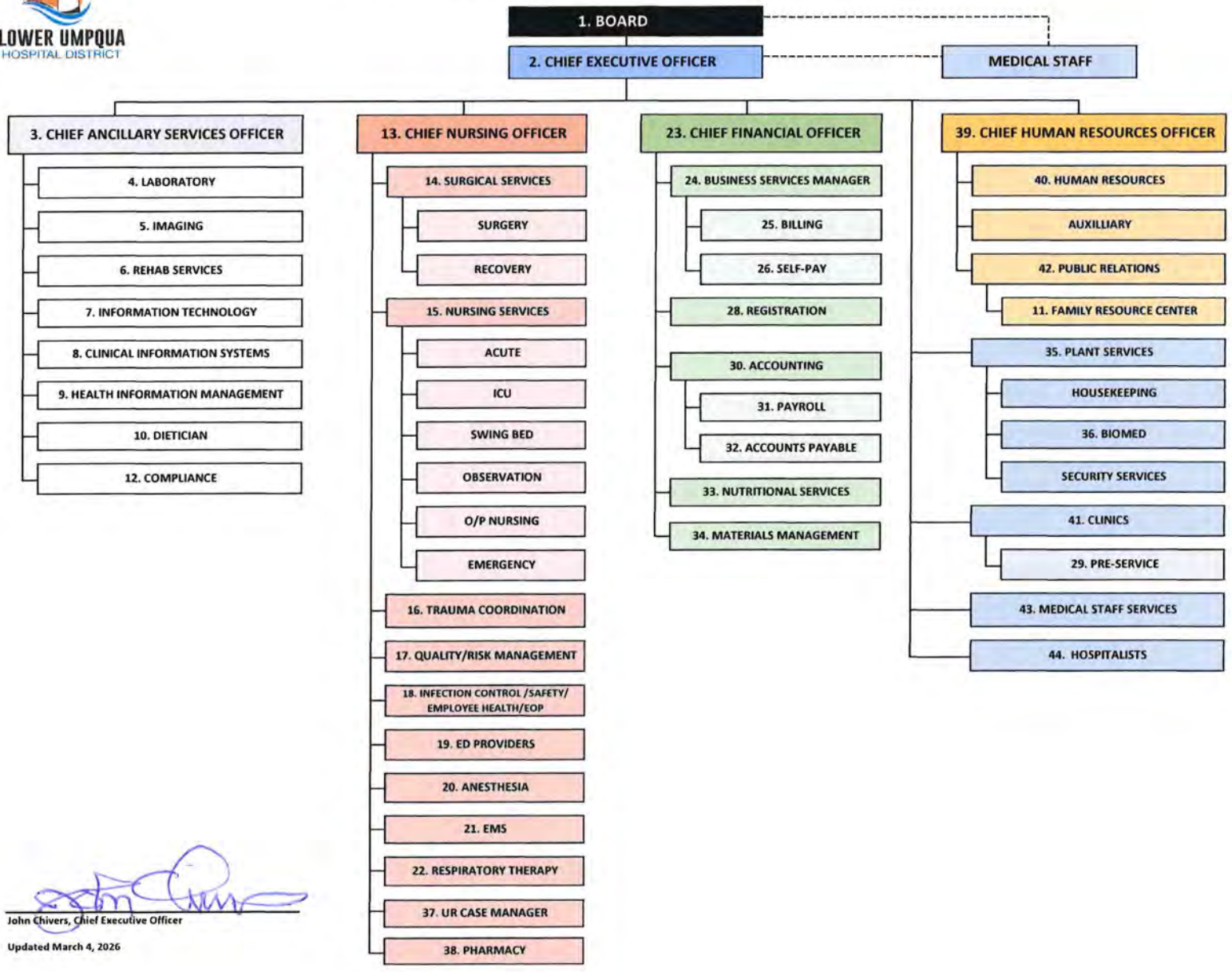
- Approve this action request as presented.

MOTION:

Move to approve policy P3 Organizational Chart as presented.



