



Tribal Council Workshop Information

Workshop Title: Ko-Kwel Wellness Center Update	Date of Workshop: 11/03/20
<input checked="" type="checkbox"/> Open Workshop <input type="checkbox"/> Continued from previous Workshop – Date: <input type="checkbox"/> Closed Executive Workshop	
Presenter’s Name, Title and Department: <ul style="list-style-type: none"> • Mark Johnston, Executive Director • Fauna Larkin, Director, Operations Department • Kelle Little, Health and Human Services Director • Kyle Viksnehill, Controller • Mark Gagnon, CFO 	
Guest Presenter(s), Title and Agency (anyone not associated with CIT): <ul style="list-style-type: none"> • Eric Scott, Project Manager • Gary Leva, Gary Consulting Group 	
Note Taker for Workshop: <ul style="list-style-type: none"> • Anna Chavez, Administrative Assistant 	
Brief Description (provide outline of discussion points as well as questions you need answered by this workshop): <ol style="list-style-type: none"> 1. Operations <ol style="list-style-type: none"> a. Charter b. By-laws c. Program Authorization Ordinance 2. Budget Update <ol style="list-style-type: none"> a. Review grant status b. Change Order Review 3. Schedule Update 	
<u>Workshop Attendees</u> Tribal Council: Staff: Others:	
Workshop Summary (provide outline of discussions that occurred): 	
Reference Materials (provide for posting): <ul style="list-style-type: none"> • New Facility Charter (Draft 11032020) • Bylaws for Health Care Division (Draft 10282020) 	

- Healthcare Division Program Authorization
- Construction Budget Status
- Construction Schedule Update

Next Steps:

- Information Only**
- Schedule second workshop**
- Prepare item for Tribal Council Motion**
- Prepare item for Tribal Council Resolution**
- Prepare item for Administrative Approval process**
- Other:**

Executive Director Comments:

Tribal Council Secretary/Treasurer Comments:

Executive Director Initials:

COQUILLE INDIAN TRIBE

TRIBAL HEALTH CHARTER

November 3, 2020

TRIBAL HEALTH CHARTER

TABLE OF CONTENTS

SECTION I. ESTABLISHMENT	2
SECTION II. PURPOSE & AUTHORITY.....	2
SECTION III. DURATION	3
SECTION IV. MISSION, VISION & VALUES.....	3
SECTION V. KO-KWEL WELLNESS CENTER GOALS	5
SECTION VI. NO WAIVER OF SOVEREIGN IMMUNITY.....	5
SECTION VII. AMENDMENT	5

SECTION I. ESTABLISHMENT

In order to ensure and oversee the provision of comprehensive, holistic, efficient and effective health care for members of the Coquille Indian Tribe (CIT) and other eligible persons seeking to receive health care services at or through the CIT Wellness Centers, the Coquille Indian Tribal Council, pursuant to the Constitution of the CIT, hereby establishes and delegates all healthcare operational authority to the Tribal Health Board of Directors. The Ordinance(s) cited for this purpose are as follows: Government Organization and Procedure (#120) and Program Authorization and Evaluation Ordinance (#175).

The rationale for establishing a Tribal Health Board are as follows:

1. Increase Tribal Council time & efficiency to focus on other tribal matters.
2. Allow Tribal Wellness Centers to operate as independent businesses that provide quality healthcare in a financially sustainable and effective manner.
3. Allow healthcare experts, as Board members, to provide oversight and input.
4. Allow greater flexibility and efficient decision making for the Healthcare CEO to manage day to day operations

SECTION II. PURPOSE & AUTHORITY

PURPOSE

The overall purpose of the Board is as follows:

- A. To provide oversight of quality and timely health and wellness services, including but not limited to, medical, pharmacy, dental, behavioral and community health to members of the Coquille Indian Tribe and other eligible persons.
- B. To ensure a high quality, accessible, responsive and well-coordinated delivery system of health education, promotion and health and wellness services, for the benefit of current and future CIT members and eligible members of the general community.
- C. To serve as the governing body of the CIT Wellness Centers, which satisfies the requirements of the Accreditation Association for Ambulatory Health Care (AAAHC) and/or other accreditation or licensing authorities.
- D. Maintain fiscal accountability by closely monitoring and generating revenue, implementing cost control policy and procedures, obtain and review comprehensive monthly and year-end fiscal reports and provide Tribal Council with an accurate financial overview at quarterly combined meetings. The annual budget will be developed in conjunction with the Tribe's budgeting process.

- E. Ensure timely response to patient complaints and to serve as the primary health advocate for the CIT membership.

AUTHORITY

The Board of Directors shall have authority and responsibility for establishing the policy for administration of the Healthcare Division in accordance with the guidelines contained in the Board Bylaws. The specific powers, duties and responsibilities of the Board are also delineated in the Bylaws.

SECTION III. DURATION

The Tribal Health Board shall exist until terminated by the Tribal Council.

SECTION IV. MISSION, VISION AND VALUES

A. Health and Human Services Mission (HHS)

HHS fosters and promotes a whole person approach to wellness, health, and the promotion of self-sufficiency through commitment to a safe, traditional, and culturally meaningful environment. Our mission is to ensure the legacy of the Coquille Indian people.

B. Vision

a. Coquille Indian Tribe Vision

We are a proud and powerful resilient people, a sovereign nation, whose binding thread is our Coquille identity. In the footsteps of our ancestors, we celebrate.

C. Core Values

As a sovereign nation, we dedicate ourselves to:

- i. Promoting the health and well-being of tribal members and our community
- ii. Providing equitable opportunities, experiences and services to all tribal members
- iii. Taking care of our old people

- iv. Educating our children
- v. Practicing the culture and tradition of potlatch
- vi. Considering the impacts to our people, land, water, air and all living things
- vii. Practicing responsible stewardship of Tribal resources

SECTION V. CIT HEALTHCARE DIVISION GOALS

- A. Provide comprehensive health services that are high quality, culturally competent, and sensitive to Tribal historical trauma.
- B. Maximize revenue, minimize expenses, reduce the CIT General Fund subsidy and create financial reserves.
- C. Maintain high quality and stable workforces in safe and clean work environments.
- D. Maintain well trained/educated/competent Board, CEO and all staff.

SECTION VI. NO WAIVER OF SOVEREIGN IMMUNITY

Nothing in this Charter is intended nor shall be construed to waive the sovereign immunity of the CIT or the overall authority of the CIT Tribal Council.

SECTION VII. AMENDMENT

Any amendment to this Charter shall be effective with the approval by Resolution of the CIT Tribal Council.

Coquille Indian Tribe

Healthcare Division

BYLAWS

TABLE OF CONTENTS WILL BE UPDATED UPON FINAL APPROVAL OF BYLAWS

NAME, OFFICE AND PURPOSE

Section 1 .01	Name
Section 1 .02	Seal
Section 1 .03	Principal Office
Section 1 .04	Mission

ARTICLE 2: PURPOSE OF HEALTHCARE DIVISION

ARTICLE 3: BOARD OF DIRECTORS

Section 3.01	General Powers
Section 3.02	Specific Powers, Duties and Responsibilities
Section 3.03	Number, Tenure, and Qualifications
Subsection 3.03.01	Number
Subsection 3.02.02	Tenure
Subsection 3.02.03	Qualifications
Section 3.04	Selection of Directors
Section 3.05	Resignation
Section 3.06	Removal
Section 3.07	Vacancies
Section 3.08	Meetings
Subsection 3.08.01	Annual Meeting
Subsection 3.08.02	Regular Meetings
Subsection 3.08.03	Special Meetings
Subsection 3.08.04	Notice; Waiver
Subsection 3.08.05	Quorum
Subsection 3.08.06	Voting
Subsection 3.08.07	Conduct of Meetings
Subsection 3.08.08	Executive Session
Section 3.09	Honorarium/Compensation

Ko-Kwel Wellness Center

BYLAWS

Section 3.10 Board Evaluations and Training

ARTICLE 4: OFFICERS

Section 4.01 Titles

Section 4.02 Election and Term of Office

Section 4.03 The Chairman

Section 4.04 Other Assistants and Acting Officers

Section 4.05 Records

ARTICLE 5: HEALTHCARE DIVISION CEO

Section 5.01 CEO

Section 5.02 Evaluation

ARTICLE 6: FISCAL MANAGEMENT

Section 6.01 Fiscal Management Ordinance

Section 6.02 Loans

Section 6.03 Contracts

ARTICLE 7: CONFLICTS OF INTEREST

Section 7.01 Contracts with Directors or Officers

Section 7.02 Loans to Directors or Officers

Section 7.03 Conflicts of Interest

Ko-Kwel Wellness Center

BYLAWS

ARTICLE 8: INDEMNIFICATION OF DIRECTORS AND OFFICERS

Section 8.01 Indemnification

ARTICLE 9: AMENDMENT OF BYLAWS

ARTICLE 10: SERVICES PROVIDED BY THE DIVISION

Section 10.01 Healthcare Services

Section 10.02 Health Records

Section 10.03 Non-discrimination

ARTICLE 11: MISCELLANEOUS

Section 10.01 Fiscal Year

Section 10.02 Approval of Bylaws

Section 10.03 Dissolution

ARTICLE 1: NAME, OFFICE AND PURPOSE

Section 1 .01 Name of Entity

The name of the entity is the Healthcare Division, a 'Division' of the Coquille Tribal Government as authorized and through the Program Authorization and Evaluation Ordinance #175, Charter and Bylaws approved by Tribal resolution # ???, dated ????, 2020.

