

1st draft

CITY OF NEWBERG
COUNCIL AGENDA
NOVEMBER 16, 1993

6:30 P.M.

NEWBERG COMMUNITY HOSPITAL

- I. CALL MEETING TO ORDER

- II. ROLL CALL

- III. CONSENT CALENDAR:
 - 1. Approve minutes from City Council Work Session held on October 19, 1993, Joint Meeting with Hospital held on October 27, 1993 and Work Session held on November 1, 1993.

 - 2. **Resolution No. 93-1820** authorizing the City Manager to award the bid for the S. Meridian Street sanitary sewer line replacement project to the lowest qualified bidder.

- IV. CONTINUED BUSINESS:
 - 1. Crater Lane/School District annexation.
Annexation of a 17.9 acre parcel to allow development of one or two new schools. (File ANX-2-93)
Ordinance No. 93-2368

- V. REPORTS FROM CITY MANAGER

- VI. COMMUNICATIONS FROM THE FLOOR

- VII. EXECUTIVE SESSION

- VIII. ADJOURNMENT

INDEX OF RESOLUTIONS AND ORDINANCES ON THIS AGENDA FOR ACTION:

RESOLUTIONS:

1. **Resolution No. 93-1820** authorizing the City Manager to award the bid for the S. Meridian Street sanitary sewer line replacement project to the lowest qualified bidder.

ORDINANCES:

1. **Ordinance No. 93-2368** authorizing the annexation of a 17.9 acre parcel to allow development of one or two new schools.

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CITY OF NEWBERG
COUNCIL AGENDA
NOVEMBER 16, 1993

6:30 P.M.

NEWBERG COMMUNITY HOSPITAL

I. CALL MEETING TO ORDER

II. ROLL CALL
All council members present

III. CONSENT CALENDAR:

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2. **Resolution No. 93-1820** authorizing the City Manager to award the bid for the S. Meridian Street sanitary sewer line replacement project to the lowest qualified bidder.

Mayor Proctor reviewed consent calendar.

MOTION: SR/MM consent with rewording on resolution DRC has - bids have come in lower than \$27,500 - provided that low bid is no more than engineers.

Unanimous.

IV. CONTINUED BUSINESS:

1. Crater Lane/School District annexation.
Annexation of a 17.9 acre parcel to allow development of one or two new schools. (File ANX-2-93)
Ordinance No. 93-2368

MOTION: RG/SR to read ordinance by title only. TDM read ordinance.

TDM said satisfied condition in section II by getting waiver of remonstrance for improvements - obtained information.

unanimous.

V. REPORTS FROM CITY MANAGER

six items -

1. EAS - received preliminary info on rates 10.55 on reside. and \$20 for commercial - complaints should sent to GTE -
2. Transp. plan out on streets tomorrow - will copy pages that apply to newberg.
3. city Hall - met with adjuster and contract on this thursday - will take until after thaniksgiving to get estimate to costs to repair - get back on sixth for report on project.
4. 12/06/93 council meeting - two council members out - delay to 9th - charter does not list - copouncil set rules for first monday - let community of date certain for meeting. offer to delay - will be appointing council member that night-

MOTION: sr to postpone to 9th - just soon having every council member there. amend to later date -

MM said need date certain.

RG - wednesday nighte? DRC said church night.

dp - will not be able to attend 8th or 9th - either will be MM

MOTION SR/DM - 8th -

DRC - dp and mm will check on calendars

DM - also has meeting on wednes - 8th - but will cancel.

DRC will get back with everyone.

MOTION: SR withdrew

4. Brochure - in directory - no costs yet but will advise - will have information in wineries and attrackctions - will be in directory and as a separate brochure - 3 fold

RC - thought old fashioned fetisval flyer - it is tourism factor - but is also commercialism - to promote old fashioneed festival and other

6. council agendas will be out on 11/24th - if going to be gone - let drc know.

SR - OL committee - because of fire and current move - there will not be a legis. ordinance meeting in december - may not have one until first part of year.

DRC - engineering dept. will move on thursday -

VI. COMMUNICATIONS FROM THE FLOOR

No communications from floor -

RC - anything brief -

DRC - quite a few people at each table to get input at meeting tonite - visionuing process similar - jim whitman will facilitate and group reports and master book chart. each council member and hospital commission member will be at each table

DP asked for informationb -

betty lovell - nch - director of purchsing - brief comment in letter - jim whitman came and conducted employee meetingsd - got cop[y of w/gharvey report. recognize how important.

MM - did anyone receive jerry frentress letter? also mm and betty lovel's letter? cc members said yes.

Betty - important that employees - put politics aside and stay focus - deal at issues at hand - need to leave personal issues aside - very important.

dp asked for anyone

MOTIONM; SR/RG to adjourn. at 6:45 p.m. unanimous.

VII. EXECUTIVE SESSION

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**CITY OF NEWBERG
AGENDA
JOINT CITY COUNCIL AND
HOSPITAL BOARD
NOVEMBER 16, 1993
7:00 P.M.
NEWBERG HIGH SCHOOL CAFETERIA**

- I. CALL MEETING TO ORDER

- II. ROLL CALL

- III. COMMUNITY INPUT REGARDING HOSPITAL ISSUES:
 - A. Presentation by Jim Whitman
 - B. Questions
 - C. Small group analysis. Preliminary Criteria
 - D. Reports
 - E. Summary and Closure

- IV. ADJOURN

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CITY OF NEWBERG
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I. CALL MEETING TO ORDER

II. ROLL CALL

MNayoir praactor called meeting to order - introiduced

Jerry Frentress intorudcted commission.

Jerry - intorduced Jim Whitman - president of whitman garvey - will review tonite - one half hour presentation - will work into small groups - brainstorm - then spokesperson from each group and discussion - tryt to get out at 9:00 p.m.

Jim whitman - acknowledge - process that is undergoing for strategic assessment - not forced on by outside world - something initiated because of far sighted leadership of hc - the hc recognized dramatic changes in health care field - while strong and well - still felt pro-active initiative to do what best to be done. the cc recognized ultimate responsible future direction of hospital - has welcomed opportunity to invite hc because of their wisdom and future alternatives.

behgan process by looking at health care process in northwest and type of changes and looking at future financial climate for NCH on what is happening in the health care field - alternative to health care system - looking at characteristics of system. and wht is most advantageous for system and looking for guidance and recommendation to city council - since that time the cc and hc have become a team, holding joint meetings and looking at strategic assessment as a team at a whole so that final action will be developed as that process. as process has developed - both aspect - is receiving input because of joint effort - ultimate question - how to best serve community for future and meeting needs.

major causes in health care field - particularly in northwest - :

1. rapidly changing technology.
computer support -
2. Changing populations characteristics.

medicare changes - cost differential -

3. Cost pressures. fundamental of causes in cost pressures is payment methodology. not changing population factors - how we are going to pay for care rather than dealing with those fundamentals. medicare will not be part of health care reform (per president).

health care costs are increasing at twice the cost at large. problem with ability to keep pace. 50% of patient load (medicare, free care, welfare, etc.) these people are not really participating in cost of health care - essence this is the reason for insurance rates escalating - coupling of five to 10% - seeing dramatic move from historic fee arrangement to managed care - to limit choice of subscribers of plan - they have already chosen physicians that are in the preferred group. - 1980 - 4% were provided at that rate - 33% is now selected - managed care or 2/3rd - projected that 90% would be managed care configuration and 10% will be self selected - need contractual arrangements -

increase volume of services rendered - revenue would be fixed and question is how are we going to provide care for a fixed number of dollars - shifts from increase in revenue and decrease in costs./ this is major shift that will change relationship very dramatically. curtailing costs. nationally - focus will move from cost focus to quality focus./

patients will have right to change managed care relationship. emphasis on quality.

4. Price competition and shift of financial risk

5. Emphasis on quality.

Whitman provided overhead on strategic responses from health care providers:

1. changing attitudes in the provided community.
2. Fundamental reorientation
3. Affiliations with physician groups
4. Other vertical integration - allows to provide in one continuum.
5. Horizontal integration
6. Risks to local control.

In newberg - going to have to figure out how to take care of patients and community -

Whitman provided :

trends and responses in Oregon:

1. Hospital inpatient volume
2. Development of integrated delivery systems
3. Hospital management services
4. Managed care organizations
5. Preparation for change elsewhere in Oregon.

In June 20, 1993 issue on Hospitals and _____ issue - stated that portland is on leading edge - Keiser, SOP and legacy are leaders - control 60% of admissions and 75% of patient visits and are working very aggressively to map out their strategy - working out matters with physicians and other hospitals so that they can take care of people on a statewide basis. In addition to these integrated delivery systems - managed hospitals - Brim manages 57 hospitals nationwide - leases 3 and owns one. Brim specializes in rural communities under 50,000 - forms community partnerships -

In addition to managed care organizations - keiser system is premier one in pdx area - sop now has an hmo and ppo - legacy has hmo and operates in affiliation with hmo - great movement in marketplace to move toward managed care system. Not just happening in Portland, eugene is in process of developing integrated system of managed care - that will cover that entire area - medford, k falls, the dalles and other communities are undertaking dramatic change.

when looking at systems that are dominate.

Legacy -

1. regionally based system
2. Non-sectarian judeo-christian with episcopal/luther roots.
3. Mission and vision.
4. financial strength
5. "Market driven" orientation with emphasis on linkages.
6. Pluralist approach to physician affiliation.

7. statewide network envisioned.
8. managed care relationships
9. information and electronic support.
10. corporate support services.

SOP -

1. West cost system with Oregon region (premier system in nation_
2. Catholic sponsorship
3. Mission and vision.
4. Financial strength
5. Vision of a fully integrated delivery system.
6. statewide network envisions.
7. primary care division.
8. Managed care relationships
9. Information and electronic support
10. Corporate support services.

Other alternatives - both have suggested services to NCH,.

1. Brim, Inc. - not dominant provider in PDX marketplace
2. Health trust, iccn.
3. Kaiser foundation Health Plan of Oregon.

issue to come to grips with - pdx employer is not particularly concerned whether NCH is a preferred provider for the employees of that firm - they are going to look who are the dominant providers in the pdx area.

1. Not dominant

2. Health trust - out of nashville - operates mcminnville.
3. Kaiser - premier position keiser has - increased quality of cdare in past years. - continuing to bring doctors into system that are top in graduating class - kaiser does not intend to link in with other hospitals -

Present position of NCH -

1. Medical community profile.
2. Hospital pgorams and facilities.
3. Market share.
4. access to managed care,.
5. Costs per unit of service.
6. esource oif availability,.

newberg have sole practitioners in community. facilities are availaable in community. admissions dropped 22% from 1989 to 1991 and of those that were there - percentage coming to NCH from 49.6 to about 41% - about a 17% drop in share. survey said that 27% of residents said that their plans would not access NCH even tho they would like to. need to take in consideration. Need to find out needs for high quality health care.

NCH is financially strong - whitman says to excellent management, board and staff. 36 bed hospital - cannot expect to operation on scale as medical clinics have . stand alone hospital

regardless of what is done regionally - need to integrate services - largest value of health care dollars to accommodate residents.

Alternative responses for the future -

1. continuation of city sponsord commujnity hospital (including a management contract) (similar to sop contract).
2. Local integrated delivery system
3. Affiliation with an area wide integrated system.

Whitman has discussed his observations with council and commission - they have looked at key factors that thye believe will keep NCH strong in future:

1. Management/leadership expertise.
2. Access to managed care/capitated patient load.
- 3./ Insulation of decision-making processes from political pressures.
4. Appropriate physician mix.
5. Responsiveness to local needs. accountability.
6. access to capital
7. broad spectrum of quality and cost effective services.
8. investment subsidy capability. - willingness to invest in newberg community - give support from time to time - due to rough times.
9. electronic communication linkages. - absolutely vital as changes in health care continue.
- 10./ Local governing board. -
11. Severance of financial liability from city - self sustaining hospital and local delivery system.
12. Financial strength and stability.
13. Vertically integrated system.
14. Ability to share and limit risk.
15. Ability to strengthen cooperation among doctors.
16. Minimal waste of resources through duplication.

Next step - what is criteria - local integration - what are our alternatives for such an affiliation? Next step - if need to affiliate - what criteria should be basis for affiliation?

Round table discussions:

1. Which present strengths of NCH are essential to be retained in establishing a system of affiliation.
2. Which aspects of system affiliation would be most beneficial to NCH?

3. Which criteria should receive strongest consideration in selection an affiliate system?

HC and CC must come to grips - audience assistance in process? groups of 6-8 people groups - 6 or 8 tables - clarification - discuss in smaller groups

Mr. George Alexander - major hospitals in pdx have satellite clinics around hospital - newberg care affiliation would be an economical solution - could be an economy to their health care program.

Mr. Whitman - this is a possibility -

Peggy Gibbons - doesn't management contract provide that affiliation? differentiation - when manager is obtained - the mgr is managing on behalf of the owner - agency relationship with owner - this would need to be a more formal arrangement - permanent or quasi-permanent linkage where NCH would become integral part of delivery system

50% of newberg residents are employed in Portland - also newberg residents tend to go to portland for health care rather than newberg - easiest time to see doctor is in location of work on way to the work

SOP has been managing NCH for 14.5 years.

corporate support services - include strategic planning assistance, patient billing, data processing and information system support, group purchasing activities, wealth of resources and people and other kinds of resources needed at local level but effectively shared so each component of system rather than total outgo of all services.

