BUDGET HEARING AND BOARD OF DIRECTORS MEETING
Lower Umpqua Hospital District (LUHD)
Wednesday, June 24, 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#

LOWER UMPQUA HOSPITAL DISTRICT

MINUTES

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

Others in attendance include Stephanie Miller, John Chivers, Melissa Cribbins, Hospital Attorney, Elise Dumo, Dr. Jason Sargent, Jennifer Green, Jen Anderson, Holly Tavernier, Kaley Sweet, Mary Chambers, Julia Floyd, Deanna Prater, and Renae Mefferd.

Those employees and members of the public joining virtually include Rhiannon Manicke and two other internal callers.

I. CALL TO ORDER & INTRODUCTIONS

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

II. OPENING OF 2026-27 BUDGET HEARING – Any citizen wishing to address the Board regarding the proposed 2026-27 budget may do so at this time. It is requested that such comments be limited to five minutes.

Board Chair Kreskey opened the 2026-27 Budget Hearing at 7:30 am.

No one requested to address the board with questions about the budget.

III. VISITOR'S AGENDA

No visitors.

IV. CONSENT AGENDA – Approve the following:

A. Board of Directors Meeting Agenda June 24, 2026
B. Board of Directors Meeting Minutes May 27, 2026
C. Committee Minutes

Motion: Bridge moved to approve the Consent Agenda; Young seconded. Motion passed (5-0) with the following vote: Kresky – Yes, Young – Yes, Bridge – Yes, Fraley – Yes, Aasen - Yes.

V. REPORTS & PRESENTATIONS

A. Quality/Risk Report – Julia Floyd
    1. See report.
    2. This is a typical number; there are many other near misses reported.

B. Compliance Report – Renae Mefferd
    1. See report.
C. Nursing Services Report – Jennifer Green
    1. See report.
D. Medical Staff – Dr. Jason Sargent
    1. See report.
    2. There was discussion about filling the new provider vacancy; our cohort of providers will take patient panel. Dr. Steven Brantley, who will start full-time next August may start here sooner and take some of the patient panel. Board agreed that this is a good approach to calm community fears.
E. Public Relations/Foundation – Kaley Sweet
    1. See report.
    2. Rural Health Transformation Program Grant awards – we are awaiting confirmation and next steps on all submissions: Transformation, Clinic and Catalyst.
F. Human Resources – Holly Tavernier
    1. See report.
    2. Amazing Workplace survey was launched on Monday June 22nd .
    3. New hire providers – how can we become more familiar with them? Photos and a bios can be generated and shared. The team will explore.
G. Ancillary Services – Jen Anderson
    1. See report.
    2. HIM – how technical is the job? Ensures and cross checks that all documentation is in fact in the patient chart.
H. Finance Report – Elise Dumo
    1. See Financial Report.
    2. See Financial Statements.
    3. See Dashboard
        1) Operating cash = $10.4 M
        2) Operating Days Cash = 81 days
        3) Current ratio = 4.3
        4) Productivity = 95.4%
    4. Volumes
        1) These departments exceeded budget and historical averages: ER visit, Lab Tests, Radiology, CT Scans, and Speech Therapy.
    5. Question about the Retail Pharmacy write off – when the retail pharmacy moved last December, they reopened with modern technology and systems. We are writing off a legacy system that was replaced.
I. Administrator Report – John Chivers
    1. See report.
    2. Atrio - See report. On June 22 we received another $40K payment. While not current Atrio has made significant progress. Recommendation is to monitor their AR and collections closely.
        1) Recent payments will result in improved AR collection data metrics for June.
    3. Radiology Projects – Dexa is under review with OHA and MRI will soon go out to bid.

VI. NEW BUSINESS

A. Policy – ADBM_1010 Ongoing Professional Practice Evaluation Forms

Motion: Aasen moved to approve as presented the updated policy ADBM_1010 Ongoing Professional Practice Evaluation forms; Young seconded. Motion passed (5-0) with the following vote: Kresky – Yes, Young – Yes, Bridge – Yes, Fraley – Yes, Aasen - Yes.

B. Budget Committee – Reappointments

Motion: Young moved to approve as presented the reappointments of Jenee Anderson and Michelle Fraley to the LUHD Budget Committee for three-year terms ending June 30, 2029; Aasen seconded. Motion passed (5-0) with the following vote: Kresky – Yes, Young – Yes, Bridge – Yes, Fraley – Yes, Aasen - Yes.

A. Upcoming: Board Meeting: Wednesday July 29, 2026, 7:30 am

1) The Annual Meeting of the Board of Directors

Final note: The Board thanked John for his time and service to LUHD. He has managed under trying conditions, the improvements he has led have been substantial, and we have attained financial stability during his tenure. He will leave in place an outstanding leadership team and staff to guide us into the future. It has been a pleasure working with you.

VII. CLOSE OF BUDGET HEARING

Board Chair Kreskey declared the Budget Hearing closed at 8:30 am and called for a vote of Resolution 26-03.

A. Resolution 26-03

1. Adopting the 2026-2027 Budget
2. Making Appropriations
3. Imposing Taxes
4. Categorizing Taxes

Motion: Bridge moved to adopt as presented Resolution 26-03 adopting the fiscal year budget ending June 30, 2027, including a total budget of $67,159,312, total appropriations of $51,545,731, imposing and categorizing a permanent rate tax at the rate of $3.9729 per $1000 total assessed value. Young seconded. Motion passed (5-0) with the following vote: Kresky – Yes, Young – Yes, Bridge – Yes, Fraley – Yes, Aasen - Yes

Board Chair Kreskey closed the regular meeting at 8:37 am and called the Executive Session to order.

VIII. 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:

(e) To conduct deliberations with persons designated by the governing body to negotiate real property transactions.

IX. RETURN TO REGULAR SESSION

Boad Chair Kreskey adjourned the Executive Session and called the regular session back into order at 8:41 am.

Further Board action was required.

Motion: Young moved to not extend the Master Heights property listing agreement. Aasen seconded the motion. Motion passed (5-0) with the following vote: Kresky – Yes, Young – Yes, Bridge – Yes, Fraley – Yes, Aasen – Yes.

X. ADJOURNMENT

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

Board Chair Kreskey declared the meeting adjourned at 8:45 am.