Section 1.02 Seal

The seal is the Coquille Indian Tribe's (CIT) tribal logo.

Section 1.03 Principal Office

The principal office of the Division shall be located at the Coquille Indian Tribe's KoKwel Wellness Center, 630 Miluk Drive, Coos Bay, OR, 97420.

Section 1.04 Mission

The mission of the Healthcare Division is to provide holistic, high quality, affordable and accessible healthcare services to all community members, both Native and non-Native.

The purposes, for which this Division is formed, are set forth in the Bylaws, to which reference is hereby made, and the same are hereby incorporated in these Bylaws as though fully set forth herein.

ARTICLE 2: PURPOSE OF THE HEALTHCARE DIVISION

The Ko-Kwel Wellness Center is organized for the following purposes:

1. To maintain an organization that will provide healthcare services, which may include primary medical and dental services, laboratory services, pharmacy services, urgent care services, mental health and substance abuse services, alternative and complimentary services and other disease prevention and health promotion services as needed to promote, foster and maintain good health.
2. To coordinate and collaborate service delivery with the pre-existing community resources.
3. To provide non-discriminatory services.
4. To do all things, including the lease, purchase, or assignment of real and personal property, necessary to accomplish the aforementioned purposes as set forth in these Bylaws.
5. The "Division" is prohibited from encumbering short-term or long-term debt financing for any purpose including remodeling or new construction; the "Division" is required to submit a recommendation to the CIT Governing Body should it desire to encumber debt.

6. The CIT Tribal Council as the Governing Body has final authority to approve/disapprove recommendations from the Health Board regarding debt financing.

ARTICLE 3: Health Board Members

Section 3.01 General Powers and Responsibilities of the Health Board

The activities, committees, affairs and property of the Healthcare Division shall be governed by the Board of Directors (Health Board). The CIT Tribal Council is responsible for selecting the Board Members, including the hiring of the Healthcare CEO, who will also serve as the Chairperson of the Board. The Health Board is responsible for the Division's policies, while the Healthcare CEO is responsible for the day-to-day operations.

The activities, committees, affairs and property of the Healthcare Division shall be governed by the Board of Directors (Health Board). The CIT Tribal Council is responsible for selecting the Board Members, including the hiring of the Healthcare CEO. The Tribal Council will select the Chair of the Board. The Health Board is responsible for the Division's policies, while the Healthcare CEO is responsible for the day-to-day operations.

The Health Board shall have authority and responsibility for establishing the policy for administration of the Division in accordance with the guidelines herein contained. Individual Board Directors are specifically restricted from meeting with other Board Members in any unauthorized manner on behalf of the Board.

The CIT Tribal Council and the Health Board will refer all health care questions, concerns, complaints, inquiries to the Healthcare Division CEO for resolution. At no time should individual CIT Tribal Council and Health Board members attempt to resolve an inquiry about healthcare matters without first notifying the Healthcare Division CEO.

Section 3.02 Specific Powers, Duties and Responsibilities

The duties of the Health Board in its administration of the Division include, but are not limited to, the following:

- (1) Provide recommendations for the selection, annual evaluation, renewal and/or dismissal of the Healthcare CEO, to the CIT Tribal Council.
- (2) To ensure accountability for the Division's resources, recommend annual budget to the Tribal Council for approval, establish the Division's priorities, determine eligibility for services, and create long-range financial and strategic planning goals;
- (3) Evaluation of the Division's activities including services, quality of care metrics, utilization patterns, productivity, patient satisfaction, achievement of objectives and approval of a process for quality improvement and risk management, including but not limited to a process for hearing and resolving patient grievances;

- (4) Monitor and oversee the expectations of the Division and approval of new programs and services of the Division. The Health Board shall annually review its policies and Bylaws;
- (5) Ensuring that the Healthcare CEO is operating within applicable Tribal, Federal, State, and local laws and regulations;
- (6) Adopting health care policies, as recommended by the Healthcare CEO, including the scope and availability of services, location and hours of services, fee schedule, and quality of care audit procedure;
- (7) Ensure that the Healthcare CEO or designee take minutes of all Board meetings.
- (8) The Health Board shall abstain from voting on any motion in which the Board member may have a conflict of interest;
- (9) The Health Board and Healthcare CEO shall meet quarterly with the CIT Tribal Council (Governing Body) to provide, at a minimum, the following reports: financial status, productivity, quality of care, staffing, patient satisfaction and issues needing attention. Special meetings, over and above the quarterly meetings, may be requested by either the CIT Tribal Council or Health Board, as needed. The entity that requests the special meeting is required to have a specific agenda that is within the purview of either entity's responsibilities or accountabilities. Prohibited agenda items include; employer relation matters, employee corrective actions, patient complaints, staff grievances, political matters, clinical decisions and personal health related matters, are prohibited topics for special meeting requests.

Section 3.03: NUMBER, TENURE & QUALIFICATION

Subsection 3.03.01 Number

The Board is comprised of five (5) members appointed by the Tribal Council. One member will be a voting Tribal Council Representative. The Healthcare CEO is the Chairperson of the Board and only votes on matters where a tie needs to be broken.

The Board is comprised of five (5) members appointed by the Tribal Council. One member will be a voting Tribal Council Representative. The Chair, selected by the Tribal Council, only votes on matters where a tie needs to be broken. The Healthcare CEO is not the Chair, but is a voting member of the Board.

Subsection 3.03.02 Tenure

Excluding the Healthcare CEO, Health Board positions will be staggered three-year terms. Board Members can be removed by the Council at any time, without cause.

Subsection 3.03.03 Qualifications

The Health Board shall be composed of individuals who have expertise in providing comprehensive healthcare services, especially in a Tribal or IHS facility that also serves the general public. Other areas of expertise that may be considered include: law, finance, social services, business, tribal operations, or other experience that would enhance the expertise of the Board in overseeing the Division.

Section 3.04 Selection

Individuals shall be selected to become Health Board members by the CIT Tribal Council. The CIT Tribal Council will develop and approve a plan for recruitment and selection, including; Board member job descriptions, selection criteria, timeframes, etc.

In selecting individuals to serve as members of the Health Board, the CIT Tribal Council will ensure that the expertise requirements specified in Article 3, Section 3.03 are met and that the Board of Directors is at all times compliant with this requirement.

Section 3.05 Resignation

A member may relinquish their position on the Health Board at any time by delivering a written resignation to the CIT Tribal Council. Such resignation shall be effective upon receipt, unless otherwise provided by the terms thereof. The Tribal Council will fill the vacancy as specified in these Bylaws.

Section 3.06 Removal

A decision to remove a Health Board member may also occur at the recommendation of the Health Board and approval by the CIT Tribal Council. A special meeting with the CIT Tribal Council will be requested by the Health Board for this purpose. Any Health Board member may be recommended for removal by the unanimous vote of the Health Board, with prior notice given that specifies the proposed removal. Health Board members may be removed for cause. "For cause" includes, but is not limited to the following:

- unethical or unprofessional conduct
- theft or dishonesty
- malfeasance
- disorderly conduct
- breach of confidentiality
- lack of support of Healthcare Division mission
- behavior that interferes with the orderly functioning of the Board
- three (3) unexcused absences (abandonment)

A Board Member may be removed if such Director has three (3) unexcused absences in any one calendar year. A Health Board Members absence shall be excused if they inform the Board Chairman of their inability to attend prior to the meeting.

Section 3.07 Vacancies

Vacancies will be filled by the CIT Tribal Council under the guidelines identified in Section 3.04. Each Board member shall remain in office until her/his successor is elected and qualified, subject to earlier termination by removal or resignation.

A vacancy because of death, resignation, removal, disqualification or otherwise shall be filled by the CIT Tribal Council for the unexpired portion of the term.

Section 3.08 Meetings

Meetings of the Health Board may be called by the Healthcare Division CEO for any purpose to transact business. Initially meetings will occur monthly; however, the Health Board may choose to meet less frequently, as approved by the Board. Regular meeting days will be established throughout the year based on consensus of the Board. Minutes of all meetings of the Board shall be recorded and maintained. Meetings of the Board may be held in face-to-face, phone conferences, videoconference, or other electronic means, at the pleasure of the Chairman. The Chairman must contact all Board members, in a timely manner to notify the Board members of the meeting time and date.

Subsection 3.08.01 Annual Meeting

The Health Board shall have an annual meeting with the CIT Tribal Council and Membership, which will be scheduled in January for filling expiring terms of office and to provide an annual report of the Healthcare Division and discuss future goals and objectives.

Subsection 3.08.02 Regular Meetings

Regular meetings of the Board shall be considered closed session and held at a convenient time and location as determined by a majority of the members of the Board.

Subsection 3.08.03 Special Meetings

A special meeting of the Board of Directors may be called as outlined in Section 3.08 of these by-laws.

Subsection 3.08.04 Notice Waiver

Health Board Members shall be notified of any special meeting using the usual business or residence address, in advance of the said meeting by at least three (3) days where possible.

Notice of each meeting of the Health Board shall be given by telephone, by written notice delivered personally, e-mail, or given via his or her business/personal address. If mailed, such notice shall be deemed to be delivered when deposited in the United States mail so addressed, with postage thereon prepaid.

Subsection 3.08.05 Quorum

Three (3) members of the Health Board (excluding the Chairperson) shall constitute a quorum for the transaction of business.

Actions taken at a meeting where a quorum is present, shall be determined by a majority of those present, unless otherwise required by these Bylaws.

Subsection 3.08.06 Voting

At all meetings of the Health Board, except as otherwise expressly required by these Bylaws, all matters shall be decided by the vote of a majority of the Health Board present at the meeting.

