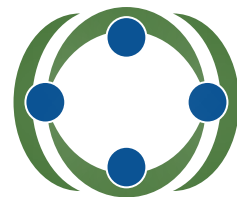




Public Meeting

January 2026



**community health
center board**

Multnomah County

Table of Contents

Agenda

Public Meeting Minutes

December 08, 2025

Summaries

Executive Director Strategic Updates

AGENDA



**community health
center board**

Multnomah County



Public Meeting Agenda

January 12, 2026

3:00 - 8:00 PM

In Person

Health Center Purpose: *Bringing services to individuals, families, and communities that improve health and wellness while advancing health equity and eliminating health disparities.*

CHCB Board:

Brenda Chambers (she/her) – Chair

Darrell Wade (he/him) – Vice Chair

Monique Johnson (she/her) – Secretary

Brandi Velasquez (she/her/ella) – Treasurer

Dani Slyman (she/her) – Board Member

Elise Schumock (she/her) – Board Member

Yalila Alcaraz (she/her/ella) – Board Member

John Schlosser (he/him/they/ them) – Board Member

Patrick Thomas (he/him/they/ them) – Board Member

Christine Palermo (she/her) – Board Member

Anirudh Padmala (he/him) – Interim Executive Director (Ex Officio)

- Meetings are open to the public
- Guests are welcome to observe/listen
- There is no public comment period
- All guests will be muted upon entering the Zoom

Please email questions/comments to **the CHCB Liaison at CHCB.Liaison@multco.us**. Responses will be addressed within 48 hours after the meeting.

Time	Topic/Presenter	Process/Desired Outcome
3:00-5:30pm (150 min)	CHCB FY27 Budget Review <i>Hasan Bader, Finance Manager</i>	Board reviews and discusses
5:30-6:00pm (30 min)	Break	
6:00 - 6:10 (10 min)	Call to Order / Welcome <i>Brenda Chambers, CHCB Chair</i>	
6:10 - 6:15 (5 min)	Minutes Review - VOTE REQUIRED <ul style="list-style-type: none">• December 8th, 2025 <i>Brenda Chambers, CHCB Chair</i>	Board reviews and votes
6:25 - 6:40 (15 min)	Clinical Quality Metric Performance Update <i>Charlene Maxwell, Deputy Medical Director</i>	Board reviews
6:40 -6:55 (15 min)	Q3 Patient Survey Results <i>Brieshon D'Agostini, Quality & Compliance Officer</i>	Board receives update
6:55-7:10 (15 min)	Recognition for Termed Board Members <i>Anirudh Padmala, Interim Executive Director</i>	Board reviews



7:10-7:25 (15 min)	Break	
7:25-7:35 (10 min)	Monthly Financial Report <i>Hasan Bader, Finance Manager</i>	Board receives update
7:35-7:45 (10 min)	Executive Director Strategic Updates <i>Anirudh Padmala, Interim Executive Director</i>	Board receives update
7:45 pm	Meeting Adjourns	Thank you for your participation

PUBLIC MEETING MINUTES



**community health
center board**

Multnomah County



**CHCB Public Meeting Minutes
December 8th, 2025
6:00-8:00 PM via Zoom**

Health Center Purpose: Bringing services to individuals, families, and communities that improve health and wellness while advancing health equity and eliminating health disparities.

Board Members:

- Tamia Deary (she/they)** – Chair
- Darrell Wade (he/him)**- Vice Chair
- Susana Mendoza (she/her)** - Secretary
- Brandi Velasquez (she/her/ella)** – Member at Large
- Dani Slyman (she/her)** - Member at Large

- Brenda Chambers (she/her)** - Board Member
- Monique Johnson (she/her)** - Board Member
- Patrick Thomas (he/him)**- Board Member

Anirudh Padmala (he/him)- Interim Executive Director (Ex Officio)
Board Members Excused/Absent: Dani Slyman

Call to Order / Welcome <i>Tamia Deary, CHCB Chair</i>	Meeting called to order at 6:09 PM Additional Notes: <ul style="list-style-type: none">• We have a quorum with 6 members present• Susana Mendoza arrived at 6:17 pm making 7 members present• Dani had an excused absence for this board meeting.	
--	--	--

<p>Minutes Review - VOTE REQUIRED</p> <p><i>Tamia Deary, CHCB Chair</i></p>	<p>Edits/Comments:</p> <ul style="list-style-type: none"> No edits. The Board Chair made a request for comments within the minutes be scribed to the board member that made the comment so that proper follow up requests for a board member can be tracked in the minutes by support staff. Susana Mendoza arrived at 6:17 pm and was not present to participate in this vote. <p>Addition :</p> <ul style="list-style-type: none"> None. 	<p><i>Motion to approve: Brenda Chambers</i></p> <p><i>Second: Monique Johnson</i></p> <p>Yays: 6</p> <p>Nays: 0</p> <p>Abstain:0</p> <p>Decision: Approved</p>
<p>Policy Renewals - VOTE REQUIRED</p> <ul style="list-style-type: none"> ICS.04.18 Community Health Center Client Rights and Responsibilities ICS.04.16 Community Health Center - Feedback and Complaint Policy <p><i>Brieshon D'Agostini, Quality & Compliance Officer</i></p> <p><i>Kimmy Hicks, Quality &</i></p>	<p>Community Health Center Client Rights and Responsibilities Policy</p> <p>Edits/Comments:</p> <ul style="list-style-type: none"> The purpose of the policy methods is how the health centers inform clients about their rights and responsibility as patrons of the health center. This policy is a requirement by the The Joint Commission. There are no changes or training needed to implement. There are no updates to highlight. There are no changes to the policy and renewing as is. The policy is ready for a vote. <p>Addition :</p> <ul style="list-style-type: none"> None. 	<p><i>Motion to approve: Monique Johnson</i></p> <p><i>Second: Patrick Thomas</i></p> <p>Yays: 7</p> <p>Nays: 0</p> <p>Abstain:0</p> <p>Decision: Approved</p> <p><i>Voted unanimously.</i></p>

<p><i>Compliance Project Manager</i></p>		
<p>Policy Renewals - VOTE REQUIRED</p> <ul style="list-style-type: none"> ICS.04.18 Community Health Center Client Rights and Responsibilities ICS.04.16 Community Health Center - Feedback and Complaint Policy <p><i>Brieshon D'Agostini, Quality & Compliance Officer</i></p> <p><i>Kimmy Hicks, Quality & Compliance Project Manager</i></p>	<p>Community Health Center - Feedback and Complaint Policy</p> <p>Edits/Comments:</p> <ul style="list-style-type: none"> The purpose of this policy is to set requirements and guidelines for various ways that clients can submit feedback to the health center staff. They will review, respond, and document. This is a requirement by The Joint Commission, HRSA, County Policy, and Office of Civil Rights (OCR). The quality team has reviewed the changes with the relevant stakeholders and are seeking board approval. Updated highlights include clarification. Quality will manage complaint escalation after the health center manager has reviewed the complaint. Client complaints can be made online using the online form. Requires health center management to enter all complaints into the complaint software system RLDatx within 5 working days. No additional implementation/training needed. The Board Chair requested understanding from the Quality and Compliance Project Manager whether current practice for managing complaints is done through the quality manager from insurance as opposed from the patient survey? <ul style="list-style-type: none"> The Quality and Compliance Project Manager did confirm this is current practice. There will no longer be complaints pulled from satisfaction surveys. The Board Chair sought out clarity to ensure documentation of these complaints will be collected from these surveys. The Quality and Compliance Project Manager did confirm that this will still be taking place. It is not logged as an official complaint. It will be logged in the survey reports that management reviews. <p>Addition :</p> <ul style="list-style-type: none"> None. 	<p>Motion to approve: Brenda Chambers Second: Monique Johnson</p> <p>Yays: 7 Nays: 0 Abstain:0</p> <p>Decision: Approved <i>Voted unanimously.</i></p>

<p>CHCB 2026 Calendar - VOTE REQUIRED</p> <p><i>Anirudh Padmala, Interim Executive Director</i></p>	<p>Edits/Comments:</p> <ul style="list-style-type: none"> • The calendar hosts both public meetings and executive committee meetings. • Public meetings are listed as green. • Executive committee meetings are listed in orange. • In the month of May there is a slight schedule change with our public meeting set for May 11th, 2026 and the executive committee will be moved to May 18th due to the original date landing on a holiday (<i>May 25th, 2026</i>). • More discussion will occur regarding this calendar with the executive committee. • The Board Chair asked for clarification that this rendition of the calendar to only include public and executive meetings. • The Board Chair made a request to start the calendar starting on Monday rather than Sunday. <p>Addition :</p> <ul style="list-style-type: none"> • None 	<p>Motion to approve: Patrick Thomas Second: Monique Johnson</p> <p>Yays: 7 Nays: 0 Abstain:0</p> <p>Decision: Approved Voted unanimously.</p>
<p>Executive Officer Election: Chair</p> <p><i>Tamia Deary, CHCB Chair</i></p>	<p>Edits/Comments:</p> <ul style="list-style-type: none"> • The Board Chair informed everyone that the nominating committee recommended Dani Slyman as Chair. Dani has withdrawn her nomination as she does not have the capacity to serve in this role at this time. • Brenda Chambers has self nominated herself for the Board Chair role. <ul style="list-style-type: none"> ○ Brenda is a dedicated collaborator, coalition builder, and consumer of the health center. ○ Brenda intends to ensure that the board fulfills its governance duties, ensuring compliance with federal and state regulations, and maintaining financial oversight of the health center. ○ Brenda will foster collaboration, trauma and healing centered approaches, a commitment to diversity, equity, inclusion and belonging among board members, and build relationships with the county commissioners. ○ The new Board Chair has been voted as Brenda Chambers. • No member at large nominations at this time. 	<p>Yays: 4 Nays: 0 Abstain:3</p> <p>Decision: Approved</p> <p><i>Tamia Deary: Abstain Brenda Chambers: Yes Monique Johnson: Abstain Bee Velasquez: Yes Darrell Wade: Abstain Patrick Thomas: Yes Susana Mendoza: Yes</i></p>

