SOUTH GILLIAM COUNTY HEALTH DISTRICT

MEETING AGENDA

DATE: Monday, November 16, 2026

PLACE: South Gilliam Health Center-Conference Room

TIME: 6:00 PM

BOARD: Molly Routson, Chair; Mary Reser, Vice Chair; Hanna Bass, Director; Brooklynn Griffith, Director

REGULAR MEETING

- Call meeting to order
- Agenda Revision/Additions
- Public comments
- Financial Reports: October 2026
    - SGCHD
    - SGCAS
- Approval of bills
- Approval of minutes: October 2026 Meeting Minutes
- New Business
    - Consider letter of interest for board position from Cindy Bennett
    - Working with Minors policy
    - Updated Holiday policy
- Old Business
    - Construction Project
    - Connected Care Community Health Worker Program-update and approve policies
- Reports
    - Ambulance
    - Clinic
    - Public Health
- Director Comments
- Adjournment

Next regular meeting: Monday, December 21, 2026 – 6:00 PM

Virtual access: https://zoom.us/j/98304228224?pwd=yl9kOfsgBxi4AKA6x6z9pWMK6cwhKr.1

Meeting ID: 983 0422 8224 Meeting passcode: 058450

Appointments and discussion items may require action. The meeting location is accessible to persons with disabilities. A request for an interpreter for the hearing impaired or for other accommodations for persons with disabilities should be made at least 48 hours before the meeting by contacting Margaret Takagi or Debbie Lyda at 541-626-7081. As this is a regular meeting of the South Gilliam County Health District, other matters may be addressed.

SOUTH GILLIAM HEALTH CENTER
Balance Sheet
As of October 31, 2026

		Oct 31, 26
ASSETS		
Current Assets		
Checking/Savings		
1000 · CHECKING		113,820.04
1100 · LGIP		
EQUIP RES		61,259.38
FACILITIES FUND		136,743.60
HEALTH FUND		42,247.12
PATIENT ASSISTANCE FUND		14,371.04
PUBLIC HEALTH DEPT. STATE/FED		
212-100-5-20-2204 COVIDCares-09	61,857.50	
Total PUBLIC HEALTH DEPT. STATE/FED		61,857.50
1100 · LGIP - Other		457,410.58
Total 1100 · LGIP		773,889.22
Total Checking/Savings		887,709.26
Accounts Receivable		
1200 · Accounts Receivable		-264.92
Total Accounts Receivable		-264.92
Other Current Assets		
A/R Offset		264.92
2120 · Payroll Asset		-0.37
Total Other Current Assets		264.55
Total Current Assets		887,708.89
TOTAL ASSETS		**887,708.89**
LIABILITIES & EQUITY		
Liabilities		
Current Liabilities		
Other Current Liabilities		
2010 · P/R Liability Offset		0.43
2020 · Payroll Liabilities		-90.79
Total Other Current Liabilities		-90.36
Total Current Liabilities		-90.36
Total Liabilities		-90.36
Equity		
3900 · Retained Earnings		747,000.41
Net Income		140,798.84
Total Equity		887,799.25
TOTAL LIABILITIES & EQUITY		**887,708.89**

SOUTH GILLIAM HEALTH CENTER
Profit & Loss Budget vs. Actual
July through October 2026

	Jul - Oct 26	Budget	$ Over Budget	% of Budget
Ordinary Income/Expense				
Income				
NET WORKING CAPITAL	0.00	200,000.00	-200,000.00	0.0%
Public Health Indirect Costs	13,681.35	50,000.00	-36,318.65	27.4%
Public Health Personnel	84,748.46	0.00	84,748.46	100.0%
4000 · LEVIED TAX TO BE RECEIVED	1,618.77	146,000.00	-144,381.23	1.1%
4100 · MEDICAL SERVICES				
4100.01 · Insurance refund	1,311.60			
4100.02 · Medical Incentive/Bonus Payment	3,272.69	0.00	3,272.69	100.0%
4100 · MEDICAL SERVICES - Other	166,998.80	457,592.00	-290,593.20	36.5%
Total 4100 · MEDICAL SERVICES	171,583.09	457,592.00	-286,008.91	37.5%
4200 · Gilliam Co. Cont (non-PH)				
4200.01 · GILLIAM COUNTY GRANTS	200,000.00	250,000.00	-50,000.00	80.0%
Total 4200 · Gilliam Co. Cont (non-PH)	200,000.00	250,000.00	-50,000.00	80.0%
4300 · Interest Income				
4300.02 · INTEREST-LGIP	10,246.64	0.00	10,246.64	100.0%
4300 · Interest Income - Other	0.00	20,000.00	-20,000.00	0.0%
Total 4300 · Interest Income	10,246.64	20,000.00	-9,753.36	51.2%
4400 · Other clinic revenue				
4400.01 · DONATIONS	0.00	500.00	-500.00	0.0%
4400.02 · Wellness Center donations	45.00	0.00	45.00	100.0%
4400.05 · MISC/AMB PAYROLL	14,258.82	59,600.00	-45,341.18	23.9%
4400.06 · Misc/other-grants, State refund				
CHW Program	45,542.50			
4400.06 · Misc/other-grants, State refund - Other	11,769.53	600,000.00	-588,230.47	2.0%
Total 4400.06 · Misc/other-grants, State refund	57,312.03	600,000.00	-542,687.97	9.6%
4400.07 · EOCCO/LCHP Funding	0.00	7,500.00	-7,500.00	0.0%
4400.08 · WELLNESS CENTER MEMBERSHIPS	1,387.77	6,000.00	-4,612.23	23.1%
4400.09 · SSV Nursing Contract	583.00	10,000.00	-9,417.00	5.8%
Total 4400 · Other clinic revenue	73,586.62	683,600.00	-610,013.38	10.8%
4450 · RENT	10,400.00	31,200.00	-20,800.00	33.3%
4500 · PH OHA Revenue				
4500.01 · PE 51-01 Modernization				
PE 51-05 CDC PH Infrastructure	1,333.15	40,000.00	-38,666.85	3.3%
4500.01 · PE 51-01 Modernization - Other	28,086.78	221,880.00	-193,793.22	12.7%
Total 4500.01 · PE 51-01 Modernization	29,419.93	261,880.00	-232,460.07	11.2%
4500.02 · PE O1-01 Comm Disease				
CD PE 01-07COVIDContact Tracing	0.00	61,858.00	-61,858.00	0.0%
4500.02 · PE O1-01 Comm Disease - Other	670.52	2,800.00	-2,129.48	23.9%
Total 4500.02 · PE O1-01 Comm Disease	670.52	64,658.00	-63,987.48	1.0%
4500.04 · PE 12 PHEPR	4,773.75	35,000.00	-30,226.25	13.6%
4500.05 · PE 13 TPEP	0.00	8,250.00	-8,250.00	0.0%
4500.06 · PE 36 ADPEP	13,737.60	61,250.00	-47,512.40	22.4%
4500.07 · PE 42-03 Perinatal	867.61	4,354.00	-3,486.39	19.9%
4500.08 · PE 42-04 B1st	0.00	4,839.00	-4,839.00	0.0%
4500.10 · PE 42-11 Title V	0.00	14,360.00	-14,360.00	0.0%
4500.11 · PE 43 IMM	0.00	6,000.00	-6,000.00	0.0%

SOUTH GILLIAM HEALTH CENTER
Profit & Loss Budget vs. Actual
July through October 2026

	Jul - Oct 26	Budget	$ Over Budget	% of Budget
4500.12 · PE 46 REP Health	3,652.70	11,319.00	-7,666.30	32.3%
4500.15 · PE 40 WIC				
40-05 WIC Farmers Market	0.00	560.00	-560.00	0.0%
4500.15 · PE 40 WIC - Other	144.76	25,000.00	-24,855.24	0.6%
Total 4500.15 · PE 40 WIC	144.76	25,560.00	-25,415.24	0.6%
4500.16 · PE 36-01 Opioid Prev	3,687.00	16,500.00	-12,813.00	22.3%
4500.17 · POTENTIAL ADD. STATE FUND	0.00	121,000.00	-121,000.00	0.0%
4500.18 · PE 01-12 ACDP Inf Prev	0.00	1,518.00	-1,518.00	0.0%
4500.19 · PE-03 TB	0.00	5,000.00	-5,000.00	0.0%
4500.20 · PE 81-01 HIV/STI Services	351.92	2,511.00	-2,159.08	14.0%
4500.21 · PE 81-02 HIV/STI Services	4,034.49	12,172.00	-8,137.51	33.1%
Total 4500 · PH OHA Revenue	61,340.28	656,171.00	-594,830.72	9.3%
4600 · PH Gilliam County Contribution	69,415.00	138,830.00	-69,415.00	50.0%
4700 · PH Other Revenue				
4700.01 · PH Donations	0.00	5,000.00	-5,000.00	0.0%
4700.02 · PH Grants	5,000.00	5,000.00	0.00	100.0%
Total 4700 · PH Other Revenue	5,000.00	10,000.00	-5,000.00	50.0%
Total Income	701,620.21	2,643,393.00	-1,941,772.79	26.5%
Expense				
CONTINGENCY	0.00	239,221.00	-239,221.00	0.0%
CONTRACTUAL SERVICES/PAYROLL	0.00	15,000.00	-15,000.00	0.0%
JANITOR SERVICES	3,925.00	12,000.00	-8,075.00	32.7%
5000 · CLINIC MATERIALS AND SERVICES				
ADVERTISING & ELECTION FEES	132.00	2,500.00	-2,368.00	5.3%
AUDITOR	19,800.00	40,000.00	-20,200.00	49.5%
COMMUNITY HEALTH ENHANCEMENT	91.60	700.00	-608.40	13.1%
CONFERENCE EXPENSES	543.47	5,000.00	-4,456.53	10.9%
ELECTRONIC MEDICAL RECORDS	12,087.67	54,000.00	-41,912.33	22.4%
INSURANCE-PROPERTY & LIAB	0.00	25,000.00	-25,000.00	0.0%
INSURANCE - MALPRACTICE	0.00	15,000.00	-15,000.00	0.0%
IT Specialist	4,760.65	7,000.00	-2,239.35	68.0%
JANITORIAL SUPPLIES	805.22	5,000.00	-4,194.78	16.1%
LEGAL FEES	0.00	6,000.00	-6,000.00	0.0%
LICENSES & DUES	2,114.00	7,000.00	-4,886.00	30.2%
MEDICAL SUPPLIES				
LAB EXPENSES	342.13	0.00	342.13	100.0%
VACCINES	2,623.57	0.00	2,623.57	100.0%
X-ray	842.26	0.00	842.26	100.0%
MEDICAL SUPPLIES - Other	3,508.15	40,000.00	-36,491.85	8.8%
Total MEDICAL SUPPLIES	7,316.11	40,000.00	-32,683.89	18.3%
Meeting Expense	847.19	1,500.00	-652.81	56.5%
MILEAGE/TRAVEL	532.00	4,000.00	-3,468.00	13.3%
MISCELLANEOUS	4,616.20	2,500.00	2,116.20	184.6%
OFFICE SUPPLIES	3,717.22	13,000.00	-9,282.78	28.6%
POSTAGE	22.81	2,000.00	-1,977.19	1.1%
RECRUITMENT	0.00	500.00	-500.00	0.0%
REPAIR & MAINT	7,160.13	25,000.00	-17,839.87	28.6%
STAFF APPRECIATION	0.00	2,000.00	-2,000.00	0.0%
TELEPHONE EXPENSE	2,007.18	8,000.00	-5,992.82	25.1%