APPROVED THIS 29th day of JULY 2026,

Ronald Kreskey, Chair

ATTEST:

Brenda Fraley, Secretary

Director of Quality/Risk Management Update

LUHD Board Meeting
June 24th, 2026

Regulatory

- Level IV Trauma recertification survey
  - Plan of correction submitted 6/17/26

Quality

- Survey on Patient Safety (SOPS) Data submitted 6/17/26

Risk Management

Incident / Unusual Occurrence Reports

May 2026 - 32 incidents - 0 reported anonymous
Meditech Classifications:

- 13 Medication events
- 6 Falls
- 4 Treatments and Therapies
- 2 Equipment
- 1 Lab
- 1 Surgical Event
- 1 Behavior
- 1 Safety/ Security
- 1 Non-patient Medication Event
- 1 Employee Incident
- 1 Admission/ Transfer/ Discharge

Grievances - Grievance Committee (quarterly) meeting held on April 28, 2026
May 2026 - 1 grievances

- 1 Care concern

Respectfully submitted,

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

Compliance Program Update

LUHD Board Meeting
June 24, 2026

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…

Reports of potential non-compliance received since last reporting period
(05/27/2026)

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

Respectfully submitted,

Renae Mefferd, RN
Compliance Officer

CNO UPDATE

LUHD Board of Directors
June 24, 2026

Nursing:

New Hires

- Matt Borgens FT ED CNA 6/4/26
- Parker, Emily FT RN NOCS 6/12/26
- Bishop, Makayla CNA PRN Days 6/15/26
- Nielson, Victoria CNA PRN 6/29/26
- Bennett, Liliana FT Days RN - passed NCLEX, waiting for start date.

Current Openings

- One Part-time CNA ED
- One Full-time CNA NOC ACU

Respiratory Therapy

- Department is fully staffed.

Process Improvement/Updates:

1. **CNO Role:** Julia Floyd BSN, RN CPHQ, RHCNOC will be assuming the role of CNO on July 1.

2. **Director of Quality and Risk Management:** Tabitha Meyers BSN, RN will be assuming the role on July 1.

3. **Nurse Manager:** Position is now posted and we are in the process of scheduling interviews with current applicants.

4. **Cataracts:**
   - Continuing to build volume.

5. **Pain Management:**
   - Clinic dates have started. June 16, 17, 23 & 24. First Surgical day June 26.

Respectfully submitted,

Jennifer Green, BSN RN RHCNOC, RHCEOC
Chief Nursing Officer

Lower Umpqua
Hospital District
600 Ranch Road
Reedsport, OR 97467

541-271-2171

June 24, 2026

LUHD BOARD OF DIRECTORS: MEDICAL STAFF REPORT

LUHD medical staff approved to modify the ongoing professional practice evaluations (OPPE) for Surgery, Emergency Medicine, Hospitalists, and the General form. Specifically, the "deviations for national standards of practice" was modified to fit more accurately what is being tracked.

Medical staff pre-op testing recommendations were modified to add Interventional Pain to the list of procedures that do not require pre-op testing (similar to colonoscopies and upper endoscopies).

We have two new medical students from Pacific Northwest University starting after July (Edith Luviano and Megana Shivakumar).

Sierra Stone presented an update of the future addition of DEXA at LUHD.

A brief update on the status of providers at DFHC was given regarding the departure of Erin Berry. We believe that we can likely absorb Erin's patients with our current providers but are still considering hiring a new provider. Dr. Steven Brantley is currently scheduled to start in the summer of 2027 and his medical staff privileging was approved for both inpatient and outpatient medicine.

Regards,

Jason Sargent, DO

Chief of Staff: Lower Umpqua Hospital

Medical Director: Dunes Family Health Care

LOWER UMPQUA
HOSPITAL DISTRICT

CONTACT DETAILS
Public Relations
Lower Umpqua Hospital District
public_relations@luhonline.com
(541) 271 6336

MARKETING & COMMUNICATIONS

BOARD OF DIRECTORS
June 24, 2026

- **ANNUAL CALENDAR**
  - July - UV Safety Month
  - Independence Day BBQ & John's Retirement Party - July 1, 11:30AM - 1:30PM

- **DIGITAL ADVERTISING**
  - Continue to promote Cataract Services, General Surgery, and Orthopedics

- **WEBSITE UPDATE**
  - Overview of Fathom Website Audit
    - Technical Audit, Keyword & Content Audit, Local Listings Review (Google), Service line review
    - Developing a Search Engine Optimization (SEO) and Content Roadmap to align technical recommendations and educational content.

- **PRINT ADVERTISING**
  - Everything Umpqua Summer Edition
  - Oregon Coast Mailer - Cataract Surgery Services
  - Updating Emergency Medical Information sheet for EMS

- **COMMUNITY OUTREACH & EVENTS**
  - LUH Foundation Attended RCCS Scholarship Awards
  - Fun Outdoor Fitness Park Workout Bars - Project Update

- **FAMILY RESOURCE CENTER**
  - 125 Services provided for 64 individuals in June
  - $250 Sunrise Tokens distributed
  - Christmas in July Volunteer Day Scheduled for July 11 at 8:00AM - Reedsport Senior Center
  - FRC Awarded $50,000 Grant through Lane County & Trillium

CHIEF HUMAN RESOURCES OFFICER REPORT

Board of Directors
June 24, 2026

Employee Hiring & Recruitment:

May/June: (As of 6/18/2026):

- Admitting Clerk, Full-Time (Etchieson)
- RN, Night Shift, Full-Time (Parker)
- CNA, Per Diem (Bishop)
- Scrub Tech, Full-Time (Cleveland)

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

- FT Patient Account Representative III
- Referrals Coordinator
- Nursing Manager
- FT Licensed PT Assistant
- FT Occupational Therapist
- FT Physical Therapist
- FT CNA Nights
- FT CNA-Emergency Department
- FT CT/MRI/X-Ray Tech (2)

Provider Recruitment:

- We are currently still recruiting for General Surgery and have spoken to two candidates so far.

Employee Turnover:

- Will report for the next quarter (April-June) in July.

High School Program, External Meetings, Trainings:

- Our 3 RCCS students completed our Healthcare Careers program, and we are looking forward to our next class which will be determined after school starts in the Fall.

- I met with a group from the Tribal Health Scholars Program and discussed shadowing opportunities for Native American and Alaska Native students. They have a robust program and are looking for opportunities for high school and beyond students to shadow in the healthcare field. We discussed the different areas that they speak to students about their interests, and we will connect again when they have students that would be interested in shadowing in our District.

Other:

- We completed our most recent Employee Forums on June 18, 2026. We had 127 employees attend across the 5 different sessions that were offered. There were some great questions and some excellent engagement from the staff, and we appreciate everyone's hard work putting this together. We will have another one tentatively near the end of the calendar year.
- The HR department went live with the Performance Management module and the evaluations are going through nicely. I have had to work with UKG on a few glitches along the way, but have made tremendous progress. We also continue to work on the final details of the Leave of Absence module.
- 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
June 24, 2026

- **Health Information Management**
  - Hiring 1 full-time position to replace employee leaving the area.

