

Olympic Community of Health
Agenda (Action items are in red)

Board of Directors
October 13, 1:00-3:00 pm | 7 Cedars Hotel & Casino

Key Objective: To collaboratively advance the work of Olympic Community of Health

#	Time	Topic	Purpose	Lead	Attachment
1	1:00	Welcome & introductions	Welcome	Susan Buell	
2	1:08	Consent agenda	Action	Susan Buell	1. DRAFT minutes September 8 Board meeting 2. October Executive Director report 3. SBAR Investment Policy 4. Investment Policy
3	1:12	Public Comments (2-minute max)	Information	Susan Buell	
4	1:15	IRS 990 Form – 2024	Action	Brent Simcosky	5. SBAR 6. 2024 IRS Form 990
5	1:25	OCH Employee Handbook	Action	Celeste Schoenthaler	7. SBAR 8. Employee Handbook with revisions
6	1:35	Retreat follow-up	Discussion	Celeste Schoenthaler	9. Board retreat summary (slides)
7	1:55	2025 Partner Network Analysis Report	Discussion	Miranda Burger, Erin Hawkins, Phil Ramunno	10. Report (slides)
8	2:15	Connect to Data tool update & feedback	Discussion	Phil Ramunno	
9	2:35	Hub models across the country	Discussion	Susan Buell	
10	2:55	Good of the Order	Information	Susan Buell	
12	3:00	Upcoming meetings & adjourn: • November 10, 1-3pm, Zoom only (no lunch) • No December meeting • January 12, 1-3 at 7 Cedars with optional networking lunch	Information	Susan Buell & Celeste Schoenthaler	

Board of Director's Meeting Minutes

Date: 09/08/2025	Time: 1:00 PM	Location: Clearwater Casino, Suquamish
Chair In-Person: Heidi Anderson, <i>Forks Community Hospital</i> Voting Members Attended In-Person: Bobby Stone, <i>Olympic Medical Center</i>; Brent Simcosky, <i>Jamestown S'Klallam Tribe</i>; G'Neil Ashley, <i>Reflections Counseling</i>; Jody Moss; Kate Mundell, <i>Coordinated Care</i>; Michael Maxwell, <i>North Olympic Healthcare Network</i>; Roy Walker; Stacey Smith, <i>Kitsap County Human Services</i>; Stephen Kutz, <i>Suquamish Tribe</i>; Stormy Howell, <i>Lower Elwha Klallam Tribe</i>; Susan Buell, <i>YMCA of Pierce and Kitsap Counties</i>; Tanya MacNeil, <i>West End Outreach Services</i> Voting Members Attended Virtually: Rosalie Apalisok, <i>St. Michael Medical Center</i>; Non-Voting Members Attended In-Person: Brian Burwell, <i>Suquamish Wellness Center</i>; Jenny Oppelt, <i>Clallam County Health and Human Services</i>; Non-Voting Members Attended Virtually: Jake Davidson, <i>Jefferson Healthcare</i>; Lori Kerr, <i>St. Michael Medical Center</i>; Guests and Consultants Attended In-Person: Dan Vizzini Guests and Consultants Attended Virtually: Kate Jasanowicz; Laurel Lee, <i>Molina Healthcare</i>; Ileea Clauson, <i>Salish Behavioral Health Administrative Services Organization</i>; Symetria Gongyin, <i>Coordinated Care</i>; Tom Dingus OCH Staff: Celeste Schoenthaler, Miranda Burger, Jen Kingfisher, Chris Hamilton		

Minutes

Facilitator	Topic	Discussion/Outcome	Action/Results
Heidi Anderson	Welcome & Introductions		
Heidi Anderson	Consent agenda	-DRAFT minutes June 9 Board Meeting -Consent Agenda - June Executive Director report Celeste summarized the hot topics since last board meeting. The Clallam and Kitsap County Jails are connecting with OCH Staff to coordinate warm hand-offs through Olympic Connect as individuals are released from jail. OCH and 5 other ACHs are working with Uncommon Solutions to plan hub sustainability beyond the waiver. They're looking at community care hub models across the country. Recompete coalition has almost finalized an MOU partners will be asked to sign. MCOs and 9 ACHs have finalized a MOU required by HCA. Engagement is outlined for the next few months including trainings, virtual and in-person presentations, and the regional convening. There was a question about if we are planning on getting	Motion to approve the consent agenda APPROVED unanimously

		clients from the state prison. Answer is that the DOC has a 3 phase system with the HCA and includes facilities with a certain threshold; Clallam and Jefferson county jails are the “starting line.”	
Heidi Anderson	Public Comments (2-minute max)	None	
Brent Simcosky, Tom Dingus	2024 Financial Audit	DZA went through 2 reports, the independent auditor’s report and the board communication letter. The independent auditors’ report is an unmodified opinion of the financial position and operations of the organization. DZA walked us through the report, highlighting contracts receivable, contract revenue, revenue recognition, and case management and infrastructure funds. It was mentioned that there were leftover funds from the first MTP project along with funds received in 2024 that were from previous years. The largest distribution of contract funds was to partner organizations. There was discussion about the rate at which MTP 2.0 funds come in; infrastructure twice a year and case management month by month. Statements made by the auditor represents what we know today and recognizes	2024 Financial Audit accepted as presented.

		some risk in revenue recognition. The financial briefing continues mentioning the amount of operational money and that we have good reserves as an organization. Functional expenses mostly go to the mission vs management – 90% to the mission and 10% to operational costs. The board communication letter talks about roles and responsibilities of the auditor along with information about the audit. No material weaknesses or significant deficiencies were reported and it was commented that OCH has good financial policies and internal controls and that the process is very smooth. DZA recommends proactive communication about audits and future audits. There was a question about audits at other ACHs and insights about how OCH compares. Answer was that other ACHs are very similar and are doing similar kind of work. The audit process happens throughout the year with ED and financial officer and that moving forward we will be looking at the federal single audit.	
Brent Simcosky	Q2 2025 Financials	The 2025 budget was created with a lot of guesswork about the cost of running a community care hub, so we are learning a lot to inform the 2026 budget. Each budget line	Q2 2025 Financials accepted as presented.

		item is provided with a reason for being over/under budget. We will be making changes to the way we manage the programs and with 12 care coordination partners for 2026, we are underspending and coordination partners are underspending There was a question about if we know if other ACHs are having similar problems. Answer was that other ACHs started ahead of us, but we don't look at other ACHs' financials. Implementation numbers vary and OCH has seen some of the fastest growth. There was also a discussion about funds and if we are under a "use it or lose it" policy, and there were concerns whether the state or fed can take away dollars. It was mentioned that spending will be ramping up and that referrals are growing every day. Current funding sources must be spent by the completion of the award.	
Celeste Schoenthaler	2026 Governance schedule and approach & representatives for 2026 committees	The executive committee has been working on a governance plan and approached the board for discussion and action. Summary was given of the current governance model 9 board meetings per year with an executive committee and a finance committee.	The OCH Board of Directors approves the 2026 governance plan and approach and the membership for the proposed new committees.

		The proposal is to modify the board meeting schedule and add committees while strengthening the work of the organization and move things along efficiently and effectively. Proposal: Move from 9 board meetings to 6 board meetings. These will continue to be at 7 Cedars with a Networking Lunch from 12:30 – 1:00. Keep the Executive Committee. Keep Finance Committee. Add a Strategic Planning Committee, short-term from January – September, open to board members and alternates across counties. Add a Governance Committee, small group of 3-4 people who can talk about by-laws, seats, and other internal board related policies and details. They would meet 4 times in 2026. Add an Advocacy Committee, about telling our story, demonstrating value of our work, soliciting legislative aids or elected officials, and generally getting the word out for the work we’re doing. NOHN - Discussion about the vision task force that occurred in the past and how important it was, along with a statement about how the board is about the OCH mission and not	
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		necessarily about individual agencies. There was a short discussion about the terms of the committees, and that the strategic planning committee would sunset and then come back for the next cycle, the governance committee would sunset, and the advocacy committee would not sunset. The committees would produce recommendations and that those could be adjusted along the way.	
Heidi Anderson	Board Member Elections		The OCH Board of Directors approves of these nominations for a new two-year term ending September 2027.
Celeste Schoenthaler	HCA Rural Health Application	HR1 provides an opportunity for rural health transformation. A coalition of ACHs have submitted a letter advocating for funding of hospitals and tribes and advocacy to support them. Additional input is due by the 26th of September. There was an open discussion about taking advantage of the opportunity, keeping an eye on it, sending an additional letter, among other topics related to HR1. There was agreement about funds going to community hospitals as they enable a lot of good work and that spreading funding to many different entities tends to diminish the good the funds can do. It was mentioned that states get to decide what rural means and that Washington tends to be system-heavy.	Once the Community Health Center association sends their letter to HCA, Mike Maxwell will forward to Celeste and OCH will submit a separate letter aligned with that.

Celeste Schoenthaler	Olympic Connect – Launch of Dashboard Reports	We've been working with a data agency to collect metrics about Olympic Connect from 10/01/2024 to 7/31/2025. Data continues to be collected. Care coordination partners will be getting more granular reports through the data dashboard to see where they stand. Additional data coming: Client satisfaction, client needs met, PAEG data Additional metrics soon: Client satisfaction, client needs met, PAEG data across metrics Enrollment metrics are defined in a slide, and then shared. The data is from 692 total referred clients and 401 total enrolled clients. The majority of clients are getting connected to services within 7 days of referral, and the rest within 30 days. We then move onto month-to-month data, with a goal of reaching 1000 enrollments before the end of the year. The next information is about distribution of county metrics: what percentage of each county's goals have been met County enrollment graphic Percentage shows what percent of each county's goals is met. Next is demographic information. We're working on	
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		ways to get better and more complete data. The next few slides talked about incoming referral data, goals, and breakdown by county. Then we talked about highest needs, along with a short discussion on how granular we were tracking and meeting health needs. It was also discussed to use the data to do advocacy work, as the data helps advocacy. The last 2 sections of the presentation were about closed-loop referrals and caseloads. There was a discussion about bidirectional communication, how OCH and community-based workers communicate, and targets for each partner.	
Celste Schoenthaler	Gratitude	Mike Maxwell of NOHN is at his last board meeting as he's retiring. Congratulations and thank you for your service to OCH! Bobby Stone of Olympic Medical Center has been on the executive committee for the last 5 years and is now stepping down to be an alternate voting member. Thank you for your service to OCH!	
Heidi Anderson	Good of the order – Board member and public comments		
Heidi Anderson & Celeste Schoenthaler	Upcoming meetings and adjourn:		

	October 13, 1-3pm 7 Cedars (optional lunch at 12:30) November 10, 1-3pm, Zoom only (no lunch)		
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Monthly Executive Director report to the OCH Board of Directors – October 2025

- **Hot Topics:**
 - Olympic Connect data dashboards are now available. Regional data was first shared with the Board at the September retreat and will be shared with the Olympic Connect advisory group at their next meeting 10/29. Individual care coordination partner data was shared with partners on 10/8 and OCH hosted a training build data literacy and shared understanding among the 12 contracted care coordination partners. Updated regional dashboards will be shared with the OCH Board of Directors in November.
 - OCH hosted an annual regional convening on September 30 at Kiana Lodge. About 100 people participated. The theme was hope-centered collaboration. There was a guest keynote speaker from Olympic College and several regional partners presented on how their work fosters hope.
 - Comagine was selected as the lead entity by the Health Care Authority for the statewide CIE work. The ACHs await next steps as the work moves forward.
- **Subcommittee reports/updates**
 - **Executive Committee** – The committee met to prepare for the October meeting, to review the employee handbook revisions, and to hear updates from the ED.
 - **Finance Committee** – The committee met to review the draft 990, to review the investment policy, and to hear updates from the ED.
- **Upcoming meetings and events**
 - 10/14 Olympic Connect Roadshow: Forks Community Hospital
 - 10/15 Community Conversations Series: Building Trust – Red Cedar Hall
 - 10/29 Olympic Connect Advisory Group – Port Gamble Vista Pavilion
 - 11/6 Trauma Informed Care Training – Port Gamble Vista Pavilion
- **Administrative & staffing updates**
 - Due to a new payroll software system used by OCHs accountant, there has been a delay in employee retirement contributions. We expect the error to be fixed in the coming days.
 - Staff are preparing for 2026 partner contracting.

Partner Engagement since last Board meeting:

- **Clallam Partners**
 - 9/3, Clallam County Jail Re-Entry Program, Port Angeles
 - 9/17, Serenity House, Port Angeles
 - 9/23, Port Angeles Fire Department, virtual
 - 9/25, Peninsula Behavioral Health, virtual
 - 9/29, Clallam Transit, virtual
 - 10/6, Clallam County Therapeutic Courts, Port Angeles
- **Jefferson Partners**
 - 9/11, Quilcene Fire District, Quilcene
 - 9/11, EDC Team Jefferson Mixer, Port Townsend

- 9/29, Jefferson Healthcare, virtual
 - 9/29, Jefferson Transit, virtual
- Partners that serve both Clallam & Jefferson
 - 9/24, Clallam Resilience Project, virtual
- Kitsap Partners
 - 9/10, Peninsula Community Health Services, virtual
 - 9/16, Susan Buell, virtual
 - 9/22, Kitsap County Juvenile and Family Court Services, Port Orchard
 - 10/2, Peninsula Community Health Services, Poulsbo
- Full region
 - 9/30, Regional Convening, Kiana Lodge

Additionally:

Staff meet monthly with each of the 12 care coordination partners for Olympic Connect. These meetings happen via zoom and in-person and happen throughout the 3-county region.

Olympic Community of Health

SBAR Investment Policy

Presented to the Finance Committee on October 6, 2025

Updated and presented to the Board of Directors on October 13, 2025

Situation

The OCH Investment Policy is reviewed every three years by the Finance Committee and Board of Directors. The policy was last reviewed and updated on May 9, 2022. Staff seek review, discussion, and a vote by the Board of Directors.

Background

Staff reviewed the current version and only recommend one minor change to align with the OCH [Policy on Policies](#). The current policy continues to reflect a simple and conservative approach that matches practice.

The Finance Committee reviewed and approved as presented.

Action

Staff and Finance Committee recommend review and approval by the Board.

Recommended Motion

The OCH Board of Directors approves the Investment Policy as presented.

Olympic Community of Health Investment Policy

Approved: November 6, 2017

Revised: March 9, 2020 & April 12, 2021 & May 9, 2022

PURPOSE OF INVESTMENT POLICY

The purpose of this Investment Policy is to provide a clear statement of Olympic Community of Health's (OCH) investment objective, to define the responsibilities of the Board of Directors and Finance Committee involved in managing OCH's investments, and to identify permissible investments.

INVESTMENT OBJECTIVE

The overall objective of this investment policy is to support OCH in earning investment income while maintaining an investment portfolio which seeks to minimize risk while maintaining liquidity.

GENERAL PROVISIONS

- All transactions shall be for the sole benefit of OCH.
- The Finance Committee shall review OCH's investment policy, risk tolerance, and investment horizon on ~~an annual basis~~ regular basis. According to the OCH Policy on Policies, the investment policy is reviewed at least every three years. The Finance Committee will present any recommended updates or adjustments to the Board of Directors to approve changes.
- The Finance Committee shall conduct an annual review of the OCH's investment assets to verify the existence and marketability of the underlying assets or satisfy themselves that such a review has been conducted in connection with an independent audit (if any) of OCH's financial statements.
- Any investment that is not expressly permitted under this Policy must be formally reviewed and approved by the Board of Directors.
- OCH will endeavor to operate the investment program in compliance with all applicable state, federal and local laws and regulations concerning management of investment assets.

DELEGATION OF RESPONSIBILITY; RELIANCE ON EXPERTS AND ADVISORS

- The Board of Directors has ultimate responsibility for the investment and management of OCH's investment assets.
- The Board of Directors or Finance Committee may hire outside experts as investment consultants or investment managers.

GENERAL INVESTMENT GUIDELINES

- In order to reduce financial risk, staff will endeavor to ensure that no single banking institution will hold more than federally insured limits; in most cases, \$250,000. Staff will monitor accounts on a regular basis and will include account status updates in quarterly financial updates.
- Permitted investments will include savings accounts, certificates of deposit, treasury notes, and bonds. Investments of any other kind will require the advance, express approval of the OCH Board of Directors.
- A copy of this Investment Policy shall be provided to all Investment Managers.
- The Organization is a tax-exempt organization as described in section 501(c)(3) of the Internal Revenue Code. This tax-exempt status should be taken into consideration when making OCH investments.

Olympic Community of Health Investment Policy

Approved: November 6, 2017

Revised: March 9, 2020 & April 12, 2021 & May 9, 2022

- Investment maturity dates will coincide with OCH's planned upcoming expenses, ensuring there is cash on hand for all planned expenses.
- A cash account shall be maintained with a zero to very low risk tolerance to keep cash available for budgeted operating expenses.
- Transactions shall be executed at reasonable cost, taking into consideration prevailing market conditions and services and research provided by the executing broker.
- Investments within the investment portfolio should be readily marketable.
- The investment portfolio should not be a blind pool; each investment must be available for review.

Olympic Community of Health

SBAR 2024 990 IRS Form

Presented to the Finance Committee on October 6, 2025

Updated and presented to the Board of Directors on October 13, 2025

Situation

Annually, the Olympic Community of Health Board of Directors must review and accept the IRS Form 990 describing organizational activities for the previous year. The 990 must be sent to the IRS no later than November 15 each year. The OCH external accountant prepares the 990 form based on prior year financials and annual audit reports. The Treasurer reviews and signs and the external accountant files with the IRS.

Background

The purpose of the Form 990 is to give the government and the public a snapshot of the organization's activities and spending each year. As a 501(c)3 organization, OCH is required to complete this form and to make it available to the public. 990 Forms are also of particular interest to prospective grantors and will become increasingly more valuable for the organization as we begin to seek new sources of funding.

Action

Members should pay special attention to Part VII, Section A to verify accurate hours spent in service of the organization per week, keeping in mind that the list of Board members is accurate as of December 31, 2024.

After Board review and acceptance, Brent Simcosky will sign the form, and staff will submit the Form 990 to the IRS.

Recommended Motion

The OCH Board of Directors accepts the 2024 IRS 990 form as presented by staff and the Finance Committee.

Form 8879-TE

IRS E-file Signature Authorization
for a Tax Exempt Entity

OMB No. 1545-0047

Department of the Treasury
Internal Revenue Service

For calendar year 2024, or fiscal year beginning _____, 2024, and ending _____, 20____

Do not send to the IRS. Keep for your records.
Go to www.irs.gov/Form8879TE for the latest information.

2024

Name of filer

OLYMPIC COMMUNITY OF HEALTH

EIN or SSN

81-4591222

Name and title of officer or person subject to tax

BRENT SIMCOSKY TREASURER

Part I Type of Return and Return Information

Check the box for the return for which you are using this Form 8879-TE and enter the applicable amount, if any, from the return. Form 8038-CP and Form 5330 filers may enter dollars and cents. For all other forms, enter whole dollars only. If you check the box on line 1a, 2a, 3a, 4a, 5a, 6a, 7a, 8a, 9a, or 10a below, and the amount on that line for the return being filed with this form was blank, then leave line 1b, 2b, 3b, 4b, 5b, 6b, 7b, 8b, 9b, or 10b, whichever is applicable, blank (do not enter -0-). But, if you entered -0- on the return, then enter -0- on the applicable line below. Do not complete more than one line in Part I.

1a Form 990 check here	☒	b Total revenue, if any (Form 990, Part VIII, column (A), line 12)	1b	6,390,295.
2a Form 990-EZ check here	☐	b Total revenue, if any (Form 990-EZ, line 9)	2b	
3a Form 1120-POL check here	☐	b Total tax (Form 1120-POL, line 22)	3b	
4a Form 990-PF check here	☐	b Tax based on investment income (Form 990-PF, Part V, line 5)	4b	
5a Form 8868 check here	☐	b Balance due (Form 8868, line 3c)	5b	
6a Form 990-T check here	☐	b Total tax (Form 990-T, Part III, line 4)	6b	
7a Form 4720 check here	☐	b Total tax (Form 4720, Part III, line 1)	7b	
8a Form 5227 check here	☐	b FMV of assets at end of tax year (Form 5227, Item D)	8b	
9a Form 5330 check here	☐	b Tax due (Form 5330, Part II, line 19)	9b	
10a Form 8038-CP check here	☐	b Amount of credit payment requested (Form 8038-CP, Part III, line 22)	10b	

Part II Declaration and Signature Authorization of Officer or Person Subject to Tax

Under penalties of perjury, I declare that ☒ I am an officer of the above entity or ☐ I am a person subject to tax with respect to (name of entity) _____, (EIN) _____, and that I have examined a copy of the 2024 electronic return and accompanying schedules and statements, and, to the best of my knowledge and belief, they are true, correct, and complete. I further declare that the amount in Part I above is the amount shown on the copy of the electronic return. I consent to allow my intermediate service provider, transmitter, or electronic return originator (ERO) to send the return to the IRS and to receive from the IRS (a) an acknowledgement of receipt or reason for rejection of the transmission, (b) the reason for any delay in processing the return or refund, and (c) the date of any refund. If applicable, I authorize the U.S. Treasury and its designated Financial Agent to initiate an electronic funds withdrawal (direct debit) entry to the financial institution account indicated in the tax preparation software for payment of the federal taxes owed on this return, and the financial institution to debit the entry to this account. To revoke a payment, I must contact the U.S. Treasury Financial Agent at 1-888-353-4537 no later than 2 business days prior to the payment (settlement) date. I also authorize the financial institutions involved in the processing of the electronic payment of taxes to receive confidential information necessary to answer inquiries and resolve issues related to the payment. I have selected a personal identification number (PIN) as my signature for the electronic return and, if applicable, the consent to electronic funds withdrawal.

PIN: check one box only

☒ I authorize GOODING OHARA & MACKEY P S to enter my PIN 05877 as my signature
ERO firm name Enter five numbers, but do not enter all zeros

on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I also authorize the aforementioned ERO to enter my PIN on the return's disclosure consent screen.

☐ As an officer or person subject to tax with respect to the entity, I will enter my PIN as my signature on the tax year 2024 electronically filed return. If I have indicated within this return that a copy of the return is being filed with a state agency(ies) regulating charities as part of the IRS Fed/State program, I will enter my PIN on the return's disclosure consent screen.

Signature of officer or person subject to tax

Date

Part III Certification and Authentication

ERO's EFIN/PIN. Enter your six-digit electronic filing identification number (EFIN) followed by your five-digit self-selected PIN.

91848498368

Do not enter all zeros

I certify that the above numeric entry is my PIN, which is my signature on the 2024 electronically filed return indicated above. I confirm that I am submitting this return in accordance with the requirements of Pub. 4163, Modernized e-File (MeF) Information for Authorized IRS e-file Providers for Business Returns.

ERO's signature

NATHANAEL O'HARA

Date

ERO Must Retain This Form – See Instructions
Do Not Submit This Form to the IRS Unless Requested To Do So

2024 Exempt Org. Return

prepared for:

OLYMPIC COMMUNITY OF HEALTH

PO BOX 641

PORT TOWNSEND, WA 98368-0641

Gooding Ohara & Mackey P S

242 Taylor Street

Port Townsend, WA 98368

CLIENT 5877

**GOODING OHARA & MACKEY P S
242 TAYLOR STREET
PORT TOWNSEND, WA 98368
(360)385-1040**

September 25, 2025

OLYMPIC COMMUNITY OF HEALTH
PO BOX 641
PORT TOWNSEND, WA 98368-0641

Dear Board of Directors:

Your 2024 Federal Return of Organization Exempt from Income Tax will be electronically filed with the Internal Revenue Service upon receipt of a signed Form 8879-TE - IRS e-file Signature Authorization. No tax is payable with the filing of this return.

Please be sure to call us if you have any questions.

Sincerely,

NATHANAEL O'HARA

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)**2024**Department of the Treasury
Internal Revenue ServiceDo not enter social security numbers on this form as it may be made public.
Go to www.irs.gov/Form990 for instructions and the latest information.**Open to Public
Inspection**

A For the 2024 calendar year, or tax year beginning , 2024 , and ending , 20		
B Check if applicable: ☐ Address change ☐ Name change ☐ Initial return ☐ Final return/terminated ☐ Amended return ☐ Application pending	C OLYMPIC COMMUNITY OF HEALTH PO BOX 641 PORT TOWNSEND, WA 98368-0641 F Name and address of principal officer: BRENT SIMCOSKY SAME AS C ABOVE	D Employer identification number 81-4591222 E Telephone number (360) 633-9241 G Gross receipts \$ 6,390,295. H(a) Is this a group return for subordinates? ☐ Yes ☒ No H(b) Are all subordinates included? ☐ Yes ☐ No If "No," attach a list. See instructions. H(c) Group exemption number
I Tax-exempt status: ☒ 501(c)(3) ☐ 501(c) () (insert no.) ☐ 4947(a)(1) or ☐ 527		
J Website: WWW.OLYMPICCH.ORG		
K Form of organization: ☒ Corporation ☐ Trust ☐ Association ☐ Other		
L Year of formation: 2017		M State of legal domicile: WA

Part I Summary			
Activities & Governance	1	Briefly describe the organization's mission or most significant activities: <u>SEE SCHEDULE O</u>	
	2	Check this box ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets.	
	3	Number of voting members of the governing body (Part VI, line 1a)	33
	4	Number of independent voting members of the governing body (Part VI, line 1b)	33
	5	Total number of individuals employed in calendar year 2024 (Part V, line 2a)	7
	6	Total number of volunteers (estimate if necessary)	0
	7a	Total unrelated business revenue from Part VIII, column (C), line 12	0.
	b	Net unrelated business taxable income from Form 990-T, Part I, line 11	0.
Revenue	8	Contributions and grants (Part VIII, line 1h)	2,113,025.
	9	Program service revenue (Part VIII, line 2g)	351,598.
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	192,258.
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	204,814.
	12	Total revenue — add lines 8 through 11 (must equal Part VIII, column (A), line 12)	2,656,881.
	12		6,390,295.
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1-3)	
	14	Benefits paid to or for members (Part IX, column (A), line 4)	
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5-10)	736,516.
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	
	b	Total fundraising expenses (Part IX, column (D), line 25)	
	17	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)	2,622,802.
	18	Total expenses. Add lines 13-17 (must equal Part IX, column (A), line 25)	4,062,347.
	18		3,359,318.
Net Assets or Fund Balances	19	Revenue less expenses. Subtract line 18 from line 12	4,708,087.
	19		-702,437.
	20	Total assets (Part X, line 16)	1,682,208.
	20		7,132,916.
	21	Total liabilities (Part X, line 26)	10,290,064.
	21		192,208.
	22	Net assets or fund balances. Subtract line 21 from line 20	1,667,148.
	22		6,940,708.