What does management contract obligate providence to do - recognizes some benefits - such as access to group purchasing contracts. when retained, the management organization is required to comply with terms of contract - If newberg became part of larger system - there are investments that sop may be willing to make in the newberg community - but when involved in management contract that can be terminated in certain amount of time - does not make sense to make a major investment - they are operating seaside operation on a long term relationship - more stable long term relationship

discussions between systems and HC and cc have not been committed - on legacy program - they use local board on advisory basis.

other affiliations - seaside - local hospital that entered into long term arrangement with sop. Dwyer memorial hospital in Milwaukie - became part of providence system - legacy originally formed with Physicians and Surgeons Hospital with Emanuel (Gresham and Mount Hood, Holiday Park and Good Sam) in some cases it has been a merger (non financial transaction).

what is important to newberg - and how does providence and legacy fit into that process?

what about financial strength of legacy system ? legacy has been formed by the forming of independent hospitals - both providence and legacy are financially strong systems - legacy is about 5.5 million dollar assets - has about 150 million debt than providence. providence is stronger financially - lower debt and lower cost as compared with other pdx hospitals - has market share 2-3% higher than legacy -

as a long term point of view - both are going to be big players in marketplace - legacy only recently has operated as a system. working at a very fast pace as a system.

SOP extends from anchorage to so. calif.

legacy is in PDX metro area.

SOP has advantage - PPO

HMO is b/cross blue shield - administered with legacy system.

legacy also has program with adventist - and b/c - not exclusive - b/c is participating in both systems.

question - affiliation with city - greater strength economically to be a part of a system.

Betty lovell - nch is financially sound and is very attractive to these health care systems. It is important to be proceeding while in positive situation.

DM - give brief background of whitman - goes back to premedicare days - started in portland in ever young company in auditing hospitals (emanual and holiday park) been working with health care organizations. became involved - financial director of sacred heart in Eugene - owned by sisters of josph of peace in Eugene. President of healthcare management associatation (out of chicago - of about 30,000 members) worked extensively with federal government and others to find out different ways to be more responsible. worked with sisters of joseph of peace until president retired - then formed Whitman/Garvey. - he is evangelical christian even though worked in catholic system - have worked with hospitals that are non-catholic -

particular interest in newberg community - great grandparents, grand partrents, parents - history in community - beyond academic or professional interest - hgas treated his famioly very well and have special interst in helping smaller community muster resources carefully to take into future - to keep healcare local.

break into small groups - 8:25 p.m.

meeting reconvened at 9:00 p.m. -

Group No. 1 - Roger Currier - spokesperson

Get these group information from Becky/Whitman

Group No. 2 - Mike Olberding -

Group No. 3 - John Newman

Group No. 4 - Roger Gano

Group No. 5 - Mr. O'Connor (?)

Group No. 6 - Harold Hagglund

Whitman would like to commit on HC and Cc very diligent reflection and feel confident - team spirit and committment to ending up in a place that addresses precisely these kinds of things tonite to enable us to serve the newberg community in the future. Very valuable and used in process. Continue to measure the progress that we are making to arrive at conclusions.

when is decision going to be made and how will they be found out about it? Whitman said it is an ongoing process in which HC and CC are woprking on to deal with direction./ Emphasive aggressive timetable. Recognition - changing all around and stay in advantageous pro-active position - certainly intention to do so. Whanted to be within a 90 day time frame into serious negotitations if affiliation seems to be appropriate for future.

Next step is the determing of criteria on which an affiliation would be based. When criteria has been developed - there will be feedback to the community on the criteira. All would be preliminary to discussions and determination - Consideration of alternatives - based on definitive process - if it is decided - that will follow development of criteria. Process will be accountable to residents in the area - developing the foundation for a decision process with parameters.

Question - if determine affiliation - if looking at two systems - would the employees be asjkd which system they would be or a community survey to get a reflection whhich would be more comfortable with.

Whitman said that question will be discussed with the group. preliminary response from whitman indicates - decision on whether to affiliate and the matching up of systems strenghts and charactericistis with NComm. needs, is an issue - he would strongly question whether a well designed survey, no matter how well intended, could deal with complexities that input from community could provide. Tonite is starting point and need for additional opportunities

for input - share concern that we have faith and tremendous amount of knowledge of information - survey may not be right approach to it - but nevertheless should be discussed.

Question - city council and HC meet in executive session - need for executive session is not to keep newberg public not involved in determination. Once preliminary affiliation discussion is held - discussions concerning important considerations and ideas - intent is not to cut out the public in the process. Council and Commission is committed to benefit from understanding and information -

Sr - been going through process - this would get aired on t.v. - that input could arrived through various avenues. Very important to encourage input process.

Mark Meinert - time frame for development of criteria - crystal ball on affiliation - what is whitman's best guess for effectiveness on change ?

Whitman - just negotiating with potential affiliating negotiations will be time consuming - can set own agenda - could be in place of July 1, 1994 -

George alexander - does alot of this depend upon Hillary Clinton's intentions?

Whitman's reality opinion - healthcare is not really waiting around for hillary. Oregon is on leading edge - moving toward managed care environment. P{otential fears on what is going on nationally and other states around Oregon.

Dr. Kern - qestuions of processes during last six mnonths - process initiated by hospital commission without relatinmship -

Whitman - city council has always borne the ultimate responsibility for the future direction of the hospital - always plan of HC to present recommmendation to involve decision making process- part of reason - part of his charge is to keep the focus clear and to move forwad on basis that is as comprehensive as objection in those areas and importatn

HGarold Hagglund - mike olverding came in without prior history on executive detail discussions that were going on - coming in rather fresh without any emotional alliances and from perspective that the discussions were candid - high level of interacction in the group and emphasizee what whitman said is that the focus has been almost entirely on the future of NCH as part of community and facing the stratetgic future issues -

WEhitman - degree of committment of HC and CC member and their feel towards the process and the dependence on one another to make sure that the process makes all of salable issues at the table.

RC - answer to dr. kern - basically came about because of actionsd and allegations - joint

venture to go forth what is best for community, citizens of Newberg and NCH. Report was commissioned well in advance what took place between HC, staff and CC -

SR - thank you for input for tonight.

Jerry Frentress - from board perspective to protect NCH and the health care system in the hospital, staff and patients - will continue to get input - agree to keep some discussions in executive session - rest assured that the board will keep the interest of NCH and employees in mind.

The Board as part of long range planning continually looks at long range - worked on stark weather report - looked to Whitman earlier this year and prepared in June, prior to headlines - part of continuing job to work on strategic planning.

Donna Proctor - continue to work with commission - and council fully agrees -

meeting adjourned at 9:50. p.m.

III. COMMUNITY INPUT REGARDING HOSPITAL ISSUES:

- A. Presentation by Jim Whitman
- B. Questions
- C. Small group analysis. Preliminary Criteria
- D. Reports
- E. Summary and Closure

IV. ADJOURN

\agenda11.16

November 3, 1993

Dear Commissioner/Councilor:

As the Hospital Board of Commissioners and the Newberg City Council examine the content of the Whitman Report and make plans for the future of Newberg Community Hospital, we the staff of the Home Services Department would like you to consider the following information:

1. Home Health is one of the fastest growing departments of Newberg Community Hospital - the number of visits provided is up 42% in the past two years. This reflects the fact that home care is nationally recognized as a rapidly growing industry for many reasons, including a growing elderly population, popularity of the service and more economical feasibility. Home Health growth has a very positive effect on the hospital's fiscal standing.
2. Home Health is closely aligned to Sisters of Providence Home Services Department through contractual arrangements to provide service for Good Health Plan, PACC, and Vantage patients. Our newly implemented computer linkage is through Sisters of Providence Homecare. It not only provides the plan of care for physician signature and statistical information, but also allows for electronic billing, which soon will be mandated by Medicare, our primary payor. In other words, this department runs and depends on that computer linkage. This capability has significantly decreased the lag time in getting Medicare payments, as well as providing us with many other support services from Sisters of Providence.
3. If the Commission and Council decide to accept support from Legacy rather than Sisters of Providence, it must be recognized that home care would immediately cease to be provided by any NCH employee. Service, more than likely, would come from the Visiting Nurses Association of Portland, who provide exclusive services for Legacy. A branch office exists in our back yard, McMinnville, through Health Dynamics.

All of us are dedicated to the provision of care to the community of Newberg. Most of us live in this community and wish to work here. We are proud of our hospital's ability to provide quality care to people in their homes. We are concerned that you recognize how that provision of care would change with the wrong choice of affiliation.

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November 3, 1993

If you would like to see how we represent this hospital and what we actually do, we invite you to call our office at 538-8811. We would be happy to discuss this or to have you accompany us on a visit.

Thank you for your service to the hospital and your consideration of our thoughts on this important decision.

Sincerely,

Employees of the Newberg Community Hospital Home Services Department

Clare Patton, RN
Lorell Campbell RN Supv.
Paul Shea R.N.
Katherine Votaw OTR/L
Diane Coleman RN, ET
Candye Parker RN
Dorothy M. Day RN
Judith M. Hanna RN
Camela Proschel RN, Manager
Jim Blomster, CMAA, etc. etc.
Eileen Taylor CMA "Care Mate"
Shirley Schwabe MSW
Phyllis Jones
Judi Worrall
Helen Olson RN
Adnae E. Green HHA/CNA

Newberg Community Hospital

MEMORANDUM

DATE: November 3, 1993

TO: Members of the City Council
Members of the Hospital Board of Commissioners

FROM: Betty Lovell
Purchasing Manager
Newberg Community Hospital

As an employee of Newberg Community Hospital for almost 15 years I have experienced much change and growth in the hospital. I was one of the first department managers hired under the management contract with St. Vincent Hospital and can remember the tremendous sense of fear and uncertainty the employees and community felt about being taken over by a large hospital. The people of Newberg were concerned that by our affiliation with the Sisters we would lose our image of a rural community hospital that provided the personalized quality care we prided ourselves in. However, over the years that has proven not to be the case and our hospital has grown and prospered under the management of the Sisters of Providence. Their commitment to excellence and philosophy to provide compassionate quality care was soon recognized and began a long successful partnership.

What has always impressed me the most about working for the hospital is the tremendous dedication and loyalty that the employees share not only to the hospital and community but to each other. It is this special bond we share as a hospital family that will see us through again as we together enter into another period of change.

As you evaluate the future of Newberg Community Hospital and wrestle with the complex and fast changing healthcare environment that you not forget this deep rooted community support that has brought our hospital to the level of excellence today. The heart of any successful healthcare system is its employees. Your community is truly blessed with some of the most dedicated, loyal and professional people in healthcare. I urge your selection criteria to include a proven mission, philosophy and goals that are equal to the level of quality and standards that we ourselves have set and committed to providing the Newberg community.

We have spent the past several years strengthening further our affiliation with the Sisters of Providence. Capital expenditures have been made, computer systems developed, products and services standardized and also very importantly, professional working relationships have been developed that are invaluable. It would take years to rebuild such a relationship with another healthcare system that we are so fortunate to have now. I fear that this very well greased wheel will come to a screeching stop.

I commend the City Council and Board of Commissioners for having the foresight to recognize our need to address the future of Newberg Community Hospital. I am confident that together we can keep focused on the issue of providing quality healthcare to our community and not let politics get in the way of making the best decision possible.

A handwritten signature in cursive script, reading "Betty Small". The signature is written in black ink on a white background.

November 4, 1993

TO: NEWBERG COMMUNITY HOSPITAL BOARD OF COMMISSIONERS
NEWBERG CITY COUNCIL MEMBERS

FROM: JUSTINE PFEIFFER

=====

As a long term employee of Newberg Community Hospital(25+years) I have seen many changes take place. I have always been impressed with our Board of Commissioners and their dedication to the hospital as well as their ability to struggle with extremely difficult issues, yet make intelligent decisions in the best interest of the patients, medical staff, employees and the hospital in general. With the healthcare industry changing so rapidly, they again have difficult decisions to make. I have every confidence in our Board and that they will be able to weigh all the issues and arrive at the best solution for Newberg Community Hospital. I do not have that same level of confidence in the City Council's ability to make decisions relating to the future of Newberg Community Hospital. I'm not making that statement in a derogatory manner. I believe the Council has not been educated in the complexities of the operation of the hospital and therefore are not qualified to make decisions relating to the hospital's future. I do believe most of the City Council members are sincere in their efforts however, there are a couple of members whom I distrust because I believe they have hidden agendas and personal vendettas that have caused hurt and pain for well meaning, decent people.

We've had a wonderful working relationship with the Sisters of Providence for the past thirteen years and I would like to think that relationship will continue. I recall how paranoia set in when the management contract with Sisters of Providence was first discussed however, the Board again had made the right decision and the relationship with SOP has meant a great deal to Newberg Community Hospital. They have provided excellent leadership, helpful programs and they have allowed Newberg Community Hospital its identity in this community.

Thank you.



John and Bonnie Newman
517 Villa Rd.
Newberg, OR 97132
November 3, 1993

Chairman of the Hospital Commission
Jerry Frentress
Newberg Community Hospital
501 Villa Rd.
Newberg, OR 97132

Dear Mr. Frentress,

After attending Newberg Hospital Commission meetings, City Council Meetings and hearing a summary of the Whitman / Garvey report November 3rd, we understand more than ever the vital importance of the decisions facing the residents of Newberg and the Newberg Community Hospital. Decisions regarding integration with other health care systems will greatly influence our community.

Because of the critical importance of these decisions, it is imperative that full confidence be placed in the Newberg Community Hospital Commission. These decisions need to be made by health care professionals and those knowledgeable in health care matters. These decisions must not be politicized.

Also decisions must be made which will maintain the local health care support which we now enjoy. For example, the long term care facility in which I work, enjoys close ties with Newberg Community Hospital. These include laboratory services, nursing inservice opportunities, drug testing and Hepatitis B immunizations through the Outreach Center, availability of x-ray services, and emergency room services. We also are able to purchase some supplies in an emergency situation from Newberg Hospital. We would like this relationship maintained and enhanced.

