



## **NOTICE OF MEETING**

Ohio Hills Health Centers will hold its next regular meeting at 12:00 Noon on **Monday, September 23, 2024, at the Barnesville Library Annex, however, if you do not feel comfortable attending in person you can attend via conference call.**

**Call in number for Board Meeting: 267-807-9601**  
**PIN number: 810107**

### **AGENDA**

**CALL TO ORDER** – Chairperson

**MINUTES OF AUGUST 19, 2024** – Recording Secretary

**CHIEF OPERATING OFFICER’S REPORT** – Michael Carpenter

**MEDICAL DIRECTOR’S REPORT** – Himalaya Patcha, M.D.

**DENTAL DIRECTOR’S REPORT** – Robert Brewer, DDS

**DIRECTOR OF QUALITY & CLINICAL SYSTEMS REPORT** – Debbie Fisher, R.N.

**DIRECTOR OF OUTREACH AND DEVELOPMENT REPORT** – Jan Chambers

**DIRECTOR OF REVENUE CYCLE MANAGEMENT REPORT** – Dee Stewart

**FINANCE COMMITTEE REPORT**

**INTERIM CHIEF FINANCIAL OFFICER** – Matt King

**CHIEF EXECUTIVE OFFICER’S REPORT** – Jeff Britton

**OTHER BUSINESS**

**ADJOURNMENT**

**JAB/dm**

**OHIO HILLS HEALTH CENTERS**  
**Minutes of Meeting**  
**August 19, 2024**

The Ohio Hills Health Centers Board of Trustees held its regular meeting at Ohio Hills Health Center Woodsfield on August 19, 2024.

**Call-in Number: 267-807-9601**  
**Passcode: 810107**

**Present were:**

Mr. Brad Hudson, President  
Mr. Tim McKelvey, Treasurer  
Mr. Les Tickhill, Vice President  
Mr. Tim Hall, Barnesville Representative  
Mrs. Donna Secrest, Monroe County Representative  
Mrs. Anita Rogers, Barnesville Representative  
Mrs. Deborah Day, Monroe County Representative  
Mr. Robert Koch, Secretary (Call In)  
Mr. Brent Tisher, Monroe County Representative

**Absent was:**

Mr. Charles Bardall, Freeport Representative

**Also, present were:**

Jeff Britton, Chief Executive Officer  
Michael Carpenter, Chief Operating Officer  
Matt King, Interim Chief Financial Officer  
Dee Stewart, Director of Revenue Cycle Management  
Jan Chambers, Director of Outreach and Development  
Debbie Fisher, Director of Quality and Clinical Systems  
Denise McBurney, Recording Secretary

**Absent, was:**

Robert Brewer, DDS, Dental Director  
Himalaya Patcha, M.D., Medical Director

Meeting called to order by Brad Hudson at 12:00 p.m.

A quorum being present Les Tickhill, made a motion to approve minutes of July 15, 2024.  
Seconded by Donna Secrest.

## **CHIEF OPERATING OFFICER'S REPORT**

### **1. Call Center**

Michael reported on Call Center Statistics from July 2024. There were 6,245 calls received with 5,696 calls answered for an answer rate of 91.2%. The goal is 95%. The average wait time was 51 seconds and the average talk time was 2 minutes and 20 seconds.

### **2. Operations**

Michael reported on new Patient Applications for July 2024. There were 65 applications issued. There were 129 new patient appointments. Breakdown of patient appointments by provider/sites is as follows: OHCC Barnesville Dental – There were 45 applications issued and all were for Dr. Brewer; OHHC Barnesville – There were 31 applications issued and provider information as follows: Ryan=1, Morgan=2, Miles=12, Dr. Patcha=4, Dr. Wooten=6, Jenna=2, Melissa=4; OHHC Belmont Career Center – There were no applications issued or patients seen as the OHHC Belmont Career Center is closed for the summer months; OHHC Caldwell – There were no applications issued; OHHC Freeport Dental – There were 17 applications issued and provider was Dr. Bauer; OHHC Freeport – There were 8 applications issued and provider information as follows: Ryan Aston=5, Dr. Wooten=3; OHHC Quaker City – There were 10 applications issued with all being patients of Staci; OHHC Woodsfield – There were 18 applications issued and provider information as follows: Dr. Overmiller=3, Jenna=2, Morgan=5, Ryan=8.

### **3. Construction Project Updates**

Michael reported on Roof Replacement Project for the Barnesville Location. The roof will be finished by the end of this week weather permitting. The project is going well. There were two small sections that had to be replaced for the decking. There will only be minimal cost for this addition to the project.

Michael reported on the Window Replacement Project for Barnesville. GE Williams, Inc., has placed the order for the windows. All windows on the second floor will be replaced along with the rectangular windows. Ultimately will get 64 openings with the grant money. One recommendation was made and this is for the fourth floor (7 small openings). These are essentially sky lights. It is going to be next to impossible to cut at an effective price. Contractor has recommended potentially bricking in these specific openings as a more cost-effective approach. For the 7 small openings the Historical Society will have to be involved and a decision made for the approach we will want to take. This will be a down the road piece of the puzzle. More than likely will start this project in October 2024.

### **4. Woodsfield Property**

Michael reported receiving 2 additional calls about the property adjacent to OHHC Woodsfield. The latest caller showed an interest in potentially buying some of the property or all of it. Told the caller he would follow up with the Board. Michael stated from an operational standpoint do not think it is a bad idea to potentially sell this property and is bringing this to the Board for further discussion today. Donna Secrest questioned what the caller is going to do with this

property if we sell this. Michael stated caller wants the property to add a commercial storefront for her family business. Tim McKelvey stated he is not going to be voting yes to sell any property. Brad Hudson also stated he is not interested in selling at this point and time. Tim Hall questioned if this caller would be willing to lease the property. Board Members are in agreement to leasing this property at this time and requests Michael reach out to the caller and question if leasing would be an option at this time.

Michael Carpenter requested Board Approval for the Chief Operating Officer's Report.

## **RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Anita Rogers made a motion to approve the Chief Operating Officers report as presented to the Board. Seconded by Donna Secrest.

**RESOLVED**, that the motion passed unanimously.

**Chief Operating Officers Report – Attached**

**MEDICAL DIRECTOR'S REPORT** – There was no report given by the Medical Director.

**DENTAL DIRECTOR'S REPORT** – There was no report given by the Dental Director.

### **DIRECTOR OF QUALITY & CLINICAL SYSTEMS REPORT**

#### **1. COVID-19 and Flu Report**

Debbie reported on vaccines and testing. For the month of July there were 0 COVID vaccines. For the month of July there were 0 Flu Vaccines administered.

Testing for the month of June:

47 tested for COVID and there were 5 positives with an 11% positivity rate.

There were 0 tested for the flu and 0 tested for RSV.

The new CDC protocols were established in March for COVID. Now COVID-19 is grouped with Flu and RSV as Respiratory Infectious Plan of Treatment. A patient's isolation is based on how they feel, such as no fever or use of fever reducing medications for 24 hours and then may resume normal activities and wear a mask for 5 days. Healthcare personnel plans for testing and isolation have not changed.

The COVID-19 vaccine for 2024-2025 season will be released mid-September or early October based on the new formula for the previous year's variants. Also, the CDC is recommending patients receive their COVID and Flu Vaccines at the same time as it is safe to do so.

2. Patient Satisfaction Surveys

Debbie reported Patient Satisfaction Surveys for the second quarter revealed a 4.9 on a scale of 1-5 for both Dental and Medical. Positive responses throughout.

3. PCMH

Debbie reported as we continue to work towards PCMH, Campaign Messages are a required element. Campaign Messaging are electronic text messages, Patient Portal messages or e-mails to remind female patients of annual cervical cancer screenings and a reminder to established patients of annual visit reminders. Although this is a requirement for PCMH, it has resulted in an increase in patient appointments.

Debbie Fisher requested Board Approval for the Director of Quality & Clinical Systems report.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Les Tickhill made a motion to approve the Director of Quality & Clinical Systems report as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

**Director of Quality & Clinical Systems Report – Attached**

**DIRECTOR OF OUTREACH AND DEVELOPMENT REPORT**

1. Jan reported continuing to have a presence on Facebook/Twitter/Instagram.
2. Jan reported on events that have and/or will be occurring:
  - Hoops for the Heart
  - Fun in the Ville
  - Farm Bureau Annual Meeting
  - National Health Center Week – Week of August 4<sup>th</sup>. Senator Chavez visited Ohio Hills Health Center Woodsfield on August 8<sup>th</sup>.
  - Sponsored Barnesville Chamber Luncheon – August 14<sup>th</sup>. – Nationwide Children’s Hospital guest speaker.
  - Back to School Events
  - St. Clairsville Chamber – September 18<sup>th</sup>.
  - Pumpkin Festival

3. Jan reported on the 2024 Community Needs Assessment. Belmont Career Center. Board support needed to identify participants in Barnesville, Woodsfield, Quaker City, Freeport, and Caldwell.
  
4. Jan reported on the following Grant/Foundation Funding:
  - ODH – Planning Grant Bellaire – School Based Health Center - \$50,000.00 – \$500,000.00. Implementation Grant pending and this may be renewable for 2 additional years. A Business Plan and Community Needs Assessment will need to be submitted. Time intensive activities during the planning phase. Bellaire School Board did approve and sign and MOU.
    - Bellaire would have a SBHC within the school but this would also be open to the community.
    - Plans are to build the SBHC off of their Industrial Arts Building.
    - Services to be offered will be medical.
    - Bellaire has a homeless population and some homeless students that could be helped by the SBHC.
    - Staffing Concerns discussed by Board Members – Staffing plans are to use Ryan Aston as a provider and to staff this minimally until OHHC knows the demand. Plans are to utilized a Provider, Medical Assistant, and a Receptionist.
    - SBHC Hours – Undetermined at this time.

Jan Chambers requests Board Approved to move forward with the ODH Planning Grant for a School Based Health Center in Bellaire.

#### **RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim Hall made a motion to approve moving forward with the ODH Planning Grant for the School Based Health Center in Bellaire as presented to the Board. Seconded by Tim McKelvey.