SOUTH GILLIAM HEALTH CENTER
Profit & Loss Budget vs. Actual
July through October 2026

	Jul - Oct 26	Budget	$ Over Budget	% of Budget	
UTILITIES					
Wellness Center Utilities	496.02	5,000.00	-4,503.98	9.9%	
UTILITIES - Other	1,986.65	12,000.00	-10,013.35	16.6%	
Total UTILITIES	2,482.67	17,000.00	-14,517.33	14.6%	
Total 5000 · CLINIC MATERIALS AND SERVICES	69,036.12	282,700.00	-213,663.88		24.4%
5500 · PERSONNEL SERVICES					
EMPLOYEE HEALTH INSURANCE	61,648.40	185,000.00	-123,351.60	33.3%	
EMPLOYEE RETIREMENT	24,964.13	60,000.00	-35,035.87	41.6%	
SALARIES & WAGES					
AMBULANCE PAYROLL	11,460.00	54,000.00	-42,540.00	21.2%	
HEALTH DISTRICT PAYROLL	196,425.60	593,271.00	-396,845.40	33.1%	
PUBLIC HEALTH WAGES	17,845.40	178,000.00	-160,154.60	10.0%	
SALARIES & WAGES - Other	31,124.40	0.00	31,124.40	100.0%	
Total SALARIES & WAGES	256,855.40	825,271.00	-568,415.60	31.1%	
WORKER'S COMP INSURANCE	2,093.08	5,000.00	-2,906.92	41.9%	
6560 · Payroll Expenses	27,627.60	68,600.00	-40,972.40	40.3%	
Total 5500 · PERSONNEL SERVICES	373,188.61	1,143,871.00	-770,682.39		32.6%
5750 · CLINIC CAPITAL OUTLAY	0.00	600,000.00	-600,000.00		0.0%
6000 · PH EXPENSES					
6000.01 · PE 51-01 MOD					
MOD General Supplies	183.91	0.00	183.91	100.0%	
MOD Indirect Costs	5,188.19	0.00	5,188.19	100.0%	
MOD Other Expenses	500.75	0.00	500.75	100.0%	
MOD PersonnelServ Sal/Ben	32,453.51	0.00	32,453.51	100.0%	
MOD Prof Services/Contracts	1,370.13	0.00	1,370.13	100.0%	
MOD Travel & Training	147.91	0.00	147.91	100.0%	
6000.01 · PE 51-01 MOD - Other	0.00	221,880.00	-221,880.00	0.0%	
Total 6000.01 · PE 51-01 MOD	39,844.40	221,880.00	-182,035.60	18.0%	
6000.02 · PE01-01 COMM DISEASE					
CD Indirect Costs	127.38	0.00	127.38	100.0%	
CD Personnel Services Sal/Ben	849.17	0.00	849.17	100.0%	
6000.02 · PE01-01 COMM DISEASE - Other	0.00	2,800.00	-2,800.00	0.0%	
Total 6000.02 · PE01-01 COMM DISEASE	976.55	2,800.00	-1,823.45	34.9%	
6000.03 · PE 42-03 PERI					
Perinatal Indirect Costs	217.65	0.00	217.65	100.0%	
Perinatal PersonnelServ Sal/Ben	1,451.00	0.00	1,451.00	100.0%	
6000.03 · PE 42-03 PERI - Other	0.00	4,354.00	-4,354.00	0.0%	
Total 6000.03 · PE 42-03 PERI	1,668.65	4,354.00	-2,685.35	38.3%	
6000.05 · PE 12 PHEPR					
PHEPR General Supplies	462.15	0.00	462.15	100.0%	
PHEPR Indirect Costs	2,122.32	0.00	2,122.32	100.0%	
PHEPR Personnel Serv Sal/Ben	7,109.68	0.00	7,109.68	100.0%	
PHEPR Prof Services/Contracts	6,500.00	0.00	6,500.00	100.0%	
PHEPR Travel & Training	77.00				
6000.05 · PE 12 PHEPR - Other	0.00	35,000.00	-35,000.00	0.0%	
Total 6000.05 · PE 12 PHEPR	16,271.15	35,000.00	-18,728.85	46.5%	

SOUTH GILLIAM HEALTH CENTER
Profit & Loss Budget vs. Actual
July through October 2026

	Jul - Oct 26	Budget	$ Over Budget	% of Budget
6000.06 · PE 13 TPEP				
TPEP Indirect Costs	120.57	0.00	120.57	100.0%
TPEP Personnel Services Sal/Ben	803.77	0.00	803.77	100.0%
6000.06 · PE 13 TPEP - Other	0.00	8,250.00	-8,250.00	0.0%
Total 6000.06 · PE 13 TPEP	924.34	8,250.00	-7,325.66	11.2%
6000.07 · PE 36 ADPEP				
ADPEP General Supplies	601.46	0.00	601.46	100.0%
ADPEP Indirect Costs	1,870.52	0.00	1,870.52	100.0%
ADPEP Other Expenses	1,403.45	0.00	1,403.45	100.0%
ADPEP PersonnelServices Sal/Ben	11,281.57	0.00	11,281.57	100.0%
6000.07 · PE 36 ADPEP - Other	0.00	61,250.00	-61,250.00	0.0%
Total 6000.07 · PE 36 ADPEP	15,157.00	61,250.00	-46,093.00	24.7%
6000.08 · PE 42-04 B1st	0.00	4,839.00	-4,839.00	0.0%
6000.10 · PE 42-11 Title V				
MCAH T-V Indirect Costs	555.45	0.00	555.45	100.0%
MCAH T-V Personal Serv Sal/Ben	5,554.45	0.00	5,554.45	100.0%
6000.10 · PE 42-11 Title V - Other	0.00	14,360.00	-14,360.00	0.0%
Total 6000.10 · PE 42-11 Title V	6,109.90	14,360.00	-8,250.10	42.5%
6000.11 · PE 43 IMM				
Imm Indirect Costs	324.04	0.00	324.04	100.0%
Imm Personnel Serv Sal/Ben	2,160.28	0.00	2,160.28	100.0%
Imm Travel & Trainings	106.53	0.00	106.53	100.0%
6000.11 · PE 43 IMM - Other	0.00	6,000.00	-6,000.00	0.0%
Total 6000.11 · PE 43 IMM	2,590.85	6,000.00	-3,409.15	43.2%
6000.12 · PE 46 REP HTH				
Rep Hth Indirect Costs	419.64	0.00	419.64	100.0%
Rep Hth Personal Serv Sal/Ben	2,797.63	0.00	2,797.63	100.0%
6000.12 · PE 46 REP HTH - Other	0.00	11,319.00	-11,319.00	0.0%
Total 6000.12 · PE 46 REP HTH	3,217.27	11,319.00	-8,101.73	28.4%
6000.15 · PE 40 WIC				
40-05 WIC Farmers Market				
WIC Farm Mrkt Indirect Cost	69.49			
WIC Farm Mrkt Pers Sal/Ben	463.29			
40-05 WIC Farmers Market - Other	0.00	560.00	-560.00	0.0%
Total 40-05 WIC Farmers Market	532.78	560.00	-27.22	95.1%
WIC Indirect Costs	809.48	0.00	809.48	100.0%
WIC Medical Supplies	16.71			
WIC Personnel Services Sal/Ben	5,039.02	0.00	5,039.02	100.0%
WIC Prof. Services/Contracts	285.00	0.00	285.00	100.0%
WIC Travel & Training	72.50	0.00	72.50	100.0%
6000.15 · PE 40 WIC - Other	0.00	25,000.00	-25,000.00	0.0%
Total 6000.15 · PE 40 WIC	6,755.49	25,560.00	-18,804.51	26.4%
6000.16 · PE 01-07COVIDContact Tracing	0.00	61,858.00	-61,858.00	0.0%
6000.19 · PE 51-05 PH INFRASTRUCTURE				
PE 51-05 PH Infras IndirectCost	656.37			
PH Infrastructure Pers Sal/Ben	4,375.83			
6000.19 · PE 51-05 PH INFRASTRUCTURE - Other	0.00	40,000.00	-40,000.00	0.0%
Total 6000.19 · PE 51-05 PH INFRASTRUCTURE	5,032.20	40,000.00	-34,967.80	12.6%