<p>Executive Officer Election: Secretary <i>Tamia Deary, CHCB Chair</i></p>	<ul style="list-style-type: none"> Monique Jonshon has been recommended by the nominating committee as the new secretary. <ul style="list-style-type: none"> Monique is a Portland native and current board member who serves on the Privacy, Security & Trust, Quality, and the chair for strategic planning committee. Monique has a background in social services, education, real estate, and is passionate about closing disparities and promoting equity in housing and health care. Monique is also the founder of Full of Joi Group, supporting children's success and community resources. The new Secretary has been voted as Monique Johnson. No member at large within this candidacy. <p>Addition :</p> <ul style="list-style-type: none"> None. 	<p>Yays: 6 Nays: 0 Abstain:1 Decision: Approved</p> <p><i>Tamia Deary: Yes</i> <i>Brenda Chambers: Yes</i> <i>Monique Johnson: Yes</i> <i>Darrell Wade: Yes</i> <i>Patrick Thomas: Yes</i> <i>Susana Mendoza: Yes</i> <i>Bee Velasquez: Abstain</i></p>
<p>New Board Member Election - VOTE REQUIRED <i>Bee Velasquez, Nominating Committee Chair</i></p>	<p>John Schlosser</p> <ul style="list-style-type: none"> Community Member with Legal Experience <p>Elise Schumock</p> <ul style="list-style-type: none"> Consumer member of the North Portland Health Center <p>Christine Palermo</p> <ul style="list-style-type: none"> Community Member with Healthcare Experience <p>Yalila Alcaraz</p> <ul style="list-style-type: none"> Consumer of Mid County Health Center 	<p>Yays: 7 Nays: 0 Abstain: 0 Decision: Approved <i>Voted unanimously</i></p>

Monthly Financial Report

Hasan Bader, Finance Manager

Highlights Include:

- YTD Revenue: For the period ending October 31st, 32% of the budget was collected.
- YTD Expenditure: For the period ending October 31st, 30% of the budget was collected.
- We have a surplus of \$4,245,298 within the budget.
- The fiscal target is to remain below 33% of the budget.
- Continuation of withdrawals from the primary care grant 330 at \$800,00 a month. Withdraws are one month behind.
- The Primary Grant 330 ends December 31st and attempts to withdraw the entire amount will be taking place.
- The Primary Grant 330 has withdrawn 27% of the grant thus far which ensures our target for this fiscal year.
- There were no COVID or ARPA grants for this fiscal year.
- Health Center Fees:
- There is currently a budget of \$167,028,592.
- This equates to 33% of the budget which is on target for the first four months.
- YTD 32% of the budget has been collected for revenue.
- Contracts are 34% of the budget.
- Personnel is currently at 30% of the budget which is below the target percentage.
- There is currently savings in the personnel budget.

Materials and Services:

- Currently 34% of the budget is used which is on target.
- Internal services are at 26% of the budget.
- In the month of October we didn't collect incentive checks.
- Ended the month of October with a deficit of \$244,000.
- Currently at 4.25 million dollars in the black.
- Review of program income which include fee for service visits and pharmaceuticals.
- In the month of October 14.35 million dollars collected in visit fees.
- Self pay client fees averages at \$29,000 collected each month.

- No issues or large changes with indirect expenses for the month of October.
- Indirect expenses are within the budget with no concerns.
- YTD for indirect services are at 27.5% of the budget which is below budget.
- Processed two budget modifications this month.
- Started with \$217,000,000 within the budget and now with the budget modification the budget is now at \$216.88 million due to state funding and grant removal.

Average Billable Visits:

- Uninsured visits for primary care and dental have been low this year.
- An incline will occur in the new year that visits will rise due to a close of the Healthier Oregon grant.

Payer Mix for Primary Care

- The largest payer is Care Oregon.
- Care Oregon was 71% of patient visits
- Trillium was 6% of patient visits.
- Commercial payment was 5% of patient visits.
- Self pay was about 5% of patient visits.
- The payer mix has remained consistent.

CCO Assigned Patient Engagement

- Care Oregon has 48,149 assigned clients in October.
- We currently have 29,000 engaged clients meaning they had one visit in the last 12 months.
- The engagement rate is 60%.
- Trillium had 14,600 assigned clients in October.
- Engaged clients are about 3,184 meaning they had one visit in the last 12 months.
- The engagement rate is 22.74%.
- The Board Chair requested that the final slide include that the Community Health Center Board approves the budget.

<p>Q3 Complaints & Incidents <i>Kimmy Hicks, Quality & Compliance Project Manager</i></p>	<p>Highlights:</p> <ul style="list-style-type: none"> • 68 incidents over the course of three months. • 45,267 visits total occurred during the last three months. This is meaningful as this denotes the amount of incidents occurred. • The greatest type of incident seen are suicide ideation and behavior continues to be prevalent. • The current risk types include suicidal ideation and behavior, provision of care, medication and fluid. • 25 patients offered feedback classified by department to include dental and medical. • Feedback issues was based on the following: <ul style="list-style-type: none"> ○ Accessibility ○ Attitude/ Courtesy ○ Care/ Treatment ○ Communication ○ Coordination & Continuity of Care ○ Environment ○ Safety ○ Service • Patient demographics: 27,946 patients currently served. 	
<p>UDS Highlights <i>Alexander Lehr O'Connell, Senior Grants Manager</i></p>	<p>Highlights:</p> <ul style="list-style-type: none"> • HRSA's system to collect and compare data from all health centers. • Annual UDS report that all health centers submit to HRSA every year to show the services provided, populations served, patient outcomes, and some financial data. • In late Summer, HRSA publishes the full data sets. • Typically this data is shown in August but due to circumstances at the federal level we are able to see the data today. • The Board Chair made a request for the Senior Grants Manager to include a dashboard in his summary that contains metrics that the board can pull from. <p>Clinical Quality Measures</p> <ul style="list-style-type: none"> • 68% of patients are in early entry into prenatal care. 	

	<ul style="list-style-type: none"> • 8% of patients are low birth weight. Lower is better as we want healthy babies. • 68% of patients are controlling high blood pressure. Above average. • 77% of patients are getting HIV screening. Top quarter of performance, above the national average. • 83% of patients receive statin therapy for Cardiovascular Disease. This is above the national average. <p>Demographics</p> <ul style="list-style-type: none"> • Data showcasing served low income clients. <ul style="list-style-type: none"> ○ 47% of our clients are best served in a language other than English. ○ 69% are 100% FPL and below ○ 101-150% FPL ○ 151-200% FPL ○ Over 200% FPL 	
<p>2025 Quality Committee Accomplishments</p> <p><i>Susana Mendoza, CHCB Secretary and Quality Committee Chair</i></p>	<p>Highlights:</p> <ul style="list-style-type: none"> • The Board Chair shared gratitude for Susana Mendoza for her efforts of self advocacy with the board as well as chairing the Quality Committee. • The Quality Committee Chair shared her appreciation for the patience of her team, board, and everyone that participated in this work of the Quality Committee. She further expressed the hope that the new quality committee will continue the work and carry on the values they worked on. The Committee Chair expressed support for the Interim Executive Director, conveying appreciation, and encouraging the board to offer support. <p>The committee has accomplished</p> <ul style="list-style-type: none"> ○ 11 meetings ○ 3 policies reviewed ○ 249 patient safety incidents reviewed ○ 2 access Reports ○ 2 UDS Reports ○ 2 Clinical Quality Reports ○ 3 Quality Improvement Projects ○ 1 Annual Quality Management Plan ○ 4 Patient Survey Reports ○ New purpose, vision, and values. 	

