



Public Meeting

July 2025



**community health
center board**

Multnomah County

Table of Contents

Agenda

Public Meeting Minutes

June 09, 2025

Summaries

Department & Strategic Updates

AGENDA



**community health
center board**

Multnomah County



Public Meeting Agenda

July 14th, 2025

6:00-8:00 PM

In Person Gladys McCoy 7th Floor, Room 850

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:

Tamia Deary (she/they) – Chair

Kerry Hoeschen (she/her) – Vice Chair

Darrell Wade (he/him) - Treasurer

Brandi Velasquez (she/her/ella) – Member at Large

Susana Mendoza (she/her) - Secretary

Brenda Chambers (she/her) - Board Member

Jose Gomez (el/ellos) - Board Member

Monique Johnson (she/her) - Board Member

Dani Slyman (she/her) - Member at Large

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

- Meetings are open to the public
- There is no public comment period
- Guests are welcome to observe/listen
- 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
6:00-6:10 (10 min)	Call to Order / Welcome <i>Tamia Deary, CHCB Chair</i>	
6:10-6:15 (5 min)	Minutes Review - VOTE REQUIRED June 09, 2025 Public Meeting Minutes <i>Tamia Deary, CHCB Chair</i>	Board reviews and votes
6:15-6:25 (10 min)	Legal Support - VOTE REQUIRED <i>Tamia Deary, CHCB Chair</i>	Board reviews and votes
6:25-6:40 (15 min)	Q1 Complaints & Incidents <i>Brieshon D'Agostini, Quality & Compliance Officer</i>	Board reviews
6:40-6:55 (15 min)	Break	
6:55-7:05 (10 min)	Monthly Financial Report <i>Hasan Bader, Finance Manager</i>	Board receives updates
7:05-7:10 (5 min)	Committee Updates	Board receives updates
7:10-7:15 (5 min)	Department Updates/Strategic Updates <i>Anirudh Padmala, Interim Executive Director</i>	Board receives updates



7:15-8:00 (45 min)	Board Discussion (<i>Closed Executive Session</i>) <i>Tamia Deary, CHCB Chair</i> <i>Per ORS 192.660(2), the following topics could be discussed:</i> <ul style="list-style-type: none">• (f) To consider information or records that are exempt by law from public inspection• (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• (o) To consider matters relating to the safety of the governing body and of public body staff and volunteers and the security of public body facilities and meeting spaces• (p) To consider matters relating to cyber security infrastructure and responses to cyber security threats	Board receives updates in an executive session and has discussion <i>Per Oregon Public Meeting Laws, deliberation and decisions may only be made in a public CHCB meeting where a quorum is present through official public votes.</i>
8:00	Meeting Adjourns	Thank you for your participation

PUBLIC MEETING MINUTES



**community health
center board**

Multnomah County



CHCB Public Meeting Minutes June 09, 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

Kerry Hoeschen (she/her) – Vice Chair

Darrell Wade (he/him)- Treasurer

Brandi Velasquez (she/her/ella) – Member at Large

Susana Mendoza (she/her) - Secretary

Brenda Chambers (she/her) - Board Member

José Gómez (el/ellos) - Board Member

Monique Johnson (she/her) - Board Member

Dani Slyman (she/her) - Member at Large

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

Board Members Excused/Absent: Darrell, Brenda

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
Call to Order / Welcome Tamia Deary, CHCB Chair	Meeting called to order at 6:03pm. We <u>do</u> have a <u>quorum</u> with 7 members present Spanish Interpreters: Victor and Rosie			
Minutes Review - VOTE REQUIRED Tamia Deary, CHCB Chair	April 29, 2025 Special Public Meeting Minutes Edits/Comments: No edits May 12, 2025 Public Meeting Minutes Edits/Comments: No edits	Motion to approve April 29th, 2025: Kerry Second: Monique Yays: 7 Nays: 0		