SOUTH GILLIAM HEALTH CENTER
Profit & Loss Budget vs. Actual
July through October 2026

	Jul - Oct 26	Budget	$ Over Budget	% of Budget
6000.20 · PE 36-01 Opioid Prev				
Opiod Prev 36-01 Indirect Cost	223.37			
Opiod Prev 36-01 Pers Sal/Ben	1,489.10			
6000.20 · PE 36-01 Opioid Prev - Other	0.00	16,500.00	-16,500.00	0.0%
Total 6000.20 · PE 36-01 Opioid Prev	1,712.47	16,500.00	-14,787.53	10.4%
6000.21 · PE 01-12 ACDP Inf Prev	0.00	1,518.00	-1,518.00	0.0%
6000.22 · PE 03 TB	0.00	5,000.00	-5,000.00	0.0%
6000.23 · PE 81-01 HIV/STI				
PE 81-01 HIV/STI Indirect	157.68			
PE 81-01 HIV/STI Personnel Sal	1,051.21			
6000.23 · PE 81-01 HIV/STI - Other	0.00	2,511.00	-2,511.00	0.0%
Total 6000.23 · PE 81-01 HIV/STI	1,208.89	2,511.00	-1,302.11	48.1%
6000.24 · PE 81-02 HIV/STI				
PE 81-02 HIV/STI Indirect Cost	510.59			
PE 81-02 HIV/STI Personnel	3,403.93			
6000.24 · PE 81-02 HIV/STI - Other	0.00	12,172.00	-12,172.00	0.0%
Total 6000.24 · PE 81-02 HIV/STI	3,914.52	12,172.00	-8,257.48	32.2%
6000.26 · RHTP				
PH RHTP Indirect Cost	308.61			
PH RHTP Pers Sal/Ben	2,057.40			
Total 6000.26 · RHTP	2,366.01			
Total 6000 · PH EXPENSES	107,749.69	535,171.00	-427,421.31	20.1%
6500 · PUBLIC HEALTH EXP UNALLOCATED				
6500.20 · Personnel Services	2,407.62	0.00	2,407.62	100.0%
Total 6500 · PUBLIC HEALTH EXP UNALLOCATED	2,407.62	0.00	2,407.62	100.0%
8000 · EQUIPMENT FUND				
Clinic Equipment	3,937.95	0.00	3,937.95	100.0%
8000 · EQUIPMENT FUND - Other	0.00	67,149.00	-67,149.00	0.0%
Total 8000 · EQUIPMENT FUND	3,937.95	67,149.00	-63,211.05	5.9%
8300 · FACILITIES FUND	0.00	140,827.00	-140,827.00	0.0%
8500 · HEALTH FUND	0.00	43,516.00	-43,516.00	0.0%
8700 · PATIENT ASSISTANCE	576.38	15,390.00	-14,813.62	3.7%
Total Expense	560,821.37	3,094,845.00	-2,534,023.63	18.1%
Net Ordinary Income	140,798.84	-451,452.00	592,250.84	-31.2%
Net Income	**140,798.84**	**-451,452.00**	**592,250.84**	**-31.2%**

SOUTH GILLIAM HEALTH CENTER

11/9/2026 4:36 PM

Register: 1000 · CHECKING

From 10/01/2026 through 10/31/2026

Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
10/01/2026			4100 · MEDICAL SER...	Deposit		X	65.57	31,174.01
10/01/2026			4100 · MEDICAL SER...	Deposit		X	1,262.06	32,436.07
10/01/2026			4100 · MEDICAL SER...	Deposit		X	223.02	32,659.09
10/01/2026			4100 · MEDICAL SER...	Deposit		X	176.00	32,835.09
10/01/2026			4100 · MEDICAL SER...	Deposit		X	16.66	32,851.75
10/01/2026			-split-	Deposit		X	1,694.18	34,545.93
10/01/2026	9245	DYNAMIC COMPU...	5000 · CLINIC MATE...	inv#31420	1,705.45	X		32,840.48
10/01/2026	9249	MARIA E. CORTES...	JANITOR SERVICES	Sep cleaning	1,000.00	X		31,840.48
10/01/2026	9250	JENNIFER WAGEN...	JANITOR SERVICES	training w/ Maria	25.00	X		31,815.48
10/01/2026	9251	EDWARDS, JAMES...	5000 · CLINIC MATE...	mileage for Sep	133.00	X		31,682.48
10/01/2026			1100 · LGIP	Funds Transfer		X	80,000.00	111,682.48
10/02/2026			4100 · MEDICAL SER...	Deposit		X	34.92	111,717.40
10/02/2026			4100 · MEDICAL SER...	Deposit		X	817.01	112,534.41
10/02/2026			4100 · MEDICAL SER...	Deposit		X	679.14	113,213.55
10/02/2026			4100 · MEDICAL SER...	Deposit		X	131.28	113,344.83
10/02/2026			4100 · MEDICAL SER...	Deposit		X	58.52	113,403.35
10/02/2026			-split-	Deposit		X	150.22	113,553.57
10/03/2026			4100 · MEDICAL SER...	Deposit		X	1,196.58	114,750.15
10/03/2026			4100 · MEDICAL SER...	Deposit		X	560.90	115,311.05
10/03/2026			4100 · MEDICAL SER...	Deposit		X	195.23	115,506.28
10/03/2026			4100 · MEDICAL SER...	Deposit		X	1.38	115,507.66
10/05/2026			4100 · MEDICAL SER...	Deposit		X	49.25	115,556.91
10/05/2026			4100 · MEDICAL SER...	Deposit		X	49.25	115,606.16
10/05/2026			4100 · MEDICAL SER...	Deposit		X	47.48	115,653.64
10/05/2026			4700 · PH Other Reven...	Deposit		X	5,000.00	120,653.64
10/05/2026	ACH	AAMODT, JENNIFER	-split-		1,674.44	X		118,979.20
10/05/2026	ACH	BETTENCOURT, LI...	-split-		6,080.06	X		112,899.14
10/05/2026	ACH	LYDA, DEBRA K	-split-		3,999.58	X		108,899.56
10/05/2026	ACH	McINTOSH {RN}, ...	-split-		5,363.05	X		103,536.51
10/05/2026	ACH	STONICK {*}, KIRK	-split-		6,514.44	X		97,022.07
10/05/2026	ACH	TAKAGI, MARGAR...	-split-		4,002.28	X		93,019.79
10/05/2026	ACH	TAKAGI, MICHAE...	-split-		10,404.03	X		82,615.76
10/05/2026	ACH	WILSON {*}, DAIL...	-split-		3,536.41	X		79,079.35
10/05/2026	ACH	EDWARDS, JAMES...	-split-		4,416.75	X		74,662.60
10/05/2026	9252	Bates, Jonathan E	-split-		11.19	X		74,651.41
10/05/2026	9253	Bates, Paul R	-split-		16.49			74,634.92
10/05/2026	9254	Bates, Samuel P	-split-		346.22	X		74,288.70
10/05/2026	9255	Caudill, Eli	-split-		175.82	X		74,112.88
10/05/2026	9256	Coppock, Shannon K	-split-		164.87	X		73,948.01
10/05/2026	9257	Fatland Hinton, Cynt...	-split-		76.93	X		73,871.08

