CLATSOP CARE HEALTH DISTRICT BOARD OF DIRECTOR'S MEETING

March 8th, 2022 Regular Meeting Minutes

I. CALL TO ORDER

Linda Crandell called the meeting to order at Clatsop Retirement Village 5:00PM.

A. Roll Call: present = P excused = E absent = A

Board Members		Management	
Linda Crandell	Р	Mark Remley Aidan Health Services	P
Mike Aho	Р	Kimberly Sornson Aidan Health Services	E
Paul Radu	Р	Clarissa Barrick Administrator CCHR	Р
Mary Nauha	А	Lauren Beard Administrator CRV	P
Melissa Watson	Р	Hannah Olson Administrator CCMC	Р
Chuck Meyer	Р	Debi Martin IHC Director	Р
Megan Lampson	Р	Michael Martin Marketing Director	Р
		Mike Kerwin CTO	Р
		Other staff	
		Melissa Schacher	
		Leslie Cairns	
4.4		Shane Watson	
		Members of the public	
		Juanita Price	

II. CONSENT AGENDA

A. Agenda approval.

Linda Crandell requested that three levy fund requests be added to the action item B.

Chuck Meyer made a motion to approve as amended, Megan Lampson seconded. All said aye.

B. Approval of regular meeting minutes. Mike Aho made a motion to approve, Megan Lampson seconded. All said aye.

III. PUBLIC COMMENT This is an opportunity for anyone to give a 3-minute presentation about any item on the agenda OR any topic of board concern that is not on the agenda.

There were no public comments.

IV. ADMINISTRATION REPORTS

 Clarissa Barrick provided an update on Clatsop Care Health and Rehabilitation. Please see her report for details.

Clarissa Barrick commented. Clatsop Community College has postponed their CNA class to July. Considering this news, we've decided to contract with a company who can provide the didactic portion online, this is similar to what we've done in the past. We have recently onboarded a wonderful on-call nurse who is very interested in teaching the clinical portion of the course. Our goal is to start a CNA training class in April. Efforts to recruit both CNA and Nurses is ongoing.

Mike Aho asked. Should a retention bonus be offered as incentive to hire staff and encourage them remain with the health district as an employee?

Mark Remley suggested that this topic be reviewed and discussed as we are going through the budget process.

Melissa Watson asked. Should we look at paying students some wages while they are taking the class?

Clarissa Barrick noted. For the in-house training that occurred in February 2020, wages were paid to students while they were in training. Out of ten people that participated in that class three are still working for the district. Paying a wage is something to look at for the class in April.

Megan Lampson asked. Regarding skilled residents. Does every skilled resident that is discharged receive the option to share feedback?

Clarissa Barrick stated. They receive a letter that asked them about their experience. Five people receive a follow up call survey as well. https://pinnacleqi.com/customer-satisfaction
Clarissa noted that a follow up letter requesting feedback with a postmarked return envelope might be useful to help improve the review process.

B. Lauren Beard provided an update on Clatsop Retirement Village. Please see her report for details.

Lauren Beard commented. There were some issues in a resident room with water leaking behind the toilet. The newly hired maintenance director attempted to fix it and the pipe broke. The water was shut off and P&L Johnson came out to fix it. There was no sheetrock damage. A facility nurse is still being sought for employment. There are currently fifteen empty rooms at CRV. An effort is being made to make one of the common area kitchenettes fully functional again for residents to use.

C. Hannah Olson provided an update on Clatsop Care Memory Community. Please see her report for details.

Hannah Olson commented. Census is at twenty-six and will rise to twenty-eight by the end of March. More staff will need to be hired to bring the census up to a full thirty-two residents.

D. Debi Martin provided an update on In home care. Please see her report for details.

Mike Aho asked. Do you still have a waiting list of clients?

Debi Martin stated. We no longer have a waiting list.

E. Michael Martin provided an update for marketing. Please see his report for details.

Linda Crandell asked. How do people \ customers, find out about the district's services?

Mike Martin shared an overview of the many areas that marketing is occurring for the health district, including radio ads, print, web, email, geo fencing. Each facility has multiple messages that promote the services and options available.

Linda Crandell asked. Have we gotten a good response from that?

Mike Martin commented. This aspect of marketing has just begun, but it is bringing positive results. The focus continues to be on hiring staff. This will allow the district to continue to give excellent care for current residents and begin to increase overall census.

Mike Aho commented. I performed an online search, "assisted living near me". The top results were from paid search ads by for profit facilities. Mike asked Mark Remley. Do any of the facilities that Aidan manages use those paid ad services such as the website (A Place for Mom)?

Mark Remley stated that very few use that type of ad service.

Melissa Watson asked. What about the Google reviews? Do you monitor and respond to those?

Mike Martin commented. For Google reviews the average is 4.7 4.8 out of 5. An effort is being made to encourage more people to give feedback both upon admission and upon discharging regarding their experience with the health district.

F. Mark Remley provided an update on Clatsop Care Health District. Please see his report for details.

Mark Remley commented. I am still working on getting the bank signature cards done and will send out an email when that is completed. Budgeting will begin in earnest in the next few weeks. There is likely going to be a Medicaid cost-of-living increase of 10% for the CBC communities and In Home Care beginning July 1st. There are no details for the nursing home rate rebasing yet. Mark has been communicating with Larry Bensel about property to build a new facility. The property is zoned industrial and would require changing that zoning. Mark will follow up with more information at a future meeting. Mark introduced Leslie Cairns, new Finance Director for the health district.

Mike Aho asked. Where are we at with phase four of the Provider Relief Funds? For the reimbursement regarding the siding at CRV. Are they still dragging their feet about this?

Mark Remley replied. Phase four funds have not been received yet.

https://www.hrsa.gov/provider-relief/future-payments

On the CRV siding, there was a request for additional financial information as the facilities financial performance dropped during COVID. Once the additional information is sent, we should be in a good place to receive that final installment.

Linda Crandell requested that Mark Remley talk about the medical director at the skilled nursing facility.

Mark Remley commented. The current medical director Dr. Thomas Duncan is retiring at the end of this year. An ongoing effort is being made to hire a Physician to fulfill this role before year end.

G. Mark Remley Financial report. Please see his report for details.

Mark Remley shared details. There was an overall revenue dip. When the last two years of covid-19 challenges are considered overall the district in heading towards positive territory. There are a couple of local daycare facilities that are closing. This could open the opportunity to hire some of those employees as In Home Care and caregiving staff.

Chuck Meyer asked. Has the district ever considered opening their own daycare facility?

Debi Martin commented. In the past, Anita Schacher, who was previously the administrator and CEO for the health district attempted to set up a daycare service at the facility for staff members children. There were difficulties regarding liability insurance, certification, and licensing for this, so that never came to fruition.

One possible option would be to lease some facility space at little or no cost to someone who wants to provide daycare services.

Linda Crandell asked Mark Remley. Have you heard anything back about qualifying for the Employee Retention Credit?

Mark Remley replied. I've not heard anything back yet regarding this. Mark has an information request out to Moss Adams. Ultimately, we need to have Moss Adams agreeing that we do indeed qualify for this program.