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
		Abstain: Decision: Approved Motion to approve May 12, 2025: Kerry Second: Monique Yays: 7 Nays: 0 Abstain: Decision: Approved		
SHC Client Eligibility Criteria Policy - VOTE REQUIRED <i>Alexandra Lowell, Student Health Center Program Manager</i>	Alexandra Lowell, presented on Client Eligibility Review and Policy that was previously approved in 2022. <ul style="list-style-type: none"> • The policy does not contain any changes or recommended updates. • Policy is needed for a review and vote per standard ICS practice • Eligibility for SHC services remain the same 	Motion to approve: Dani Second: Monique Yays: 7 Nays: 0 Abstain: 0 Decision: Approved		
Patient Satisfaction 2024 Year-End Report <i>Linda Niksich,</i>	Linda Niksich, presented the Patient Satisfaction Year End 2024 report out Highlights over the last 2 years:	Jose and Linda to have a further conversation to ensure all		

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
<p><i>Program Specialist</i> <i>Senior</i></p>	<ul style="list-style-type: none"> Overall satisfaction (includes Primary care, Integrated Behavioral Health and Dental combined) fluctuated between 88.1% and 89.3% and trending upwards in Pharmacy surveys added in 2023 and overall satisfaction 91% Loyalty Intentions fluctuated between 93% and 94% Referral Intentions trending in the positive direction at 87% Appointment & Provider Wait Trends <ul style="list-style-type: none"> Provider wait time has been relatively the same fluctuating between 87.7% and 88.5% Appointment wait times have been trending down <ul style="list-style-type: none"> Convenient Care - new project being piloted at NEHC that added a provider, with an open schedule, for symptomatic patients to see within 1-3 days Anticipate expanding the project in the next few months Patient narratives, opportunities for improvement and kudos were shared <p>Questions/Comments</p> <p>Question: Jose- Is it possible for the percentage shown to identify each year of the gaps? What's the 7% to fill the gap for the 100%?</p> <p>Answer: National benchmarks are how we compare ourselves with the rest of the country's FQHC's, or by region.</p> <p>Comment: Susy - Comparing our health center to other HC's in future meetings would like more information on. We should focus on our county and not compare it to other counties as we might not compare as good. We should compare each of our clinics.</p> <p>Linda will be comparing data by clinic - this presentation was a 2024 year in review, quarterly presentations with that data, will be presented at future meeting</p>	<p>information given and if a basic summary could be helpful for Jose</p>		

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
Workforce Development Fellowship Program Charlene Maxwell, Deputy Medical Director	Charlene presented on the workforce development fellowship program (with more detail following the Advanced Practice Clinician (APC) fellows presentation that was given at the April Public meeting) <ul style="list-style-type: none"> • Program started in 2022 • APC is a 1 year post graduate, clinical training program designed to prepare primary care providers • Currently in year 3 <ul style="list-style-type: none"> ○ 10 applicants ○ 6 hired • Process in recruiting for year 4 <ul style="list-style-type: none"> ○ Class to start in September ○ 17 candidates with 6 spots available ○ Recruitment expanded to larger area ○ Languages access is exceeding with current applicants; have multiple applicants that are bilingual and trilingual as well as speak English • Model is still being refined and remodeled to ensure success • More visits have trended upwards and more access to provide care to patients • Turnover rate is reducing since program has started • Feedback and impact is positive 			
NWRPCA Conference Takeaways Board Members	6 Board members that attend the NWRPCA Spring Summit in Anchorage, Alaska gave takeaways and feedback with their experience			

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
	<p>Comments/Feedback:</p> <p>Bee - Conference was educational. Sessions on migrant health and how community health centers were started were very informative and interesting. Overall it was a great experience.</p> <p>Susy - It was pleasant. I enjoyed meeting with everyone in person that are all positive towards the health centers. Interesting to meet with individuals that are continuing to learn . I was happy our interpreters, Victor and Felipe, that supported us were able to travel with us to the conference.</p> <p>Dani - Enjoyed conference. Highlights were having the opportunity to network and build new relationships and hear what's going on in other health centers. Meeting with contractors and finding out what is working and what is a good direction to set in. The AI sessions were interesting. I enjoyed meeting and engaging with staff that were in attendance.</p> <p>Tamia - Highlights were; roundtable discussions with other board chairs and executive directors surrounding the federal landscape and concerns on reduced access for clients. Meeting with Medcurity, lawyers and contractors were interesting and fun to talk to. Interpretation support for Susy was great. I loved the view from my hotel.</p>			
Break				