Register: 1000 · CHECKING
From 10/01/2026 through 10/31/2026
Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
10/05/2026	9258	Heidy, James L	-split-		32.97	X		73,838.11
10/05/2026	9259	Hinton, James P	-split-		60.43	X		73,777.68
10/05/2026	9260	Houghtelling, Darryl E	-split-		43.89	X		73,733.79
10/05/2026	9261	Jamieson, Leslie	-split-		43.99	X		73,689.80
10/05/2026	9262	Lake, Todd	-split-		175.84	X		73,513.96
10/05/2026	9263	Potter, Kevin E	-split-		99.92	X		73,414.04
10/05/2026	9264	Richardson, Amanda	-split-		126.39	X		73,287.65
10/05/2026	9265	Watkins, Leah A	-split-		43.94	X		73,243.71
10/05/2026	9266	Watkins, Rick	-split-		10.97	X		73,232.74
10/06/2026			4100 · MEDICAL SER...	Deposit		X	1,216.63	74,449.37
10/06/2026			4100 · MEDICAL SER...	Deposit		X	68.55	74,517.92
10/06/2026			4100 · MEDICAL SER...	Deposit		X	35.60	74,553.52
10/06/2026			-split-	Deposit		X	220.67	74,774.19
10/07/2026			4100 · MEDICAL SER...	Deposit		X	282.52	75,056.71
10/07/2026			4100 · MEDICAL SER...	Deposit		X	161.70	75,218.41
10/07/2026			4100 · MEDICAL SER...	Deposit		X	34.92	75,253.33
10/07/2026			4100 · MEDICAL SER...	Deposit		X	34.92	75,288.25
10/07/2026			4100 · MEDICAL SER...	Deposit		X	34.25	75,322.50
10/07/2026			4100 · MEDICAL SER...	Deposit		X	29.33	75,351.83
10/07/2026			4100 · MEDICAL SER...	Deposit		X	51.45	75,403.28
10/07/2026	ACH 100...	VALIC	5500 · PERSONNEL S...	Oct 2026	6,548.01	X		68,855.27
10/07/2026	ACH 100...	OREGON DEPART...	-split-	923427-8	4,530.22	X		64,325.05
10/07/2026	ACH 100...	INTERNAL REVEN...	-split-	93-0805223	15,370.30	X		48,954.75
10/07/2026	ACH 100...	Aflac Insurance	2020 · Payroll Liabilities	LCM64	107.70	X		48,847.05
10/07/2026	ACH 100...	VEBA	5500 · PERSONNEL S...	Oct 2026	1,800.00	X		47,047.05
10/08/2026			4100 · MEDICAL SER...	Deposit		X	49.48	47,096.53
10/08/2026			4100 · MEDICAL SER...	Deposit		X	49.25	47,145.78
10/08/2026			4100 · MEDICAL SER...	Deposit		X	1,034.88	48,180.66
10/08/2026			4100 · MEDICAL SER...	Deposit		X	348.90	48,529.56
10/08/2026			4100 · MEDICAL SER...	Deposit		X	204.38	48,733.94
10/08/2026			4100 · MEDICAL SER...	Deposit		X	183.29	48,917.23
10/08/2026			4100 · MEDICAL SER...	Deposit		X	3.41	48,920.64
10/08/2026			-split-	Deposit		X	297.32	49,217.96
10/08/2026	DEBIT	WILLAMETTE TR...	5000 · CLINIC MATE...	CDL forms	529.43	X		48,688.53
10/08/2026	DEBIT	USPS	5000 · CLINIC MATE...		9.70	X		48,678.83
10/08/2026	9267	M&A	-split-	acct#4062	45.48	X		48,633.35
10/08/2026	9268	BOHN'S	5000 · CLINIC MATE...	inv#12902	27.78	X		48,605.57
10/08/2026	9269	CASCADE MEDIC...	5000 · CLINIC MATE...	SEPTEMBER ...	96.90	X		48,508.67
10/08/2026	9270	SINGERLEWAK LLP	5000 · CLINIC MATE...	inv703872	9,900.00	X		38,608.67
10/08/2026	9271	OREGON HEALTH ...	5000 · CLINIC MATE...	inv#AI075110	1,010.41	X		37,598.26

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Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
10/08/2026	9272	RevSpring	5000 · CLINIC MATE...	inv1468931	48.95	X		37,549.31
10/09/2026			4100 · MEDICAL SER...	Deposit		X	209.09	37,758.40
10/09/2026			4100 · MEDICAL SER...	Deposit		X	92.22	37,850.62
10/09/2026			4100 · MEDICAL SER...	Deposit		X	86.80	37,937.42
10/09/2026			4100 · MEDICAL SER...	Deposit		X	79.99	38,017.41
10/09/2026			4100 · MEDICAL SER...	Deposit		X	38.26	38,055.67
10/09/2026			4100 · MEDICAL SER...	Deposit		X	27.91	38,083.58
10/09/2026			-split-	Deposit		X	487.01	38,570.59
10/09/2026			4400 · Other clinic rev...	Deposit		X	0.01	38,570.60
10/12/2026	ACH	COLUMBIA BASIN...	5000 · CLINIC MATE...		267.71	X		38,302.89
10/12/2026	ACH	COLUMBIA BASIN...	5000 · CLINIC MATE...		118.60	X		38,184.29
10/12/2026	ACH	CITY OF CONDON	5000 · CLINIC MATE...		132.81	X		38,051.48
10/12/2026	ACH	THE DALLES DISP...	5000 · CLINIC MATE...		101.84	X		37,949.64
10/12/2026	9273	VOID	5000 · CLINIC MATE...	VOID: Voided ...		X		37,949.64
10/13/2026			4100 · MEDICAL SER...	Deposit		X	1,008.19	38,957.83
10/13/2026			4100 · MEDICAL SER...	Deposit		X	776.16	39,733.99
10/13/2026			4100 · MEDICAL SER...	Deposit		X	401.52	40,135.51
10/13/2026			4100 · MEDICAL SER...	Deposit		X	226.50	40,362.01
10/13/2026			4100 · MEDICAL SER...	Deposit		X	50.20	40,412.21
10/13/2026			-split-	Deposit		X	241.36	40,653.57
10/13/2026	ACH101...	OREGON DEPART...	5500 · PERSONNEL S...	taxes	96.31	X		40,557.26
10/14/2026			4100 · MEDICAL SER...	Deposit		X	109.50	40,666.76
10/14/2026			4100 · MEDICAL SER...	Deposit		X	49.25	40,716.01
10/14/2026			4100 · MEDICAL SER...	Deposit		X	34.92	40,750.93
10/14/2026			4100 · MEDICAL SER...	Deposit		X	87.51	40,838.44
10/14/2026			4100 · MEDICAL SER...	Deposit		X	2,117.93	42,956.37
10/14/2026			4100 · MEDICAL SER...	Deposit		X	1,240.96	44,197.33
10/14/2026			4100 · MEDICAL SER...	Deposit		X	364.75	44,562.08
10/14/2026			4100 · MEDICAL SER...	Deposit		X	257.02	44,819.10
10/14/2026			4100 · MEDICAL SER...	Deposit		X	217.14	45,036.24
10/14/2026			4100 · MEDICAL SER...	Deposit		X	151.72	45,187.96
10/14/2026			4100 · MEDICAL SER...	Deposit		X	79.04	45,267.00
10/14/2026			4100 · MEDICAL SER...	Deposit		X	6.82	45,273.82
10/15/2026			4100 · MEDICAL SER...	Deposit		X	101.83	45,375.65
10/15/2026			4100 · MEDICAL SER...	Deposit		X	257.39	45,633.04
10/15/2026			4100 · MEDICAL SER...	Deposit		X	224.00	45,857.04
10/15/2026			4100 · MEDICAL SER...	Deposit		X	153.57	46,010.61
10/15/2026			4100 · MEDICAL SER...	Deposit		X	84.49	46,095.10
10/15/2026			4100 · MEDICAL SER...	Deposit		X	51.00	46,146.10
10/15/2026			-split-	Deposit		X	868.89	47,014.99

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Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
10/16/2026			4100 · MEDICAL SER...	Deposit		X	1,470.00	48,484.99
10/16/2026			4100 · MEDICAL SER...	Deposit		X	422.26	48,907.25
10/16/2026			4100 · MEDICAL SER...	Deposit		X	95.59	49,002.84
10/16/2026			4100 · MEDICAL SER...	Deposit		X	49.25	49,052.09
10/16/2026			4100 · MEDICAL SER...	Deposit		X	49.25	49,101.34
10/16/2026			4400 · Other clinic rev...	Deposit		X	45,542.50	94,643.84
10/16/2026			-split-	Deposit		X	270.07	94,913.91
10/16/2026			-split-	Deposit		X	1,740.38	96,654.29
10/16/2026			-split-	Deposit		X	10,838.25	107,492.54
10/17/2026			4100 · MEDICAL SER...	Deposit		X	891.27	108,383.81
10/17/2026			4100 · MEDICAL SER...	Deposit		X	194.09	108,577.90
10/19/2026			4100 · MEDICAL SER...	Deposit		X	52.58	108,630.48
10/19/2026			4100 · MEDICAL SER...	Deposit		X	34.92	108,665.40
10/19/2026	ACH	Vonage Business	5000 · CLINIC MATE...		269.70	X		108,395.70
10/20/2026			4100 · MEDICAL SER...	Deposit		X	2,258.53	110,654.23
10/20/2026			4100 · MEDICAL SER...	Deposit		X	478.04	111,132.27
10/20/2026			4100 · MEDICAL SER...	Deposit		X	258.72	111,390.99
10/20/2026			-split-	Deposit		X	201.99	111,592.98
10/21/2026			-split-	Deposit		X	774.23	112,367.21
10/21/2026	9274	SPECIAL DISTRIC...	5500 · PERSONNEL S...		13,612.10			98,755.11
10/21/2026	9275	REGENCE BCBC	5000 · CLINIC MATE...	ref#202610080...	151.78	X		98,603.33
10/21/2026	9276	TIMES JOURNAL	5000 · CLINIC MATE...	flu shots x2 an...	90.00	X		98,513.33
10/22/2026			4100 · MEDICAL SER...	Deposit		X	747.60	99,260.93
10/22/2026			4100 · MEDICAL SER...	Deposit		X	112.37	99,373.30
10/22/2026			4100 · MEDICAL SER...	Deposit		X	78.00	99,451.30
10/22/2026			4100 · MEDICAL SER...	Deposit		X	49.25	99,500.55
10/22/2026			4100 · MEDICAL SER...	Deposit		X	41.60	99,542.15
10/22/2026			4100 · MEDICAL SER...	Deposit		X	34.92	99,577.07
10/22/2026			-split-	Deposit		X	216.39	99,793.46
10/23/2026			4100 · MEDICAL SER...	Deposit		X	2,043.44	101,836.90
10/23/2026			4100 · MEDICAL SER...	Deposit		X	98.49	101,935.39
10/23/2026			4100 · MEDICAL SER...	Deposit		X	34.92	101,970.31
10/23/2026			4100 · MEDICAL SER...	Deposit		X	15.60	101,985.91
10/24/2026			4100 · MEDICAL SER...	Deposit		X	1,169.40	103,155.31
10/24/2026			4100 · MEDICAL SER...	Deposit		X	388.08	103,543.39
10/24/2026			4100 · MEDICAL SER...	Deposit		X	124.71	103,668.10
10/26/2026			4100 · MEDICAL SER...	Deposit		X	86.80	103,754.90
10/26/2026	ACH	Azalea Health	5000 · CLINIC MATE...		3,040.66	X		100,714.24
10/27/2026			4100 · MEDICAL SER...	Deposit		X	130.03	100,844.27
10/27/2026			4100 · MEDICAL SER...	Deposit		X	108.49	100,952.76

