



**WHITE RIVER HEALTH DISTRICT  
DESCHUTES RIM HEALTH CLINIC  
BOARD OF DIRECTORS MEETING  
NOVEMBER 8, 2025 WORK SESSION MINUTES**  
1605 GEORGE JACKSON RD.  
PO BOX 219, MAUPIN OR 97037  
[www.deschutesrimhealthclinic.org](http://www.deschutesrimhealthclinic.org)

NOV 8, 2025

**BOARD MEMEBERS PRESENT:** David Farris, Allison Bechtol, Melissa Napoli, Ashley Biesenthal, Laurie Barnes

**DRHC:** Lindsay Roper, Maile Anslinger, Jennifer Lombardi, Kyrsten Sprouse, Ron Selis

**GUESTS:** County Commissioner Phil Brady, Mayor Carol Beatty, City Councilor Randy Bechtol, City Councilor Shelby Dumire, Chamber President Jordan Belazer, Kate Willis of South Wasco Alliance, Keelia Carver, Collette Cox

**PRESENTORS/FACILITATORS:** Special Districts Association of Oregon: Gregory James & Bob Keefer

**I. PURPOSE OF WORK SESSION:** The White River Health District Board held a public strategic-planning work session with staff, local leaders and community residents. The purpose of the session was to gather community input, review current challenges and opportunities, and identify priorities to guide the clinic's work over the next one to five years.

**II. OVERVIEW OF SESSION ACTIVITIES:** Participants worked through several exercises, including:

- A review of WRHD's mission and vision.
- A brief data overview of local health and demographic trends.
- A SWOT analysis (Strengths, Weaknesses, Opportunities, Threats) reflecting community and staff perspectives.
- Small-group discussions to identify short- and long-term goals in the areas of clinical services, community engagement, workplace culture, facility needs, and administration.
- A prioritization activity to identify the most important items for the District to address.

**III. KEY STRENGTHS IDENTIFIED**

- Dedicated team: Staff, providers, and board members are committed to serving the community and supporting the clinic's mission.
- Stable funding: Voters approved a five-year levy, demonstrating strong public support for the District.
- Modern facility: The newly constructed clinic provides a safe, compliant, and well-equipped environment capable of serving a large portion of the local population.
- Expanded clinical capacity: A full-time medical provider has recently joined the team, increasing appointment availability and continuity of care.
- Access to care in a rural area: The clinic continues to offer essential medical services for patients of all ages, helping residents receive care close to home.

### **KEY OPPORTUNITIES IDENTIFIED**

- Clinical Services: Strengthen basic services such as phlebotomy; improve access to behavioral health, dental, and other ancillary services; continue work on provider recruitment and retention; collaborate with the school; stock generic antibiotics; expand clinic hours.
- Community Engagement: Improve communication with the public; increase transparency; develop a consistent outreach and marketing approach; ; launch patient satisfaction surveys.
- Workplace Culture: Update and reaffirm WRHD's mission, vision, and values; provide clearer expectations; improve and continue staff training and development.
- Facilities: Assess and plan for future use of Building B.
- Administration: Evaluate and potentially pursue Rural Health Clinic (RHC) certification; update and modernize internal policies, procedures, and organizational clarity; build alliances with outside entities.

### **KEY WEAKNESSES IDENTIFIED**

- No onsite pharmacy: Patients must travel for urgent medications such as antibiotics, creating barriers to timely treatment.
- Limited ancillary services: Behavioral health, physical therapy, chiropractic care, and other supportive services are not readily available locally, reducing access and continuity of care.
- Recruitment and retention difficulties: The rural location makes it challenging to attract and keep qualified, experienced staff due to limited housing options, a small applicant pool, and competition from larger nearby communities.
- Inadequate reimbursement rates: A significant portion of the clinic's patient population falls under payers with low reimbursement, creating ongoing financial pressure.

### **KEY THREATS IDENTIFIED**

- Uncertain Medicare and Medicaid funding: Potential future cuts or policy changes could significantly impact revenue, as the majority of clinic patients have these insurances.
- Rising operating costs: Increases in insurance premiums, utilities, salaries, contracted services, and general overhead place growing financial pressure on a small rural clinic.
- Greater competition for limited grants and state funding: As larger healthcare systems also face financial strain, competition for critical rural-health grants and state support continues to intensify, making it harder for small clinics to secure necessary funding.
- Workforce shortages statewide: Ongoing shortages of healthcare professionals in Oregon, especially in rural areas, threaten the clinic's ability to recruit and retain staff.

## **IV. PRIORITIZED GOALS (TOP ITEMS IDENTIFIED ACROSS GROUPS)**

Participants collectively identified the following as the highest-priority goals:

1. Recruitment of a dentist.
2. Evaluation and potential application for RHC certification.
3. Development and rollout of a communications/marketing plan.
4. Assessment and long-term planning for Building B.

5. Increasing and improving upon basic services.
6. Expansion of the WRHD Foundation.
7. Updating and adopting revised mission, vision, and values.

## V. NEXT STEPS

The Board will review the goals developed during the session and determine timelines, responsible parties, and progress-tracking methods. A public update on progress toward these goals is planned for early 2026.

### ATTESTATION:

Signed by:

*Dr. David Farris*

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David Farris, Board Chair

Signed by:

*Allison Bechtol*

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Allison Bechtol, Board Secretary