Part II Signature Block					
Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge.					
Sign Here	Signature of officer BRENT SIMCOSKY	Date TREASURER			
	Type or print name and title				
Paid Preparer Use Only	Preparer's name NATHANAEL O'HARA	Preparer's signature NATHANAEL O'HARA	Date	Check ☐ if self-employed	PTIN P01701144
	Firm's name GOODING OHARA & MACKEY P S			Firm's EIN 91-2089644	
	Firm's address 242 TAYLOR STREET PORT TOWNSEND, WA 98368			Phone no. (360) 385-1040	
	May the IRS discuss this return with the preparer shown above? See instructions ☒ Yes ☐ No				

Part III Statement of Program Service AccomplishmentsCheck if Schedule O contains a response or note to any line in this Part III ☒ **X****1** Briefly describe the organization's mission:SEE SCHEDULE O**2** Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O.

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O.

4 Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses. Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.**4a** (Code:) (Expenses \$ 4,464,737. including grants of \$) (Revenue \$)
IMPLEMENTED CONTRACTS WITH HEALTHCARE AND SERVICE PROVIDERS TO IMPROVE PATIENT CARE
EXPERIENCES AND REGIONAL HEALTH OUTCOMES.**4b** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4c** (Code:) (Expenses \$ including grants of \$) (Revenue \$)**4d** Other program services (Describe on Schedule O.)

(Expenses \$ including grants of \$) (Revenue \$)

4e Total program service expenses 4,464,737.

Part IV Checklist of Required Schedules

	Yes	No
1 Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? <i>If "Yes," complete Schedule A.</i>	X	
2 Is the organization required to complete <i>Schedule B, Schedule of Contributors</i> ? See instructions.		X
3 Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? <i>If "Yes," complete Schedule C, Part I.</i>		X
4 Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If "Yes," complete Schedule C, Part II.</i>		X
5 Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? <i>If "Yes," complete Schedule C, Part III.</i>		X
6 Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? <i>If "Yes," complete Schedule D, Part I.</i>		X
7 Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? <i>If "Yes," complete Schedule D, Part II.</i>		X
8 Did the organization maintain collections of works of art, historical treasures, or other similar assets? <i>If "Yes," complete Schedule D, Part III.</i>		X
9 Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? <i>If "Yes," complete Schedule D, Part IV.</i>		X
10 Did the organization, directly or through a related organization, hold assets in donor-restricted endowments or in quasi-endowments? <i>If "Yes," complete Schedule D, Part V.</i>		X
11 If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X, as applicable.		
a Did the organization report an amount for land, buildings, and equipment in Part X, line 10? <i>If "Yes," complete Schedule D, Part VI.</i>		X
b Did the organization report an amount for investments — other securities in Part X, line 12, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VII.</i>		X
c Did the organization report an amount for investments — program related in Part X, line 13, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part VIII.</i>		X
d Did the organization report an amount for other assets in Part X, line 15, that is 5% or more of its total assets reported in Part X, line 16? <i>If "Yes," complete Schedule D, Part IX.</i>		X
e Did the organization report an amount for other liabilities in Part X, line 25? <i>If "Yes," complete Schedule D, Part X.</i>	X	
f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? <i>If "Yes," complete Schedule D, Part X.</i>		X
12a Did the organization obtain separate, independent audited financial statements for the tax year? <i>If "Yes," complete Schedule D, Parts XI and XII.</i>		X
b Was the organization included in consolidated, independent audited financial statements for the tax year? <i>If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional.</i>		X
13 Is the organization a school described in section 170(b)(1)(A)(ii)? <i>If "Yes," complete Schedule E.</i>		X
14a Did the organization maintain an office, employees, or agents outside of the United States?		X
b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? <i>If "Yes," complete Schedule F, Parts I and IV.</i>		X
15 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? <i>If "Yes," complete Schedule F, Parts II and IV.</i>		X
16 Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? <i>If "Yes," complete Schedule F, Parts III and IV.</i>		X
17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? <i>If "Yes," complete Schedule G, Part I. See instructions.</i>		X
18 Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? <i>If "Yes," complete Schedule G, Part II.</i>		X
19 Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? <i>If "Yes," complete Schedule G, Part III.</i>		X
20a Did the organization operate one or more hospital facilities? <i>If "Yes," complete Schedule H.</i>		X
b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?		
21 Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II.</i>		X

Part IV Checklist of Required Schedules (continued)

	Yes	No
22 Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III.</i>	22	X
23 Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J.</i>	23	X
24a Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a.</i>	24a	X
b Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
c Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c	
d Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	
25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I.</i>	25a	X
b Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I.</i>	25b	X
26 Did the organization report any amount on Part X, line 5 or 22, for receivables from or payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons? <i>If "Yes," complete Schedule L, Part II.</i>	26	X
27 Did the organization provide a grant or other assistance to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity (including an employee thereof) or family member of any of these persons? <i>If "Yes," complete Schedule L, Part III.</i>	27	X
28 Was the organization a party to a business transaction with one of the following parties? (See the Schedule L, Part IV, instructions for applicable filing thresholds, conditions, and exceptions).		
a A current or former officer, director, trustee, key employee, creator or founder, or substantial contributor? <i>If "Yes," complete Schedule L, Part IV.</i>	28a	X
b A family member of any individual described in line 28a? <i>If "Yes," complete Schedule L, Part IV.</i>	28b	X
c A 35% controlled entity of one or more individuals and/or organizations described in line 28a or 28b? <i>If "Yes," complete Schedule L, Part IV.</i>	28c	X
29 Did the organization receive more than \$25,000 in noncash contributions? <i>If "Yes," complete Schedule M.</i>	29	X
30 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M.</i>	30	X
31 Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I.</i>	31	X
32 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II.</i>	32	X
33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I.</i>	33	X
34 Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1.</i>	34	X
35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X
b If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	35b	
36 Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2.</i>	36	X
37 Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI.</i>	37	X
38 Did the organization complete Schedule O and provide explanations on Schedule O for Part VI, lines 11b and 19? Note: All Form 990 filers are required to complete Schedule O.	38	X

Part V Statements Regarding Other IRS Filings and Tax ComplianceCheck if Schedule O contains a response or note to any line in this Part V. ☐

	Yes	No
1a Enter the number reported in box 3 of Form 1096. Enter -0- if not applicable.	1a	13
b Enter the number of Forms W-2G included on line 1a. Enter -0- if not applicable.	1b	0
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c	X

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)

	Yes	No
2a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements, filed for the calendar year ending with or within the year covered by this return. 2a 7		
b If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b X	
3a Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a	X
b If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation on Schedule O.	3b	
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	X
b If "Yes," enter the name of the foreign country See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).		
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a	X
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b	X
c If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as charitable contributions?	6a	X
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?	6b	
7 Organizations that may receive deductible contributions under section 170(c).		
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a	X
b If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?	7c	X
d If "Yes," indicate the number of Forms 8282 filed during the year. 7d		
e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e	X
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f	X
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g	
h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h	
8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	8	
9 Sponsoring organizations maintaining donor advised funds.		
a Did the sponsoring organization make any taxable distributions under section 4966?	9a	
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b	
10 Section 501(c)(7) organizations. Enter:		
a Initiation fees and capital contributions included on Part VIII, line 12. 10a		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities. 10b		
11 Section 501(c)(12) organizations. Enter:		
a Gross income from members or shareholders. 11a		
b Gross income from other sources. (Do not net amounts due or paid to other sources against amounts due or received from them.) 11b		
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year. 12b		
13 Section 501(c)(29) qualified nonprofit health insurance issuers.		
a Is the organization licensed to issue qualified health plans in more than one state?	13a	
Note: See the instructions for additional information the organization must report on Schedule O.		
b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans. 13b		
c Enter the amount of reserves on hand. 13c		
14a Did the organization receive any payments for indoor tanning services during the tax year?	14a	X
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation on Schedule O.	14b	
15 Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or excess parachute payment(s) during the year?	15	X
If "Yes," see the instructions and file Form 4720, Schedule N.		
16 Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16	X
If "Yes," complete Form 4720, Schedule O.		
17 Section 501(c)(21) organizations. Did the trust, or any disqualified or other person, engage in any activities that would result in the imposition of an excise tax under section 4951, 4952, or 4953?	17	
If "Yes," complete Form 6069.		

Part VI Governance, Management, and Disclosure. For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes on Schedule O. See instructions.Check if Schedule O contains a response or note to any line in this Part VI. ☒**Section A. Governing Body and Management**

		Yes	No
1a Enter the number of voting members of the governing body at the end of the tax year.	1a 33		
If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain on Schedule O.			
b Enter the number of voting members included on line 1a, above, who are independent.	1b 33		
2 Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		X
3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, trustees, or key employees to a management company or other person?	3		X
4 Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		X
5 Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X
6 Did the organization have members or stockholders?	6		X
7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a		X
b Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		X
8 Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:			
a The governing body?	8a	X	
b Each committee with authority to act on behalf of the governing body?	8b	X	
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses on Schedule O.	9		X

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

	Yes	No
10a Did the organization have local chapters, branches, or affiliates?	10a	X
b If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b	
11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a X	
b Describe on Schedule O the process, if any, used by the organization to review this Form 990. SEE SCHEDULE O		
12a Did the organization have a written conflict of interest policy? If "No," go to line 13	12a X	
b Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b X	
c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe on Schedule O how this was done SEE SCHEDULE O	12c X	
13 Did the organization have a written whistleblower policy?	13 X	
14 Did the organization have a written document retention and destruction policy?	14 X	
15 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		
a The organization's CEO, Executive Director, or top management official. SEE SCHEDULE O	15a X	
b Other officers or key employees of the organization.	15b	X
If "Yes" to line 15a or 15b, describe the process on Schedule O. See instructions.		
16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	X
b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b	

Section C. Disclosure

17 List the states with which a copy of this Form 990 is required to be filed NONE

18 Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A, if applicable), 990, and 990-T (section 501(c)(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.

☐ Own website ☐ Another's website ☒ Upon request ☐ Other (explain on Schedule O)

19 Describe on Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and financial statements available to the public during the tax year. SEE SCHEDULE O

20 State the name, address, and telephone number of the person who possesses the organization's books and records.

CELESTE SCHOENTHALER 41 COLWELL ST PORT HADLOCK WA 98339 (360) 633-9241

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent ContractorsCheck if Schedule O contains a response or note to any line in this Part VII. ☐**Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees****1a** Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
- List all of the organization's **current** key employees, if any. See the instructions for definition of "key employee."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (box 5 of Form W-2, box 6 of Form 1099-MISC, and/or box 1 of Form 1099-NEC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

See the instructions for the order in which to list the persons above.

☐ Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Officer	Key employee	Highest compensated employee	Former			
(1) CELESTE SCHOENTHALER EXECUTIVE DIR.	40 0	X					170,716.	0.	0.
(2) AMY BROWNING DIRECTOR	0.5 0	X					0.	0.	0.
(3) DOMINICA FALE DIRECTOR	0.75 0	X					0.	0.	0.
(4) JENNIFER KREIDLER-MOSS DIRECTOR	0.75 0	X					0.	0.	0.
(5) DUNIA FAULX DIRECTOR	1 0	X					0.	0.	0.
(6) LAURA CEPOI DIRECTOR	0.5 0	X					0.	0.	0.
(7) STACEY SMITH DIRECTOR	0.75 0	X					0.	0.	0.
(8) JACOB DAVIDSON DIRECTOR	0.75 0	X					0.	0.	0.
(9) MICHAEL MAXWELL PAST PRESIDENT	1.25 0	X	X				0.	0.	0.
(10) BRIAN BURWELL DIRECTOR	0.75 0	X					0.	0.	0.
(11) BOBBY STONE SECRETARY	1.25 0	X	X				0.	0.	0.
(12) APPLE MARTINE DIRECTOR	1 0	X					0.	0.	0.
(13) JOLENE KRON DIRECTOR	0.75 0	X					0.	0.	0.
(14) KATE JASONOWICZ DIRECTOR	1 0	X					0.	0.	0.

BAA

TEEA0107L 09/05/24

Form 990 (2024)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

(A) Name and title	(B) Average hours per week (list any hours for related organizations below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)					(D) Reportable compensation from the organization (W-2/1099-MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099-MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee			
(15) ANTHONY IVES DIRECTOR	0.5 0	X					0.	0.	0.
(16) KIM FREEWOLF DIRECTOR	0.5 0	X					0.	0.	0.
(17) JENNIFER OPPELT DIRECTOR	1 0	X					0.	0.	0.
(18) SUSAN BUELL VICE PRESIDENT	1.25 0	X		X			0.	0.	0.
(19) ROY WALKER DIRECTOR	1 0	X					0.	0.	0.
(20) BRENT SIMCOSKY TREASURER	2 0	X		X			0.	0.	0.
(21) JOLENE WINGER DIRECTOR	0.5 0	X					0.	0.	0.
(22) MONICA BERNHARD DIRECTOR	0.75 0	X					0.	0.	0.
(23) LORETTA KERR DIRECTOR	0.75 0	X					0.	0.	0.
(24) JODY MOSS DIRECTOR	1 0	X					0.	0.	0.
(25) ERIN HAFER DIRECTOR	1 0	X					0.	0.	0.
1b Subtotal							170,716.	0.	0.
c Total from continuation sheets to Part VII, Section A							0.	0.	0.
d Total (add lines 1b and 1c)							170,716.	0.	0.
2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization	1								

	Yes	No
3 Did the organization list any former officer, director, trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual.</i>		X
4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual.</i>	X	
5 Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? <i>If "Yes," complete Schedule J for such person.</i>		X

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.		
(A) Name and business address	(B) Description of services	(C) Compensation
2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization	0	

2024

Department of the Treasury
Internal Revenue Service

Name of the Organization

Employer identification number

OLYMPIC COMMUNITY OF HEALTH

81-4591222

Part VII Continuation: Officers, Directors, Trustees, Key Employees, and
Highest Compensated Employees

(A) Name and title	(B) Average hours per week (list any hours for related organiza- tions below dotted line)	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W-2/1099- MISC/1099-NEC)	(E) Reportable compensation from related organizations (W-2/1099- MISC/1099-NEC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former			
(1) STORMY HOWELL DIRECTOR	1 0	X						0.	0.	0.
(2) G'NELL ASHLEY DIRECTOR	1 0	X						0.	0.	0.
(3) STEPHEN KUTZ DIRECTOR	0.75 0	X						0.	0.	0.
(4) HOLLY MORGAN DIRECTOR	0.75 0	X						0.	0.	0.
(5) ROSIE APALISOK DIRECTOR	0.75 0	X						0.	0.	0.
(6) BRITNI DUNCAN DIRECTOR	0.5 0	X						0.	0.	0.
(7) HEIDI ANDERSON PRESIDENT	1.25 0	X		X				0.	0.	0.
(8) TANYA MACNEIL DIRECTOR	1 0	X						0.	0.	0.
(9) DARLENE HOLLUM DIRECTOR	0.5 0	X						0.	0.	0.
(10)										
(11)										
(12)										
(13)										
(14)										
(15)										
(16)										
(17)										
(18)										
(19)										
(20)										
(21)										

Part VIII Statement of RevenueCheck if Schedule O contains a response or note to any line in this Part VIII ☐

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514	
Contributions, Gifts, Grants, and Other Similar Amounts	1a	Federated campaigns	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e	3,176,400.				
	f	All other contributions, gifts, grants, and similar amounts not included above	1f					
	g	Noncash contributions included in lines 1a-1f	1g					
	h Total. Add lines 1a-1f			3,176,400.				
Program Service Revenue	2a FEES & CONTRACTS GOV AGENCIES		Business Code					
				3,009,081.			3,009,081.	
	b	-----						
	c	-----						
	d	-----						
	e	-----						
	f	All other program service revenue						
	g Total. Add lines 2a-2f			3,009,081.				
Other Revenue	3 Investment income (including dividends, interest, and other similar amounts)			204,814.			204,814.	
	4 Income from investment of tax-exempt bond proceeds							
	5 Royalties							
	6a	Gross rents	(i) Real	(ii) Personal				
			6a					
			6b					
	b Less: rental expenses		6b					
	c Rental income or (loss)		6c					
	d Net rental income or (loss)							
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
			7a					
			7b					
	b Less: cost or other basis and sales expenses		7b					
	c Gain or (loss)		7c					
	d Net gain or (loss)							
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c). See Part IV, line 18						
			8a					
8b								
b Less: direct expenses		8b						
c Net income or (loss) from fundraising events								
9a	Gross income from gaming activities. See Part IV, line 19							
		9a						
		9b						
b Less: direct expenses		9b						
c Net income or (loss) from gaming activities								
10a	Gross sales of inventory, less returns and allowances							
		10a						
		10b						
b Less: cost of goods sold		10b						
c Net income or (loss) from sales of inventory								
Miscellaneous Revenue	Business Code							
	11a	-----						
	b	-----						
	c	-----						
	d	All other revenue						
	e Total. Add lines 11a-11d							
12 Total revenue. See instructions			6,390,295.	0.	0.	3,213,895.		

Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A).

Check if Schedule O contains a response or note to any line in this Part IX. ☐

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1 Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21.				
2 Grants and other assistance to domestic individuals. See Part IV, line 22.				
3 Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16.				
4 Benefits paid to or for members.				
5 Compensation of current officers, directors, trustees, and key employees.	170,716.	162,852.	7,864.	0.
6 Compensation not included above to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B).	0.	0.	0.	0.
7 Other salaries and wages.	323,461.	182,004.	141,457.	
8 Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	25,369.	23,615.	1,754.	
9 Other employee benefits.	78,824.	51,440.	27,384.	
10 Payroll taxes.	47,370.	42,690.	4,680.	
11 Fees for services (nonemployees):				
a Management.				
b Legal.	15,469.	15,469.		
c Accounting.	30,163.	14,617.	15,546.	
d Lobbying.				
e Professional fundraising services. See Part IV, line 17.				
f Investment management fees.				
g Other. (If line 11g amount exceeds 10% of line 25, column (A), amount, list line 11g expenses on Schedule O.)	200,322.	168,678.	31,644.	
12 Advertising and promotion.				
13 Office expenses.				
14 Information technology.				
15 Royalties.				
16 Occupancy.	15,889.	14,487.	1,402.	
17 Travel.				
18 Payments of travel or entertainment expenses for any federal, state, or local public officials.				
19 Conferences, conventions, and meetings.				
20 Interest.				
21 Payments to affiliates.				
22 Depreciation, depletion, and amortization.	18,384.	16,762.	1,622.	
23 Insurance.	9,501.		9,501.	
24 Other expenses. Itemize expenses not covered above. (List miscellaneous expenses on line 24e. If line 24e amount exceeds 10% of line 25, column (A), amount, list line 24e expenses on Schedule O.)				
a DISTRIBUTIONS TO PARTNER ORG	3,587,759.	3,587,759.		
b PROFESSIONAL DEVELOPMENT	53,832.	53,832.		
c MEETINGS & EVENTS	49,717.	49,717.		
d PUBLIC RELATIONS	20,261.	20,261.		
e All other expenses.	61,050.	60,554.	496.	
25 Total functional expenses. Add lines 1 through 24e.	4,708,087.	4,464,737.	243,350.	0.
26 Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here ☐ if following SOP 98-2 (ASC 958-720).				

Part X Balance SheetCheck if Schedule O contains a response or note to any line in this Part X. ☐

		(A) Beginning of year		(B) End of year
Assets	1 Cash — non-interest-bearing	3,980,658.	1	6,372,636.
	2 Savings and temporary cash investments	3,050,615.	2	3,154,779.
	3 Pledges and grants receivable, net		3	
	4 Accounts receivable, net		4	681,818.
	5 Loans and other receivables from any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		5	
	6 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), and persons described in section 4958(c)(3)(B)		6	
	7 Notes and loans receivable, net		7	
	8 Inventories for sale or use		8	
	9 Prepaid expenses and deferred charges	9,723.	9	7,295.
	10a Land, buildings, and equipment: cost or other basis. Complete Part VI of Schedule D	10a		
	b Less: accumulated depreciation	10b	10c	
	11 Investments — publicly traded securities		11	
	12 Investments — other securities. See Part IV, line 11		12	
	13 Investments — program-related. See Part IV, line 11		13	
	14 Intangible assets		14	73,536.
	15 Other assets. See Part IV, line 11	91,920.	15	
16 Total assets. Add lines 1 through 15 (must equal line 33)	7,132,916.	16	10,290,064.	
Liabilities	17 Accounts payable and accrued expenses	25,756.	17	142,861.
	18 Grants payable		18	
	19 Deferred revenue		19	1,356,220.
	20 Tax-exempt bond liabilities		20	
	21 Escrow or custodial account liability. Complete Part IV of Schedule D		21	
	22 Loans and other payables to any current or former officer, director, trustee, key employee, creator or founder, substantial contributor, or 35% controlled entity or family member of any of these persons		22	
	23 Secured mortgages and notes payable to unrelated third parties		23	
	24 Unsecured notes and loans payable to unrelated third parties		24	
	25 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D	166,452.	25	168,067.
	26 Total liabilities. Add lines 17 through 25	192,208.	26	1,667,148.
Net Assets or Fund Balances	Organizations that follow FASB ASC 958, check here and complete lines 27, 28, 32, and 33. ☒			
	27 Net assets without donor restrictions	6,940,708.	27	8,622,916.
	28 Net assets with donor restrictions		28	
	Organizations that do not follow FASB ASC 958, check here and complete lines 29 through 33. ☐			
	29 Capital stock or trust principal, or current funds		29	
	30 Paid-in or capital surplus, or land, building, or equipment fund		30	
	31 Retained earnings, endowment, accumulated income, or other funds		31	
	32 Total net assets or fund balances	6,940,708.	32	8,622,916.
	33 Total liabilities and net assets/fund balances	7,132,916.	33	10,290,064.

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TEEA0111L 09/05/24

Form 990 (2024)

Part XI Reconciliation of Net AssetsCheck if Schedule O contains a response or note to any line in this Part XI. ☐

1	Total revenue (must equal Part VIII, column (A), line 12)	1	6,390,295.
2	Total expenses (must equal Part IX, column (A), line 25)	2	4,708,087.
3	Revenue less expenses. Subtract line 2 from line 1	3	1,682,208.
4	Net assets or fund balances at beginning of year (must equal Part X, line 32, column (A))	4	6,940,708.
5	Net unrealized gains (losses) on investments	5	
6	Donated services and use of facilities	6	
7	Investment expenses	7	
8	Prior period adjustments	8	
9	Other changes in net assets or fund balances (explain on Schedule O)	9	0.
10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 32, column (B))	10	8,622,916.

Part XII Financial Statements and ReportingCheck if Schedule O contains a response or note to any line in this Part XII. ☐

	Yes	No
1 Accounting method used to prepare the Form 990: ☐ Cash ☒ Accrual ☐ Other _____		
If the organization changed its method of accounting from a prior year or checked "Other," explain on Schedule O.		
2a Were the organization's financial statements compiled or reviewed by an independent accountant?		X
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both.		
☐ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		
b Were the organization's financial statements audited by an independent accountant?	X	
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both.		
☒ Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?	X	
If the organization changed either its oversight process or selection process during the tax year, explain on Schedule O.		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Uniform Guidance, 2 C.F.R. Part 200, Subpart F?	X	
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why on Schedule O and describe any steps taken to undergo such audits	X	

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TEEA0112L 09/05/24

Form 990 (2024)

SCHEDULE A
(Form 990)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

2024

Open to Public
Inspection

Name of the organization

OLYMPIC COMMUNITY OF HEALTH

Employer identification number

81-4591222

Part I Reason for Public Charity Status. (All organizations must complete this part.) See instructions.

The organization is not a private foundation because it is: (For lines 1 through 12, check only one box.)

- 1 ☐ A church, convention of churches, or association of churches described in **section 170(b)(1)(A)(i).**
- 2 ☐ A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E (Form 990).)
- 3 ☐ A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**
- 4 ☐ A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state: _____
- 5 ☐ An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II.)
- 6 ☐ A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**
- 7 ☒ An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 8 ☐ A community trust described in **section 170(b)(1)(A)(vi).** (Complete Part II.)
- 9 ☐ An agricultural research organization described in **section 170(b)(1)(A)(ix)** operated in conjunction with a land-grant college or university or a non-land-grant college of agriculture (see instructions). Enter the name, city, and state of the college or university: _____
- 10 ☐ An organization that normally receives (1) more than 33-1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions, subject to certain exceptions; and (2) no more than 33-1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975. See **section 509(a)(2).** (Complete Part III.)
- 11 ☐ An organization organized and operated exclusively to test for public safety. See **section 509(a)(4).**
- 12 ☐ An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in **section 509(a)(1)** or **section 509(a)(2).** See **section 509(a)(3).** Check the box on lines 12a through 12d that describes the type of supporting organization and complete lines 12e, 12f, and 12g.
- a ☐ **Type I.** A supporting organization operated, supervised, or controlled by its supported organization(s), typically by giving the supported organization(s) the power to regularly appoint or elect a majority of the directors or trustees of the supporting organization. **You must complete Part IV, Sections A and B.**
- b ☐ **Type II.** A supporting organization supervised or controlled in connection with its supported organization(s), by having control or management of the supporting organization vested in the same persons that control or manage the supported organization(s). **You must complete Part IV, Sections A and C.**
- c ☐ **Type III functionally integrated.** A supporting organization operated in connection with, and functionally integrated with, its supported organization(s) (see instructions). **You must complete Part IV, Sections A, D, and E.**
- d ☐ **Type III non-functionally integrated.** A supporting organization operated in connection with its supported organization(s) that is not functionally integrated. The organization generally must satisfy a distribution requirement and an attentiveness requirement (see instructions). **You must complete Part IV, Sections A and D, and Part V.**
- e ☐ Check this box if the organization received a written determination from the IRS that it is a Type I, Type II, Type III functionally integrated, or Type III non-functionally integrated supporting organization.
- f Enter the number of supported organizations: _____
- g Provide the following information about the supported organization(s).

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1-10 above (see instructions))	(iv) Is the organization listed in your governing document?		(v) Amount of monetary support (see instructions)	(vi) Amount of other support (see instructions)
			Yes	No		
(A)						
(B)						
(C)						
(D)						
(E)						
Total						

Part II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")	4,102,504.	6,827,239.	5,284,998.	2,113,025.	3,176,400.	21,504,166.
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						0.
3 The value of services or facilities furnished by a governmental unit to the organization without charge						0.
4 Total. Add lines 1 through 3	4,102,504.	6,827,239.	5,284,998.	2,113,025.	3,176,400.	21,504,166.
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						0.
6 Public support. Subtract line 5 from line 4						21,504,166.