**RESOLVED**, that the motion passed unanimously.

- HRSA Expanded Hours – Caldwell – Up to \$500,000.00. Submitted. Awaiting determination.
- HRSA New Access Point – Bridgeport. Would require Behavioral Health and SUD to be included. Up to \$650,000.00. Discussion needs to be held regarding feasibility of pursuing grant due to only 77 awarded in nation and will not know until June 2025. If Bridgeport is not sustainable without this funding, do we go forward. Do we have the resources to pursue the grant application as ODH and AMLER funding running concurrently. Grant due September 30<sup>th</sup>.
  - Money has not been appropriated.

- Only action taken by OHHC is letter of support.
- Jeff Britton stated he has several concerns and they are as follows: Superintendent has said do not need a SBHC in the Bridgeport area. Also, do not think HRSA will approve OHHC to be in Bridgeport.
- Recommendation of Jeff Britton is to not move forward with this grant.
- Matt noted this is a great opportunity but how do you sustain this as there are no operational monies in this grant.

Discussed by Board Members and they are in agreement to not proceed with the HRSA New Access Point for Bridgeport at this time.

- HRSA Health Center Infrastructure Support – Roof/Windows – Funding Received. Project underway.
- Bridge Access Funding – COVID-19 Related Activities - \$15,437.00.
- AMLER Funding through ODNR. Letter of intent accepted and invited to submit grant proposal. Due September 30<sup>th</sup>. Grant would be utilized for Barnesville for the Lobby, Radiology, second floor renovations, remainder of windows, and parking lot - \$1,025,000.00. Jan stated this grant is probably a long shot.

Jan Chambers requests Board Approval to proceed with the AMLER Funding through ODNR Grant.

## RESOLUTION

**Adopted 08/19/2024**

**WHEREAS**, Deborah Day made a motion to proceed with the AMLER Funding through ODNR Grant as presented to the Board. Seconded by Tim McKelvey.

**RESOLVED**, that the motion passed unanimously.

- Appalachian Community Innovation Centers Program
  - Caldwell – Approved
  - Bridgeport – Approved

### 5. Jan reported on Capital Budget Allocations:

- \$100,000.00 OHHC – Quaker City renovations – Was to go through Eastern Gateway, however with their closing we attempted to utilize Belmont College. Ohio Department Higher Education will not allow us to utilize Belmont College, and we must use Youngstown State. Have reached out to Youngstown State to determine how to proceed.
- Federal \$650,000.00 – Third floor project to allow room for expanded Behavioral Health on the second floor – Received. Waiting for roof and window project to be completed before proceeding.

Jan Chambers requests Board approval for the Director of Outreach and Development Report.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim Hall made a motion to approve the Director of Outreach and Development Report as presented to the Board. Seconded by Tim McKelvey.

**RESOLVED**, that the motion passed unanimously.

**Director of Outreach and Developed Report – Attached**

**DIRECTOR OF REVENUE CYCLE MANAGEMENT REPORT**

1. Dee reported the current months charges for July were \$610,009.95.
2. Dee reported the current months payments for July were \$411,723.39.
3. Dee reported the current months contractual adjustments for July were \$256,679.77.
4. Dee reported the current months write-off adjustments were \$11,942.36 for July. Write-off adjustments includes sliding fee, interest, collection balance transfer, insurance adjustment, small balance, etc.
5. Dee reported the days in accounts receivable were 43.39 for July.
6. Dee reported there are several issues with Medicaid. Issues with crossovers paying correctly, unable to key claims on correctly, processing secondaries as primary and making no payment, and reason code issues. Currently we have about \$184,000.00 outstanding for Medicaid (both medical and dental). We will get an estimated amount of \$80,000.00 for this outstanding balance. We have a ticket out to Medicaid on one of the issues with the processing secondaries as primary and making no payment. We are asking them to reprocess these claims. We have another ticket with our clearinghouse regarding the reason code issues and waiting for them to get back with us. We do think we have found an issue with our CAS codes. ECW worked with us on Friday to resolve some of that issue. One thing that may help with the CAS codes is it looks like we can rebill some of these. I do not foresee this issue going away anytime soon as they continue to work out the bugs. This has already gone on for a year and a half, and we are now in the second stage with Medicaid with no improvements. Basically, all FQHC's are having the same issues with Medicaid.

Dee Stewart requested Board Approval for the Director of Revenue Cycle Management Report.



## **RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Anita Rogers made a motion to approve the Director of Revenue Cycle Management Report as presented to the Board. Seconded by Donna Secret.

**RESOLVED**, that the motion passed unanimously.

**Director of Revenue Cycle Management Report - Attached**

### **CHIEF FINANCIAL OFFICER'S REPORT**

Matt reported on information for month ending July 31, 2024. The Balance Sheet, Income Statement (Summary) and Income Statement (Detail) were uploaded to the Board Portal prior to the meeting for review.

Matt indicated the handout provided with the monthly bank balances will continue to be provided in future months.

Matt reported that the payroll audit process for all current employee rates/salaries to confirm accuracy and completeness is almost complete. Once completed will forward to Jeff Britton for his review.

Matt reported meetings are being held to discuss the HRSA Projected 2025-2026 Budget. Will be meeting this week with Michael Carpenter and Jeff Britton. Additionally, Jeff reported will need to have a brief telephone call with the Board Members prior to 9/6/2024 regarding the HRSA Projected 2025-2026 Budget.

Matt reported on the Ohio Appalachian Grant. Meetings are being held every 2 – 3 weeks regarding the ECO Center. Close to awarding a construction manager. The project goal is to be done by 2025 and currently looking at October 2025 to be in operation. As we stand right now, we are still on target. The one obstacle is the ownership of the building. We do not want to enter into construction on the building until we clear this obstacle.

Matt King requests Board Approval for the Chief Financial Officer's Report.

## **RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Anita Rogers made a motion to approve the Chief Financial Officer's Report as presented to the Board. Seconded by Les Tickhill.

**RESOLVED**, that the motion passed unanimously.

## Chief Financial Officer's Report – Attached

### CHIEF EXECUTIVE OFFICER'S REPORT

#### 1. 340B Update

Jeff reported nothing new on state or federal levels.

Working with RX Strategies and this is not going as smoothly as they promised. OHHC had to issue new contracts and RX Strategies led us to believe this was done when in fact it was not. Morristown Pharmacy and Custer Pharmacy is owned by WVU Medicine and the new Pharmacy Director does not want to sign the contract. Cheffy Drugs changed their computer system and this does not work with RX Strategies. We have reached out to our Pharmacy Consultant to try to help resolve these issues.

Work with consultant is progressing nicely on the In-House Pharmacy. Waiting for an updated floor plan from the architect. Meeting this week with Dan Atkinson to discuss staffing options. OHHC's biggest hurdle will be finding funding to pay for renovations.

#### 2. Dental Search

Jeff reported waiting for confirmation from Dr. Joe Benson on site visit for September 16, 2024. The only 2 dates that Dr. Benson is available in September for a site visit is the 16<sup>th</sup>. and the 4<sup>th</sup>. The 4<sup>th</sup>. is not an option due to patient schedules. If the 16<sup>th</sup>. works out well, plans are to delay the September Board Meeting 1 week.

#### 3. Medicaid Issues

Jeff reported Dee provided a detailed update when she presented the Director of Revenue Cycle Management Report.

#### 4. Fee Schedule Review Update

Consulted with Forvis for the Fee Schedule Review. OHHC patient fees should be between the 50<sup>th</sup>. and 75<sup>th</sup>. percentile. Their assessment shows some of our fees are high but some of our fees are low. Forvis recommended getting a copy of all of our insurance contracts with insurance carriers. Jeff reported hiring a temporary staff member to collect fee schedules for all OHHC contracted payors to raise our fees without raising write offs. Due to the staffing shortage, no one qualified to complete this time-consuming task had the time to work on this. Planning to have this project completed in the next 2 months. Updated fee schedule will then be presented to the Board for review and approval.

#### 5. Belmont County Cares Program

Jeff reported the Cares Coordinator recently reached out to me to discuss the possibility of contracting with OHHC for a Medical Provider to conduct home visits for the elderly home-bound patients they have identified and also mental health patients that need medical clearance before being admitted for Inpatient Mental Health care. This patients would be considered OHHC patients. At this point, we definitely have an interest. As far as staffing would try to come up with

a shared responsibility between all of our providers. Tim Hall stated conferences have been held with the billing company and if OHHC does not want to bill for these services then the Belmont County Cares Program will. Legal counsel will be consulted due to the complexity of the arrangements.

6. HR Policies for Approval

Jeff reported in the Board Packet there were sixteen (16) Human Resources Policies for review and approval; 2.01 Americans with Disabilities Act, 2.02 Drug Free Workplace, 2.08 Categories of Employment, 2.09 Conflict of Interest, 2.12 Employee Working Hours, 2.13 Online Timekeeping System, 2.14 Tardiness, 2.15 Conduct on the Job, 2.17 Harassment in the Workplace, 2.19 Grievance Resolution Process, 2.20 Wage and Salary, 2.29 Maternity Leave, 2.30 Military Leave, 2.32 Leave of Absence, 2.31 Family Medical Leave Act, and 2.33 Jury Duty.

Jeff requests Board Approval for Policy 2.01 American with Disabilities Act.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.01 American with Disabilities Act as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.02 Drug Free Workplace.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.02 Drug Free Workplace as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.08 Categories of Employment.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.08 Drug Free Workplace as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.09 Conflict of Interest.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.09 Conflict of Interest as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.12 Employee Working Hours.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.12 Employee Working Hours as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.13 Online Timekeeping System.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.13 Online Timekeeping System as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.14 Tardiness.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.14 Tardiness as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.15 Conduct on the Job.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.15 Conduct on the Job as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.17 Harassment in the Workplace.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.17 Harassment in the Workplace as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.19 Grievance Resolution Process.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.19 Grievance Resolution Process as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.20 Wage and Salary.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.20 Wage and Salary as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.29 Maternity Leave.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.29 Maternity Leave as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.30 Military Leave.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.30 Military Leave as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.32 Leave of Absence.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.32 Leave of Absence as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.31 Family Medical Leave Act.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.31 Family Medical Leave Act as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff requests Board Approval for Policy 2.33 Jury Duty.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim McKelvey made a motion to approve Policy 2.33 Jury Duty as presented to the Board. Seconded by Anita Rogers.