- **Clinical Informatics**
  - Continuing work to establish the interface between MealSuite and Meditech to support acute care patient meal ordering, advancing workflow efficiency and integration of dietary services with the electronic health record.
  - Ongoing work on the Pain Management program, including development of templates, orders, and patient questionnaires.

- **Rehabilitation**
  - We welcomed Physical Therapy Traveler, Kimberly Harter, DPT on June 15.
  - We continue to recruit for a full time Physical Therapist and Physical Therapy Assistant.

Respectfully submitted,

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

FINANCIAL REPORT - Month ending May 31, 2026

Board of Directors
June 24, 2026

Operations:

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[1] Our Gross Charges coming in at $7.04 million or (8.5% more than budget.) Overall, we are at $74.87 million for the year 5.0% 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 47.65%. This included another $125,000 allowance for our likely 2025-26 Medicare year-end payable bringing the total set-aside for the year to $850,000. Our year-to-date expected collection rate is 49.59% -- slightly off budget at 49.63%.
[3] This led to net patient revenue of $3.35 million (4.2% better than budget) with year-to-date actual of $37.1 million which is 4.9% better than budget.
[4] Other operating revenue ($480,685) continues to run better than budget (25.4%), primarily due to the **[5]** Retail Pharmacy ($406,760, which is 25.2% better than budget.)
[6] Total Operating Revenue of $3.97 million was 7.1% better than budget with year-to-date actual of $43.94 million which is 7.7% better than budget.

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[7] Total Operating Expenses of $4.31 million exceeded budget by 11.5%. A review of expense by category showed slightly upward trend variances across the board as expected with increased volume, total operating expenses is at $44.4 million year-to-date at 4.2% greater than budget. Such as, Provider taxes over budget by 27.7%, Contractor Labor exceeded budget by 77% over budget due to needs in Radiology, Respiratory, and Surgery, Dues and Subscriptions over budget 32.8%, Advertising greater than budget by 176.5% due to cost of mailers sent out to the community.
[8] We had an operating loss of $341,000, (-8.6% operating margin compared to a budgeted loss of $159,000, (-4.3% margin). The year-to-date actual $432,000 loss at -1% operating margin beat year-to-date budget of $1.75 million loss at -4.3% margin.

[9] Total Non-operating revenue of $254,000 beat the budget of $228,000 by $26,000 (11.3% variance.) The year-to-date actual of $3.7 million beat the budget of $2.5 million (47.4% variance).
[10] Net Deficit for the month was $86,584 (-2.2% margin) compared to the budget of $69,000 (1.9% margin). For the year, we have a net Surplus of $3.27 million (7.4% margin) compared to the budget of $760,435 (1.9% margin).
[11] Again, the total margin reflects another $125,000 allowance (reduction) for Medicare bringing the total to $850,000 for the year.

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Balance Sheet:

Assets:

[1] Cash ($10.39 million) is down by $268,541 due to slow collection.
[2] Net Patient Accounts Receivable ($6.79 million) increased by $308,000 due to slow collection.
[3] The expected collection rate increased slightly to 40.95% from 39.79%. due to some ATRIO expected collection decrease and A/R aging buckets.
[4] Total 'Other' Accounts Receivable of $893,189 are up by $27,900.
[5] This amount, $293,000, currently shows as a tax receivable.
[6] We have a total of $20.15 million in Current Assets.
[7] Property, Plant, and Equipment decreased by $12,860 due to retired the old retail pharmacy Point of Sale (POS) system.
[8] Third-party settlements increased $125,000 to $1.36 million. This is the additional $125,000 set aside for our 2025-26 Medicare cost report.
[9] We have assets totaling $23.94 million.

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Balance Sheet:

Liabilities and Fund Balance:

[1] Accounts Payable and [2] Accrued Liabilities from prior month increased by a combined $196,000 to $1.28million.
[3] Accrued Payroll from prior month increased $93,495 or 4% due to paying out two bonuses.
[4] We booked an additional $139,000 to cover our May Provider Tax that will now be due in July. Normally, $350,162 is due in May but the State delayed the payments for a second time.

[5] We have Current Liabilities of $4.67 million which results in a very favorable Current Ratio of 4.3.
[6] Total Debt decreased by $71,000 due to making normal principal payments bringing the new total to $1.21 million.
[7] Liabilities total $5.88 million.
[8] Our Total Fund Balance is $18.06 million, which includes the fiscal year opening balance of $14.79 million and current operating results of $3.27 million.
[9] We have Total Liabilities and Fund Balance combined of $23.94 million.

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Dashboard:

Shows the results of several Key Indicators. Probably the most important indicators of general financial health are [1] Operating Cash at $10.4 million, and [2] Days Cash on Hand at 81 exceeding goal and [3] Current Ratio at 4.3. Almost all are currently green, except for Operating Room Cases, Days in AR, Operating Expenses, and Hospital Gain/Loss. [4] Productivity is 98.2%.

Volumes:

Most volumes came in higher than budget and beat their historical averages for May, such as, ER Visits (483 vs 427), Lab Tests (5647 vs 5208), Radiology (434 vs 422), CT Scans (267 vs163, Speech Therapy (59 vs 41) and Dunes visits (1391 vs 1398).