We support Newberg Community Hospital and have full confidence in the administrator Mark Meinert and the Hospital Commission.

Respectfully,

Bonnie Newman
John F. Newman
John and Bonnie Newman

11/16/93

CITY OF NEWBERG
COUNCIL AGENDA
NOVEMBER 16, 1993

6:30 P.M.

NEWBERG COMMUNITY HOSPITAL

I. CALL MEETING TO ORDER

II. ROLL CALL

III. CONSENT CALENDAR:

1. Approve minutes from City Council Work Session held on October 19, 1993, Joint Meeting with Hospital held on October 27, 1993 and Work Session held on November 1, 1993.
2. **Resolution No. 93-1820** authorizing the City Manager to award the bid for the S. Meridian Street sanitary sewer line replacement project to the lowest qualified bidder.

IV. CONTINUED BUSINESS:

1. Crater Lane/School District annexation.
Annexation of a 17.9 acre parcel to allow development of one or two new schools. (File ANX-2-93)
Ordinance No. 93-2368

V. REPORTS FROM CITY MANAGER

VI. COMMUNICATIONS FROM THE FLOOR

VII. EXECUTIVE SESSION

VIII. ADJOURNMENT

11/16/93

**NEWBERG COMMUNITY HOSPITAL
PUBLIC FORUM
November 16, 1993**

QUESTIONS FOR ROUNDTABLE DISCUSSIONS

1. Which present strengths of NCH are essential to be retained in establishing a system affiliation?
2. Which aspects of system affiliation would be most beneficial to NCH?
3. Which criteria should receive strongest consideration in selecting an affiliate system?

11/16/93

MEMORANDUM

TO: Newberg City Council
 NCH Board of Commissioners
 Whitman-Garvey Consultants

FROM: Newberg Community Hospital Medical Staff

DATE: November 16, 1993

SUBJECT: Criteria for selecting long term management/lease of
 Newberg Community Hospital

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The Medical Staff of Newberg Community Hospital supports the pursuit of an affiliation with a health care organization by the City Council and Board of Commissioners.

1. Since NCH has been a municipal hospital owned by the people of the City of Newberg, selecting a proprietary for-profit organization to operate the hospital seems inappropriate. We think a non-profit organization would continue to provide cost-control and access to care by the local population more in keeping with the original intent of a municipal hospital.
2. NCH Physicians want to see the hospital management continue at least at the same level of services now provided by our hospital. We are concerned that an outside organization, perhaps under financial pressure, might turn us into a "feeder hospital", a glorified urgency clinic (as both Legacy and Sisters of Providence have built in the metropolitan area), to supply patients to their full service hospital in down-town Portland. We need assurance that this will not happen, and believe the people of Newberg would be best served by not having to commute to Portland for a full service hospital.
3. Physicians believe it is critical for them to have voting positions in the hospital governance at the same or higher level because of our mutual interdependence.
4. We strongly encourage the preservation of high quality, affordable, locally accessible care that the medical staff has been making available to patients in the Newberg area. We recommend that provisions in this developing hospital plan include participation in the major hospital systems, and as many of the other insurance programs as possible, to preserve the good referral pattern currently available.
5. Hospital-based physicians (Emergency, Anesthesia, Pathology and Radiology) may all be significantly impacted by a change in management. The medical staff supports our current hospital-based physicians, and does not want these relationships disrupted. We remain available for further dialogue.

11/16/93

**NEWBERG COMMUNITY HOSPITAL
STRATEGIC PLANNING PROCESS
WRITTEN INPUT FROM HOSPITAL EMPLOYEES**

as of November 15, 1993

QUALITY OF CARE

- o Continuation of the same level of compassionate and high quality patient care.
- o Maintaining excellence in nursing care -- personalized and caring.
- o Each unit continues to be encouraged / urged to maintain a high standard of care within our scope of practice.
- o Continuing high standard of care -- in serving the community.

MISSION AND PHILOSOPHY

- o Retain our special philosophy as an institution which Sisters of Providence so skillfully supports. This would be lost in another affiliation.
- o Similar values / mission.
- o To have a proven healthcare mission, philosophy and goals that are equal to the level of quality and standards of excellence we have strived to achieve ourselves.
- o Matched philosophy and mission with affiliated group.

SCOPE OF SERVICES

- o We need to keep us a "full service" hospital, meaning to keep our hospital complete, not an outpatient only. We need our ICU and trauma unit.

- o Must demonstrate the ability and commitment to provide uninterrupted healthcare services to our patients and have the resources available to expand programs to meet the needs of our growing community.
- o Home health remains integrated part of hospital services.
- o We want the Hospital to stay in Newberg.
- o I would like to see Newberg Hospital remain a full service community based hospital. Newberg Hospital has spent much money over the years researching the needs of this community and striving to meet these needs, and at the same time remaining competitive in every market possible.
- o I would like to see our trauma status remain as is or even better.

PATIENT ACCESS

- o Patient access.
- o Ability to obtain greater patient access.
- o Supply of patients and doctors.

LOCAL GOVERNANCE

- o That the governing board remain local and committed to NCH.
- o I would like to see our local board of directors remain as "local directors". They are members of this community as well as business people who are approachable by the local citizens. I feel they will be able to best address the needs and concerns in our community as to what the people's expectations regarding the quality of service they receive. I feel if a "for profit" agency were to step in, this community would not have much input as to what services they have access to now and which services will be deleted. I feel this would be a negative move in the eyes of the community.

FINANCIAL STABILITY

- o The financial stability of any system chosen to manage the hospital.

- o Financially strongest system.
- o A strong alliance for financial support that will also enable us to maintain our individualism.

EMPLOYEE ISSUES

- o Need to maintain benefits as they are presently, as well as length of time personnel have been employed at NCH.
- o Employees given priority for their current jobs and not replaced with "other" staff from other hospitals.
- o Realizing the worth of each employee -- as an individual and to the hospital.
- o Employee benefits, longevity, etc., not be threatened.
- o Employee benefits (401K, sick time, vacation time, seniority).
- o Will benefits be equal to what we currently have? Accrued vacation? Sick time? Seniority?
- o Transfer policies -- will employees from other facilities be allowed to transfer here if they're laid off, and bump a current employee out if they have more seniority?
- o Job security -- will I still have my job?

OPERATIONAL ISSUES

- o Keep the departments open that are currently in place, the business office and the home health department. Please do not give these functions to outside business in the Portland area. Save the positions, keep in house.

WOMEN'S HEALTHCARE ISSUES

- o Need to have defined how affiliating with Sisters of Providence would impact women's health care issues.

INDIVIDUALITY

- o Need to make certain that NCH can remain as it is with personnel, etc., own logo, "NCH", etc.
- o Allow Newberg the ability to maintain its "individuality" as a rural community hospital providing the best quality of care.
- o NCH remain a full service, community-based hospital and be allowed to maintain its own identity in this community. Also that the Hospital be far removed from the political arena.
- o Keep community-based local identity; caring, commitment and philosophy the same.
- o Keeping our small town image and family unity we are so lucky to have within our hospital. Keeping our administration, as they care about us as people. We are lucky to have this today. It's a rare commodity that we need to keep.

AFFILIATION ISSUES

- o Remaining a community hospital but with a markedly stronger affiliation to a large health care system, [which is] necessary for that system to invest of its resources wholeheartedly in NCH.
- o Trusting relationship established. Linkage established with demonstrated commitment.

CONTINUITY ISSUES

- o No disruption of services already excellently provided by St. Vincent's with regard to employee's education, employee health benefits, advice, etc.
- o Need to maintain long-term relationship with the SOP, as the previous assistance has been invaluable. Any time assistance has been requested in the past, the Sisters have been there -- both for personnel, services, etc. They have gone above and beyond "for NCH" -- even to costing them money and not charging us.

- o Minimize disruption, i.e., consider strongly the number of ties to S.O.P. and the cost to re-establish those ties with another system. Also, minimizing disruption for employees, i.e., benefits, etc.
- o Disruption to the community.
- o Will our alliance be permanent or will it be, i.e., a five year contractual agreement? How much control with the alliance have? Will our City Council and Board of Commissioners have some final say after the alliance?

RELATED ORGANIZATION ISSUES

- o Newberg Internal Medicine, owned by Sisters of Providence, has a large market share in Newberg. Will they fight for it if S.O.P is not chosen?
- o Lost referrals.

CONCLUSIVE REMARKS

- o To maintain NCH, a long term lease or takeover by the Sisters is the best alternative to remain competitive and to keep NCH as a community hospital.
- o Present affiliation keeps us on the cutting edge of broad base patient care options/services necessary to keep NCH a financially viable institution.
- o Sisters has a better debt to equity ratio than the other systems options. Sisters, somehow, does the best job of keeping costs down. Sisters has the best history of long-term systems planning of the options available. The depth of relationship bond with Sisters is as deeply personal and effective as the marriage of a man and woman who are tenderly in love after 50 years of marriage; the value of this is incalculable to the future success of NCH; financially and as a major asset that draws the very best to make Newberg their home and work place.
- o We don't want to be a second Holladay Park Hospital.
- o [It will cost] large dollars to replace with another system the cost saving contracts and computer interface with S.O.P.

- o Can we rely on an objective decision-making process from the City Council with the hidden agendas of [certain council members].
- o I vote for the Sisters of Providence.
- o I do not want to be employed by Legacy. I hear too many negative remarks about them.
- o I have very strong feelings about this --very big decision -- affecting so many lives -- being made by a City Council who can't even manage their own internal problems. There are several members on the Council I do not trust and do not believe they have the Hospital's best interest at heart or the people of this community. These Council members I'm referring to are so uneducated and uninformed about what goes into running a hospital.

APPRECIATION

- o Thank you for the support to the hospital and all the staff; we appreciate the meetings and the information being given to the staff.

11/16/93

NEWBERG COMMUNITY HOSPITAL
FUTURE DIRECTION STRATEGY
KEY FACTORS FOR LONG-TERM SURVIVAL

RANKING OF KEY FACTORS BASED ON MEETING NOVEMBER 3, 1993

Number 1: 39 Points 13 - 3; 0 - 2; 0 - 1

Management and leadership expertise

Number 2: 37 Points 11 - 3; 2 - 0; 0 - 1

Access to managed care / capitated patient load

Number 3: 35 Points 9 - 3; 4 - 2; 0 - 1

Insulation of decision-making processes from political pressures

Number 4: 34 Points 8 - 3; 5 - 2; 0 - 1

Appropriate physician mix
Responsiveness to local needs / accountability
Access to capital

Number 5: 32 Points 6 - 3; 7 - 2; 0 - 1

Broad spectrum of cost-effective, quality services

Number 6: 31 Points 5 - 3; 8 - 2; 0 - 1

Investment / subsidy capability

Number 7: 29 Points 4 - 3; 8 - 2; 1 - 1 / 3 - 3; 10 - 2; 0 - 1

Electronic, clinical, and administrative communications linkages and support
Local governing board

Number 8: 28 Points 4 - 3; 7 - 2; 2 - 1

Severance of financial liability from the City

Number 9: 27 Points 1 - 3; 12 - 2; 0 - 1

Financial strength and stability

Number 10: 25 Points 2 - 3; 8 - 2; 3 - 1 / 2 - 3; 7 - 2; 2 - 1

Vertically integrated system

Number 11: 24 Points 0 - 3; 11 - 2; 2 - 1

Ability to share and limit risk

Strengthen cooperation among local physicians

Number 12: 23 Points 2 - 3; 6 - 2; 5 - 1

Minimal waste of resources through fragmentation or duplication 23

RANKED BY CATEGORY

CATEGORY 1: Management and Financial

- Management and leadership expertise 39
- Access to capital 34
- Investment / subsidy capability 31
- Financial strength and stability 27
- Ability to share and limit risk 24

CATEGORY 2: SYSTEM AND HOSPITAL POSITION FACTORS

- Access to managed care / capitated patient load 37
- Appropriate physician mix 34
- Broad spectrum of cost-effective, quality services 32
- Electronic, clinical, administrative communications linkages and support 29
- Vertically integrated system 25
- Strengthen cooperation among local physicians 24
- Minimal waste of resources through fragmentation or duplication 23

CATEGORY 3: GOVERNANCE FACTORS

- Insulation of decision-making processes from political pressures 35
- Responsiveness to local needs / accountability 34
- Local governing board 29
- Severance of financial liability from the City 28

11/16/93

NEWBERG COMMUNITY HOSPITAL
STRATEGIC PLANNING PROCESS
FLIPCHART NOTES OF COUNCIL/COMMISSION MEETING
October 27 and November 3, 1993

STRATEGIC APPROACH

- o Review assessment and develop consensus
- o Receive input from hospital and medical community
- o Identify and weight key factors for survival
- o Community education process, aimed at 11/16
- o Identify structural relationship alternatives
- o Assess merits of alternatives
- o Develop consensus on alternatives to be considered
- o Share with public -- education/presentation/sharing process/roundtables and public input
- o Develop and weight selection criteria
- o Share with public
- o Identify and evaluate potential candidates based on criteria
- o Develop consensus on candidates to be interviewed
- o Select first preference for negotiations
- o Identify negotiation team and process
- o Proceed with negotiations

STRUCTURAL RELATIONSHIP ALTERNATIVES

- o Stand-alone Hospital
 - City operated
 - Self-managed
 - Management contract
 - Privately operated
 - Lease
 - Sale
- o Vertically-integrated local system
 - City operated
 - Privately operated
 - Jointly operated
- o Affiliation with a system
 - Alliance / network
 - Lease
 - Sale
 - Equity / governance participation