**RESOLVED**, that the motion passed unanimously.

Jeff Britton requests Board Approval for the Chief Executive Officer's Report.

**RESOLUTION**

**Adopted 08/19/2024**

**WHEREAS**, Tim Hall made a motion to approve the Chief Executive Officer's Report as presented to the Board. Seconded by Les Tickhill.

**RESOLVED**, that the motion passed unanimously.

**Chief Executive Officer's Report – Attached**

**ADJOURNMENT**

There being no further business motion made to adjourn meeting at 1:35 p.m. by Brent Tisher. Seconded by Les Tickhill.

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Robert Koch, Secretary

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Denise McBurney, Recording Secretary

**OHIO HILLS HEALTH CENTERS**  
**Minutes of Special Meeting**  
**September 4, 2024**

The Ohio Hills Health Centers Board of Trustees held a Special Board Meeting via Conference Call on September 4, 2024, at 3:00 p.m. for the sole purpose of reviewing and approving the 2025 – 2026 Proposed Budget and a Policy 3.15 Billing and Collection Process. The proposed budget needs to be submitted to HRSA via the electronic handbook (EHB)-by September 6, 2024.

**Call-In Number: 267-807-9601**  
**Passcode: 810107**

**Present were:**

Mr. Les Tickhill, Vice President  
Mr. Tim McKelvey, Treasurer, Barnesville Representative  
Mr. Charles Bardall, Freeport Representative  
Mrs. Donna Secrest, Monroe County Representative  
Mr. Tim Hall, Barnesville Representative  
Mrs. Anita Rogers, Barnesville Representative

**Absent was:**

Mr. Brad Hudson, President  
Mr. Brent Tisher, Monroe County Representative  
Mr. Robert Koch, Secretary  
Mrs. Deborah Day, Monroe County Representative

**Also, present were:**

Jeff Britton, Chief Executive Officer  
Michael Carpenter, Chief Operating Officer  
Matt King, Interim Chief Financial Officer  
Denise McBurney, Recording Secretary

Meeting was called to order by Les Tickhill at 3:00 p.m.

**Policy Approval**

Jeff reported ODH Inspection was conducted at OHHC Freeport and one of the findings from inspection was pertaining to the Vaccines For Children (VFC) Program. ODH stated our policy needed updated. The following language was added and needs approval today before ODH Inspection at OHHC Barnesville on the 16<sup>th</sup>.: "Per the CDC requirements providers who choose to bill for the vaccine administration fee of a non-Medicaid, VFC-eligible child after the date of service may issue only a single bill to the patient within 90 days of the vaccine administration. This is to be monitored by a vaccine report to where only one statement will be sent. At the time of the second billing, the vaccine administration fee will be written off by the Director of Revenue Cycle Management." ODH stated if policy is updated before the 16<sup>th</sup>. no citations will be given.

Jeff Britton requests Board Approval for Policy 3.15 Billing & Collection Process.

**RESOLUTION**

**Adopted 09/04/2024**

**WHEREAS**, Donna Secrest made a motion to approve Policy 3.15 Billing & Collection Process as presented to the Board. Seconded by Charles Bardall.

**RESOLVED**, that the motion passed unanimously.

**Approval of Budget**

Jeff reported the Personnel Justification and Budget Justification for fiscal year February 1, 2025, through January 31, 2026, was uploaded to the Board Portal prior to today's Conference Call. The Budget needs to be approved before submitting to HRSA in EHB and deadline is 5:00 p.m. this Friday.

Matt presented the budget for fiscal year 2025 and 2026. Within this budget accounted for 3% for salaries, 4% for retirement and 8% for insurance. Included both Federal and Non-Federal dollars for each line item. Matt questioned if any of the Board Members had any remarks and or questions. All Board Members are in agreement to approve the Budget Justification for fiscal year February 1, 2025, through January 31, 2026.

Jeff stated he would like to speak about the budget. This is the budget for the Federal H80 Grant. This year with the SBHC Grant an extension was filed with HRSA to extend grant period but have not yet heard whether this has been approved. This grant has \$324,000.00 left so decided to add this to our Federal H80 Grant. Additionally, did not include the SBHC Grant for Bellaire as do not know enough details to really feel comfortable because do not know how much money to allocate for this. Sometime during this budget period will be drawing this money down. Also, another source of revenue will be the increasing of our fee schedule. Forvis was hired as a consultant to review our fee schedule and give their recommendations. They noted that a large number of our fees are below the 50<sup>th</sup>. percentile and their recommendation was to increase fee schedule to at least the 50<sup>th</sup> percentile. There were a handful of charges that were lower than what the insurance companies paid us. This fee increase was not reflected on the budget either. Matt stated point to make is acknowledging fact there will be some revenues coming in the future.

Jeff Britton requested a motion from the Board to approve Ohio Hills Health Centers Budget Justification for fiscal year February 1, 2025, through January 31, 2025.

**RESOLUTION**

**Adopted 09/04/2024**

**WHEREAS**, Les Tickhill made a motion to approve the Ohio Hills Health Centers Budget Justification for February 1, 2025, through January 31, 2026, as presented to the Board. Seconded by Donna Secrest.

**RESOLVED**, that the motion passed unanimously.



Jeff stated he wanted to thank Board Members for calling in today. Also wanted to extend appreciation to Teresa Lyle, Karen Gilham and Karen Long for all of their hard work on the budget.

**BUSINESS:**

Jeff reported Dr. Joe Benson will be on site for a visit on September 16, 2024. Due to this the Board Meeting will now be moved to the 23<sup>rd</sup>. at the Library Annex.

**ADJOURNMENT**

There being no further business motion made to adjourn meeting at 3:20 p.m. by Les Tickhill. Seconded by Donna Secrest.

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Les Tickhill, Vice President

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Denise McBurney, Recording Secretary

By eliminating dentures and partials from our services, we have made approximately 168 appointments available to new patients.

In addition, for calendar year 2024, we will save approximately \$30,000 in lab fees (see attachment).

There are other providers available to patients that “specialize” in the fabrication and delivery of dentures and partials, and they accept all insurances (Affordable Dentures). We have been assisting our patients in getting to providers to fill the denture and partial needs. I have not received any negative feedback regarding the service or care that has been provided.

We are still providing “flippers” (single tooth removeable partials to replace front teeth) and repair/reline services. These services require minimal chair time and follow-up appointments.

I propose that we indefinitely extend our suspension on making new/replacement dentures and partials.

Dentures take 5 appointments to make from start to finish and partials take 3 appointments. This does not include any post-insertion adjustment appointments. We were doing 6 dentures at each facility and 12 partials at each facility for a total of 12 dentures and 24 partials per year.  $(12 \times 5) + (24 \times 3) = 60 + 72 = 132$  appointments per year for making and delivering partials and dentures. If we add just one (many take 2 or 3) post insertion appointment for adjustments, we add an additional 36 appointments (and these are no charge appointments as we include 1 year of adjustments).  $132 + 36 = 168$  (at the minimum) appointments taken by offering denture services.

Check Number	Check Description	Payee	Effective Date	Check Amount
33800	System Generated Check/Voucher	Roe Dental Laboratory	1/11/2023	810.25
33860	System Generated Check/Voucher	Roe Dental Laboratory	1/25/2023	4,100.50
33936	System Generated Check/Voucher	Roe Dental Laboratory	2/10/2023	1,442.64
34002	System Generated Check/Voucher	Roe Dental Laboratory	3/1/2023	3,584.50
34053	System Generated Check/Voucher	Roe Dental Laboratory	3/13/2023	2,350.52
34133	System Generated Check/Voucher	Roe Dental Laboratory	3/27/2023	2,157.10
34193	System Generated Check/Voucher	Roe Dental Laboratory	4/11/2023	2,050.00
34252	System Generated Check/Voucher	Roe Dental Laboratory	4/25/2023	877.00
34341	System Generated Check/Voucher	Roe Dental Laboratory	5/11/2023	1,868.00
34479	System Generated Check/Voucher	Roe Dental Laboratory	5/25/2023	1,580.00
34532	System Generated Check/Voucher	Roe Dental Laboratory	6/12/2023	2,098.50
34706	System Generated Check/Voucher	Roe Dental Laboratory	6/27/2023	3,762.03
34770	System Generated Check/Voucher	Roe Dental Laboratory	7/11/2023	1,763.50
34835	System Generated Check/Voucher	Roe Dental Laboratory	7/25/2023	2,636.00
34909	System Generated Check/Voucher	Roe Dental Laboratory	8/11/2023	1,840.00
34974	System Generated Check/Voucher	Roe Dental Laboratory	8/25/2023	1,136.50
35028	System Generated Check/Voucher	Roe Dental Laboratory	9/11/2023	1,402.00
35103	System Generated Check/Voucher	Roe Dental Laboratory	9/25/2023	1,063.00
35166	System Generated Check/Voucher	Roe Dental Laboratory	10/11/2023	578.00
35222	System Generated Check/Voucher	Roe Dental Laboratory	10/26/2023	878.00
35278	System Generated Check/Voucher	Roe Dental Laboratory	11/13/2023	511.50
35335	System Generated Check/Voucher	Roe Dental Laboratory	11/27/2023	1,732.50
35386	System Generated Check/Voucher	Roe Dental Laboratory	12/12/2023	936.00
35431	System Generated Check/Voucher	Roe Dental Laboratory	12/27/2023	1,151.50