Mark Remley, Mike Aho and Melissa Watson met with Alliance Insurance Group https://www.relinsgroup.com/our-services regarding the benefits provided for district staff. The current insurance is heavily utilized. There is going to be a significant increase in health insurance premiums. A topic that was discussed is setting up a different type of insurance program and this will be discussed further at the April 5th board meeting.

How Level-Funded Plans Work

With a level-funded insurance plan, an employer pays a health carrier the same monthly amount to cover the estimated cost for expected claims, the premium for stop-loss insurance that covers health care costs over a set dollar amount, and plan administration costs. If total claims costs are higher or lower than expected, the carrier makes adjustments at the end of the plan year in the form of a refund to the employer for lower claims or a premium increase on the stop-loss insurance renewal for higher claims.

Stop-loss coverage is an essential part of this arrangement because it limits an employer's financial responsibility for claims over a certain amount, either on a per-employee basis or for the entire covered population.

Mike Aho commented. The anticipated rate increase is significant \$180,000.00 additional expense to the district. Out of nine insurance carriers contacted, only two replied offering plans. Something different needs to be done regarding benefits to make this sustainable.

V. BOARD OF DIRECTORS - ACTION ITEMS

A. Surplus cash distribution.

Mark Remley drew attention to the cash snapshot document and the line Retirement Village Property LLC \$369.331.00. This balance goes up by \$4,000 per month. The reason for this is because you have a spread on your lease from your property company and your operating company. This is money that is separate from the replacement reserve. Excess funds available is \$291,684.00 that can be utilized for any purpose.

Mike Aho asked. Is that account earning any money?

Mark Remley stated. No its not making any money so pulling the excess funds out and using it is better than just having it sit there.

After some discussion it was decided to go ahead and pull this surplus cash out so these funds can easily be utilized at a future date for things such as fixing the plumbing issues at CRV or an interior refresh at CRV. Funds will also be needed for building a new skilled nursing facility.

Megan Lampson made a motion to move this surplus cash out so it can be used. Chuck Meyer seconded.

Mike Aho voted yes, Melissa Watson voted yes, Paul Radu voted yes, Megan Lampson voted yes, Chuck Meyer voted yes, Linda Crandell voted yes. Motion carries.

Megan Lampson made a motion to use these funds to pay off the loan \ note on the memory care, balance is \$93,053.00. Paul Radu seconded.

Mike Aho voted yes, Melissa Watson voted yes, Paul Radu voted yes, Megan Lampson voted yes, Chuck Meyer voted yes, Linda Crandell voted yes. Motion carries.

Paying this note will also clear the lien off the care center property.

B. Levy fund requests.

There are three levy fund requests to be discussed. The memory care has two. The care center has one.

CCMC. Add radiant heaters and thermostats to 17 resident bathrooms. Currently there is not a heat source in the bathrooms. Justification: Showers have always been difficult with Alzheimer's and Dementia. With the bathrooms being cold it becomes almost impossible some days. Currently staff run hot water in the rooms till the bathroom warms up then they assist the resident in showering. Quote Inland Electric; \$30,175.00

Mike Aho asked. Do we have electrical capacity for this with the current panels?

Mark Remley stated there are three things to follow up on.

- 1. Is there enough capacity on the current breakers?
- 2. Will those be tied into to generator power?
- 3. Has the landlord Steve Olstedt been notified and is he OK with us proceeding?

Because there are a lot of unanswered questions about what the quote covers, exclusions in the quote, and the unknown electrical capacity of the panel. It was decided to table this levy fund request until the next board meeting in April when more information will be available. Mark Remley will follow up to provide this information at the next board meeting.

CCMC. Add door magnets to the activity area doors so they can be propped open for resident access. Justification: When there is no one in the activity room the doors are to remain closed. Residents are unable to either open the door on the outside or inside. This would ease access for them to come and go as they please and meet Fire Code. This quote is only for the Activity room doors. The Maintenance Director Larry O'Donnell will be performing a lot of the labor so that cost would go down and if possible, magnets will be added to the dining room doors at the opposite end of the building. Quote Performance Systems; \$8,000.00

Mike Aho made a motion to approve, Paul Radu seconded.

Mike Aho voted yes, Melissa Watson voted yes, Paul Radu voted yes, Megan Lampson voted yes, Chuck Meyer voted yes, Linda Crandell voted yes. Motion carries.

CCHR. Replace the current wired Dukane system that is failing, parts are no longer available. Justification: A nurse call light system is essential to the function of a nursing home. Our

proposed method for solving this issue will ensure we're able to have a functioning nurse call light system while at the current building, without overspending on a totally new system that we would not be able to transfer to a new building. We are proposing to replace the call light system only in resident areas to be as cost effective as possible while solving the issue. This will include the 3rd and 4th floor, and a limited number of spaces on the 2nd floor used by residents. We will be utilizing the current electrical system to replace the nurse call light system. This is more cost-effective than replacing the system with a wireless call light system, which would require additional costly infrastructure. The new call light system will function very similarly to the old system and will require little to no training for the staff to operate it. Quote Omni Wire; \$22,197.00

Mike Kerwin commented. This topic has been discussed for many years. Bids from the past range from a high of \$149,000 down to a low of \$22,197.00. Since it is planned to build a new facility in the future, it is best to just replace the Dukane with a simple solid system that performs the same as what is currently in place. Omni Wire has completed several projects for the health district, the company has knowledgeable staff and is reliable. Warranty on parts is five years, labor is one year. Much of the cost saving is because Omni Wire will use the existing wiring which is at a substantial savings compared to the other bids. If anything happens to the current Dukane system, parts are not available anymore so it would be an urgent emergency if it fails.

Mike Aho made a motion to approve this levy request, Chuck Meyer seconded.

Mike Aho voted yes, Melissa Watson voted yes, Paul Radu voted yes, Megan Lampson voted yes, Chuck Meyer voted yes, Linda Crandell voted yes. Motion carries.

VI. GENERAL DISCUSSION

A. QAPI-Megan Lampson

Megan Lampson commented. The QAPI meeting went well. There was more discussion about the admissions process and how to improve \ streamline that. Another focus area is responding to problems that have been identified. Angel rounds have been implemented for residents to have an assigned staff member as an advocate to check in with residents each week then follow up on any problems or concerns. The care center now has a four-star rating.

https://www.medicare.gov/care-compare/details/nursing-home/385144?id=ea95d1e8-9400-4a65-aa7a-36ad193e897a&city=Astoria&state=OR&zipcode=97103

B. Auxiliary-Chuck Meyer

Chuck Meyer commented. I spoke with my wife Sarah who is the only remaining member of the foundation. The Clatsop Care Health District Foundation was set up for special projects outside the normal revenue of the health district. In the past the foundation financed two employees to

receive higher education \ training, otherwise it has been relatively inactive. The foundation bank account is being charged \$10.00 per month. In addition, there are fees of \$75.00 per year for incorporation fees. Chuck feels that if funds were available for the foundation to utilize, then it could oversee things like supporting staff who want to pursue higher education or projects that directly benefit the residents.