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
Monthly Financial Report <i>Hasan Bader, Finance Manager</i>	<p>Monthly Financials Update Hasan Bader</p> <ul style="list-style-type: none"> Monthly financials available in April <p>Hasan Bader presented the budget. Highlights include:</p> <ul style="list-style-type: none"> By April, we are 83.3% through the fiscal year 80% YTD Revenue 78% YTD Expenses \$2.9 million net gain Collected \$17.8 million revenue between visit fees and grants <ul style="list-style-type: none"> Spent \$18.4 million 184,000 in the red YTD \$2.8 million in the black Personnel costs continues as largest factor for expenditure, due to vacancies and hiring contracted staff \$14.8 in fee revenue collected \$4.34 million in indirect expenses <ul style="list-style-type: none"> Spent \$1.7 mil in invoices Processed 4 budget modifications <ul style="list-style-type: none"> \$6million to cover Fernhill expenses Remaining ARPA funds Expanded Mental Health Services Justice Involved Average Billable Visits <ul style="list-style-type: none"> SHC ~ 300 PC ~ 460-470 Self pay percentage about 4-5% Payor mix <ul style="list-style-type: none"> Care Oregon 70% Trillium 8% Commercial 8% CCO patient engagement - <ul style="list-style-type: none"> Large percentage with Care Oregon average visits per client/engagement rate is 60.60% 			

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
	<ul style="list-style-type: none"> Less percentage for Trillium average visits 1 visit per client/engagement rate is 22.3% <p>Questions/Comments: Q: Susy - Does this budget reflect contracts of someone outside including the gaps? A: This includes lab services, staffing services, language services and others we have contracted through line.</p> <p>Q: Susy- Is this attached to the program or are there other contracts to recruit people? Like the APC? A: That is included in the personnel costs.</p> <p>Comment: Jose - Slides can be summarized and limit the amount of detail. Appreciate the presentation and can limit the slides. A: Most of this is covered in the Finance Committee which is an hour. Working on a 1 page summary and can share with the full board.</p>			
Board Committee Updates	<p>Committee Chairs shares their updates for May/June</p> <ul style="list-style-type: none"> Finance - cancelled for June, no updates Quality - No comment from Quality Committee Chair Nomination - cancelled for June, no updates By-laws - No meetings scheduled Privacy Security and Trust Committee - cancelled for June, no updates Exec Committee - No updates mentioned 			
Fernhill Clinic Opening Report & Takeaways <i>Tamia Deary, CHCB Chair</i>	<p>Board members noted/commented on experience at the Fernhill Health Center Grand Opening:</p> <p>Pros:</p> <ul style="list-style-type: none"> Enjoyed touring the clinic and noted the front desk is very welcoming Community partnership was known and vibrant Staff appeared excited about the new space 			

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
	<ul style="list-style-type: none"> • The spaces, layout and flow of the health center was top quality and a beautiful space • Collaboration with PCC is amazing • Design was welcoming and appreciate efforts for everyone involved in making this project come to fruition <p>Cons:</p> <ul style="list-style-type: none"> • CHC Board didn't have assigned seating • No interpreters present • Area seemed small for the amount of people invited • Not enough food/parking spacings • Patients and Staff didn't seem happy with the clinic name • Collaboration with PCC is amazing • Design was welcoming and appreciate efforts for everyone involved in making this project come to fruition <p>The Board appreciates staff, community members and Board members that were able to attend the event and celebrate</p>			
<p>Department Updates/Strategic Updates</p> <p><i>Anirudh Padmala, Interim Executive Director</i></p>	<p>Highlights:</p> <ul style="list-style-type: none"> • Fernhill Opening article was published in Oregonian and Multnomah County's Wednesday Wire newsletter • Mid-County capital assessment is reviewing proposal in support of CHCB strategic planning • Integrated Behavioral Health hired a full time peer support specialist to ensure access for students and community members • Oregon legislative session - Health Center is monitoring 34B pharmacy protections and watching several bills to ensure access 			