Total 2023

42,309.54

35489	System Generated Check/Voucher	Roe Dental Laboratory	1/10/2024	741.20
35537	System Generated Check/Voucher	Roe Dental Laboratory	1/26/2024	275.20
35586	System Generated Check/Voucher	Roe Dental Laboratory	2/12/2024	583.00
35643	System Generated Check/Voucher	Roe Dental Laboratory	2/26/2024	128.20
35698	System Generated Check/Voucher	Roe Dental Laboratory	3/11/2024	866.30
35751	System Generated Check/Voucher	Roe Dental Laboratory	3/26/2024	403.60
35818	System Generated Check/Voucher	Roe Dental Laboratory	4/11/2024	294.20
35863	System Generated Check/Voucher	Roe Dental Laboratory	4/25/2024	259.60
35925	System Generated Check/Voucher	Roe Dental Laboratory	5/10/2024	416.40
35963	System Generated Check/Voucher	Roe Dental Laboratory	5/24/2024	467.60
35986	System Generated Check/Voucher	Roe Dental Laboratory	6/11/2024	784.80
36087	System Generated Check/Voucher	Roe Dental Laboratory	6/26/2024	350.90
0005	System Generated Check/Voucher	Roe Dental Laboratory	7/11/2024	1,052.80

Total 2024

6,623.80

**OHHC Board of Trustees  
September 2024 Report**

**Call Center**

- Call Stats
  - o August 2024
    - 6540 Received
    - 5260 Answered
    - 80.43% Answer Rate – **Goal of 95%**
    - Average Wait Time – 56 Seconds
    - Average Talk Time – 2 minute 25 seconds

**Operations**

- New Patient Applications
  - o August 2024
    - Applications Issued – 42
    - New Patient Appointments – 103
      - Barnesville Dental – 10
        - o Dr. Brewer – 10
      - Barnesville – 39
        - o Ryan Aston - 2
        - o Morgan Stephen - 7
        - o Miles Jefferis – 10
        - o Dr. Patcha – 5
        - o Dr. Wooten – 7
        - o Jenna Brown - 2
        - o Melissa Huff – 4
        - o Penny Shepherd - 2
      - Career Center – 0 (7 Total Medical Visits)
      - Caldwell – 0
        - o Dr. Overmiller - 0
      - Freeport Dental – 8
        - o Dr. Bauer – 8
      - Freeport – 1
        - o Ryan Aston – 1
      - Quaker City – 11
        - o Staci Fellows - 11
      - Woodsfield – 34
        - o Dr. Overmiller – 9
        - o Jenna Brown – 3
        - o Morgan Stephen – 8
        - o Ryan Gallagher – 14

**Construction Projects**

- Construction Updates
  - o Roof Project – Barnesville
  - o Window Replacement Project – Barnesville

Michael Carpenter  
Chief Operating Officer  
9/16/2024

# OHHC Board Report

9/23/2024

## 1. COVID-19 and Flu Report

### Vaccines and Testing

- Month of August there were 0 COVID vaccines.
- Month of August there were 0 Flu Vaccines administered.

### Testing for the month of August

- 83 tested for **COVID; 25 positives with a 30%** positivity rate.  
\*\*Flu report 16 tested; No positive; RSV report 0 tested

## 2. Lactation Policy # 2.41

- Belmont County Health Department reached out to us earlier this year to participate in a lactation grant they received to assist healthcare entities and businesses to develop formal plans for those employees who return to work with the need to express breastmilk. Although we provided the individual tasks required by law, we did not have a formal policy or plan in place. The policy was developed with their recommendations. Seeking approval of new policy #2.41

## Quarterly Risk Management Report: 2<sup>st</sup> Qtr. 2024

### Incidents:3

- Patient, teenager, ordered lab work per provider. During lab draw patient "fainted" in lab chair several staff responded. No physical injury noted to patient. As Medical Service Manager worked to assist and calm mother, mother of patient became verbally abusive to her, loud inappropriate language used by mother. The patient responded well and was in no emergent distress. However, mother insisted on the patient being sent via EMS to the ER. This was arranged for the patient per mother request. ER released the patient with no further orders or concerns. Mother called to express complaint with Michael Carpenter. Michael spoke with mother expressing concerns of her verbal abuse and behavior. What is acceptable and not acceptable behavior.  
**Resolution:** Questionable return to office. OHHC did not dismiss the patient.
- Reportable lab was obtained; however, the results were not reported to the health department in a timely manner. This incident was reviewed with the involved provider to discuss appropriate notification process on reportable labs.

- **Resolution:** As this is one incident occurrence, monitoring will continue without change in workflow.
- Needle stick occurred with a dental assistant student while assisting with a dental procedure. Consents were obtained by the student and the involved patient for appropriate testing for infectious bloodborne pathogens.

**Resolution:** Student school advisor was notified of incident. All testing was performed. All testing was negative for the student and the involved patient. No further treatment or testing required. Instruction and education on needle safety was provided by dental staff to student.

### **Complaint:1**

-Patient wrote letter addressed to several members of the administrative team, the involved provider and OHHC Medical Director. The letter described the patient's account of a visit to one of our facilities 2 months prior. According to the letter and the subsequent call to the patient, concerns regarding behavior of the physician. The patient describes life difficulties in recent years leading to years of neglecting her health. Patient wrote letter to notify administrators of her experience. During call back, patient reports she "loves the office, loves the staff but was very disappointed with her interaction with the provider". As this occurrence happened several months ago, the patient only wished for Adm to know what occurred during the visit. The patient reports provider behavior as unsympathetic to her as a person and a patient. The patient describes that following that visit she was assisted by an "angel" in the office. This person was the Medical Service Manager, Heather Saffle, who took her to her office, listened to her concerns, provided needed Diabetic education and set her up with another provider.

**Resolution:** Currently, the patient reports no complaints or concerns and is completely satisfied with her care and new provider. The Medical Service Manager did speak with the provider following the appointment to make them aware of the patient's complaint.

<b>OHIO HILLS HEALTH CENTERS</b>
<b>101 East Main Street Barnesville, Ohio 43713</b>

POLICY NUMBER: 2.41	EFFECTIVE DATE: 9-23-24
TITLE: <b>Lactation/Breast Feeding Accommodations at Work</b>	REVISION DATE:
PAGE: 1 OF 2	BOARD APPROVED: 9-23-24
<b>HUMAN RESOURCES POLICY</b>	

**Purpose:**

Ohio Hills Health Centers support breastfeeding-employees who wish to express their milk for their infant following their return to work.

**Responsibilities of Ohio Hills Health Centers:**

- Milk Expression Breaks will be provided to an employee who wishes to express their milk during working hours. Breaks will be accommodated during their normal work breaks and lunch breaks. In additional time is needed, special arrangements may be made with their immediate supervisor.
- Privacy for Milk Expression will be available at each location. The private room may be the employee's private office or a designated room which is sanitary, includes a flat surface (table or desk, etc.), chair for employee and access to electricity. The room will be located near a sink with running water for hand washing and rinsing of the breast pump equipment. The room will have a lock or signage that the space is occupied to maintain privacy.
- Refrigeration storage of the expressed milk may be stored in designated refrigeration provided by OHHC or in a personal cooler of the employees.
- All OHHC employees will present a positive supportive environment for the breastfeeding employees. Including but not limited to assisting with covering job duties while milk expression break occurs.

**Responsibilities of the Employee:**

- Employees are responsible to communicate with their supervisor regarding their needs for expressing milk such as break times and changes to these scheduled times. Good communication will better accommodate the employee and OHHC.
- Employees are responsible for keeping the private lactation area clean.
- Employees are responsible for labeling any expressed milk prior to placing it in designated refrigeration. At a minimum, name and date collected are required. It is the employee's responsibility to maintain proper storage of milk.

<b>OHIO HILLS HEALTH CENTERS</b>
<b>101 East Main Street Barnesville, Ohio 43713</b>

POLICY NUMBER: 2.41	EFFECTIVE DATE: 9-23-24
TITLE: <b>Lactation/Breast Feeding Accommodations at Work</b>	REVISION DATE:
PAGE: 2 OF 2	BOARD APPROVED: 9-23-24

<b>HUMAN RESOURCES POLICY</b>
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- If there is more than one employee utilizing the private room for lactation, a sign in log may be utilized in the room to negotiate milk expression times between employees.

**This policy and procedure shall be reviewed and updated consistent with the requirements and standards established by the Board of Trustees and by Health Center management, Federal and State law regulations, and applicable accrediting and review organizations.**

**Responsible Parties:**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 OHHC Board of Trustees President

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 OHHC Chief Executive Officer



# MILES R. JEFFERIS, APRN, FNP-BC

*BOARD CERTIFIED FAMILY NURSE PRACTITIONER*

Miles R. Jefferis, APRN, FNP-BC  
101 E. Main Street  
Barnesville, OH 43713  
Phone: (740) 239-6447 Fax: (740) 425-4202

September 13, 2024

Dear Dr. Patcha and Ohio Hills Health Centers Board,

I am writing to you to request that Nexplanon Insertion and Removal be added to my approved procedures on my Standard Care Arrangement. I completed training for this in April of 2022. See attached certificate.

If you would like to discuss this further, please do not hesitate to reach out.

Thank you for your consideration.

Sincerely,

A handwritten signature in black ink, appearing to read "Miles R. Jefferis", with a long, sweeping horizontal stroke at the end.

Miles R. Jefferis, APRN, FNP-BC



# Nexplanon<sup>®</sup>

(etonogestrel implant) 68mg  
Radiopaque

**Miles R Jefferis**

This certificate serves as confirmation of attendance and completion of the  
Organon Clinical Training Program for NEXPLANON

**Prescriber Identification (PCID):** 80024133

**Event ID:** ORG0004660

**Training Date:** April 7th, 2022

*P. R. Attawala*  
Pinakin Attawala, MD  
Director, Medical Affairs  
Women's Health

I attested that I attended the Organon-sponsored Clinical Training Program for NEXPLANON in its entirety. I understand that only healthcare providers who have completed the Organon-sponsored Clinical Training Program for NEXPLANON may order, insert, and remove NEXPLANON.

I certified that I am authorized to perform the procedures entailed in the insertion and removal of NEXPLANON in the jurisdiction where I practice. I attest that if there are specific state requirements in the state where I practice, I have met all appropriate state conditions including but not limited to collaborative or signing agreement with an MD/DO.