"Clatsop Cares Foundation is organized exclusively for the purpose of cultivating philanthropic support to advance the mission and vision of Clatsop Care Center Health District. The Foundation's activities are directed toward developing a program of financial support for the Health District through the solicitation of individual and corporate donations and grants. Funds will be used to support the Health District's existing programs and services, special projects, capital improvements, and operations."

Mark Remley commented. Funds for the foundation could be made available if the foundation utilizes the memorial fund. This account has \$92,000.00 in it. Since the foundation is registered as a 501c3. https://www.irs.gov/charities-non-profits/charitable-organizations/exemption-requirements-501c3-organizations Grants and other funding could be pursued for additional revenue.

Mike Aho commented. He and his wife participated in Columbia Memorial Hospitals foundation. He noted that it took a lot of work and commitment and to really have an effect, you almost need a paid staff member to manage it.

https://www.columbiamemorial.org/giving/cmh-foundation/ Mike recommends that the fees being charged for that account be addressed.

Juanita Price commented. The foundation can be left in place and allow it access to the memorial fund for operations. Then seek out someone to administer, oversee the foundation in the future.

After further discussion it was recommended that this conversation about the CCHD Foundation be further addressed at the June 7th board meeting.

VII. BOARD NOTATIONS CLOSING COMMENTS

Mike Aho's father passed away after many years of care received by the health district. He thanked everyone for that care that went above and beyond.

Melissa Watson thanked Paul Radu and Mike Aho for drawing attention to the levy request for heaters in the bathrooms at the memory care. Many details still need to be worked out and their drawing attention to this before approving it is appreciated.

Linda Crandell expressed appreciation for being able to meet in person for the board meeting. The covid-19 state of emergency is supposed to be over at the end of March. Does this mean we are going to have our party?

Mark Remley will investigate setting up a party to celebrate success despite so many challenges these past two years.

VIII. FUTURE MEETING DATES

- A. Next board meeting. 4/5/22
- B. Budget work session. 4/12/22
- C. May board meeting 5/3/22
- D. June board meeting. Budget adoption and appropriations.

IX. ADJOURNMENT

Megan Lampson made a motion to adjourn. The meeting was adjourned at 6:25 PM.

Signature

Date

4.8.22

Minutes recorded by Mike Kerwin CTO

Memo to: Mark Remley, CEO

from: Clarissa Barrick, Administrator

Date: 3/29/22

Re: February Board Report Narrative

In the month of February, we had an average daily census of 24.75, with an average skilled census of 3.5. This represents a decrease of roughly 2 residents per day compared to January. We admitted the same number of residents in February as we did in January (7). However, in February we had additional discharges, which accounted for the slight drop in census. We also had 46% less referrals in February than in January (16 less referrals). Looking to march, we were able to increase slightly with a projected average daily census of 26.7.

Staffing and Agency

We're currently using 4 agency CNAs this month; one has just joined us and will be replacing another who is leaving in April. We have hired a permanent CNA starting in April that will enable us to lower our agency even further. We continue to recruit and interview for Personal Care Attendants who assist on the care floor while awaiting the CNA class.

We hired an RN to join us on might shift. We are still recruiting for a nurse to join us on day shift. In the interim, our resident care manager will be filling in for day shift along with our on-call RN.

CNA class

We will be sending our PCA and non-certified caregivers to the Clatsop Community College CNA course this summer. While we had the opportunity to host a CNA course starting in mid-May, we have decided to move forward Clatsop Community College as it does not delay the timeline for certification. Clatsop College has a well-equipped lab and instructors who are familiar with our space. With this option, we will not need to divert our RN staff from the floor to teach the clinicals. The Care Center will be reimbursed a portion of the training cost from the state.

COVID Update

We've had 4 residents and 5 staff members test positive for COVID in March. The residents were all able to isolate in their rooms, with the exception of one who was sent to the hospital with unrelated complications and has since returned. The last positive resident case identified was on 3/24 and the last staff positive case was identified on 3/20. We are currently testing twice weekly. The staff have been exceptionally diligent in their infection control efforts.

Financial Correction

We received a \$7,000 invoice in February that was billed to the Care Center. There was an error on behalf of the billing party. The invoice was for a different entity of the district. This large invoice adjustment had an impact on our budgeted expenses. Our overall expenses without the invoice were 4.5% under budget.

Respectfully,

Clarissa Barrick, Administrator

Clatsop Retirement Village April 5th, 2022, Board Report

Census: 52 residents. 34 PP and 18 MCD.

Admissions/Discharges: Admitted private pay resident on March 15th. I will resume working down the waitlist as soon as additional care staff are hired. I want to ensure we can provide adequate care for new admissions as well as for our current residents. Level of care is at the highest of consideration when determining to admit residents with current staffing level. Two residents have passed away this month. Four residents remain on Hospice Care.

Operations/Staffing: February was a slow month for applicants, and we were not able to hire any new staff. We will be terminating our agency staff member contract on April 30th per his request. I continue to attempt to contact applicants as they come in and get interviews scheduled. There have not been any applications for the RN position. Other managers have taken over tasks for the nurse on the days she is not in the building.

Healthcare: CRV has remained covid-free since the 14th of January. Mask requirements remain in the building. There has not been much resistance from visitors regarding this. Our staff are managing care for several residents experiencing a decline in health. Currently 94% of residents are vaccinated and boosted along with 90% of the staff.

Maintenance: Justin, the Maintenance Director, is learning the building, residents, and doing very well. Elevator 1 was out of service for a couple days. KONE ordered parts and repaired the selector system. KONE suggests modernization of elevator systems and advises that the parts may become harder to come by in the future for the current elevators. A modernization would take several months to complete. There have been no issues with the elevator since KONE did their repair.

Activities: Our Activity Director, Celene, has started a program exploring different countries each month. She ties this together along with the assistance of the Dietary Director, David, with traditional meals and beverages, books, movies, and crafts. This program has been very well received and creates a truly immersing experience combined with enjoyment and learning about other cultures. The year begun with exploring Sweden, followed by Spain and India. I look forward to what the rest of the year will bring.

Respectfully,

Lauren Beard, Administrator

Clatsop Care Memory Community Board Report

April 2022

Census 28

- 18 private pay and 10 Medicaid
- 4 private rooms are open.
- Wait list is 6-9 months out.
- ADC in March 27.

Staffing and Training

- 29 total Staff.
- Still in need of 3 more FT care staff (1 FT Day, 1 FT Swing and 1 FT TL Noc) and 3 part time. Need 3-4 Caregivers on Day and Swing. Right now, have 2-3. Will slowly bring up Census as staff are hired.
- RN Deborah Kincaid started 3.28. Shantell will be training.

Operations/Life Enrichment Programming

- Char continues to do 2 bus rides on Tuesdays and Thursdays. Still resident's favorite activity.
- Spring gardening activities in the courtyards have started. 2 raised beds have been purchased for West courtyard.
- Volunteer brings in her dog in on Wednesdays at 2pm for residents to meet.
- A resident has readings in lobby on Mondays at 1pm about life aboard a salvage ship and other topics.

Covid-19 Update

- All staff and visitors are screened upon entry. Staff are to wear mask while doing cares. Visitors must wear a mask as well currently.
- Covid-19:
- Testing all non-fully vaccinated 2x weekly while in substantial or higher county positivity rate. 1x weekly for moderate county positivity rate and no testing is recommended for low. Currently in low.