KEY FACTORS

- o Broad spectrum of quality and cost-effective services (6-7-0)
- o Access to managed care / capitated patient load (11-2-0)
- o Vertically integrated system (2-8-3)
- o Appropriate physician mix (8-5-0)
- o Minimal waste of resources through duplication (2-6-5)
- o Ability to share and limit risk (0-11-2)
- o Electronic communication linkages (4-8-1)
- o Management / leadership expertise (13-0-0)
- o Local governing board (3-10-0)
- o Responsiveness to local needs / accountability (8-5-0)
- o Insulation of decision-making processes from political pressures (9-4-0)
- o Access to capital (8-5-0)
- o Financial strength and stability (1-12-0)
- o Investment / subsidy capability (5-8-0)
- o Ability to strengthen cooperation among doctors (2-7-4)
- o Severance of financial liability (4-7-2)

KEY FACTORS IN WEIGHTED SEQUENCE

1. Management / leadership expertise (13-0-0=39)
2. Access to managed care / capitated patient load (11-2-0=37)
3. Insulation of decision-making processes from political pressures (9-4-0=35)
4. Appropriate physician mix (8-5-0=34)
4. Responsiveness to local needs / accountability (8-5-0=34)
4. Access to capital (8-5-0=34)
5. Broad spectrum of quality and cost-effective services (6-7-0=32)
6. Investment / subsidy capability (5-8-0=31)
7. Electronic communication linkages (4-8-1=29)
7. Local governing board (3-10-0=29)
8. Severance of financial liability (4-7-2=28)
9. Financial strength and stability (1-12-0=27)
10. Vertically integrated system (2-8-3=25)
11. Ability to share and limit risk (0-11-2=24)
11. Ability to strengthen cooperation among doctors (2-7-4=24)
12. Minimal waste of resources through duplication (2-6-5=23)

TENTATIVE AGENDA

1. Develop and reach consensus regarding strategic approach
2. Consider timing and approach for public input
3. Review assessment of NCH and develop consensus
4. Identify key factors
5. Weight key factors
6. Identify alternatives
7. Assess merits of alternatives
8. Develop consensus regarding alternatives to be considered

City Council Meeting

Date: 11/16/93

Re: Hospital Matter

No.: Joint Meeting

**NEWBERG COMMUNITY HOSPITAL
PUBLIC FORUM
November 16, 1993**

QUESTIONS FOR ROUNDTABLE DISCUSSIONS

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Newberg Community Hospital

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City Council Meeting
Date: 11/16/93
Re: Hospital Matters
No.: Joint Meeting

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as of November 15, 1993

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APPRECIATION

- o Thank you for the support to the hospital and all the staff; we appreciate the meetings and the information being given to the staff.

Newberg Community Hospital

City Council Meeting

Date: 11/16/93

Re: Hospital Malley

No.: Joint Meeting

November 3, 1993

Dear Commissioner/Councilor:

As the Hospital Board of Commissioners and the Newberg City Council examine the content of the Whitman Report and make plans for the future of Newberg Community Hospital, we the staff of the Home Services Department would like you to consider the following information:

1. Home Health is one of the fastest growing departments of Newberg Community Hospital - the number of visits provided is up 42% in the past two years. This reflects the fact that home care is nationally recognized as a rapidly growing industry for many reasons, including a growing elderly population, popularity of the service and more economical feasibility. Home Health growth has a very positive effect on the hospital's fiscal standing.
2. Home Health is closely aligned to Sisters of Providence Home Services Department through contractual arrangements to provide service for Good Health Plan, PACC, and Vantage patients. Our newly implemented computer linkage is through Sisters of Providence Homecare. It not only provides the plan of care for physician signature and statistical information, but also allows for electronic billing, which soon will be mandated by Medicare, our primary payor. In other words, this department runs and depends on that computer linkage. This capability has significantly decreased the lag time in getting Medicare payments, as well as providing us with many other support services from Sisters of Providence.
3. If the Commission and Council decide to accept support from Legacy rather than Sisters of Providence, it must be recognized that home care would immediately cease to be provided by any NCH employee. Service, more than likely, would come from the Visiting Nurses Association of Portland, who provide exclusive services for Legacy. A branch office exists in our back yard, McMinnville, through Health Dynamics.

All of us are dedicated to the provision of care to the community of Newberg. Most of us live in this community and wish to work here. We are proud of our hospital's ability to provide quality care to people in their homes. We are concerned that you recognize how that provision of care would change with the wrong choice of affiliation.

Page 2
November 3, 1993

If you would like to see how we represent this hospital and what we actually do, we invite you to call our office at 538-8811. We would be happy to discuss this or to have you accompany us on a visit.

Thank you for your service to the hospital and your consideration of our thoughts on this important decision.

Sincerely,

Employees of the Newberg Community Hospital Home Services Department

Mari Patton, RN
Donell Campbell RN Supv.
Paul Shea P.T.
Aubonne Dotaw OTR/L
Siane Coleman RN, ET
Candye Parker RN
Dorothy Madarp RN
Judith McLaughlin RN
Carula Boosche RN, Manager
Joni Blomquist, Case Manager
Lizbeth Taylor CMA "care mate"
Sherie Schwike MSW
Phyllis Jones
Judi Warrace
Helen Olson RN
Adamae E. Green HHA/CNA

Newberg Community Hospital

MEMORANDUM

DATE: November 3, 1993

TO: Members of the City Council
Members of the Hospital Board of Commissioners

FROM: Betty Lovell
Purchasing Manager
Newberg Community Hospital

As an employee of Newberg Community Hospital for almost 15 years I have experienced much change and growth in the hospital. I was one of the first department managers hired under the management contract with St. Vincent Hospital and can remember the tremendous sense of fear and uncertainty the employees and community felt about being taken over by a large hospital. The people of Newberg were concerned that by our affiliation with the Sisters we would lose our image of a rural community hospital that provided the personalized quality care we prided ourselves in. However, over the years that has proven not to be the case and our hospital has grown and prospered under the management of the Sisters of Providence. Their commitment to excellence and philosophy to provide compassionate quality care was soon recognized and began a long successful partnership.

What has always impressed me the most about working for the hospital is the tremendous dedication and loyalty that the employees share not only to the hospital and community but to each other. It is this special bond we share as a hospital family that will see us through again as we together enter into another period of change.

As you evaluate the future of Newberg Community Hospital and wrestle with the complex and fast changing healthcare environment that you not forget this deep rooted community support that has brought our hospital to the level of excellence today. The heart of any successful healthcare system is its employees. Your community is truly blessed with some of the most dedicated, loyal and professional people in healthcare. I urge your selection criteria to include a proven mission, philosophy and goals that are equal to the level of quality and standards that we ourselves have set and committed to providing the Newberg community.

We have spent the past several years strengthening further our affiliation with the Sisters of Providence. Capital expenditures have been made, computer systems developed, products and services standardized and also very importantly, professional working relationships have been developed that are invaluable. It would take years to rebuild such a relationship with another healthcare system that we are so fortunate to have now. I fear that this very well greased wheel will come to a screeching stop.

I commend the City Council and Board of Commissioners for having the foresight to recognize our need to address the future of Newberg Community Hospital. I am confident that together we can keep focused on the issue of providing quality healthcare to our community and not let politics get in the way of making the best decision possible.

A handwritten signature in cursive script, reading "Betty Small". The signature is written in dark ink on a white background.

November 4, 1993

TO: NEWBERG COMMUNITY HOSPITAL BOARD OF COMMISSIONERS
NEWBERG CITY COUNCIL MEMBERS

FROM: JUSTINE PFEIFFER

=====

As a long term employee of Newberg Community Hospital(25+years) I have seen many changes take place. I have always been impressed with our Board of Commissioners and their dedication to the hospital as well as their ability to struggle with extremely difficult issues, yet make intelligent decisions in the best interest of the patients, medical staff, employees and the hospital in general. With the healthcare industry changing so rapidly, they again have difficult decisions to make. I have every confidence in our Board and that they will be able to weigh all the issues and arrive at the best solution for Newberg Community Hospital. I do not have that same level of confidence in the City Council's ability to make decisions relating to the future of Newberg Community Hospital. I'm not making that statement in a derogatory manner. I believe the Council has not been educated in the complexities of the operation of the hospital and therefore are not qualified to make decisions relating to the hospital's future. I do believe most of the City Council members are sincere in their efforts however, there are a couple of members whom I distrust because I believe they have hidden agendas and personal vendettas that have caused hurt and pain for well meaning, decent people.

We've had a wonderful working relationship with the Sisters of Providence for the past thirteen years and I would like to think that relationship will continue. I recall how paranoia set in when the management contract with Sisters of Providence was first discussed however, the Board again had made the right decision and the relationship with SOP has meant a great deal to Newberg Community Hospital. They have provided excellent leadership, helpful programs and they have allowed Newberg Community Hospital its identity in this community.

Thank you.



John and Bonnie Newman
517 Villa Rd.
Newberg, OR 97132
November 3, 1993

Chairman of the Hospital Commission
Jerry Frentress
Newberg Community Hospital
501 Villa Rd.
Newberg, OR 97132

Dear Mr. Frentress,

After attending Newberg Hospital Commission meetings, City Council Meetings and hearing a summary of the Whitman / Garvey report November 3rd, we understand more than ever the vital importance of the decisions facing the residents of Newberg and the Newberg Community Hospital. Decisions regarding integration with other health care systems will greatly influence our community.

Because of the critical importance of these decisions, it is imperative that full confidence be placed in the Newberg Community Hospital Commission. These decisions need to be made by health care professionals and those knowledgeable in health care matters. These decisions must not be politicized.

Also decisions must be made which will maintain the local health care support which we now enjoy. For example, the long term care facility in which I work, enjoys close ties with Newberg Community Hospital. These include laboratory services, nursing inservice opportunities, drug testing and Hepatitis B immunizations through the Outreach Center, availability of x-ray services, and emergency room services. We also are able to purchase some supplies in an emergency situation from Newberg Hospital. We would like this relationship maintained and enhanced.

We support Newberg Community Hospital and have full confidence in the administrator Mark Meinert and the Hospital Commission.

Respectfully,

Bonnie Newman
John F. Newman
John and Bonnie Newman

NEWBERG COMMUNITY HOSPITAL
STRATEGIC PLANNING PROCESS
FLIPCHART NOTES OF COUNCIL/COMMISSION MEETING
October 27 and November 3, 1993

STRATEGIC APPROACH

- o Review assessment and develop consensus
- o Receive input from hospital and medical community
- o Identify and weight key factors for survival
- o Community education process, aimed at 11/16
- o Identify structural relationship alternatives
- o Assess merits of alternatives
- o Develop consensus on alternatives to be considered
- o Share with public -- education/presentation/sharing process/roundtables and public input
- o Develop and weight selection criteria
- o Share with public
- o Identify and evaluate potential candidates based on criteria
- o Develop consensus on candidates to be interviewed
- o Select first preference for negotiations
- o Identify negotiation team and process
- o Proceed with negotiations

STRUCTURAL RELATIONSHIP ALTERNATIVES

- o Stand-alone Hospital
 - City operated
 - Self-managed
 - Management contract
 - Privately operated
 - Lease
 - Sale
- o Vertically-integrated local system
 - City operated
 - Privately operated
 - Jointly operated
- o Affiliation with a system
 - Alliance / network
 - Lease
 - Sale
 - Equity / governance participation

KEY FACTORS

- o Broad spectrum of quality and cost-effective services (6-7-0)
- o Access to managed care / capitated patient load (11-2-0)
- o Vertically integrated system (2-8-3)
- o Appropriate physician mix (8-5-0)
- o Minimal waste of resources through duplication (2-6-5)
- o Ability to share and limit risk (0-11-2)
- o Electronic communication linkages (4-8-1)
- o Management / leadership expertise (13-0-0)
- o Local governing board (3-10-0)
- o Responsiveness to local needs / accountability (8-5-0)
- o Insulation of decision-making processes from political pressures (9-4-0)
- o Access to capital (8-5-0)
- o Financial strength and stability (1-12-0)
- o Investment / subsidy capability (5-8-0)
- o Ability to strengthen cooperation among doctors (2-7-4)
- o Severance of financial liability (4-7-2)

KEY FACTORS IN WEIGHTED SEQUENCE

1. Management / leadership expertise (13-0-0=39)
2. Access to managed care / capitated patient load (11-2-0=37)
3. Insulation of decision-making processes from political pressures (9-4-0=35)
4. Appropriate physician mix (8-5-0=34)
4. Responsiveness to local needs / accountability (8-5-0=34)
4. Access to capital (8-5-0=34)
5. Broad spectrum of quality and cost-effective services (6-7-0=32)
6. Investment / subsidy capability (5-8-0=31)
7. Electronic communication linkages (4-8-1=29)
7. Local governing board (3-10-0=29)
8. Severance of financial liability (4-7-2=28)
9. Financial strength and stability (1-12-0=27)
10. Vertically integrated system (2-8-3=25)
11. Ability to share and limit risk (0-11-2=24)
11. Ability to strengthen cooperation among doctors (2-7-4=24)
12. Minimal waste of resources through duplication (2-6-5=23)

TENTATIVE AGENDA

1. Develop and reach consensus regarding strategic approach
2. Consider timing and approach for public input
3. Review assessment of NCH and develop consensus
4. Identify key factors
5. Weight key factors
6. Identify alternatives
7. Assess merits of alternatives
8. Develop consensus regarding alternatives to be considered

NEWBERG COMMUNITY HOSPITAL
FUTURE DIRECTION STRATEGY
KEY FACTORS FOR LONG-TERM SURVIVAL

RANKING OF KEY FACTORS BASED ON MEETING NOVEMBER 3, 1993

Number 1: 39 Points 13 - 3; 0 - 2; 0 - 1

Management and leadership expertise

Number 2: 37 Points 11 - 3; 2 - 0; 0 - 1

Access to managed care / capitated patient load

Number 3: 35 Points 9 - 3; 4 - 2; 0 - 1

Insulation of decision-making processes from political pressures

Number 4: 34 Points 8 - 3; 5 - 2; 0 - 1

Appropriate physician mix
Responsiveness to local needs / accountability
Access to capital