Topic/Presenter	Discussion / Recommendations	Action	Responsible Party	Follow-up Date
Board Discussion (Closed Executive Session) Tamia Deary, CHCB Chair	Closed Executive session started at 7:49PM and ended at 8:35PM Executive minutes were taken with 7 members present. <i>*Darrell and Brenda were absent at the Executive Session</i>	Motion to approve: Kerry Second: Bee Yays: 7 Nays: 0 Abstain: 0 Decision: Approved Motion to leave Executive Session: Dani Second: Kerry Yays: 7 Nays: 0 Abstain: 0 Decision: Approved		
Meeting Adjourns	8:36PM			

Signed: _____ Date: _____

Susana Mendoza, Secretary

Signed: _____ Date: _____

Tamia Deary, Board Chair

Scribe:crystal.cook // Email: //crystal.cook@multc.us

SUMMARIES



**community health
center board**

Multnomah County

Safety

Q1 2025

All ICS Incidents Q1 2025 by Site, by Program - Risk Form Submission = 58

		Entered Date
Care/Service Area	Department	
Student Health Center	Reynolds High School	2
	Parkrose High School	2
	McDaniel High School	3
	Franklin High School	1
	David Douglas High School	2
	Centennial High School	1
	Student Health Center Total	11
Medical	Southeast Health Center	9
	Rockwood Community Health Center	7
	Northeast Health Center	10
	Mid County Health Center	6
	La Clínica de Buena Vista	3
	HIV Health Services	4
	East County Health Center	5
Medical Total		44
John B Yeon Annex	Patient Access Center	1
Dental	North Portland Health Center	1
	Billi Odegaard Dental	1
Dental Total		2
Grand Total		58

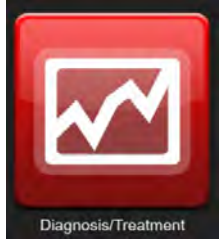
Patient Incident Q1 2025 - ALL ICS Risk Form Types 1 of 2

		Care/Service Area				
General Event Type	Department	Dental	John B Yeon Annex	Medical	Student Health Cent	Grand Total
Aggression	Mid County Health C			1		1
	HIV Health Services			1		1
	Billi Odegaard Dent	1				1
Aggression Total		1		2		3
Diagnosis/Treatment	Southeast Health C			3		3
	Rockwood Commu			1		1
	Reynolds High Scho				1	1
	Parkrose High Scho				1	1
	North Portland Hea	1				1
Diagnosis/Treatment Total		1		4	2	7
Good Catch	Southeast Health C			1		1
	Northeast Health Ce			2		2
	La Clínica de Buena			3		3
Good Catch Total				6		6
Medication/Fluid	Rockwood Commu			2		2
	Reynolds High Scho				1	1
	Parkrose High Scho				1	1
	Northeast Health Ce			4		4
	Mid County Health C			3		3
	McDaniel High Scho				3	3
	HIV Health Services			1		1
	Franklin High School				1	1

Patient Incident Q1 2025 - ALL ICS Risk Form Type 2 of 2

	East County Health			4		4
	David Douglas High				1	1
Medication/Fluid Total				14	7	21
Provision of Care	Rockwood Commu			2		2
	Northeast Health Ce			1		1
Provision of Care Total				3		3
Suicidal Ideation an	Southeast Health C			5		5
	Rockwood Commu			2		2
	Patient Access Cen		1			1
	Northeast Health Ce			3		3
	Mid County Health C			2		2
	HIV Health Services			2		2
	East County Health			1		1
	David Douglas High				1	1
	Centennial High Sch				1	1
Suicidal Ideation and Behavior Total			1	15	2	18
Grand Total		2	1	44	11	58

Top 3 Risk Areas by # of Submissions



Diagnosis & Treatment = 7

Use Diagnosis & Treatment form to report an incident involving a patient's delayed, incorrect or other impactful event related to the diagnosis or treatment of the patient.