Special Projects

- Construction has slowed down across the fence. No structures are up currently but loads of gravel going in daily.
- Room for Point Click Care/Point Of Care charting has not yet started.
- Fresh paint for fire lane.
- Bathroom heaters possible levy project.

Activity doors connected to fire alarm system by April 1st.
 Respectfully,

Hannah Olson

Administrator

Board Report Clatsop Care in Home Services February 2022

Clients: At the time of this report, we have a census of 50 clients. Only 2 of these clients are on an *as needed* basis. The rest are actively using our services. Of our current clients, 37 are Companion care, and 13 are at Non-certified Caregiver services level. We are not providing medications services to any clients at this time.

One client is VA contract. Two clients are covered by long term care insurance. We currently have three clients through Providence Elder Place, 12 are Medicaid, and the remaining clients are private pay. 25 of our current clients are in Astoria, 8 are in Seaside/Gearhart area, 8 are in Warrenton/Hammond area, 3 in Knappa/Svenson area and we have 6 clients in Cannon Beach. Currently we have no clients in Westport.

We currently have only one client that is receiving Hospice Services .

Employees: We currently have 19 employees, including myself. We had one FT caregiver that terminated voluntarily. Twelve of these caregivers are full time, 7 of these full-time caregivers are also receiving full benefits. The rest are, by choice, part time with 20-25 hours per week. I have hired two additional caregivers that will be starting the first week of April. One had worked with us before and is excited to be back.

Accidents/Incidents: We have had no accidents or incidents this month.

General: Total hours for February were 1627.5. That's down a little but expected as February is a short month and we completed 3 Hospice care assignments. Census is still heading in the right direction. I continue to feel we are on our way to getting back on track.

It was a quiet month I continue to interview potential employees, and I have no waiting list of potential clients. We have been concentrating on catching up on in services and we have planned our next medication training class.

Respectfully, Debi Martin

Board Report - Marketing & Communications

Michael Martin, Director of Marketing & Communications 03/28/22

Radio

94.9 The Bridge (Adult Contemporary) radio station offered a long format messaging. Clarissa Barrick went to the station. They then asked questions that would fill about an hour's worth of breaks in their programming. They are editing and it should start to run in the next week or two. The idea is that instead of regular 30 or 60 second commercials, during a break, the DJ would ask a question about Clatsop Care Health District and then Clarissa would answer the question. These questions would run for about an hour in their programming. It is an advertorial approach or native advertising approach that we will be listening to for feedback. We have also been running on KMUN and Ohana Radio stations. We will pull back on radio for three months in order to provide budget for the new digital, programmatic, display banner campaigns including location-based geofencing.

Website

Now that we have started to see photos come back from the shoots we have been doing, we continue to begin to build out a draft of the new website. We are also rewriting content and building out infographics which will make it easier for a reader to understand Clatsop Care Health District, its entities and services. Target finish date of April 30th.

Job Fair at Clatsop Community College

April 20th at the college. We will have a table and people there to talk to prospective applicants and set up interviews.

Weekly Open House Job Fair

We are looking at holding a weekly open house/Job Fair at Clatsop Care Retirement Village where people can come in and apply on the spot and someone would be there to interview them as well. We are looking at Wednesdays starting April 20th. This will give us 3-4 weeks to market for the event.

Sunday Market in Astoria

Starting May 8th, we will have a booth every second Sunday each month at the market in Astoria. The goal is to give out information about each of our facilities and services, answer questions, drive applicants for open positions and have a general presence in the community. Sign-up sheets will be available. We are looking for various staff, management and even residents or clients to manage the booth. We are looking at possible "Health Fair" or "Health Screening" ideas that we could do.

<u>Digital Programmatic Display Banner & Location-Based Campaign</u>

In order to reach more candidates for nurses, CNA's, CMA's and Caregivers, we have designed sets of ads that will run on what is called a Programmatic Ad Network as well as location-based geo-fencing. What is a programmatic ad network and what is geo-fencing? Content providers like CNN, ESPN, A&E, CBS, Paramount, Food Network and search engines like Google, Microsoft, Yahoo never sell out all their available advertising inventory. This inventory is put on an exchange where you can target various audiences by age, sex, income, zip code, profession, interest, sites that they visit and applications they use. We can also put up an invisible fence around places like hospitals, clinics, schools and addresses to target those most likely to be in the profession of or studying to be a nurse, CNA, CMA or Caregiver. Each ad will cover one position and will direct the reader to a dedicated landing page for that position to

drive application. We will also target all licensed professionals (Nurses, CNA's, CMA's) with this program through the database that we acquired from the state licensing bureau.

Nurse Graduation at Clatsop Community College

The next graduating class is May 4th. We will have a table at the college during that day to encourage applications and interviews.

CLATSOP CARE CENTER HEALTH DISTRICT BOARD REPORT 4/5/2022

March seemed to be a fairly predictable month with the continued focus being on census and staffing improvement. We didn't see the activity as in recent months, however, we continue to try different alternatives to draw in more applicants. We've also input the additional information into the portal for the second round of Provider Relief Fund. This is something we will need to do at least two more times through the end of next year. This is a large project and I appreciate all of the efforts made to have this go as smooth as possible.

In regards to the heater project at memory Care, I have spoken with Steve and he has no issues with the project. I did send him the cut sheet of what the heaters would be so he knows exactly what would be going into the building. On the topic of building, I did speak with CB Two Architects regarding the property adjacent to Clatsop Retirement Village. Their recommendation would be to hire a surveyor, Geotech, and environmental engineer to verify the topography, existing utilities, soil conditions, and likely be able to help establish a delineation line for any wetland type area. If this came back with positive news, the architect could then provide a test fit site plan, floor plan, zoning research, and pre-application meeting with the City to determine their process. I am also working on the potential property I've spoken about in the past, however, that would take rezoning the property. I do feel like we should at least rule out the property we currently have at this time while continuing to look at other locations. We are working with a new person at Lument so that too may have been the cause of delay in the processing of the final siding payment. I have reached out to the new person via phone as I only had an email introduction. With the form they are wanting us to fill out, we should be getting that money shortly.

After the last board meeting, we have moved the money on the surplus cash distribution that was approved, and did proceed with paying the note at Clatsop Memory Care. It is nice to have that behind us and not be paying on that monthly anymore, so I appreciate the boards choice to pay that off.

We are in full budget mode and looking forward to our meeting on the 12th to work through what we're looking at. In looking back to last year, and thinking we were budgeting conservatively, I don't think we did as much as we could. This year we will want to take the approach that we just don't know what new variants may be out there, and what cost may be associated with it. We are seeing the opening up continue, but also have learned that it can change at any time.