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From 10/01/2026 through 10/31/2026
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Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
10/27/2026			4100 · MEDICAL SER...	Deposit		X	721.60	101,674.36
10/27/2026			4100 · MEDICAL SER...	Deposit		X	196.26	101,870.62
10/27/2026			4100 · MEDICAL SER...	Deposit		X	178.00	102,048.62
10/27/2026			4100 · MEDICAL SER...	Deposit		X	131.28	102,179.90
10/27/2026			4100 · MEDICAL SER...	Deposit		X	56.20	102,236.10
10/27/2026			-split-	Deposit		X	2,333.37	104,569.47
10/27/2026			-split-	Deposit		X	6,849.98	111,419.45
10/27/2026			-split-	Deposit		X	85.30	111,504.75
10/28/2026			4100 · MEDICAL SER...	Deposit		X	892.54	112,397.29
10/28/2026			4100 · MEDICAL SER...	Deposit		X	365.55	112,762.84
10/29/2026			4100 · MEDICAL SER...	Deposit		X	52.58	112,815.42
10/29/2026			4100 · MEDICAL SER...	Deposit		X	244.30	113,059.72
10/29/2026			4100 · MEDICAL SER...	Deposit		X	1,691.40	114,751.12
10/29/2026			4100 · MEDICAL SER...	Deposit		X	19.01	114,770.13
10/29/2026			4100 · MEDICAL SER...	Deposit		X	0.03	114,770.16
10/29/2026			-split-	Deposit		X	188.45	114,958.61
10/29/2026	ACH	McKesson Medical-S...	5000 · CLINIC MATE...	inv#91773523,...	1,123.53			113,835.08
10/29/2026	ACH	INTUIT QUICKBO...	5000 · CLINIC MATE...		1,621.00	X		112,214.08
10/30/2026			4100 · MEDICAL SER...	Deposit		X	776.16	112,990.24
10/30/2026			4100 · MEDICAL SER...	Deposit		X	98.49	113,088.73
10/30/2026			4100 · MEDICAL SER...	Deposit		X	40.70	113,129.43
10/30/2026			-split-	Deposit		X	92.29	113,221.72
10/30/2026	DEBIT	BIG RIVER PIZZA	6000 · PH EXPENSES...	lunch for Arlin...	30.00			113,191.72
10/30/2026	DEBIT	SINCLAIR	6000 · PH EXPENSES...	gas for Arlingt...	76.53			113,115.19
10/30/2026	9277	VISA	-split-	acct#2809	1,194.08			111,921.11
10/31/2026			4100 · MEDICAL SER...	Deposit		X	1,307.09	113,228.20
10/31/2026			4100 · MEDICAL SER...	Deposit		X	278.02	113,506.22
10/31/2026			4100 · MEDICAL SER...	Deposit		X	174.62	113,680.84
10/31/2026			4100 · MEDICAL SER...	Deposit		X	103.60	113,784.44
10/31/2026			4100 · MEDICAL SER...	Deposit		X	35.60	113,820.04

South Gilliam County Ambulance Service
Balance Sheet
As of November 10, 2026

	Nov 10, 26	
ASSETS		
Current Assets		
Checking/Savings		
Bank of Eastern Oregon		7,248.42
LGIP		
Ambulance Replacement Fund	190,517.38	
Equipment Replacement	45,291.25	
LGIP - Other	214,599.24	
Total LGIP		450,407.87
Total Checking/Savings		457,656.29
Accounts Receivable		
Accounts Receivable		58,271.04
Total Accounts Receivable		58,271.04
Other Current Assets		
Accounts receivable - Offset		-58,271.04
Total Other Current Assets		-58,271.04
Total Current Assets		457,656.29
Fixed Assets		
Vehicle & Equipment		
Accumulated Depreciation	-423,559.83	
Vehicle & Equipment - Other	489,372.83	
Total Vehicle & Equipment		65,813.00
Total Fixed Assets		65,813.00
TOTAL ASSETS		**523,469.29**
LIABILITIES & EQUITY		
Liabilities		
Current Liabilities		
Accounts Payable		
Accounts Payable		-90.60
Total Accounts Payable		-90.60
Other Current Liabilities		
Accounts Payable - Offset		90.60
Total Other Current Liabilities		90.60
Total Current Liabilities		0.00
Total Liabilities		0.00
Equity		
Unrestricted Net Assets		503,313.67
Net Income		20,155.62
Total Equity		523,469.29
TOTAL LIABILITIES & EQUITY		**523,469.29**

South Gilliam County Ambulance Service
Profit & Loss Budget vs. Actual
July 1 through November 10, 2026

	Jul 1 - Nov 10, ...	Budget	$ Over Budget	% of Budget
Ordinary Income/Expense				
Income				
Balance Forward	0.00	185,000.00	-185,000.00	0.0%
CARES	0.00	0.00	0.00	0.0%
Donations	100.00	10.00	90.00	1,000.0%
FIRE MED MEMBERSHIP DUES	2,366.00	3,200.00	-834.00	73.9%
Grants	2,917.00	3,500.00	-583.00	83.3%
Interest				
Checking Acct Interest	2.09	0.00	2.09	100.0%
Savings account	0.00	0.00	0.00	0.0%
Interest - Other	0.00	7,200.00	-7,200.00	0.0%
Total Interest	2.09	7,200.00	-7,197.91	0.0%
Investments				
Interest-Savings, Short-term CD	0.00	0.00	0.00	0.0%
Investments - Other	0.00	0.00	0.00	0.0%
Total Investments	0.00	0.00	0.00	0.0%
LGIP Interest	5,908.92	0.00	5,908.92	100.0%
N/ Gilliam Co. Health District	0.00	0.00	0.00	0.0%
Net Working Capitol	0.00	0.00	0.00	0.0%
Refunds/Reimbursements				
Medicare/Medicaid Discount	0.00	0.00	0.00	0.0%
Tri County Ambulance Discount	0.00	0.00	0.00	0.0%
Refunds/Reimbursements - Other	0.00	0.00	0.00	0.0%
Total Refunds/Reimbursements	0.00	0.00	0.00	0.0%
Sales of Surplus Property	0.00	0.00	0.00	0.0%
South Gilliam Co Pt Accts				
CREDIT CARD FEES	0.40	0.00	0.40	100.0%
South Gilliam Co Pt Accts - Other	42,106.66	110,000.00	-67,893.34	38.3%
Total South Gilliam Co Pt Accts	42,107.06	110,000.00	-67,892.94	38.3%
South Gilliam Health Dist	0.00	0.00	0.00	0.0%
Tri County Membership	0.00	0.00	0.00	0.0%
Total Income	53,401.07	308,910.00	-255,508.93	17.3%
Cost of Goods Sold				
Cost of Goods Sold	0.00	0.00	0.00	0.0%
Total COGS	0.00	0.00	0.00	0.0%
Gross Profit	53,401.07	308,910.00	-255,508.93	17.3%

South Gilliam County Ambulance Service
Profit & Loss Budget vs. Actual
July 1 through November 10, 2026

	Jul 1 - Nov 10, ...	Budget	$ Over Budget	% of Budget
Expense				
*Payroll Expenses	0.00	0.00	0.00	0.0%
Bad Debt	0.00	0.00	0.00	0.0%
Depreciation	0.00	0.00	0.00	0.0%
Depreciation Expense	0.00	0.00	0.00	0.0%
Materials & Services				
Ambulance Equipment & Supply				
Ambulance Supplies	994.02	7,500.00	-6,505.98	13.3%
CARES Supplies	0.00	0.00	0.00	0.0%
Medications	1,239.07	7,500.00	-6,260.93	16.5%
Ambulance Equipment & Supply - Other	150.00	0.00	150.00	100.0%
Total Ambulance Equipment & Supply	2,383.09	15,000.00	-12,616.91	15.9%
Ambulance Service Licensing	0.00	2,000.00	-2,000.00	0.0%
Ambulance Training	666.25	15,000.00	-14,333.75	4.4%
Attendant stipends	0.00	0.00	0.00	0.0%
Attendants (Licensing)	23.00	1,500.00	-1,477.00	1.5%
Attendants Meals	1,581.67	6,000.00	-4,418.33	26.4%
Audit	0.00	4,000.00	-4,000.00	0.0%
Billing				
CARES Billing	0.00	0.00	0.00	0.0%
Billing - Other	1,066.12	5,000.00	-3,933.88	21.3%
Total Billing	1,066.12	5,000.00	-3,933.88	21.3%
Capital Outlay	0.00	60,000.00	-60,000.00	0.0%
Communications				
Active 911	0.00	500.00	-500.00	0.0%
Radio Equipment	0.00	1,500.00	-1,500.00	0.0%
Communications - Other	0.00	0.00	0.00	0.0%
Total Communications	0.00	2,000.00	-2,000.00	0.0%
Contingency	0.00	9,870.00	-9,870.00	0.0%
Contract Services				
Bookkeeper	0.00	0.00	0.00	0.0%
Coordinator	0.00	0.00	0.00	0.0%
Legal Services	0.00	10,000.00	-10,000.00	0.0%
Physician Advisor	0.00	2,400.00	-2,400.00	0.0%
Contract Services - Other	0.00	0.00	0.00	0.0%
Total Contract Services	0.00	12,400.00	-12,400.00	0.0%
Employee Assistance Program	0.00	5,000.00	-5,000.00	0.0%
Fuel	3,351.44	10,000.00	-6,648.56	33.5%
Grant Expenses	0.00	0.00	0.00	0.0%
Insurance	0.00	10,000.00	-10,000.00	0.0%
Insurance Reimbursements	0.00	0.00	0.00	0.0%