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
7 Amounts from line 4	4,102,504.	6,827,239.	5,284,998.	2,113,025.	3,176,400.	21,504,166.
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources	58,310.	10,489.	35,841.	192,258.	204,814.	501,712.
9 Net income from unrelated business activities, whether or not the business is regularly carried on						0.
10 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						0.
11 Total support. Add lines 7 through 10						22,005,878.
12 Gross receipts from related activities, etc. (see instructions)					12	0.
13 First 5 years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here						☐

Section C. Computation of Public Support Percentage

14 Public support percentage for 2024 (line 6, column (f), divided by line 11, column (f))	14	97.72 %
15 Public support percentage from 2023 Schedule A, Part II, line 14	15	98.36 %
16a 33-1/3% support test—2024. If the organization did not check the box on line 13, and line 14 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.	☒	
b 33-1/3% support test—2023. If the organization did not check a box on line 13 or 16a, and line 15 is 33-1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization.	☐	
17a 10%-facts-and-circumstances test—2024. If the organization did not check a box on line 13, 16a, or 16b, and line 14 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.	☐	
b 10%-facts-and-circumstances test—2023. If the organization did not check a box on line 13, 16a, 16b, or 17a, and line 15 is 10% or more, and if the organization meets the facts-and-circumstances test, check this box and stop here. Explain in Part VI how the organization meets the facts-and-circumstances test. The organization qualifies as a publicly supported organization.	☐	
18 Private foundation. If the organization did not check a box on line 13, 16a, 16b, 17a, or 17b, check this box and see instructions.	☐	

Part III Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
1 Gifts, grants, contributions, and membership fees received. (Do not include any "unusual grants.")						
2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose.						
3 Gross receipts from activities that are not an unrelated trade or business under section 513.						
4 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf.						
5 The value of services or facilities furnished by a governmental unit to the organization without charge.						
6 Total. Add lines 1 through 5.						
7a Amounts included on lines 1, 2, and 3 received from disqualified persons.						
b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year.						
c Add lines 7a and 7b.						
8 Public support. (Subtract line 7c from line 6.)						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2020	(b) 2021	(c) 2022	(d) 2023	(e) 2024	(f) Total
9 Amounts from line 6.						
10a Gross income from interest, dividends, payments received on securities loans, rents, royalties, and income from similar sources.						
b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975.						
c Add lines 10a and 10b.						
11 Net income from unrelated business activities not included on line 10b, whether or not the business is regularly carried on.						
12 Other income. Do not include gain or loss from the sale of capital assets (Explain in Part VI.)						
13 Total support. (Add lines 9, 10c, 11, and 12.)						

14 **First 5 years.** If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and **stop here** ☐**Section C. Computation of Public Support Percentage**

15 Public support percentage for 2024 (line 8, column (f), divided by line 13, column (f)).	15	%
16 Public support percentage from 2023 Schedule A, Part III, line 15.	16	%

Section D. Computation of Investment Income Percentage

17 Investment income percentage for 2024 (line 10c, column (f), divided by line 13, column (f)).	17	%
18 Investment income percentage from 2023 Schedule A, Part III, line 17.	18	%

19a **33-1/3% support tests—2024.** If the organization did not check the box on line 14, and line 15 is more than 33-1/3%, and line 17 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ☐b **33-1/3% support tests—2023.** If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33-1/3%, and line 18 is not more than 33-1/3%, check this box and **stop here**. The organization qualifies as a publicly supported organization. ☐20 **Private foundation.** If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions. ☐

Part IV Supporting Organizations

(Complete only if you checked a box on line 12 of Part I. If you checked box 12a, Part I, complete Sections A and B. If you checked box 12b, Part I, complete Sections A and C. If you checked box 12c, Part I, complete Sections A, D, and E. If you checked box 12d, Part I, complete Sections A and D, and complete Part V.)

Section A. All Supporting Organizations

	Yes	No
1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.		
2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2).		
3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer lines 3b and 3c below.		
b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination.		
c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use.		
4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes" and if you checked box 12a or 12b in Part I, answer lines 4b and 4c below.		
b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations.		
c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes.		
5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer lines 5b and 5c below (if applicable). Also, provide detail in Part VI , including (i) the names and EIN numbers of the supported organizations added, substituted, or removed; (ii) the reasons for each such action; (iii) the authority under the organization's organizing document authorizing such action; and (iv) how the action was accomplished (such as by amendment to the organizing document).		
b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?		
c Substitutions only. Was the substitution the result of an event beyond the organization's control?		
6 Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI .		
7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (as defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990).		
8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described on line 7? If "Yes," complete Part I of Schedule L (Form 990).		
9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons, as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI .		
b Did one or more disqualified persons (as defined on line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI .		
c Did a disqualified person (as defined on line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI .		
10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer line 10b below.		
b Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings.)		

Part IV Supporting Organizations (continued)

	Yes	No
11 Has the organization accepted a gift or contribution from any of the following persons?		
a A person who directly or indirectly controls, either alone or together with persons described on lines 11b and 11c below, the governing body of a supported organization?		
b A family member of a person described on line 11a above?		
c A 35% controlled entity of a person described on line 11a or 11b above? If "Yes" to line 11a, 11b, or 11c, provide detail in Part VI .		

Section B. Type I Supporting Organizations

	Yes	No
1 Did the governing body, members of the governing body, officers acting in their official capacity, or membership of one or more supported organizations have the power to regularly appoint or elect at least a majority of the organization's officers, directors, or trustees at all times during the tax year? If "No," describe in Part VI how the supported organization(s) effectively operated, supervised, or controlled the organization's activities. If the organization had more than one supported organization, describe how the powers to appoint and/or remove officers, directors, or trustees were allocated among the supported organizations and what conditions or restrictions, if any, applied to such powers during the tax year.		
2 Did the organization operate for the benefit of any supported organization other than the supported organization(s) that operated, supervised, or controlled the supporting organization? If "Yes," explain in Part VI how providing such benefit carried out the purposes of the supported organization(s) that operated, supervised, or controlled the supporting organization.		

Section C. Type II Supporting Organizations

	Yes	No
1 Were a majority of the organization's directors or trustees during the tax year also a majority of the directors or trustees of each of the organization's supported organization(s)? If "No," describe in Part VI how control or management of the supporting organization was vested in the same persons that controlled or managed the supported organization(s).		

Section D. All Type III Supporting Organizations

	Yes	No
1 Did the organization provide to each of its supported organizations, by the last day of the fifth month of the organization's tax year, (i) a written notice describing the type and amount of support provided during the prior tax year, (ii) a copy of the Form 990 that was most recently filed as of the date of notification, and (iii) copies of the organization's governing documents in effect on the date of notification, to the extent not previously provided?		
2 Were any of the organization's officers, directors, or trustees either (i) appointed or elected by the supported organization(s), or (ii) serving on the governing body of a supported organization? If "No," explain in Part VI how the organization maintained a close and continuous working relationship with the supported organization(s).		
3 By reason of the relationship described on line 2, above, did the organization's supported organizations have a significant voice in the organization's investment policies and in directing the use of the organization's income or assets at all times during the tax year? If "Yes," describe in Part VI the role the organization's supported organizations played in this regard.		

Section E. Type III Functionally Integrated Supporting Organizations

1 Check the box next to the method that the organization used to satisfy the Integral Part Test during the year (see instructions).		
a ☐ The organization satisfied the Activities Test. Complete line 2 below.		
b ☐ The organization is the parent of each of its supported organizations. Complete line 3 below.		
c ☐ The organization supported a governmental entity. Describe in Part VI how you supported a governmental entity (see instructions).		
2 Activities Test. Answer lines 2a and 2b below.		
a Did substantially all of the organization's activities during the tax year directly further the exempt purposes of the supported organization(s) to which the organization was responsive? If "Yes," then in Part VI identify those supported organizations and explain how these activities directly furthered their exempt purposes, how the organization was responsive to those supported organizations, and how the organization determined that these activities constituted substantially all of its activities.		
b Did the activities described on line 2a, above, constitute activities that, but for the organization's involvement, one or more of the organization's supported organization(s) would have been engaged in? If "Yes," explain in Part VI the reasons for the organization's position that its supported organization(s) would have engaged in these activities but for the organization's involvement.		
3 Parent of Supported Organizations. Answer lines 3a and 3b below.		
a Did the organization have the power to regularly appoint or elect a majority of the officers, directors, or trustees of each of the supported organizations? If "Yes" or "No," provide details in Part VI .		
b Did the organization exercise a substantial degree of direction over the policies, programs, and activities of each of its supported organizations? If "Yes," describe in Part VI the role played by the organization in this regard.		

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations

- 1 ☐ Check here if the organization satisfied the Integral Part Test as a qualifying trust on Nov. 20, 1970 (explain in Part VI). **See instructions.** All other Type III non-functionally integrated supporting organizations must complete Sections A through E.

Section A – Adjusted Net Income		(A) Prior Year	(B) Current Year (optional)
1	Net short-term capital gain	1	
2	Recoveries of prior-year distributions	2	
3	Other gross income (see instructions)	3	
4	Add lines 1 through 3.	4	
5	Depreciation and depletion	5	
6	Portion of operating expenses paid or incurred for production or collection of gross income or for management, conservation, or maintenance of property held for production of income (see instructions)	6	
7	Other expenses (see instructions)	7	
8	Adjusted Net Income (subtract lines 5, 6, and 7 from line 4)	8	

Section B – Minimum Asset Amount		(A) Prior Year	(B) Current Year (optional)
1	Aggregate fair market value of all non-exempt-use assets (see instructions for short tax year or assets held for part of year):		
a	Average monthly value of securities	1a	
b	Average monthly cash balances	1b	
c	Fair market value of other non-exempt-use assets	1c	
d	Total (add lines 1a, 1b, and 1c)	1d	
e	Discount claimed for blockage or other factors (explain in detail in Part VI):		
2	Acquisition indebtedness applicable to non-exempt-use assets	2	
3	Subtract line 2 from line 1d.	3	
4	Cash deemed held for exempt use. Enter 0.015 of line 3 (for greater amount, see instructions).	4	
5	Net value of non-exempt-use assets (subtract line 4 from line 3)	5	
6	Multiply line 5 by 0.035.	6	
7	Recoveries of prior-year distributions	7	
8	Minimum Asset Amount (add line 7 to line 6)	8	

Section C – Distributable Amount			Current Year
1	Adjusted net income for prior year (from Section A, line 8, column A)	1	
2	Enter 0.85 of line 1.	2	
3	Minimum asset amount for prior year (from Section B, line 8, column A)	3	
4	Enter greater of line 2 or line 3.	4	
5	Income tax imposed in prior year	5	
6	Distributable Amount. Subtract line 5 from line 4, unless subject to emergency temporary reduction (see instructions).	6	
7	☐ Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see instructions).		

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Schedule A (Form 990) 2024

Part V Type III Non-Functionally Integrated 509(a)(3) Supporting Organizations (continued)**Section D – Distributions**

		Current Year
1	Amounts paid to supported organizations to accomplish exempt purposes	1
2	Amounts paid to perform activity that directly furthers exempt purposes of supported organizations, in excess of income from activity	2
3	Administrative expenses paid to accomplish exempt purposes of supported organizations	3
4	Amounts paid to acquire exempt-use assets	4
5	Qualified set-aside amounts (prior IRS approval required – <i>provide details in Part VI</i>)	5
6	Other distributions (describe in Part VI). See instructions.	6
7	Total annual distributions. Add lines 1 through 6.	7
8	Distributions to attentive supported organizations to which the organization is responsive (provide details in Part VI). See instructions.	8
9	Distributable amount for 2024 from Section C, line 6	9
10	Line 8 amount divided by line 9 amount	10

Section E – Distribution Allocations (see instructions)

	(i) Excess Distributions	(ii) Underdistributions Pre-2024	(iii) Distributable Amount for 2024
1	Distributable amount for 2024 from Section C, line 6		
2	Underdistributions, if any, for years prior to 2024 (reasonable cause required – <i>explain in Part VI</i>). See instructions.		
3	Excess distributions carryover, if any, to 2024		
a	From 2019		
b	From 2020		
c	From 2021		
d	From 2022		
e	From 2023		
f	Total of lines 3a through 3e		
g	Applied to underdistributions of prior years		
h	Applied to 2024 distributable amount		
i	Carryover from 2019 not applied (see instructions)		
j	Remainder. Subtract lines 3g, 3h, and 3i from line 3f.		
4	Distributions for 2024 from Section D, line 7: \$		
a	Applied to underdistributions of prior years		
b	Applied to 2024 distributable amount		
c	Remainder. Subtract lines 4a and 4b from line 4.		
5	Remaining underdistributions for years prior to 2024, if any. Subtract lines 3g and 4a from line 2. For result greater than zero, <i>explain in Part VI</i> . See instructions.		
6	Remaining underdistributions for 2024. Subtract lines 3h and 4b from line 1. For result greater than zero, <i>explain in Part VI</i> . See instructions.		
7	Excess distributions carryover to 2025. Add lines 3j and 4c.		
8	Breakdown of line 7:		
a	Excess from 2020		
b	Excess from 2021		
c	Excess from 2022		
d	Excess from 2023		
e	Excess from 2024		

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Schedule A (Form 990) 2024

Part VI

Supplemental Information. Provide the explanations required by Part II, line 10; Part II, line 17a or 17b; Part III, line 12; Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c; Part IV, Section B, lines 1 and 2; Part IV, Section C, line 1; Part IV, Section D, lines 2 and 3; Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b; Part V, line 1; Part V, Section B, line 1e; Part V, Section D, lines 5, 6, and 8; and Part V, Section E, lines 2, 5, and 6. Also complete this part for any additional information. (See instructions.)

**SCHEDULE D
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service**Supplemental Financial Statements****Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.
Attach to Form 990.****Go to www.irs.gov/Form990 for instructions and the latest information.**

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

Employer identification number

OLYMPIC COMMUNITY OF HEALTH

81-4591222

Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts

Complete if the organization answered "Yes" on Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1 Total number at end of year		
2 Aggregate value of contributions to (during year)		
3 Aggregate value of grants from (during year)		
4 Aggregate value at end of year		

5 Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? ☐ Yes ☐ No

6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit? ☐ Yes ☐ No

Part II Conservation Easements

Complete if the organization answered "Yes" on Form 990, Part IV, line 7.

1 Purpose(s) of conservation easements held by the organization (check all that apply).

☐ Preservation of land for public use (for example, recreation or education)	☐ Preservation of a historically important land area
☐ Protection of natural habitat	☐ Preservation of a certified historic structure
☐ Preservation of open space	

2 Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year.

	Held at the End of the Tax Year
a Total number of conservation easements	2a
b Total acreage restricted by conservation easements	2b
c Number of conservation easements on a certified historic structure included on line 2a	2c
d Number of conservation easements included on line 2c acquired after July 25, 2006, and not on a historic structure listed in the National Register	2d

3 Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the tax year _____

4 Number of states where property subject to conservation easement is located _____

5 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? ☐ Yes ☐ No

6 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year _____

7 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year \$ _____

8 Does each conservation easement reported on line 2d above satisfy the requirements of section 170(h)(4)(B)(i) and section 170(h)(4)(B)(ii)? ☐ Yes ☐ No

9 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements.

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets

Complete if the organization answered "Yes" on Form 990, Part IV, line 8.

1a If the organization elected, as permitted under FASB ASC 958, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide in Part XIII the text of the footnote to its financial statements that describes these items.

b If the organization elected, as permitted under FASB ASC 958, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items.

(i) Revenue included on Form 990, Part VIII, line 1 \$ _____

(ii) Assets included in Form 990, Part X \$ _____

2 If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under FASB ASC 958 relating to these items.

a Revenue included on Form 990, Part VIII, line 1 \$ _____

b Assets included in Form 990, Part X \$ _____

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3 Using the organization's acquisition, accession, and other records, check any of the following that make significant use of its collection items (check all that apply).

a ☐ Public exhibition

b ☐ Scholarly research

c ☐ Preservation for future generations

d ☐ Loan or exchange program

e ☐ Other _____

4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIII.

5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection? ☐ Yes ☐ No

Part IV Escrow and Custodial Arrangements

Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a Is the organization an agent, trustee, custodian, or other intermediary for contributions or other assets not included on Form 990, Part X? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII and complete the following table.

c Beginning balance.

d Additions during the year.

e Distributions during the year.

f Ending balance.

	Amount
1c	
1d	
1e	
1f	

2a Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? ☐ Yes ☐ No

b If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided in Part XIII. ☐

Part V Endowment Funds

Complete if the organization answered "Yes" on Form 990, Part IV, line 10.

	(a) Current year	(b) Prior year	(c) Two years back	(d) Three years back	(e) Four years back
1a Beginning of year balance.					
b Contributions.					
c Net investment earnings, gains, and losses.					
d Grants or scholarships.					
e Other expenditures for facilities and programs.					
f Administrative expenses.					
g End of year balance.					

2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:

a Board designated or quasi-endowment _____ %

b Permanent endowment _____ %

c Term endowment _____ %

The percentages on lines 2a, 2b, and 2c should equal 100%.

3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:

(i) Unrelated organizations?

(ii) Related organizations?

b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?

	Yes	No
3a(i)		
3a(ii)		
3b		

4 Describe in Part XIII the intended uses of the organization's endowment funds.

Part VI Land, Buildings, and Equipment

Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.

Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land.				
b Buildings.				
c Leasehold improvements.				
d Equipment.				
e Other.				

Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, line 10c, column (B)). 0.

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Schedule D (Form 990) (Rev. 12-2024)

Part VII Investments – Other Securities

N/A

Complete if the organization answered "Yes" on Form 990, Part IV, line 11b. See Form 990, Part X, line 12.

(a) Description of security or category (including name of security)	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1) Financial derivatives.....		
(2) Closely held equity interests.....		
(3) Other		
(A)		
(B)		
(C)		
(D)		
(E)		
(F)		
(G)		
(H)		
Total. (Column (b) must equal Form 990, Part X, line 12, column (B)).....		

Part VIII Investments – Program Related

N/A

Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line 13.

(a) Description of investment	(b) Book value	(c) Method of valuation: Cost or end-of-year market value
(1)		
(2)		
(3)		
(4)		
(5)		
(6)		
(7)		
(8)		
(9)		
Total. (Column (b) must equal Form 990, Part X, line 13, column (B)).....		

Part IX Other Assets

N/A

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line 15.

(a) Description	(b) Book value
(1)	
(2)	
(3)	
(4)	
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 15, column (B)).....	

Part X Other Liabilities

Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25.

1. (a) Description of liability	(b) Book value
(1) Federal income taxes	
(2) ACCRUED PAYROLL LIABILITIES	91,577.
(3) OPERATING LEASE LIABILITY - CURRENT	16,516.
(4) OPERATING LEASE LIABILITY - NONCURRENT	59,974.
(5)	
(6)	
(7)	
(8)	
(9)	
Total. (Column (b) must equal Form 990, Part X, line 25, column (B)).....	168,067.

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FASB ASC 740. Check here if the text of the footnote has been provided in Part XIII. ☐

Part XI Reconciliation of Revenue per Audited Financial Statements With Revenue per Return N/A

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total revenue, gains, and other support per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:		
a	Net unrealized gains (losses) on investments	2a	
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b.	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total revenue. Add lines 3 and 4c . (This must equal Form 990, Part I, line 12.)	5	

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return N/A

Complete if the organization answered "Yes" on Form 990, Part IV, line 12a.

1	Total expenses and losses per audited financial statements	1	
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIII.)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b.	4a	
b	Other (Describe in Part XIII.)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses. Add lines 3 and 4c . (This must equal Form 990, Part I, line 18.)	5	

Part XIII Supplemental Information

Provide the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; Part IV, lines 1b and 2b; Part V, line 4; Part X, line 2; Part XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to provide any additional information.

**SCHEDULE J
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered "Yes" on Form 990, Part IV, line 23.

Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Name of the organization

OLYMPIC COMMUNITY OF HEALTH

Employer identification number

81-4591222

Part I Questions Regarding Compensation

1a Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.

- | | |
|--|--|
| ☐ First-class or charter travel | ☐ Housing allowance or residence for personal use |
| ☐ Travel for companions | ☐ Payments for business use of personal residence |
| ☐ Tax indemnification and gross-up payments | ☐ Health or social club dues or initiation fees |
| ☐ Discretionary spending account | ☐ Personal services (such as maid, chauffeur, chef) |

b If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain

2 Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors, trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?

3 Indicate which, if any, of the following the organization used to establish the compensation of the organization's CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III.

- | | |
|--|---|
| ☐ Compensation committee | ☐ Written employment contract |
| ☐ Independent compensation consultant | ☒ Compensation survey or study |
| ☐ Form 990 of other organizations | ☒ Approval by the board or compensation committee |

4 During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing organization or a related organization:

- | | | |
|--|-----------|---|
| a Receive a severance payment or change-of-control payment? | 4a | X |
| b Participate in or receive payment from a supplemental nonqualified retirement plan? | 4b | X |
| c Participate in or receive payment from an equity-based compensation arrangement? | 4c | X |
- If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.

Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.

5 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of:

- | | | |
|--|-----------|---|
| a The organization? | 5a | X |
| b Any related organization? | 5b | X |
- If "Yes" on line 5a or 5b, describe in Part III.

6 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of:

- | | | |
|--|-----------|---|
| a The organization? | 6a | X |
| b Any related organization? | 6b | X |
- If "Yes" on line 6a or 6b, describe in Part III.

7 For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments not described on lines 5 and 6? If "Yes," describe in Part III

8 Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regulations section 53.4958-4(a)(3)?
If "Yes," describe in Part III

9 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) (Rev. 12-2024)

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that aren't listed on Form 990, Part VII.

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual.

(A) Name and Title		(B) Breakdown of W-2 and/or 1099-MISC and/or 1099-NEC compensation			(D) Nontaxable benefits	(E) Total of columns(B)(i)-(D)	(F) Compensation in column (B) reported as deferred on prior Form 990
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation			
1	CELESTE SCHOENTHALER EXECUTIVE DIR.	(i) 170,716.	(ii) 0.	(iii) 0.	0.	170,716.	0.
		(ii) 0.	0.	0.	0.	0.	0.
2		(i)					
		(ii)					
3		(i)					
		(ii)					
4		(i)					
		(ii)					
5		(i)					
		(ii)					
6		(i)					
		(ii)					
7		(i)					
		(ii)					
8		(i)					
		(ii)					
9		(i)					
		(ii)					
10		(i)					
		(ii)					
11		(i)					
		(ii)					
12		(i)					
		(ii)					
13		(i)					
		(ii)					
14		(i)					
		(ii)					
15		(i)					
		(ii)					
16		(i)					
		(ii)					

Part III Supplemental Information

Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information.

**SCHEDULE O
(Form 990)**

(Rev. December 2024)

Department of the Treasury
Internal Revenue Service

Name of the organization

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on
Form 990 or 990-EZ or to provide any additional information.
Attach to Form 990 or Form 990-EZ.

Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

**Open to Public
Inspection**

Employer identification number

OLYMPIC COMMUNITY OF HEALTH

81-4591222

FORM 990, PART I, LINE 1 - ORGANIZATION MISSION OR SIGNIFICANT ACTIVITIES

OLYPMIC COMMUNITY OF HEALTH (OCH) IS A REGIONAL HEALTH COLLABORATIVE SERVING A MOSTLY RURAL 3-COUNTY REGION. OCH BRINGS TOGETHER PARTNERS FROM MANY DIFFERENT BACKGROUNDS, SECTORS, COMMUNITIES, AND TRIBES. BUILDING BRIDGES BETWEEN AND AMONG THE COMMUNITY AND CLINICAL WORKFORCE TO CREATE A MORE PERSON-CENTERED APPROACH TO HEALTH. FOR EXAMPLE, OCH HOSTS A VARIETY OF LEARNINGS AND CONVENINGS THROUGHOUT THE YEAR TO FOSTER RELATIONSHIP BUILDING, PEER SHARING, AND IMPROVED CONNECTIONS ACROSS THE REGION.

FORM 990, PART III, LINE 1 - ORGANIZATION MISSION

OLYPMIC COMMUNITY OF HEALTH (OCH) IS A REGIONAL HEALTH COLLABORATIVE SERVING A MOSTLY RURAL 3-COUNTY REGION. OCH BRINGS TOGETHER PARTNERS FROM MANY DIFFERENT BACKGROUNDS, SECTORS, COMMUNITIES, AND TRIBES. BUILDING BRIDGES BETWEEN AND AMONG THE COMMUNITY AND CLINICAL WORKFORCE TO CREATE A MORE PERSON-CENTERED APPROACH TO HEALTH. FOR EXAMPLE, OCH HOSTS A VARIETY OF LEARNINGS AND CONVENINGS THROUGHOUT THE YEAR TO FOSTER RELATIONSHIP BUILDING, PEER SHARING, AND IMPROVED CONNECTIONS ACROSS THE REGION.

FORM 990, PART VI, LINE 11B - FORM 990 REVIEW PROCESS

REVIEWED BY THE BOARD OF DIRECTORS AND FINANCE COMMITTEE.

FORM 990, PART VI, LINE 12C - EXPLANATION OF MONITORING AND ENFORCEMENT OF CONFLICTS

EACH DIRECTOR REVIEWS AND SIGNS CONFLICT OF INTEREST POLICY ANNUALLY

FORM 990, PART VI, LINE 15A - COMPENSATION REVIEW & APPROVAL PROCESS - CEO & TOP MANAGEMENT

EXECUTIVE DIRECTOR COMPLETES ANNUAL PERFORMANCE REVIEW WITH THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, LINE 19 - OTHER ORGANIZATION DOCUMENTS PUBLICLY AVAILABLE

GOVERNING DOCUMENTS, POLICIES, AND FINANCIAL STATEMENTS ARE AVAILABLE ON THE ORGANIZATION'S WEBSITE OR UPON REQUEST.

12/31/24

2024 FEDERAL BOOK DEPRECIATION SCHEDULE

PAGE 1

CLIENT 5877

OLYMPIC COMMUNITY OF HEALTH

81-4591222

NO.	DESCRIPTION	DATE ACQUIRED	DATE SOLD	COST/ BASIS	BUS. PCT.	CUR 179 BONUS	SPECIAL DEPR. ALLOW.	PRIOR 179/ BONUS/ SP. DEPR.	PRIOR DEC. BAL DEPR.	SALVAG /BASIS REDUCT	DEPR. BASIS	PRIOR DEPR.	METHOD	LIFE	RATE	CURRENT DEPR.
FORM 990/990-PF																
AMORTIZATION																
1	OPERATING LEASE RIGHT-OF-USE	1/01/24		91,920							91,920		S/L	5		18,384
	TOTAL AMORTIZATION			91,920		0	0	0	0	0	91,920	0				18,384
	TOTAL DEPRECIATION			0		0	0	0	0	0	0	0				0
	GRAND TOTAL AMORTIZATION			91,920		0	0	0	0	0	91,920	0				18,384
	GRAND TOTAL DEPRECIATION			0		0	0	0	0	0	0	0				0

Olympic Community of Health

SBAR: Employee Handbook Updates

Presented to the OCH Executive Committee on October 7, 2025

Updated and presented to the Board of Directors on October 13, 2025

Situation

The OCH Employee Handbook outlines the policies that impact the employees and guide human resources activities at OCH. This is a governance policy so requires the review and approval by the Board of Directors. It is typically updated every three years. The last full update happened in 2022, and one minor update was approved in 2024. The Executive Director seeks review and approval by the Board of Directors for the proposed changes.

Background

The employee handbook is a comprehensive overview of policies, procedures, and guidelines that impact much of the day-to-day at OCH. Staff undertook the following steps before bringing to the committee:

- Initial review by the executive director and director of operations
- Review of handbooks of other ACHs
- Full team discussion and input
- Legal review by OCHs external general legal counsel for adherence to current relevant policies

The Board of Directors has full authority to approve or decline proposed changes. The employee handbook also guides the overall culture of OCH and has deep impacts on employee engagement.