	<ul style="list-style-type: none"> ○ Continuous improvement on quality report-outs ○ UDS Annual Submission Improvements <ul style="list-style-type: none"> ● Appreciation was shared for Susana Mendoza for leading this committee and serving as committee chair. 	
Board Committee Updates CHCB Committee Chairs	Highlights: <ul style="list-style-type: none"> ● None. 	
Executive Director Strategic Updates Anirudh Padmala, Interim Executive Director	Executive Director Strategic Updates Anirudh Padmala, Interim Executive Director Highlights: <ul style="list-style-type: none"> ● Celebrating our Staff of 15, 20, 25, 30, 35 years of service.. 	
Board Discussion (Closed Executive Session) Tamia Deary, CHCB Chair	Board Discussion (Closed Executive Session) Tamia Deary, CHCB Chair Per ORS 192.660(2), the following topics could be discussed: <ul style="list-style-type: none"> ● (i) To review and evaluate the employment-related performance of the chief executive officer of any public body, a public officer, employee or staff member who does not request an open hearing. ● (p) To consider matters relating to cyber security infrastructure and responses to cyber security threats. ● (d) To conduct deliberations with persons designated by the governing body to carry on labor negotiations. 	Motion to approve: Brenda Chambers Second: Monique Johnson Yays: 10 Nays: 0 Abstain: 0 Decision: Approved Voted unanimously.

Meeting Adjourns	7:57 PM	
------------------	---------	--

Signed: _____ Date: _____

Susana Mendoza, Secretary

Signed: _____ Date: _____

Tamia Deary, Board Chair


Scribe: // Email: //Mavis Sanchez-Scholes, mavis.sanchezscholes@multco.us

SUMMARIES



**community health
center board**

Multnomah County

A stylized graphic on the left side of the slide. It features two dark green mountain peaks with white outlines. Below the mountains is a dark green wavy band representing a forest or a body of water. At the bottom is a blue wavy band representing water. The entire graphic is composed of solid colors and simple geometric shapes.

Monthly Primary Care Clinical Quality Metrics Performance Update

Charlene Maxwell
Deputy Medical Director

2025 December ICS Primary Care

Key Clinical Quality Metrics for 2025



Controlling Hypertension

Of our patients with high blood pressure seen in the past year, was their last blood pressure at goal?



Diabetes Management

Of our patients with diabetes, is their lab value for blood sugar control in the 'controlled' range?



Depression Screening and Follow up

Of our patients seen in the last year, were they screened for depression, and if at risk did they receive appropriate follow up?



Screening for Substance Use Disorder and follow up for high risk

Of our patients seen in the last year, were they screened for substance use disorder, and if at risk did they receive appropriate follow up?



Well Child Checks ages 3-6

Did all of our patients ages 3-6 receive a well child check this year?

Key Clinical Quality Metrics for 2025 and 2026



Controlling Hypertension

Of our patients with high blood pressure seen in the past year, was their last blood pressure at goal?



Diabetes Management

Of our patients with diabetes, is their lab value for blood sugar control in the 'controlled' range?



Depression Screening and Follow up

Of our patients seen in the last year, were they screened for depression, and if at risk did they receive appropriate follow up?



Screening for Substance Use Disorder and follow up for high risk

Of our patients seen in the last year, were they screened for substance use disorder, and if at risk did they receive appropriate follow up?

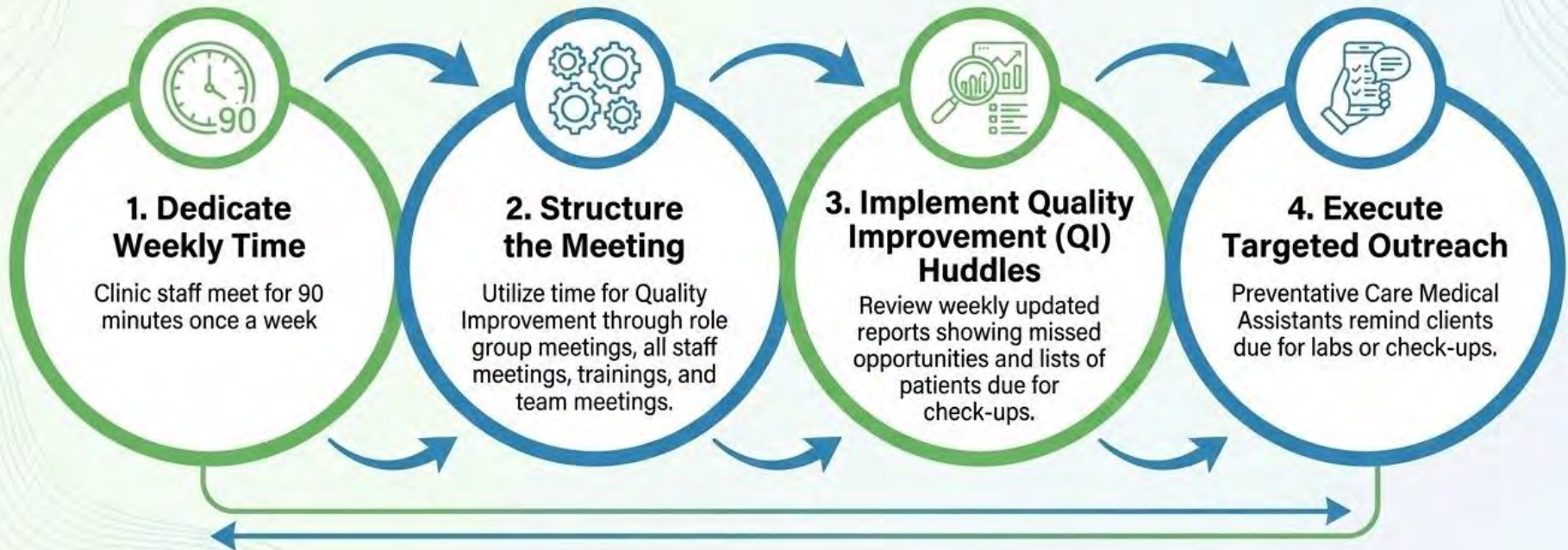


Well Child Checks ages 3-6

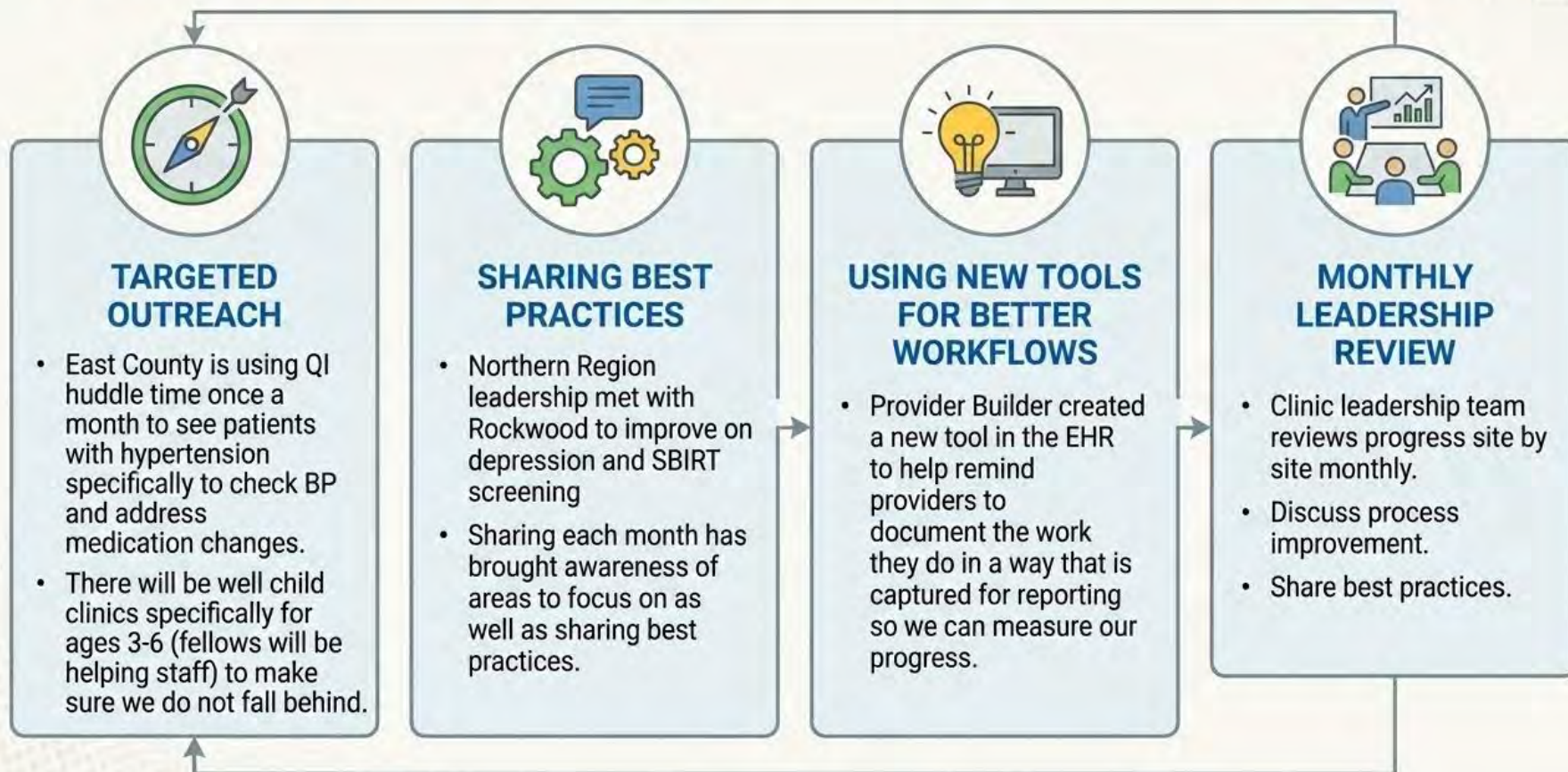
Did all of our patients ages 3-6 receive a well child check this year?