Medication & Fluid = 21

Use the Medication/Fluid form to report an incident involving a dispensed or administered medication.



Suicidal Ideation and Behavior = 18

Suicidal Ideation and Behavior form is used to report any suicide and attempts the client has made or disclosed which occurred in the past 6 months while in our care.



Patient Feedback

Q1 2025

Patient Feedback Q1 2025

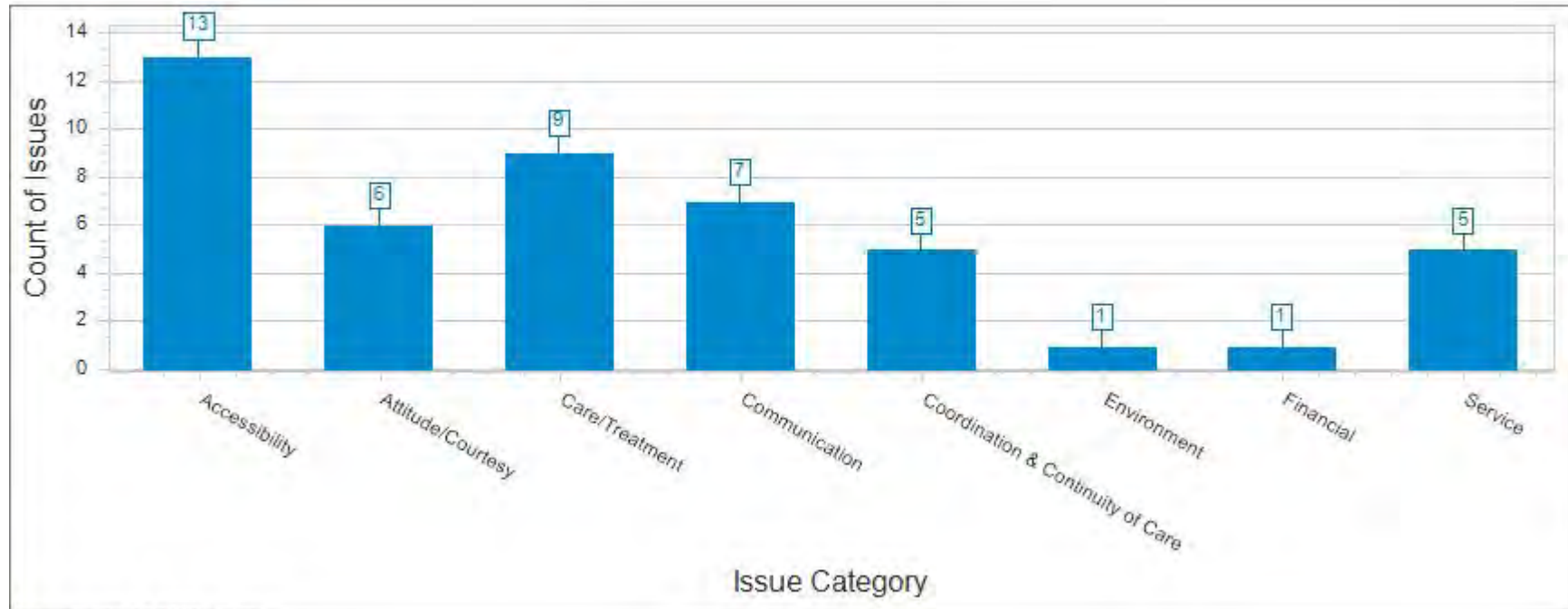
Feedback Classification by Site and Care/Service Area

Q1 2025; Jan.1, 2025 - Mar. 31, 2025

		Classification		
Site	Care/Service Area	Complaint	Grievance	Grand Total
Integrated Clinical S	Dental		12	12
	Medical	4	7	11
	Student Health Cent	1	1	2
Integrated Clinical Services (ICS) Total		5	20	25

Feedback Issue Categories Q1 2025

Date is within 01-01-2025 and 03-31-2025



Printed on: 05-07-2025, 16:29

Feedback - Top 3 Categories

Access = 13

Care/Treatment = 9

Attitude & Courtesy = 6

Total visits **56,008**

PC (including SHCs): **41,355**

Dental: **14,653**

Category1

Accessibility (13)