Action

A track changes version of the employee handbook is included in the packet. Staff changes are in red and blue, legal comments and edits are in purple. For ease, here is a summary of proposed changes:

- Throughout: minor copy edits.
- Page 5-6: updates to equal employment opportunity language as advised by legal.
- Pages 6-8: updates to harassment policy and procedure as advised by legal.
- Page 9: updates to drug and alcohol policy as advised by legal.
- Pages 9-11: updates to workplace violence policy as advised by legal.
- Page 11: minor clarification on FLSA status section as advised by legal.
- Page 12: minor clarification on employment records procedures.
- Page 14: deletion of a sentence about Safe Harbor Policy as advised by legal.
- Page 15: added details on frequency of performance evaluations to align with current practice.
- Page 18: clarification on vacation roll over policy and suggested changes to amount of roll over and infrequent practice of vacation pay out from one year to another based on current practices and accruals.
- Page 21: deletion of leave usage information as advised by legal.

- Page 21: clarification and alignment to current law on workers' compensation as advised by legal.
- Page 22: edits to bereavement leave as advised by legal.
- Page 22-23: proposed addition of paid sabbatical program for review and discussion to support growth, development and to avoid burnout for longer tenured employees.
- Page 23: proposed change to employee retirement contribution for those with longer tenure.
- Page 25: updates to military leave as advised by legal counsel.
- Page 29: minor edits to workplace conduct as advised by legal counsel.
- Pages 31-32: updates to use of social media policy based on current practices and legal counsel.
- Page 33: updates to inspections policy as advised by legal counsel.
- Page 35: minor update to use of facilities to be more modern.
- Page 36: alignment with L&I policies and other sections of the handbook.
- Page 39: minor update to business expense reimbursement.
- Page 39: proposed change to vacation leave payout for departing employees.

Staff are happy to address questions and concerns and encourage dialogue and discussion for clear understanding by committee and board members.

Once approved, staff will clean up the document, share with staff, and will ask staff to review and sign the policy. Staff will update internal workflows and practices accordingly.

For the increase in retirement contribution for those with longer tenure, staff will bring a separate SBAR for review and approval for the specific change in contribution.

The Executive Committee reviewed the policy and proposed changes in detail and recommended one edit as a part of their approval. That edit has been made.

Recommendation

The OCH Board of Directors approves changes to the OCH employee handbook as proposed.



Employee Handbook

Approved May 9, 2022
Amendment: February 7, 2024

ABOUT THIS HANDBOOK

We prepared this handbook to help employees find the answers to many questions that they may have regarding their employment with Olympic Community of Health. Please take the necessary time to read it.

We do not expect this handbook to answer all questions. Supervisors and Human Resources also serve as a major source of information.

Neither this handbook nor any other verbal or written communication by a management representative is, nor should it be considered to be, an agreement, contract of employment, express or implied, or a promise of treatment in any particular manner in any given situation, nor does it confer any contractual rights whatsoever. Olympic Community of Health adheres to the policy of employment at will, which permits the Organization or the employee to end the employment relationship at any time, with or without reason or notice.

No Organization representative other than the Executive Director may modify at-will status and/or provide any special arrangement concerning terms or conditions of employment in an individual case or generally and any such modification must be in a signed writing.

Many matters covered by this handbook, such as benefit plan descriptions and other separate yet related policies, are also described in separate Organization documents. These Organization documents are always controlling over any statement made in this handbook or by any member of management.

This handbook states only general Organization guidelines. The Organization may, at any time, in its sole discretion, modify or vary from anything stated in this handbook.

This handbook supersedes all prior handbooks.

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Section 1 - Governing Principles of Employment

1-1 Introduction

For employees who are commencing employment with Olympic Community of Health ("Olympic Community of Health" or "the Organization"), on behalf of Olympic Community of Health, let me extend a warm and sincere welcome.

For employees who have been with us, thanks for your past and continued service.

I extend my personal best wishes for success and happiness here at Olympic Community of Health. Our mission is to solve health problems through collaborative action. We understand that our employees provide the services that our partners and community members rely upon, and who will enable us to create new opportunities in the years to come.

Celeste Schoenthaler, Executive Director

1-2 Open Door Policy

One of our best tools in improving our relationship is communicating - talking and listening to each other. If you are having any problems, if you are just wondering about something, or if there is something you want to talk about, we want to listen and to talk to you about it. You can talk to anyone in this Organization, including the Executive Director or a supervisor or manager.

1-3 Equal Employment Opportunity

Olympic Community of Health is an Equal Opportunity Employer that does not discriminate on the basis of race (~~WA law defines race to include traits historically associated or perceived to be associated with race including, but not limited to, hair texture and protective hairstyles... including afros, braids, locks, and twists~~), color, religion, national origin, citizenship or immigration status, age, sex, gender identity, sexual orientation, marital status, military or ~~honorably discharged~~ veteran status, physical, ~~L~~ sensory ~~or~~ mental disability, the use of a trained service animal by a person with a disability, status as a victim of domestic violence, ~~L~~ sexual assault, ~~or~~ stalking, or any other status or characteristic protected by applicable federal, state or local laws and ordinances. Olympic Community of Health's management team and Board of Directors are dedicated to this policy regarding recruitment, hiring, placement, promotion, transfer, training, compensation, benefits, employee activities, access to facilities and programs, termination, and general treatment during employment.

The Organization will endeavor to make a reasonable accommodation of an otherwise qualified applicant or employee related to ~~an individual's~~ physical, sensory, or mental disability; sincerely held religious beliefs and practices; and/or any other reason required by applicable law, unless doing so would impose an undue hardship upon the Organization's business operations.

Commented [AR1]: Don't need to include this portion here.

Any applicant or employee who needs an accommodation in order to perform the essential functions of the job should contact the Executive Director to request such an accommodation. The individual should specify what accommodation is needed to perform the job and submit supporting documentation explaining the basis for the requested accommodation, to the extent permitted and in accordance with applicable law. The Organization then will review ~~and analyze~~ the request, including engaging in an interactive process with the employee or applicant, to identify if such an accommodation can be made. The Organization will evaluate requested accommodations, and as appropriate, identify other possible accommodations, if any. ~~The individual will be notified in writing~~ of The Organization's decision regarding the request within a reasonable period. The Organization treats all medical information submitted as part of the accommodation process in a confidential manner.

Commented [AR2]: Recommend specifying how notification will happen (in writing via letter or email) and who will notify (ED or HR?)

Any employees with questions or concerns about equal employment opportunities in the workplace are encouraged to bring these issues to the Executive Director's attention. The Organization will not allow any form of retaliation against individuals who raise issues of equal employment opportunity. If employees feel they have been subjected to any such retaliation, they should contact the Executive Director. To ensure our workplace is free of artificial barriers, violation of this policy including any improper retaliatory conduct will lead to corrective action, up to and including discharge. All employees must cooperate with all investigations conducted pursuant to this policy.

1-4 Non-Harassment

~~It is~~ Olympic Community of Health's policy to prohibit ~~intentional and unintentional~~ harassment of ~~or against~~ job applicants, contractors, interns, volunteers or employees by or towards another employee, supervisor, vendor, customer or any third party on the basis of race, color, religion, national origin, citizenship or immigration status, age, sex, gender identity, sexual orientation, marital status, military or ~~honorably discharged veteran~~ status, physical, ~~L~~-sensory~~L~~-or mental disability, the use of a trained service animal by a person with a disability, status as a victim of domestic violence~~L~~-sexual assault~~L~~-or stalking, or any other status or characteristic protected by applicable federal, state or local laws (referred to as "protected characteristics"). Such conduct will not be tolerated by Olympic Community of Health.

Commented [AR3]: You can't punish unintentional behavior. I understand your intent to cast as wide a net as possible and address unconscious bias - maybe rephrase to indicate you are addressing unconscious bias?

Commented [AR4]: Harassment of encompasses all harassment.

The purpose of this policy is not to regulate our employees' personal morality, but ~~rather is~~ to ensure that no one ~~harasses-engages in harassing behavior towards~~ another individual in the workplace, ~~including while~~ on Organization premises, ~~while~~ on Organization business (whether or not on Organization premises) or while representing the Organization. ~~In addition to being a violation of this policy, harassment or retaliation based on any protected characteristic as defined by applicable federal, state, or local laws also is unlawful. For example, sexual harassment and retaliation against an individual because the individual filed a complaint of sexual harassment or because an individual aided, assisted or testified in an investigation or proceeding involving a complaint of sexual harassment as defined by applicable federal, state, or local laws are unlawful and violates this policy.~~

Harassment Defined

Harassment **generally** is defined in this policy as unwelcome verbal, visual or physical conduct that denigrates or shows hostility or aversion towards an individual because of any actual or perceived protected characteristic or has the purpose or effect of **unreasonably** interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Commented [AR5]: This seems to indicate some level of harassment is ok. Recommend deleting this word.

Harassment can be verbal (including slurs, jokes, insults, epithets, gestures, or teasing), visual (including offensive posters, symbols, cartoons, drawings, computer displays, text messages, social media posts or e-mails) or physical conduct (including physically threatening another, blocking someone's way, etc.). ~~Such conduct violates this policy, even if it does not rise to the level of a violation of applicable federal, state, or local laws. Simply stated, not all harassment is unlawful but may violate organization policies;~~ Employees are expected to always act in a manner consistent with the intended purpose of this policy, which is to have a workplace free of any harassing behavior.

This policy prohibits **unacceptable** harassment or conduct in the workplace and at company sponsored business and social events. Additionally, harassment via social media, email, and text messages are within the scope of prohibited conduct; for example, a harassing post on an employee's private Facebook page violates this policy if it is about a co-worker or customer.

Commented [AR6]: Again, this appears to create impression that some harassment is ok. Recommend black and white policy of no harassment allowed.

Sexual Harassment Defined

Sexual harassment can include all of the above actions, as well as other unwelcome conduct, such as unwelcome or unsolicited sexual advances, requests for sexual favors, conversations regarding sexual activities and other verbal, visual or physical conduct of a sexual nature when:

- submission to that conduct or those advances or requests is made either explicitly or implicitly a term or condition of an individual's employment; or
- submission to or rejection of the conduct or advances or requests by an individual is used as the basis for employment decisions affecting the individual; or
- the conduct or advances or requests have the purpose or effect of **unreasonably** interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Examples of conduct that violate this policy include, but are not limited to:

- unwelcome flirtations, leering, whistling, touching, pinching, assault, blocking normal movement;
- requests for sexual favors or demands for sexual favors in exchange for favorable treatment;
- obscene or vulgar gestures, posters or comments;
- sexual jokes or comments about a person's body, sexual prowess or sexual deficiencies;
- propositions or suggestive or insulting comments of a sexual nature;
- derogatory cartoons, posters and drawings;

- sexually explicit e-mails, text messages or voicemails;
- uninvited touching of a sexual nature;
- unwelcome sexually related comments;
- conversation about one's own or someone else's sex life;
- conduct or comments consistently targeted at only one gender, even if the content is not sexual; and
- teasing or other conduct directed toward a person because of the person's gender.

Reporting Procedures

If ~~the an~~ employee has been subjected to or witnessed conduct which violates this policy, ~~thate~~ employee should immediately report the matter to the Executive Director. If the employee is unable for any reason to contact this person, or if the Executive Director is unresponsive, the employee should contact the Board President.

Any supervisor or manager who witnesses an act of harassment or who receives a complaint of harassment and fails to take appropriate action, which includes reporting the act or complaint to the Executive Director, ~~will may~~ be subject to corrective action.

Commented [AR7]: Do you want to change this to "will be subject to corrective action"? Do you want a circumstance where a supervisor or manager witness or receives a report and then fails to take appropriate action?

Investigation Procedures

Every report of perceived harassment will be fully, and promptly investigated, and ~~all appropriate~~ corrective action will be taken ~~where appropriate~~. All complaints will be kept confidential to the extent possible, ~~but confidentiality cannot be guaranteed~~. All employees must cooperate with all investigations conducted pursuant to this policy. ~~Exceptions will be granted in the case where a victim of harassment could be re-traumatized.~~

Commented [AR8]: If a supervisor witnesses sexual harassment of an employee and reports it, does this require the victim to cooperate with any investigation? This could re-victimize the victim.

Retaliation Prohibited

In addition, the Organization will not allow any form of retaliation against individuals who report unwelcome conduct to management, or who cooperate in the investigations of such reports in accordance with this policy, or employees associated with a complaining employee or witness, such as a spouse. If the employee has been subjected to any such retaliation, the employee should report it in the same manner in which the employee would report a claim of perceived harassment under this policy.

Violation of this policy including any improper retaliatory conduct will result in disciplinary action, up to and including termination.

1-5 Drug-Free and Alcohol-Free Workplace

To help ensure a safe, healthy, and productive work environment for our employees and others, to protect Organization property, and to ensure efficient operations, Olympic Community of Health has adopted a policy of maintaining a workplace free of drugs and alcohol. This policy applies to all employees and other individuals who perform work for the Organization.

The unlawful or unauthorized use, abuse, solicitation, theft, possession, transfer, purchase, sale, manufacture, or distribution of controlled substances (including medical marijuana), drug paraphernalia or alcohol by an individual anywhere on Organization premises, while on Organization business (whether or not on Organization premises) or while representing the Organization, is strictly prohibited. Employees, ~~volunteers, or independent contractors and other individuals who work for the Organization~~ also are prohibited from reporting to work or working while they are using or under the influence of alcohol or any controlled substances, which may impact the employee's ability to perform their job or otherwise pose safety concerns, except when the use is pursuant to a licensed medical practitioner's instructions and the licensed medical practitioner authorized the employee or individual to report to work, and verified they are able to do safely. However, this exception does not extend any right to report to work under the influence of medical marijuana or to use medical marijuana as a defense to a positive drug test, to the extent the employee is subject to any drug testing requirement, except as permitted by and in accordance with applicable law. This restriction does not apply to responsible drinking of alcohol at business meetings and related social outings.

Although Washington State has legalized marijuana for medicinal or recreational purposes, the Organization ~~is not required to~~ **does not** allow ~~the medicinal or recreational~~ use of marijuana in the workplace. Marijuana use or being under the influence ~~of marijuana~~ is strictly prohibited on Organization property and while conducting Organization business.

~~OCH-The Organization~~ reserves the right to require employees to submit to drug testing pursuant to Washington state law, to detect the presence of alcohol, illegal drugs, pursuant to state or federal law, or other controlled substances if it has reason to believe that an employee may be under the influence of such substances or is currently using such substances. Refusal to consent to such a test may result in disciplinary action up to and including dismissal.

Violation of this policy will result in corrective action, up to and including discharge.

The Organization maintains a policy of non-discrimination and will endeavor to make reasonable accommodations to assist individuals recovering from substance and alcohol dependencies, and those who have a medical history which reflects treatment for substance abuse conditions. However, employees may not request an accommodation to avoid corrective action for a policy violation. We encourage employees to seek assistance before their substance abuse or alcohol misuse renders them unable to perform the essential functions of their jobs or jeopardizes the health and safety of any Organization employee, including themselves.

1-6 Workplace Violence

Olympic Community of Health is strongly committed to providing a safe workplace. The purpose of this policy is to minimize the risk of personal injury to employees and damage to Organization and personal property.

Olympic Community of Health does not expect employees to become experts in psychology or to physically subdue a threatening or violent individual. Indeed, Olympic Community of Health

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specifically discourages employees from engaging in any physical confrontation with a violent or potentially violent individual. However, Olympic Community of Health does expect and encourage employees to exercise reasonable judgment in identifying potentially dangerous situations.

Experts in the mental health profession state that before engaging in acts of violence, troubled individuals often exhibit one or more of the following behaviors or signs: over-resentment, anger and hostility; extreme agitation; making ominous threats such as bad things will happen to a particular person, or a catastrophic event will occur; sudden and significant decline in work performance; irresponsible, irrational, intimidating, aggressive or otherwise inappropriate behavior; reacting to questions with an antagonistic or overtly negative attitude; discussing weapons and their use, and/or brandishing weapons in the workplace; overreacting or reacting harshly to changes in Organization policies and procedures; personality conflicts with co-workers; obsession or preoccupation with a co-worker or supervisor; attempts to sabotage the work or equipment of a co-worker; blaming others for mistakes and circumstances; or demonstrating a propensity to behave and react irrationally.

Prohibited Conduct

Threats, threatening language or any other acts of aggression or violence made toward or by any Organization employee WILL NOT BE TOLERATED. For purposes of this policy, a threat includes any verbal or physical harassment or abuse, any attempt at ~~intimidating~~ intimidation or of instilling fear in others, menacing gestures, flashing of weapons, stalking or any other hostile, aggressive, injurious, or destructive action ~~undertaken for the purpose of domination or intimidation. To the extent permitted by law, employees~~ Employees and visitors are prohibited from carrying weapons onto Organization premises ~~or property, including the Organization's parking lot.~~

Commented [AR9]: You can forbid employees and visitors from bringing weapons upon your property.

Procedures for Reporting a Threat

All potentially dangerous situations, including threats by co-workers, should be reported immediately to any member of management with whom the employee feels comfortable. Reports of threats may be maintained confidential to the extent ~~possible maintaining confidentiality does not impede Olympic Community of Health's ability to investigate and respond to the complaints.~~ All threats will be promptly investigated. All employees must cooperate with all investigations ~~under this section.~~ No employee will be subjected to retaliation, intimidation, or disciplinary action as a result of reporting a threat in good faith under this policy.

If the Organization determines, after an appropriate good faith investigation, that someone has violated this policy, the Organization will take ~~swift and~~ appropriate corrective action.

Commented [AR10]: Swift can be in the eye of the beholder and be used to argue your actions weren't fast enough. Recommend deleting here.

If the employee is the recipient of a threat made by an outside party, that employee should follow the steps detailed in this section. It is important for the Organization to be aware of any potential danger in its offices. Indeed, the Organization wants to take effective measures to protect everyone from the threat of a violent act by employees or by anyone else.

If you have obtained an Order for Victim Protection that includes Olympic Community Health as your workplace, immediately provide a copy of the order to Human Resources or your supervisor. Orders for Victim Protection include, but are not limited to, the following types of court orders – protection order, no contact order, restraining order and anti-harassment order.

Section 2 - Operational Policies

2-1 Employee Classifications

For purposes of this handbook, all Olympic Community of Health employees fall within one of the classifications below:

Classifications:

Full-Time Employees - Employees who regularly work at least 32 hours per week who were not hired on a short-term basis.

Part-Time Employees - Employees who regularly work fewer than 32 hours per week who were not hired on a short-term basis.

Hourly Employees – Employees who work irregularly, are paid on an hourly basis, and are not eligible for paid benefits including medical coverage, holiday pay, or retirement contributions. These employees are typically non-exempt.

Short-Term Employees - Employees who were hired for a specific short-term project, or on a short-term freelance, per diem or temporary basis. Short-Term employees generally are not eligible for Organization benefits but are eligible to receive statutory benefits unless otherwise provided by law.

Acting/Interim Appointments - Acting and interim appointments are temporary appointments made in an emergency, due to the absence or resignation of an employee, to support the growth and development of employees, or during a workload peak. The Executive Director and/or Board of Directors will appoint individuals to acting appointments and will determine the compensation and terms of service for acting appointments.

FLSA Status (exempt or non-exempt):

In addition to the above classifications, employees are categorized as either "**exempt**" or "**non-exempt**" for purposes of federal and state wage and hour laws. Employees classified as exempt do not receive overtime pay; they generally receive the same monthly salary regardless of hours worked. Actual hours worked by exempt employees will may vary from day to day and week to week. An employee who is not exempt from the overtime provisions of federal and state laws is considered non-exempt. Non-exempt employees are entitled to receive overtime for all hours worked beyond 40 in a workweek and may be entitled to certain meal and rest periods. The

employee will be informed of these classifications upon hire and informed of any subsequent changes to the classifications.

2-2 Employee Service Credit

"Length of service" refers to the length of time that employees spend as active full-time or part-time employees with Olympic Community of Health. Service begins on the day they become full-time or part-time employees.

Length of service may be used in determining certain employee benefits, such as time-off benefits. Employees will not lose credit for service with the Organization provided their last day of service was within 60 days of again becoming an active employee. The Executive Director will discuss this issue with any rehired employees upon hire.

2-3 Your Employment Records

In order to obtain their position, employees have provided personal information, such as address and telephone number. This information is contained in their secure personnel file which can be accessed only by authorized individuals.

Employees should keep their personnel file up to date by informing the Executive Director of any changes. Employees also should inform the Executive Director of any specialized training or skills they acquire, as well as any changes to any required visas. Unreported changes of address, marital status, etc. can affect withholding tax and benefit coverage. Further, an "out of date" emergency contact or an inability to reach employees in a crisis could cause a severe health or safety risk or other significant problem.

2-4 Working Hours and Schedule

Olympic Community of Health normally is open for business from 8:00 to 5:00, Monday through Friday. Due to the nature of community-based work, employees may be asked, on occasion, to work on weekends or evenings.

Although working days and hours may vary, employees will be assigned a work schedule and will generally be expected to begin and end work according to the schedule. To accommodate the needs of the business, at some point Olympic Community of Health may need to change individual work schedules on either a short-term or long-term basis.

Employees will be provided meal and rest periods as required by law. A supervisor will provide further details.

Employees are required to take a meal period of at least 30 minutes which begins no less than two hours nor more than five hours from the beginning of the shift. Meal periods are generally unpaid

but may be paid when you are required to remain on duty on the premises or at a prescribed work site in the interest of the organization.

~~You~~ Employees are provided a rest period of not less than 10 minutes for each four hours of working time. Rest periods are scheduled as near as possible to the midpoint of the work period.

Olympic Community of Health offers flexible working schedules and the option to telework. Employees will be required to sign a telework agreement policy upon hire.

2-5 Timekeeping Procedures

Employees must record their actual time worked for payroll and benefit purposes and for tracking toward expense codes. Non-exempt employees must record the time work begins and ends, in the system as prescribed by management.

Altering, falsifying, or tampering with time records is prohibited and subjects the employee to discipline, up to and including discharge.

Exempt employees are required to record their daily work attendance and report full days of absence from work for reasons such as leaves of absence, sick leave, or personal business. Based on the nature of the Organization's funding, exempt employees must also track start and end times and expense codes.

It is the employee's responsibility to approve and submit time records to certify the accuracy of all time recorded. Any errors in the time record should be reported immediately to a supervisor, who will attempt to correct legitimate errors.

2-6 Overtime

Like most non-profit organizations, Olympic Community of Health experiences periods of extremely high activity. During these busy periods, additional work is required from all of us. Supervisors are responsible for monitoring business activity and requesting overtime work if it is necessary. Effort will be made to provide employees with adequate advance notice in such situations.

Any non-exempt employee who works overtime will be compensated at the rate of one and one-half times (1.5) their normal hourly wage for all time worked in excess of 40 hours each week, unless otherwise required by law.

Eligible eEmployees may work overtime only with prior management authorization.

For purposes of calculating overtime for non-exempt employees, the workweek begins at 12 a.m. on Monday and ends 168 hours later at 11:59 pm. on the following Sunday. Paid holidays, paid time off, and other paid leave time do count toward hours worked when calculating overtime.

2-7 Travel Expectations and Time for Employees

The work of Olympic Community of Health involves engagement and relationship building with partners throughout the Olympic region and the state. Travel is a routine part of our day-to-day business. Please refer to the full Travel Policy for details, expectations, reimbursement, and rules for travel.

2-8 Safe Harbor Policy for Exempt Employees

It is Olympic Community of Health's policy and practice to accurately compensate employees and to do so in compliance with all applicable state and federal laws. To ensure proper payment and that no improper deductions are made, employees must review pay stubs promptly to identify and report all errors.

Those classified as exempt salaried employees will receive a salary which is intended to compensate them for all hours they may work for Olympic Community of Health. This salary will be established at the time of hire or classification as an exempt employee. While it may be subject to review and modification from time to time, such as during salary review times, the salary will be a predetermined amount that will not be subject to deductions for variations in the quantity or quality of the work performed.

Under federal and state law, salary is subject to certain deductions. For example, unless state law requires otherwise, salary can be reduced for certain types of deductions such as a portion of health, dental or life insurance premiums; flexible spending account contributions; state, federal or local taxes; social security; voluntary contributions to a retirement plan; and other reasons allowed by law.

In any work week in which the employee performed any work, salary will not be reduced for any of the following reasons:

- partial day absences for personal reasons, sickness or disability;
- an absence because the Organization has decided to close a facility on a scheduled workday;
- absences for jury duty, attendance as a witness, or military leave in any week in which the employee performed any work (subject to any offsets as set forth above); and
- any other deductions prohibited by state or federal law.

~~However, unless state law provides otherwise, deductions may be made to accrued leave for full or partial day absences for personal reasons, sickness, or disability.~~

If employees believe they have been subject to any improper deductions, they should immediately report the matter to the Executive Director. In the event of an error, we will make every attempt to adjust the error no later than your next regular pay period.

Commented [AR11]: This paragraph openly contradicts prior one where no offsets taken for partial day absences. I recommend choosing one or the other; you can't have both.

2-9 Your Paycheck

Employees will be paid monthly for all the time worked during the past pay period. Pay periods are the 26th day of one month through the 25th day of the following month, and paydays are the 5th day of each month.

Payroll stubs itemize deductions made from gross earnings. By law, Olympic Community of Health is required to make deductions for Social Security, federal income tax and any other appropriate taxes. These required deductions also may include any court-ordered garnishments. Payroll stubs also will differentiate between regular pay received and overtime pay received [\(for non-exempt employees\)](#) and account for any reimbursement requests.

If there is an error in any employee's pay, the employee should bring the matter to the attention of the Executive Director immediately so the Organization can resolve the matter quickly and amicably.

Paychecks will be given only to the employee, unless the employee requests that they be mailed or authorizes in writing that another person may accept the check.

2-10 Direct Deposit

Olympic Community of Health strongly encourages employees to use direct deposit. Authorization forms are available from the Executive Director.

2-11 Salary Advances

Olympic Community of Health does not permit advances on paychecks or against accrued paid time off.

2-12 Performance Review

Depending on the employee's position and classification, Olympic Community of Health endeavors to review performance annually at the employee's anniversary or another annual date. A positive performance evaluation does not guarantee an increase in salary, a promotion, or continued employment. Compensation increases and the terms and conditions of employment, including job assignments, transfers, promotions, and demotions, are determined by and at the discretion of management.

New employees and employees granted promotions will receive performance reviews after three (3) months [and \(6\) months](#) to take stock of performance in their new role and to discuss early successes and challenges.

In addition to these formal performance evaluations, the Organization encourages employees and supervisors to discuss job performance on a frequent and ongoing basis.

Section 3 - Benefits

3-1 Benefits Overview

In addition to good working conditions and competitive pay, it is Olympic Community of Health's policy to provide a combination of supplemental benefits to all eligible employees. In keeping with this goal, each benefit program has been carefully devised. These benefits include time-off benefits, such as vacations and holidays, insurance, and other plan benefits. ~~We are~~OCH is constantly studying and evaluating ~~our~~ benefits programs and policies to better meet present and future requirements. These policies have been developed over the years and continue to be refined to keep up with changing times and needs.

The next few pages contain a brief outline of the benefits programs Olympic Community of Health provides employees and their families. Of course, the information presented here is intended to serve only as guidelines.