Respectfully submitted,

Elise Dumo
Chief Financial Officer

LUHD
UNAUDITED OPERATING STATEMENT
Through 11 Periods Ended May 31, 2026

		CURR MO BUDGET	2026 MAY	CM VAR-$	CM VAR-%	2025 MAY	YTD BUDGET	YTD ACTUAL	YTD VAR-$	YTD VAR-%	YTD LY
Revenue											
[1]	**Patient Revenue**										
	Gross Charges	$6,484,698	$7,037,991	$553,293	8.5%	$6,830,857	$71,331,681	$74,866,600	$3,534,919	5.0%	65,791,791
	Deductions	($3,266,117)	($3,684,254)	($418,137)	12.8%	($3,461,489)	($35,927,287)	($37,736,532)	($1,809,245)	5.0%	(32,304,266)
[3]	**Net Patient Revenue**	$3,218,581	$3,353,737	$135,156	4.2%	$3,369,368	$35,404,394	$37,130,068	$1,725,674	4.9%	33,487,525
[2]		49.63%	47.65%			49.33%	49.63%	49.59%			50.90%
	Provider Tax	$108,890	$139,000	$30,110	27.7%	$100,000	$1,197,794	$1,560,388	$362,594	30.3%	1,114,474
	Net After Provider Tax	$3,327,472	$3,492,737	$165,265	5.0%	$3,469,368	$36,602,187	$38,690,456	$2,088,269	5.7%	34,601,999
		51.31%	49.63%			50.79%	51.31%	51.68%			52.59%
	Non-Patient Revenue										
	Misc Revenue	$58,362	$73,925	$15,563	26.7%	$93,970	$641,987	$1,140,855	$498,868	77.7%	698,233
[5]	**Retail Pharmacy**	$325,000	$406,760	$81,760	25.2%	$323,582	$3,575,000	$4,111,573	$536,573	15.0%	3,626,339
	Other Recoveries										
[4]	**Total Non-Patient Revenue**	$383,362	$480,685	$97,323	25.4%	$417,552	$4,216,987	$5,252,428	$1,035,441	24.6%	4,324,572
[6]	**Total Revenue**	$3,710,834	$3,973,422	$262,588	7.1%	$3,886,920	$40,819,174	$43,942,884	$3,123,710	7.7%	38,926,571
Operating Expenses											
	Payroll	$1,584,886	$1,731,917	$147,031	9.3%	$1,593,398	$17,433,751	$17,750,964	$317,213	1.8%	16,506,477
	Supplies	$575,766	$663,465	$87,699	15.2%	$543,585	$6,333,431	$6,641,436	$308,005	4.9%	5,638,443
	Benefits	$553,231	$589,624	$36,393	6.6%	$543,775	$6,085,537	$6,185,593	$100,056	1.6%	5,731,806
	Professional Fees	$397,947	$441,313	$43,366	10.9%	$218,360	$4,377,415	$4,564,729	$187,314	4.3%	4,222,060
	Purchased Services	$233,066	$264,577	$31,511	13.5%	$250,849	$2,563,730	$2,793,644	$229,914	9.0%	2,486,240
	Provider Tax	$108,890	$139,000	$30,110	27.7%	$100,000	$1,197,794	$1,560,388	$362,594	30.3%	1,114,474
	Contract Labor	$100,418	$177,729	$77,312	77.0%	$190,281	$1,104,593	$1,670,665	$566,073	51.2%	1,513,538
	Depreciation	$76,711	$51,348	($25,363)	-33.1%	$71,055	$843,816	$584,501	($259,315)	-30.7%	753,510
	Repairs & Maintenance	$40,548	$53,415	$12,868	31.7%	$56,171	$446,023	$475,529	$29,506	6.6%	467,117
	GASB Depreciation	$39,015	$38,266	($749)	-1.9%	$40,157	$429,162	$410,816	($18,346)	-4.3%	444,686
	Rentals & Leases	$38,757	$40,018	$1,261	3.3%	$34,823	$426,329	$433,620	$7,291	1.7%	374,218
	Insurance	$30,988	$34,449	$3,461	11.2%	$31,354	$340,869	$361,705	$20,836	6.1%	330,242
	Utilities	$28,013	$33,370	$5,358	19.1%	$29,951	$308,138	$335,512	$27,375	8.9%	307,312
	Minor Equipment	$23,161	$11,452	($11,709)	-50.6%	$18,530	$254,770	$228,128	($26,642)	-10.5%	136,520

LUHD
UNAUDITED OPERATING STATEMENT
Through 11 Periods Ended May 31, 2026

		CURR MO BUDGET	2026 MAY	CM VAR-$	CM VAR-%	2025 MAY	YTD BUDGET	YTD ACTUAL	YTD VAR-$	YTD VAR-%	YTD LY
	Dues and Subscriptions	$10,955	$14,552	$3,597	32.8%	$16,495	$120,505	$147,852	$27,347	22.7%	127,249
	Education/Training	$10,338	$5,794	($4,544)	-44.0%	$2,866	$113,713	$78,509	($35,204)	-31.0%	47,784
	GASB Interest Expense	$6,714	$5,767	($947)	-14.1%	$1,498	$73,849	$47,705	($26,144)	-35.4%	43,629
	Advertising	$4,917	$13,594	$8,677	176.5%	$6,780	$54,083	$46,399	($7,684)	-14.2%	55,255
	Travel	$3,292	$2,321	($971)	-29.5%	$3,477	$36,208	$27,603	($8,605)	-23.8%	32,329
	Licenses & Fees	$2,287	$2,003	($284)	-12.4%	$1,752	$25,158	$29,467	$4,309	17.1%	26,058
[7]	Total Operating Expenses	$3,869,897	$4,313,974	$444,077	11.5%	$3,755,157	$42,568,871	$44,374,765	$1,805,894	4.2%	40,358,947
[8]	Income / (Loss) from Operations	($159,063)	($340,552)	($181,489)	114.1%	$131,763	($1,749,697)	($431,881)	$1,317,816	-75.3%	(1,432,376)
	Operating Margin:	-4.3%	-8.6%			3.4%	-4.3%	-1.0%			-3.7%
	Non-Operating Revenue / (Expense)										
	Interest	($1,917)	($1,120)	$797	-41.6%	($1,640)	($21,083)	($14,860)	$6,223	-29.5%	(21,316)
	Sale of Assets	$0	$0	$0	NA	$0	$0	($58,259)	($58,259)	NA	14,257
	Donations	$174	$593	$419	240.4%	$774	$1,916	$100,321	$98,405	5135.8%	2,472
	Grants	$0	$391	$391	NA	$0	$0	$162,223	$162,223	NA	377,737
	Interest Income	$13,000	$37,168	$24,168	185.9%	$14,793	$143,000	$1,123,442	$980,442	685.6%	143,332
	Taxes	$216,936	$216,936	($0)	0.0%	$203,891	$2,386,299	$2,386,297	($2)	0.0%	2,243,394
[9]	Total Non-Op Inc / (Exp)	$228,194	$253,968	$25,774	11.3%	$217,818	$2,510,131	$3,699,164	$1,189,033	47.4%	2,759,876
[10]	Net Surplus / Deficit	$69,130	($86,584)	($155,714)	-225.2%	$349,581	$760,435	$3,267,283	$2,506,848	329.7%	1,327,500
	Total Margin:	1.9%	-2.2%			9.0%	1.9%	7.4%			3.4%
[11]	2025 MEDICARE PAYABLE ADUSTMENTS		$125,000					$850,000			
	2025 MEDICAID PAYABLE ADJUSTMENTS		$0					$0			
	SURPLUS/DEFICIT PRIOR TO ADJUSTMENTS		$38,416					$4,117,283			