The act of the majority of the Health Board present at a meeting in which a quorum is present shall be the act of the Health Board.

Subsection 3.08.07 Conduct of Meetings

The Chairperson, shall call meetings of the Board of Directors to order and shall act as Chair of the meeting. The Chairperson in his/her absence, may request another Board member to serve as the Chairman. No business may be approved without a quorum but business may be discussed and voted on, if needed, at the next regularly scheduled meeting when a quorum exists.

Subsection 3.08.08 Executive Session

Regular meetings of the Health Board are not open to the public and therefore considered to be in Executive Session. .

Section 3.09 Honorarium/Compensation

Health Board Members, with the exception of the Healthcare CEO and Tribal Council representative, are entitled to an honorarium of \$1,000.00 per meeting and travel related costs based on the Tribe's travel policies.

Section 3.10 Board Evaluations & Training

The Health Board shall conduct an annual self-evaluation at the November meeting. The purpose of the self-evaluation is a checks and balances on the overall performance of the Board. The self-evaluation process shall include facilitation by a non-Board member selected in advance by the Board who will meet with the Board to determine the agenda.

The Tribal Council will evaluate the Health Board annually in December, using information from the Health Board self-evaluation and overall performance based on goals, expectations and healthcare metrics.

The Health Board shall receive an initial, in depth, Tribal and Board orientation. Additional Board training will occur, at a minimum, once every two years. The Health Board and the Healthcare CEO will orient a new member on Board practices and the status of the Health Center's. The new Board member will receive at least six months of the most current Board minutes, documents, reports, etc. to bring the Board member current on the status of the KWC's.

ARTICLE 4: OFFICERS

Section 4.01 Titles and Qualifications

The officers shall consist only of a Chairman, appointed by the Tribal Council.

Section 4.02 Election and Term of Office

The Chairman the Health Board is the Healthcare Division CEO and serves as the Chairman as long as he/she retains the CEO position.

All Board members with have staggered three year terms, excluding the Healthcare CEO.

Section 4.03 Board Chairman

The Chairman shall be the principal officer subject to the control of the CIT Tribal Council and in accordance with the purposes of the Division. The Chairman is responsible for the following: presiding over all meetings of the Board of Directors, forming agendas for the Board of Directors meetings, and presenting/addressing items on the agenda.

The Chairperson shall, when present, preside at all meetings of the Health Board. He or she shall have authority, subject to such rules as may be prescribed by the Health Board, to delegate authority to sign, execute and acknowledge, on behalf of the Healthcare Division, all documents or instruments necessary and/or proper to be executed in the course of the Division's regular business. In general, he or she shall perform all duties incident to the office of the Chairperson, have such other duties, and exercise such other authority as may be prescribed by the Health Board from time to time.

Section 4.04 Other Assistants and Acting Officers

The Health Board Chairperson may designate an assistant or Acting Chairperson as necessary to facilitate meetings and business.

Section 4.05 Records

There shall be maintained at the Coos Bay, Ko-Kwel Wellness Center, all financial books and records of account, all minutes of the Health Board meetings, the list of members and copies of all other material records, books, documents and contracts.

All such books, records, minutes, lists, documents and contracts shall be made available for inspection at any reasonable time during usual business hours, (1) by any Health Board member of the Division, or duly authorized representative thereof, for any lawful and proper purpose, and (2) by any Tribal Council member, or duly authorized representative thereof, for any lawful purpose. Upon leaving office, each Health Board member shall turn over to his or her successor or the Chairman, in good order, such Health Board moneys, books, records, minutes, lists, documents, contracts or other property of the Division as may have been in the custody of such Health Board Member or agent during his or her term on the Health Board.

ARTICLE 5: Healthcare Division Chief Executive Officer

Section 5.01 CEO

The CIT Tribal Council shall hire a full time Healthcare Chief Executive Officer (CEO) to manage the Healthcare Division. The CEO shall be the chief executive officer of the Division, shall serve on the Health Board. He or she shall have all the duties and authority, which such position would customarily require. The CEO shall be responsible to the CIT Tribal Council for executing the policies of the Healthcare Division and the mission of the Division. The CEO shall serve at the pleasure of the CIT Tribal Council.

Section 5.02 Evaluation

An annual appraisal of the CEO's performance shall be performed in writing by the CIT Tribal Council with input from the Health Board of Directors. The annual appraisal of the CEO's performance shall be performed within thirty (30) days before or after the anniversary of the CEO hire date.

ARTICLE 6: Fiscal Management

Section 6.01 Fiscal Management Ordinance

As a Division of Tribal Government the Healthcare Division will function within the pararement of the Tribe's Fiscal Management Ordiance and Accounting policies and procedures. the Division shall be deposited in accordance with the Tribes Fiscal Management Ordinance and policies and procedures.

Section 6.02 Loans

No indebtedness for borrowed money shall be contracted on behalf of the Division, and no evidences of such indebtedness shall be issued in its name.

Section 6.03 Contracts

The Healthcare CEO, or their designee, may enter into any contract or execute or deliver any instrument in the name of and on behalf of the Division as long as it pertains to the operation of the Healthcare Division, and such authorization may be general or confined to specific instances.

ARTICLE 7: CONFLICTS OF INTEREST

Section 7.01 Contracts with Board Members or Officers

No Health Board member or officer of the Division shall be interested, directly or indirectly, in any contract relating to the operations conducted by it, nor in any contract for furnishing services or supplies to it.

Section 7.02 Loans to Officers and Directors

No loans shall be made by the Division to its Board Members, officers, staff or any other person or entity.

Section 7.03 Conflicts of Interest

The Healthcare Division CEO is an employee of the Division. No other Board member may be an employee of the Division.

ARTICLE 8: INDEMNIFICATION OF DIRECTORS AND OFFICERS

Section 8.01 Indemnification

To the fullest extent permitted by its Bylaws and CIT Tribal law, CIT is authorized and required to indemnify all the Health Board Members and Officers. The officers or Health Board Members, shall be entitled to determine the terms of indemnification, including advance of expenses and to give effect thereto through the adoption of Bylaws, approval of agreements, or by any other manner approved by the officers. Any amendment to or repeal of this Article shall not adversely affect any right of an individual with respect to any right to indemnification prior to such amendment or repeal.

It is the intention of the Health Board Members and officers of the Division these Bylaws and all suits and special proceedings under these Bylaws be construed in accordance with and pursuant to the laws of CIT and that any action, special proceedings or other proceeding that may be brought arising out of, in connection with or by reason of these Bylaws, the laws of the CIT shall be applicable and shall govern to the exclusion of the law of any other forum; and, the venue of the action of proceeding shall be the designated jurisdiction that the part first exhaust all remedies in CIT Tribal Court.

ARTICLE 9: AMENDMENT OF BYLAWS

These Bylaws may be altered, amended or repealed and new Bylaws may be adopted. Amendments shall be approved by at least four (4) members of the Board. The Board will present recommended Bylaws changes to the Tribal Council for review and approval.

ARTICLE 10: SERVICES PROVIDED BY THE DIVISION

Section 10.01 Health Care Services

Within the eligibility guidelines, capabilities, talents and expertise of the personnel and facilities of the Healthcare Division, health care shall be provided for all persons who seek health care. The range of comprehensive services shall be approved by the Health Board.

Section 10.02 Health Records

All health records shall be kept in accordance with Federal, Tribal, state and local laws and regulations, on each patient with pertinent data recorded necessary for adequate diagnosis and treatment of the patient's condition. These records shall remain confidential, for clinical or referral uses only, other uses being determined by authorized staff of the Division .

Section 10.03 Non-discrimination

All the above services shall be provided to the best of the Division's ability. Patients will not be discriminated because of race, color, creed, religion, sexual orientation or national origin.

ARTICLE 11: MISCELLANEOUS

Section 11.01 Fiscal Year

The fiscal year of the Division will be consistent with the Coquille Indian Tribe.

Section 11.02 Approval of Bylaws

By **Resolution XXXXXX**, the CIT Tribal Council approved the Bylaws of the Healthcare Division and directs that the Board operate the Healthcare Division consistent with the approved Bylaws which creates the Division as a separate, single purpose instrumentality of the Coquille Indian Tribe, Tribal Government.

Section 11.03 Dissolution

A simple majority of the Tribal Council may dissolve the Division.

The above Bylaws were duly and legally adopted at a meeting of the CIT Governing Body on the **XXXX** day of _____, 2020, by a vote of _____ FOR and _____ AGAINST.

PROGRAM AUTHORIZATION AND EVALUATION ORDINANCE

Chapter 175

HEALTHCARE DIVISION

NOVEMBER 3, 2020

The Healthcare Division is a newly created entity within the Coquille Indian Tribal government. As such, under Coquille Indian Tribal Code, Chapter 175-Program Authorization and Evaluation Ordinance, the Tribal Council is required to authorize all programs through... 'An orderly process designed to meet Tribal goals. It is further intended that appropriate ongoing evaluation of all programs be made to ensure that they are meeting the purpose for which they have been authorized.'

The purpose of this document is to first, authorize the establishment of the Healthcare Division as a new entity under Tribal Council jurisdiction and second, to identify the purpose, requirements and other criteria including regular review and evaluation for which this entity may operate.

The Healthcare Division in this Ordinance is considered under the program category of 'Social Development' as described: 'shall include human and social development needs such as health, education and training, family and individual assistance.'

The Healthcare Division will be governed by an advisory Health Board that will operate under a Charter and Bylaws as approved by the Tribal Council.