Respectfully,

Mark Remley

Clatsop Care Health District Statement of Net Position			The state of the s					
As of February 28, 2022								
	DISTRICT	99	CCMC	H	CRV	ITC	ELIMINATIONS	CONSOLIDATED
CURRENT ASSETS								
Cash and cash equivalents	\$3,525,133	\$362,091	\$81,963	\$45,082	\$52,524	\$369,331		\$4.436.124
Restricted funds held in escrow	-	-	1	-	-	55,916		55,916
Receivables:			The first secure of the property of controls of the fight interest before the fight interest the control of the first interest the control of	The state of the s				
Resident receivables, net uncollectible	-	408,250	51,119	56,856	62,568	1		578,793
Tax revenue	253,692			-	-	1		253,692
Other receivables	-	1,755	89	-	(1,613)	1		231
Resident funds held in trust		5,465	6,937		3,559	-		15,961
Due from other funds	669'89	3,991,579	157,955	231,337	560,243	1	(5,004,813)	-
Prepaid expenses	75,761	-	-			14,663		90,424
Total current assets	3,918,285	4,769,140	298,063	333,275	677,281	439,910		5,431,141
LONG TERM ASSETS								
Restricted funds held in escrow	1		1	•		160,980		160,980
CAPITAL ASSETS								
Capital assets not being depreciated:								
Land	1	40,150			***************************************	219,000		259,150
Construction in progress	11,814	I				1		11,814
Capital assets, net of accumulated			A ALBERTA DE LA CALLADA DE LA	THE PROPERTY OF THE PROPERTY O				
Land improvements		49,243	186		_	13,903		63,332
Buildings	-	455,207		-		3,133,017		3,588,224
Building improvements	-	376,529	63,893	-	47,523	1,408,653		1,896,598
Moveable equipment	1	60,131	59,509	-	78,479	-		198,119
Vehicle	1	29,053	ı			-		29,053
Total capital assets, net	11,814	1,010,313	123,588	1	126,002	4,774,573		6,046,290
Property under capital lease, net of	-		5,798,599			1		5,798,599
Total Assets	660'026'2\$	\$5,779,453	\$6,220,250	\$333,275	\$803,283	\$5,375,463		\$17,437,010
CURRENT LIABILITIES								
Accounts payable	\$70,760	\$82,065	\$14,178	\$285	\$33,860	\$0		\$201,148
Accrued liabilities	43,968	46,937	•	1	2,000			95,905

Accrued salaries and employee benefits	58	245,571	1,430	360	1,915	,		249,334
Other payroll liability	2,658	430,102	32,710	18,266	54,286	1		541,022
Accrued interest			173	1	1	12,931		13,104
Compensated absences	16,359	896'06	40,959	13,585	54,264			216,130
Resident funds held in trust	-	5,465	6,937	1	3,559	-		15,961
Due to other funds	1,886,412	738,795	1,449,912	211,904	671,824	45,966	(5,004,813)	
Deferred revenue		182,693		-	1	-		182,693
Current portion of obligations under	1	1	187,033	1		The second designation of the second		187,033
Current maturities of long-term debt	I	Τ	23,172		1	184,603		207,775
Total current liabilities	2,023,215	1,822,591	1,756,504	244,400	824,708	243,500		1,910,105
LONG-TERM DEBT, NET OF CURRENT								
Obligations under capital leases		1	6,821,490		ı	-		6,821,490
Long-term debt	-		69,881	1		5,222,148		5,292,029
Total liabilities	2,023,215	1,822,591	8,647,875	244,400	824,708	5,465,648		14,023,624
NET POSITION		Anticond Wil debit version to the second of	The second secon					
Net investment in capital assets	11,814	1,010,313	(1,179,562)	-	126,002	(632,178)		(663,611)
Restricted	92,616	1	1		-	216,896		309,512
Unrestricted	1,802,454	2,946,549	(1,248,063)	88,875	(147,427)	325,097		3,767,485
Total net position	1,906,884	3,956,862	(2,427,625)	88,875	(21,425)	(90,185)		3,413,386
Total liabilities and net position	\$3,930,099	\$5,779,453	\$6,220,250	\$333,275	\$803,283	\$5,375,463		\$17,437,010
		1	1			1		t
						A THE RESIDENCE AND ADDRESS OF THE PARTY OF		
				Fund Balanc	Fund Balance Reconciliation			
Beg Balance - 06/30/21	\$955,382	\$3,363,058	(\$2,465,327)	\$29,277	600'2\$	(\$144,525)		\$1,744,874
FY22 Change in Net Position	\$951,502	\$593,804	\$37,702	\$59,598	(\$28,434)	\$54,340		\$1,668,512
Ending Balance	\$1,906,884	\$3,956,862	(\$2,427,625)	\$88,875	(\$21,425)	(\$90,185)		\$3,413,386
Validation Check	1		1	1	1	1		1
						The state of the s		

Statement of Revenues, Expenditures, and	Changes in Net Posit	tion						
For the Month Ended February 28, 2022	<u> </u>					***************************************		w.*
	DISTRICT	ccc	ССМС	IHC	CRV	LLC	ELIMINATIONS	CONSOLIDATED
Revenues								
Charges for services		······································		***************************************	······································	·····		· · · · · · · · · · · · · · · · · · ·
Medicare A	\$0	\$59,912	\$0	\$0	\$0	\$0		\$59,912
Medicare B	 	4,647			-	- Y		4,647
Medicare C	l	205		-				205
Private	<u> </u>	42,741	117,618	-	145,014	-		305,373
Medicaid		189,102	36,932		60,075		***************************************	286,109
Elderplace	-		16,299	-	11,142	-		27,441
n-Home Care	l - l		- 10,233	49,062	11,172	-		49,062
Taxes				-		_		49,002
Property Taxes	3,912	-				-		3,912
ocal Option Taxes	5,176							5,176
Timber Taxes	36,692	-						
Community SIP Fund/Other	56					***		36,692
Rent Revenue	†					44.457	/44.453\	56
HHS Provider Relief Funds	-	-	-		-	44,457	(44,457)	-
Grant Revenue -PPP Loan Forgiveness			-	-				
	1 1 7 9		-					
nvestment income	1,178	13			1	10		1,202
Donations Missellandous sevenue	-		-	-		-		-
Miscellaneous revenue	47.014		170.040	40.053	46	-		46
Total Revenues	47,014	296,620	170,849	49,062	216,278	44,467		779,833
xpenditures						******************************	*****	
lealth services								
Personnel services		133,685	55,915	42,998	70,463	-		303,061
Materials and supplies		50,875	1,775	4,827	13,890	-		
herapy		30,673	1,773	4,027	13,630			71,367
Materials and supplies	_	16 631				***************************************		46.634
Administration		16,631	-		-	-		16,631
	17.00							
Personnel services	17,919					-		17,919
Materials and supplies	12,071	-		-	-	-		12,071
acility administration								
Personnel services		15,709	11,996	-	13,080	-		40,785
Naterials and supplies	-	36,723	13,308	206	70,291	7,076	(44,457)	83,147
Management Fee	-	17,796	10,251	2,944	12,977	-		43,968
Management Travel	-	452	295		398	-		1,145
Debt Service		-	29,043	-	-	12,931		41,974
apital outlay	-	-	-	-	-	-		-
Maintenance Services					***************************************			
ersonnel services	-	6,298	3,975	-	5,779	-		16,052
Naterials and supplies	-	2,506	1,650	-	8,797	-		12,953
aundry/housekeeping								
ersonnel services	-	10,737	-	-	-	-		10,737
Naterials and supplies		1,762	-	-	-	-		1,762
ctivities							İ	
ersonnel services		10,647	5,032	-	4,718	-		20,397
1aterials and supplies	-	273	527	-	807	-		1,607
ietary							1	
ersonnel services	- [19,897	16,596	-	33,031	-		69,524
laterials and supplies	-	7,990	6,518	-	17,483	- 1		31,991
ocial services								***************************************
ersonnel services	-	6,298	-	-	-	-	1	6,298
laterials and supplies	-	-	- i	-	- 1	-	1	
epreciation	-	8,110	1,907	-	1,812	19,737		31,566
mortization	-		26,357	-	- 1,012	- 15,757		26,357
otal Expenditures	29,990	346,389	185,145	50,975	253,526	39,744		861,312
	,220			20,073	200,020	33,744		301,312
cess (deficiency) of revenues								
ver expenditures	17,024	(49,769)	(14,296)	(1,913)	(37,248)	4,723	1	(81,479)
ALCO FILE CONTRACTOR AND								
ther Financing Sources (Uses)								
ansfers in	-	-	-	-	-	-		-
ransfers out	-	-	-		•	-		-
otal Other Financing Sources (Uses)	-	-	-	-	-	-		20.0