Attitude/Courtesy (6)

Care/Treatment (9)

Communication (7)

Coordination & Continuity of Care (5)

Environment (1)

Financial (1)

Service (5)

Patient Feedback By Program & Site Q1 2025

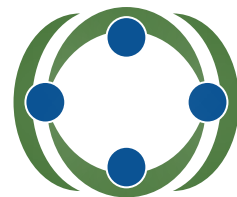
		Classification		
Submitting Care/Self	Submitting Department	Complaint	Grievance	Grand Total
Dental	East County Health		1	1
	Mid County Health Center		5	5
	North Portland Health Center		2	2
	Northeast Health Center		2	2
	Southeast Health Center		2	2
Dental Total			12	12
Medical	HIV Health Services	1	1	2
	Mid County Health Center		1	1
	Northeast Health Center		2	2
	Southeast Health Center	3	3	6
Medical Total		4	7	11
Student Health Center	Franklin High School	1	1	2
Grand Total		5	20	25



Department Updates

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: Health Center Senior Leadership and Anirudh Padmala, Interim Executive Director
RE: Public Meeting Memo - **Monthly Report**
DATE: **July 2025** (previous memos available under public meeting materials on the [CHCB Member site](#))



Executive Director Updates *System level information and updates*


Grants	<ul style="list-style-type: none">• OHA notified us that we were not funded for the OHA Mobile Health Pilot Program, this grant application was approved by CHCB on May 12, 2025. There is no impact to the services on the Mobile Van.• Strategic Oral Health Equity Project Phase 2<ul style="list-style-type: none">◦ CHCB approved the Health Center's grant application to CareOregon for continued funding of the Dental workforce program in December 2023. We had anticipated requesting between \$1.2M-\$1.8M. However, following extensive discussions with CareOregon, they informed us of funding constraints, which reduced their funding limit to \$600K. Our team collaborated effectively and successfully secured the maximum funding amount of \$600K.• Student Health Centers•
Federal Reconciliation Bill	<ul style="list-style-type: none">• On July 4, the reconciliation bill that passed the Senate, House was signed into law. The final budget removed prior restrictions on gender affirming care, but introduced new rules and requirements to maintain Medicaid eligibility. A detailed email about the impacts was sent to the CHCB on July 3rd.• The Senate Parliamentarian ruled on June 26 that many provisions of the Reconciliation Budget were not permitted under Senate rules for budget reconciliation, and must be removed or revised. These included striking out new Medicaid reimbursement reductions, services for immigrants, coverage for gender affirming care, and other related provisions.




Capital Projects *Facilities updates, high cost projects*


Walnut Park Development Project	<ul style="list-style-type: none">• On June 26, with overwhelming enthusiasm, the Board of County Commissioners voted on a resolution recognizing the historic significance of Walnut Park and supporting efforts of
--	--


	<p>the Walnut Park Development Project in pursuing a community-based restoration approach. Long time residents of the Northeast neighborhood spoke of the many extensive evaluations and plans for the multiuse building renovation only to see those plans left behind unsupported.</p> <p>This vote opens the door to proposed construction and partnerships with developers through the County's capitol bidding and contracts process. Because the Northeast Health Center is located within the Walnut Park multiuse building, we anticipate that Community Health Center Board will need to engage with the County regarding recommendations about building changes or services proposed. More information will be shared this fall about the timeline and process for decision making about the Walnut Park renovation; no further details are available at this time.</p> <p>This does not impact the fiscal year 2026 budget.</p>