How to Lead Quality Work: A Process Guide

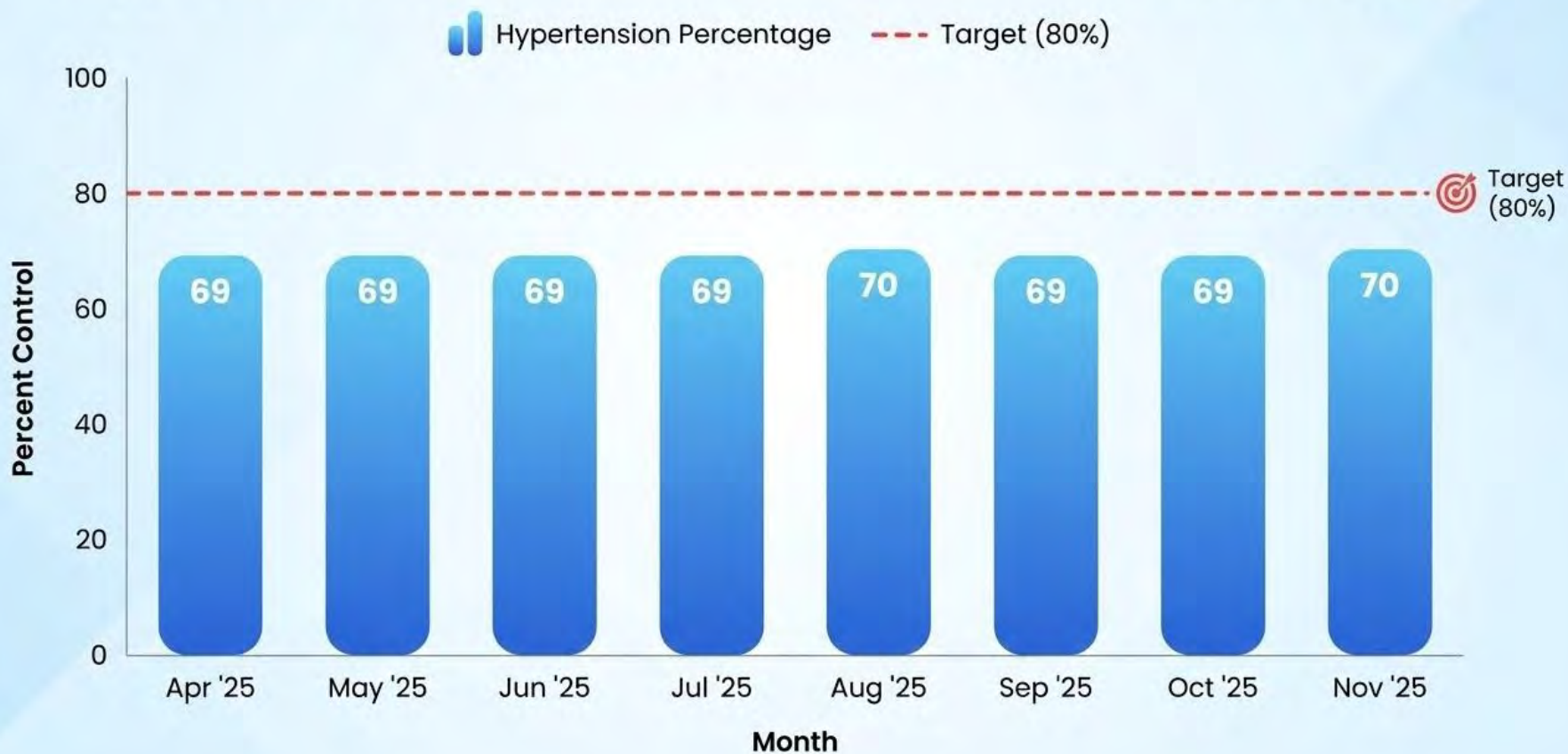
Translating Clinic Staff Meetings into Quality Improvement



CLINICAL QUALITY APPROACH & LEADERSHIP REVIEW



Hypertension Control April 2025– November 2025



PC Diabetes Control over Time (lower is better)

DM HbA1c Control (lower=better) --🎯 DM Target (21.1%)



Depression Screening Rate Vs Target

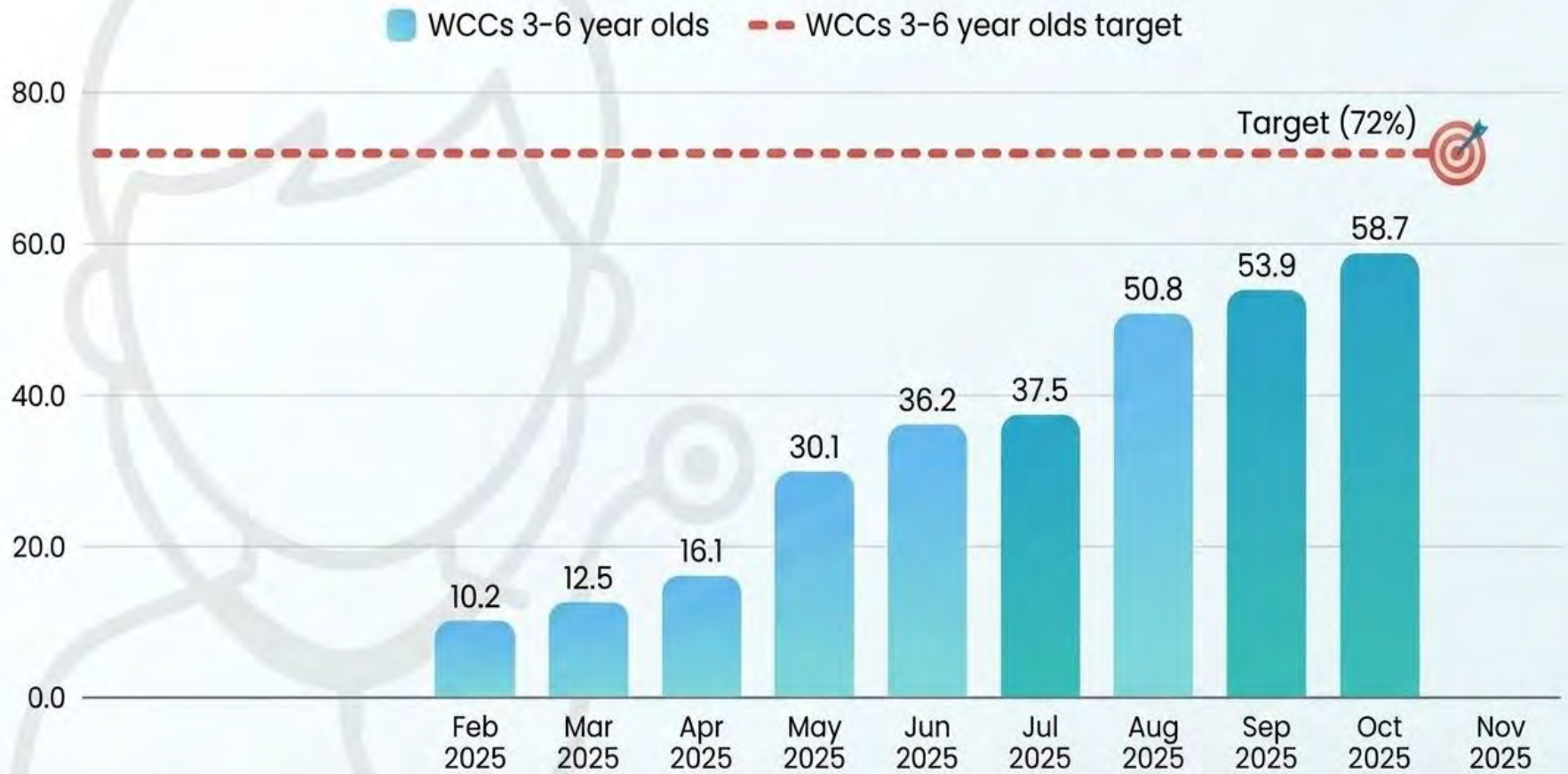
Screening Rate Target (80.5%)



Substance Use Screening Rate vs Target



Well Child Checks (Ages 3-6) Performance vs. Target



Northeast Health Center Diabetes Control 2024-2025



Key Takeaway: HbA1c control shows a positive downward trend, moving closer to the target, particularly following the "Group Visit Planning" and 'Kick off' phases. Continuous monitoring and engagement are crucial for sustained improvement.

Questions?