Purpose of the Healthcare Division

The purpose of the Healthcare Division is as follows:

1. To maintain an organization that will provide healthcare services, which may include primary medical and dental services, laboratory services, pharmacy services, urgent care services, mental health and substance abuse services, alternative and complimentary services and other disease prevention and health promotion services as needed to promote, foster and maintain good health.
2. To coordinate and collaborate service delivery with the pre-existing community resources.
3. To provide non-discriminatory services.

4. To provide services on and off the Reservation with the expectation all tribal members, regardless of their residency, will receive services, as resources are available.

Healthcare Division Provisions

A. Healthcare Division Goals

1. Provide comprehensive health services that are high quality, culturally competent, and sensitive to Tribal historical trauma.
2. Maximize revenue, minimize expenses, reduce the CIT General Fund subsidy and create financial reserves.
3. Maintain high quality and stable workforces in safe and clean work environments.
4. Maintain well trained/educated/competent Board, CEO and all staff.

B. Program Activities and the Target Population

The Healthcare Division provides a variety of healthcare services as earlier described in this document. Services provided are based on a family practice model of health delivery, all outpatient, patient centered and reflective of the needs of tribal members and all others who seek health care.

The target population are members of the Coquille Indian Tribe, their families, other American Indian/Alaska Natives and the general community.

C. Operational Guidelines

The Healthcare Division will operate under well-defined guidelines via policies and procedures, accreditation requirements, regulatory guidelines and others, all of which are approved by the Tribal Council and overseen by the Health Board. The Healthcare CEO is responsible for the day to day management of the Healthcare Division and reports to the Tribal Council per Healthcare Division Bylaws with advisory oversight by the Health Board.

D. Division Evaluation

The Division will be evaluated quarterly based on the following metrics:

1. Financial status-operating within the budget, revenue generation, maintaining cost control, reducing Tribal General Fund contribution and PRC stability
2. Provider productivity-maintaining prescribed productivity expectations for all direct care services
3. Maintaining a well functioning staff with high morale and retention stability in a collaborative teamwork environment
4. Maintains accreditation requirements and a quality improvement program that addresses the health deficiencies and outcomes of health centers patients

5. High patient satisfaction rates that are reflected in annual patient satisfaction surveys and from targeted input as appropriate
6. Continued growth in the user population of the health centers
7. Partnerships and collaboration with local, Federal and State resources to enhance patient care and the reputation of the Coquille Indian Tribe

APPROVAL

By **Resolution XXXXXX**, the CIT Tribal Council approves the Healthcare Division under Coquille Indian Tribal Code, Chapter 175-Program Authorization and Evaluation Ordinance. The Healthcare Division is approved as a separate, single purpose instrumentality of the Coquille Indian Tribe, Tribal Government.

The Healthcare Division as an entity under the Coquille Indian Tribal Code, Chapter 175-Program Authorization and Evaluation Ordinance was duly and legally adopted at a meeting of the CIT Governing Body on the **XXXX** day of _____, 2020, by a vote of _____ FOR and _____ AGAINST.

Ko-Kwel Wellness Center
Construction Budget and Actual Expenses
From 1/1/2020 Through 11/02/2020

		Indirect funded					
	Closing NMTC Budget	NMTC Funds	Grant Funds	CIT Costs	Total Costs Incurred	Remaining Budget	Remaining Budget %
Financing Costs							
NMTC Professional Fees	368,921	368,921	-	-	368,921	0	0%
NMTC Consultant Fee	240,000	240,000	-	-	240,000	-	0%
NMTC Reserves	243,330	-	-	-	-	243,330	100%
Loan fees	70,000	-	-	70,000	70,000	-	0%
Loan Professional Fees	70,778	-	-	70,778	70,778	(0)	0%
Northern Trust Legal Fees	13,715	-	13,715	-	13,715	(0)	0%
QLICI interest during construction	127,717	-	-	-	-	127,717	100%
QALICB Audit & Tax during construction	10,000	-	-	-	-	10,000	100%
Construction period interest	366,465	-	-	131,219	131,219	235,246	64%
Total Financing Costs	1,510,926	608,921	13,715	271,997	894,633	616,293	41%
Site Preparation & Demolition							
Site Survey	13,900	-	13,900	-	13,900	-	0%
Earth Moving	59,195	11,120	48,075	-	59,195	(0)	0%
Existing utility terminations	1,500	-	-	-	-	1,500	100%
Contingency-Site preparation and demolition	7,460	-	-	-	-	7,460	100%
Total Site Preparation & Demolition	82,055	11,120	61,975	-	73,095	8,960	11%
Project Management/Surveys/Reports							
Project Management	276,263	71,211	79,188	-	150,399	125,864	46%
Plan Review, Permitting, MEP, FLS Inspections, Facility Comm	125,000	93,834	-	-	93,834	31,166	
Storm Water/BPM/Reports/Inspections	24,079	7,766	-	-	7,766	16,313	68%
Topo Survey/ALTA Survey	25,500	24,028	11,469	-	35,497	(9,997)	-39%
Phase 1 ESA	3,600	-	3,600	-	3,600	-	0%
Limited Phase 2 ESA	18,000	-	18,000	-	18,000	-	0%
Geotechnical Engineering & Pile Test Program	46,108	-	42,585	-	42,585	3,523	8%
Pile Driving Monitoring	19,715	24,905	-	-	24,905	(5,190)	-26%
Construction Materials Testing	25,000	39,810	-	-	39,810	(14,810)	-59%
Total Project Management/Surveys/Reports	563,265	261,554	154,841	-	416,395	146,870	26%
Utility Infrastructure & Fees							
Building Permit Application Fee	120,000	-	-	-	-	120,000	100%
Electric Utility Connection Fee	21,460	-	-	-	-	21,460	100%
Backup Power Generator/ATS	225,000	-	-	-	-	225,000	100%
Water/Sewer Development Fee	9,554	-	-	-	-	9,554	100%
Equipment Commissioning	15,000	-	-	-	-	15,000	100%
Contingency-Utility infrastructure	13,807	-	-	-	-	13,807	100%
Total Utility Infrastructure & Fees	404,821	-	-	-	-	404,821	100%
Building Construction & Design							
Architectural/Engineering Design Costs	449,893	154,034	214,459	-	368,493	81,400	18%
Design Refinement Costs	41,387	41,387	-	-	41,387	-	0%
General Conditions	603,997	-	-	-	-	603,997	100%
Building Cost (100% GMP)	7,709,209	3,047,976	75,000	-	3,122,976	4,586,233	59%
Contractor's Contingency (1%)	291,182	218,599	-	-	218,599	72,583	25%
Owner's contingency	200,824	117,666	-	-	117,666	83,158	41%
Change Orders	-	-	-	-	-	-	0%
Total Building Construction & Design	9,296,492	3,579,662	289,459	-	3,869,120	5,427,372	58%
Furniture, Fixtures & Equipment							
Office Furniture/Equipment	178,715	-	-	-	-	178,715	100%
IT Equipment/Servers & Specialty AV	165,000	-	-	-	-	165,000	100%
Dental-Operatories (5 units)	483,291	13,740	-	-	13,740	469,551	97%
Dental-Panoramic X-ray Unit	98,308	-	-	-	-	98,308	100%
Dental-Small Tools and Consumables	17,700	-	-	-	-	17,700	100%
Medical/Pharmacy	279,000	-	-	-	-	279,000	100%
Medical Software/Hardware	34,610	-	-	-	-	34,610	100%
Procurement Services - Medical	86,200	39,100	9,010	-	48,110	38,090	44%
Fitness Facility	100,000	-	-	-	-	-	
Site Amenities	25,000	-	-	-	-	25,000	100%
Contingency-FFE	145,882	-	-	-	-	145,882	0%
Total Furniture, Fixtures & Equipment	1,613,706	52,840	9,010	-	61,850	1,451,856	90%
Total Costs	13,471,265	4,514,097	529,000	271,997	5,315,094	8,156,171	61%

Comparison of Budget Percent Complete to SB James Invoice

SBJ Budget	SBJ Incurred	% Complete	Per Invoice
8,805,212	3,459,241	39%	39%

Budget as of 10/21/2020	12,943,565
"Phase II" budget items:	
Office Furniture/Equipment	28,071
IT Equipment/Servers & Specialty AV	82,500
Dental-Operatories (5 units)	190,848
Dental-Panoramic X-ray Unit	78,308
Fitness Facility	100,000
Contingency-FFE	47,973
Total additions	527,700
Budget as of 11/02/2020	13,471,265
<i>check</i>	-

CIT Equity Investment	
Cash contributed at closing	858,000
Less: remaining cash from closing	(184,296) A
Plus: donation of costs incurred	37,000 B
CIT Equity Investment at Closing	710,704
Less: Grant reimbursements	(79,077) C
Plus: Costs not yet charged to grants	4,427
Total CIT Investment at 9/30/2020	636,054
A - Includes payment of CIT share of closing costs and reimbursement of some costs previously incurred	
B - Represents costs incurred by CIT, not charged to grants, that were donated to the QALICB at closing	
C - Represents costs charged to grants that is then withdrawn free and clear from Closing proceeds	