Statement of Revenues, Expenditures, and	······································	ion						
For the Eight Months Ended February 31, 2	022							
	DISTRICT	CCC	CCNAC	nic	CDV	II.C	ELINAINIATIONIC	CONSOLIDATED
Revenues	DISTRICT	CCC	CCMC	IHC	CRV	LLC	ELIMINATIONS	CONSOLIDATED
Charges for services								
Medicare A	\$0	\$774,538	\$0	\$0	\$0	\$0		\$774,538
Medicare B		29,485	-	- 1		-		29,485
Medicare C	- I	39,184	i	-	-	-		39,184
Private	- 1	305,441	995,599	-	1,257,845	-		2,558,885
Medicaid	<u> </u>	1,583,357	288,220	-	482,393	-		2,353,970
Iderplace	T - 1	-	110,747	-	64,407	-		175,154
n-Home Care	- 1	-	-	395,986	-	_		395,986
laxes la								
Property Taxes	507,273	-	-	-	- 1	-		507,273
ocal Option Taxes	642,056	- 1	-	-	-	-		642,056
imber Taxes	363,998	- 1	- 1	-	- 1	-		363,998
Community SIP Fund/Other	27,331	- 1	-	-	-	-		27,331
Rent Revenue	-	-	-	-	-	355,656	(355,656)	-
HHS Provider Relief Funds	- 1	-	-	-	-	-		-
Grant Revenue -PPP Loan Forgiveness	45,399	497,133	255,538	108,693	340,236	-		1,246,999
nvestment income	9,353	58	-	-	5	88		9,504
Donations	-	-	- 1	-	-	-		-
Miscellaneous revenue	-	20,522	264	119	864			21,769
Total Revenues	1,595,410	3,249,718	1,650,368	504,798	2,145,750	355,744		9,146,132
ivnonditures.							***************************************	
xpenditures lealth services			***************************************					
Personnel services	•••	1,062,250	407 421	202 520	CACTES			2 600 762
			487,431	382,530	676,552			2,608,763
Aaterials and supplies		560,618	60,871	38,683	64,706	-	***************************************	724,878
herapy Naterials and supplies		190 906				***************************************		100 000
Administration		180,896						180,896
ersonnel services	150 303							150 202
Aaterials and supplies	158,283 116,814							158,283
acility administration	110,014							116,814
ersonnel services		138,636	97,296		103,611			220 E42
Materials and supplies	1	242,890	120,541	227	548,849	53,682	(355,656)	339,543 610,533
Nanagement Fee		163,920	83,673	23,760	108,281	- 23,082	(355,656)	
Aanagement Travel		7,889	2,334	23,760	3,104			379,634 13,327
Debt Service	· -	-	234,177		- 1	104,463		338,640
Capital outlay			234,177			104,403		336,640
Naintenance Services								
ersonnel services		53,777	36,184		78,927			168,888
Naterials and supplies	·	33,170	20,594		78,131	-		131,895
aundry/housekeeping		33,170	20,334		76,131			131,653
ersonnel services	·	127,099		······································	·····			127,099
Aaterials and supplies		14,934			_			14,934
ctivities		14,554						14,334
ersonnel services	-	50,334	25,525		39,083	-		114,942
Naterials and supplies	-	2,383	1,520		5,949			9,852
vietary		-,5555	-,		7,777		· · · · · · · · · · · · · · · · · · ·	, 5,032
ersonnel services	 	183,932	158,072	-	301,618	-		643,622
Naterials and supplies	<u> </u>	64,055	62,516		150,877			277,448
ocial services						***************************************	***************************************	277,740
ersonnel services	T	54,257		-	-	-		54,257
laterials and supplies	-	-	- 1	-	-	-		- '
epreciation	1 - 1	64,874	15,251		14,496	157,894		252,515
mortization	1	-	210,857	-	-	-		210,857
otal Expenditures	275,097	3,005,914	1,616,842	445,200	2,174,184	316,039		7,477,620

ccess (deficiency) of revenues								
ver expenditures	1,320,313	243,804	33,526	59,598	(28,434)	39,705		1,668,512
ther Financing Sources (Uses)	1				***			
ransfers in	· - -	350,000	4,176	-		14,635		368,811
ransfers out	(368,811)	330,000	4,170			14,033		(368,811)
otal Other Financing Sources (Uses)	(368,811)	350,000	4,176			14,635		(200,011)
Julian Harring Jources (USES)	(300,011)	550,000	4,1/0			14,033		
hanges in Net Position	\$951,502	\$593,804	\$37,702	\$59,598	(\$28,434)	\$54,340		\$1,668,512
	1							

CASI	H SNAPSHOT
3/24/2022	
CRV GENERAL	70,486
CCC GENERAL	402,131
PAYROLL MANUAL CHECKS	6,045
RETIREMENT VILLAGE PROPERTY LLC	83,356
CARE CENTER HEALTH DISTRICT	1,324
MEMORY CARE COMMUNITY	76,935
DISTRICT ADMINISTRATION	212,049
IN HOME CARE SERVICES	39,233
MEMORIAL FUND	92,617
LGIP	3,552,506
TOTAL	4,536,682