If I am a resident or student in advanced practice training, I understand that I should only administer NEXPLANON under the supervision of an attending healthcare provider who has also been trained on the procedures to insert and remove NEXPLANON.

<b>OHIO HILLS HEALTH CENTERS</b>
<b>101 East Main Street Barnesville, Ohio 43713</b>

POLICY NUMBER: 2.03	EFFECTIVE DATE: 1-03
TITLE: <b>Pre-employment Background Checks</b>	REVISION DATE: 4-15, 10-17, 8-21, 9-24
PAGE: 1 OF 2	BOARD APPROVED: 09-23-24
<b>HUMAN RESOURCES POLICY</b>	

**Policy:**

It is Ohio Hills Health Centers policy to check a minimum of three (3) employment references for candidates being considered for employment. The Health Center may also conduct a criminal background check on all employees. Employees' failure to authorize a criminal background check may result in the employee's failure to be considered for permanent employment with the Health Center.

Background checks will be paid for by OHHC, however if the newly hired employee declines the job after getting the background check or does not fulfill the 90-day Probationary Period, the newly hired employee will be responsible for reimbursing OHHC for the cost of the background check.

**Procedure:**

**Acceptable References:** Prior to offering a candidate a position, the Human Resources Coordinator or his/her designee shall contact all references provided by the applicant. It is preferred that the references be from persons who supervised the candidate in their previous employment or have worked with the person closely enough to be able to give a valid reference in objective terms. Personal references can also be used. If Supervisor requests previous employment reference that is not listed, permission from the potential candidate needs to be obtained.

**Reference Inquiry Structure:** Reference inquiries must verify, at minimum, the dates worked, the position held and the relationship of the reference to the candidate. The Human Resources Coordinator shall inquire about the candidate's reliability, attendance, general performance, strengths and weaknesses, quality of work and ability to work with others.

**Documentation:** Reference inquiries may be conducted via telephone or by written request. All telephone reference inquiries will be documented. The results of these reference inquiries will be summarized and attached to the employee's application

**OHIO HILLS HEALTH CENTERS**  
101 East Main Street Barnesville, Ohio 43713

POLICY NUMBER: 2.03	EFFECTIVE DATE: 1-03
TITLE: <b>Pre-employment Background Checks</b>	REVISION DATE: 4-15, 10-17, 8-21, 9-24
PAGE: 2 OF 2	BOARD APPROVED: 9-23-24
<b>HUMAN RESOURCES POLICY</b>	

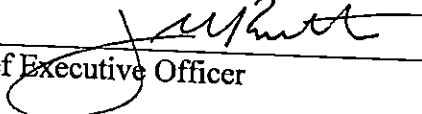
or resume. This summary will be maintained in the candidate's personnel records when and if employed.

**Criminal Background Check:** All employees are required to complete a form authorizing a criminal background check be completed. Employees will be given the opportunity to respond to any incidents discovered through a criminal background check.

**This policy and procedure shall be reviewed and updated consistent with the requirements and standards established by the Board of Trustees and by Health Center management, Federal and State law, regulations, and applicable accrediting and review organizations.**

**Responsible Parties:**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
OHHC Board of Trustees President

Signature  Date 9-23-24  
OHHC Chief Executive Officer

**OHIO HILLS HEALTH CENTERS**  
**101 East Main Street Barnesville, Ohio 43713**

POLICY NUMBER: 2.05	EFFECTIVE DATE: 1-03
TITLE: <b>Staff Development</b>	REVISION DATE: 4-15, 10-17, 8-21, 9-24
PAGE: 1 OF 1	BOARD APPROVED: 9-13-24

**HUMAN RESOURCES POLICY**

**Policy:**

Ohio Hills Health Centers recognizes the importance of training/skill development. Employees are encouraged to further their training and to enhance their skill levels. Areas identified during the performance evaluation which indicate that the employee is experiencing difficulty with his/her job duties will be addressed in the staff development process.

**Procedure:**

Within the financial resources of Ohio Hills Health Centers staff will be encouraged to attend training/workshops to improve their skill levels and job performance.

**Educational/Professional degree programs are not reimbursable by OHHC.**

Staff development expenses, i.e., time, travel, registration, meals, lodging, etc., will be reimbursed according to existing financial policies and procedures.

Attendance at staff development training/workshops must have the immediate supervisor's and Chief Executive Officer's approval.

**This policy and procedure shall be reviewed and updated consistent with the requirements and standards established by the Board of Trustees and by Health Center management, Federal and State law, regulations, and applicable accrediting and review organizations.**

**Responsible Parties:**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 OHHC Board of Trustees President

Signature  Date 9-23-24  
 OHHC Chief Executive Officer

**OHIO HILLS HEALTH CENTERS**  
101 East Main Street Barnesville, Ohio 43713

POLICY NUMBER: 2.06	EFFECTIVE DATE: 1-03
TITLE: <b>Personnel File Management</b>	REVISION DATE: 4-15, 10-17, 8-21, 9-24
PAGE: 1 OF 3	BOARD APPROVED: 09-23-24
<b>HUMAN RESOURCES POLICY</b>	

**Purpose:**

To define what employee information will be maintained in personnel files.

**Policy:**

Ohio Hills Health Centers maintains current personnel records for all employees to document employment-related decisions, performance evaluations, and comply with various record-keeping and reporting requirements. In order to protect employees' privacy, Employee Personnel Files are confidential and may only be accessed by authorized personnel on a need-to-know basis. Inappropriate access to personnel violations will result in disciplinary action up to and including termination.

**Procedure:**

All personnel files shall contain the following information:

1. Name
2. Social Security Number
3. Current Address
4. Marital Status
5. Date of Birth
6. Job Title
7. Tax Information, i.e., W-4
8. Basic Payroll Information
9. Salary and Benefit Information
10. Accrued Annual/Sick Leave
11. Termination/Exit Information (if employee agrees to complete)
12. Employee's Original Application or Resume
13. All Disciplinary Communication and Employee's Replies
14. Reference Verification Documentation

<b>OHIO HILLS HEALTH CENTERS</b>
<b>101 East Main Street Barnesville, Ohio 43713</b>

POLICY NUMBER: 2.06	EFFECTIVE DATE: 1-03
TITLE: <b>Personnel File Management</b>	REVISION DATE: 4-15, 10-17, 8-21, 9-24
PAGE: 2 OF 3	BOARD APPROVED: 09-23-24
<b>HUMAN RESOURCES POLICY</b>	

15. Criminal Background Check Documentation (kept in a separate file)
16. Performance Evaluation (s)
17. Position Description (current and former)
18. Personnel Manual Acknowledgment Form
19. Any additional Signed Policies and Procedures (i.e., Conflict of Interest, Drug-Free Workplace, Non-Harassment Policy, Confidentiality, etc.)

The following information, if applicable, will also be contained in Employee Personnel Files:

1. **Letter of Intent (if applicable)**
2. Proof of Licensing/Credentials

**Employee Responsibilities**

It is the employee's responsibility to keep their personnel information current. Employees must notify the human resources department, in writing, of any changes in the following information:

1. Name
2. Address
3. Telephone Number
4. Marital Status
5. Number of Dependents and Current Address (if necessary)
6. Beneficiary Designations for Employee Benefit Plans
7. Emergency Contact Information

**OHIO HILLS HEALTH CENTERS**  
101 East Main Street Barnesville, Ohio 43713

POLICY NUMBER: 2.06	EFFECTIVE DATE: 1-03
TITLE: <b>Personnel File Management</b>	REVISION DATE: 4-15, 10-17, 8-21, 9-24
PAGE: 3 OF 3	BOARD APPROVED: 09-23-24
<b>HUMAN RESOURCES POLICY</b>	

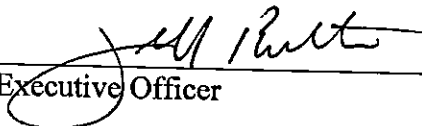
**Requests for Information**

The Health Center will release personal information upon request of persons outside the Health Center only with written authorization from the employee. Only the Human Resources Coordinator may respond to inquiries verifying current or former employment with the Health Center. Exceptions for legal, health and safety reasons may be made.

**This policy and procedure shall be reviewed and updated consistent with the requirements and standards established by the Board of Trustees and by Health Center management, Federal and State law, regulations, and applicable accrediting and review organizations.**

**Responsible Parties:**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
OHHC Board of Trustees President

Signature  Date 9-23-201  
OHHC Chief Executive Officer



**OHIO HILLS HEALTH CENTERS**  
**101 East Main Street Barnesville, Ohio 43713**

POLICY NUMBER: 2.10	EFFECTIVE DATE: 1-03
TITLE: <b>Nepotism</b>	REVISION DATE: 4-15, 10-17, 8-21, 9-24
PAGE: 1 OF 1	BOARD APPROVED: 9-23-24
<b>HUMAN RESOURCES POLICY</b>	

**Policy:**

Nepotism has been defined by the American Heritage Dictionary, in the following manner. "Favoritism shown or patronage granted by persons in high office to relatives or close friends." It is the policy of the Ohio Hills Health Centers to hire the best qualified person for the job.

**Procedure:**

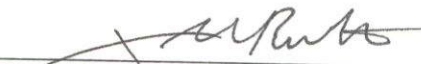
Relative and close friends of staff will be hired, but judgement must be used in the placement of these employees. **The Chief Executive Officer and the Board of Trustees will be responsible for determining if the employee is qualified for the job and for the placement of that given individual.** Relatives will not work for the agency under the following conditions:

1. Where a relative is the immediate supervisor of the other.
2. Where a relative is in a position to have direct influence over the other's employment status, wages, or other aspects of employment.
3. Where a relative is a voting member of the governing board.