The descriptions of the insurance and other plan benefits in this handbook merely highlight certain aspects of the applicable plans for general information only. The details of those plans are spelled out in the official plan documents, which are available for review upon request from the Executive Director. Additionally, the provisions of the plans, including eligibility and benefits provisions, are summarized in the summary plan descriptions ("SPDs") for the plans (which may be revised from time to time). In the determination of benefits and all other matters under each plan, the terms of the official plan documents shall govern over the language of any descriptions of the plans, including the SPDs and this handbook.

Further, Olympic Community of Health (including the officers and administrators who are responsible for administering the plans) retains full discretionary authority to interpret the terms of the plans, as well as full discretionary authority with regard to administrative matters arising in connection with the plans and all issues concerning benefit terms, eligibility and entitlement.

While the Organization intends to maintain these employee benefits, it reserves the absolute right to modify, amend or terminate these benefits at any time and for any reason.

Of note, many of the employee benefits are described in terms of number of "days" accrued or taken. One (1) day is commensurate with the current FTE and schedule of the employee. Regular full-time and part-time employees are eligible for benefits. Hourly employees are only eligible for sick leave in accordance with Washington State law.

If employees have any questions regarding benefits, they should contact the Executive Director.

3-2 Paid Holidays

All regular employees will be paid for the following holidays (actual or observed):

New Year's Day

Martin Luther King, Jr. Day

President's Day

Memorial Day

Independence Day

Labor Day

Veterans' Day

Thanksgiving Day

Day after Thanksgiving

Christmas Day

Winter Break (business days between Christmas and New Year's)

When holidays fall or are celebrated on a regular workday, eligible employees will receive one (1) day's pay at their regular straight-time rate. Eligible employees who are called in to work on a holiday will receive one (1) day's pay at their regular straight-time rate, and an additional payment of straight-time for the actual time they work that day.

If a holiday falls within an eligible employee's approved vacation period, the eligible employee will be paid for the holiday (at the regular straight-time rate) in lieu of the vacation day.

If a holiday falls within a jury duty or bereavement leave, the eligible employee will be paid for the holiday (at the regular straight-time rate) in lieu of the leave day.

If an employee is required to work on a holiday, they may take the holiday leave and pay on an alternate day within the same pay period. This requires pre-approval by the employee's supervisor.

Hourly employees are not eligible for holiday pay.

3-3 Paid Vacations

Olympic Community of Health appreciates how hard employees work and recognizes the importance of providing time for rest and relaxation. Olympic Community of Health fully encourages employees to get this rest by taking vacation time. Full-time employees accrue paid vacation time as follows:

During the first partial calendar year of employment and the first five (5) full calendar years of employment, full-time employees accrue one (1) vacation day per month or twelve (12) for a full calendar year. Employees accrue leave monthly following the month worked.

Beginning with the sixth-year anniversary date until the day before the employee's eleventh year anniversary date, employees accrue the equivalent of sixteen (16) days per year. Beginning with the eleventh-year anniversary date, employees accrue the equivalent of twenty (20) days per year.

The maximum vacation entitlement for part-time employees is pro-rated based on hours worked.

Employees may accrue vacation and carry entitlement over from year to year. Employees may roll over, to a maximum of 1820 hours of vacation accrual per year. For certain employees, OCH will pay out up to 125 days of vacation if the employee will lose leave at the end of the year. This requires pre-approval from the Executive Director. Employees are encouraged to use vacation leave within the year to promote work-life balance and avoid burnout, so this will be used sparingly.

Every effort will be made to grant employees' vacation preference, consistent with operating schedules. However, if too many people request the same period of time off, the Organization reserves the right to choose who may take vacation during that period with decisions made by the Executive Director. Vacation requests must be submitted to managers at least two (2) weeks in advance of the requested vacation dates.

Non-exempt employees may take vacation time in 15-minute increments. Exempt employees take vacation only in full-day increments.

Upon separation of employment in good standing, employees may be paid at their current hourly rate in effect for all hours of unused, accrued vacation up to a maximum of 120 hours.

3-4 Paid Personal Holidays

All employees who have completed three months of employment are entitled to one (1) paid personal holiday per year. Personal holidays are awarded to the employee at the beginning of the calendar year.

Part-time employees accrue personal holidays in a similar manner, except on a pro-rated basis depending upon the number of hours they work. Hourly employees do not earn personal holidays.

Commented [AR12]: Do you have a cap or limit on the maximum time you can roll over from year to year? The way this reads, max 120 hours accrual per year but no cap on roll over hours.

Commented [CS13]: Requesting an increase from 5 to 12. Aligns with what carryforward balances have been at for employees with longer tenure.

Accrued, unused personal holidays are forfeited at the end of the calendar year and are not paid out at separation.

Personal holidays must be scheduled at least two (2) weeks in advance. Management reserves the right in its sole discretion to deny any requests.

3-5 Paid Sick Leave

Full-time employees are eligible to receive up to twelve (12) paid sick days each year in accordance with the accrual policy laid out in this policy. If the employees will be out of work due to illness, they must notify their supervisor as early as possible, but at least by the start of the workday. If the employee calls in sick for more than three (3) consecutive days, they may be required to provide their supervisor with a doctor's note on the day they return to work. If such verification requirement results in an unreasonable burden or expense, please contact the Executive Director.

Sick leave can be carried over from one year to the next up to a maximum of 240 hours.

Accrual

Employees begin accruing paid sick leave pursuant to this policy at the start of employment. Full-time employees accrue eight (8) hours for every month worked. Upon hire, the equivalent of six (6) months of accrued sick leave will be posted to all employees accrued sick leave balances. After six (6) months, the accrual will happen monthly following the month worked. The sick leave benefit is prorated based on FTE. Sick leave can be taken by the employee as soon as it is posted/accrued. For purposes of this policy, the accrual period is the consecutive 12-month period beginning on January 1 and ending on December 31. Part-time employees accrue sick leave in a similar manner, except on a pro-rated basis depending upon the number of hours they work. Hourly employees earn 1 hour of sick leave for every 40 hours worked, in accordance with Washington State law.

Usage

Employees may use paid sick leave for absences due to:

- an absence resulting from the employee's mental or physical illness, injury, or health condition; to accommodate the employee's need for medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition; or the employee's need for preventive medical care;
- to allow the employee to provide care for a family member with a mental or physical illness, injury, or health condition; care of a family member who needs medical diagnosis, care, or treatment of a mental or physical illness, injury, or health condition; or care for a family member who needs preventive medical care;

- when the employee's place of business has been closed by order of a public official for any health-related reason or when the employee's child's school or place of care has been closed for such a reason; or
- an absence covered under Washington's Domestic Violence Leave Act, as addressed further within the Leave for Victims of Domestic Violence.

Non-exempt employees may use sick leave in 15-minute increments while exempt employees may use sick leave in full-day increments.

Additionally, employees may use up to three (3) days of accrued sick leave per year for volunteer purposes:

- Olympic Community of Health encourages employees to become involved in their communities, especially when lending their support to programs that positively impact the health of communities in the Olympic region and programs that align with OCH values.
- Priority granted for activities supporting OCH partner organizations, public, non-profit, or Tribal entities.
- The volunteer activity must be pre-approved by the Executive Director using the form provided.
- Time spent volunteering should not conflict with the peak work schedule and other work-related responsibilities, create the need for overtime, or cause conflicts with other employee schedules.
- The employee must be in good standing with the Organization with no current performance issues.
- The Organization reserves the right to withdraw permission for the volunteer activity at any point up to 24 hours in advance.
- The employee may not have less than forty (40) hours of sick leave remaining after their volunteer time.

For purposes of this policy, family member includes:

- a child, including a biological child, adopted child, foster child, stepchild; or a child to whom the employee stands in loco parentis, is a legal guardian of, or is a de facto parent, regardless of age or dependency status;
- a parent, including a biological parent, adoptive parent, de facto parent, foster parent, stepparent, or legal guardian of the employee or the employee's spouse or registered domestic partner, or a person who stood in loco parentis when the employee was a minor child;
- a spouse;
- a registered domestic partner;
- a grandparent;
- a grandchild; or
- a sibling.

The employee's use of paid sick leave will not be conditioned upon searching for or finding a replacement worker.

Under Washington State requirements, paid sick leave is a worker's right, which only an employee may authorize the use of. Unless advised otherwise by the employee, the Organization will assume, subject to applicable law, that employees want to use available paid sick leave for absences for reasons set forth above and employees will be paid for such absences to the extent they have paid sick leave available.

~~The Organization may withhold payment of paid sick leave hours where the employee is demonstrated to have used paid sick leave for an uncovered purpose, however, their available paid sick leave hours will not be deducted.~~

Commented [AR14]: I suggest removing this. This policy is ripe for employer liability and challenges under WA sick leave law.

Employees will be notified of their available paid sick leave on each itemized wage statement.

Notice and Documentation

Employees are required to give reasonable notice of an absence from work. ~~Employees should make a reasonable effort to schedule the use of paid sick time in a manner that does not unduly disrupt the Organization's operations.~~ Requests to use earned paid leave time may be made orally, in writing, or electronically (e.g., via email), and whenever possible, the request must include the expected duration of the employee's absence. When the use of paid sick leave is foreseeable, the employee is required to make a good faith effort to provide notice of the need for such time to the Executive Director at least 10 days in advance of the use of the paid sick leave or as soon as practicable. When the use of earned sick time is not foreseeable, the employee is required to provide notice to the Executive Director as soon as possible before the start of their workday or as soon as practicable under the circumstances. In the event it is impracticable for the employee to provide notice, a person may provide notice on the employee's behalf.

Commented [AR15]: If an employee is sick, they are not able to schedule it unless you are only referring to scheduled doctor appointments and procedures. I would clarify here.

Payment

Paid sick leave will be paid at the same hourly rate the employee earns from their employment at the time the employee uses such time, but no less than the applicable minimum wage, unless otherwise required by applicable law. Use of paid sick leave is not considered hours worked for purposes of calculating overtime.

Carryover and Payout

The employee may carry over up to 240 hours of accrued, unused paid sick leave to the following calendar year. Unused paid sick leave will not be paid at separation.

If an employee separates from work but is rehired within twelve months, any previously unused paid sick leave will be reinstated, and previous employment will be counted towards the eligibility waiting period.

Enforcement and Retaliation

Retaliation or discrimination against the employee who requests paid sick leave or uses paid sick leave, or both is prohibited.

3-6 Workers' Compensation

On-the-job injuries are covered by Olympic Community of Health's Workers' Compensation Insurance Policy, which is provided at no cost. If employees are injured on the job, no matter how slightly, they should report the incident within ~~a reasonable time~~ 48 hours after the injury to their supervisor.

~~This is solely a monetary benefit and not a leave of absence entitlement. Employees who need to miss work due to a workplace injury must also request a formal leave of absence. See the Leave of Absence sections of this handbook for more information.~~

Commented [AR16]: I recommend having a policy requiring all injuries to be reported as soon as possible but no longer than 48 hours after the injury or return to work after the injury.

Commented [AR17]: I recommend deleting this - it violates Washington state law.

3-7 Jury Duty

If you are called for jury duty or must appear in court as a witness, you must notify your supervisor so that arrangements can be made to handle the work during your absence. You will be given an unpaid leave from work for the period of time required to fulfill your civic responsibility as a juror. Employees may elect to use any available paid time off or may elect to take leave without pay. Exempt employees, who are required to miss a portion of a workweek due to jury duty or required attendance as a witness, will not have a salary deduction made for the work time missed.

3-8 Bereavement Leave

The death of a family member is a time when employees wish to be with their families. If employees lose a close relative, they will be allowed to use their paid time off through sick, vacation, and/or personal days to assist in attending to their obligations and commitments. For the purposes of this policy, a close relative includes a spouse, ~~state registered domestic partner~~, domestic/civil union partner, child, parent, sibling, aunt, uncle, grandparents, ~~or any other relation required by applicable law.~~ Paid leave days only may be taken on regularly scheduled workdays following the day of death. Employees must inform their supervisor prior to commencing bereavement leave. In administering this policy, Olympic Community of Health may require verification of death.

Commented [AR18]: Reference is dated, recommend deleting.

Commented [AR19]: There is no bereavement leave law. Recommend deleting reference here.

Paid Sabbatical Program

Olympic Community of Health recognizes the value of rest, renewal, and long-term commitment to mission-driven work. To support employee well-being and retention, the Organization offers sabbatical leave to eligible employees.

Employees are eligible to take one (1) month of paid sabbatical leave for every five (5) years of continuous, full-time service with the Organization. Sabbatical leave is intended to provide time for personal or professional growth, renewal, or rest, and must be taken as a continuous block of time. Sabbatical leave must be requested in writing at least six (6) months in advance and approved by the Executive Director to ensure appropriate planning for coverage and continuity of operations. The scheduling of sabbaticals will consider organizational needs and may be deferred or adjusted with justification.

Sabbatical leave is not accrued and has no cash value. Unused sabbatical leave does not roll over and is not payable upon separation from the Organization. Additional paid time off cannot be added once the sabbatical leave has begun.

Additional details regarding eligibility, application procedures, and planning requirements are available upon request or in the internal sabbatical leave guidelines.

3-9 Insurance Programs

Full-time employees may participate in Olympic Community of Health's insurance programs for medical, dental, vision, and life insurance. Under these plans, eligible employees will receive comprehensive health and other insurance coverage for themselves and their families, as well as other benefits.

Upon becoming eligible to participate in these plans, employees will receive summary plan descriptions (SPDs) describing the benefits in greater detail. Please refer to the SPDs for detailed plan information. Of course, feel free to contact Executive Director with any further questions.

3-10 Employee Assistance Program

Olympic Community of Health provides the Employee Assistance Program, which offers free, qualified counselors to help employees cope with personal problems they may be facing on a confidential basis. The Employee Assistance Program also offers financial guidance, limited legal services, online forms, child/parent support, adult/eldercare resources, and a 24-hour crisis help line. Further details can be obtained through Human Resources.

3-11 Retirement Plan

Olympic Community of Health offers eligible employees a cash contribution to the Organization's sponsored SEP-IRA retirement plan. The benefit begins on the first of the month following hire and ends on the last month of employment. Contact the Executive Director for the current contribution level. Hourly employees are not eligible for this benefit. After five (5) years of continuous service, employees become eligible for an increased employer contribution rate.

3-12 Compassionate Leave

Compassionate leave allows regular employees to donate, on a completely voluntary basis, a portion of their accrued sick leave to an account specifically designated for the purpose of covering a qualified employee who does not have sufficient sick leave to cover absences. Donations must be made in increments of four (4) hours, and the donating employee may not have less than forty (40) hours of sick leave remaining after their donation. To donate sick leave, employees must fill out necessary forms. Once donated, the leave will belong to the recipient, even if it is not exhausted during the time of their medical event.

Section 4 - Leaves of Absence

4-1 Personal Leave

If employees are ineligible for any other Organization leave of absence, Olympic Community of Health, under certain circumstances, may grant a personal leave of absence without pay. A written request for a personal leave should be presented to management at least two (2) weeks before the anticipated start of the leave. If the leave is requested for medical reasons and employees are not eligible for leave under any state leave law, medical certification also must be submitted. The request will be considered based on staffing requirements, required time away, and the reasons for the requested leave, as well as performance and attendance records. Normally, a leave of absence may be granted for a period of up to eight (8) weeks. However, a personal leave may be extended if, before the end of leave, employees submit a written request for an extension to management and the request is granted. During the leave, employees will not earn vacation, personal days, or sick days. Olympic Community of Health may continue health insurance coverage during the leave if employees submit their share of the monthly premium payments to the Organization in a timely manner, subject to the terms of the plan documents.

When the employees anticipate returning to work, they should notify management of the expected return date. This notification should be made at least one (1) week before the end of the leave.

Upon completion of the personal leave of absence, the Organization will attempt to return employees to their original job or a similar position, subject to prevailing business considerations. Reinstatement, however, is not guaranteed.

Failure to advise management of availability to return to work, failure to return to work when notified or a continued absence from work beyond the time approved by the Organization will be considered a voluntary resignation of employment.

4-2 Military Leave

Military leave will be granted to all employees under orders which require them to serve in any of the U.S. Military branches [in accordance with federal law and state law.](#)

~~Employees, who are currently participants in our health care benefit program and are called to active military duty, may purchase health coverage for up to 24 months under the COBRA program. Employees returning from military leave will be placed in a position at the level of pay and benefits consistent with applicable law.~~

During a period of military conflict, Olympic Community of Health provides eligible employees with up to 15 days of unpaid leave to be with their military spouse or state-registered domestic partner who is notified of an impending call or order to active duty or who has been authorized for leave from deployment. To be eligible for this benefit, you must be employed an average of 20 or more hours per week. You must notify your direct supervisor of your intention to take the leave under this policy within 5 business days following receipt of the official military notice.

Commented [AR20]: WA state law requires unpaid leave for WA National Guard active duty or training.

Commented [AR21]: Recommend deleting - just affirming you will follow federal and state law is clearer and sufficient.

You may choose to apply applicable accrued paid leave benefits while taking military family leave. Health insurance benefits may continue at the level and conditions as provided under applicable laws. Upon completing your leave, you may return to your original position or an equivalent job, *i.e.*, equivalent pay, benefits, and conditions of employment.

4-3 Paid Family and Medical Leave

WASHINGTON PAID FAMILY AND MEDICAL LEAVE

Paid Family and Medical Leave (PFML) is a mandatory statewide insurance program, administered by the Washington State Employment Security Department, which provides almost every Washington employee with paid time off to give or receive necessary care. To be eligible for the State benefit, employees must have worked 820 hours in the qualifying period (defined as the first four of the last five calendar quarters), for any employer(s) in Washington State. The program is funded by premiums paid by both employees and employers. The employee portion will be deducted from your paycheck.

If you qualify, this program will allow you to take up to 12 weeks, as needed, if you:

- welcome a child into your family (through birth, adoption or foster placement),
- experience a serious illness or injury,
- need to care for a seriously ill or injured family member,
- need time to prepare for a family member's pre- and post-deployment activities, as well as time for childcare issues related to a family member's military deployment.

If you face multiple events in a year, you may be eligible to receive up to 16 weeks, and up to 18 weeks if you also experience a pregnancy-related serious health condition.

If the need for leave is foreseeable, you must provide Olympic Community of Health at least 30 days' notice.

If approved by the State, you may be entitled to partial wage replacement while on leave. The benefit is a percent of your weekly wage, as determined by the State. You will file your claim with the Employment Security Department and, if approved, you will be paid by the Employment Security Department. Retaliation for requesting or taking Paid Family and Medical Leave is prohibited. Employees may use paid time off to supplement wages while using PFML.

4-4 Leave for Victims of Domestic Violence

If the employee or the employee's family member is a victim of domestic violence, the employee may be eligible to take reasonable, unpaid time off from work for one or more of the following reasons:

- seek legal or law enforcement assistance or remedies to ensure the health and safety of the employee or a family member including, but not limited to, preparing for, or

participating in any civil or criminal legal proceeding related to or derived from domestic violence, sexual assault or stalking;

- seek treatment by a health care provider for physical or mental injuries caused by domestic violence, sexual assault, or stalking, or to attend to health care treatment for a victim who is a family member;
- obtain or assist a family member in obtaining services from a domestic violence shelter, rape crisis center or other social services program for relief from domestic violence, sexual assault or stalking;
- obtain or assist a family member in obtaining mental health counseling related to an incident of domestic violence, sexual assault or stalking, in which the employee or family member was a victim of domestic violence, sexual assault or stalking; or
- participate in safety planning, temporarily or permanently relocate or take other actions to increase personal safety or that of family members from future domestic violence, sexual assault or stalking.

Employees may elect to use any sick leave or other paid time off for leave pursuant to this policy. Leave may take the form of reasonable unpaid leave from work, intermittent leave or leave on a reduced leave schedule.

Employees wishing to take leave pursuant to this policy must give advance notice of their intention to take leave. When advance notice cannot be given because of an emergency or unforeseen circumstance due to domestic violence, sexual assault or stalking, the employee or a designee must give notice no later than the end of the first day on which such leave is taken.

Verification of the need for leave may be required.

If you are a victim of actual or threatened domestic violence, sexual assault or stalking, Olympic Community Health will provide you with reasonable safety accommodations. You may be asked for written verification that you are a victim of domestic violence, sexual assault, or stalking.

4-5 Pregnancy and Childbirth Disability Leave

Employees are eligible to take unpaid leave for the actual period of time that they are sick or temporarily disabled because of pregnancy, childbirth, or related medical conditions.

Any employees wishing to request leave because of a pregnancy-related disability must provide appropriate medical certification.

This leave is available regardless of whether the employee qualifies for leave under the Washington Paid Family and Medical Leave (PFML). To the extent allowed by law, all leave types will run concurrently.

During this leave, employees may use any applicable paid time off benefits that they have available to cover some or all of the absence. Otherwise, the leave will be unpaid. Group health and other

benefits will be handled in the same manner as for any other similar pregnancy or non-pregnancy related absence.

Employees ordinarily will be allowed to return from this leave to the same job they held when the leave began or to a similar job of at least the same pay. Exceptions to this general rule will be made only if the Organization has a business necessity to do otherwise.

If employees have any questions regarding this policy, they should contact the Executive Director.

Olympic Community Health will reasonably accommodate pregnant employees regardless of disability.

4-6 Lactation Breaks

Olympic Community of Health will provide a reasonable amount of break time to accommodate employees desiring to express breast milk for their infant child, in accordance with and to the extent required by applicable law. The break time, if possible, must run concurrently with rest and meal periods already provided. If the break time cannot run concurrently with rest and meal periods already provided, the break time will be unpaid, subject to applicable law.

The Organization will make reasonable efforts to provide employees with the use of a room or location other than a toilet stall to express milk in private. This location may be the employee's private office, if applicable. The Organization may not be able to provide additional break time if doing so would seriously disrupt the Organization's operations, subject to applicable law. Please consult the Executive Director with questions regarding this policy.

Employees should advise management if they need break time and an area for this purpose. Employees will not be discriminated against or retaliated against for exercising their rights under this policy.

Section 5 - General Standards of Conduct

5-1 Workplace Conduct

Olympic Community of Health endeavors to maintain a positive work environment. Each employee plays a role in fostering this environment. Accordingly, we all must abide by certain rules of conduct, based on honesty, common sense, and fair play.

Because everyone may not have the same idea about proper workplace conduct, it is helpful to adopt and enforce rules all can follow. Unacceptable conduct may subject the offender to corrective action, up to and including discharge, in the Organization's sole discretion. The following are examples of some, but not all, conduct which can be considered unacceptable:

1. Obtaining employment on the basis of false or misleading information (eg, false references or prior work history).
2. Stealing, removing, or defacing Olympic Community of Health property or a co-worker's property, and/or disclosure of confidential information.
3. Completing another employee's time records.
4. Violation of safety rules and policies.
5. Violation of Olympic Community of Health's Drug and Alcohol-Free Workplace Policy.
6. Fighting, threatening, or disrupting the work of others or other violations of Olympic Community of Health's Workplace Violence Policy.
7. Failure to follow instructions of a supervisor.
8. Failure to perform assigned job duties.
9. Violation of the Punctuality and Attendance Policy, including but not limited to irregular attendance, habitual lateness, or unexcused absences.
10. Gambling on Organization property.
11. Willful or careless destruction or damage to Organization assets or to the equipment or possessions of another employee.
- ~~12.~~ 12. Wasting work materials.
- ~~13-12.~~ 12. Performing work of a personal nature during working time.
- ~~14-13.~~ 13. Violation of the Solicitation and Distribution Policy.
- ~~15-14.~~ 14. Violation of Olympic Community of Health's Harassment or Equal Employment Opportunity Policies.
- ~~16-15.~~ 15. Violation of the Communication and Computer Systems Policy.
- ~~17-16.~~ 16. Unsatisfactory job performance.
- ~~18-17.~~ 17. Any other violation of Olympic Community of Health policy.

Commented [AR22]: Example would be helpful - is this false references or prior work history?

Commented [AR23]: Very subjective. Can you clarify?

Obviously, not every type of misconduct can be listed, and this list is not all inclusive. Note that all employees are employed at-will, and Olympic Community of Health reserves the right to impose whatever discipline it chooses, or none at all, in a particular instance. The Organization will deal with each situation individually and nothing in this handbook should be construed as a promise of specific treatment in a given situation. However, Olympic Community of Health will endeavor to utilize

corrective action but reserves the right in its sole discretion to terminate the employee at any time with or without reason or notice.

The observance of these rules will help to ensure that our workplace remains a safe and desirable place to work.

5-2 Punctuality and Attendance

Employees are hired to perform important functions at Olympic Community of Health. As with any group effort, operating effectively takes cooperation and commitment from everyone. Therefore, attendance and punctuality are very important. Unnecessary absences and lateness are expensive, disruptive and place an unfair burden on fellow employees and Supervisors. We expect excellent attendance from all employees. Excessive, unexcused absenteeism or tardiness will result in corrective action up to and including discharge.

We do recognize, however, there are times when absences and tardiness cannot be avoided. In such cases, employees are expected to notify Supervisors as early as possible, but no later than the start of the workday. Employees should call, email, or instant message their supervisor stating the nature of the illness and its expected duration, for every day of absenteeism.

Unreported absences of three (3) consecutive workdays generally will be considered a voluntary resignation of employment with the Organization.

All employees are asked to make every reasonable effort to report to work during inclement weather. Employees who are unable to get to work or who leave work early because of weather or natural disaster conditions may either charge the time missed against accrued vacation leave, flex their schedule for the week with pre-approval, or take leave without pay for the time missed. If the Executive Director advises employees not to report to work or to leave early due to inclement weather or natural disaster, such time off will be considered administrative paid time off and not charged to accrued vacation leave.

5-3 Use of Communications and Computer Systems

Olympic Community of Health's communication and computer systems are intended primarily for business purposes; however, limited personal usage is permitted during non-working time if it does not hinder performance of job duties or violate any other Organization policy. This includes the voice mail, text messaging, e-mail, and Internet systems. Users have no legitimate expectation of privacy in regard to their use of the Olympic Community of Health systems.

Olympic Community of Health may access the voice mail, text messaging and e-mail systems and obtain the communications within the systems, including past voice mail, text messages and e-mail messages, without notice to users of the system, in the ordinary course of business when the Organization deems it appropriate to do so. Further, Olympic Community of Health may review any computer activity, including internet usage to ensure that such use with Organization property, or

communications sent via the Internet with Organization property, are appropriate. The reasons for which the Organization may obtain such access include, but are not limited to:

- maintaining the system;
- preventing or investigating allegations of system abuse or misuse;
- assuring compliance with software copyright laws;
- complying with legal and regulatory requests for information;
- and ensuring that Organization operations continue appropriately during the employee's absence.

The Organization may store electronic communications for a period of time after the communication is created. From time to time, copies of communications may be deleted.

The Organization's policies prohibiting harassment, in their entirety, apply to the use of Organization's communication and computer systems. No one may use any communication or computer system in a manner that may be construed by others as harassing or offensive based on any characteristic protected by federal, state, or local law.

Further, since the Organization's communication and computer systems are intended for business use, all employees, upon request, must inform management of any private access codes or passwords.