		1400	VE 4 P 70 F 175
February 2022	ANNUAL BUDGET	MONTH	YEAR TO DATE
CLATSOP CARE HEALTH DISTRICT GENERAL FUND			
PERSONNEL SERVICES	\$294,160	\$17,919	\$158,28
MATERIALS AND SERVICES	\$105,380	\$12,071	\$116,81
CAPITAL OUTLAY	\$654,800	\$0	\$
CONTINGENCY	\$343,340		
TOTAL	\$1,397,680	\$29,990	\$275,09
CLATSOP CARE HEALTH AND REHABILITATION CENTER			
PERSONNEL SERVICES	\$2,594,530	\$203,271	\$1,670,28
MATERIALS AND SERVICES	\$1,821,360	\$135,008	\$1,270,75
CAPITAL OUTLAY		\$0	\$
CONTINGENCY			
TOTAL	\$4,415,890	\$338,279	\$2,941,04
CLATSOP CARE RETIREMENT VILLAGE, LLC			
PERSONNEL SERVICES	\$0	\$0	\$1
MATERIALS AND SERVICES	\$76,820	\$7,076	\$53,68
CAPITAL OUTLAY	\$59,900	\$0	\$1
DEBT SERVICE	\$338,020	\$12,931	\$104,46
TOTAL	\$474,740	\$20,007	\$158,14
CLATSOP CARE IN-HOME SERVICES	***************************************		
PERSONNEL SERVICES	\$610,260	\$42,998	\$382,53
MATERIALS AND SERVICES	\$111,000	\$7,977	\$62,67
TOTAL	\$721,260	\$50,975	\$445,20
CLATSOP CARE RETIREMENT VILLAGE			
PERSONNEL SERVICES	\$1,855,350	\$127,071	\$1,199,79
MATERIALS AND SERVICES	\$818,120	\$124,643	\$959,89
TOTAL	\$2,673,470	\$251,714	\$2,159,688
	**************************************	***************************************	***************************************
CLATSOP CARE MEMORY COMMUNITY			
PERSONNEL SERVICES	\$1,537,190	\$93,514	\$804,50
MATERIALS AND SERVICES	, \$479,670	\$34,324	\$352,049
DEBT SERVICE	\$552,270	\$29,043	\$234,17
TOTAL	\$2,569,130	\$156,881	\$1,390,73
GRAND TOTAL YTD	\$12,252,170	\$847,846	\$7,369,904
TOTAL UNAPPROPRIATED RESERVE AMOUNTS	\$1,485,080		
DISTRICT TOTAL	\$13,737,250		

Local Option Property Tax Levy Revenue Cumulative through 02/28/22 Last Revised: 03/25/22 Clatsop Care Health District (CCC)

FY2022 Receipts by Month	s by Month
Date	Amount
07/31/21	\$6,913.01
08/31/21	\$3,019.13
09/30/21	\$1,781.93
10/31/21	\$50,495.38
11/30/21	\$556,146.06
12/31/21	\$6,504.98
01/31/22	\$12,020.29
02/28/22	\$5,175.96
Total Current FYTD	\$642,056.74
FY2019	\$568,108.62
FY2020	\$579,372.99
FY2021	\$651,146.07
Cumulative Funds	\$2,440,684.42
Funds Summary - Cumulative:	lative:
Funds Received	\$2,440,684.42
Funds Spent	(\$1,167,643.85)
CRV LLC Credit*	\$133,300.00
Spend MTD Mar22	(\$11,098.50)
Remaining Available	\$1,395,242.07

*Reimbursement for CRV Siding Project from HUD Cash Reserves (received 04/21 & 07/21)

Clatsop Care Health District (CCC) Local Option Property Tax Levy Spend Summary by Project Cumulative through 02/28/22

							*	-											
Estimated/ Actual Completion Date	04/30/20	07/31/19	Care Center Complete 08/31/20	08/31/19	02/29/20	05/31/20	12/31/19	06/15/21	04/30/20	04/30/20	05/31/20	04/30/20	04/30/20	07/31/20	06/30/20	08/30/20	12/31/20	Pending	Pending
Completed	>	>	>	>	>	>	>	>	>	>	\	>	>	>	>	>	>	Z	Z

*Retro approved by BOD in Feb20 for use of Levy funds.

Turn Over Report 21/22 Clatsop Care Center

Turn over February: 2.1% Annual Turnover YTD%: 17.3% Oregon's Annual SNF Turnover%: 49%

	II	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	Мау	Jun	An- nual
	%0	2.1%	%0	2.1%	2.1% 4.3% 0	0	6.6% 2.1%	2.1%					15.1
2021/22 Employee Turnover													
# of Terms	0	Н	0	\leftarrow	2	0	3	1		1			
# of Employees	45	47	47	46	46	48	45	46					

Open Positions

I						
# Open	Position	Department	FTE			
2	Full-time CNAs	Nursing	Yes			
	Full-time Nurse	Nursing	Yes			
	Certified Med Aide (ongoing)	Nursing	Yes			
	CNA students	Nursing	Yes			
					20	
						The second secon

CCHR

	Tenure (Years)	5 Mo.	1 year	3 Mo.	6 yrs.	1 year, 6 mo.	5 mo.	1 mo.	7 mo.
	Reason	Relocating to Portland	Retiring	Attendance	Accepted position elsewhere	Disciplinary action	Commuting from Longview; unable to relocate closer	Not the right fit for the role	Relocating back to home state
L	Department	Nursing	Activities	Activities	Housekeepin 8	Administrati on	Nursing	Nursing	Nursing
Turnover	I/A	>	>	_	>	_	>	>	>
	Term Date	08/09/21	10/06/21	11/17/21	11/1/21	01/07/22	1/1/22	1/20/22	2/11/22
	Hire Date	3/31/21	08/30/20	08/19/21	7/26/15	7/19/20	08/1/21	12/05/21	7/14/21
	FTE	1	5.	1	1	1	1	1	П
	Job Title	CNA	Activities Assistant	Activities Director	Housekee per	Human Resources Director	CNA	PCA	Nurse/LP N
	Month	August	October	Novemb er	Novemb	January	January	January	January

Clatsop Care Retirement Village

2021- 2022 Turnover Report

Turnover %: February 0% Annual YTD Turnover%: 44% Oregon's Annual ALF Turnover%: 42%

	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	Мау	Jun	Annual
2021/22 Employee Turnover %	%9	11%		4%	%9	%8	%6	%0		d			%
# of Terms	5	3		2	3	4	4	0					
# of Employees	47	45		50	52	48	46	46					

Open Positions

# Open	Position	Department	111	Date Opened	Renlaces	Date Filled	Ctort Date	non O suc O
			!					nado sáso
		Health	1.0					
1	Caregiver	Services	DAY	Ongoing				
		Health	1.0					
2	Caregiver	Services	Day	Ongoing				

(R)

Ongoing	Ongoing	Ongoing	Ongoing	Ongoing	Ongoing	2/24/22
1.0 NOC	1.0 NOC	1.0 NOC	1.0 EVE	1.0	0.5	1.0
Health Services	Health Services	Health Services	Health Services	Dietary	Activities	Health Services
Caregiver	Caregiver	Caregiver	Caregiver	Cook/ Dietary Aid	Part Time Activities	Z.
ന	4	5	9	7	∞	6

Closed Positions

	tion	Department	FTE	Date Opened	Replaces	Date Filled	Start Date	Days Open
--	------	------------	-----	-------------	----------	-------------	------------	-----------

CRY

Ongoing
12/6/2021
12/3/2021
N/A
Ongoing
1.0
Health Services
Caregiver (EVE)

Turnover

Tenure (Years)		
Reason		
Department		
>		
Term Date V/I		
Hire Date		
FTE		
Job Title		
Month		

Clatsop Care Memory Community

2021- 2022 Turnover Report

Turnover %: March 3% Annual YTD Turnover%: 72.5%% Oregon's Annual ALF Turnover%: 72% Oregon's YTD Turnover%: 54%