Contact for follow up:

Charlene Maxwell, Deputy Medical Director

charlene.maxwell@multco.us

Q3 2025 Patient Surveys: Trends, Improvements, and Quality Improvement

CHCB Quality Committee

December 15, 2025

Brieshon D'Agostini, Quality & Compliance Officer

Q3 2025 Update // Trends Summary

★ Improvement ✓ Steady 🔍 Monitoring

Trends: statistically significant differences in scores when analyzed by multiple factors, such as: number of surveys completed, steady changes in scores over time, large variation over a short time, differences for specific demographic groups, etc.

Service		Measure	Trend
Health Center PC, Dental, IBH <i>n = 1187 (surveys completed)</i>	★	Overall scores	Increases in nearly all measures
	★	Appointment wait	3.9% increase from previous quarter
	★	Test results communication	4% increase from previous quarter
	★	Portal (MyChart) satisfaction	3.2% increase over previous quarter 8.1% over the national benchmark!
		Ease of connecting to care team (video)	7.1% decrease from previous quarter <ul style="list-style-type: none">• Low denominator (high variability)• Within typical variation
		NEW interpretation & written materials in preferred language	Will take at least several quarters to analyze

BOLD: Closely tracked measures

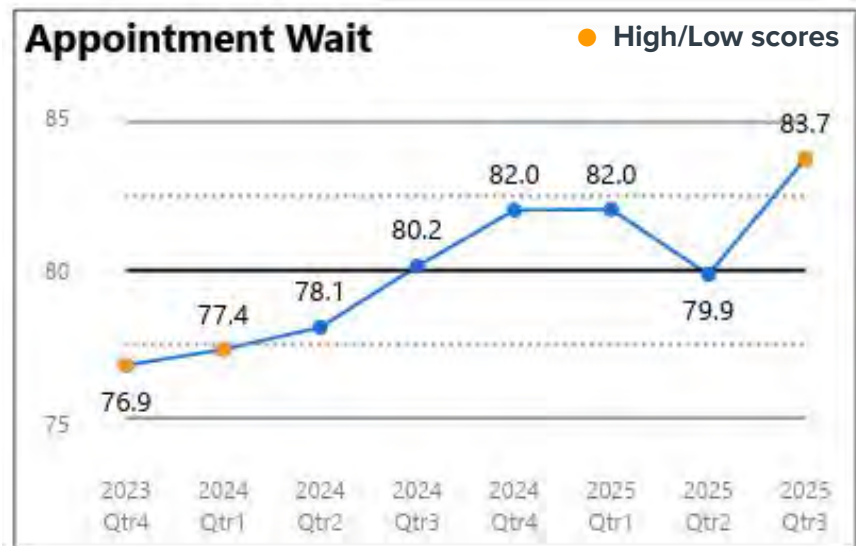
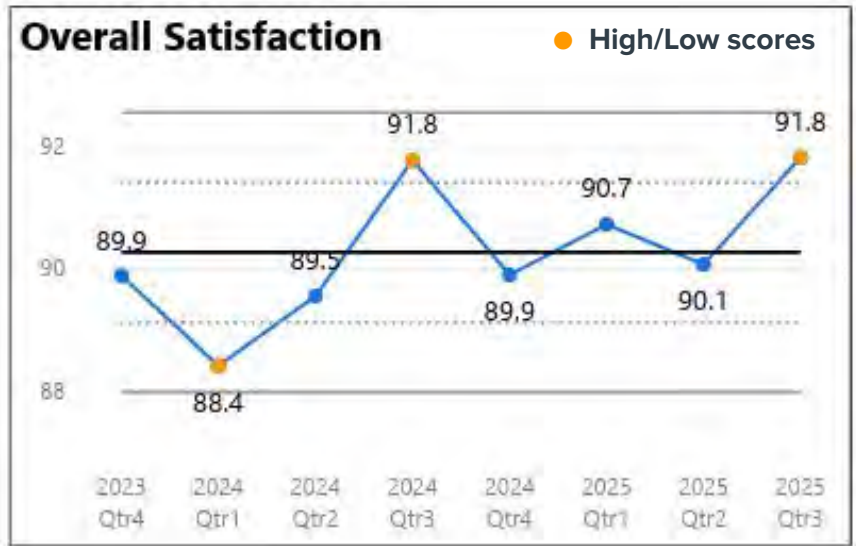
Q3 2025 Update // Trends Summary

★ Improvement ✓ Steady 🔍 Monitoring

Trends: statistically significant differences in scores when analyzed by multiple factors, such as: number of surveys completed, steady changes in scores over time, large variation over a short time, differences for specific demographic groups, etc.

Service		Measure	Trend
Primary Care <i>n</i> = 743	★	Overall scores	Increase over previous quarter for nearly all measures
		Appointment wait	3.8% increase over last quarter (slightly below benchmark)
	🔍	Appointment wait benchmarks	2.1% below benchmark

BOLD: Closely tracked measures



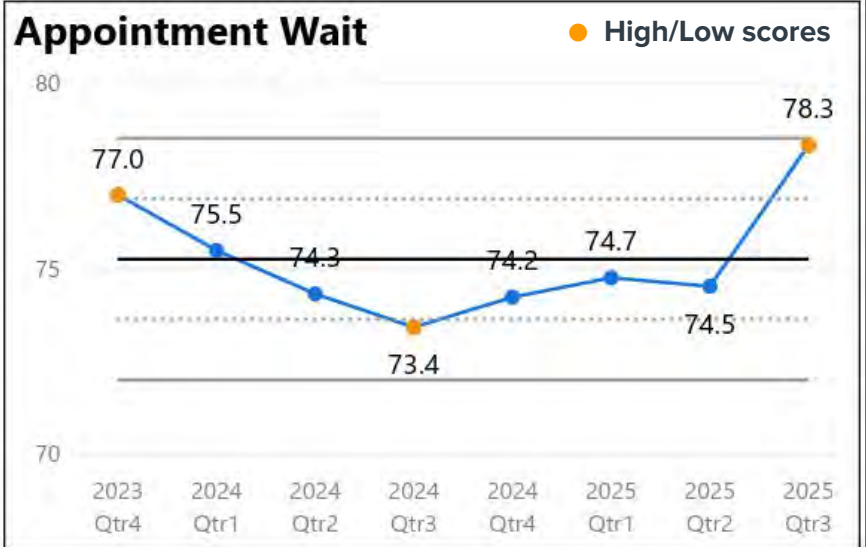
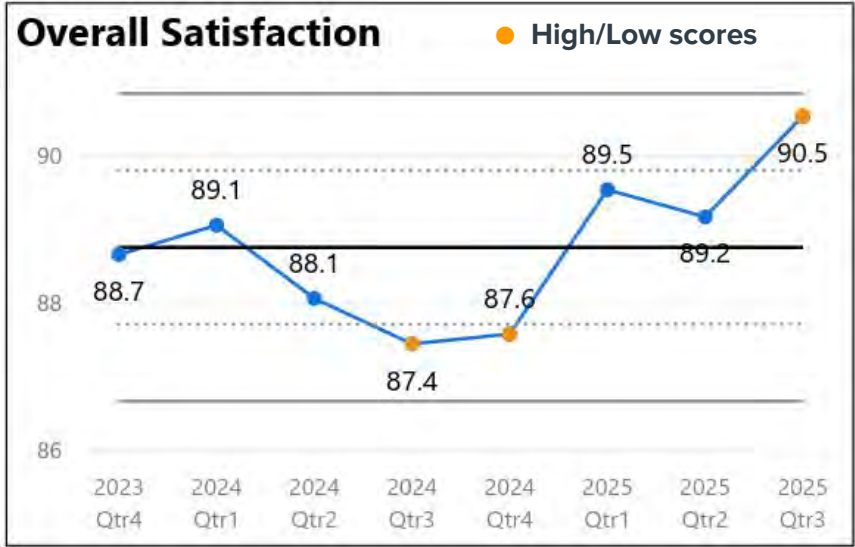
Q3 2025 Update // Trends Summary

★ Improvement ✓ Steady 🔍 Monitoring

Trends: statistically significant differences in scores when analyzed by multiple factors, such as: number of surveys completed, steady changes in scores over time, large variation over a short time, differences for specific demographic groups, etc.