South Gilliam County Ambulance Service
Profit & Loss Budget vs. Actual
July 1 through November 10, 2026

	Jul 1 - Nov 10, ...	Budget	$ Over Budget	% of Budget
Maintenance				
Equipment	80.95	5,000.00	-4,919.05	1.6%
Vehicles	2,293.85	15,000.00	-12,706.15	15.3%
Maintenance - Other	1,309.67	0.00	1,309.67	100.0%
Total Maintenance	3,684.47	20,000.00	-16,315.53	18.4%
Miscellaneous				
Bank Fees	5.27	0.00	5.27	100.0%
Miscellaneous - Other	3.65	200.00	-196.35	1.8%
Total Miscellaneous	8.92	200.00	-191.08	4.5%
Office Supplies				
Public Outreach	114.98	0.00	114.98	100.0%
Telephone	312.05	840.00	-527.95	37.1%
Office Supplies - Other	0.00	2,500.00	-2,500.00	0.0%
Total Office Supplies	427.03	3,340.00	-2,912.97	12.8%
Scholarships	0.00	1,000.00	-1,000.00	0.0%
Storage/Rent	5,000.00	5,000.00	0.00	100.0%
Transfer/Ambulance Replacement	0.00	0.00	0.00	0.0%
Transfer/Building fund SGCRFPD	0.00	0.00	0.00	0.0%
Uniforms	0.00	1,500.00	-1,500.00	0.0%
Vaccines	273.60	500.00	-226.40	54.7%
Materials & Services - Other	0.00	0.00	0.00	0.0%
Total Materials & Services	18,465.59	189,310.00	-170,844.41	9.8%
Miscellaneous	0.00	0.00	0.00	0.0%
Payroll Expenses				
Attendant payroll	13,710.00	54,000.00	-40,290.00	25.4%
Payroll taxes	1,069.86	5,600.00	-4,530.14	19.1%
Payroll Expenses - Other	0.00	0.00	0.00	0.0%
Total Payroll Expenses	14,779.86	59,600.00	-44,820.14	24.8%
Reconciliation Discrepancies	0.00	0.00	0.00	0.0%
Uncategorized Expenses	0.00	0.00	0.00	0.0%
Total Expense	33,245.45	248,910.00	-215,664.55	13.4%
Net Ordinary Income	20,155.62	60,000.00	-39,844.38	33.6%
Other Income/Expense				
Other Income				
Trans. from Amb. Replacement	0.00	0.00	0.00	0.0%
Total Other Income	0.00	0.00	0.00	0.0%

South Gilliam County Ambulance Service
Profit & Loss Budget vs. Actual
July 1 through November 10, 2026

	Jul 1 - Nov 10, ...	Budget	$ Over Budget	% of Budget
Other Expense				
Ask My Accountant	0.00	0.00	0.00	0.0%
Trans to Amb. Replacement	0.00	60,000.00	-60,000.00	0.0%
Total Other Expense	0.00	60,000.00	-60,000.00	0.0%
Net Other Income	0.00	-60,000.00	60,000.00	0.0%
Net Income	**20,155.62**	**0.00**	**20,155.62**	**100.0%**

South Gilliam County Ambulance Service

Register: Bank of Eastern Oregon
From 10/13/2026 through 11/10/2026
Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
10/14/2026			LGIP	Funds Transfer	10,000.00	X		9,659.31
10/17/2026			South Gilliam Co Pt Accts	Deposit		X	2,362.00	12,021.31
10/19/2026			South Gilliam Co Pt Accts	Deposit		X	266.33	12,287.64
10/27/2026			-split-	Deposit		X	4,569.19	16,856.83
10/28/2026			South Gilliam Co Pt Accts	Deposit		X	275.75	17,132.58
10/31/2026			Interest:Checking Acct Interest	Interest		X	0.71	17,133.29
11/02/2026			-split-	Deposit			51.48	17,184.77
11/04/2026			-split-	Deposit			687.15	17,871.92
11/05/2026			South Gilliam Co Pt Accts	Deposit			264.45	18,136.37
11/09/2026			South Gilliam Co Pt Accts	Deposit			311.42	18,447.79
11/09/2026			South Gilliam Co Pt Accts	Deposit			1,084.51	19,532.30
11/09/2026			FIRE MED MEMBERSHIP D...	Deposit			728.00	20,260.30
11/10/2026	22324	Renee Heidy	Materials & Services:Attendant...		106.40			20,153.90
11/10/2026	22325	Sam Bates	-split-		162.50			19,991.40
11/10/2026	22326	DaiLene Wilson	Materials & Services:Attendant...		39.00			19,952.40
11/10/2026	22327	Bank of Eastern Oregon	-split-		803.81			19,148.59
11/10/2026	22328	Rally Networks	Materials & Services:Office Su...		61.59			19,087.00
11/10/2026	22329	Systems Design	Materials & Services:Billing		767.10			18,319.90
11/10/2026	22330	Wright's Tire and Auto	Materials & Services:Maintena...		2,501.52			15,818.38
11/10/2026	22331	South Gilliam Health Center	-split-		2,444.99			13,373.39
11/10/2026	22332	D A Autobody	Materials & Services:Maintena...		138.07			13,235.32
11/10/2026	22333	Life Assist	-split-	97823AMB	383.78			12,851.54
11/10/2026	22334	Hattenhauer Energy Co., LLC	Materials & Services:Fuel		536.53			12,315.01
11/10/2026	22335	Rally Networks	-split-		66.59			12,248.42
11/10/2026	22336	SGCRFPD	Materials & Services:Storage/R...		5,000.00			7,248.42

Lisa Bettencourt South Gilliam Health

From: Lucinda Bennett <lucyraye@gmail.com>
Sent: Tuesday, October 20, 2026 3:11 PM
To: Lisa Bettencourt South Gilliam Health
Subject: interested in board position

Dear Lisa,
I am writing to express my interest in serving on the Board of Directors for the South Gilliam County Health Center.

I believe that in a small town, everyone has a part to play in supporting the community and helping it thrive. I would like to do my part by contributing my time, perspective, and common sense to an organization that provides an important service to our community.

Although I do not have a medical background or previous board experience, I bring a lifetime of practical experience and a willingness to learn. I have lived overseas in four different countries over the course of 13 years, which has given me a broader perspective and an appreciation for different people, cultures, and ways of life. I have also raised four children, an experience that has taught me patience, responsibility, problem-solving, and the importance of listening to others.

Thank you for considering my interest in serving on the Board of Directors.
Sincerely,
Cindy Bennett

Working with Minors

A minor is defined as any individual under the age of 18. While this list is not exhaustive, it provides a strong foundation for establishing and maintaining appropriate professional boundaries.

1. Maintain observable and interruptible interactions with minors.
2. Avoid one on one private meetings with a minor unless approved in advance and unavoidable. Document such situations promptly.
3. Maintain only professional, appropriate physical contact with minors; never sexual, intrusive, or for any personal gratification. Avoid close or unnecessary interactions, keeping any brief contact (like high fives or fist bumps) appropriate and professional.
4. Use only district-approved communication channels with minors.
5. It is best to communicate with minors only at reasonable hours and about district-related topics.
6. Avoid any gift giving, favoritism, secrets or special treatment that could appear inappropriate.
7. Keep appearance-related comments strictly professional.
8. Avoid oversharing with minors. Do not discuss romantic or intimate topics and never engage in or allow any conversation or behavior direct or perceived that is sexual in nature.
9. If a minor talks to you about romantic relationships, use caution, consider adding a second adult to the conversation and limit your involvement to that which is professional.
10. Always use district devices for any photos or recordings of minors. Never capture images or recordings without proper consent.

When something occurs outside of these practices, you have a duty to report it to your supervisor, whether it is something you were directly involved in or something you witnessed or were told. For example:

- Minor in crisis calls/emails you outside of normal business hours.
- A minor gains access to your personal cell phone number.

- A minor is suspected of having romantic feelings for you.

If you come across a situation where child sexual abuse images/materials are present, do not view them, and do not delete them (this includes on the minor's phones). Believe the minor when they say the image(s) exist and contact law enforcement immediately and notify your supervisor.

If you have reasonable cause to believe a child has been abused, immediately report it to the Oregon Child Abuse Hotline: 855-503-7233 or law enforcement. Next, notify the district administrator.

Holidays

The District grants the following holidays as paid holidays when they fall during the work week, to regular full-time employees: New Year's Day, Memorial Day, Fourth of July, Labor Day, half day the day before Thanksgiving, Thanksgiving Day and the day after Thanksgiving, Christmas Day.