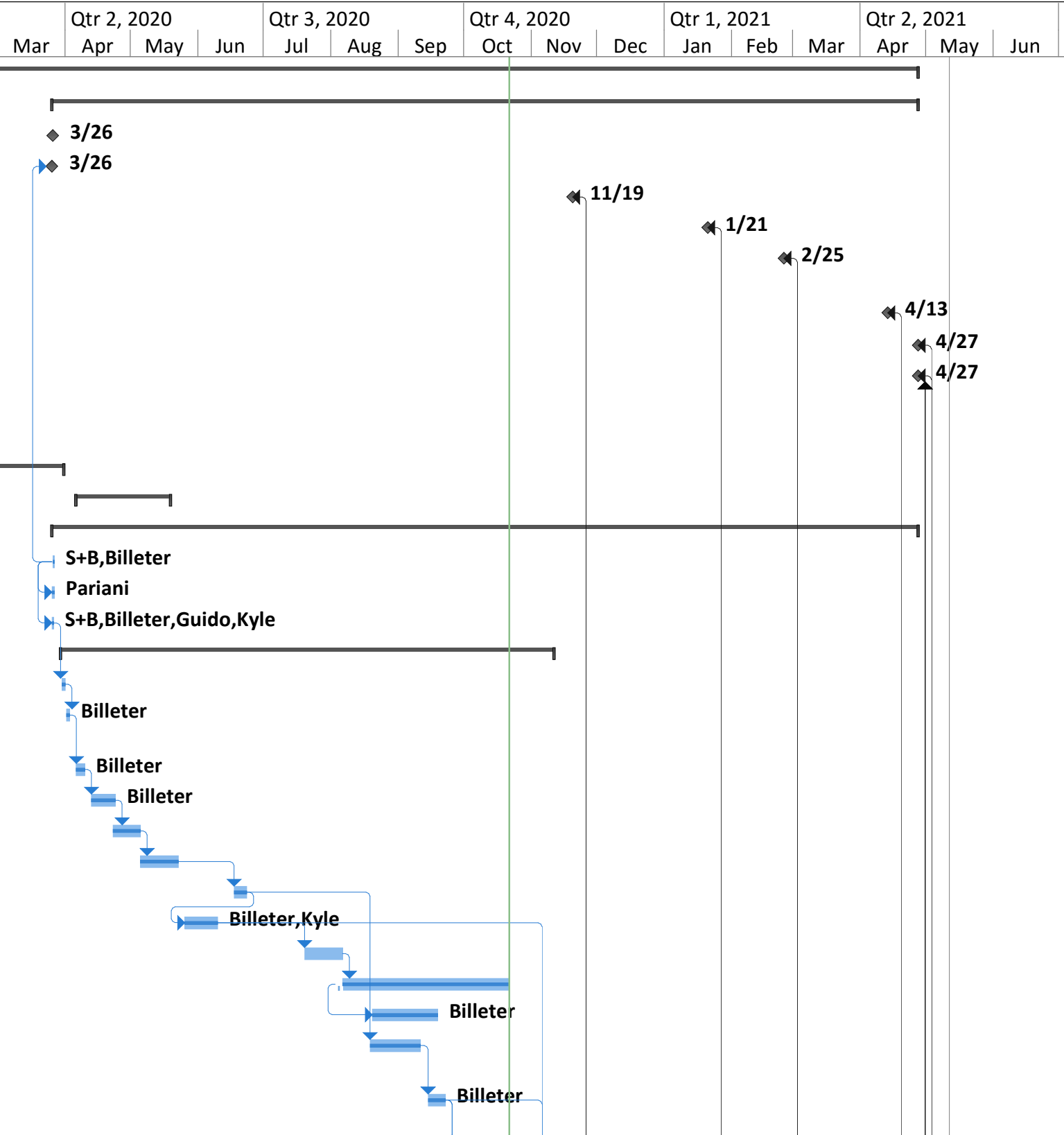


KO-KWEL WELLNESS CENTER PROJECT



SEPTEMBER 2020 CONSTRUCTION SCHEDULE UPDATE

ID	Task Name	Scheduled Duration	Scheduled Start	Scheduled Finish	% Work Complete	Qtr 2, 2020				Qtr 3, 2020			Qtr 4, 2020			Qtr 1, 2021			Qtr 2, 2021		
						Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun
1	KO-KWEL WELLNESS CENTER PROJECT	591.44 days	Fri 1/11/19	Tue 4/27/21	61%																
2	MAJOR MILESTONES - SUMMARY	280.06 days	Thu 3/26/20	Tue 4/27/21	0%																
3	<i>Submit Plans for Plan Check</i>	<i>0 days</i>	<i>Thu 3/26/20</i>	<i>Thu 3/26/20</i>	<i>100%</i>																
4	<i>Mobilization</i>	<i>0 days</i>	<i>Thu 3/26/20</i>	<i>Thu 3/26/20</i>	<i>100%</i>																
5	<i>Dried In Completion</i>	<i>0 days</i>	<i>Thu 11/19/20</i>	<i>Thu 11/19/20</i>	<i>0%</i>																
6	<i>Substantial Completion - Medical / Pharma</i>	<i>0 days</i>	<i>Thu 1/21/21</i>	<i>Thu 1/21/21</i>	<i>0%</i>																
7	<i>Substantial Completion - Dental / Family Community Health</i>	<i>0 days</i>	<i>Thu 2/25/21</i>	<i>Thu 2/25/21</i>	<i>0%</i>																
8	SUBSTANTIAL COMPLETION	0 days	Tue 4/13/21	Tue 4/13/21	0%																
9	<i>Owner Move-In, Closeout & Final Completion</i>	<i>0 days</i>	<i>Tue 4/27/21</i>	<i>Tue 4/27/21</i>	<i>0%</i>																
10	FINAL COMPLETION	0 days	Tue 4/27/21	Tue 4/27/21	0%																
11		<i>1-day?</i>	<i>Mon 1/14/19</i>	<i>Mon 1/14/19</i>	<i>0%</i>																
12	RFQ PHASE	151.19 days	Fri 1/11/19	Mon 8/12/19	100%																
20	PRECONSTRUCTION PHASE	235.63 days	Thu 5/2/19	Tue 3/31/20	100%																
99	PERMITTING PHASE	30.31 days	Mon 4/6/20	Tue 5/19/20	100%																
106	CONSTRUCTION PHASE	280.06 days	Thu 3/26/20	Tue 4/27/21	49%																
107	Mobilization	0.94 days	Thu 3/26/20	Thu 3/26/20	100%																
108	Staking - Project Limits & Sediment Fencing	1.06 days	Thu 3/26/20	Thu 3/26/20	100%																
109	Preconstruction Meeting	1 day	Thu 3/26/20	Thu 3/26/20	100%																
110	SITWORK PHASE 1	160.81 days	Mon 3/30/20	Wed 11/11/20	67%																
111	Rain Delay (CRITICAL PATH)	1.5 days	Mon 3/30/20	Tue 3/31/20	100%																
112	Site Demo & Preparation (Temp Fence, SWPPP, etc)	1.5 days	Wed 4/1/20	Thu 4/2/20	100%																
113	Excavate to Building Pad Subgrade	4.81 days	Mon 4/6/20	Thu 4/9/20	100%																
114	Mass Grading - Cut/Fill Site at Parking Area	9.81 days	Mon 4/13/20	Thu 4/23/20	100%																
115	CE #020 - Subgrade Remediation (STOP)	8 days	Thu 4/23/20	Tue 5/5/20	100%																
116	Rain Delay (NON-CRITICAL PATH)	12.81 days	Tue 5/5/20	Fri 5/22/20	100%																
117	Complete Mass Grading at Parking Areas	3 days	Wed 6/17/20	Tue 6/23/20	100%																
118	Underground Sewer	11.81 days	Tue 5/26/20	Tue 6/9/20	100%																
119	Underground Storm Drain	14 days	Mon 7/20/20	Thu 8/6/20	95%																
120	Underground Site Electrical	53.31 days	Mon 8/3/20	Wed 10/21/20	100%																
121	Irrigation Sleeves at Pavement Areas	19.88 days	Thu 8/20/20	Fri 9/18/20	100%																
122	CE 051 Subgrade Remediation at Roadways	16.06 days	Wed 8/19/20	Thu 9/10/20	100%																
123	Construct Parking Lot (Fine Grading & Base Rock)	6 days	Mon 9/14/20	Tue 9/22/20	100%																