Service		Measure	Trend
Dental <i>n</i> = 375	★	Overall scores	Increase over previous quarter for nearly all measures
		Appointment wait improvement	3.8% increase over last quarter
	🔍	Appointment wait benchmarks	4.4% below benchmark

BOLD: Closely tracked measures



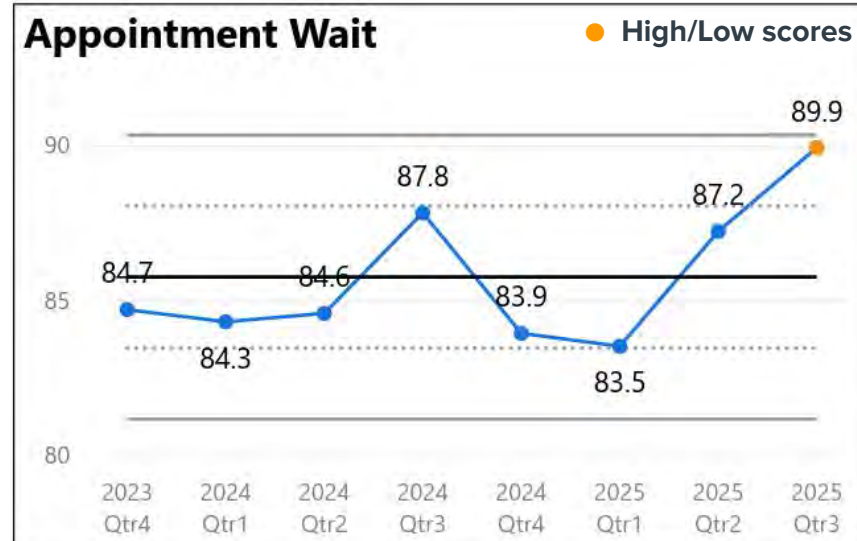
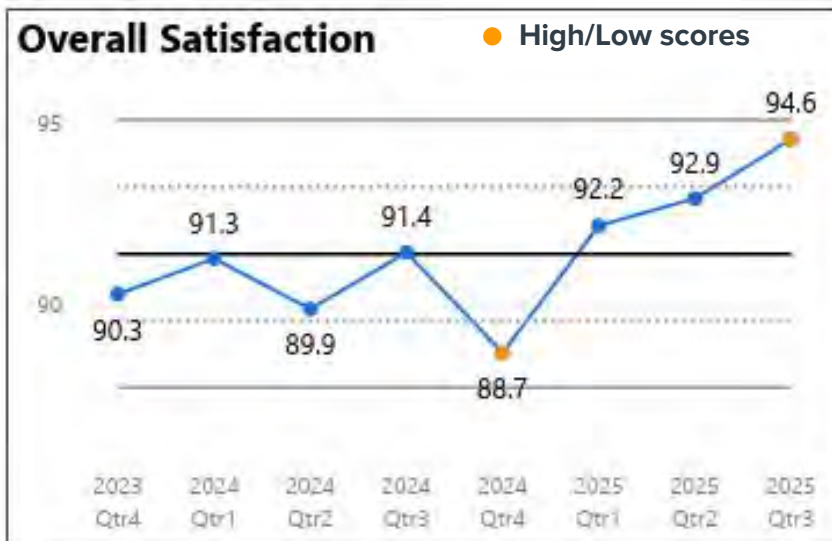
Q3 2025 Update // Trends Summary

★ Improvement ✓ Steady 🔍 Monitoring

Trends: statistically significant differences in scores when analyzed by multiple factors, such as: number of surveys completed, steady changes in scores over time, large variation over a short time, differences for specific demographic groups, etc.

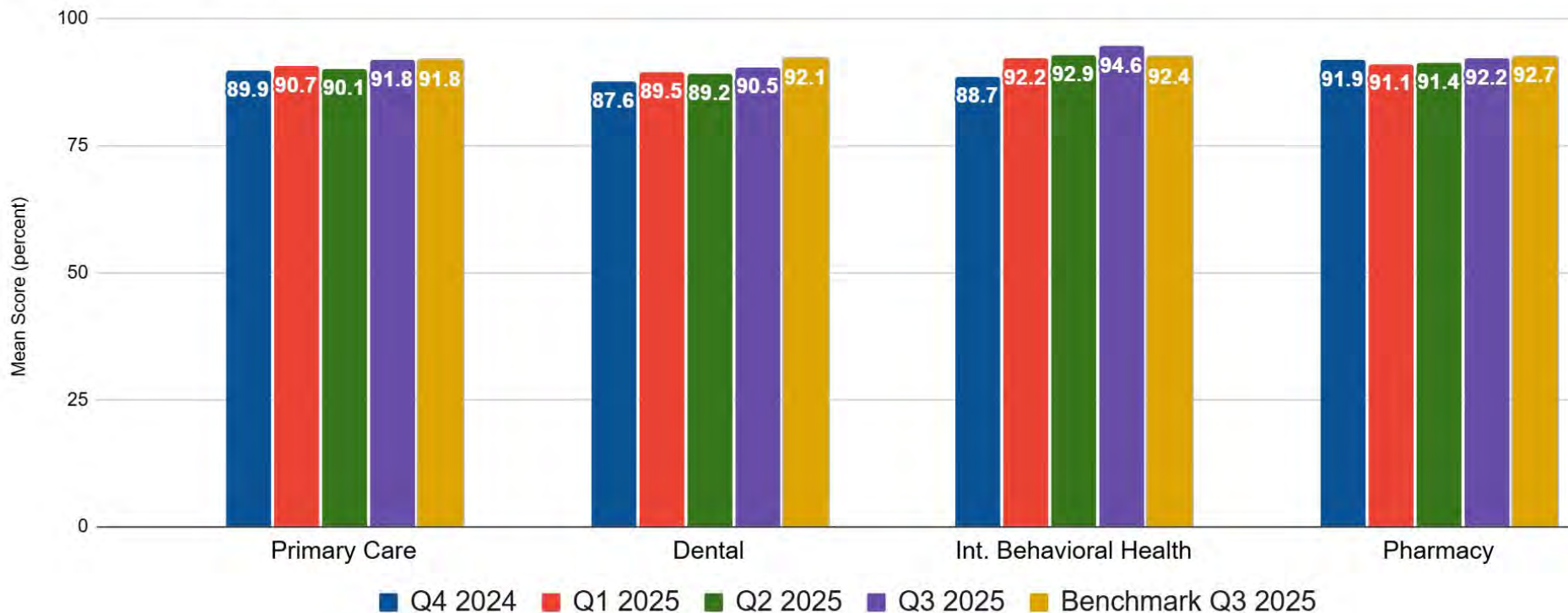
Service		Measure	Trend
Integrated Behavioral Health <i>n</i> = 69	★	Overall scores	Increase over previous quarter for nearly all measures
		Appointment wait	2.7% increase over last quarter & 2.6% above benchmark
		Provider time spent	5.8% increase over last quarter
	✓	Portal (MyChart) satisfaction	4.4% decrease, low denominator, within typical variation

BOLD: Closely tracked measures



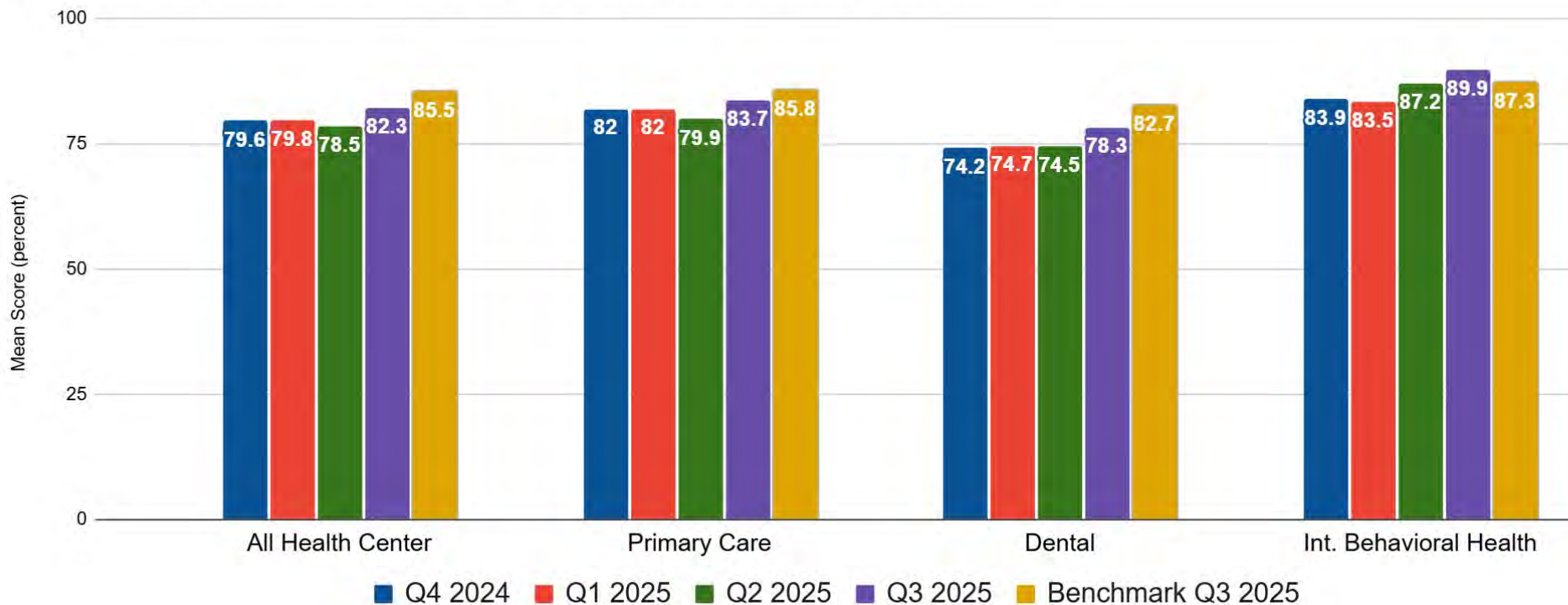
Q3 2025 // Overall Satisfaction By Service Line