Holiday pay shall be paid at the qualified employee's regular straight time rate of pay.

South Gilliam Health Center

CLINIC EXPANSION PROJECT

Help Us Raise

$2,000 for $20,000

*To strengthen our chances of securing a **$20,000** grant that will enable us to:*

See more patients.

Bring more specialty care to Condon.

Make children's wellness care more accessible.

Strengthen patient care and coordination.



Give Today!

Contribute by cash or check at
South Gilliam Health Center.
422 N. Main Street | Condon, Oregon

Please make checks payable to South Gilliam Health District.
Contributions are not tax-deductible as charitable donations.

CHW Home Visiting Policy (Draft)

Clinic	South Gilliam Health Center
Scope	This policy applies to all Community Health Workers (CHWs), CHW Supervisors and any staff who conduct or support home visits on behalf of South Gilliam Health Center.
Stakeholders	CHWs, CHW Supervisors, Clinical Leadership, Compliance/Privacy Officer, Human Resources, Risk Management
Compliance citing	HIPAA Privacy and Security Rules (45 CFR Parts 160 and 164); Oregon mandated reporting statutes; OSHA General Duty Clause; OSHA 3148, Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers
Published date	
Revision date	
Next review	No later than 12 months after publication

1. Purpose

This policy sets expectations so that CHW home visits are safe for patients and staff, respect professional boundaries, and are delivered consistently. Home visits are a core part of CHW work, and should be patient-centered, trauma-informed and culturally responsive.

2. Definitions

In this policy, **must** and **may not** are requirements, **should** is the expected practice (departures need a documented reason), and **may** is permitted at the CHW's judgment.

Term	Definition
Home visit	An in-person visit at the patient's residence, including shelters, transitional housing and encampments.
Alternate setting	A community location (clinic, library, community center) or a phone or video visit.
Designated check-in contact	The CHW Supervisor or another named staff member who receives check-ins and starts escalation if one is missed.
Paired visit	A visit made by two staff members together.
Near miss	An event that could have caused harm but did not.
Pre-visit risk screening	The checklist in Appendix A, completed before a first visit and when circumstances change.

3. Visit Location and Consent

a. **Choosing a location.** The CHW and patient choose the visit location together. A home visit fits when the patient is homebound or prefers it, the CHW needs to see the home environment, or the program requires it.
b. **Consent.** Patients should give verbal consent before each home visit. Patients may decline or reschedule without losing services.
c. **Interpreters.** CHWs should use a qualified interpreter when needed. Family members, especially minors, should not interpret except in an emergency.

4. Before the Visit

a. **Risk screening.** Before a first home visit, and whenever circumstances change, the CHW should complete the Pre-Visit Risk Screening in Appendix A and review any "yes" answer with the CHW Supervisor before the visit.
b. **Paired visits.** A visit must be paired or moved to an alternate setting when the Pre-Visit Risk Screening requires it, the address is flagged (6.e), or the visit is outside approved hours. A CHW may ask for a partner on any visit, and the request will never be held against them.
c. **Scheduling.** CHWs must log each home visit in provided document with the address, purpose, expected start and end time, and whether it is solo or paired. Visits should take place during clinic business hours; other times need supervisor approval. Visits should be rescheduled for severe weather or an unresolved safety concern.

5. During the Visit

a. **Check-in and check-out.** CHWs must check in with the designated check-in contact on arrival and check out on leaving, using text or in person check in. If a visit will run late, the CHW must send a new expected end time.
b. **Entering the home.** CHWs should not enter if the patient is not there, only minors are present, or anything on arrival causes concern. Instead they should leave, tell the check-in contact and reschedule. Once inside, the CHW should sit with a clear path to an exit.
c. **Confidentiality.** CHWs must follow HIPAA and all confidentiality policies:
    - Paper records go in a locked container and are never left visible in a vehicle.
    - Devices must be clinic-approved, encrypted and password-protected. Patient information may not be stored on personal devices.
    - Ask the patient's permission before discussing health information in front of others.
    - Before sensitive conversations, explain the limits of confidentiality, including the duty to report.
d. **Infection control and hazards.** CHWs must follow hand hygiene and PPE practices. CHWs who are sick must not make home visits. If someone in the household has a contagious illness, the visit should be rescheduled or moved to an alternate setting. CHWs may end a visit because of hazards such as pests, unsafe structures or smoking, and must report the hazard to the supervisor.

6. Safety and Emergencies

a. **Missed check-out.** If a CHW has not checked out within 30 minutes of the expected end time, the designated check-in contact must:
   i. call and text the CHW;
   ii. after 10 minutes with no response, notify the CHW Supervisor;
   iii. after 15 more minutes, check the CHW's shared location and send staff to the address if it is safe; and
   iv. if the CHW still cannot be reached, call 911 for a welfare check.

b. **Pause, adjust or leave.** A CHW may pause, adjust or end any visit at any time if they feel unsafe, without giving a reason. No CHW will be penalized for leaving a visit. In an emergency, the CHW gets to safety and calls 911 first, then notifies the supervisor.

c. **Code word.** Each team must set a code word. If a CHW calls the Supervisor and uses the code word, the Supervisor must call 911 right away and send help to the CHW's location.

d. **After an incident or near miss.** The CHW must notify the supervisor the same day and complete an incident report. Near misses must be reported too. The supervisor must hold a debrief within 2 business days. Injuries are reported under SAIF.

e. **Flagged addresses.** After an incident, the supervisor must create note/flag in Azalea. Visits there must be paired or moved to an alternate setting until the flag is removed.

f. **Suicide risk and mental health crisis.** CHWs are not crisis counselors and are not expected to assess risk on their own. When a patient shares thoughts of suicide, including thoughts from days or weeks earlier, or appears to be in a mental health crisis, the CHW must:
   i. call 911 if there is immediate danger or a medical emergency;
   ii. stay with the patient, or keep them on the phone, and not promise secrecy;
   iii. call the CHW Supervisor or CCS crisis line (541-240-8030) while still with the patient, and follow their direction.
   iv. document the disclosure and the actions taken.

g. **Mandated reporting.** CHWs are mandated reporters under Oregon law. When a CHW has reasonable cause to believe abuse or neglect has occurred, they must make the report personally, in the way and within the time state law requires. Proof is not needed, and CHWs should not investigate. Telling a supervisor does not replace the CHW's legal duty. The CHW must notify the supervisor within 24 hours, and no one may discourage or delay a report. 1-855-503-SAFE (7233).

7. Professional Boundaries

a. **Gifts.** CHWs may accept small refreshments, such as water or coffee. They may not accept cash, gift cards or other gifts and should decline politely and tell the supervisor.

b. **Money.** CHWs may not handle patient money, lend or borrow money, or carry out financial transactions for a patient. They should refer patients with financial needs to appropriate resources.

c. **Medications.** CHWs may review medication lists and bottles with the patient, give reminders and education, and support medication reconciliation with the care team. They may not

handle, sort, give, transport or dispose of medications or any other substances. When a patient needs that help, the CHW should connect them with a caregiver or pharmacy service.

d. **Transportation.** CHWs may not drive patients. They should connect patients with transportation resources, Medicaid non-emergency medical transportation or a caregiver.
e. **Personal contact.** CHWs must use clinic phones and accounts, and may not share personal phone numbers or connect with patients on personal social media. They may not do chores, childcare, pet care or personal care outside their role. A CHW with a personal or family relationship with a patient must tell the supervisor, who may choose to reassign the patient. CHWs will be given a monthly cell phone stipend of $50/month, but are required to use *67 prior to calling patients on their cell phone and may not give patients their person cell phone numbers.

8. Documentation

a. **Visit notes.** CHWs must document each home visit in the EHR within 24 hours, including consent, purpose, services, referrals and follow-up. Incidents, crises and reports are also documented as Section 6 requires.

9. Training and Governance

a. **Training.** Before their first home visit, CHWs must complete training related to home visiting safety, mandatory reporting, HIPAA compliance and infection control training, and must repeat them every year.
b. **Exceptions.** Exceptions need written approval from the CHW Supervisor. No exception may override 6.b (leaving an unsafe visit) or 6.6 (mandated reporting).
c. **Compliance and review.** Not following this policy may lead to corrective action under the Staff Handbook. The policy owner must review this policy every 12 months and after any serious incident.
d. **Related policies.** Staff Handbook; HIPAA privacy and security; mandated reporting; incident reporting and workers' compensation; vehicle use; gifts; infection control.

References

- National Association of Community Health Centers. Developing a CHW Home Visiting Policy. September 2023.
- Occupational Safety and Health Administration. Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers (OSHA 3148).
- Connected Care for Older Adults. CHW Learning Pathway: Home Visitor Safety, Elder Abuse Prevention & Mandatory Reporting, Navigating a Mental Health Crisis.

Appendix A: Pre-Visit Risk Screening

Complete this checklist before a first home visit and whenever circumstances change, using the patient's chart and a confirmation call. Record the answers in Azalea. If every answer is "no," a solo visit is allowed. Any "yes" means the CHW reviews the visit with the supervisor first, and items marked **Required** mean the visit must be paired or moved to an alternate setting.

Confirmation call (day before): confirm the address and time, where to park, who else will be home, that pets will be secured, and any safety concerns.