Number 5: 32 Points 6 - 3; 7 - 2; 0 - 1

Broad spectrum of cost-effective, quality services

Number 6: 31 Points 5 - 3; 8 - 2; 0 - 1

Investment / subsidy capability

Number 7: 29 Points 4 - 3; 8 - 2; 1 - 1 / 3 - 3; 10 - 2; 0 - 1

Electronic, clinical, and administrative communications linkages and support
Local governing board

Number 8: 28 Points 4 - 3; 7 - 2; 2 - 1

Severance of financial liability from the City

Number 9: 27 Points 1 - 3; 12 - 2; 0 - 1

Financial strength and stability

Number 10: 25 Points 2 - 3; 8 - 2; 3 - 1 / 2 - 3; 7 - 2; 2 - 1

Vertically integrated system

Number 11: 24 Points 0 - 3; 11 - 2; 2 - 1

Ability to share and limit risk

Strengthen cooperation among local physicians

Number 12: 23 Points 2 - 3; 6 - 2; 5 - 1

Minimal waste of resources through fragmentation or duplication 23

RANKED BY CATEGORY

CATEGORY 1: Management and Financial

- Management and leadership expertise 39
- Access to capital 34
- Investment / subsidy capability 31
- Financial strength and stability 27
- Ability to share and limit risk 24

CATEGORY 2: SYSTEM AND HOSPITAL POSITION FACTORS

- Access to managed care / capitated patient load 37
- Appropriate physician mix 34
- Broad spectrum of cost-effective, quality services 32
- Electronic, clinical, administrative communications linkages and support 29
- Vertically integrated system 25
- Strengthen cooperation among local physicians 24
- Minimal waste of resources through fragmentation or duplication 23

CATEGORY 3: GOVERNANCE FACTORS

- Insulation of decision-making processes from political pressures 35
- Responsiveness to local needs / accountability 34
- Local governing board 29
- Severance of financial liability from the City 28

**CITY OF NEWBERG
CITY COUNCIL WORK SESSION
TUESDAY, NOVEMBER 16, 1993
6:00 P.M.
NEWBERG COMMUNITY HOSPITAL**

THE CITY COUNCIL OF THE CITY OF NEWBERG WILL HOLD A WORK SESSION TO REVIEW THE NOVEMBER 16, 1993 COUNCIL AGENDA ITEMS. THE COUNCIL WILL NOT MAKE ANY DECISIONS ON THE AGENDA ITEMS AT THE WORK SESSION. THE WORK SESSION WILL BE HELD AT THE HOSPITAL CONFERENCE ROOM.

THE WORK SESSION WILL BE FOLLOWED BY THE CITY COUNCIL MEETING TO BE HELD AT THE HOSPITAL AT 6:30 P.M. AND A JOINT MEETING WITH THE HOSPITAL BOARD AT 7:00 P.M. AT THE NEWBERG HIGH SCHOOL CAFETERIA.

DATED THIS 4TH DAY OF NOVEMBER, 1993.

**DUANE R. COLE
CITY MANAGER**

\WSNOTE

CITY OF NEWBERG
COUNCIL AGENDA
NOVEMBER 16, 1993

6:30 P.M.

NEWBERG COMMUNITY HOSPITAL

- I. CALL MEETING TO ORDER
- II. ROLL CALL
- III. CONSENT CALENDAR:
 1. Approve minutes from City Council Work Session held on October 19, 1993, Joint Meeting with Hospital held on October 27, 1993 and Work Session held on November 1, 1993.
 2. **Resolution No. 93-1820** authorizing the City Manager to award the bid for the S. Meridian Street sanitary sewer line replacement project to the lowest qualified bidder.
- IV. CONTINUED BUSINESS:
 1. Crater Lane/School District annexation.
Annexation of a 17.9 acre parcel to allow development of one or two new schools. (File ANX-2-93)
Ordinance No. 93-2368
- V. REPORTS FROM CITY MANAGER
- VI. COMMUNICATIONS FROM THE FLOOR
- VII. EXECUTIVE SESSION
- VIII. ADJOURNMENT

INDEX OF RESOLUTIONS AND ORDINANCES ON THIS AGENDA FOR ACTION:

RESOLUTIONS:

1. **Resolution No. 93-1820** authorizing the City Manager to award the bid for the S. Meridian Street sanitary sewer line replacement project to the lowest qualified bidder.

ORDINANCES:

1. **Ordinance No. 93-2368** authorizing the annexation of a 17.9 acre parcel to allow development of one or two new schools.

CITY OF NEWBERG
AGENDA
JOINT CITY COUNCIL AND
HOSPITAL BOARD
NOVEMBER 16, 1993
7:00 P.M.
NEWBERG HIGH SCHOOL CAFETERIA

- I. CALL MEETING TO ORDER

- II. ROLL CALL

- III. COMMUNITY INPUT REGARDING HOSPITAL ISSUES:
 - A. Presentation by Jim Whitman
 - B. Questions
 - C. Small group analysis. Preliminary Criteria
 - D. Reports
 - E. Summary and Closure

- IV. ADJOURN

FACILITY USE APPLICATION

NEWBERG SCHOOL DISTRICT 29JT

714 EAST SIXTH STREET

Newberg, OR 97132

CODE: 92-24

TO INSURE ADEQUATE PROCESSING, PLEASE SUBMIT 30 DAYS PRIOR TO EVENT

11-10-93

SCHOOL REQUESTED: NHS Cafeteria AREA OF USE: Cafeteria

DATE(S) OF USAGE: Nov. 16, 1993 M T W T F S S N MTHLY/WEEKLY

NATURE OF ACTIVITY: Community Meeting START: 6:45 am/pm END: 10:00 am/pm

CONTACT PERSON: Duane R. Cole SPONSOR City of Newberg

ADDRESS: 414 E. First St. PHONE: (WK) 538-9421 (HM)

CITY/STATE: Newberg OR ZIP: 97132 # PARTICIPANTS 20

NO SPECTATORS: 50-75 PARKING REQUIRED: YPS

SPECIFIC EQUIPMENT NEEDED: tables

PREP TIME: 6:30 pm. SALE OF PRODUCT:

OTHER INFORMATION CONCERNING USAGE: This is for non-profit Hospital City

I have read the rules and regulations below and agree to all stated conditions.

APPLICANT SIGNATURE: Rebecca Manning DATE: 11-4-93

APPROVED: D. Pickett (PRINCIPAL) DATE: 11/7/93 APPROVED: (ATHLETIC DIR.) DATE:

APPROVED: Wade Bailey (MAINT DEPT) DATE: 11-12-93 APPROVED: (BUSINESS DIR.) DATE:

APPROVED: (FOOD SERVICE DIR) DATE: MEMO:

Table with 2 columns: ESTIMATED CHARGES and ACTUAL CHARGES. Rows include ENERGY HOURS, CUSTODIAL HRS, KITCHEN HOURS, FOOD/DINNER, and TOTAL ESTIMATED CHARGES.

***** GUIDELINES, PROCEDURES, AND RULES FOR COMMUNITY USE OF NEWBERG SCHOOL FACILITIES: READ AND SIGN ABOVE. *****

- 1. GROUPS MUST ARRIVE AND DEPART AT SCHEDULED TIMES. PLEASE INFORM THE CUSTODIAN WHEN LEAVING EARLY.
2. SCHOOL EQUIPMENT IS NOT TO BE USED UNLESS PRIOR APPROVAL HAS BEEN GIVEN. (SEE: EQUIPMENT NEEDED ABOVE.)
3. GROUPS MUST PROVIDE A RESPONSIBLE ADULT FOR SUPERVISION OF ACTIVITIES. FAILURE TO DO SO WILL STOP USE.
4. GROUPS SHALL ONLY USE AREA REQUESTED ON APPLICATION. DO NOT ALLOW CHILDREN ATTENDING TO ROAM THE HALLS.
5. ANY DAMAGES INCURRED TO FACILITY OR EQUIPMENT WILL BE THE FINANCIAL RESPONSIBILITY OF THE SPONSOR GROUP.
6. SMOKING AND CONSUMPTION OF ALCOHOL OR ILLEGAL DRUGS IS PROHIBITED ON ANY PART OF THE DISTRICT PROPERTY.
7. A SCHOOL DISTRICT CUSTODIAN MUST BE ON DUTY AT ALL TIMES DURING THE USE OF INSIDE FACILITIES.
8. A SCHOOL DISTRICT COOK MUST BE ON DUTY WHEN KITCHEN FACILITIES AND/OR EQUIPMENT IS REQUESTED.
9. PLEASE USE RESTROOM FACILITIES NEAREST TO YOUR USE AREA. PLEASE LEAVE THE USE AREA AS YOU FOUND IT.
10. GYM RULES: GYM TENNIS SHOES ONLY ON FLOORS, NO ROPE CLIMBING OR SWINGING, DO NOT THROW ITEMS AGAINST WALL, NO HANGING FROM BASKETBALL RIMS OR NETS, DANGEROUS HORSEPLAY NOT ALLOWED, SHOWER FACILITIES NOT FOR USE.
11. THE SCHOOL DISTRICT RESERVES THE RIGHT TO CANCEL ANY ACTIVITY WITHIN 48 HOURS OF THE REQUEST USE TIME.

Tuesday, 6:00 p.m.

October 19, 1993

CITY COUNCIL
WORK SESSION MINUTES

Horseless Carriage Restaurant

Newberg, Oregon

Mayor Donna Proctor called the session to order at 6:00 p.m.

Council Members:

Present:

Corinne Adams
Roger Currier
Gary Hay
Scott Reinhardt

Martin McIntosh
Donna McCain
Roger Gano
Elaine Smith

City Staff Present:

Duane R. Cole, City Manager
Terrence D. Mahr, City Attorney

The Council reviewed the agenda items to be considered at the October 19, 1993 City Council meeting. No decisions were made regarding the agenda items. The City Manager also presented information regarding a request from Russ Thomas to travel to Seattle for a Pacific Northwest Pollution Control Association Conference on November 7-10. The City Manager asked advise regarding the Manager's service on the United Way Board. The discussion regarding the United Way Board with several members indicating that this would be an opportunity for growth and networking opportunities for the Manager.

The Council members discussed Council member Reinhardt's situation with regard to his relocating temporarily to McMinnville. The City Manager asked questions of the Council on who is going to the League of Oregon Cities conference in Eugene and who is attending the City/County dinner on Thursday.

There being no further business to come before the Council the meeting adjourned at 7:10 p.m.

Wednesday, 7:00 p.m.

October 27, 1993

City Council and Hospital Board
Joint Meeting
Minutes

Newberg Public Library

Newberg, Oregon

The Mayor called the meeting to order at 7:04 p.m.

ROLL CALL:

Council Members:

Present:

Corinne Adams
Roger Currier
Donna McCain

Martin McIntosh
Scott E. Reinhardt
Elaine Smith

Absent:

Roger Gano

Hospital Board:

Present:

Kate Copenhaver
Jerry Frentress
Mike Olberding

Dr. David Holman
Dr. Julie Isaacson

Absent:

Phil Edin
Harold Haglund

Jack Nulsen
Fonda Schmidt

City Staff Members:

Duane R. Cole, City Manager
Terrence D. Mahr, City Attorney

Others Present:

Jim Whitman, Hospital Consultant
David Thouvenel, Graphic Publisher
John Wenos, Graphic Editor

The Mayor called the meeting into Executive Session at 7:06 p.m. pursuant to ORS 192.660(1)(e)(g)(j) to review and agree on the process of review. To begin discussion of structural alternatives.

The meeting was called back to open session at 9:02 p.m. City Council member Scott Reinhardt motioned to adjourn and it was seconded by Council member Martin McIntosh. Roger Currier raised a point of order regarding a request to provide additional information to the Council. There was a discussion between the City Attorney and Roger Currier regarding the appropriateness of presenting additional information. The Chair determined that the motion

Page 2

Council/Hospital Board Meeting
October 27, 1993

to adjourn took precedence and that a vote needed to proceed on that motion prior to considering the additional information. The motion to adjourn was approved unanimously. The meeting was adjourned at 9:04 p.m.

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III /

3

Monday, 6:00 p.m.

November 1, 1993

CITY COUNCIL
WORK SESSION MINUTES

Horseless Carriage Restaurant

Newberg, Oregon

Mayor Donna Proctor called the session to order at 6:27 p.m.

Council Members:

Present:

Roger Currier
Roger Gano
Scott Reinhardt

Donna McCain
Martin McIntosh
Elaine Smith

Absent:

Corinne Adams

City Staff Present:

Duane R. Cole, City Manager
Terrence D. Mahr, City Attorney

The City Manager reported on the Allen Fruit tank and that they were in the process of cleaning the tank. This would mean that there may be some heavy odors in the area during the next three to four days. The Manager mentioned that the Council would be receiving information on the by-pass in the future and other State Highway construction projects.

The consent calendar was reviewed by the Manager and the other items were discussed by the City Council but no decisions were made.

The Mayor adjourned the meeting at 7:03 p.m.

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III-1

4

RESOLUTION NO. 93- 1820

A RESOLUTION AUTHORIZING THE CITY MANAGER TO AWARD THE BID FOR THE SOUTH MERIDIAN STREET SANITARY SEWER LINE REPLACEMENT PROJECT TO THE LOWEST QUALIFIED BIDDER.