**This policy and procedure shall be reviewed and updated consistent with the requirements and standards established by the Board of Trustees and by Health Center management, Federal and State law, regulations, and applicable accrediting and review organizations.**

**Responsible Parties:**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 OHHC Board of Trustees President

Signature  Date 9-23-24  
 OHHC Chief Executive Officer

<b>OHIO HILLS HEALTH CENTERS</b>
<b>101 East Main Street Barnesville, Ohio 43713</b>

POLICY NUMBER: 2.16	EFFECTIVE DATE: 3-2003
TITLE: <b>Dress Code</b>	REVISION DATE: 4-15, 9-15, 10-17, 9-21, 9-24
PAGE: 1 OF 5	BOARD APPROVED: 09-23-24
<b>HUMAN RESOURCES POLICY</b>	

**Purpose**

Ohio Hills Health Centers sets professional standards in all areas of the organization. Appropriate professional appearance is an essential aspect of projecting this professionalism to our patients, visitors, physicians and other staff members. This policy provides general office guidelines.

Effective standards should come first from good judgment on what is best for the people we serve.

**Definitions**

Clinical staff is defined as Providers, nursing, lab, x-ray, dental staff, medical records or front office staff.

Non-clinical staff is defined as accounting staff, billing staff, administrative staff, Outreach/Enrollment staff, QI staff and transcriptionist staff.

**Policy**

- A. Scrubs are required for all clinical staff. Providers may choose to wear business casual clothing instead of scrubs.
  - a. Scrubs must be neat and clean.
  - b. Scrub pants and scrub tops are to be navy blue with white or navy top underneath (if you choose).
  - c. Scrub jackets may be worn as well and, also should be white or navy.
- B. General guidelines
  - a. Hair must be clean and neat in style. For men, beards, sideburns, and mustaches must be neatly trimmed.
  - b. Extreme hairstyles and hair colors do not present an appropriate professional appearance and are not acceptable at Ohio Hills Health Centers.

<b>OHIO HILLS HEALTH CENTERS</b>
<b>101 East Main Street Barnesville, Ohio 43713</b>

POLICY NUMBER: 2.16	EFFECTIVE DATE: 3-2003
TITLE: <b>Dress Code</b>	REVISION DATE: 4-15, 9-15, 10-17, 9-21, 9-24
PAGE: 2 OF 5	BOARD APPROVED: 09-23-24
<b>HUMAN RESOURCES POLICY</b>	

- c. The color and style of shoes selected by employees should consider safety and appropriateness based on type of work. Shoes should be clean and well maintained.
- d. Open toe shoes or sandals are not permitted to be worn by any clinical staff.
- e. *Non-clinical* staff may wear open toe shoes or sandals but the shoe must have a heel and/or strap around the ankle.
- f. **Flip-Flops are not permitted to be worn by any OHHC staff at any time.**
- g. Appropriate undergarments must be worn.
- h. Socks or hosiery must be worn at all times by clinical staff.
- i. With respect to the health and welfare of our patients, staff and visitors, the wearing of any perfume, cologne or aftershave is strongly discouraged. Employees who are reported to be offensive will be addressed on an individual basis.
- j. Moderation in the use of make-up must be considered to maintain a professional appearance.
- k. Jewelry worn by employees who provide patient care should not be ornate or dangling. Jewelry may be prohibited in some areas due to safety precautions.
- l. Visible body piercings, other than earrings, must be appropriate. The Chief Executive Officer reserves the right to determine if such visible piercings are appropriate.
- m. Clothing that is not permitted on any day of the week include:
  - a. tank, halter, and midriff or low-cut tops
  - b. athletic shorts, sweatpants, leggings or other athletic apparel
  - c. skirts, skorts or other clothing items that are more than three (3) inches above the top of the knee
  - d. Worn or tattered clothing used for lounging, sports and social activities. Clothing with rips, tears or frays are not permitted.

**OHIO HILLS HEALTH CENTERS**  
**101 East Main Street Barnesville, Ohio 43713**

POLICY NUMBER: 2.16	EFFECTIVE DATE: 3-2003
TITLE: <b>Dress Code</b>	REVISION DATE: 4-15, 9-15, 10-17, 9-21, 9-24
PAGE: 3 OF 5	BOARD APPROVED: 09-23-24
<b>HUMAN RESOURCES POLICY</b>	

- e. extremes in fashion or design
  - f. Clothing items bearing slogans, statements or advertisements with the exception of approved attire bearing "Ohio Hills Health Centers" or your professional organization identification.
  - g. Capris, shorts, crop pants of any length or material.
  - h. Hooded sportswear, a.k.a. hoodies
- n. Clothing that is permitted only on Casual Friday include:**
- a. Jeans that are clean and neat in appearance. (No rips, tears or frayed jeans are permitted.)
  - b. Casual shoes
  - c. T-shirts or dress shirts with no offensive logos or slogans
  - d. T-Shirts that support local, college or professional athletic teams or athletic logos
  - e. T-Shirts that support health awareness
- o. Pins, stickers, decals or other similar items may be worn if they are ornamental or seasonal. Items that support a particular political point of view are not permitted. An item that represents an organization may only be worn if the organization is supported or affiliated with Ohio Hills Health Centers or represents one's professional credentials.
- p. Tattoos that are visible should be covered at all times.
- C. Due to the recommendations from the CDC Guidelines for Hand Hygiene in Healthcare Settings and the Ohio Department of Health, the following will take place concerning natural fingernails and artificial nails.**
- a. Artificial nails shall not be worn by clinical staff.
  - b. Natural nails should be kept clean. Clinical staff should keep their nails short, no more than 1/4" in length. It is recommended that natural nails be left unpolished. If polish is worn, it cannot be chipped, cracked, or peeling.

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101 East Main Street Barnesville, Ohio 43713

POLICY NUMBER: 2.16	EFFECTIVE DATE: 3-2003
TITLE: <b>Dress Code</b>	REVISION DATE: 4-15, 9-15, 10-17, 9-21, 9-24
PAGE: 4 OF 5	BOARD APPROVED: 09-23-24
<b>HUMAN RESOURCES POLICY</b>	

- c. It is the responsibility of each Clinic Coordinator, Chief Executive Officer to enforce this policy. Non-compliance will be met with discipline.
  
- D. Name badges are an important part of every employee's dress. It serves as identification to patients, visitors, physicians and co-workers.
  - a. Name badges must be worn name-side out by all employees while on duty in a clearly visible place, at or above chest level. An employee may not wear another employee's badge.
  - b. Attachments to a badge may only be Ohio Hills Health Centers affiliated or supported items, such as related to the employee's profession and education.
  - c. Badges will be taken care of internally and given to new employees when completed.
  - d. Employees who lose or damage their badge will be charged \$5.00 for the replacement. If an employee's badge is dirty, defaced or otherwise damaged through no fault of the employee, it will be replaced at no charge to the employee.
  - e. For security purposes, clinical staff with the exception of Providers may be issued name tags using only their first name, last initial and credentials. All other Ohio Hills Health Centers personnel will be given a name badge with their full name.

**Compliance**

The effectiveness of this policy relies on employees using their best judgment in matters of personal attire, hygiene and cosmetics. If an employee is unsure about the appropriateness of a clothing item, they should consult with their immediate supervisor before wearing the item.

<b>OHIO HILLS HEALTH CENTERS</b>
<b>101 East Main Street Barnesville, Ohio 43713</b>

POLICY NUMBER: 2.16	EFFECTIVE DATE: 3-2003
TITLE: <b>Dress Code</b>	REVISION DATE: 4-15, 9-15, 10-17, 9-21, 9-24
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<b>HUMAN RESOURCES POLICY</b>	

It is the responsibility of each department to establish and communicate departmental standards and professional dress expectations consistent with Ohio Hills Health Centers policy.

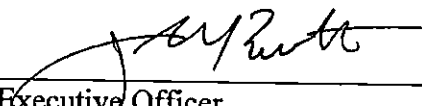
Failure to comply with the standards of staff presentation shall result in progressive disciplinary action. Administrative staff, Clinic coordinators and/or providers may send individuals home to change, without pay, if their on-duty appearance violates Ohio Hills Health Centers Dress Code Policy.

Questions concerning Ohio Hills Health Centers Dress Code Policy should be addressed to the Human Resources Coordinator, in conjunction with another member of Management.

**This policy and procedure shall be reviewed and updated consistent with the requirements and standards established by the Board of Trustees and by Health Center management, Federal and State law, regulations, and applicable accrediting and review organizations.**

**Responsible Parties:**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 OHHC Board of Trustees President

Signature  Date 9-23-24  
 OHHC Chief Executive Officer

**OHIO HILLS HEALTH CENTERS**  
**101 East Main Street Barnesville, Ohio 43713**

POLICY NUMBER: 2.18	EFFECTIVE DATE: 1-03
TITLE: <b>Disciplinary Process</b>	REVISION DATE: 4-15, 10-17, 9-21, 9-24
PAGE: 1 OF 3	BOARD APPROVED: 09-23-24
<b>HUMAN RESOURCES POLICY</b>	

**Purpose:**

To clearly outline the disciplinary process for Ohio Hills Health Centers.

**Policy:**

It is Ohio Hills Health Centers policy that all employees comply with its policies and procedures, Standards of Conduct, and general principles of appropriate professional conduct. Any failures to comply with these requirements must be noted and corrected.

**Procedure:**

**Oral Warning**

Where appropriate, employees whose performance or conduct is unacceptable will be warned by their supervisor. The supervisor may consult with Human Resources Coordinator and/or their senior management member. A notice of the warning will be placed in the employee's file but will generally be removed after 12 months if the misconduct does not recur or the performance deficiencies are corrected.

**Written Reprimand**

In some circumstances, a written reprimand that describes an employee's unacceptable conduct or performance and specify necessary improvements will be given to an employee. A copy of the warning will be retained in the employee's personnel file indefinitely. Written reprimands must be completed by the supervisor and reviewed with the Human Resources Coordinator and/or their senior management member.

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POLICY NUMBER: 2.18	EFFECTIVE DATE: 1-03
TITLE: <b>Disciplinary Process</b>	REVISION DATE: 4-15, 10-17, 9-21, 9-24
PAGE: 2 OF 3	BOARD APPROVED: 09-23-24
<b>HUMAN RESOURCES POLICY</b>	

### **Suspension**

In those cases where an employee's conduct poses an immediate threat to the Health Center's operations, property, patients or staff, a member of the Health Center's senior management staff may impose an immediate suspension with or without pay. In such cases, the suspension will be confirmed in writing. The written notification of suspension will include the effective date and time of suspension and the reason the action was taken. Anyone wishing to dispute this decision may utilize the Health Center's Grievance Procedure.