#	Question	Yes / No	If yes
1	Does the chart or care team note threats, violence or aggression by anyone in the home?		**Required:** paired or alternate setting
2	Are there weapons in the home?		**Required:** paired or alternate setting
3	Is the address flagged after a prior incident (6.e)?		**Required:** paired or alternate setting
4	Is intimate partner violence or abuse known or suspected?		Alternate setting preferred; plan a private conversation
5	Is there active substance use, or a chance someone will be intoxicated?		Review with supervisor; reschedule if intoxication is suspected on arrival
6	Is there an animal that may not be secured?		Ask that it be secured; reschedule if it cannot be
7	Will adults the CHW does not know be present?		Review with supervisor
8	Are there concerns about the neighborhood, building access, parking or cell coverage?		Plan parking, exits and communication; consider pairing
9	Is the visit outside approved hours or in an area new to the CHW?		Supervisor approval; consider pairing
10	Does anything else make the CHW uneasy about this visit?		Paired visit on request

CHW: _____ Date: _____ Supervisor review (if needed): _____

CHW Home Visit Emergency Response Policy (Draft)

Clinic	South Gilliam Health Center
Scope	This policy applies to all Community Health Workers (CHWs), CHW Supervisors, designated check-in contacts and any staff who conduct or support home visits on behalf of South Gilliam Health Center.
Stakeholders	CHWs, CHW Supervisors, Clinical and Behavioral Health Leadership, Compliance/Privacy Officer, Human Resources, Risk Management
Compliance citing	OSHA General Duty Clause; OSHA 3148, Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers; Oregon mandated reporting statutes; HIPAA Privacy Rule disclosures to avert a serious threat to health or safety (45 CFR 164.512(j))
Published date	
Revision date	
Next review	No later than 12 months after publication

1. Purpose

This policy sets out the steps home-visiting staff must take when an emergency happens during a home visit. It works alongside the CHW Home Visiting Policy. The skills behind these steps, such as de-escalation, recognizing warning signs and talking with patients about suicide or abuse, are taught in the required training listed in Section 6.

2. Definitions

In this policy, **must** and **may not** are requirements, **should** is the expected practice (departures need a documented reason), and **may** is permitted at the CHW's judgment.

Term	Definition
Emergency	A situation that needs immediate help to protect someone's life or safety.
Urgent concern	A situation with no immediate danger that still needs a call to the escalation contact during the visit.
Escalation contact	The CHW Supervisor or, when the supervisor cannot be reached, the named backup who answers emergency calls during all visiting hours.
Near miss	An event that could have caused harm but did not.

3. Response Levels

CHWs should match what they notice to a level below. When unsure, treat the situation as the higher level.

Level	Examples	Response
Emergency	Medical emergency; weapon, threat or physical aggression; fire, gas leak or gunfire; patient at immediate risk of suicide; someone in immediate danger	Get to safety and call 911, then call the escalation contact (Scenarios A–E)
Urgent concern	Any disclosure of suicidal thoughts, even from weeks ago; signs of possible abuse, neglect or exploitation	Call the escalation contact during the visit (Scenarios D and E)
Concern to support	Changes in mood, routine or self-care with no safety risk; caregiver stress	Document it and raise it with the care team through the usual process

4. Emergency Procedures

Scenario A: Medical emergency

1. **Check the scene.** If the cause could also harm you, such as a toxic fume or an assault, leave and call 911 from a safe place.
2. **Call 911.** Give your name and role, the exact address and what is happening.
3. **Give first aid only within your training.** Give first aid or CPR only if you are certified and it is safe. Do not give or handle medications.
4. **Call the escalation contact** once help is on the way.
5. **If the patient declines emergency services,** call the escalation contact before leaving.

Scenario B: Threat to personal safety

1. **Leave right away** if anyone shows a weapon, makes a direct threat, becomes physically aggressive or blocks your exit. Do not stay to de-escalate.
2. **For rising verbal tension,** you may pause, adjust or leave, as described in the CHW Learning Pathway. Leave if it does not settle.
3. **Use a neutral reason to leave,** such as "I need to get something from my car."
4. **Drive to a public place before calling.** If you are followed or in immediate danger, call 911 right away. If you cannot speak freely, call your check-in contact and use the code word.
5. **Call the escalation contact** as soon as you are safe.

Scenario C: Fire, gas leak or gunfire

1. **Fire, smoke or gas smell:** tell everyone to get out, and leave the home yourself.
2. **Gunfire nearby:** stay low and away from windows, in a room with solid walls, until it is safe to go to your vehicle.
3. **Call 911** from a safe place and give the location and the threat.
4. **Call the escalation contact** once you are safe.

Scenario D: Suicide risk or mental health crisis

These steps apply whenever a patient shares thoughts of suicide, whether now or in the past, or appears to be in a mental health crisis.

1. **If anyone is in immediate danger,** call 911 or CCS mobile crisis line (541-240-8030) and ask for a crisis-trained responder. Immediate danger includes a patient who intends to act now, has a weapon or pills at hand, or has already harmed themselves. If you feel unsafe, leave and call from outside.
2. **Otherwise, stay with the patient and call the escalation contact or CCS crisis dispatch (541-240-8030)** during the visit. Do this for every disclosure. Do not assess the patient's risk yourself, and do not promise to keep it secret.
3. **Follow their direction.** This may include a phone handoff to a clinician.
4. **Stay until the patient is connected** to a clinician, crisis line or emergency responders, unless you feel unsafe.

Scenario E: Suspected abuse, neglect or exploitation

These steps apply to possible abuse, neglect, exploitation or self-neglect of an older adult.

1. **If anyone is in immediate danger,** get to safety and call 911.
2. **Do not confront anyone or investigate.** Speak with the patient privately if you can, and note what you see and hear, quoting the patient's words.
3. **Make the report yourself** to 1-855-503-SAFE (7233) as soon as time permits and complete any required written form. Proof is not needed. Telling your supervisor does not replace this duty.
4. **Notify the escalation contact** the same day. You may consult them first, but do not let that delay the report.
5. **Plan future visits.** The supervisor adds a safety flag to the patient's record without investigation details. Future visits must be paired or held in an alternate setting until the supervisor decides it is safe to return.

5. After an Emergency

a. **Notify.** The CHW must notify the supervisor right away after any event involving 911, and the same day for any other emergency, urgent concern or near miss.
b. **Report and document.** The CHW must complete an incident report within 24 hours using Appendix B, and document patient-related events in the EHR.
c. **Debrief.** The supervisor must hold a debrief with the CHW within 2 business days of any emergency, using the questions in Appendix B.
d. **Follow up.** The CHW or care team should follow up with the patient within 1 business day. After a safety incident, the supervisor flags the address as described in the CHW Home Visiting Policy.

6. Training and Governance

a. **Training.** Before their first home visit, and every year after, CHWs must complete the Connected Care for Older Adults CHW Learning Pathway modules listed in the References, or equivalent training.

b. **Preparation.** CHWs should carry a completed Emergency Contact Card (Appendix A) and have a working cell phone at all times during home visits.
c. **Exceptions.** No exception to this policy may delay a call to 911, keep a CHW in an unsafe situation, or prevent a required report.
d. **Compliance and review.** Not following this policy may lead to corrective action under the Staff Handbook. South Gilliam Health Center must review this policy every 12 months and after any event involving 911.
e. **Related policies.** CHW Home Visiting Policy; mandated reporting; incident reporting and workers' compensation; HIPAA privacy and security.

References

- Connected Care for Older Adults. CHW Learning Pathway: Home Visitor Safety, Navigating a Mental Health Crisis, Elder Abuse Prevention & Mandatory Reporting.
- Occupational Safety and Health Administration. Guidelines for Preventing Workplace Violence for Healthcare and Social Service Workers (OSHA 3148).
- U.S. Department of Justice. Elder Justice Statutes by State.

This draft is not legal advice and does not transfer liability. Have it reviewed by legal counsel and checked against state law before adopting it.

Appendix A: Emergency Contact Card

Complete this card with current numbers, carry it on every home visit, and keep a copy in your phone.

Situation	Call first	Number
Threat, violence, medical emergency or fire	911, after getting to a safe place	911
Any emergency, urgent concern or near miss	Escalation contact: CHW Supervisor	541-377-6262
Supervisor cannot be reached	Backup escalation contact: main clinic line	541-626-7081
Suicide risk or mental health crisis	Escalation contact or CCS crisis dispatch	541-240-8030
Crisis support, as directed	988 Suicide & Crisis Lifeline (call or text)	988
Crisis support in person	CCS	541-240-8030
Suspected abuse, neglect or exploitation of an older adult	Oregon SAFEline (Oregon Department of Human Services)	1-855-503-SAFE (7233)
Possible poisoning (no immediate emergency)	Poison Control	1-800-222-1222

When you call 911, say: your name and role, the exact address (including unit number), and what is happening.

Appendix B: Incident Report and Debrief Guide

Complete the incident report within 24 hours of any emergency, urgent concern or near miss, and document it. Keep it factual.

Report field	What to include
Date, time and location	Visit address and the time the event started and ended
People involved	CHW, patient and anyone else present (roles, not opinions)
What happened	What you saw, heard or were told, in order
Response level and scenario	Emergency, urgent concern or near miss; Scenario A–E
Actions taken	Who you called and when (911, escalation contact, 988, reporting line) and what you did
Outcome	Where the patient and CHW are now; any injuries; whether a report was filed
Follow-up needed	Patient follow-up, address flag, equipment or protocol changes

Debrief questions (supervisor and CHW, within 2 business days):

- What worked well in the response?
- What could have improved safety or the outcome?
- Should personal safety habits or clinic protocols change? Who will recommend the change?
- What support does the CHW need now?

CHW: _____ Supervisor: _____ Debrief date: _____