Unauthorized duplication of copyrighted computer software violates the law and is strictly prohibited.

No employee may access, or attempt to obtain access to, another employee's computer systems without appropriate authorization.

Violators of this policy may be subject to corrective action, up to and including discharge.

5-4 Use of Social Media

Olympic Community of Health respects the right of any employee to maintain a blog or web page or to participate in a social networking, ~~X (Formerly Twitter)~~, or similar sites, including but not limited to Facebook, Instagram, X, and LinkedIn. However, to protect Organization interests and ensure employees focus on their job duties, employees must adhere to the following rules:

Employees may not post on a blog or web page or participate on a social networking platform, ~~such as Twitter or similar sites,~~ for personal reasons during work time or at any time with Organization equipment or property.

All rules regarding confidential and proprietary business information apply in full to blogs, web pages and social networking platforms, ~~such as Twitter, Facebook, LinkedIn, or similar sites.~~ Any

information that cannot be disclosed through a conversation, a note or an e-mail also cannot be disclosed in a blog, web page or social networking site.

Whether the employees are posting something on their own blog, web page, social networking, ~~Twitter~~, or similar site or on someone else's, if the employee mentions the Organization and also expresses either a political opinion or an opinion regarding the Organization's actions that could pose an actual or potential conflict of interest with the Organization, the poster must include a disclaimer. The poster should specifically state that the opinion expressed is their personal opinion and not the Organization's position. This is necessary to preserve the Organization's good will in the marketplace.

~~Any conduct that is impermissible under the law or company policy if expressed in any other form or forum is impermissible if expressed through a blog, web page, social networking, Twitter, or similar site. For example, posted material that is discriminatory, obscene, defamatory, libelous, or violent is forbidden. Organization policies apply equally to employee social media usage.~~

Olympic Community of Health encourages all employees to keep in mind the speed and manner in which information posted on a blog, web page, and/or social networking site is received and often misunderstood by readers. Employees must use their best judgment. Employees with any questions should review the guidelines above and/or consult with their manager. Failure to follow these guidelines may result in corrective action, up to and including discharge.

Commented [AR24]: To be clear, you are attempting to govern an employee's non-work activity and behavior? This may violate state and federal law which allows employees to comment on workplace conditions and discrimination. Recommend removing unless you have compelling reason for this (past experience with employees on social media) and have neutral policy for equally applying it to all employees.

The application of this policy will be consistent with local, state, and federal law.

5-5 Personal and Company-Provided Portable Communication Devices

Olympic Community of Health-provided portable communication devices (PCDs), including cell phones, should be used primarily for business purposes. Employees have no reasonable expectation of privacy in regard to the use of such devices, and all use is subject to monitoring and searches, to the maximum extent permitted by applicable law. This includes, as permitted, the right to monitor personal communications as necessary.

All conversations, text messages and e-mails must be professional. When sending a text message or using a PCD for business purposes, whether it is an organization-provided or personal device, employees must comply with applicable Organization guidelines, including policies on sexual harassment, discrimination, conduct, confidentiality, equipment use, and operation of vehicles.

Please note that whether employees use their personal PCD or an Organization-issued device, the Organization's electronic communications policies, including but not limited to, proper use of communications and computer systems, remain in effect.

5-6 Inspections

With reasonable cause, Olympic Community of Health reserves the right to require employees while on Organization property, or on client property, to agree to the inspection ~~of their persons~~, company property, personal possessions and property, ~~personal vehicles parked on Organization or client property~~, and work areas. This includes lockers, ~~vehicles~~, desks, cabinets, workstations, packages, handbags, briefcases and other personal possessions or places of concealment ~~(not on or in a person's body)~~, as well as personal mail sent to the Organization or to its clients. Employees are expected to cooperate in the conduct of any search or inspection.

Commented [AR25]: You can't require a search of a person's body.

Commented [AR26]: You don't get to search employee vehicles. You would want to call police for this if needed (i.e. reasonable suspicion of a crime)

Commented [AR27]: See previous comment

Commented [AR28]: Does not include on or in person's body

5-7 Tobacco Use

Tobacco use, including smoking, the use of e-cigarettes, tobacco and other products is prohibited on Organization premises.

Washington State law prohibits smoking in all places of employment. You may smoke outside provided you are not standing within 25 feet of a building entrance or exit, windows that open, or air intake equipment.

5-8 Outside Employment

Employees are required to inform supervisors of employment outside of OCH and must seek permission from their supervisor to engage in such employment. To be allowable, outside employment must not involve a conflict of interest, a conflict with the employee's duties, or any other potentially adverse effect on OCH operations.

5-9 Personal Visits and Telephone Calls

Disruptions during work time can lead to errors and delays. Therefore, personal telephone calls must be kept to a minimum, and only be made or received after working time, or during lunch or break time.

5-10 Solicitation and Distribution

To avoid distractions, solicitation by the employee of another employee is prohibited while either employee is on work time. "Work time" is defined as the time the employee is engaged, or should be engaged, in performing their work tasks for Olympic Community of Health. Solicitation of any kind by non-employees on Organization premises is prohibited at all times.

Distribution of advertising material, handbills, printed or written literature of any kind in working areas of the Organization is prohibited at all times. Distribution of literature by non-employees on Organization premises is prohibited at all times.

5-11 Bulletin Boards

Important notices and items of general interest are continually posted on Olympic Community of Health virtual and office-based bulletin boards. Employees should make it a practice to review bulletin boards frequently. This will assist employees in keeping up with what is current at Olympic Community of Health. To avoid confusion, employees should not post or remove any material from the bulletin board.

5-12 Confidential Company Information

During the course of work, employees may become aware of confidential information about Olympic Community of Health's business, including but not limited to information regarding Organization finances, pricing, products and new product development, software and computer programs, marketing strategies, suppliers and customers and potential customers. Employees also may become aware of similar confidential information belonging to the Organization's clients. It is extremely important that all such information remain confidential, and particularly not be disclosed to Olympic Community of Health's competitors. Any employee who improperly copies, removes (whether physically or electronically), uses, or discloses confidential information to anyone outside of the Organization may be subject to corrective action up to and including termination.

Notice of Immunity pursuant to the Defend Trade Secrets Act of 2016. An individual shall not be held criminally or civilly liable under any federal or state trade secret law for the disclosure of a trade secret that is made: 1) in confidence to a federal, state, or local government official, either directly or indirectly, solely for the purpose of reporting or investigating a suspected violation of law; 2) in confidence to an attorney, solely for the purpose of reporting or investigating a suspected violation of law; or 3) in a complaint or other document filed in a lawsuit or other proceeding, if such filing is made under seal. Furthermore, an individual who files a lawsuit for retaliation by an employer for reporting a suspected violation of law may disclose the trade secret to the attorney of the individual and use the trade secret information in the court proceeding, if the individual: 1) files any document containing the trade secret under seal; and 2) does not disclose the trade secret except pursuant to court order.

Employees will be required to sign an agreement reiterating these obligations.

5-13 Conflict of Interest and Business Ethics

It is Olympic Community of Health's policy that all employees avoid actual and the appearance of any conflict between their personal interests and those of the Organization. The purpose of this policy is to ensure that the Organization's honesty and integrity, and therefore its reputation, are not compromised. The fundamental principle guiding this policy is that no employee should have, or appear to have, personal interests or relationships that actually or potentially conflict with the best interests of the Organization.

It is not possible to give an exhaustive list of situations that might involve violations of this policy. However, the situations that would constitute a conflict in most cases include but are not limited to:

1. holding an interest in or accepting free or discounted goods from any organization that does, or is seeking to do, business with the Organization, by any employee who is in a position to directly or indirectly influence either the Organization's decision to do business, or the terms upon which business would be done with such organization;
2. holding any interest in an organization that competes with the Organization;
3. being employed by (including as a consultant) or serving on the board of any organization which does, or is seeking to do, business with the Organization or which competes with the Organization; and/or
4. profiting personally, e.g., through commissions, loans, expense reimbursements or other payments, from any organization seeking to do business with the Organization.

A conflict of interest would also exist when a member of the employee's immediate family is involved in situations such as those above.

This policy is not intended to prohibit the acceptance of modest courtesies, openly given and accepted as part of the usual business amenities, for example, occasional business-related meals or promotional items of nominal or minor value, up to a \$30 value.

It is the employee's responsibility to report any actual or potential conflict that may exist between the employee (and the employee's immediate family) and the Organization.

All employees will be required to sign the Organizations full Conflict of Interest policy on an annual basis as updated by the Olympic Community of Health Board of Directors.

5-14 Use of Facilities, Equipment and Property, Including Intellectual Property

Equipment essential in accomplishing job duties is often expensive and may be difficult to replace. When using property, employees are expected to exercise care, perform required maintenance, and follow all operating instructions, safety standards and guidelines.

Employees should notify their supervisor if any equipment, machines, or tools appear to be damaged, defective or in need of repair. Prompt reporting of loss, damages, defects, and the need for repairs could prevent deterioration of equipment and possible injury to employees or others. Supervisors can answer any questions about the employees' responsibility for maintenance and care of equipment used on the job.

Employees also are prohibited from any unauthorized use of the Organization's intellectual property, such as [audio and video content](#)~~audio and video tapes~~, print materials and software.

Improper, careless, negligent, destructive, or unsafe use or operation of equipment can result in corrective action, up to and including discharge.

Further, the Organization is not responsible for any damage to employees' personal belongings unless the employee's supervisor provided advance approval for the employee to bring the personal property to work.

5-15 Health and Safety

The health and safety of employees and others on Organization property are of critical concern to Olympic Community of Health. The Organization intends to comply with all health and safety laws applicable to our business. To this end, we must rely upon employees to ensure that work areas are kept safe and free of hazardous conditions. Employees are required to be conscientious about workplace safety, including proper operating methods, and recognize dangerous conditions or hazards. Any unsafe conditions or potential hazards should be reported to management immediately, even if the problem appears to be corrected. Any suspicion of a concealed danger present on the Organization's premises, or in a product, facility, piece of equipment, process, or business practice for which the Organization is responsible should be brought to the attention of management immediately.

Periodically, the Organization may issue rules and guidelines governing workplace safety and health. The Organization may also issue rules and guidelines regarding the handling and disposal of hazardous substances and waste. All employees should familiarize themselves with these rules and guidelines, as strict compliance will be expected.

Any workplace injury, accident, or illness must be reported to the employee's supervisor ~~within a reasonable 48 hour time~~ within , regardless of the severity of the injury or accident.

Commented [AR29]: See previous comment on L&I.

5-16 Hiring Relatives/Employee Relationships

A familial relationship among employees can create an actual or at least a potential conflict of interest in the employment setting, especially where one relative supervises another relative. To avoid this problem, Olympic Community of Health may refuse to hire or place a relative in a position where the potential for favoritism or conflict exists.

In other cases, such as personal relationships where a conflict or the potential for conflict arises, even if there is no supervisory relationship involved, the parties may be separated by reassignment or discharged from employment, at the discretion of the Organization. Accordingly, all parties to any type of intimate personal relationship must inform management.

If two employees marry, become related, or enter into an intimate relationship, they may not remain in a reporting relationship or in positions where one individual may affect the compensation or other terms or conditions of employment of the other individual. The Organization generally will attempt to identify other available positions, but if no alternate position is available, the Organization retains the right to decide which employee will remain with the Organization.

For the purposes of this policy, a relative is any person who is related by blood or marriage, or whose relationship with the employee is similar to that of persons who are related by blood or marriage.

5-17 Employee Dress and Personal Appearance

Employees are expected to report to work well-groomed, clean, and dressed according to the requirements of their position. Employees should contact their supervisor for specific information regarding acceptable attire for their position. If employees report to work dressed or groomed inappropriately, they may be prevented from working until they return to work well-groomed and wearing the proper attire.

When representing OCH at external meetings or events, employees are encouraged to wear a name badge with at least their first name and organization name. Employees shall follow policies of partner organizations if required to wear a name badge.

Olympic Community of Health is dedicated to providing a healthy and comfortable work environment. We ask that employees refrain from applying perfume, cologne, or any other heavily fragrancd product while performing Organization business.

5-18 Publicity/Statements to the Media

All media inquiries regarding the position of the Organization as to any issues must be referred to the Executive Director. Only the Executive Director is authorized to make or approve public statements on behalf of the Organization. No employees, unless specifically designated [in writing](#) by the Executive Director, are authorized to make those statements on behalf of Organization. Any employee wishing to write and/or publish an article, paper, or other publication on behalf of the Organization must first obtain [written](#) approval from the Executive Director.

5-19 Political Activity

Last amended September 23, 1994, the Hatch Act limits the political activities of employees “...whose principal employment activities are funded in whole or in part with Federal funds.” Because the Organization is largely financed through federal sources, Organization activities will be neutral to partisan politics and will not use program funds, services, staff, or other resources in a manner that supports or opposes any partisan or non-partisan political activity. This rule applies only to Organization activities and the people participating in those activities. Employees remain free to express political opinions and to engage in partisan and non-partisan political activities as individuals when they are not working and in no way can be perceived as representing the Organization.

5-20 Operation of Vehicles

All employees authorized to drive Organization-owned or leased vehicles or personal vehicles in conducting Organization business must possess a current, valid driver's license, insurance, and an acceptable driving record. Any change in license status or driving record must be reported to management immediately.

It is the responsibility of every employee to drive safely and obey all traffic, vehicle safety, and parking laws or regulations. Drivers must demonstrate safe driving habits at all times.

Organization-owned or leased vehicles may be used only as authorized by management.

Please refer to the separate Olympic Community of Health Travel policy for full details on traveling while on Organization business.

Portable Communication Device Use While Driving

Employees who drive on Organization business must abide by all state or local laws prohibiting or limiting portable communication device (PCD) use, including cell phones or personal digital assistants, while driving. Further, even if use is permitted, employees may choose to refrain from using any PCD while driving. "Use" includes, but is not limited to, talking, or listening to another person or sending an electronic or text message via the PCD.

Regardless of the circumstances, including slow or stopped traffic, if any use is permitted while operating a vehicle, employees should proceed to a safe location off the road and safely stop the vehicle before placing or accepting a call. If acceptance of a call is absolutely necessary while the employees are driving, and permitted by law, they must use a hands-free option and advise the caller that they are unable to speak at that time and will return the call shortly.

Under no circumstances should employees feel that they need to place themselves at risk to fulfill business needs.

Since this policy does not require any employee to use a PCD while driving, employees who are charged with traffic violations resulting from the use of their PCDs while driving will be solely responsible for all liabilities that result from such actions.

Washington law prohibits the use of all handheld devices while operating a vehicle, including while stopped at a stop light or in traffic.

5-21 Business Expense Reimbursement

Employees will be reimbursed for reasonable approved expenses incurred in the course of business. These expenses must be approved by the employee's Supervisor, and may include air travel, hotels, motels, meals, cab fare, rental vehicles, or gas and car mileage for personal vehicles. Expenses for

alcohol will not be reimbursed. All expenses incurred should be submitted to the Executive Director along with the receipts within 30 days of the expense, in a timely manner.

Employees are expected to exercise restraint and good judgment when incurring expenses. Employees should contact their supervisor in advance if they have any questions about whether an expense will be reimbursed.

5-22 References

Olympic Community of Health will respond to reference requests through the Executive Director. The Organization will provide general information concerning the employee such as date of hire, date of discharge, and positions held. Requests for reference information must be in writing, and responses will be in writing. Please refer all requests for references to the Executive Director ~~Department~~.

Only the Executive Director ~~Department~~ may provide references.

5-23 If You Must Leave Us

Should any employees decide to leave the Organization, we ask that they provide a supervisor with at least two weeks advance notice of departure. Thoughtfulness will be appreciated. All Organization property including, but not limited to, keys, laptop computers, cell phones, home office equipment provided by the Organization, etc., must be returned at separation. Employees also must return all of the Organization's Confidential Information upon separation. To the extent permitted by law, employees will be required to repay the Organization (through payroll deduction, if lawful) for any lost or damaged Organization property. As noted previously, all employees are employed at-will and nothing in this handbook changes that status.

Final paychecks are processed with the next regular payroll after the employee's last day of work. Employees will be paid for all hours worked with their last paycheck. Those who provide a minimum of two weeks advance notice, work a regular schedule over their final weeks, and in good faith and fulfill complete work and provide a summary of current projects before their departure will be paid for all hours worked and any applicable accrued and unused vacation time with their last paycheck, to be processed with the next regular payroll after the employee's last day of work. Any paycheck. Any monies due to the Organization from the employee will be deducted from the final pay, unless prohibited by law.

Commented [AR30]: While you may agree to cash this out at separation, Washington law does not require it.

5-24 Exit Interviews

Employees who resign may be requested to participate in an exit interview with the Executive Director or Board President, if possible.

5-25 A Few Closing Words

This handbook is intended to give employees a broad summary of things they should know about Olympic Community of Health. The information in this handbook is general in nature and, should questions arise, any member of management should be consulted for complete details. While we intend to continue the policies, rules and benefits described in this handbook, Olympic Community of Health, in its sole discretion, may always amend, add to, delete from, or modify the provisions of this handbook and/or change its interpretation of any provision set forth in this handbook. Employees should not hesitate to speak to management if they have any questions about the Organization or its personnel policies and practices.

General Handbook Acknowledgment

This Employee handbook is an important document intended to help employees become acquainted with Olympic Community of Health. This document is intended to provide guidelines and general descriptions only; it is not the final word in all cases. Individual circumstances may call for individual attention.

Because the Organization's operations may change, the contents of this handbook may be changed at any time, with or without notice, in an individual case or generally, at the sole discretion of management.

Please read the following statements and sign below to indicate your receipt and acknowledgment of this handbook.

I have received and understand my obligation to read a copy of Olympic Community of Health's Employees handbook. I understand that the policies, rules, and benefits described in it are subject to change at the sole discretion of the Organization at any time.

I further understand that my employment is terminable at will, either by myself or the Organization, with or without reason or notice, regardless of the length of my employment or the granting of benefits of any kind.

I understand that no representative of Olympic Community of Health other than the Executive Director may alter "at will" status and any such modification must be in a signed writing.

Employee's Printed Name: _____

Employee's Signature: _____

Position: _____

Date: _____

The signed original copy of this acknowledgment should be given to management - it will be filed in your personnel file.

A faint, light blue map of the Olympic Peninsula serves as the background for the slide. A solid blue horizontal band is positioned across the middle of the map.

OCH Board of Directors | RETREAT SUMMARY



CLALLAM | JEFFERSON | KITSAP



HEALTHY PEOPLE, THRIVING COMMUNITIES

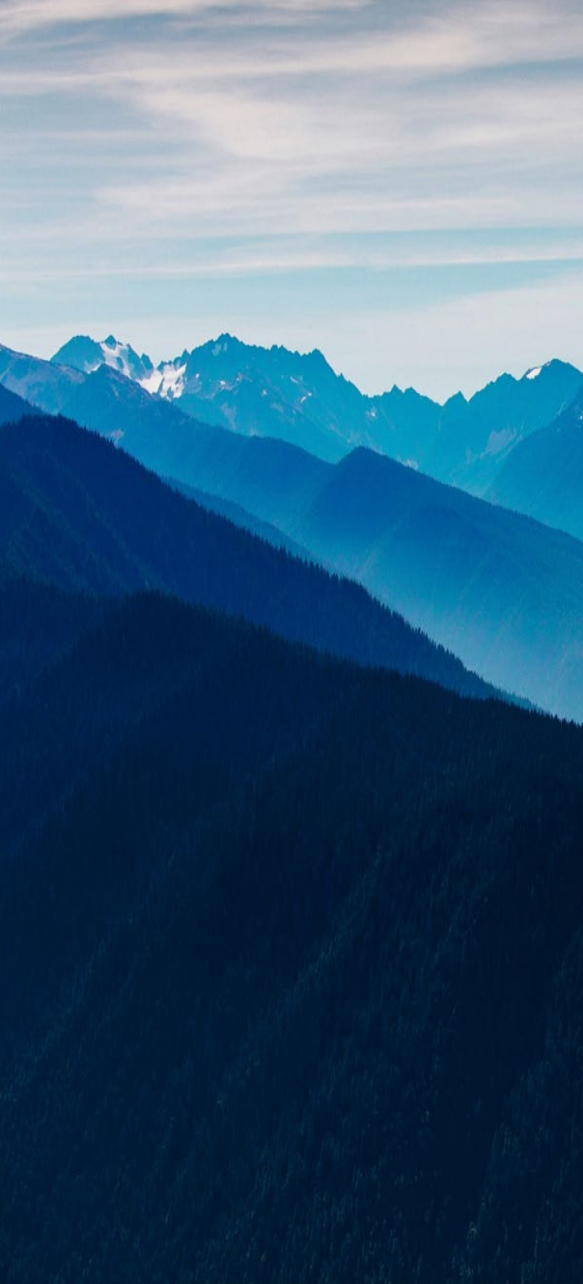


PURPOSE

Tackling health issues that no single sector or Tribe can tackle alone

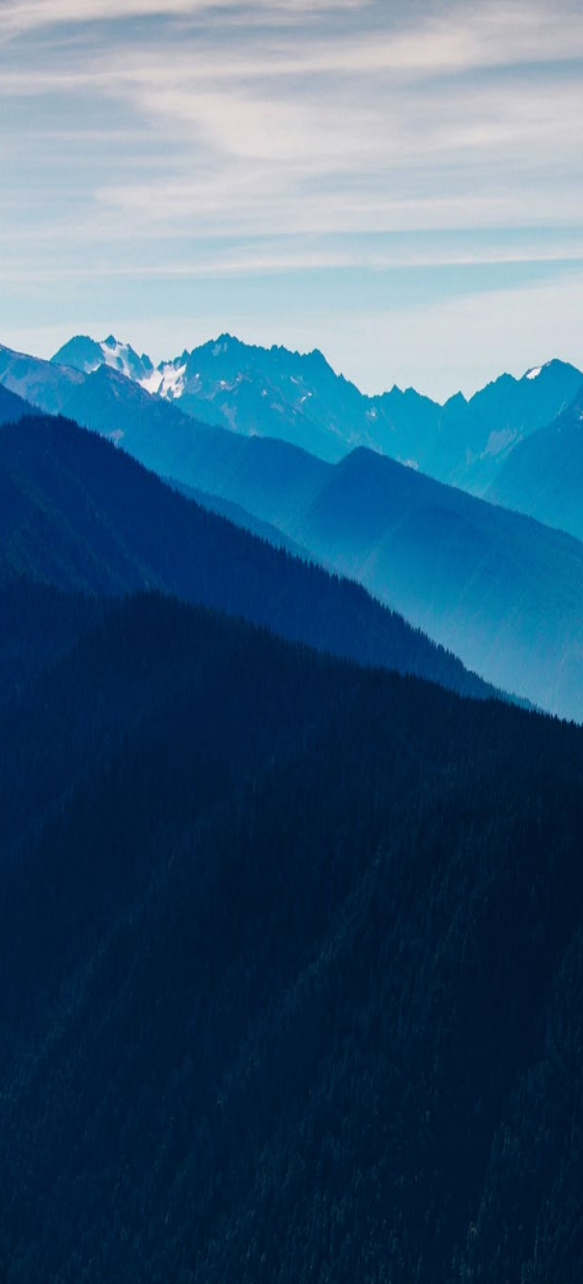
MISSION

To solve health problems through collaborative action



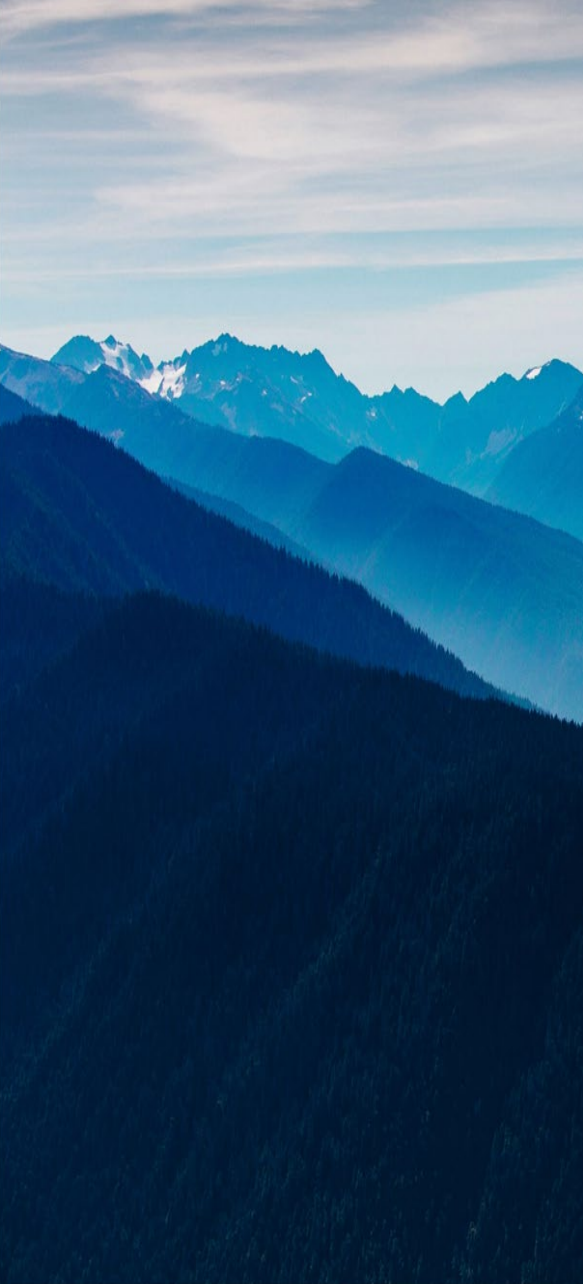
Purpose of the 2025 Retreat:

- Foster deeper connections and strengthen relationships among board members
- Launch the development of OCH's next strategic plan
- Discuss key priorities for 2026



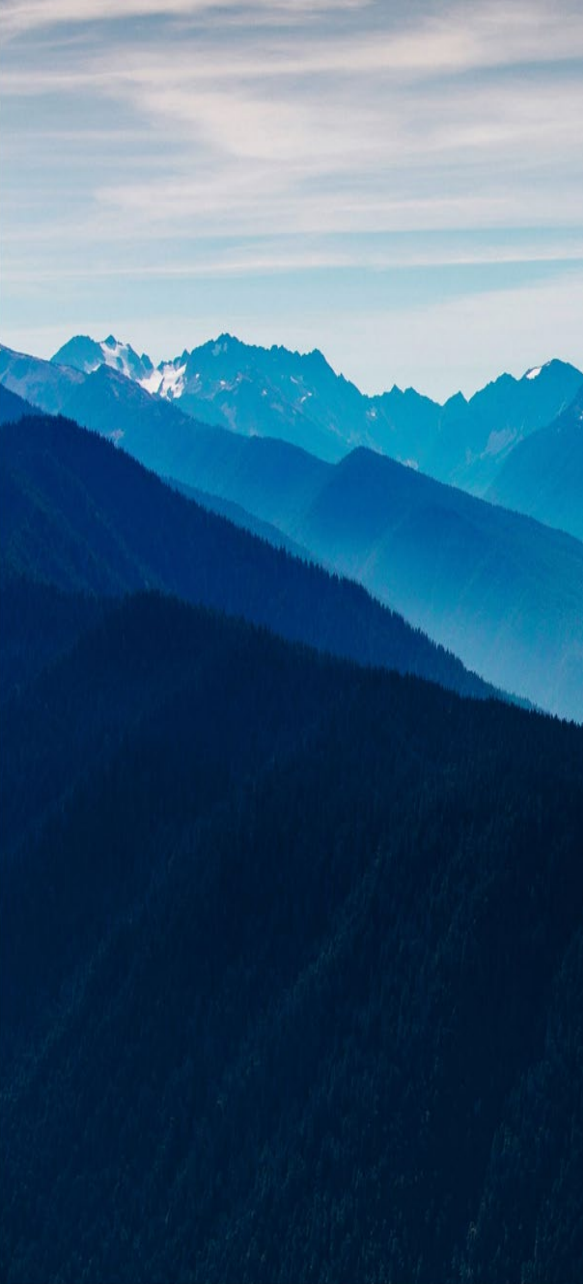
Current State:

- The group was presented with slides that summarize OCH’s “current state”
 - Current status of the organization
 - What funders are asking of OCH
 - What’s happening nationally and with other ACHs
- The group had a short discussion, and this helped to create shared understanding among all of those in attendance.
- The current state slides that were shared are in the appendix below.