LUHD
BALANCE SHEET - ASSETS
Unaudited
May 31, 2026

		2026 APR	2026 MAY	2025 MAY	CHANGE FM Prior Month	CHANGE FM Prior Year
	Assets					
	Current Assets					
	Cash, Unrestricted excl YTD Tax Receipts	$3,490,839	**$3,206,880**	$1,832,793	($283,959)	$1,374,087
	Cash, Unrestricted excl ERTC Receipts	$4,642,008	**$4,642,008**		$0	$4,642,008
	Cash, Unrestricted from Tax Receipts YTD	$2,525,541	**$2,540,959**	$2,444,815	$15,418	$96,144
[1]	**Total Cash, Unrestricted**	$10,658,388	**$10,389,847**	$4,277,608	($268,541)	$6,112,239
	Patient Accounts Receivable	$16,293,901	**$16,585,205**	$12,356,927	$291,304	$4,228,278
	Less Allowance	($9,810,445)	**($9,793,740)**	($7,119,701)	$16,705	($2,674,039)
[2]	**Net Patient Accounts**	$6,483,456	**$6,791,465**	$5,237,226	$308,009	$1,554,239
[3]		39.79%	**40.95%**	42.38%		
	Other A/R					
[4]	**A/R Other**	$865,289	**$893,189**	$629,542	$27,900	$263,647
	Edward Hulton (Net)	$93,645	**$93,645**	$93,645	$0	$0
[5]	**A/R Taxes**	$91,929	**$293,447**	$128,795	$201,518	$164,652
	Total Other A/R	$1,050,863	**$1,280,281**	$851,982	$229,418	$428,299
	Inventory	$660,508	**$684,642**	$632,953	$24,134	$51,689
	Provider Tax	$557,843	**$696,843**	$512,696	$139,000	$184,147
	Prepaid Expenses	$285,277	**$308,924**	$232,463	$23,647	$76,461
	ERTC Receivable	$0	**$0**	$3,304,089	$0	($3,304,089)
[6]	**Total Current Assets**	$19,696,335	**$20,152,002**	$15,049,017	$455,667	$5,102,985
	Fixed and Non-Current Assets					
[7]	**Property, Plant & Equip**	$18,509,476	**$18,496,616**	$18,036,990	($12,860)	$459,626
	Construction in Progress	$40,340	**$51,764**	$0	$11,424	$51,764
	Less Accumulated Depr	($14,882,760)	**($14,920,686)**	($14,304,858)	($37,926)	($615,828)
	GASB assets	$2,114,246	**$2,114,245**	$2,066,696	($1)	$47,549
	Less GASB Accumulated Depr	($1,231,936)	**($1,270,200)**	($1,075,949)	($38,264)	($194,251)
	Net P, P & E	$4,549,366	**$4,471,739**	$4,722,879	($77,627)	($251,140)
	Other Non-Current Assets					
	Restricted Cash	$662,950	**$678,460**	$407,148	$15,510	$271,312
[8]	**Third-Party Settlements**	($1,238,740)	**($1,363,741)**	($1,126,487)	($125,001)	($237,254)
	Total Non-Current Assets	($575,790)	**($685,281)**	($719,339)	($109,491)	$34,058
	Total Fixed and Non-Current Assets	$3,973,576	**$3,786,458**	$4,003,540	($187,118)	($217,082)
[9]	**Total Assets**	$23,669,911	**$23,938,460**	$19,052,557	$268,549	$4,885,903

LUHD
BALANCE SHEET - LIABILTIES AND FUND BALANCE
Unaudited
May 31, 2026

		2026 APR	2026 MAY	2025 MAY	CHANGE FM Prior Month	CHANGE FM Prior Year
	Liabilities & Fund Balance					
	Current Liabilities					
[1]	**Accounts Payable**	*$851,333*	**$829,877**	*$1,070,201*	*($21,456)*	*($240,324)*
[2]	**Accrued Liabilities**	*$229,426*	**$446,919**	*$66,367*	*$217,493*	*$380,552*
	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	*$270,320*	**$268,134**	*$202,357*	*($2,186)*	*$65,777*
[3]	**Accrued Payroll**	*$2,069,333*	**$2,162,828**	*$1,813,114*	*$93,495*	*$349,714*
	Medicare Advance Pmt	*$0*	**$0**	*$0*	*$0*	*$0*
	SBA PPP Loan	*$0*	**$0**	*$0*	*$0*	*$0*
	Deferred Revenue:Misc Small Grants	*$171,518*	**$171,518**	*$38,825*	*$0*	*$132,693*
[4]	**Provider Tax**	*$557,843*	**$696,843**	*$200,000*	*$139,000*	*$496,843*
[5]	**Total Current Liabilities**	*$4,243,418*	**$4,669,764**	*$3,484,509*	*$426,346*	*$1,185,255*
	Long-Term Liabillities					
	Total Commercial Debt	*$513,150*	**$493,003**	*$731,650*	*($20,147)*	*($238,647)*
	Total GASB Debt	*$770,781*	**$719,715**	*$848,119*	*($51,066)*	*($128,404)*
[6]	**Total Debt**	*$1,283,931*	**$1,212,718**	*$1,579,769*	*($71,213)*	*($367,051)*
	Other Liabilities					
	Tail	*$0*	**$0**	*$0*	*$0*	*$0*
[7]	**Total Liabilities**	*$5,527,349*	**$5,882,482**	*$5,064,278*	*$355,133*	*$818,204*
	Fund Balance					
	Fund Balance	*$14,788,692*	**$14,788,692**	*$12,660,777*	*$0*	*$2,127,915*
	Current Operations	*$3,353,870*	**$3,267,286**	*$1,327,502*	*($86,584)*	*$1,939,784*
[8]	**Total Fund Balance**	*$18,142,562*	**$18,055,978**	*$13,988,279*	*($86,584)*	*$4,067,699*
[9]	**Total Liabilities & Fund Balance**	*$23,669,911*	**$23,938,460**	*$19,052,557*	*$268,549*	*$4,885,903*

DASHBOARD LEGEND

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

	FINANCIAL HEALTH INDICATORS	2025-26 BUDGET/TARGET	May-26	Apr-26	Mar-26	Feb-26	Jan-26	Dec-25	Nov-25	Oct-25	Sep-25	Aug-25	Jul-25
	Patient Days	247	244	237	251	242	241	239	224	264	252	215	189
	Average Daily Census	8.0	8	8	8	9	7.8	7.7	7.5	8.5	8.4	6.9	6.1
	Operating Room Cases	55	26	63	40	48	43	34	24	39	39	39	49
	ER Services	427	482	392	417	374	406	428	393	436	429	503	526
	Clinic Visits (Dunes/RMC)	1,482	1,541	1,466	1,397	1,266	1,607	1,307	1,269	1,598	1,510	1,484	1,656
	OP Visits (Excl ED & Clinics)	1,750	1,805	1,969	1,753	1,701	1,741	1,743	1,583	1,528	1,910	1,773	1,558
[1]	Operating Cash	$5,461,629	$10,389,847	$10,658,388	$5,914,207	$6,155,261	$6,675,324	$6,337,421	$4,956,909	$5,260,486	$4,542,955	$4,703,737	$4,715,006
[2]	Operating Cash Days	45	81	83	47	49	55	51	40	43	37	38	39
	Days in AR	55	73	71	70	66	65	62	59	59	58	58	55
[3]	Current Ratio	3.9	4.3	4.6	4.6	4.9	4.5	4.6	4.3	4.7	4.4	4.7	4.8
	Net Patient Revenue	$3,218,581	$3,353,737	$3,375,094	$3,230,814	$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	$4,313,974	$4,142,836	$4,019,881	$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	($340,552)	$1,048,300	$64,721	$101,273	$430,905	$214,009	$85,564	$872,439	($32,473)	$180,041	$389,092
[4]	Productivity	100.0%	95.4%	97.6%	97.3%	97.7%	97.3%	100.3%	98.1%	96.6%	97.8%	101.5%	100.6%