### **Termination**

Any violation of the Standards of Conduct policy or any other Health Center policy may result in immediate termination of employment. The Health Center has the right to terminate any employee at any time, with or without notice. Terminations are only authorized by the Chief Executive Office or Chief Operating Officer.

### **Managerial Discretion**

The Health Center has sole discretion regarding the type of disciplinary action to be taken. The disciplinary actions described above do not guarantee an employee the right to progressive discipline. The Health Center may, at any time, terminate an employee. Employees who dispute the disciplinary action taken by the Health Center may utilize the Health Center's Grievance Procedure.



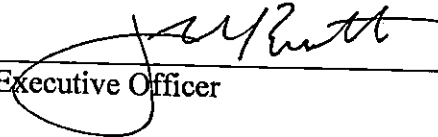
**OHIO HILLS HEALTH CENTERS**  
101 East Main Street Barnesville, Ohio 43713

POLICY NUMBER: 2.18	EFFECTIVE DATE: 1-03
TITLE: <b>Disciplinary Process</b>	REVISION DATE: 4-15, 10-17, 9-21, 9-24
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<b>HUMAN RESOURCES POLICY</b>	

**This policy and procedure shall be reviewed and updated consistent with the requirements and standards established by the Board of Trustees and by Health Center management, Federal and State law, regulations, and applicable accrediting and review organizations.**

**Responsible Parties:**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
OHHC Board of Trustees President

Signature  Date 9-23-24  
OHHC Chief Executive Officer

<b>OHIO HILLS HEALTH CENTERS</b>
<b>101 East Main Street Barnesville, Ohio 43713</b>

POLICY NUMBER: 2.21	EFFECTIVE DATE: 1-03
TITLE: <b>Retirement Plan</b>	REVISION DATE: 4-15, 10-17, 10-21, 9-24
PAGE: 1 OF 1	BOARD APPROVED: 9-23-24

<b>HUMAN RESOURCES POLICY</b>
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**Purpose:**

Ohio Hills Health Centers has a profit-sharing retirement plan for its employees, funding a percentage of their gross wages as determined for any calendar year.

At the end of the fiscal year, OHHC will determine if they are able to fund the retirement plan. The amount to be funded will be determined and approved by the Board of Trustees for payment.

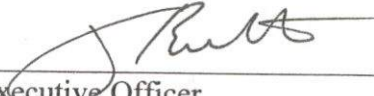
Employees are subject to meet the Rules and Regulations of the plan to qualify.

This benefit differs from all other fringe benefits which are paid to employees who work thirty (30) hours or more per week. The retirement plan is available to anyone who shows a total of one thousand (1000) hours worked during the qualifying calendar year. Once an employee has reached the required one thousand hours, he/she is eligible to enter the plan during the next plan entry period (January 1 or July 1). Employees can become fully vested after six (6) years of plan participation, and if they meet the requirements of the plan.

**This policy and procedure shall be reviewed and updated consistent with the requirements and standards established by the Board of Trustees and by Health Center management, Federal and State law, regulations, and applicable accrediting and review organizations.**

**Responsible Parties:**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 OHHC Board of Trustees President

Signature  \_\_\_\_\_ Date 9-23-24  
 OHHC Chief Executive Officer

<b>OHIO HILLS HEALTH CENTERS</b>
<b>101 East Main Street Barnesville, Ohio 43713</b>

POLICY NUMBER: 2.23	EFFECTIVE DATE: 1-03
TITLE: <b>Holidays</b>	REVISION DATE: 4-15, 10-17, 10-21, 9-22, 2-19, 9-24
PAGE: 1 OF 2	BOARD APPROVED: 9-23-24
<b>HUMAN RESOURCES POLICY</b>	

**Purpose:**

It is the policy of Ohio Hills Health Centers that the following six (6) holidays will be observed by its Health Centers:

**New Year's Day**  
**Memorial Day**  
**Independence Day**

**Labor Day**  
**Thanksgiving Day**  
**Christmas Day**

It is the policy of Ohio Hills Health Centers that all employees, full or part time, who work at least 30 hours a week, receive holiday pay.

By discretion of the administration, an additional day at Thanksgiving and Christmas may be authorized, subject to Board approval.

All staff excluding P.R.N. will be subject to receive the additional days authorized by the Board of Trustees.

Full time employees (37.5 – 40 hours per week) and permanent part time employees (30 hours a week) will be paid for all six (6) holidays, as well as any additional days authorized by the Board of Trustees.

Three (3) holidays will be paid to permanent part-time employees who work less than thirty (30) hours per week, but in no case less than twenty (20) hours per week. These three (3) designated holidays are to be so declared on the time sheet so a permanent record can be verified and recorded.

Holidays will be paid to other permanent part-time employees, those who work less than twenty (20) hours per week, only if they fall on their scheduled workday. The number of holidays for staff working less than twenty (20) hours per week cannot exceed two (2) days.

<b>OHIO HILLS HEALTH CENTERS</b>
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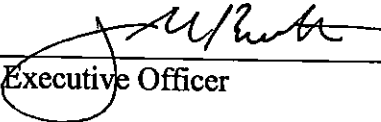
POLICY NUMBER: 2.23	EFFECTIVE DATE: 1-03
TITLE: <b>Holidays</b>	REVISION DATE: 4-15, 10-17, 10-21, 9-22, 2-19, 9-24
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Time off to attend other religious ceremonies may be cleared in advance with the supervisor. Personal, vacation, or sick time may be used if staff wishes to be paid.

**This policy and procedure shall be reviewed and updated consistent with the requirements and standards established by the Board of Trustees and by Health Center management, Federal and State law regulations, and applicable accrediting and review organizations.**

**Responsible Parties:**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 OHHC Board of Trustees President

Signature  Date 9-23-24  
 OHHC Chief Executive Officer

**OHIO HILLS HEALTH CENTERS**  
**101 East Main Street Barnesville, Ohio 43713**

POLICY NUMBER: 2.24	EFFECTIVE DATE: 1-03
TITLE: <b>Vacation</b>	REVISION DATE: 4-15, 6-16, 10-17, 9-21, 9-24
PAGE: 1 OF 5	BOARD APPROVED: 09-23-24
<b>HUMAN RESOURCES POLICY</b>	

**Purpose:**

To clearly outline Ohio Hills Health Centers policy for equitable distribution of vacation time to all eligible personnel.

**Policy:**

Ohio Hills Health Centers believes our employees are key to the successful operation of the organization and having paid time off from work is important for all employees to maintain quality work performance.

**Eligibility**

All employees except PRN and temporary are eligible for vacation. One week's vacation will be given at the start of employment and one week for the next year also. Vacation time will be earned based on years of service as outlined below.

**Note:** Exception to this policy would include a pre-planned vacation at the time of the employee hiring which could be a negotiated change prior to accepting employment.

**Vacation Periods**

Vacation periods will coincide with employment anniversary date, i.e., hire date of January then vacation would be from January 1 to January 1. Any unused vacation time remaining after the end of the vacation period (December 31<sup>st</sup>) will be automatically forfeited. Unused vacation time will not be carried over to the next vacation period.

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POLICY NUMBER: 2.24	EFFECTIVE DATE: 1-03
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<b>HUMAN RESOURCES POLICY</b>	

**Vacation Accrual**

Vacation will be accrued based on actual days/hours worked.

The year following initial employment, the employee will accrue one (1) week vacation with pay; after two (2) years employment- two (2) weeks' vacation and after three (3) years employment - three (3) weeks' vacation. After nine plus (9+) full years of employment, the employee will accrue and max out at four (4) weeks' vacation with pay.

One (1) week of vacation shall equal 5 working days for full-time employees working 37.5-40 hours/week. Vacation days for part-time employees (working less than 37.5 hours per week) will be pro-rated according to the number of hours/days worked per week by the employee. In the case of newly hired employees or employees currently in their 2<sup>nd</sup>, 3<sup>rd</sup> or 9<sup>th</sup> year of service, vacation days will be pro-rated from the date of their anniversary month.

**For example:**

When an employee starts halfway through the year their vacation will be prorated.

If an employee has an increase or reduction in his/her work schedule, an adjustment of vacation time will be pro-rated. For example, if an employee works only four (4) days per week, they are entitled to 80% of their otherwise allowed vacation time. (4 days is 80% of a 5-day work week)

**Vacation Requests**

Vacation time will be scheduled on a first come-first serve basis within each department at each clinic site. Employees must submit a written vacation request to their immediate supervisor for approval.

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<b>101 East Main Street Barnesville, Ohio 43713</b>

POLICY NUMBER: 2.24	EFFECTIVE DATE: 1-03
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<b>HUMAN RESOURCES POLICY</b>	

To ensure adequate staffing is available to maintain clinic and business operations, vacation time off cannot be overlapped by employees within the same department.

Exceptions may be made with department head and/or **Services Manager** prior approval if adequate staffing has been determined for that period of overlapping.

If needed, employee seniority may be utilized to determine who will be granted the vacation time.

At no time, unless authorized by the department head, **Services Manager**, Medical Director or Chief Executive Officer will any vacation time be scheduled unless one (1) weeks' notice is given.

**Utilization of Vacation**

Employees are asked not to take more than three (3) weeks at a time unless extenuating circumstances, such as extensive travel plans, are anticipated, and then authorization must be obtained from the Chief Executive Officer.

When part of a vacation period includes a holiday observed by OHHC, the holiday will be considered a holiday instead of a vacation day, thus leaving an additional vacation day to be scheduled. Payment will not be made in lieu of vacation.

If a holiday falls during a vacation period for a permanent part-time employee working less than thirty (30) hours per week, it will not be considered a paid holiday unless so designated as one (1) of the three (3) paid holidays the employee wishes to choose for that year.