Overall Satisfaction



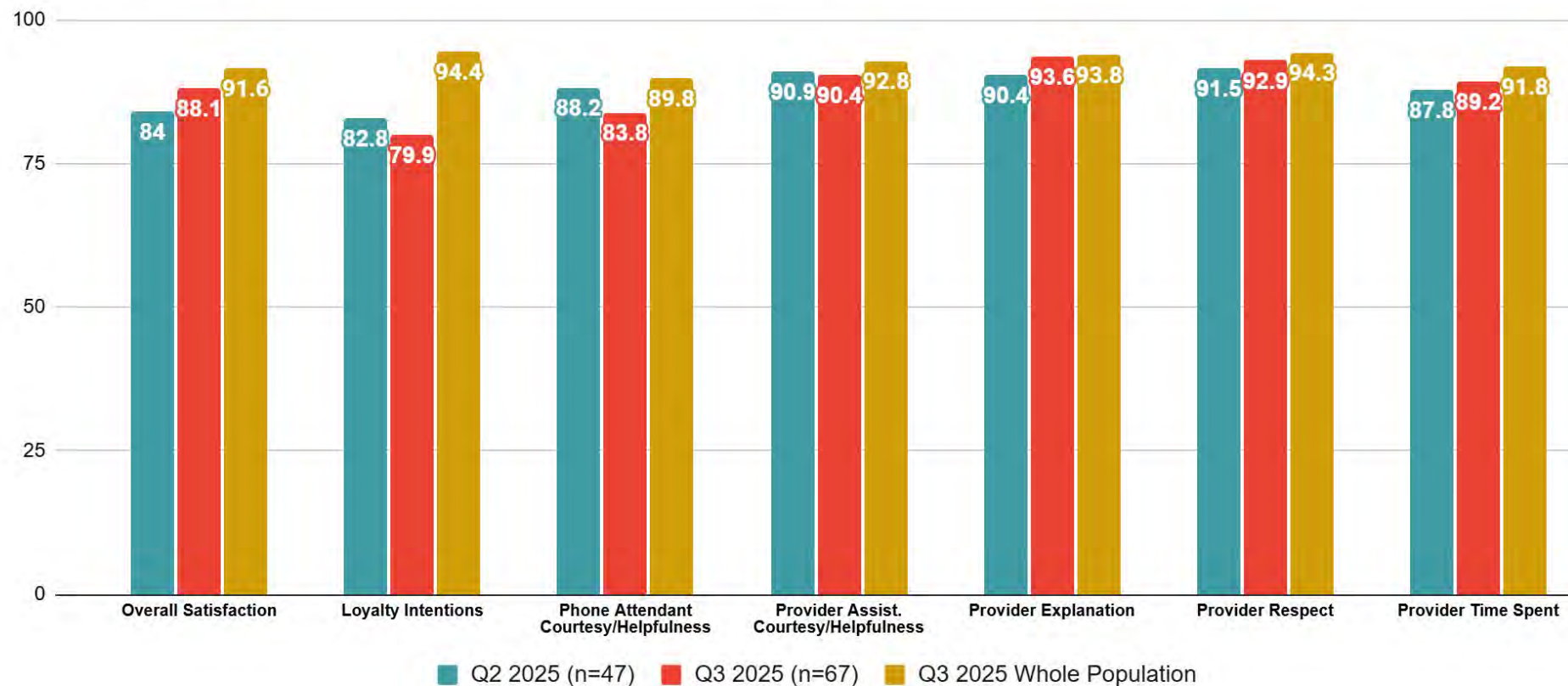
Q3 2025 // Appointment Wait By Service Line

How satisfied are clients with the length of time from scheduling to appointment?



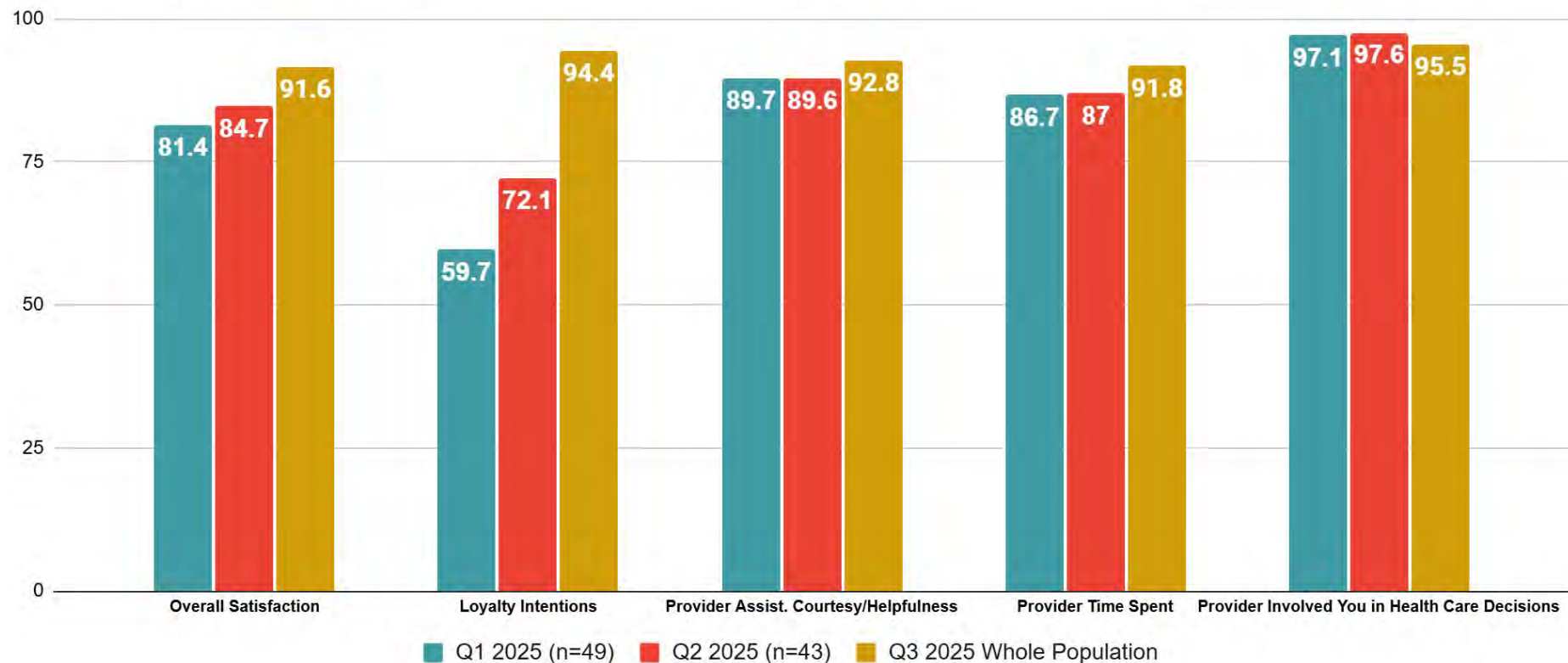
Q3 2025 // Demographic Spotlight

Asian Populations



Q3 2025 // Demographic Spotlight

Cantonese-Speaking Population



Q3 2025 Update // Trends Summary

★ Improvement ✓ Steady 🔍 Monitoring

Trends: statistically significant differences in scores when analyzed by multiple factors, such as: number of surveys completed, steady changes in scores over time, large variation over a short time, differences for specific demographic groups, etc.

Service		Measure	Trend
Pharmacy <i>n=351</i>	★	Privacy of Health Information	Increase of 1.1% over last quarter
	✓	Overall scores	Generally steady over time and within 5% of benchmarks
	✓	Patient told when prescription would be ready	6.4% decrease after 4 quarters of 100% Year-to-date highest in 3 years

BOLD: Closely tracked measures

Patient Told When Prescription Would be Ready



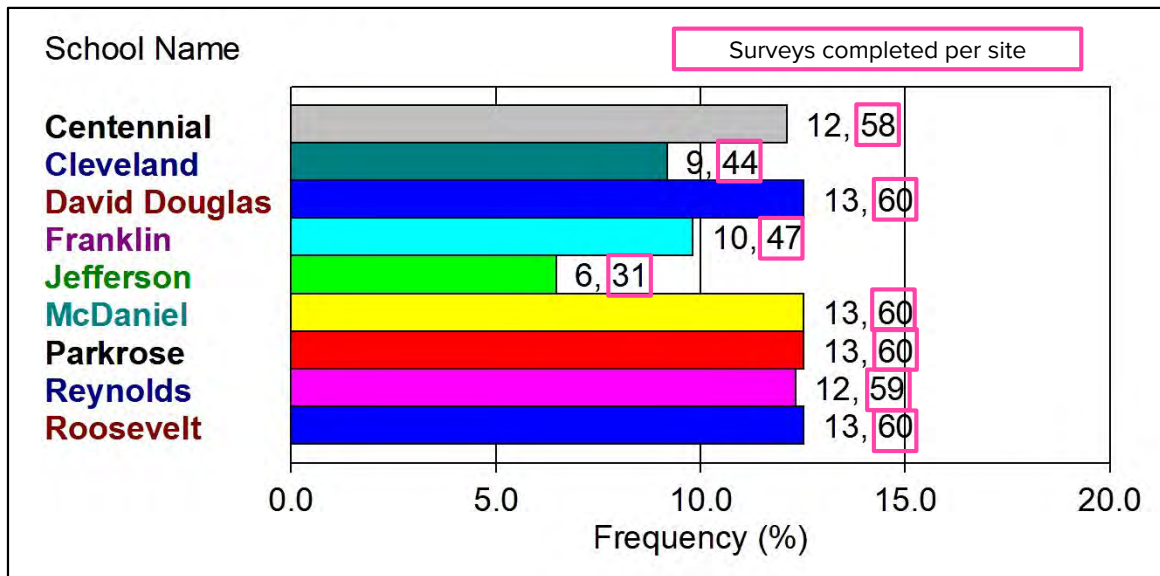
Q3 2025 Update // Trends Summary

★ Improvement ✓ Steady 🔍 Monitoring

Trends: statistically significant differences in scores when analyzed by multiple factors, such as: number of surveys completed, steady changes in scores over time, large variation over a short time, differences for specific demographic groups, etc.