RECITALS

1. The City has prepared plans for a utility replacement project and has solicited bids in accordance with ORS Chapter 279 on Public Contracts and Purchasing; and
2. Bids will be opened on November 16th, 1993; and
3. The bids will be reviewed by the Community Development Committee on November 18th; and
4. The City Manager will award the bid with the consent of the Community Development Committee.

NOW, THEREFORE, BE IT RESOLVED by the Council of the City of Newberg, Oregon, as follows, to wit:

The City Council, acting as Contract Review Board for the City, does hereby authorize the City Manager to award the bid for the South Meridian Street Sanitary Sewer Line Replacement Project to the lowest qualified bidder, provided the low bid is within 10% of the engineer's estimate of \$27,500.00.

ADOPTED by the City Council of the City of Newberg, Oregon, this **16th** day of **November, 1993**.

Duane R. Cole, City Recorder

III 2

6



SIXTH ST.

SEVENTH ST.

S. MERIDIAN ST.

NEW HOUSE

E-III

STA. 3+55
Plug 4" sewer tap
MJ Plug & concrete

STA. 2+50
Construct manhole

STA. 0+00
Tap into existing manhole;
construct channel to
mainline channel
Mortar hole in cone section
of manhole

STA. 0+00 21' Lt
Plug 4" sewer tap
MJ Plug & concrete

8" PVC SANITARY SEWER

Do not disturb sprinkler
system in parking strip
or on owners property

Install 8"x6" Tee, extend new 6"
service line to property line @ 2.00%
and connect existing house service
where applicable. Cap 4"x6" tee after
passing air test.

Verify
servi
tees
Verif
utiliti
Constr
Stand

1. 2+50

4. 0+00

REQUEST FOR COUNCIL ACTION

DATE SUBMITTED: October 22, 1993

DATE ACTION REQUESTED: November 16, 1993

X ORDINANCE

SUBJECT: Annexation of a 17.9 acre parcel to allow development of one or two new schools. (File ANX-2-93).

RECOMMENDATION: Adopt the ordinance based on the criteria, facts and conclusionary findings which are attached. Required conditions have been met to the satisfaction of the Community Development Director.

BACKGROUND:


On October 21, 1993, the Planning Commission held a hearing to consider annexation of a 17.9 acre site west of Foothills Drive and north of Crater Lane. The Planning Commission, on a 5-3 vote, recommended approval of the annexation to the City and withdrawal of the site from the Newberg Rural Fire Protection District. Conditions, in the form of waivers of remonstrance to future street and utility improvements are required to be executed by the applicant prior to the effective date of the ordinance. The Planning Commission also recommended that the site be zoned R-1. Schools are permitted uses in this zone.

On November 1, 1993, the City Council held a hearing to consider the Planning Commission's recommendation. At the conclusion of the hearing the Council moved to have Staff prepare an Ordinance which would approve the annexation and zoning subject to the provisions recommended by the Planning Commission. The Council, also moved to allow the record to be kept open for 7-days to allow for additional testimony to be submitted. If such additional testimony is submitted it will be provided to the Council at the November 16, 1993, meeting.

COST: None

ATTACHMENTS:

- A. Planning Commission Minutes
- B. Application
- C. Ordinance with Exhibit A (Findings of Fact) and Exhibit B (Legal Description)



Greg Scoles, Comm. Development Director



Duane Cole, City Manager

ORDINANCE NO. 93-2368

AN ORDINANCE DECLARING THAT CERTAIN TERRITORY BE ANNEXED INTO THE CITY OF NEWBERG AND WITHDRAWN FROM THE NEWBERG RURAL FIRE PROTECTION DISTRICT TOGETHER WITH A ZONE CHANGE FROM A COUNTY ZONING DESIGNATION TO A CITY R-1 ZONING DESIGNATION. THE SITE IS LOCATED AT THE EAST END OF FOOTHILLS DRIVE.

WHEREAS, A notice of this proposed annexation/zone change and withdrawal from the Newberg Rural Fire Protection District was sent to the owner of record as identified in Yamhill County Assessor's Office, and all adjoining property owners within a distance of 250 feet; and

WHEREAS, Notice of this action was placed as a public notice within the Newberg Graphic Newspaper and was posted on or near the subject property in compliance with state statutes; and

WHEREAS, Requirements of the City of Newberg Comprehensive Plan and Ordinance No. 2012 regarding annexations have been met; and

WHEREAS, The Community Development Director, in his staff memorandum to the Planning Commission at their October 21st meeting, did recommend that the territory be annexed into the City with conditions to be completed prior to Council approval; and

WHEREAS, On October 21st, the Newberg Planning Commission held a public hearing to consider the land use issues involving the annexation of said territory and recommends that said territory be annexed, with conditions to be completed prior to Council approval, based upon the findings of fact which are attached hereto as Exhibit A; and

WHEREAS, On November 1st at the hour of 7:30 PM in the Newberg Public Library Meeting Room, which was heretofore set as the time and place for a public hearing, and the City Council, through the Recorder of the City, did cause notice of this hearing to be published in accordance with ORS 222.120 and in accordance with Ordinance No. 2012 of the City of Newberg, and the hearing was held;

NOW, THEREFORE, THE CITY OF NEWBERG ORDAINS AS FOLLOWS:

Section 1. The City Council adopts the findings of fact which are attached hereto as Exhibit A and incorporated herein by reference.

Section 2. It is hereby ordered and declared that the property described in Exhibit B is annexed and withdrawn from the Newberg Rural Fire Protection District.

IV-1

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**EXHIBIT A
FINDINGS OF FACT**

HEARING DATE: Planning Commission - October 21, 1993
City Council - November 1, 1993

APPLICANT: Newberg School District

CONTACT: Paul Frankenberger

REQUEST: Annexation of a 17.9 acre parcel to allow development of a new elementary and middle school.

LOCATION: North of Crater Lane, between Chehalem Drive and Foothills Dr.

TAX LOT: 3207-1000

FILE NO: ANX-2-93

ZONE: AF10-R-1 Low Density Residential

**PLAN
DESIGNATION:** LDR

I. SUMMARY

The parcel is adjacent to Foothills Drive, Crater Lane, and Chehalem Drive. The site is anticipated to be developed as one or two schools.

II. CRITERIA AND ORDINANCE REQUIREMENTS

The Newberg City Council has the authority to make the final decision on this matter. The Planning Commission may recommend that the Council approve or deny the application, or may request further information relating to the annexation. The Planning Commission and City Council must base their decisions on findings which relate to the criteria listed in the appropriate City ordinances.

IV-1

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A. Section 2 - Annexation Ordinance No. 2012 - General Annexation Policies

1. Annexations shall be considered on a case-by-case basis, taking into account such issues as the goal and policy statements found within the Newberg Comprehensive Plan, long range costs and benefits, statewide planning goals, and other ordinances, policies, or regulations of affected agencies, jurisdictions and special districts.
2. It shall be the City's policy to encourage annexation where:
 - a. The annexation complies with the provisions of the Newberg Comprehensive Plan.
 - b. The annexation would straighten out boundaries and provide a clear identification of the City.
 - c. The annexation would benefit the City by addition to its revenues an amount that would at least be equal to the cost of providing services to the area.
 - d. It would be clearly to the City's advantage to control the growth and development plans for the area.
3. It shall be the City's policy to discourage annexation where:
 - a. The annexation is not consistent with the provisions of the Newberg Comprehensive Plan.
 - b. The annexation would cause an unreasonable disruption in the current City boundary.
 - c. The annexation would severely decrease the ability of the City to provide services to an area or to the rest of the City.
 - d. Full urban services cannot be made available within a reasonable time.

B. Section 4 of the Newberg Annexation Ordinance No. 2012 - Annexation Criteria

1. Consistency of the annexation in relation to the Newberg Comprehensive Plan and other applicable regulations set forth by the City of Newberg, the State, and affected jurisdictions and agencies.
2. The availability of basic public services which include but are not limited to sewer, water and electricity to the site in adequate quantities to serve the

potential users without adversely affecting the availability of these services to existing users.

3. The impact upon public services which include but are not limited to police and fire protection, schools, hospitals and public transportation to the extent that they shall not be unduly compromised.
4. The need for housing, employment opportunities, and livability in the City of Newberg and surrounding areas.
5. The location of the site as to provide for the efficiency in land use in relation to public facilities and services, transportation, energy conservation, urbanization and social impacts.

C. Zone Change Criteria - Section 600, Newberg Zoning Ordinance

1. The proposed change is consistent with and promotes the objectives of the Comprehensive Plan and of the Zoning Ordinance of the city;
2. There is a public need for a change of the kind in question;
3. The need will be best served by changing the classification of the particular piece of property in question as compared with other available property.

III. APPLICABLE COMPREHENSIVE PLAN GOALS AND POLICIES

Goals and Policies found within the Newberg Comprehensive Plan which are relevant to this request include the following:

A. Recreation Policy F

The continued multiple use of public facilities for recreational and other purposes shall be encouraged. In particular, schools and parks shall be located on adjacent sites wherever possible.

B. Automobile Transportation Policy D

Although cul-de-sacs shall be permitted, local streets should interconnect to improve access for residents, emergency service vehicles and others.

C. Public Facilities and Services - Policy No. 1.a.

The provision of public facilities and services shall be used as tools to implement the land use plan and encourage an orderly and efficient development pattern.

IV-1

D. Public Facilities and Services Policy No. 2.c

Developments with urban densities should be encouraged to locate within areas which can be served by Newberg's present sanitary sewer system.

E. Urbanization - Goal No. 1

To provide for the orderly and efficient transition from rural to urban land uses.

F. Public Facilities and Services Policy No. 5.a

Elementary schools should be centrally located with reference to their service areas.

G. Public Facilities and Services Policy No. 5.c

Elementary schools should not be located on arterial streets.

H. Public Facilities and Services Policy No. 5.g

New schools shall be located in such a manner as to provide adequate and safe pedestrian, bicycle and automobile access. Streets shall be fully improved and major intersections shall provide signalization where necessary.

IV. FACTS

A. The subject property contains approximately 17.9 acres in the northwest part of the Newberg Urban Growth Boundary.

B. Surrounding land uses are as follows:

East:	Residential urban development; zoned R-1
South:	Vacant and developed residential urban and rural development; zoned R-1 and AF10, respectively
West:	Agricultural land; zoned AF20
North:	Agricultural land; zoned AF20

C. The property is currently vacant with fairly flat topography.

D. The subject property adjoins the current city limits on its eastern boundary.

E. The property is adjacent to and takes access from Chehalem Drive and Crater Lane, county roads with rights-of-way of 40' and Foothills Drive, a local city street with a right-of-way of 60'. Foothills will be upgraded to collector to handle anticipated school bus traffic.

- F. Public water is available to the site via Foothills Drive. Public sewer is unavailable to this site. The Main St. sewer system that runs along the east boundary of the property was not designed to include this parcel. During peak wet weather, the Main St. sewer is at capacity and sometimes surcharges. The City has plans to build a sewer from 6th St. to foothills Drive along College St. Until that happens, the School will pump into the Main St. system. A future sewer pump station will be located on Crater Lane approximately 1000 ft south of the school site.
- G. Future proposed uses on this and an adjacent site to the north and south include a regional park and a senior center.
- H. Notice of this request was provided to owners of the subject property and all the adjoining property owners within a distance of 100 feet. Notice was also provided within the Newberg Graphic Newspaper and was posted on or adjoining the subject property.

V. REFERRALS

The request was referred to all City departments, the Yamhill County Planning Department, the Division of State Lands, Chehalem Park and Recreation District, , the Rural Fire District, and utility agencies. The following comments have been received:

- A. Streets: The applicants will sign a waiver of remonstrance for street improvements to Chehalem Drive and Crater Lane. Foothills Drive and the stub of North Main Street will be constructed with the development of the school. The applicant will file a petition to create a Local Improvement District to improve Crater Lane.

Until North Main Street is extended through development, the primary access to the school site will be from College Street (219). Because of the increase in pedestrian and bicycle traffic on highway 219, the applicant's traffic analysis will make recommendations for improvements to 219 to accommodate the traffic. At a minimum, the applicant will convert Foothills Drive to a collector street with bike lanes and a structural overlay. Depending on the results of the traffic analysis, a left turn lane, bike lanes lighting, crosswalks and signage could be required on College Street. Because road dedication and improvements are required by the zoning ordinance for all schools locating in an R-1 zone, these improvements will be required at the site review phase and not at the annexation phase.

- B. Sewer: A future pump station will be located on Crater Lane approximately 1000 ft south of the school site. The pump station will be paid for through an assessment district made up of the properties in its drainage basin. The School District will sign a waiver of

remonstrance to participate in a sewer system Local Improvement District to construct the pump system and gravity sewer.

The schools will construct an interim pump station.

- C. Water: Water mains are available on Foothills Drive and the north Main St stub.

VI. CONCLUSIONARY FINDINGS

A. General Annexation Policies

This application follows the Annexation Policies by complying with provisions of the Newberg Comprehensive Plan as demonstrated below and by providing orderly development of land in the UGB.

B. Annexation Criterion

1. Criterion 1

Consistency of the annexation in relation to the Newberg Comprehensive Plan and other applicable regulations set forth by the City of Newberg, the State, and affected jurisdictions and agencies.

Regarding Criterion 1, the annexation of the subject property and proposed use conforms to the goals and policies found within the Newberg Comprehensive Plan as follows:

- a. The applicant addresses the public facilities and services policies in that water service is available to the property and sewer service can be extended to the property. Waivers of remonstrance and the initiation of Local Improvement Districts for utility and street improvements are required at this time to ensure that all public facilities can support the proposed school. There is a network of streets which will be improved to serve the site. The school will not be sited on an arterial street. Street dedication and improvements related directly from the school will be required at the site review phase and not the annexation phase.
- b. Urbanization policies are satisfied in that the property will be annexed to the City prior to development.
- c. Urban design policies are satisfied in that development on the property will be subject to the design review procedures of the Zoning Ordinance.