Strategic Program Updates <i>Strategic plan/direction of the Health Center</i> 	
Strategic Planning	<ul style="list-style-type: none"> We are working to provide the CHCB with the proposed 2025-2028 Strategic Plan in preparation for the August public meeting. This proposal will be reviewed by the Executive Committee on July 28th. The Plan proposes areas of strategic investment, plus additional capital priorities outlined by CHCB and the entire health center staff.
Oregon Legislation	<ul style="list-style-type: none"> Oregon's legislative session ended on June 29, completing major budget and State policy changes. The Health Center teams are working to operationalize the following areas: <ol style="list-style-type: none"> Evaluate option to submit 340B claims to a neutral 3rd party pharmacy clearinghouse in lieu of using claim modifiers to prevent duplicate discounts Assure patients can submit non-opioid directive preferences as part of their care planning Evaluate billing opportunities in care coordination for Registered Nurses, as approved within their scope of practice Evaluate billing opportunities for certain HIV treatments for pharmacists, as approved within their scope of practice Assure timely intake screenings for Veterans in dental care services

Risk and Compliance Updates <i>Compliance events, major incidents/events updates</i> 

PCPCH Re-attestations	The Patient Centered Primary Care Home (PCPCH) program requires each health center location to re-attest every two years. Planning is already underway for sites due in August and September.
------------------------------	---

Quality/Process Improvement <i>Improvement events and activities</i> 	
HIPAA Privacy/Security Project Kickoff	This project with consulting firm Medcurity has been completed, identifying areas of strength and opportunities for improvement. Work is underway to assess and implement recommendations.

General Program Updates <i>Program/Service-line specific updates</i> 	
Primary Care	Primary Care is currently engaged in several exciting projects, all aimed at enhancing patient care and streamlining administrative processes. These initiatives focus on reducing the administrative burden on care teams within the EHR system, refining post-hospitalization patient support, and optimizing our prenatal and postpartum care program.
Integrated Behavioral Health	Integrated Behavioral Health has two impactful updates to share. In May 2025, clinics completed the Columbia Suicide Severity Risk Scale (C-SSRS) for 82% of patients with moderate to severe depression, with some clinics reaching 90% and higher. This reflects our focus on suicide risk and care teams' commitment to patient safety and mental health. Second, the diabetes management group piloted at NEHC concluded, showing initial positive testimonials from patients. We are gathering data on its impact on blood sugar levels and plan to implement similar groups across all clinics.
Dental	<p>Our dental team will be presenting on our EFDA Workforce Program at the upcoming National Network for Oral Health Access (NNOHA) annual meeting. This is the largest national gathering of Federally Qualified Health Center (FQHC) oral health teams, providing a significant platform to showcase our innovative program and contribute to national best practices.</p> <p>All 5 of our Pathway III EFDA trainees graduated last week! Our Pathway I student graduated in June.</p> <p>Additionally, our dental team is collaborating with Pharmacy on an Antibiotic Stewardship initiative within the dental program. This partnership aims to optimize antibiotic prescribing practices, enhancing patient safety and aligning with broader public health efforts.</p>
Pharmacy	<ul style="list-style-type: none"> We are pleased to share that all pharmacies passed their recent

	<p>inspections by the Oregon Board of Pharmacy.</p> <ul style="list-style-type: none">• The CHCB-approved changes to Pharmacy Hours of Operation at East County and Mid County will begin on August 1st due to several staff going out on leave.• Our pharmacist navigator will begin reaching out to clients impacted by the impending Rite Aid Pharmacy closures in the Portland Metro area.• We are currently working on evaluating bids for external 340B audit services and will begin working on a procurement for third party administrators to manage contract pharmacy arrangements in July. This will help to capture revenue from prescriptions filled outside of the health center.
--	---

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: July 14, 2025

Program	Completed Visits				Average days from scheduling to appointment			
	April	May	June	Total	April	May	June	Total
Medical*	13,363	12,952	10,946	37,261	18.1	18.6	19.7	18.8
Student Health	1,928	1,830	870	4,628	6.8	5.7	6.6	6.3
Dental	5,610	5,055	4,246	14,911	20.8	19.7	22.5	21

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

Program	Completed Visits			
	April	May	June	Total
PAC Nurse Triage encounter volume	817	919	801	2,537
Refugee Program screenings	5	3	10	18

Program	Percentage of patients filling prescriptions at our pharmacies (Goal=70%)	
	April	May
Primary Care	55%	55%
HSC	63%	61%