Lower Umpqua Hospital District - Organizational Chart




 John Chivers, Chief Executive Officer

Updated March 4, 2026

LOWER UMPQUA HOSPITAL DISTRICT

BOARD ACTION REQUEST

BOARD MEETING DATE:

March 25, 2026

AGENDA ITEM SUBJECT:

Policy update P90 Dress Code

BACKGROUND:

The policy is updated as shown in the red line.

FISCAL IMPACT:

None.

BOARD OPTIONS:

1. Approve this action request as presented.
2. Approve this action request with modifications.
3. Oppose this action request.

STAFF RECOMMENDATION:

- Approve this action request as presented.

MOTION:

Move to approve policy P90 Dress Code as presented.

SUBJECT: Dress Code	REFERENCE # P 90
DEPARTMENT: ADMINISTRATION	PAGE: 1 OF: 2
APPROVED BY:	EFFECTIVE DATE: 10/19/2000
REVISED: 12/7/2016 2/28/2018	
REVIEW DATE (No Revisions): 5/18/2022	

Lower Umpqua Hospital District dress code criteria is to always portray a professional appearance, which aids in creating a feeling of trust and security on the part of the patients and gains the confidence of their family and friends. Employees need to set themselves apart from visitors or guests by their professional appearance and wearing of name badge.

Hair is to ~~be neat, clean~~ be clean and well-groomed and in and in no way interfere with the technical or professional requirements of the position or work assignment. Employees should not come to work with wet ~~or unbrushed~~ hair. In some departments, it may require that long hair ~~to be~~ pulled back and secured.

- Proper body hygiene requires cleanliness and neat grooming.
- Employees must Refrain from fragrances, including but not limited to: perfume, scented after-shave and lotions, hairspray and scented laundry detergent/fabric softener. We are a scent free facility - as many patients and staff are sensitive to scents and it can cause allergic reactions and respiratory issues. If an employee comes to work with a noticeable scent, they may be asked to go home and/or change their clothing without pays.
- Name badges are to be worn during working hours, above the waist in an easy to view location.
- Shoes are to be clean and in good repair. Professional choices should be made when choosing footwear for the work place. The following list of footwear are not considered professional acceptable for the work environment and are not allowed:
 - Flip flops
 - Slouchy sheep-skin type boots (like Ugg or Bearpaw) or slippers
 - ~~Lace up/gym shoes are not appropriate business casual footwear.~~
 - Open toed shoes are not allowed in any clinical areas.
- Clothing is to be clean and in good repair. Holes or runs in clothing fabric, and excessive wrinkles do not portray a professional image. Unless as specifically allowed for special occasions or in specific departmental dress codes, the following clothing is not considered business casual and is not allowed:
 - Leggings may only be worn with dresses or long tops that hit approximately mid-thigh or lower.
 - Sweats, workout pants or shorts.
 - Casual t-shirts or hoodies are not considered office appropriate attire.
 - Clothing that is excessively tight, low cut, sheer or dresses/skirts that are excessively short.
 - Clothing that is political (including wearing of buttons, etc.)
 - Excessive jewelry. This can interfere with patient care and detracts from a professional appearance.
- Blue jeans (cannot be ripped/distressed or have holes) except on Fridays as long as if other attire worn with jeans is professional in appearance. (i.e.: jeans paired with t-shirts, hoodies

SUBJECT: Dress Code	REFERENCE # P 90
DEPARTMENT: ADMINISTRATION	PAGE: 2 OF: 2
APPROVED BY:	EFFECTIVE DATE: 10/19/2000
REVISED: 12/7/2016 2/28/2018	
REVIEW DATE (No Revisions): 5/18/2022	

etc. are too casual for office/[clinical](#) environments). LUHD logoed items with jeans are acceptable ~~with manager approval~~.