ADMINISTRATOR REPORT

Board of Directors
June 24, 2026

Atrio: Last month, I reported that Atrio had committed to begin paying our backlog of claims in early June and to be current by June 17. Atrio paid just over $650,000 on June 4, representing slightly less than half of the net A/R on our books as of May 31, and made an additional $50,000 payment on June 16. Although Atrio is not yet fully current, it has made significant progress. On June 8th, the state revised its 60-day supervision order, noting that Atrio had "taken steps to significantly improve [its] policyholders' surplus and is no longer in a hazardous financial condition on that basis." (My emphasis.) The state also noted that "certain conditions giving rise to the supervision, as described in the order, still exist." As a result, the order of supervision has been extended for an additional 60 days, or less, if the director determines that Atrio has no unpaid claims more than 60 days old.

General Surgeon Recruitment: We continue to interview candidates for our soon-to-be open position. Unfortunately, we have not come to an agreement with any surgeon yet, but the search continues.

School Resource Officer: The city has hired a new school resource officer thus the vacancy was very short-lived. The city is swapping cars to where the resource officer will be driving the city's black dodge. The city will be adding the school district's and the hospital's logos to the paint scheme of the car recognizing our joint support of the program.

Other: This will be my 156th and last regular meeting report to the board. I thoroughly enjoyed my entire tenure at Lower Umpqua Hospital District (now spanning over 15 years total). I am very appreciative of your trust in me, naming me the CEO just over four years ago. It has been the highlight of my career, and I will miss all of you and all the staff very much. This is a great hospital in a great community, and it was great to feel so much support.

Respectfully submitted,

John Chivers
Chief Executive Officer

NEW BUSINESS

- POLICY: ADMB_1010 Ongoing Professional Practice Evaluation
- BUDGET COMMITTEE REAPPOINTMENTS

LOWER UMPQUA HOSPITAL DISTRICT

BOARD ACTION REQUEST

BOARD MEETING DATE:

June 24, 2026

AGENDA ITEM SUBJECT:

Revision to the Policy ADMB_1010 Ongoing Professional Practice Evaluation forms: Surgery, Emergency Medicine, General, Hospitalists.

BACKGROUND:

On January 28, 2026, the Board last approved policy revisions recommended by Medical Staff. Since then, changes to the evaluation forms have been identified that will better suit our needs and ability to pull quality metric information. On June 19, 2026 the Medical Staff approved these changes and now recommends the Board approve.

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 the revisions to the Policy ADMB_1010 Ongoing Professional Practice Evaluation forms as presented.

Lower Umpqua Hospital District

ONGOING PROFESSIONAL PRACTICE EVALUATION

Practitioner:	
Dept: **Surgery**	Privilege Date:
Time Period:	Review Date:

INTERNAL QUALITY REVIEW

Practitioner Performance

SR.1d(1) Utilization data	**Provider Avg.**	**Target**	**Discrepancies Reported**
# Inpatient stays over 96 hours			
Same Day Surgery returns to ED within 7 days			
# Hospital Observation Patients longer than 24 hours			
SR.1d(2) Timely & Legible Completion of Patient Medical Records	**Provider Avg.**	**Target**	**Discrepancies Reported**
Medical Record Deficiencies (average days to chart completion)			
SR.1d(3) Prescribing of Medications: Prescribing Patterns, Trends, Errors and Appropriateness of Prescribing	**Provider Avg.**	**Target**	**Discrepancies Reported**
e-Prescribing Rate			
Total Antimicrobial Utilization Days of Therapy per 1,000 patient days			
SR.1d(10) Specific department indicators that have been defined by the medical staff	**Provider Avg.**	**Target**	**Discrepancies Reported**
Routine Peer Review			
For-Cause Peer Review			
Catheter Associated Urinary Tract infections (CAUTI)			
Central Line Associated Blood Stream Infections (CLABSI)			
SR.1d(5) Readmissions	**Provider Avg.**	**Target**	**Discrepancies Reported**
# 30 Day All-Cause Readmissions as the Discharge Provider			
SR.1d(6) Appropriateness of Care for non-invasive procedures/interventions	**Provider Avg.**	**Target**	**Discrepancies Reported**
Focused Assessment with Sonography in Trauma (FAST) Exam			
SR.1d(7) Surgical Case Review	**Provider Avg.**	**Target**	**Discrepancies Reported**
Post-surgical infection rates			
Surgical complications			
SR.1d(8) Anesthesia and Moderate Sedation Adverse Events	**Provider Avg.**	**Target**	**Discrepancies Reported**
# of Anesthesia Adverse Events			
SR.1d(4) Blood Products Usage	**Provider Avg.**	**Target**	**Discrepancies Reported**
Blood Units Transfused			
SR.1d(11) Significant deviations from nationally recognized standards of practice	**Provider Avg.**	**Target**	**Discrepancies Reported**
~~Venous Thromboembolism (VTE) Prophylaxis~~			
~~Discharged on Antithrombotic Therapy~~			
~~Intensive Care Unit VTE Prophylaxis~~			
~~Safe Use of Opioids-Concurrent Prescribing~~			
3 hour Sepsis Bundle Met			

SR.1d(12) Any variant that shall be analyzed for statistical significance	
Oregon Medical Board /Oregon Medical Foundation Inquiries:	
Documented Patient / Family Complaints / Grievances:	
Compliance Complaints:	
Root Cause Analysis and Events Reported:	
SR.1d (9) Mortalities Sent to Review	**Number Reviewed:**
Mortality Review Findings:	

	SUMMARY OF FINDINGS
☐	Variances Noted:
☐	No Variances Noted
☐	Trends Noted for this Physician:
☐	No Trends Noted for this Physician
☐	Other:

	SPECIAL PRIVILEGES
☐	Additional Privileges:
☐	Procedural Sedation

Period 1	Period 2	REQUIRED EDUCATION AND TRAINING
☐	☐	Annual Bloodborne Pathogens (1 per year)
☐	☐	HIPAA Training (1 per year)
☐	☐	Restraint and Seclusion (1 per year)

Name of Reviewer:	
Signature of Reviewer:	Date:

Lower Umpqua Hospital District

ONGOING PROFESSIONAL PRACTICE EVALUATION

Practitioner:			
Dept: **Emergency Medicine**			Privilege Date:
Time Period:	Review Date:		
INTERNAL QUALITY REVIEW			
Practitioner Performance			
SR.1d(1) Utilization data	**Provider Avg.**	**Target**	**Discrepancies Reported**
# Patient Visits			
Average Length of Stay (ED)			
SR.1d(2) Timely & Legible Completion of Patient Medical Records	**Provider Avg.**	**Target**	**Discrepancies Reported**
Medical Record Deficiencies (average days to chart completion)			
SR.1d(3) Prescribing of Medications: Prescribing Patterns, Trends, Errors and Appropriateness of Prescribing	**Provider Avg.**	**Target**	**Discrepancies Reported**
e-Prescribing Rate			
Avoidance of Opiates for Low Back Pain or Migraines			
Total Antimicrobial Utilization Days of Therapy per 1,000 patient days			
SR.1d(10) Specific department indicators that have been defined by the medical staff	**Provider Avg.**	**Target**	**Discrepancies Reported**
Central Line-Associated Bloodstream Infection (CLABSI)			
For-Cause Peer Review			
Routine Peer Review			
SR.1d(5) Readmissions	**Provider Avg.**	**Target**	**Discrepancies Reported**
# Return to ED within 72 hours			
SR.1d(4) Blood Products Usage	**Provider Avg.**	**Target**	**Discrepancies Reported**
Blood Units Transfused			
SR.1d(6) Appropriateness of care for non-invasive procedures/interventions	**Provider Avg.**	**Target**	**Discrepancies Reported**
Focused Assessment with Sonography in Trauma (FAST) Exams			
SR.1d(11) Significant deviations from nationally recognized standards of practice	**Provider Avg.**	**Target**	**Discrepancies Reported**
~~Avoidance of Admission for Adult Patients with Low-Risk Chest Pain~~			
~~Avoidance of Admission for Adult Patients with Low-Risk DVT~~			
3 hour Sepsis Bundle Met			
Order Source Reports			
SR.1d(12) Any variant that shall be analyzed for statistical significance			
Oregon Medical Board /Oregon Medical Foundation Inquiries:			
Documented Patient / Family Complaints / Grievances:			
Compliance Complaints:			
Root Cause Analysis and Events Reported:			
SR.1d(9) Mortalities Sent to Review	**Number Reviewed:**		
Mortality Review Findings:			

SUMMARY OF FINDINGS	
☐	Variances Noted:
☐	No Variances Noted
☐	Trends Noted for this Physician:
☐	No Trends Noted for this Physician
☐	Other:

SPECIAL PRIVILEGES	
☐	Additional Privileges:
☐	Procedural Sedation

Period 1	Period 2	REQUIRED EDUCATION AND TRAINING
☐	☐	Annual Bloodborne Pathogens (1 per year)
☐	☐	HIPAA Training (1 per year)
☐	☐	Restraint and Seclusion (1 per year)

Name of Reviewer:	
Signature of Reviewer:	Date:

Lower Umpqua Hospital District

ONGOING PROFESSIONAL PRACTICE EVALUATION

Practitioner:	
Dept: **General**	Privilege Date:
Time Period:	Review Date:

INTERNAL QUALITY REVIEW

Practitioner Performance

SR.1d(1) Utilization data	**Provider Avg.**	**Target**	**Discrepancies Reported**
# Patient Cases			
Average Length of Stay			
SR.1d(2) Timely & Legible Completion of Patient Medical Records	**Provider Avg.**	**Target**	**Discrepancies Reported**
Medical Record Deficiencies (average days to chart completion)			
SR.1d(3) Prescribing of Medications: Prescribing Patterns, Trends, Errors and Appropriateness of Prescribing	**Provider Avg.**	**Target**	**Discrepancies Reported**
e-Prescribing Rate			
Total Antimicrobial Utilization Days of Therapy per 1,000 patient days			
Controlled Drug Discrepancies			
SR.1d(10) Specific department indicators that have been defined by the medical staff	**Provider Avg.**	**Target**	**Discrepancies Reported**
Routine Peer Review			
For-Cause Peer Review			
Catheter Associated Urinary Tract infections (CAUTI)			
Central Line Associated Blood Stream Infections (CLABSI)			
SR.1d(5) Readmissions	**Provider Avg.**	**Target**	**Discrepancies Reported**
# 30 Day All-Cause Readmissions as the Discharge Provider			
SR.1d(6) Appropriateness of Care for non-invasive procedures/interventions	**Provider Avg.**	**Target**	**Discrepancies Reported**
Focused Assessment with Sonography in Trauma (FAST) Exam			
SR.1d(7) Surgical Case Review	**Provider Avg.**	**Target**	**Discrepancies Reported**
Post-surgical infection rates			
Surgical complications			
SR.1d(8) Anesthesia and Moderate Sedation Adverse Events	**Provider Avg.**	**Target**	**Discrepancies Reported**
# of Anesthesia Adverse Events			
SR.1d(4) Blood Products Usage	**Provider Avg.**	**Target**	**Discrepancies Reported**
Blood Units Transfused			
SR.1d(11) Significant deviations from nationally recognized standards of practice	**Provider Avg.**	**Target**	**Discrepancies Reported**
~~Venous Thromboembolism (VTE) Prophylaxis~~			
~~Discharged on Antithrombotic Therapy~~			
~~Intensive Care Unit VTE Prophylaxis~~			
3 hour Sepsis Bundle Met			
SR.1d(12) Any variant that shall be analyzed for statistical significance			
Oregon Medical Board /Oregon Medical Foundation Inquiries:			
Documented Patient / Family Complaints / Grievances:			
Compliance Complaints:			
Root Cause Analysis and Events Reported:			

SR.1d (9) Mortalities Sent to Review	Number Reviewed:
Mortality Review Findings:	

	SUMMARY OF FINDINGS
☐	Variances Noted:
☐	No Variances Noted
☐	Trends Noted for this Physician:
☐	No Trends Noted for this Physician
☐	Other:

	SPECIAL PRIVILEGES
☐	Additional Privileges:
☐	Procedural Sedation

Period 1	Period 2	REQUIRED EDUCATION AND TRAINING
☐	☐	Annual Bloodborne Pathogens (1 per year)
☐	☐	HIPAA Training (1 per year)
☐	☐	Restraint and Seclusion (1 per year)

Name of Reviewer:	
Signature of Reviewer:	Date:

Lower Umpqua Hospital District

ONGOING PROFESSIONAL PRACTICE EVALUATION

Practitioner:			
Dept: **Hospitalists**			Privilege Date:
Time Period:		Review Date:	