	In	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Annual
2021/22 Employee Turnover %	7%	8%	%6	4%	20%	11%	3.5 %	7%	3%				%
# of Terms	2	2	2	-	5	3	1	2	1				
# of Employees	28	23	22	24	25	26	28	28	29				

Open Positions

	Position	Department	ŦE	Date Opened	Replaces	Date Filled	Start Date	Days Open
	Caregiver	Health Services	1.0 DAY	04-20-2021				
Care	Caregiver/Team Lead	Health Services	1.0 Noc	11.30.2021				

CCMC

+	Caregiver	Health Services	1.0 Swing			
н	Housekeeper	Maintenance	0.5	11.2021		
2	Caregiver	Health Services	0.5 Day/Swing			
\leftarrow	Caregiver	Health Services	1.0 Noc			

Closed Positions

	T			
Days Open	1 month	6 months	45 days	
Start Date	1.24.2021	1.10.2022	3.28.22	
Date Filled	1.24.2022	1.10.2022	3.17.22	
Replaces				
Date Opened				
FTE	1.0	0.5	1.0	
Department	Health Services	Dietary	Health Services	,
Position	Caregiver	Dietary Aid	Nurse	

CCM C

Turnover

Month	Job Title	FTE	Hire Date	Term Date	1//	Department	Reason	Tenure (Years)
February	RN	1.0	11.30.21	2.8.22		Health Services	Attendance. Unable to preform job duties.	N/A
	Care							
February		1.0	2.2.22	2.8.22		Health Services	Did training, went fire life and safety then called out sick. No return calls after.	N/A
	Activ							
March		0.5	1.9.22	3.27.22		Activities	Did not have a steady child care on weekends. Put in two week notice.	N/A

IN HOME CARE TURNOVER REPORT- February 2022

February 2022 Turnover: 5.26 % Annual Turnover %: `32.86% Oregon's Annual Home Care Turnover 48 %

JULY	2021-2022 Employee Turnover %	# of Terms 2	# of Employees 20
AUG	0 %	0	20
SEPT	17.6	33	17
00	0 %	0	17
NOV	0 %	0	18
DEC	0 %	0	18
JAN	0 %	0	20
FEB	5.26	1	19
MAR	%		
APR	%		
MAY	%		
JUNE	%		
Annual			

Open Positions

ue	
Days Open	
Start Date	
Date Filled	
Replaces	
Date Opened	Ongoing
HE.	1.0
Department	Health Services
Position	Caregiver
# Open	Ц

J H C

2	3

Closed Positions

	Т	T	
Days Open			
Start Date			
Date Filled			
Replaces			
Date Opened	continuous		
FTE	×		
Department	Home Care	Home Care	
Position	Caregiver	On call	
# Closed			

Turnover

IHC

Tenure (Years)	4 years	<90 days	<90 days	<90 days			
Reason 1	Vaccine mandate 4	Transferred to CCMC	Transfered to CCMC	Disciplinary			
Department							
5	>	>	>	>			
Term Date	9/28	9/30	9/30	Feb/2022			
Hire Date	10/2017	9/16	9/17	Dec /2021			
FTE	Н	F	Ħ	Ħ		٠	
Job Title	Caregiver	Caregiver	Caregiver	Caregiver			
Name	Z	BC	Σ	BM			
Month	Sept	Sept	Sept	Feb			



Industrial * Commercial * Manufacturing * Residential WBE #3303

Physical Address: 1725 N. Roosevelt Dr, Seaside OR 97138 Mailing address: 360 SE Baseline, Hillsboro, OR 97123 Phone: 503-717-9148 Fax: 503-717-4147

PROPOSAL TO: Clatsop Memory Care

Attn: Larry 2219 SE Dolphin Ave Warrenton, Oregon 97146

We are pleased to quote you as shown below. Deviation from present specification and on written consent and subject to cost adjustments. Material and Workmanship are guaranteed one year from date of installation. Inland Electric, Inc. is a WOMAN OWNED. #3303

SCOPE OF WORK

- Furnish material and labor for installation of radiant electric heaters with internal thermostats in restrooms.
- Mount heaters above restroom doors with internal thermostats. (external thermostats per adder)
- Multiple heaters per circuit (up to 6). There will be four circuits fed from various panels located in building.

INCLUSIONS

- 21- King KCV2406 47" radiant wall heaters
- 21- King KCVT 2Pole thermostat
- 4- 20 AMP branch circuits for heating from various panels
- Permit

EXCLUSIONS

Construction

- Wall patch and repair
- Interface with other systems. Fire alarm/ security
- Shop drawings

CLARIFICATIONS

Addendums have been read and included in this proposal.

- Inland Electric Inc. reserves the right to negotiate specific items of the subcontract if awarded this project.
- Notwithstanding any provision herein to the contrary, in the event that, during the
 performance of this agreement, the price of raceway, fittings, wire and /or any necessary
 commodities significantly increase, through no fault of Inland Electric Inc., the price of
 any materials, components, or goods to be furnished under this agreement shall be
 equitably adjusted by an amount reasonably necessary to cover any significant price
 increase. As used herein, a significant price increase shall mean any increase in price



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exceeding-five-percent (5%) experienced by Inland Electric Inc. from the date of the execution of this agreement. Such price increases shall be documented through commercial quotes, invoices, receipts, or other such documentation. Where the delivery of materials, components, or goods requirements under this agreement is delayed, through no fault of Inland Electric Inc., shall not be liable for any additional costs or damagers associated with such delays.

- Inland Electric Inc. shall not be held liable for errors or omissions in designs by others, nor inadequacies of materials and equipment specified or supplied by others.
- Inland Electric Inc. shall not incur cost impacts due to delays associated with the plan review process or electrical permit approval.
- Hard copies of purchase order or contract with all related contract documents shall be issued to Inland Electric prior to Mobilization.
- Anything (verbal or written) expressed or implied elsewhere, which is contrary to these conditions shall be null and void.
- Equipment and materials supplied by Inland Electric Inc. are warranted only to the extent that the manufacturer warrants the same.
- Idle time incurred by Inland Electric Inc's employees due to absence of required escorts, clearances, inability to enter the workspace, or other factors beyond our control will be considered a change to the Contract.
- All information supplied by Inland Electric Inc. is to be considered confidential and proprietary.
- Inland Electric cannot be held responsible for delays caused by lack of stock or back ordered items. Cost associated with these delays may be passed on to the owner.
- The proposal is good for 30 days from the date of the proposal.

Base bid is	
Add remote thermostats	933H5335CUPERIOP 06A - 103A988800 504533888
Add thermostat guards	\$1850.00
Respectfully Submitted	
Dave Kelson	
Project Manager/Estimator	
Inland Electric, Inc.	
Dsn@Inlandegroup.com	
To accept this proposal, please fill ou	t below and return a copy of this proposal:
Accepted by:	Date:
Billing Name:	



<u>Industrial * Commercial * Manufacturing * Residential</u> <u>WBE #3303</u>

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billing Address:	account of		
Site address:		 	
Owner's Name:			
Owner address:			