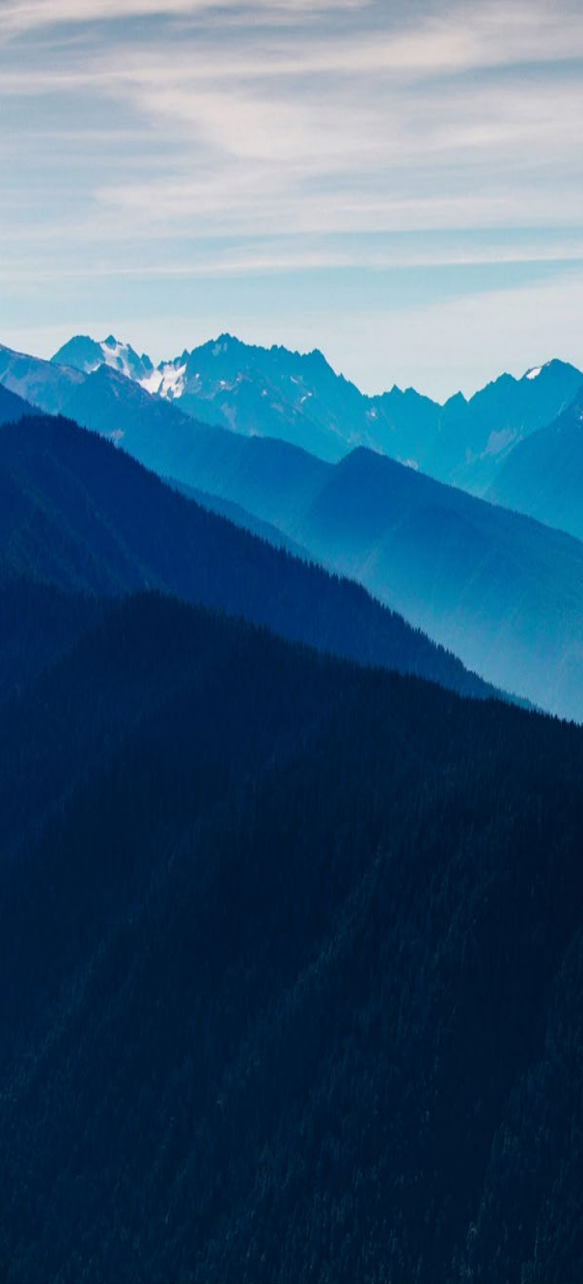
OCHs Next Strategic Plan:

- The next agenda item was to start to plan for the organization's next strategic plan.
- The group was presented with an overview of the 2022-2026 plan and how that was developed.
- The group heard a summary of successes and challenges for the current plan.
- Slides that were presented are in the appendix below.
- The group participated in a couple of activities. Notes from those follow in the next slides.



OCHs Next Strategic Plan:

- Following the slide presentation, participants participated in an activity where they discussed:
 - What resonates?
 - What surprises you?
 - What's missing



OCHs Next Strategic Plan:

- Similar to an initial step that we took to create the current plan, the group then responded to prompts to aid in creating a value proposition for the new plan.
 - *What does OCH offer/provide?*
 - *What are the most unique offerings of OCH?*
 - *What sets OCH apart from other health collaboratives?*
 - *Who does OCH compete with?*
 - *Who are allies of OCH?*
 - *What is unique about who we work with?*
 - *Who is currently most engaged?*

What does OCH provide? (Themes)

- Collaboration and convenings
 - Space for partnership, more partners to the table, connections, space to act in collaboration
- Learning and growth
 - Training opportunities, shared learnings
- People and relationships
 - Forward thinking individuals, diverse groups
- Funding and resources
 - Money, capacity building

What are the most unique offerings of OCH?

(Themes)

- Collaboration and convenings
 - Collaboration initiatives, bringing sectors together who have not historically worked together, network, convenings
- Data and reporting
 - OCH reports, data and analytics
- Communications
 - Communication with network, presentations, graphics, community outreach
- Programs and services
 - Funding informed by local needs, resources to community partners

What sets OCH apart from other health collaboratives?

(Themes)

- Focus and coverage
 - Regional focus, local focus, three counties, collaboration among multiple partners
- Collaboration and relationships
 - Leadership, ideas, collaboration, what no one can do alone, we care about everyone's successes, convening
- Funding and resources
 - Unique funding sources, unique funding opportunities
- Identity and history
 - Relevance, our own history

Who does OCH compete with? (Themes)

- Local and regional
 - For time and resources, feeling of competition with others who address social needs, the competing priorities of partners
- State and federal
 - State agencies, state and federal “work against us”, no clear direction from state (disconnect, not competition)
- Health systems and providers
 - Other systems that address social needs
- Other external factors
 - OCH does work others do not, the work is novel so not supported fully externally

Who are allies of OCH?(Themes)

- CBOs and local agencies
 - Schools, social services, local agencies, community partners
- Health sector partners
 - Hospitals, primary care, behavioral health, dental, health systems
- MCOs
- Tribes
- Government
 - Public health, county and city governments, elected officials, Fire/EMS
- Other ACHs
- Individuals and communities

What is unique about who we work with?

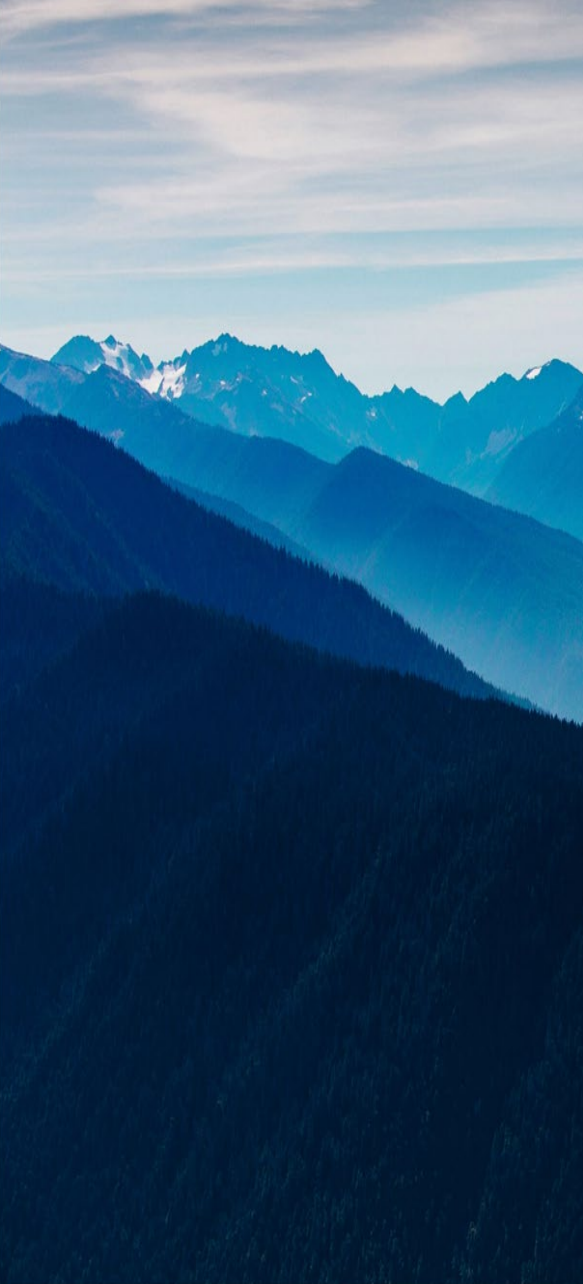
(Themes)

- Diversity and representation
- Rural focus
- Culture and motivation

Who is currently most engaged?

(Themes)

- Regional partners
 - Especially Clallam and Jefferson
- Health systems and clinics
- CBOs and funded partners



OCHs Next Strategic Plan:

- Next, the group participated in an activity:
 - What's happening around us locally that demands creative change?
 - What are the most pressing social and health challenges facing the region? And, what are the root causes of those challenges?

What's happening around us that demands creative change? (Themes)

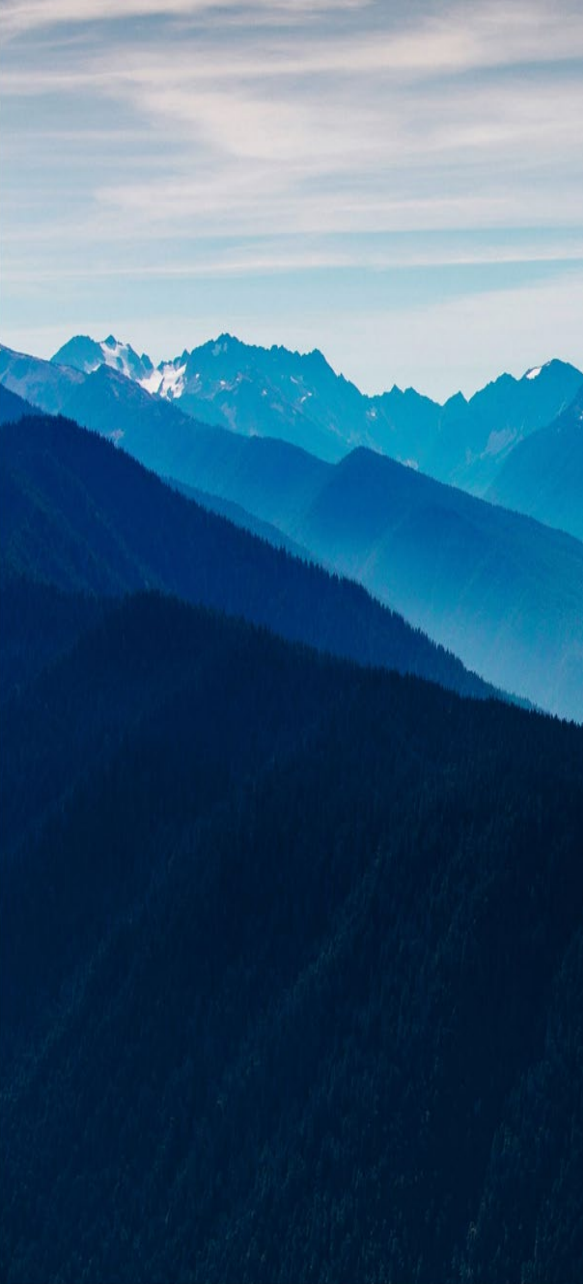
- Housing and Homelessness
 - Affordability, stock, short-term rentals, income, stigma, workforce shortages, lack of resources
- Access to Care
 - Transportation, rural, dental, workforce shortages and burnout, federal changes, ER utilization, state funding changes
- Behavioral Health
 - Not fully integrated with primary care, lack of residential treatment facilities, ER use, SUD treatment not sufficient, poly-substance use, funding system, housing

What's happening around us that demands creative change? (Themes)

- Basic Needs
 - Food insecurity, utilities, cost of living, childcare, funding, income, reimbursements, cost of living
- Transportation
 - Rural, lack of infrastructure, transit schedule misalignment with community needs, access to living wage jobs via transit.
- Community, Equity, Social
 - Lack of trust in systems, stigma, isolation/loneliness, politics, racism, knowledge of community resources

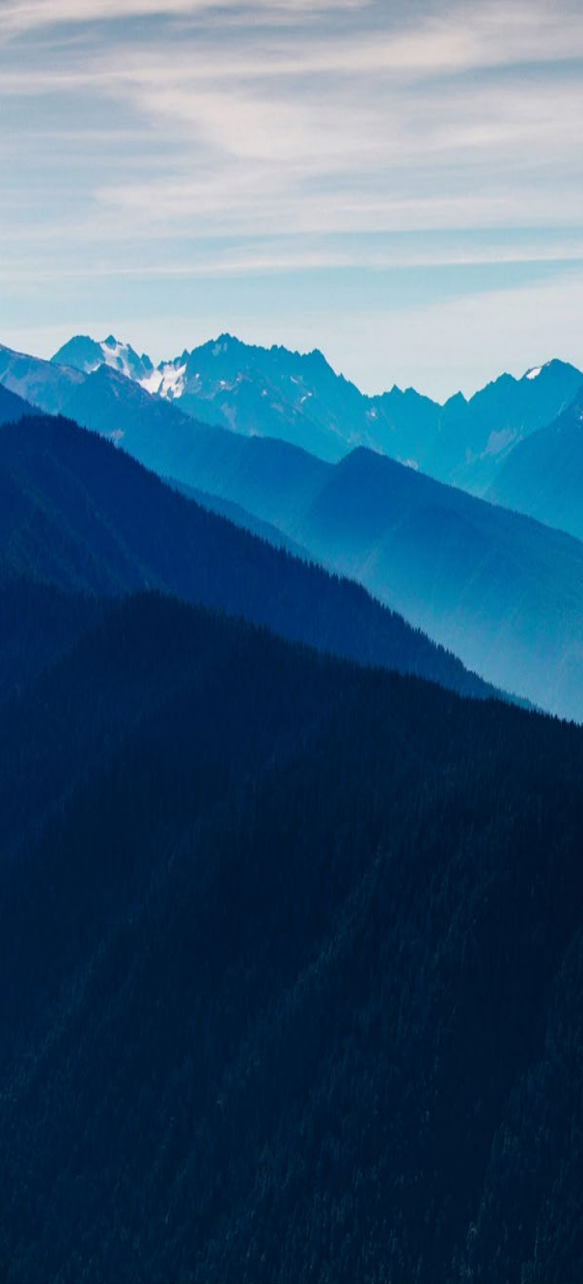
What's happening around us that demands creative change? (Themes)

- Funding and Politics
 - Loss of and change in federal and state funding, reliance on grants, program cuts, RFP overload, fragmentation, lack of funding
- Youth, Family, and Communities
 - Youth mental health, struggling families, aging populations and caregivers, lack of resilience, focus on youth access and creating healthy families
- Public Health & Safety
 - Disease threats, ER us, higher population acuity, federal changes, built environment, injury, workforce



OCHs Next Strategic Plan:

- Staff will organize the themes more specifically and will coordinate with the 2026 Strategic Planning committee to draft an updated value proposition to guide next steps.



2026 Planning:

- Next, the group narrowed in on the coming year and provided guidance to staff for budget and work plan development.
- The group heard a summary of successes and challenges under the 2025 budget and workplan.
- The group was presented with a draft workplan created by the staff team.
 - The group participated in an activity to help guide next steps.

2026 Planning

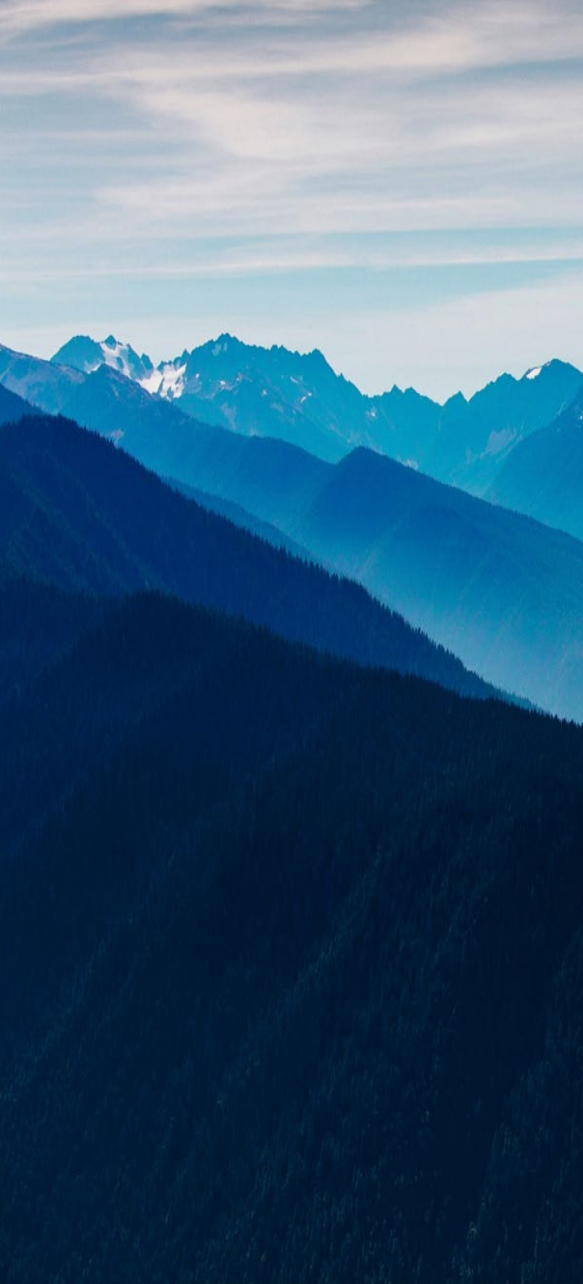
- Uncertainty, funding cuts, strained resources
 - Federal and state landscape are contributing to uncertainty, partner capacity is likely to be limited in 2026
 - Partner workforce is strained and has a lot of competing priorities
 - OCH should make every engagement count, don't further overwhelm
- What would success look like in 2026?
 - Functional, impactful community care hub
 - Reporting, data, planning for the future
 - Partnerships
 - Unity among partners, robust network, cohesive, find the common good, spend the dollars allocated by OCH

2026 Planning

- Relevance and visibility
 - Advocate on behalf of the region, partners and OCH are still here doing good work
- Funding
 - More, diverse funding and development of a plan beyond current funding for sustainability
- Data and reporting
 - Regular dashboards, reporting data, evaluation of Olympic Connect
- Specific outcomes
 - Kitsap referrals, new strategic plan with more focus

2026 Planning

- What's most important and relevant?
 - Advocacy/policy influence
 - Housing and related supports
 - System of care
 - Partnerships and relationships
 - Community voice
 - Financing and investment (social impact)
- What should OCH avoid?
 - Competition
 - Mission drift
 - Duplication
 - Unsustainable investments



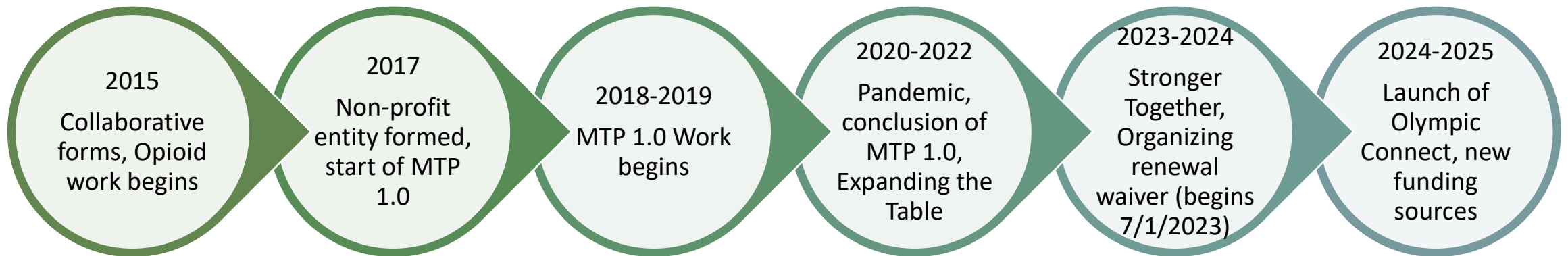
2026 Planning:

- Staff are revising the draft plan and will bring a 2026 workplan and budget to the board in October for review and decisions.

Appendix: Slides shared at 2025 Retreat

Current State

Key Milestones



OCH Key Contributions



Funding sources

Washington State Health Care Authority

\$17 million between
July 2023-June 2028

What it funds:

- Hub infrastructure, including:
 - Technology
 - Engagement
 - Workforce capacity building
 - Hub development
- Case management services

Economic Development Authority (Federal)

\$9.8 million between
October 2024 -September 2029

What it funds:

- Case management services
- Expanding resources and services
- Clallam and Jefferson counties only

Washington State Department of Health

\$1.1 million between
October 2024-June 2025

What it funds:

- Expansion of resources and services

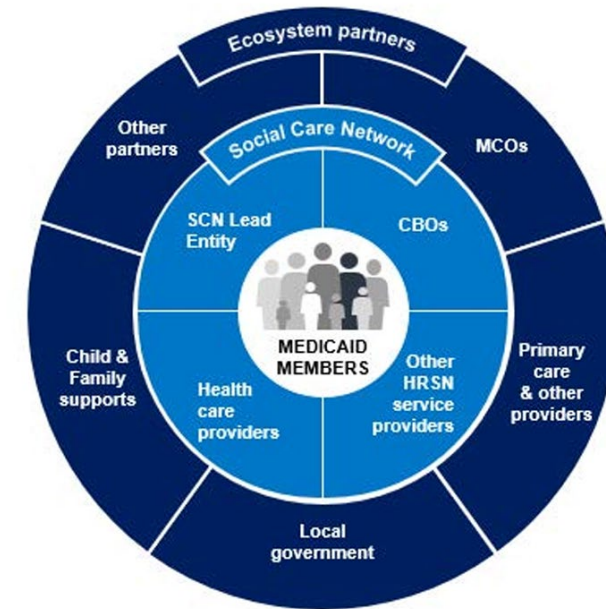
Board Reserve

In addition to current incoming funding sources, OCH has a little over \$6 million in a Board-Designated Fund:

- Board has full authority over the use of these funds
- Largely made up of unspent operations dollars from MTP 1.0
 - Also, some intentional set aside from unanticipated MTP 1.0 income
- Small portion of this fund in 2025 budget
- Staff to make recommendation for allocating some of these dollars for 2026
- Strategic Planning committee to make recommendations for further use
- Board should determine what to hold in reserve and what to plan to spend
 - Finance committee recommends 1-2 years of operating cost as reserve

What's the vision?

- Create a social care network in the region and across the state through a community care hub model
 - Effectively, efficiently, and elegantly address social needs
 - Improve health and well-being outcomes
 - Foster healthy people and thriving communities
- Create a community where health and social care are seamlessly integrated to address the whole person, ensuring everyone has access to the support they need to thrive.
- In the Olympic region, our social network framework includes an emphasis on community-based care coordination, hope, and economic development

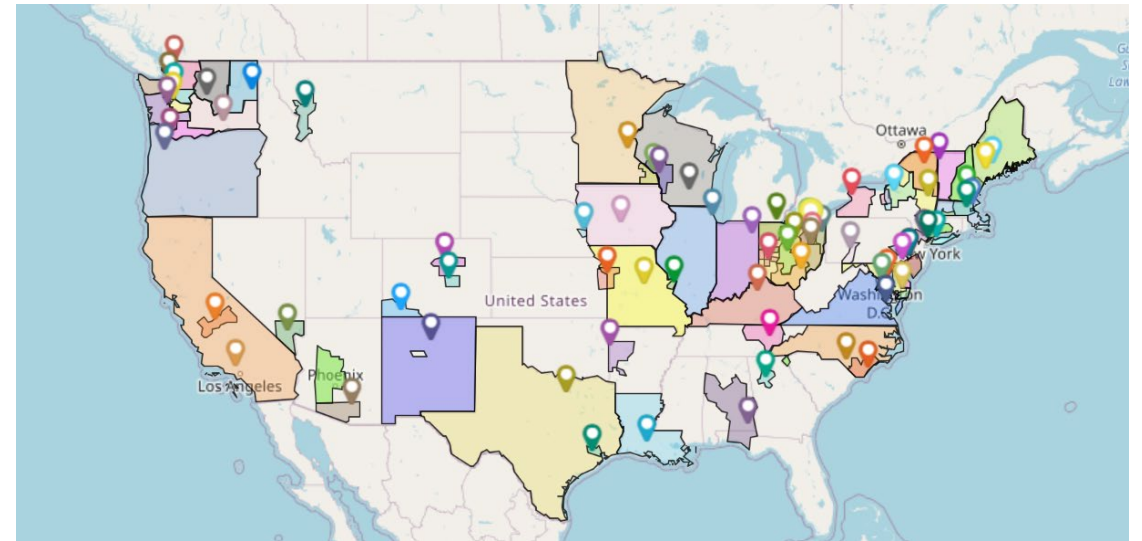


Whole Person Care



National Map of Community Care Hubs

An interactive tool to find and connect with Community Care Hubs across the country



Community Hub – 5 Core Elements

1

Community Voice & Engagement

Ensures community residents, social and health care organizations are guiding and advising what is best for the community

2

Sustainability & Business Operations

Reduces the administrative and operational burden on community-based organizations – e.g. financial systems, compliance/regulatory, operations in place

3

Care Coordination Operations & Reporting

Provides operational capacity, care coordination and reporting to enable health care organizations and state agencies to contract with a broader social care network

4

Network Management & Capacity Building

Creates and supports a social care network of diverse community partners to engage priority populations, deploy services and address social and health barriers.

5

Community-Based Workforce

Advocates and supports community-based workforce needs



OCH is already working on sustainability

- 6 of the 9 hubs are sharing the cost of a consultant to identify the path to sustainability for the hubs
- We are working with the HCA-funded evaluator (OHSU) and our own contractor (Advocates for Human Potential)
 - You'll see initial evaluation results later in 2026 and annually after that
 - Need to understand the value add, if any, to determine much of the next steps
- 3 hubs (King, Pierce, and OCH) are collaborating on a pilot with Common Spirit – could be a future revenue source
- Working to grow volume, shave costs, standardize, and explore shared services with other hubs
- WA cannot likely sustain 9 or 10 hubs

How will we know if this adds value?