INTERNAL QUALITY REVIEW

Practitioner Performance

SR.1d(1) Utilization data	**Provider Avg.**	**Target**	**Discrepancies Reported**
# Hospital Inpatients			
# Hospital Swing Bed Patient			
# Hospital Observation Patients			
# Inpatient stays over 96 hours as the Discharge Provider			
# Observation Patient stays over 24 hours as the Discharge Provider			
SR.1d(2) Timely & Legible Completion of Patient Medical Records	**Provider Avg.**	**Target**	**Discrepancies Reported**
Medical Record Deficiencies (average days to chart completion)			
SR.1d(3) Prescribing of Medications: Prescribing Patterns, Trends, Errors and Appropriateness of Prescribing	**Provider Avg.**	**Target**	**Discrepancies Reported**
e-Prescribing Rate			
Total Antimicrobial Utilization Days of Therapy per 1,000 patient days			
SR.1d(10) Specific department indicators that have been defined by the medical staff	**Provider Avg.**	**Target**	**Discrepancies Reported**
Routine Peer Review			
For-Cause Peer Review			
Central Line-Associated Bloodstream Infection (CLABSI)			
Catheter Associated Urinary Tract Infection (CAUTI)			
SR.1d(5) Readmissions	**Provider Avg.**	**Target**	**Discrepancies Reported**
# 30 Day All-Cause Readmissions as the Discharge Provider			
SR.1d(4) Blood Products Usage	**Provider Avg.**	**Target**	**Discrepancies Reported**
Blood Units Transfused			
SR.1d(6) Appropriateness of care for non-invasive procedures/interventions	**Provider Avg.**	**Target**	**Discrepancies Reported**
Focused Assessment with Sonography in Trauma (FAST) Exam			
SR.1d(11) Significant deviations from nationally recognized standards of practice	**Provider Avg.**	**Target**	**Discrepancies Reported**
~~Discharged on Antithrombotic Therapy~~			
~~Venous Thromboembolism (VTE) Prophylaxis~~			
~~Intensive Care Unit VTE Prophylaxis~~			
~~Safe Use of Opioids~~			
3 hour Sepsis Bundle Met			
Order Source Reports			
SR.1d(12) Any variant that shall be analyzed for statistical significance			
Oregon Medical Board /Oregon Medical Foundation Inquiries:			
Documented Patient / Family Complaints / Grievances:			
Compliance Complaints:			
Root Cause Analysis and Events Reported:			

SR.1d(9) Mortalities Sent to Review	Number Reviewed:
Mortality Review Findings:	

	SUMMARY OF FINDINGS
☐	Variances Noted:
☐	No Variances Noted
☐	Trends Noted for this Physician:
☐	No Trends Noted for this Physician
☐	Other:

	SPECIAL PRIVILEGES
☐	Additional Privileges:
☐	Procedural Sedation

Period 1	Period 2	REQUIRED EDUCATION AND TRAINING
☐	☐	Annual Bloodborne Pathogens (1 per year)
☐	☐	HIPAA Training (1 per year)
☐	☐	Restraint and Seclusion (1 per year)

Name of Reviewer:	
Signature of Reviewer:	Date:

LOWER UMPQUA HOSPITAL DISTRICT

BOARD ACTION REQUEST

BOARD MEETING DATE:

June 24, 2026

AGENDA ITEM SUBJECT:

Budget committee member reappointments

BACKGROUND:

- The LUHD Budget Committee three-year term expires on June 30, 2026, for these three members: Jenee Anderson, Michelle Fraley, and Steve Lund.
- Steve Lund has declined to be reappointed to another term.
- Jenee Andeson and Michelle Fraley both wish to be reappointed to another three-year term expiring June 30, 2029.

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: Approve in two motions

1. Move to approve the reappointment of Jenee Anderson to the LUHD Budget Committee with a term expiring June 30, 2029.

2. Move to approve the reappointment of Michelle Fraley to the LUHD Budget Committee with a term expiring June 30, 2029.

CLOSE BUDGET HEARING

APPROVE RESOLUTION 26-03
26-03

LOWER UMPQUA HOSPITAL DISTRICT

BOARD ACTION REQUEST

BOARD MEETING DATE:
June 24, 2026

AGENDA ITEM SUBJECT:
Resolution 26-03

BACKGROUND:
On May 12, 2026, the Budget Committee approved the 2026-2027 fiscal year budget ending June 30, 2027.

FISCAL IMPACT:
Adopt the fiscal year 2026-2027 budget.

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 as presented Resolution 26-03 adopting the fiscal year budget ending June 30, 2027, including a total Budget of $67,159,312, total Appropriations of $51,545,731, Imposing and Categorizing a permanent rate tax at the rate of $3.9729 per $1000 total assessed value.

LOWER UMPQUA HOSPITAL DISTRICT
RESOLUTION 26-03

RESOLUTION ADOPTING THE BUDGET

BE IT RESOLVED that the Board of Directors of the Lower Umpqua Hospital District hereby adopts the budget for fiscal year 2026 - 2027 in the total amount of $67,159,312. This budget is now on file at Lower Umpqua Hospital District 600 Ranch Road, Reedsport, Oregon.

RESOLUTION MAKING APPROPRIATIONS

BE IT RESOLVED that the Board of Directors of the Lower Umpqua Hospital District, Douglas County, Oregon, hereby appropriates amounts within the General Fund of Lower Umpqua Hospital District for the fiscal year 2026 – 2027 as follows:

GENERAL FUND:

District:	$ 51,300,103 (includes personnel services, materials & services, and capital outlay)
Total Debt Service:	$ 245,628
Total:	$ 51,545,731

*Note that the total budget includes an unappropriated ending fund balance of $ 15,613,581 for a total budget of $67,159,312.

RESOLUTION IMPOSING THE TAX

BE IT RESOLVED that the Board of Directors of the Lower Umpqua Hospital District, Douglas County, Oregon does hereby impose the following ad valorem property tax for the tax year 2026-2027 upon the assessed value of all taxable property within the District:

1) At the rate of $3.9729 per $1,000 of assessed value for permanent rate tax;

RESOLUTION CATEGORIZING THE TAX

BE IT RESOLVED that the Board of Directors of the Lower Umpqua Hospital District, Douglas County, Oregon does hereby categorize the taxes imposed for purposes of Article XI section 11b as:

General Government Limitation
Permanent Rate Tax: $3.9729 per $1,000

Excluded from Limitation
-$0-

Signatures on next page

LOWER UMPQUA HOSPITAL DISTRICT
RESOLUTION 26-03

The above resolution statements were approved and declared adopted by the Board of Directors of the Lower Umpqua Hospital District on this 24th day of JUNE 2026 by the following vote:

AYES NAYS

_____
Ron Kreskey, Chair

ATTEST:

_____
Brenda Fraley, Secretary