- d. Recreation policies are satisfied in that recreational facilities will be planned with the school facility for economies of scale and conservation of materials.

2. Criterion 2

The availability of basic public services which include but are not limited to sewer, water and electricity to the site in adequate quantities to serve the potential users without adversely affecting the availability of these services to existing users.

Regarding Criterion 2,

Services can be provided to the site without adversely affecting the service delivery to existing users, although some interim systems must be used until complete systems are developed by the City. The annexation and development of this site will make urban services available to more sites within the present ugb. Local improvement districts will be the mechanism for providing these services, which is why waivers of remonstrance and LID initiations are required of the applicant prior to annexation approval by the City Council.

Final service design will be reviewed by City staff through the Design Review process.

3. Criterion 3

The impact upon public services which include but are not limited to police and fire protection, schools, hospitals and public transportation to the extent that they shall not be unduly compromised.

Regarding Criterion 3,

The site is proposed to be built as a school. Traffic will increase in the area because of the school, but a network of streets keeps the traffic diffused. Main Street, Foothills Drive, Crater Lane and Chehalem Drive will be improved to handle the traffic generated by the proposed school, park, and senior center. The applicant will provide the City with a traffic impact analysis in order to determine the level of improvements required on surrounding streets. Busses will travel on Foothills. Bike lanes will probably be developed on Foothills and Main St. Traffic control mechanism may be required on 219. Main St will be built as vacant land southwest of the school site develops.

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4. Criterion 4

The need for housing, employment opportunities, and livability in the City of Newberg and surrounding areas.

Regarding Criterion 4,

Schools are needed in the area. Recreational needs are great in Newberg. The comprehensive Plan indicates a deficiency of 55 acres for recreational use by the year 2010.

5. Criterion 5

The location of the site as to provide for the efficiency in land use in relation to public facilities and services, transportation, energy conservation, urbanization and social impacts.

Regarding Criterion 5,

This school site is in the middle of the school's service district. This school will serve students from Newberg, Dundee, and parts of Yamhill County. The school is proposed to be built with a senior center, park, and eventually, an additional school. By clustering development, these institutions will enjoy economies of scale and conservation of resources. These institutions will also be within walking and biking distance of present and future urban residential development.

C. Zone Change Criteria

1. Criterion 1

The proposed change is consistent with and promotes the objectives of the Comprehensive Plan and of the Zoning Ordinance of the city.

Regarding Criterion 1,

Schools and parks are allowed outright in the R-1 zone. Schools must dedicate and improve roads and dedicate utility easements in order to locate in the R-1 zone. The site is planned Low Density Residential (LDR) in the Newberg Comprehensive Plan. Comprehensive Plan policy compliance is addressed in the annexation findings above.

2. Criterion 2

There is a public need for a change of the kind in question.

Regarding Criterion 2,

This site has been planned for R-1 zoning at the time it was brought into the Urban Growth Boundary and designated on the Newberg Comprehensive Plan. Therefore need was shown at that time and is not applicable now.

3. Criterion 3

The need will be best served by changing the classification of the particular piece of property in question as compared with other available property.

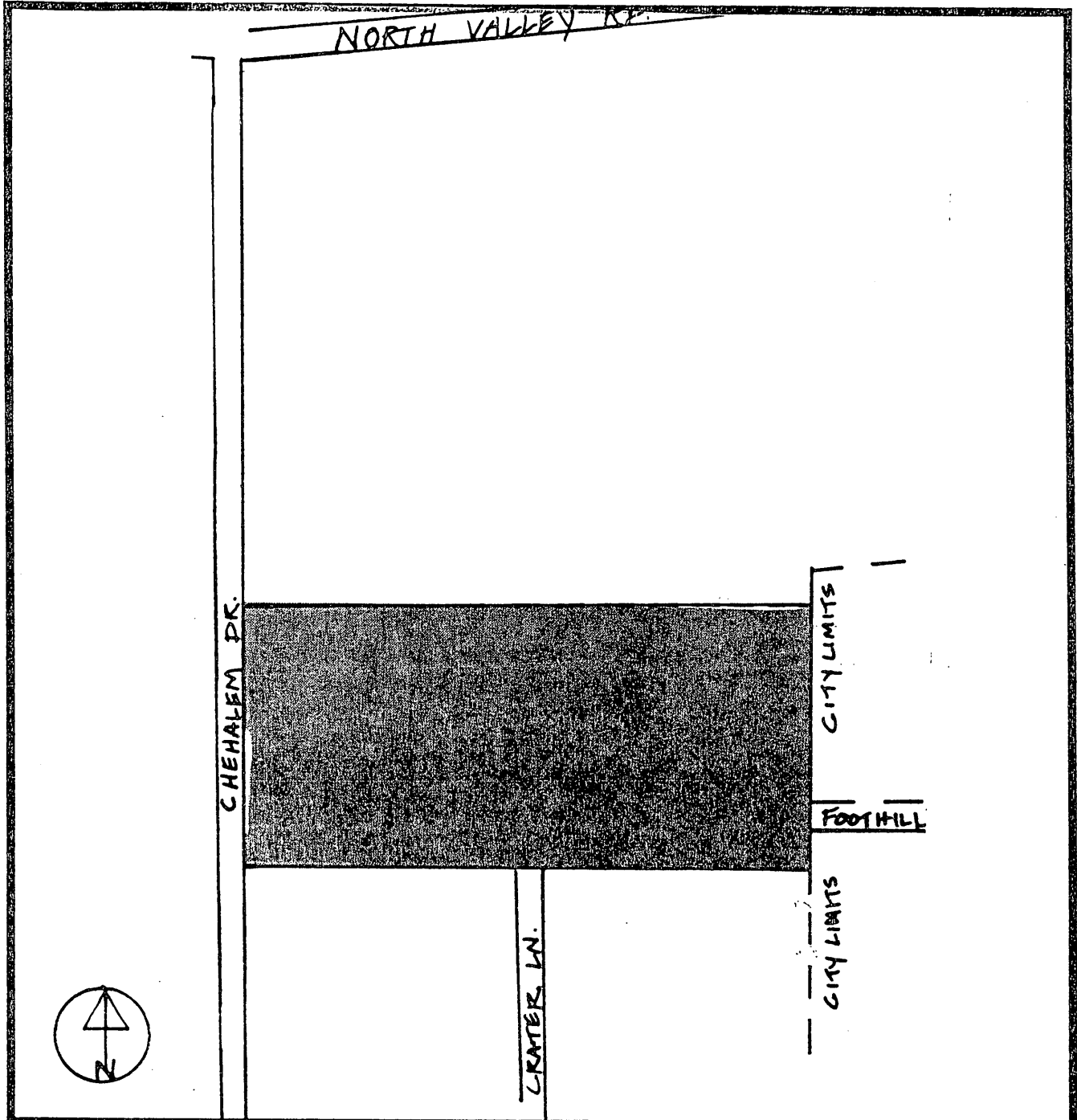
Regarding Criterion 3,

No need must be shown at this time because the site was planned and zoned for low density residential use at the time it was included in the UGB.

VII. CONCLUSION:

Based on the criteria and the conclusionary findings, the request satisfies the criteria for annexation and rezoning to R-1 with the conditions listed below to be completed prior to City Council approval. With annexation, the site will be withdrawn from the Newberg Rural Fire Protection District.

1. The applicants will sign a waiver of remonstrance for street improvements to Chehalem Drive, Main Street, Foothills Drive and Crater Lane.
2. The applicant will sign a waiver of remonstrance to participate in a sewer system Local Improvement District to construct a pump system and gravity sewer.



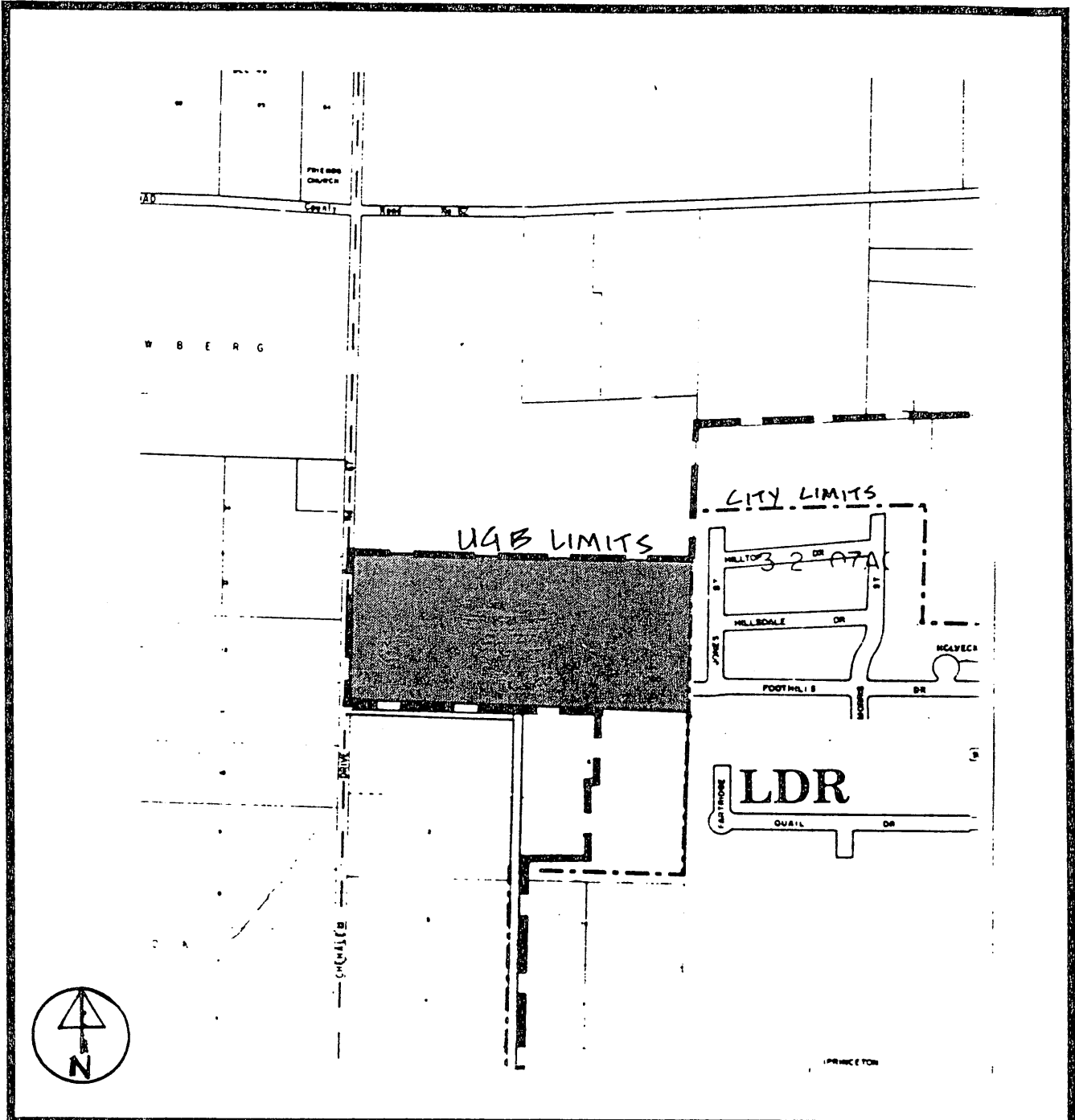
Description:
 17.9 Acre Annexation
File: ANX-2-93
Date: 10-21-93

SITE MAP
EXHIBIT 1

Tax Lot: 3207-1000
 Location: N. of Crater Lane, between Chehalem Dr. and Foothills Dr.
 Application By:
 Newberg School District

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Description:
 17.9 Acre Annexation
File: ANX-2-93
Date: 10-21-93

**COMPREHENSIVE PLAN
 MAP
 EXHIBIT 2**

Tax Lot: 3207-1000
Location: N. of Crater Lane, between Chehalem Dr. and Foothills Dr.
Application By:
 Newberg School District

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EXHIBIT B
ANX-2-93 LEGAL DESCRIPTION

A tract of land in Section 7, Township 3 South, Range 2 West of the Willamette Meridian, Yamhill County, Oregon, being part of the James Morris Donation Land Claim and part of that tract of land described in Judgment, Antonia Crater vs. Ovy D. Pratt, et ux., et al., in Circuit Court, Yamhill County, Oregon, Case No. 82-1390, which Judgment was rendered October 31, 1983, said part being described as follows:

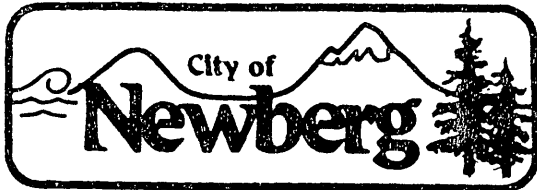
Commencing at a point in the West line of said Morris Donation Land Claim that is South 4.79 feet from a one inch iron pipe set in County Survey No. P-4769 for the True Quarter corner of the Donation Land Claim; thence South 89°11' East 16.50 feet to an iron rod at the West end of a fence and the TRUE point of beginning of the tract herein described; thence North 613.91 feet parallel with and 16.5 feet East from the West line of said Claim to an iron rod; thence South 89°57'50" East 1308.62 feet to an iron rod in the West line of Anne's Addition; thence South 00°01'50" West 627.22 feet to an iron rod at the Southwest corner of said Anne's Addition and the Southeast corner of that certain tract of land described in Quit Claim Deed to Pratt, recorded in Film Volume 181, Page 1242, Yamhill County Deed and Mortgage Records; thence North 89°34'20" West 662.29 feet along the South line of said Quit Claim Deed tract and the South line of said Judgment description to an iron rod that is South 5.00 feet from a 3/4 inch iron pipe at the Northwest corner of Tract 16 of County Survey No. 147C as set in County Survey No. P-4769; thence North 89°11' West 646.17 feet along a fence now there (July 1982) and along the South line of said Judgment description to the point of beginning.