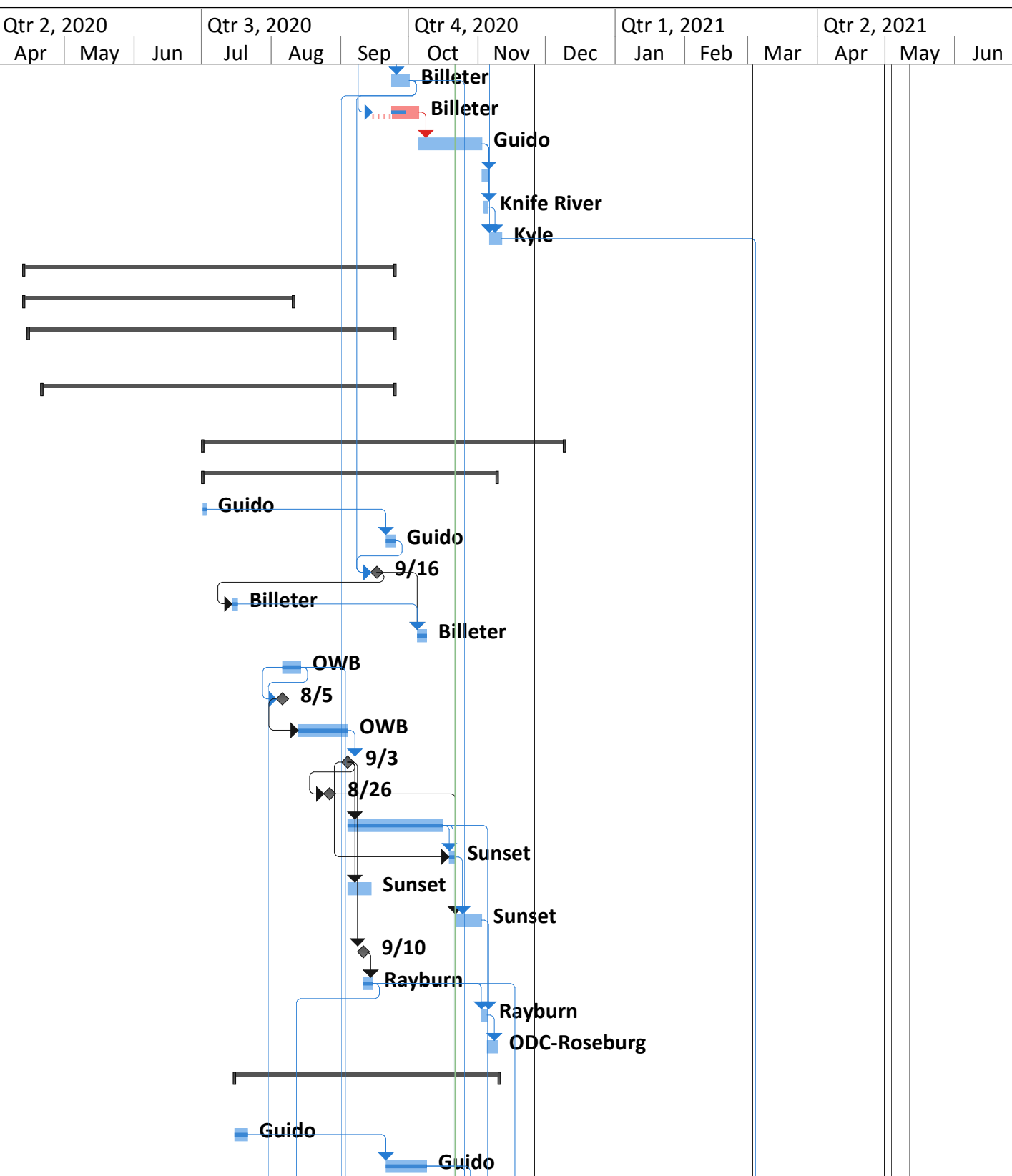


KO-KWEL WELLNESS CENTER PROJECT



SEPTEMBER 2020 CONSTRUCTION SCHEDULE UPDATE

ID	Task Name	Scheduled Duration	Scheduled Start	Scheduled Finish	% Work Complete	Qtr 2, 2020		Qtr 3, 2020		Qtr 4, 2020			Qtr 1, 2021		Qtr 2, 2021					
						Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
124	Construct Bioswales	6 days	Wed 9/23/20	Thu 10/1/20	0%															
125	Prep Baserock at Site Concrete Areas	8 days	Tue 9/15/20	Mon 10/5/20	50%															
126	Rebar, Place & Finish Site Concrete	20 days	Mon 10/5/20	Mon 11/2/20	0%															
127	Site Lighting (Form/Pour Lightpole Bases)	3 days	Mon 11/2/20	Thu 11/5/20	0%															
128	AC Paving (Weather Pending)	2 days	Tue 11/3/20	Thu 11/5/20	0%															
129	Site Lighting (Set Light Poles)	3 days	Thu 11/5/20	Wed 11/11/20	0%															
130	BUILDING SHELL	117.81 days	Mon 4/13/20	Thu 9/24/20	100%															
131	ZONE 1 - MEDICAL & PHARMACY	85.31 days	Mon 4/13/20	Mon 8/10/20	100%															
160	ZONE 2 - DENTAL & FAMILY COMMUNITY HEALTH	115.31 days	Wed 4/15/20	Thu 9/24/20	100%															
189	ZONE 3 - ADMIN & COMMUNITY GATHERING	111.56 days	Tue 4/21/20	Thu 9/24/20	100%															
215	ROOF STRUCTURE / BUILDING ENVELOPE	112.25 days	Wed 7/1/20	Wed 12/9/20	54%															
216	ZONE 1 - MEDICAL & PHARMACY	91 days	Wed 7/1/20	Mon 11/9/20	72%															
217	Strip Forms at Perimeter Grade Beams	1.5 days	Wed 7/1/20	Thu 7/2/20	100%															
218	Slab Perimeter Insulation	4.81 days	Mon 9/21/20	Thu 9/24/20	100%															
219	Storm Drain/Roof Drain Tie-In	0 days	Mon 9/14/20	Wed 9/16/20	100%															
220	Sewer Tie-In	3 days	Tue 7/14/20	Thu 7/16/20	100%															
221	Perimeter Drains & Backfill	4.81 days	Mon 10/5/20	Thu 10/8/20	100%															
222	High Wall Framing @ Center Walkway	6.06 days	Thu 8/6/20	Thu 8/13/20	100%															
223	Set Roof Joists & Perimeter Fascia	0 days	Thu 7/23/20	Wed 8/5/20	100%															
224	Roof Sheathing	16.06 days	Thu 8/13/20	Thu 9/3/20	100%															
225	Inspect Roof Sheathing	0 days	Thu 9/3/20	Thu 9/3/20	100%															
226	Set HM Door Frames	0 days	Tue 8/25/20	Wed 8/26/20	100%															
227	COVID Window Procurement Delay	28.75 days	Thu 9/3/20	Thu 10/15/20	100%															
228	Set Exterior Windows	3.56 days	Mon 10/19/20	Wed 10/21/20	100%															
229	Siding @ High Wall Areas	4 days	Thu 9/3/20	Mon 9/14/20	0%															
230	Exterior Siding	7 days	Wed 10/21/20	Mon 11/2/20	0%															
231	Rigid Roof Insulation	0 days	Tue 9/8/20	Thu 9/10/20	100%															
232	TPO Roofing	1.25 days	Thu 9/10/20	Mon 9/14/20	100%															
233	Parapet Cap Flashing	3 days	Mon 11/2/20	Wed 11/4/20	0%															
234	Gutters	2 days	Wed 11/4/20	Mon 11/9/20	0%															
235	ZONE 2 - DENTAL & FAMILY COMMUNITY HEALTH	81.75 days	Wed 7/15/20	Tue 11/10/20	68%															
236	Strip Forms at Perimeter Grade Beams	3 days	Wed 7/15/20	Tue 7/21/20	100%															
237	Slab Perimeter Insulation	14.81 days	Mon 9/21/20	Thu 10/8/20	100%															





KO-KWEL WELLNESS CENTER PROJECT



SEPTEMBER 2020 CONSTRUCTION SCHEDULE UPDATE

ID	Task Name	Scheduled Duration	Scheduled Start	Scheduled Finish	% Work Complete	Qtr 2, 2020						Qtr 3, 2020			Qtr 4, 2020				Qtr 1, 2021		Qtr 2, 2021		
						Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun		
306	Sprinkler Head Installation Phase I	5 days	Wed 12/9/20	Wed 12/16/20	0%													Firestop					
307	Above Ceiling Inspections Phase I	1 day	Wed 12/16/20	Thu 12/17/20	0%													CSI					
308	Drop Ceiling Tiles Phase I	2 days	Thu 12/17/20	Mon 12/21/20	0%													Fashion					
309	Install Flooring Phase I	4 days	Mon 12/21/20	Thu 12/24/20	0%													S+B					
310	Install Timely Frames & Doors Phase I	6 days	Thu 12/24/20	Mon 1/4/21	0%													New Horizons					
311	Install Casework Phase I	10 days	Thu 12/24/20	Thu 1/7/21	0%													New Horizons					
312	Install Countertops Phase I	3 days	Thu 1/7/21	Wed 1/13/21	0%													S+B					
313	Exam Room Accessories Phase 1	4 days	Thu 1/7/21	Wed 1/13/21	0%													Umpqua					
314	Test & Air Balance Phase 1	3 days	Wed 1/13/21	Mon 1/18/21	0%													NWCP					
315	Phase 1 Final Inspections	3 days	Mon 1/18/21	Thu 1/21/21	0%													1/21					
316	TENTATIVE Phase 1 Substantial Completion / Temporary Certificate of Occupancy (TCO)	0 days	Thu 1/21/21	Thu 1/21/21	0%																		
317	MEDICAL & PHARMACY OWNER EQUIPMENT MOVE-IN	27 days	Thu 1/21/21	Tue 3/2/21	0%																		
318	Medical Equipment & Supplies	12 days	Thu 1/21/21	Tue 2/9/21	0%																		
319	Pharmacy Equipment & Supplies	8 days	Thu 1/21/21	Wed 2/3/21	0%																		
320	Furniture	8 days	Wed 2/3/21	Mon 2/15/21	0%																		
321	Artwork	4 days	Tue 2/9/21	Mon 2/15/21	0%																		
322	IT Networking / Programming	8 days	Mon 2/15/21	Thu 2/25/21	0%																		
323	Staff Training	15 days	Tue 2/9/21	Tue 3/2/21	0%																		
324	SITWORK PHASE 2	38 days	Thu 3/4/21	Tue 4/27/21	0%																		
325	Irrigation	12 days	Thu 3/4/21	Mon 3/22/21	0%																		
326	Planting	16 days	Mon 3/22/21	Tue 4/13/21	0%																		
327	Pressure Wash AC Paving	2 days	Tue 4/13/21	Thu 4/15/21	0%																		
328	Striping & Signage	3 days	Mon 4/19/21	Wed 4/21/21	0%																		
329	Sitework Phase 2 Final Inspections	4 days	Wed 4/21/21	Tue 4/27/21	0%																		
330	TI ZONE 2 - DENTAL/FAMILY COMMUNITY HEALTH	117.5 days	Mon 9/14/20	Thu 2/25/21	13%																		
331	Interior Wall Framing - top track only	2.31 days	Wed 9/16/20	Thu 9/17/20	100%													CSI					
332	HVAC Rough In Phase 2	7 days	Wed 10/7/20	Tue 10/20/20	50%													Umpqua					
333	Interior Partition Framing Phase 2	0 days	Mon 9/21/20	Thu 9/24/20	100%													9/24					
334	Plumbing Rough In Phase 2	10 days	Mon 9/14/20	Tue 10/20/20	80%													Van Row					
335	Sprinkler Rough In Phase 2	10 days	Mon 10/5/20	Thu 10/22/20	20%													Firestop					
336	Electrical Rough In Phase 2	8 days	Wed 10/14/20	Mon 10/26/20	50%													Kyle					