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POLICY NUMBER: 2.24	EFFECTIVE DATE: 1-03
TITLE: <b>Vacation</b>	REVISION DATE: 4-15, 6-16, 10-17, 9-21, 9-24
PAGE: 4 OF 5	BOARD APPROVED: 09-23-24
<b>HUMAN RESOURCES POLICY</b>	

**Leave of Absence**

Employees on a Leave of Absence may use the accrued vacation time to cover their FTE status. Otherwise, the Leave of Absence will be unpaid.

If the employee's vacation balance will not cover the length of the LOA, the employee will be expected to continue paying their respective portion of their health/dental insurance premiums.

**Donation of Vacation Time**

Employees can donate accrued vacation time to any other OHHC employee for a qualified reason. Example of qualified reasons may include but are not limited to the following:

- FMLA/Disability
- Schooling for career advancement by OHHC employee
- Acute medical illness of the OHHC employee or immediate family member

Also, the employee receiving the vacation donation must have a zero-vacation balance at the time of the donation and the donating employee must maintain a balance of at least five (5) vacation days after the donation is made.

A Vacation Donation Request Form will need to be completed and approved by the Human Resources Coordinator and Chief Executive Officer.

Employees requesting time off must utilize their benefit time for the entire time requested. All benefit time must be exhausted before time without pay will be permitted. Once benefit time has been exhausted, time off without pay must be approved by the employee's supervisor. Any time requested must be used in one (1) hour increments.



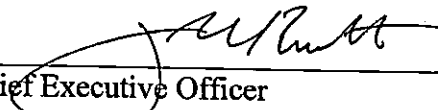
**OHIO HILLS HEALTH CENTERS**  
101 East Main Street Barnesville, Ohio 43713

POLICY NUMBER: 2.24	EFFECTIVE DATE: 1-03
TITLE: <b>Vacation</b>	REVISION DATE: 4-15, 6-16, 10-17, 9-21, 9-24
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<b>HUMAN RESOURCES POLICY</b>	

**This policy and procedure shall be reviewed and updated consistent with the requirements and standards established by the Board of Trustees and by Health Center management, Federal and State law, regulations, and applicable accrediting and review organizations.**

**Responsible Parties:**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
OHHC Board of Trustees President

Signature  \_\_\_\_\_ Date 9-23-24  
OHHC Chief Executive Officer

# Combined Policies 2.25 and 2.26

**OHIO HILLS HEALTH CENTERS**  
101 East Main Street Barnesville, Ohio 43713

POLICY NUMBER: 2.25	EFFECTIVE DATE: 1-03
TITLE: Sick Days/Personal Days	REVISION DATE: 4-15, 6-16, 10-17, 9-21, 11-22, 9-24
PAGE: 1 OF 2	BOARD APPROVED: 9-23-24
<b>HUMAN RESOURCES POLICY</b>	

**Purpose:**

To properly explain how Sick Time/Personal Days are accrued and how they can be utilized for personnel at OHHC.

**Policy:**

**SICK TIME** - For the probationary period of employment, an employee will not be authorized sick leave with pay. After that period, a full-time (37.5 hours and over) employee is entitled to six (6) days per year sick leave with pay. An employee working 30 hours but less than 37.5 hours is entitled to five (5) days per year sick leave with pay. An employee working 25 hours but less than 30 is entitled to four (4) days per year sick leave with pay. An employee working less than 25 hours is entitled to three (3) days per year sick leave with pay.

Sick leave is accruable only to the year's end. Six (6) days of sick leave per year breaks down to one half (1/2) day per month. The designated year begins with January and ends with December.

Sick days that have not been used by the end of the year will be paid back to the employee by the end of January at the employee's current hourly pay rate.

All benefit time must be utilized before employees can take time without pay.

Time must be used in half hour increments.

**PERSONAL TIME** – For the probationary period of employment, an employee will not be authorized personal leave with pay. After that period, it is the policy of Ohio Hills Health Centers that all employees, full or part time, who work at least 30 hours a week, will receive two (2) days off per year with pay for personal reasons.

The two personal days may be taken a half a day at a time if desired or by the hour. These two days are not subject to pay at the end of the year if not used and cannot be carried over to the following year.

After you initial year, the accrual of personal days will be from January through

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<b>HUMAN RESOURCES POLICY</b>	

December each year and may be used at any time during the year, as long as your employment is anticipated to continue throughout the year. If your job requires coverage when you are off for a day, please give adequate notification to your immediate supervisor so your particular area is covered adequately when your are off.

For those who work permanent part-time less than thirty (30) hours per week, one (1) personal day a year will be allowed. This, also, may be taken a half a day at a time if desired.

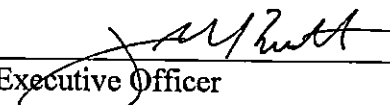
All benefit time must be utilized before an employee may take time without pay.

Time must be used in half hour increments.

**This policy and procedure shall be reviewed and updated consistent with the requirements and standards established by the Board of Trustees and by Health Center management, Federal and State law, regulations, and applicable accrediting and review organizations.**

**Responsible Parties:**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
OHHC Board of Trustees President

Signature  Date 9-23-24  
OHHC Chief Executive Officer

**OHIO HILLS HEALTH CENTERS**  
**101 East Main Street Barnesville, Ohio 43713**

POLICY NUMBER: 2.27	EFFECTIVE DATE: 1-03
TITLE: <b>Bereavement Days</b>	REVISION DATE: 1-06, 4-15, 6-16, 10-17, 10-21, 9-24
PAGE: 1 OF 2	BOARD APPROVED: 9-23-24
<b>HUMAN RESOURCES POLICY</b>	

**Purpose:**

To define how bereavement days are accrued and how they can be utilized due to the death of an employee’s family member.

**Policy:**

It is the policy of Ohio Hills Health Centers that full-time or part-time (30 hours or greater per week) employees will receive the following time off for bereavement after their 90-day probationary period has been met.

The employee will receive five (5) bereavement days for the death of a spouse or child. These days must be used within seven (7) days of the death.

The employee will receive three (3) bereavement days for the death of a parent or sibling. These days must be used within seven (7) days of the death.

The employee will receive two (2) bereavement days for the death of a mother-in-law, father-in-law, son-in-law, daughter-in-law, grandparent, grandchild, step-parent, step-child, step-brother, step-sister, niece, nephew. These days must be used within five (5) days of the death.

The employee will receive one (1) bereavement day for the death of an aunt, uncle, sister-in-law, brother-in-law. These days must be used within five (5) days of the death.

Beyond the immediate family, a personal or vacation day must be used in order to receive pay for time off.

The day of a funeral for any other close relative not mentioned above, may be taken by utilizing a personal or vacation day with proper notification to the employee’s Services Manager and/or Supervisor.

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<b>101 East Main Street Barnesville, Ohio 43713</b>

POLICY NUMBER: 2.27	EFFECTIVE DATE: 1-03
TITLE: <b>Bereavement Days</b>	REVISION DATE: 1-06, 4-15, 6-16, 10-17, 10-21, 9-24
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<b>HUMAN RESOURCES POLICY</b>
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The day of a funeral for an immediate family member of an employee who is working permanent part-time (less than 30 hours per week) may be taken off with pay if it is a regularly scheduled day for said employee to work. **Proper notification should be given to the Services Manager and/or Supervisor.**

Employees are not eligible for bereavement pay if they are on any type of leave.

OHHC reserves the right to ask for verification of the death/funeral services of a family member.

**Circumstances regarding delayed memorial services should be addressed with the employee's Services Manager and/or Supervisor and the Human Resources Coordinator.**

**This policy and procedure shall be reviewed and updated consistent with the requirements and standards established by the Board of Trustees and by Health Center management, Federal and State law regulations, and applicable accrediting and review organizations.**

**Responsible Parties:**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 OHHC Board of Trustees President

Signature  Date 9-23-24  
 OHHC Chief Executive Officer

<b>OHIO HILLS HEALTH CENTERS</b>
<b>101 East Main Street Barnesville, Ohio 43713</b>

POLICY NUMBER: 2.28	EFFECTIVE DATE: 1-03
TITLE: <b>Disability Leave</b>	REVISION DATE: 4-15, 10-17, 10-21, 3-23, 9-24
PAGE: 1 OF 2	BOARD APPROVED: 9-23-24
<b>HUMAN RESOURCES POLICY</b>	

**Purpose:**

To define how short term disability can be utilized by OHHC personnel.

**Policy:**

Ohio Hills Health Centers maintains a short term disability benefit plan for eligible employees. Full-time employees (37.5 - 40 hours per week) and permanent part-time employees (30 hours or more per week) are eligible to participate in the disability benefit plans.

The organization's short term disability plans are provided through an insurance policy currently with Northwestern Mutual Life. Eligible employees are entitled to benefits for disability as set forth by the terms of the policy in force at the time of the disability. A medical statement must be on file verifying the disability and projected date of return to work. A release to return to work should be on file with the Human Resources Coordinator.

**General term of the plan is as follows:**

**Short Term Disability**

Short term disability becomes effective on the fifteenth (15) day from the beginning date of the disability. **The first fourteen (14) consecutive days of disability must be covered by sick days, vacation, personal days, days without pay or a combination of these days.** Maximum short term disability benefit is 60% of pay/salary.

<b>OHIO HILLS HEALTH CENTERS</b>
<b>101 East Main Street Barnesville, Ohio 43713</b>

POLICY NUMBER: 2.28	EFFECTIVE DATE: 1-03
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<b>HUMAN RESOURCES POLICY</b>	


Employees who are on disability that have health/dental insurance through OHHC are still responsible for their portion of the health/dental insurance.

**Note:** An employee who is on disability leave is not eligible for regular pay/salary, sick pay, holiday pay, etc.

**This policy and procedure shall be reviewed and updated consistent with the requirements and standards established by the Board of Trustees and by Health Center management, Federal and State law, regulations, and applicable accrediting and review organizations.**

**Responsible Parties:**

Signature \_\_\_\_\_ Date \_\_\_\_\_  
 OHHC Board of Trustees President

Signature  \_\_\_\_\_ Date 9-23-24  
 OHHC Chief Executive Officer