Service	Measure	Trend
Student Health Centers <i>n</i> =435	NEW Overall satisfaction	94.3%
	NEW Given instructions for taking care of health	99.9%

BOLD: Closely tracked measures



Q3 2025 // Comments - Positive

The care was excellent; everything was excellent. The doctor, the staff, and everyone involved in patient care, including the assistant, were all great.

*Primary Care
Survey conducted in Spanish*

The evaluation was great. We were pleased to know that we take good care of my child's teeth, and everything was great. The staff is very friendly and polite.

*Dental
Survey conducted in Russian*

The best part was coming to conclusions, plans, and having a better understanding of myself when visiting a therapist. It really helps me gather my thoughts and feelings.

*Student Health Centers
Survey conducted in Spanish*

Very good interpreter; he did everything 100%. I have been going to that clinic for 21 years. They have always treated me and my children well. All the staff, from the moment I walked in, were very good.

*Integrated Behavioral Health
Survey conducted in Spanish*

All medications were ready, and everything about the medication was explained clearly and was easy to understand.

*Pharmacy
Survey language not reported*

Q3 2025 // Comments - Opportunities

The time from when I made the doctor appointment until the actual appointment date was too long.

*Primary Care
Survey conducted in Chinese-Cantonese*

Sometimes I wish to spend more time in the appointments.

*Integrated Behavioral Health
Survey conducted in English*

The appointments are far apart.

*Dental
Survey conducted in Somali*

The waiting time in the exam room was long.

*Student Health Centers
Survey conducted in English*

I don't know why they take so long. I feel they don't have enough staff. There are a lot of people near you when you're at the window. I would like more privacy between patients when they're telling you what your medication is for.

*Pharmacy
Survey language not reported*

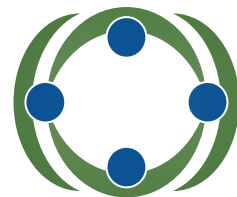
QI Work

- *Primary Care test results workflows (started May 2025)*
- *Primary Care Access:*
 - *Prenatal Optimization Project review*
 - *Access model review*



Executive Director Strategic Updates

- Interim Executive Director
- Operations
- Clinical
- Quality



**community health
center board**

Multnomah County

Community Health Center Board

Health Center Highlights



TO: Community Health Center Board
FROM: Anirudh Padmala, Interim Executive Director & Senior Leadership
RE: Public Meeting Memo - **Monthly Report**
DATE: **January 2026** (previous memos available under public meeting materials on the [CHCB Member site](#))



Executive Director Updates *System level information and updates*

Fiscal Year 2027 Budget	Significant progress is being made in the preparation of the FY 2027 budget. The Community Health Center Board reviewed initial visit projections at the Board Budget Dinner on November 20, 2025. Further prioritization discussions will take place on January 12 at the Board Finance review meeting and during Finance Committee meetings throughout January and early February.
HRSA Compliance: Board Composition	HRSA notified us on December 23rd that the grant condition related to Board composition has been lifted. This successful resolution of the compliance condition is a direct result of the hard work and dedication of the Nominating Committee.



Capital Projects *Facilities updates, high cost projects*


Mid County Capital Evaluation	The project teams completed the community and patient focus groups in December. The project will shift its focus in the next phase of the evaluation to financial and operational estimates, to understand different expansion costs. The CHCB will receive an update on early recommendations by February 2026.
Rockwood Health Center	Central procurement sent an award letter to the 2nd lowest bidder Construction Services Group, Inc on 12/9. We anticipate the contract will be signed in January and an official timeline will be established shortly after.





Strategic Program Updates *Strategic plan/direction of the Health Center*

Federal Policy and Legislative Updates	<p>The Community Health Center is providing guidance and advice on multiple issues of federal policy, including impacts of multiple federal policy proposals. This includes:</p> <ul style="list-style-type: none">• Comments in opposition to proposed changes in Public Charge rules in coordination with Multnomah County, emphasizing the role of primary care providers in assisting with disease prevention and public health protections;• Direct assessment of Oregon legal protections for minor's
---	--

	<p>healthcare decision making after recent CMS publication of a dear colleague letter requesting that health care organizations assure parental rights are upheld;</p> <ul style="list-style-type: none"> • Ongoing documentation of harmful rebate model practices under 340B in coordination with the Oregon Primary Care Association; • Closely tracking possible litigation and protections for gender affirming care access in Oregon, pending new CMS rules. We expect to submit comments in opposition to the proposed rules in coordination with Multnomah County's Government Relations team.
Federal Budget and Shut Down Watch	<p>With Congress returning from its break in January, it is becoming more likely they will miss the January 30 deadline for current federal funding levels. Funding for Labor, Health, and Human Services agencies have not been scheduled for a vote, which contains funding for Community Health Centers and associated provider payment programs. The Community Health Center remains open during federal shut downs, and we will monitor for any changes in grant distribution.</p>

Risk and Compliance Updates <i>Compliance events, major incidents/events updates</i> 	
Rockwood PCPCH Visit	<p>Preparation is underway for Oregon's Patient Centered Primary Care Home clinic visit scheduled for later this month</p>

Quality/Process Improvement <i>Improvement events and activities</i> 	
Clinic Signage	<p>Signs and posters are a useful way to share required and helpful information with clients and staff. The Health Center is starting an assessment of our current state of clinic signage to determine opportunities for improvement.</p>

General Program Updates <i>Program/Service-line specific updates</i> 	
Primary Care	<p>Primary Care will continue to focus on the same clinical quality metrics for 2026: controlling high blood pressure, controlling blood sugar in patients with diabetes, screening and follow-up for depression and substance use disorder, and well-child visits. We are excited to report that we anticipate shared savings from our 2025 Care Oregon Value Based Care contract to support our ongoing Population Health Work.</p>
Integrated Behavioral Health	<p>The integrated behavioral health team is pleased with the progress of our correctional health partnership. In the last two months, we have generated 5 referrals, bringing our total for 2025 to 13. Compared to 8 total referrals in the previous 10 months we are seeing the impact of continuously refining our workflows and expanding patient reach. We</p>

	are committed to increasing our referral numbers in the new year as this important work continues to make an impact.
Dental	<p>In January, we will begin onboarding a new dentist for our downtown Billi Odegaard Dental Clinic. This will allow us to re-open BODC to 5 days/week (anticipated to begin in March).</p> <p>As of January all of our Registered Dental Hygienist positions will be filled (the first time since 2022). Our recruitment for Expanded Practice Dental Hygienists for Fernhill and the mobile clinic is ongoing</p>
Information Systems	The Business Intelligence team is hard at work preparing the annual UDS report to submit to HRSA in early February. The CSI Epic support team is excited to return to full staffing, with the hiring of 6 staff slated to start later in January. We are also working with OCHIN on several large systems upgrade projects as well as internal team improvements to better manage and track all of the requests and issue notices that come to the CSI team.

Community Health Center Board Health Center Highlights



TO: Community Health Center Board
FROM: Anirudh Padmala, interim Executive Director
RE: Public Meeting Memo - **Quarterly KPI Report**
DATE: January 12, 2026

Program	Completed Visits				Average days from scheduling to appointment			
	October	November	December	Total	October	November	December	Total
Medical*	14,240	11,335	13,414	38,989	18.3	19	19.3	18.8
Student Health	1,708	1,444	1,316	4,468	6.3	7.0	7.4	6.9
Dental	5,605	4,299	5,117	15,021	20	20.2	20	20.06

**Includes integrated behavioral health, clinical pharmacy visits, and nurse visits*

Program	Completed Visits			
	October	November	December	Total
PAC Nurse Triage encounter volume	808	783	778	2,369
Refugee Program screenings	20	6	6	32

Program	Percentage of patients filling prescriptions at our pharmacies (Goal=70%)	
	October	November
Primary Care	53%	52%
HSC	50%	48%