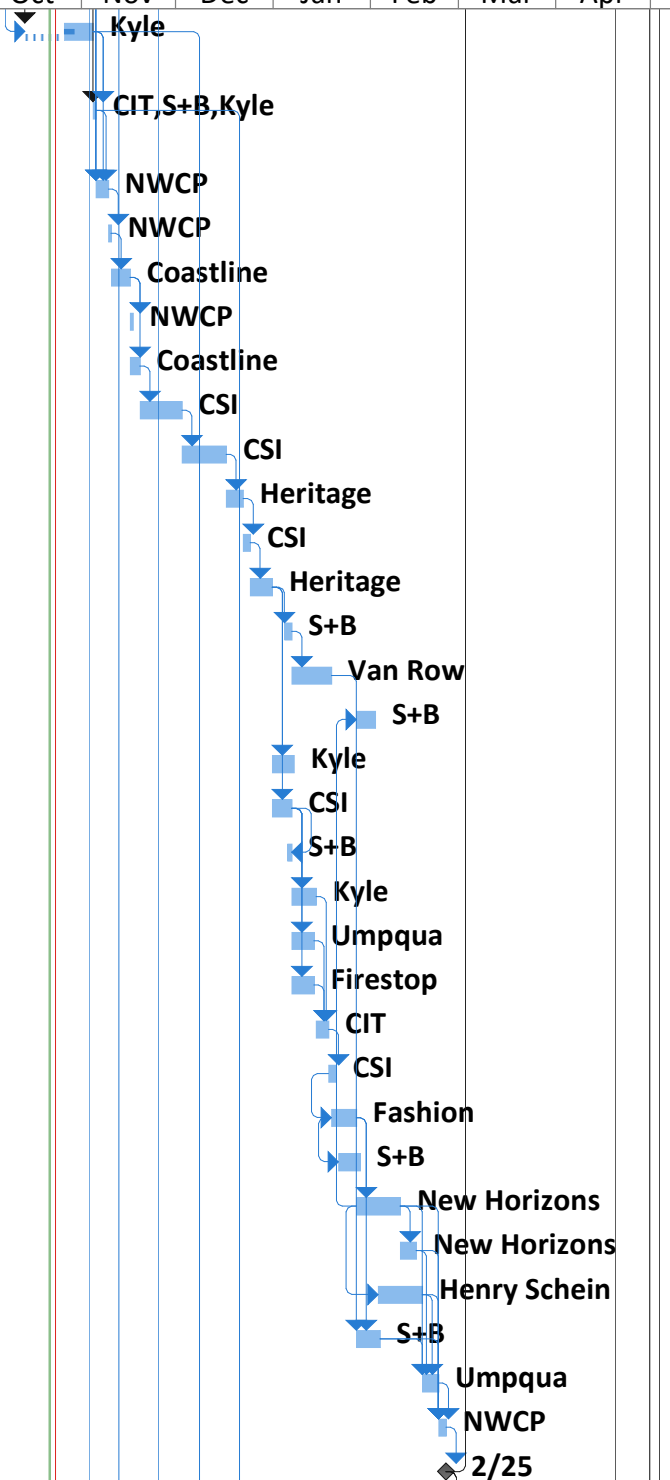


KO-KWEL WELLNESS CENTER PROJECT



SEPTEMBER 2020 CONSTRUCTION SCHEDULE UPDATE

ID	Task Name	Scheduled Duration	Scheduled Start	Scheduled Finish	% Work Complete	Qtr 2, 2020						Qtr 3, 2020			Qtr 4, 2020			Qtr 1, 2021		Qtr 2, 2021			
						Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun		
337	Phone/Data/Low Volta Rough In - Box Install Phase 2	8 days	Wed 10/14/20	Wed 11/4/20	50%																		
338	Electrical Box Location Walk-Thru Phase 2	1 day	Wed 11/4/20	Thu 11/5/20	0%																		
339	MEP Inspection Phase 2	1 day	Thu 11/5/20	Mon 11/9/20	0%																		
340	Framing Inspection Phase 2	1 day	Mon 11/9/20	Tue 11/10/20	0%																		
341	Thermal Insulation Phase 2	4 days	Tue 11/10/20	Mon 11/16/20	0%																		
342	Thermal Inspection Phase 2	1 day	Mon 11/16/20	Tue 11/17/20	0%																		
343	Acoustical Insulation Phase 2	4 days	Mon 11/16/20	Thu 11/19/20	0%																		
344	Drywall Hang Phase 2	8 days	Thu 11/19/20	Thu 12/3/20	0%																		
345	Drywall Finish Phase 2	10 days	Thu 12/3/20	Thu 12/17/20	0%																		
346	Pre Prime Phase 2	3 days	Thu 12/17/20	Tue 12/22/20	0%																		
347	Touch up Drywall Phase 2	3 days	Tue 12/22/20	Thu 12/24/20	0%																		
348	Painting Phase 2	5 days	Thu 12/24/20	Thu 12/31/20	0%																		
349	Install Acrovyn Wall Protection Phase 2	3 days	Mon 1/4/21	Thu 1/7/21	0%																		
350	Plumbing Trim Phase 2	8 days	Thu 1/7/21	Tue 1/19/21	0%																		
351	Restroom Accessories Phase 2	4 days	Wed 1/27/21	Tue 2/2/21	0%																		
352	Electrical & Low Voltage Trim Phase 2	5 days	Thu 12/31/20	Thu 1/7/21	0%																		
353	Ceiling Grid Phase 2	4 days	Thu 12/31/20	Thu 1/7/21	0%																		
354	Overhead Unistrut Supports Phase 2	2 days	Tue 1/5/21	Thu 1/7/21	0%																		
355	Install Lights Phase 2	6 days	Thu 1/7/21	Thu 1/14/21	0%																		
356	HVAC Grilles Phase 2	5 days	Thu 1/7/21	Thu 1/14/21	0%																		
357	Sprinkler Head Installation Phase 2	5 days	Thu 1/7/21	Thu 1/14/21	0%																		
358	Above Ceiling Inspections Phase 2	1 day	Thu 1/14/21	Mon 1/18/21	0%																		
359	Drop Ceiling Tiles Phase 2	3 days	Mon 1/18/21	Thu 1/21/21	0%																		
360	Install Flooring Phase 2	6 days	Tue 1/19/21	Wed 1/27/21	0%																		
361	Install Timely Frames Phase 2	5 days	Thu 1/21/21	Thu 1/28/21	0%																		
362	Install Casework Phase 2	10 days	Wed 1/27/21	Wed 2/10/21	0%																		
363	Install Countertops Phase 2	3 days	Wed 2/10/21	Mon 2/15/21	0%																		
364	Dental Casework & Equipment	10 days	Wed 2/3/21	Wed 2/17/21	0%																		
365	Install Doors and Hardware Phase 2	6 days	Wed 1/27/21	Thu 2/4/21	0%																		
366	Test & Air Balance Phase 2	3 days	Wed 2/17/21	Mon 2/22/21	0%																		
367	Phase 2 Final Inspections	3 days	Mon 2/22/21	Thu 2/25/21	0%																		
368	TENTATIVE Phase 2 Substantial Completion / Temporary Certificate of Occupancy (TCO)	0 days	Thu 2/25/21	Thu 2/25/21	0%																		