EXCEPTING THEREFROM the following described tract of land, being that tract of land described in Quitclaim Deed to Pratt, recorded in Film Volume 181, Page 1242, Yamhill County Deed and Mortgage Records:

Beginning at an iron pipe that is South 2666.55 feet and East 662.52 feet from the Northwest corner of the James Morris Donation Land Claim, said iron pipe being at the Northwest corner of Lot 16 of County Survey No. 147C as re-established by Norris Jones in County Survey No. P-4769; thence South 89°33' East 662.29 feet parallel with a chain link fence now there (January 1983) to an iron rod at the West line of Anne's Addition; thence South 00°01'50" West 4.73 feet to an iron rod at the Southwest corner of Anne's Addition; thence North 89°34'20" West 662.29 feet to the West line of said Lot 16; thence North 5.00 feet to the point of beginning.

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414 E. First St.

Newberg, Oregon 97132

APPLICATION FOR:
 ZONE CHANGE
 PLAN AMENDMENT
 ANNEXATION
 FILE: AMX-2-93
 DATE: 8-31-93
 FEE: N/A
 RECEIPT NO: _____

APPLICANT: NEWBERG SCHOOL DISTRICT 29 JT PHONE: 538-8361
 ADDRESS: 714 East 6th Street
 OWNER(S): _____ PHONE: _____
 (If different from above)
 ADDRESS: _____
 ENGINEER SURVEYOR: R.W. Mursell & Associates PHONE: 538-2955
 ADDRESS: P.O. Box 451 Newberg, OR 97132
 OTHER PROFESSIONAL: _____ PHONE: _____
 ADDRESS: _____

GENERAL INFORMATION:

LOCATION: See legal description attached.
 TAX LOT NO: 3207-1000
 CURRENT ZONE: AF10 PROPOSED ZONE: R-1
 CURRENT PLAN DESIGNATION: AFSH PROPOSED PLAN DESIGNATION: LDR
 CURRENT USE/STRUCTURES: Hay Field
 NUMBER OF EXISTING DWELLING UNITS: N/A POPULATION (ANNEXATION REQUESTS): 0
 PROPOSED USE/IMPROVEMENTS: Public School
 TOPOGRAPHY: Gently sloping - S.W.
 SURROUNDING USES: NORTH: Farm/Orchard SOUTH: Residential/Orchard
 EAST: REsidential WEST: Farm
 SQUARE FOOTAGE OF SITE: _____ ACREAGE: M/L 18
 IDENTIFY ROAD ACCESS: Foothills Drive North Chehalem, Crater Lane

COMPREHENSIVE PLAN AMENDMENT/ZONE CHANGE CRITERIA:

On an attached sheet of paper identify how your request complies with the following criteria:

1. The proposed change is consistent with and promotes the objectives of the Comprehensive Plan and of the Zoning Ordinance of the City. (Identify specific goal and policy statements contained within the Comprehensive Plan which apply to your request.)
2. There is a public need for a change of the kind in question.
3. The need will be best served by changing the classification of the particular piece of property in question as compared with other available property.

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CRATER LANE SCHOOL SITE ANNEXATION
ATTACHMENT 2
ANNEXATION CRITERIA

1. Consistency with comprehensive plan and other applicable regulations: (See Comprehensive Plan: School Policies, page 28)
 - a. The proposed school site is well situated to serve the projected attendance area. The location of an elementary school and middle school on this site will serve the developing neighborhoods in northwest Newberg. The elementary school will allow redistricting of attendance boundaries to reduce enrollment at Ewing Young Elementary School. Attendance boundary adjustments at Ewing Young are necessary to comply with Yamhill County enrollment restrictions based on the capacity of the septic system.
 - b. The District anticipated the need for schools at this site well in advance of the urbanization and already owns the property.
 - c. It is not on an arterial street.
 - d. Chehalem Park and Recreation District is planning the development of a park on 18 contiguous acres. In addition, negotiations are currently in progress between the School District and Chehalem Park and Rec to include an attached senior center on the site. The total site development will certainly provide a center for neighborhood and community activity.
2. Availability of Services:
 - a. Availability of utilities has been discussed with representatives of the City. Sewer and water service are available on Foothills Drive, however accessing the sewer at this location will require a pump station. Design criteria will include future or concurrent connection to the sewer extension and proposed pump station on Crater Lane and extension of the water line on Crater Lane to provide a loop for the fire sprinkler systems.
3. The construction of these additional schools is required to provide adequate classroom space for students currently residing in and/or expected to be residing within the Newberg School District by the time construction is completed. The current plan is to close Central Elementary School at the completion of the renovation of Newberg High School and Renne Middle School (approximately at the close of the 1995-96 school year. To the extent that new space is being built to replace existing space the impact on other services directly provided to schools is mitigated. However, the new elementary school will have larger capacity than the existing Central School and will operate concurrently for at least two years. The need to construct additional schools within the Newberg School District is a direct result of the development and growth policies of the City of Newberg, City of Dundee and Yamhill County. Additional police and/or fire suppression capability may be required as a result of this construction.
4. The construction of new schools is planned in response to or anticipation of growth in the school age population rather than the reverse. However, excellent schools and excellent school facilities do increase the desirability of moving to a community. We are not in a position to assess the extent to which the population in the Newberg Area will increase specifically because of the school system or the new schools proposed.

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5. The location of the site serves the needs of the Newberg School District well. As mentioned the location on the northeast side of Newberg will provide opportunities to redistrict and control growth at Ewing Young. Under the current bond Springbrook Middle School will become part of Newberg High School. Within ten years it is expected that an additional high school in the Newberg School District will be required. At that time we expect that an additional middle school will also be required. Our intention is to again establish the current Springbrook as a middle school. The resultant triangle of middle schools will facilitate establishment of appropriate middle school attendance boundaries.

Following the construction of Edwards Elementary School elementary school attendance boundaries were adjusted. As part of that process a block of students formerly in the Central Elementary School attendance area are now being bussed past Central to Edwards. Construction of the elementary school on the proposed site will once again provide a neighborhood school for these students. The new schools will also be well situated to accommodate expected growth in the northwest Newberg area.

The proposed site would make efficient utilization of land and public financial resources by combining development of this site with Chehalem Park and Recreation's proposed new park and softball facility. Inclusion of a senior center attached to the elementary school, sharing some facilities and the potential addition of a community gym to the middle school will provide a comprehensive center for community activity.

Construction of two schools on this site is expected to result in lower energy consumption and reduced costs during the construction process as well as for on-going transportation requirements than construction on two separate sites would.

6. The extension of Foothills Lane connecting to Chehalem Drive, which would be developed to access these schools, will meet the need indicated in the City's transportation plan for a collector in this vicinity.

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ATTENDANCE SHEET

COMMITTEE: NEWBERG CITY COUNCIL MEETING

MEETING DATE: _____

11/16/93

7:00 p.m.
HCC & CC

<u>Council Member</u>	<u>Committee Member</u>	<u>Present</u>	<u>Absent</u>
ADAMS, Corinne	[]	[✓]	[]
CURRIER, Roger	[]	[✓]	[]
GANO, Roger	[]	[✓]	[]
HAY, Gary	[]	[✓]	[]
McCAIN, Donna	[]	[✓]	[]
McINTOSH, Martin	[]	[✓]	[]
PROCTOR, Donna	[]	[✓]	[]
REINHARDT, Scott E.	[]	[✓]	[]
SMITH, Elaine	[]	[✓]	[]
<u>Max Meeneitz</u>	[]	[]	[]
_____	[]	[]	[]

Submitted By: _____

Peggy Hall

NOTE: Please complete an attendance sheet for all meetings involving City Council members and return to the Legal Department. If the regularly scheduled meeting is canceled for any reason, it should be noted on an attendance sheet and sent to the Legal Department.

Original minutes, signed by the secretary or chairman, should be prepared and sent to the Legal Department for filing as the official record of the meeting.

11/16/93

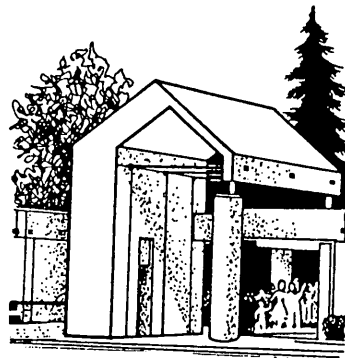
HOSPITAL COMMISSION
October 18, 1993

Residency

In	<i>present</i>	Kate Copenhaver 509 School Street Newberg, Oregon 97132 538-9735 (H)	Term: 3 Years Appointed: 08/27/91 Expires: 12/31/94	Retired - School Admin.
Out	<i>NO</i>	Phil Edin 4403 Birdhaven Loop Newberg, Oregon 97132 538-2185 (W) / 538-9826 (W)	Term: 3 years Appointed: 5/1/88 Expires: 12/31/94	Finance Officer
Out	<i>yes</i>	Jerry Frentress, Chairman P.O. Box 70 Newberg, Oregon 97132 538-2151 (W); Pager: 790-6551	Term: 2 Years Appointed: 01/01/91 Reappointed: 01/01/93 Expires: 12/31/95	Finance
Out	<i>yes</i>	Mike Olberding 23251 NE Fulquartz Landing Dundee, OR 97115 538-3159 (W); 538-2273 (H) (Filling Marcia Garrick's term)	Term: 3 years Appointed: 10/04/93 Expires: 12/31/96	Insurance Agent
In	<i>yes</i>	Harold Haglund 1217 Pennington Dr., N. Newberg, OR. 97132 538-7406 (H); 538-0440 (W) (Filling Harold Grobey's term)	Term: 3 years Appointed: 10/04/93 Expires: 12/31/94	Minister
Out	<i>yes</i>	Dr. David C. Holman 34850 NE Wilsonville Rd. Newberg, Oregon 97132 538-8324 (W) / 625-2265 (H)	Term: 3 years Appointed: 1/85 Expires: 12/31/93	Physician Based at NCH
In	<i>NO</i>	Julie Isaacson, M.D. 1524 Hess Creek Court Newberg, Oregon 97132 538-0428 (W); 538-1186 (H)	Term: 3 years Appointed: 1/1/90 Reappointed: 01/01/93 Expires: 12/31/95	Physician Orthopedic Surgeon
In	<i>NO</i>	Jack Nulsen 613 Donald Court Newberg, OR 97132 538-4070 (H)	Term: 3 years Appointed: 10/1/89 Expires: 12/31/93	Attorney Former Mayor and Council Member
In	<i>NO</i>	Fonda Schmidt PO Box 707 Newberg, OR 97132 538-9168 (W); 538-5328 (H)	Term: 3 years Appointed: 10/1/84 Reappointed: 01/01/93 Expires: 12/31/95	Construction- Business Owner

Have a Voice in the Future of Newberg Community Hospital...

**Public Input
Meeting
Tuesday,
November 16
7:00 p.m. to
10:00 p.m.**



at Newberg High School Cafeteria

Listen to a first hand report from the Author of the Whitman/Garvey Report on the future options of Newberg Community Hospital to meet the needs of the Newberg area into the 21st Century.

Jim Whitman will present an overview of the information collected from extensive interviews with healthcare professionals and systems healthcare providers in the greater Portland metropolitan area.

Following the overview, the audience will be divided into smaller round-table discussion groups. Those groups will be guided in discussion by a member of the hospital commission and city council member. The input from these round-tables will then be used to help plan the future of Newberg Community Hospital.

Co-sponsored by Newberg Community Hospital and the City of Newberg

ATTENDANCE SHEET

COMMITTEE: NEWBERG CITY COUNCIL MEETING

MEETING DATE: 11-16-93

ORD 93-2368
~~Committee~~
~~Member~~ *Crater*

Council Member

	<u>Present</u>	<u>Absent</u>
ADAMS, Corinne	[]	[]
CURRIER, Roger	[]	[]
GANO, Roger	[]	[]
HAY, Gary	[]	[]
McCAIN, Donna	[]	[]
McINTOSH, Martin	[]	[]
PROCTOR, Donna	[]	[]
REINHARDT, Scott E.	[]	[]
SMITH, Elaine	[]	[]
_____	[]	[]
_____	[]	[]

Submitted By: *Peggy Hall*

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Original minutes, signed by the secretary or chairman, should be prepared and sent to the Legal Department for filing as the official record of the meeting.

ATTENDANCE SHEET

COMMITTEE: NEWBERG CITY COUNCIL MEETING

MEETING DATE: 11-16-93 6:30 p.m.

<u>Council Member</u>	<u>Committee Member</u>	<u>Present</u>	<u>Absent</u>
ADAMS, Corinne	[]	[✓]	[]
CURRIER, Roger	[]	[✓]	[]
GANO, Roger	[]	[✓]	[]
HAY, Gary	[]	[]	[]
McCAIN, Donna	[]	[✓]	[]
McINTOSH, Martin	[]	[✓]	[]
PROCTOR, Donna	[]	[✓]	[]
REINHARDT, Scott E.	[]	[✓]	[]
SMITH, Elaine	[]	[✓]	[]
<u>Betty Lovell</u>	[]	[]	[]
<u>Dale welcome</u>	[]	[]	[]
<u>Anne Meunert</u>	[]	[]	[]
<u>Jim Whitman</u>	[]	[]	[]
<u>Pell Francker</u>	[]	[]	[]

Submitted By: Peggy Hall

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