- CLINICAL/NURSING/~~CMA~~/RADIOLOGY--
Scrubs will be worn by employees in these areas as indicated by the department Manager. All scrubs must be in good repair, clean and free from excessive wrinkles.
- STANDBY--
Employees are frequently called in at short notice and so may be wearing clothing that does not meet dress code. For those departments, arrangements should be made for lab coats or smocks to be available in their departments for such times to promote professional appearance

PROCEDURES:

- A. The dress code guidelines throughout the hospital district will be enforced by the Manager for that respective department.
- B. Each Manager is responsible for the endorsement of the dress code policy in his or her respective department.
- C. Department Managers may send inappropriately dressed employees home without pay to change clothing.

SUBJECT: Dress Code	REFERENCE # P 90
	PAGE: 1
DEPARTMENT: ADMINISTRATION	OF: 2
APPROVED BY:	EFFECTIVE DATE:
	10/19/2000
REVISED: 12/7/2016 2/28/2018	
REVIEW DATE (No Revisions): 5/18/2022	

Purpose:

Lower Umpqua Hospital District (District) dress code criteria is to always portray a professional appearance, which aids in creating a feeling of trust and security on the part of the patients and gains the confidence of their family and friends. Employees need to set themselves apart from visitors or guests by their professional appearance and wearing of name badge.

Dress Code Criteria:

1. Hair is to be clean and in no way interfere with the technical or professional requirements of the position or work assignment. Employees should not come to work with wet hair. In some departments, it may require that long hair be pulled back and secured.
2. Proper body hygiene requires cleanliness and neat grooming.
3. Employees must refrain from fragrances, including but not limited to: perfume, scented after-shave and lotions, hairspray and scented laundry detergent/fabric softener. We are a scent free facility - as many patients and staff are sensitive to scents and it can cause allergic reactions and respiratory issues. If an employee comes to work with a noticeable scent, they may be asked to go home and/or change their clothing without pay.
4. Name badges are to be worn during working hours, above the waist in an easy to view location.
5. Shoes are to be clean and in good repair.
 - a. The following list of footwear are not considered acceptable for the work environment and are not allowed:
 - i. Flip flops
 - ii. Slouchy sheep-skin type boots (like Ugg or Bearpaw) or slippers
 - iii. Open toed shoes are not allowed in any clinical areas.
6. Clothing is to be clean and in good repair. Holes or runs in clothing fabric, and excessive wrinkles do not portray a professional image.
 - a. Unless as specifically allowed for special occasions or in specific departmental dress codes, the following clothing is NOT allowed:
 - i. Leggings may only be worn with dresses or long tops that hit approximately mid-thigh or lower.
 - ii. Sweats, workout pants or shorts.
 - iii. Casual t-shirts or hoodies are not considered office appropriate attire.
 - iv. Clothing that is excessively tight, low cut, sheer or dresses/skirts that are excessively short.
 - v. Clothing that is political (including wearing of buttons, etc.)
 - vi. Excessive jewelry. This can interfere with patient care and detracts from a professional appearance.
 - vii. Blue jeans (cannot be ripped/distressed or have holes) except on Fridays if other attire worn with jeans is professional in appearance. (i.e.: jeans paired

SUBJECT: Dress Code	REFERENCE # P 90
DEPARTMENT: ADMINISTRATION	PAGE: 2 OF: 2
APPROVED BY:	EFFECTIVE DATE: 10/19/2000
REVISED: 12/7/2016 2/28/2018	
REVIEW DATE (No Revisions): 5/18/2022	

with t-shirts, hoodies etc. are too casual for office/clinical environments).
LUHD logoed items with jeans are acceptable.

Clinical/ Nursing/ Radiology:

1. Scrubs will be worn by employees in these areas as indicated by the Department Manager.
2. All scrubs must be in good repair, clean and free from excessive wrinkles.

Standby:

1. Employees are frequently called in at short notice and so may be wearing clothing that does not meet dress code.
2. For those departments, arrangements should be made for lab coats or smocks to be available in their departments for such times to promote professional appearance.

Procedure:

1. The dress code guidelines throughout the District will be enforced by the Department Manager for that respective department.
2. Each Department Manager is responsible for the endorsement of the dress code policy in his or her respective department.
3. Department Managers may send inappropriately dressed employees home without pay to change clothing.