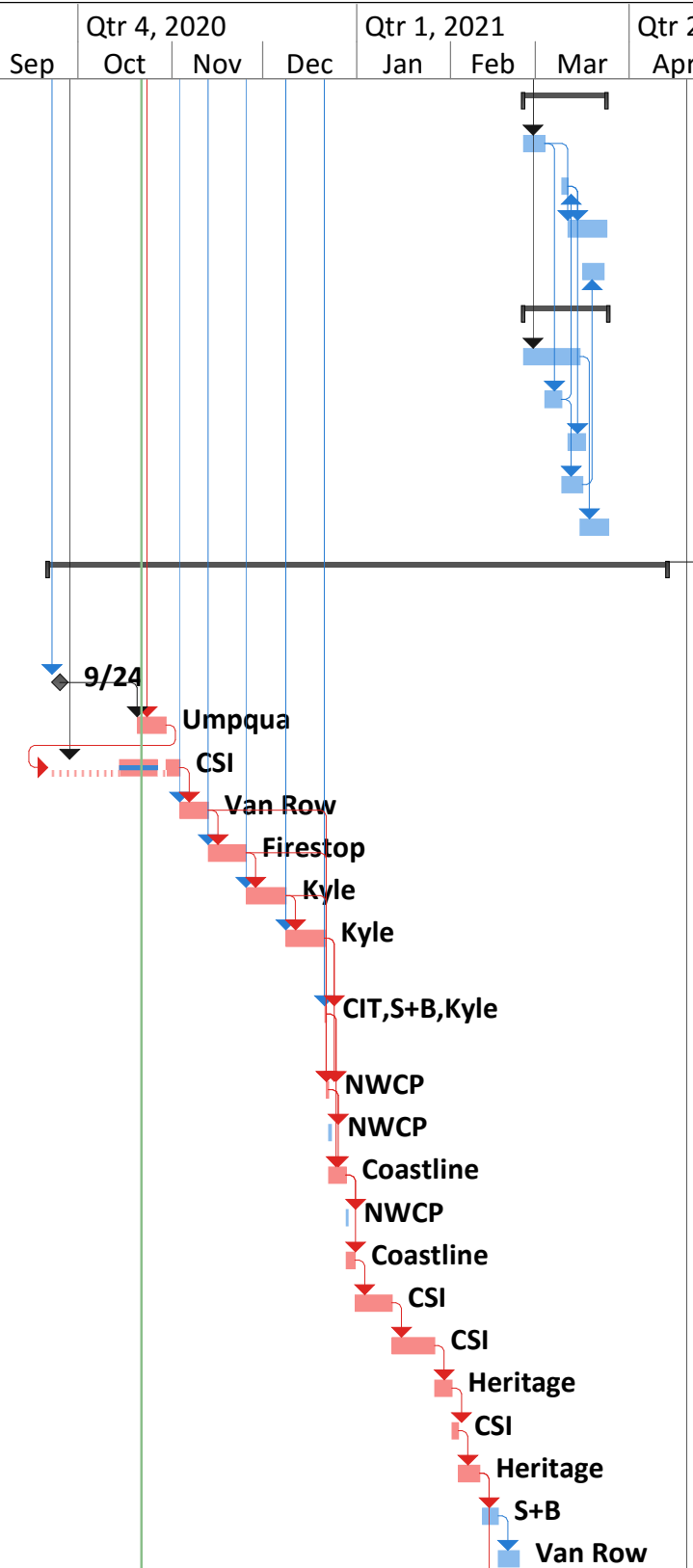


KO-KWEL WELLNESS CENTER PROJECT



SEPTEMBER 2020 CONSTRUCTION SCHEDULE UPDATE

ID	Task Name	Scheduled Duration	Scheduled Start	Scheduled Finish	% Work Complete	Qtr 2, 2020		Qtr 3, 2020			Qtr 4, 2020			Qtr 1, 2021		Qtr 2, 2021				
						Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May
369	FAMILY & COMMUNITY HEALTH Move-In	19 days	Thu 2/25/21	Wed 3/24/21	0%															
370	Furniture	5 days	Thu 2/25/21	Thu 3/4/21	0%															
371	Artwork	3 days	Tue 3/9/21	Thu 3/11/21	0%															
372	Staff Training	8 days	Thu 3/11/21	Wed 3/24/21	0%															
373	IT Networking / Programming	5 days	Tue 3/16/21	Tue 3/23/21	0%															
374	DENTAL Move-In	20 days	Thu 2/25/21	Thu 3/25/21	0%															
375	Dental Supplies	12 days	Thu 2/25/21	Mon 3/15/21	0%															
376	Furniture	3 days	Thu 3/4/21	Tue 3/9/21	0%															
377	Artwork	3 days	Thu 3/11/21	Wed 3/17/21	0%															
378	IT Networking / Programming	5 days	Tue 3/9/21	Tue 3/16/21	0%															
379	Staff Training	8 days	Mon 3/15/21	Thu 3/25/21	0%															
380	TI PHASE 3 - ADMINISTRATION/COMMUNITY GATHERING/CORRIDORS	145.81 days	Mon 9/21/20	Tue 4/13/21	5%															
381	Interior Wall Framing - top track only	0 days	Mon 9/21/20	Thu 9/24/20	100%															
382	HVAC Rough In Phase 3	8 days	Tue 10/20/20	Thu 10/29/20	0%															
383	Interior Partition Framing Phase 3	10 days	Mon 9/21/20	Tue 11/3/20	80%															
384	Plumbing Rough In Phase 3	8 days	Tue 11/3/20	Thu 11/12/20	0%															
385	Sprinkler Rough In Phase 3	8 days	Thu 11/12/20	Wed 11/25/20	0%															
386	Electrical Rough In Phase 3	8 days	Wed 11/25/20	Tue 12/8/20	0%															
387	Phone/Data/Low Volta Rough In - Box Install Phase 3	8 days	Tue 12/8/20	Mon 12/21/20	0%															
388	Electrical Box Location Walk-Thru Phase 3	1 day	Mon 12/21/20	Mon 12/21/20	0%															
389	MEP Inspection Phase 3	1 day	Mon 12/21/20	Tue 12/22/20	0%															
390	Framing Inspection Phase 3	1 day	Tue 12/22/20	Wed 12/23/20	0%															
391	Thermal Insulation Phase 3	3 days	Tue 12/22/20	Mon 12/28/20	0%															
392	Thermal Inspection Phase 3	1 day	Mon 12/28/20	Mon 12/28/20	0%															
393	Acoustical Insulation Phase 3	4 days	Mon 12/28/20	Thu 12/31/20	0%															
394	Drywall Hang Phase 3	8 days	Thu 12/31/20	Tue 1/12/21	0%															
395	Drywall Finish Phase 3	10 days	Tue 1/12/21	Tue 1/26/21	0%															
396	Pre Prime Phase 3	3 days	Tue 1/26/21	Mon 2/1/21	0%															
397	Touch up Drywall Phase 3	3 days	Mon 2/1/21	Wed 2/3/21	0%															
398	Painting Phase 3	5 days	Wed 2/3/21	Wed 2/10/21	0%															
399	Install Acrovyn Wall Protection Phase 3	3 days	Thu 2/11/21	Tue 2/16/21	0%															
400	Plumbing Trim Phase 3	5 days	Tue 2/16/21	Tue 2/23/21	0%															





KO-KWEL WELLNESS CENTER PROJECT



SEPTEMBER 2020 CONSTRUCTION SCHEDULE UPDATE

ID	Task Name	Scheduled Duration	Scheduled Start	Scheduled Finish	% Work Complete	Qtr 2, 2020				Qtr 3, 2020			Qtr 4, 2020			Qtr 1, 2021		Qtr 2, 2021				
						Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	
401	Electrical & Low Voltage Trim Phase 3	5 days	Wed 2/10/21	Wed 2/17/21	0%													Kyle				
402	Ceiling Grid Phase 3	4 days	Wed 2/17/21	Tue 2/23/21	0%													CSI				
403	Overhead Unistrut Supports Phase 3	2 days	Wed 2/17/21	Mon 2/22/21	0%													S+B				
404	Install Lights Phase 3	6 days	Tue 2/23/21	Wed 3/3/21	0%													Kyle				
405	HVAC Grilles Phase 3	5 days	Tue 2/23/21	Tue 3/2/21	0%													Umpqua				
406	Sprinkler Head Installation Phase 3	5 days	Tue 2/23/21	Tue 3/2/21	0%													Firestop				
407	Above Ceiling Inspections Phase 3	1 day	Wed 3/3/21	Thu 3/4/21	0%													NWCP				
408	Drop Ceiling Tiles Phase 3	3 days	Thu 3/4/21	Tue 3/9/21	0%													CSI				
409	Install Flooring Phase 3	10 days	Tue 3/9/21	Tue 3/23/21	0%													Fashion				
410	Install Timely Frames Phase 3	5 days	Mon 3/15/21	Mon 3/22/21	0%													S+B				
411	Install Casework Phase 3	10 days	Tue 3/16/21	Tue 3/30/21	0%													New Horizons				
412	Install Countertops Phase 3	3 days	Tue 3/30/21	Mon 4/5/21	0%													New Horizons				
413	Install Doors and Hardware Phase 3	5 days	Tue 3/23/21	Tue 3/30/21	0%													S+B				
414	Bathroom Accessories Phase 3	4 days	Mon 3/29/21	Thu 4/1/21	0%													S+B				
415	Test & Air Balance Phase 3	3 days	Mon 4/5/21	Wed 4/7/21	0%													Umpqua				
416	Phase 3 Final Inspections	4 days	Wed 4/7/21	Tue 4/13/21	0%													NWCP				
417	TENTATIVE TI Zone 3 Substantial Completion / Temporary Certificate of Occupancy	0 days	Tue 4/13/21	Tue 4/13/21	0%													4/13				
418	SUBSTANTIAL COMPLETION	0 days	Tue 4/13/21	Tue 4/13/21	0%													4/13				
419	SCHEDULE CONTINGENCIES	8 days	Tue 4/13/21	Mon 4/26/21	0%																	
420	Punch List Corrections	8 days	Tue 4/13/21	Mon 4/26/21	0%																	
421	Weather Contingency	0 days	Mon 4/26/21	Mon 4/26/21	0%																	
422	FINAL COMPLETION	0 days	Tue 4/27/21	Tue 4/27/21	0%																	
423	ADMINISTRATION Move-In	20 days	Tue 4/13/21	Tue 5/11/21	0%																	
424	Furniture	10 days	Tue 4/13/21	Tue 4/27/21	0%																	
425	Artwork	6 days	Tue 4/27/21	Wed 5/5/21	0%																	
426	IT Networking / Programming	5 days	Tue 4/27/21	Tue 5/4/21	0%																	
427	Staff Training	10 days	Tue 4/27/21	Tue 5/11/21	0%																	