- Monthly and quarterly data dashboard reporting
 - Starts September 2025
 - Care coordination partners, Board, Advisory Group, Network partners
 - Targets and benchmarks
- Quantitative and qualitative evaluation
 - Starting in 2026
 - Plan coming to Board in early 2026
 - Care coordination, hope, economic development

Our next strategic plan



2022-2026 *Strategic Plan*

Olympic 
COMMUNITY of HEALTH

GOAL

Improve individual and population health
and advance **equity** by addressing the
determinants of health

MOVING UPSTREAM
FOCUS AREAS



Everyone **housed**



Everyone has access to the full **spectrum of care**



Individual **needs are met** timely, easily, and compassionately



Together, **recovery is possible** (substance use disorder)

GEOGRAPHIC REACH



The Olympic Region: Clallam, Jefferson,
and Kitsap Counties, and seven Tribal
Nations

TARGET POPULATION



Community members who
experience barriers to attaining the
healthy lifestyle they desire and the
health serving workforce

OCH ROLES

Catalyst for change

Community connector

Seed planter



GOAL

Improve individual and population health
and advance **equity** by addressing the
determinants of health



Reduced substance
misuse & abuse



Access to full
spectrum of care



Individual needs are
met timely, easily, and
compassionately

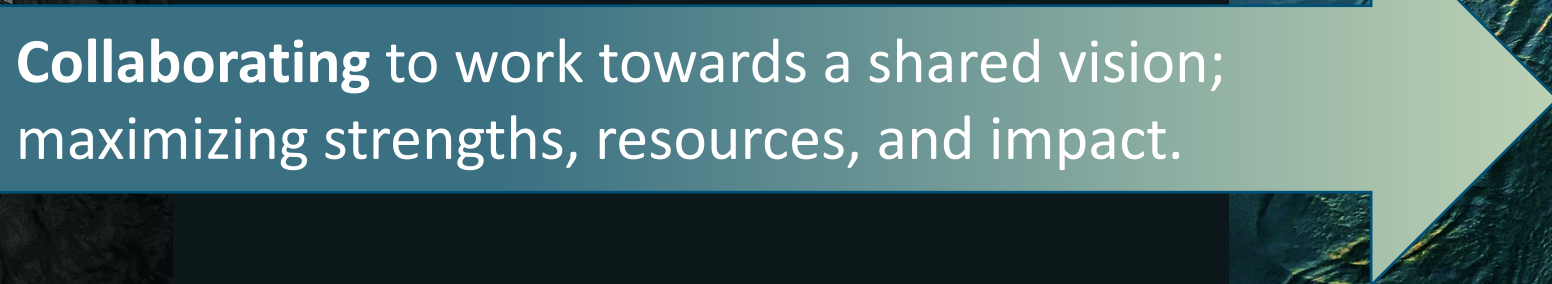


Long-term,
affordable, quality
housing

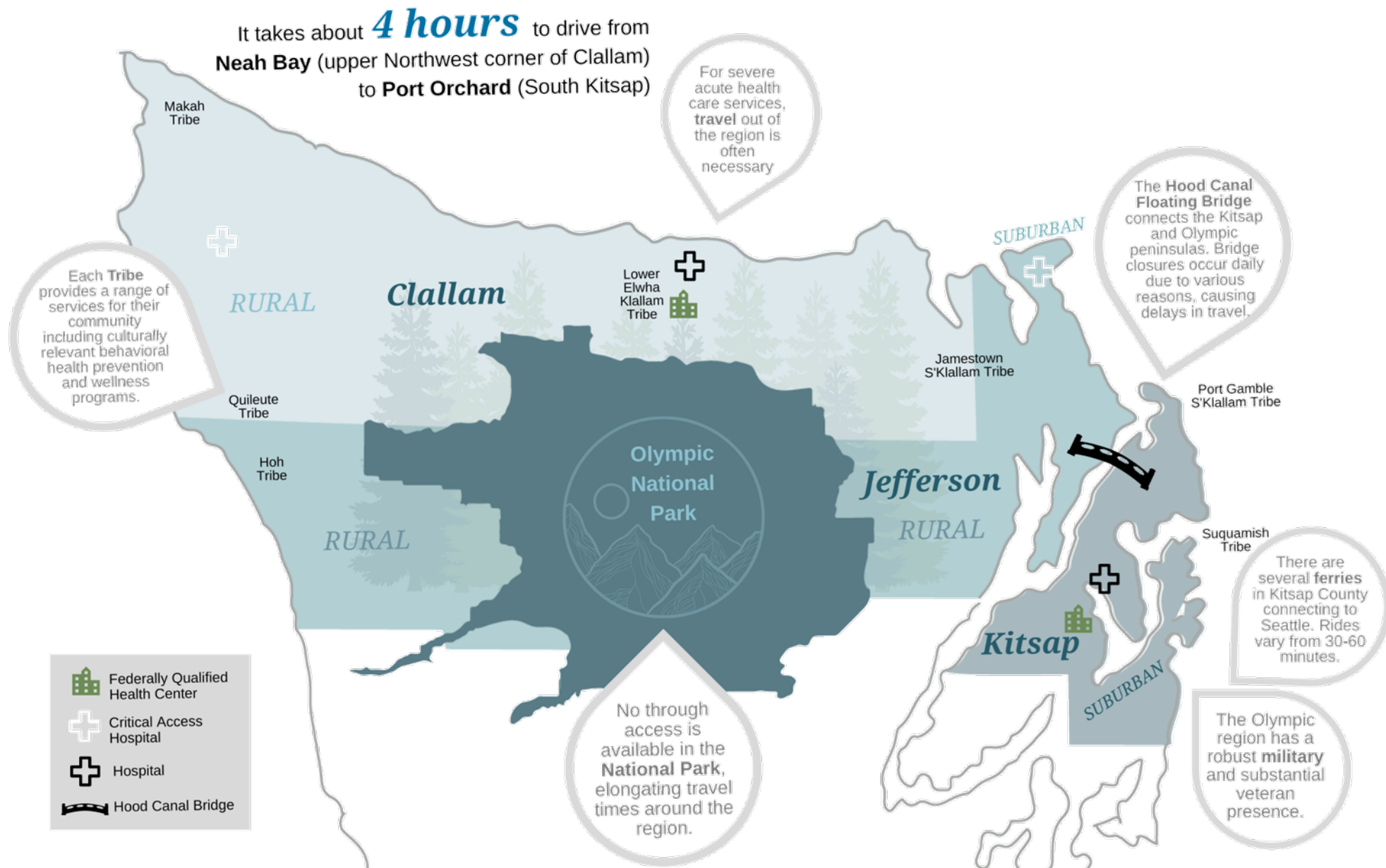


Stronger *Together*

Collaborating to work towards a shared vision;
maximizing strengths, resources, and impact.



The Olympic Region



OCH ROLES



Catalyst for change

Advocacy, education, and organizing to change policies and paradigms around health in the region



Community connector

OCH success and sustainability is tied to the well-being of the populations and region we serve



Seed planter

Allocate dollars and resources through a targeted portfolio of complementary efforts

FOCUS AREAS



STRATEGIES



Convening, learning, & maximizing



Funding coordination



Advocacy & engagement



Data sharing & transparency

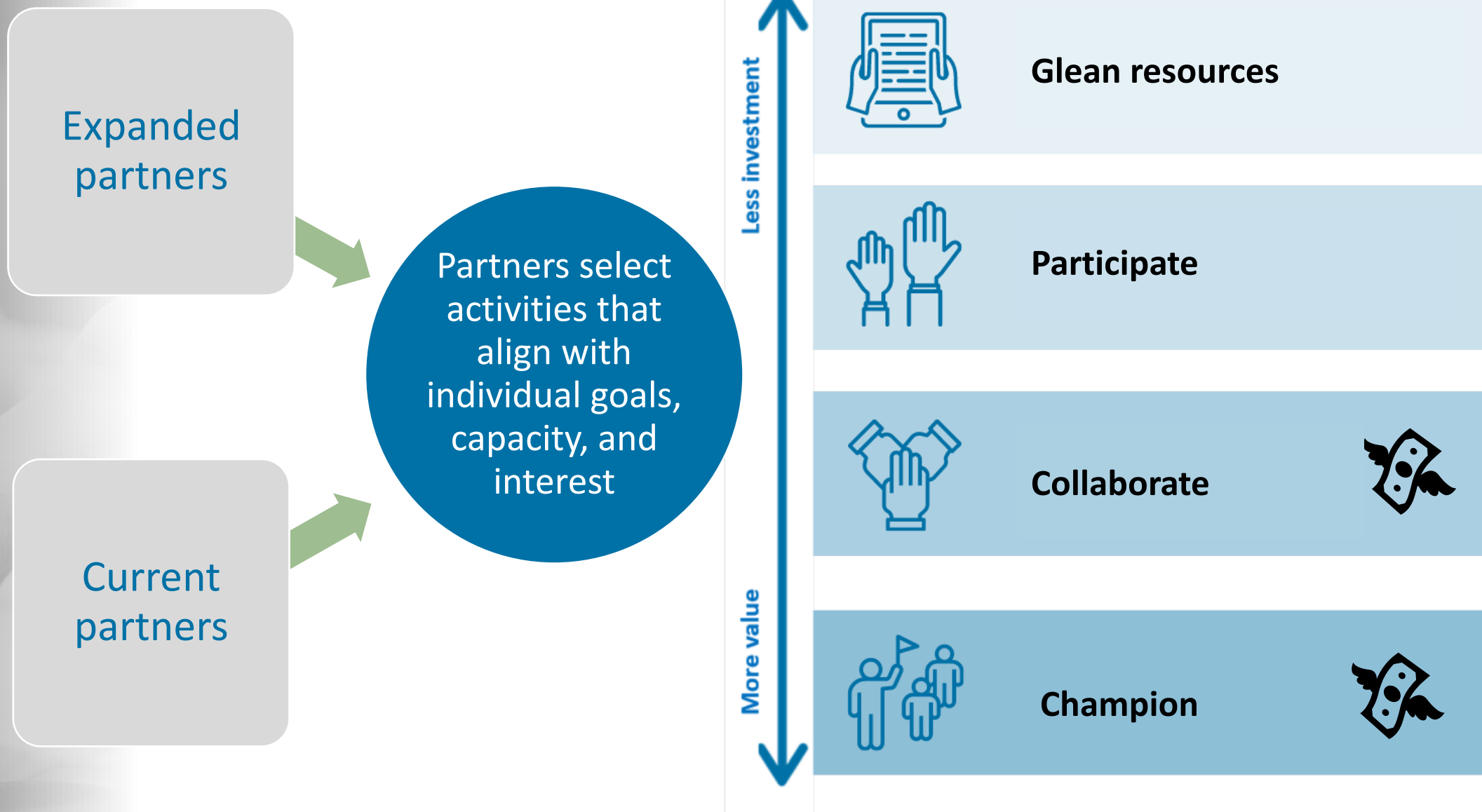


Communication



Place-based approaches

PARTNERSHIP

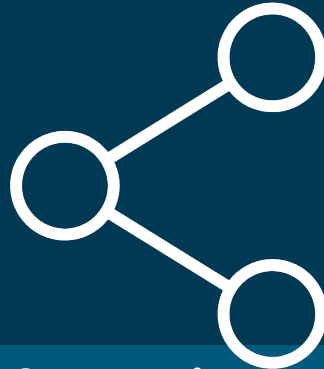


Strategic Plan Successes



Catalyst for change

- [Becoming a Recovery Friendly Region](#)
- [Coffee Break Video Series](#)



Community connector

- Learning & Convenings (regional, CBW regional, Hope, etc.)
- Expanding the Table funding initiative
- Partner Network Analysis (results Oct)



Seed planter

- Funding initiatives (Youth Engagement, Stronger Together, Expand & Enhance Access to Social Care)
- [Connecting to Data](#)
- [Connecting Community Members to Care report & MIH evaluation](#)

Stronger Together Funding Initiative, Olympic Connect

Strategic Plan Successes

Reduced substance
misuse & abuse



- [Becoming a Recovery Friendly Region](#)
- [Recovery-friendly language](#)
- [Youth engagement funding](#)
- [Opioid Overdose Awareness Campaign](#)
- [Coffee Break Video Series](#)

Access to full
spectrum of care



- [Workforce report](#)
- [Regional resource directory](#)
- Partner-led trainings
- Expanded populations of emphasis

Individual needs are
met timely, easily, and
compassionately



- [Connecting Community Members to Care Report](#)
- MIH Evaluation (results early 2026)
- Learnings & convenings (CBW regional, TIC, MI, Hope, Person-first language, LGBTQ+)

Long-term,
affordable, quality
housing

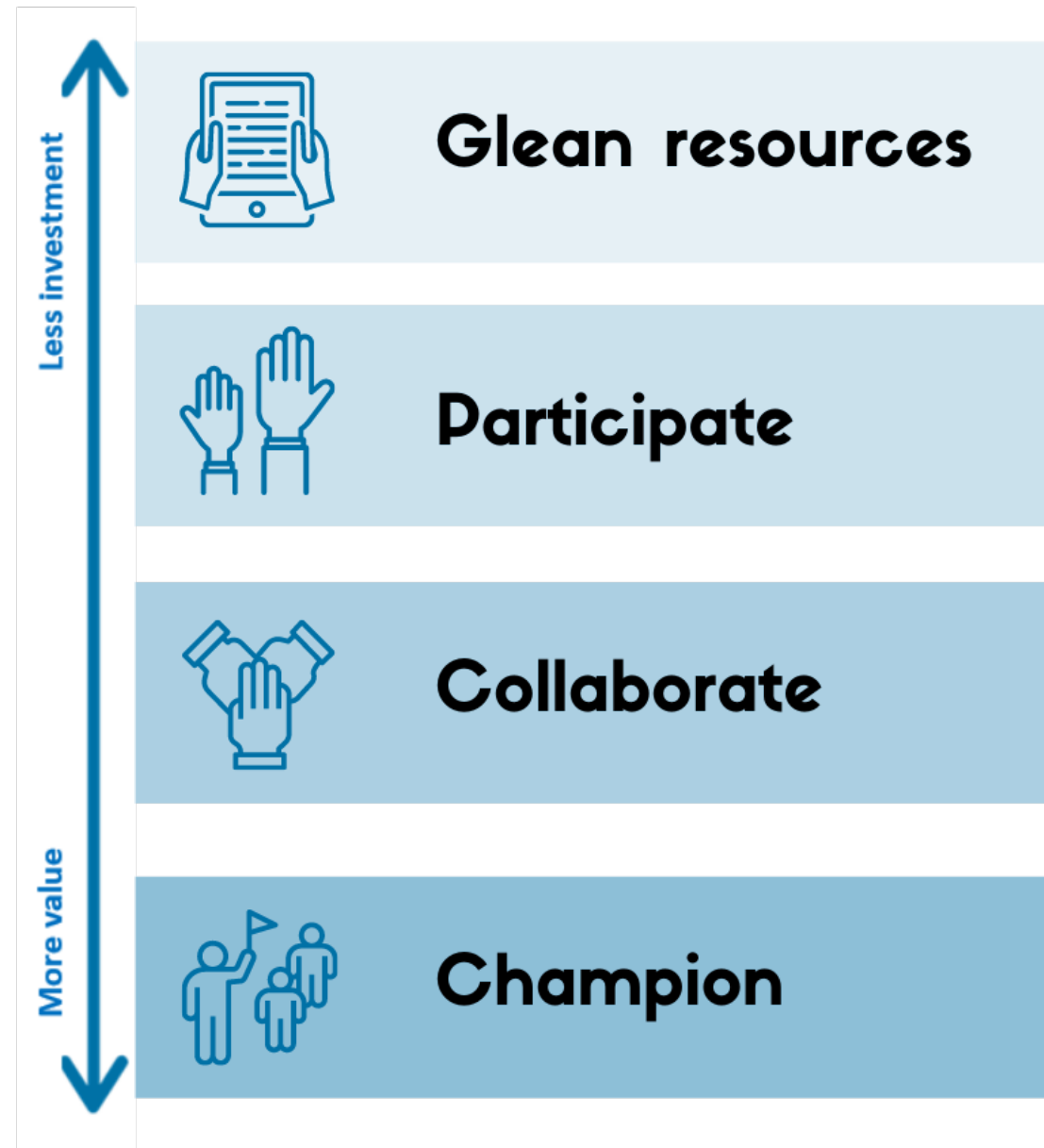


- Expand & enhance access to social care funding
- Housing convening

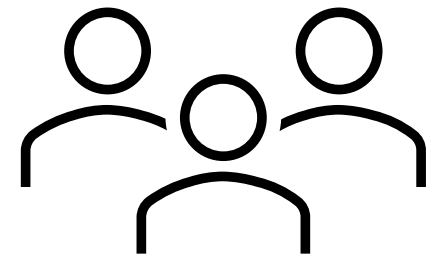
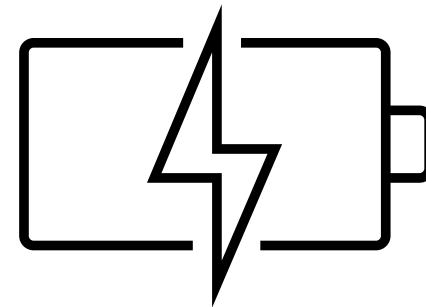
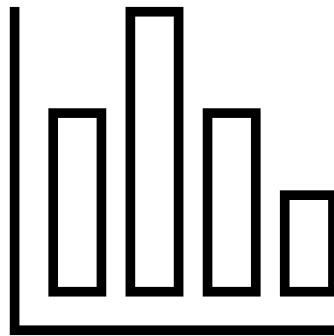
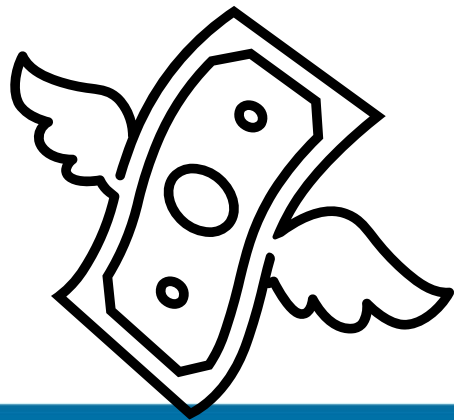
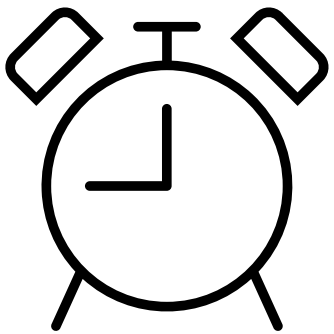
Stronger Together Funding Initiative, Olympic Connect

Strategic Plan Successes

- New partnerships
- Expanded partnerships
- 2025 Partner Network Analysis results in October
- Braided funding model supports a variety of partners and initiatives under the 2022-2026 Strategic Plan



Strategic Plan Challenges & The Unexpected

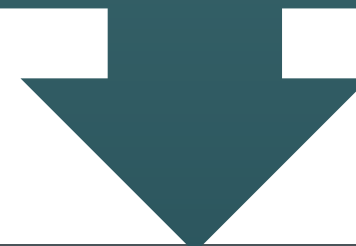


What resonates?

What surprises you?

What's missing?

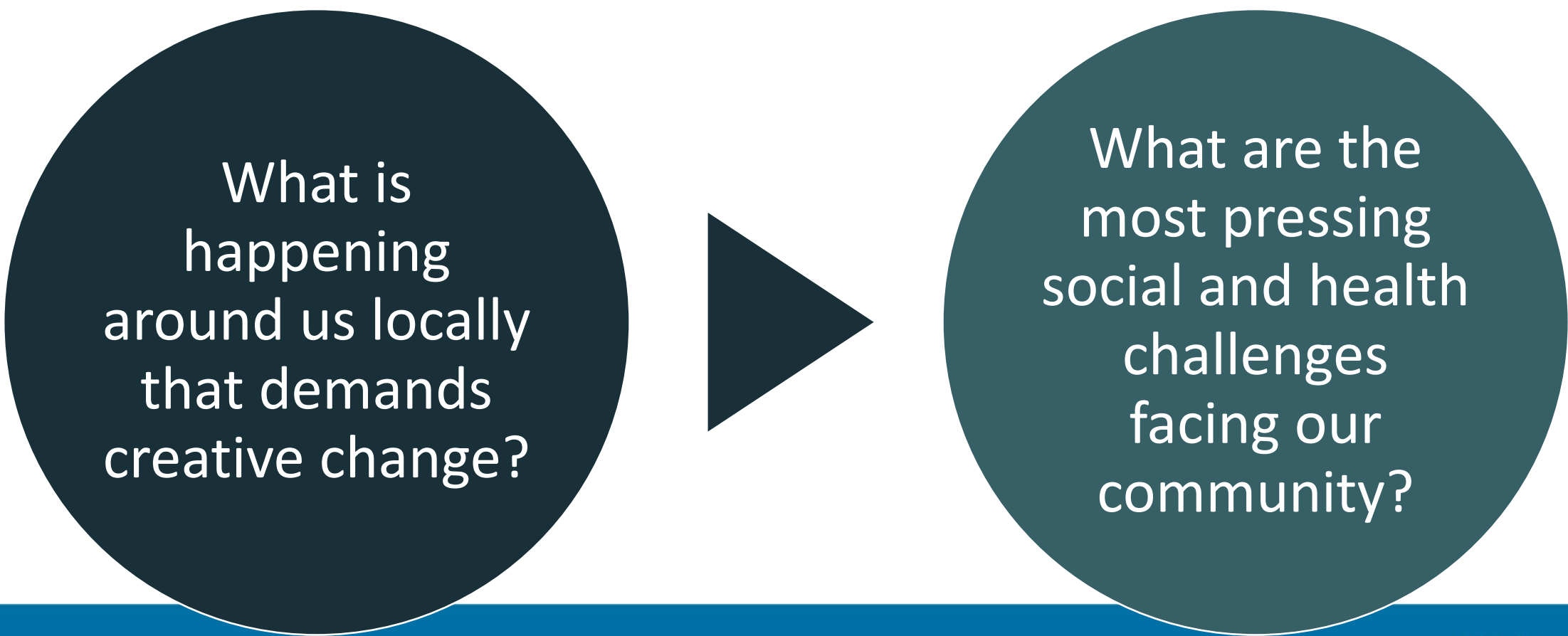
Silently, walk around the room and respond
to the questions



Then, let's look for similarities, themes, and
differences

What do you
see?

What don't you
see?



What is
happening
around us locally
that demands
creative change?

What are the
most pressing
social and health
challenges
facing our
community?



Staff to compile and organize notes from this discussion



Staff to create a draft strategic plan roadmap

Quantitative & qualitative data



Seeking 3-4 board members (or alternates) to participate on a strategic planning committee:

One year

Meet 8 times in 2026

Give staff guidance and direction

Keep board member colleagues updates



Goal is to have the Board adopt a new strategic plan at the September 2026 retreat

Key priorities for 2026

2025 Workplan

For 2025, the work was very straightforward, and a **simple list of priorities** was approved by the Board in November 2024:

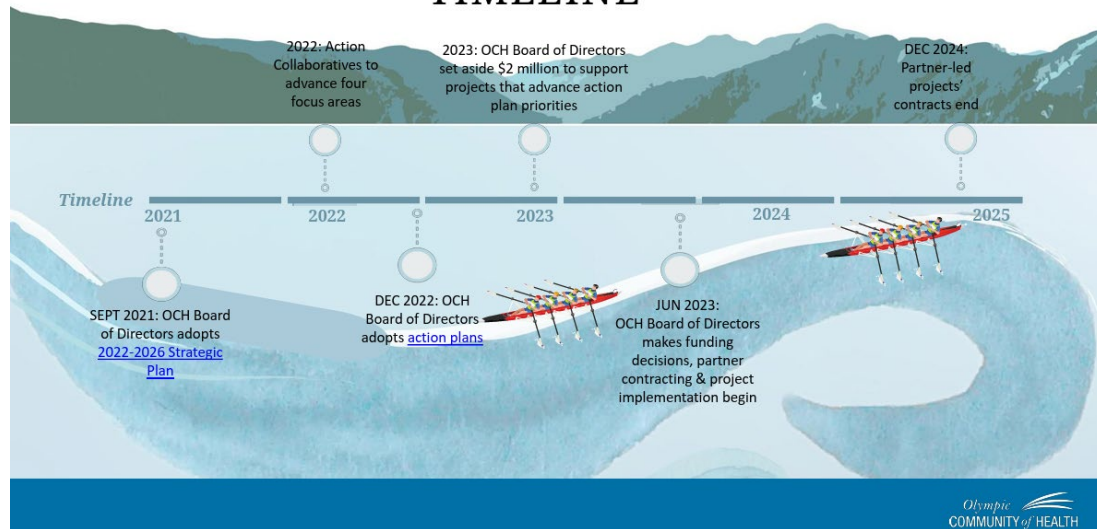
- Closeout the 2023-2024 Stronger Together funding initiative.
- Establish and implement systems to assure alignment with federal grants management policies.
- Launch, implement, and begin to evaluate Olympic Connect in alignment with funder mandates, partner interests, and the needs of the community. Ongoing improvement and adaptation.
- Continue to work toward goal of becoming a “high-functioning community care hub” by mid-2026 as measured by an assessment tool adopted by HCA and DOH.
- Build capacity among the staff team to best support the community care hub.
- Take stock of the 2022-2026 OCH Strategic Plan and begin to identify next steps.

2025 Successes

Closeout the 2023-2024 Stronger Together funding initiative.

- Stronger Together funding initiative close-out

STRONGER TOGETHER | FUNDING INITIATIVE TIMELINE



STRONGER TOGETHER

Fostering a Thriving Olympic Region, One Partnership at a Time

Funding Initiative | June 2023 - December 2024

Olympic Community of Health



Olympic
COMMUNITY of HEALTH
Clallam | Jefferson | Kitsap

2025 Successes

Establish and implement systems to assure alignment with federal grants management policies.

- October 2024 – Board adoption of federal grants management policies
- December 2024 – Internal assessment of OCH policies & procedures with consultant
- January 2025 – Team Federal Grants Management Training
- June 2025 – Partner Federal Grants Management Training
- Ongoing – Adapting and implementing policies and procedures in preparation for 2026 single audit
 - Coordinating with auditor and CLA

2025 Successes

Launch, implement, and begin to evaluate Olympic Connect in alignment with funder mandates, partner interests, and the needs of the community. Ongoing improvement and adaptation.

- Oct 2024 - Launched
- Oct 2024-February 2025 - Care Coordination Partner contracting & onboarding
- Mar 2025 – Care coordination Partner convening – first Oly Connect data shared
- Partner network survey & analysis (results Oct)
- Apr 2025 – Adopted Hope & Econ Develop strategic framework & measurement plan
- Apr 2025 – Re-launched Advisory Group, meets quarterly (July, Oct)
- August 2025 – Data dashboards



2025 Successes

Continue to work toward goal of becoming a “high-functioning community care hub” by mid-2026 as measured by an assessment tool adopted by HCA/DOH.

- Implemented next steps from 2024 assessment, completed 2025 assessment
- Capacity building – MI training (May), Grants Management (June), Hope training (Aug), TIC (Nov)
- Robust communications including branding, key messages, & marketing materials in a variety of formats
- Shared regional technology adoption, implementation, continuous improvement
- Established regional resource directory
- Deployed learning management system
- Resource & service infrastructure & capacity building (Recompete & DOH)





2025 Successes

Build capacity among the staff team to best support the community care hub.

- Fully staffed OCH team to effectively move the work forward
- Expert support (AHP, CLA, DH, Maggie Chumbley, Phil Ramunno, Uncommon Solutions, VillageReach)
- Training/Learning (Grants Management, Facilitation, Hope, Equity)

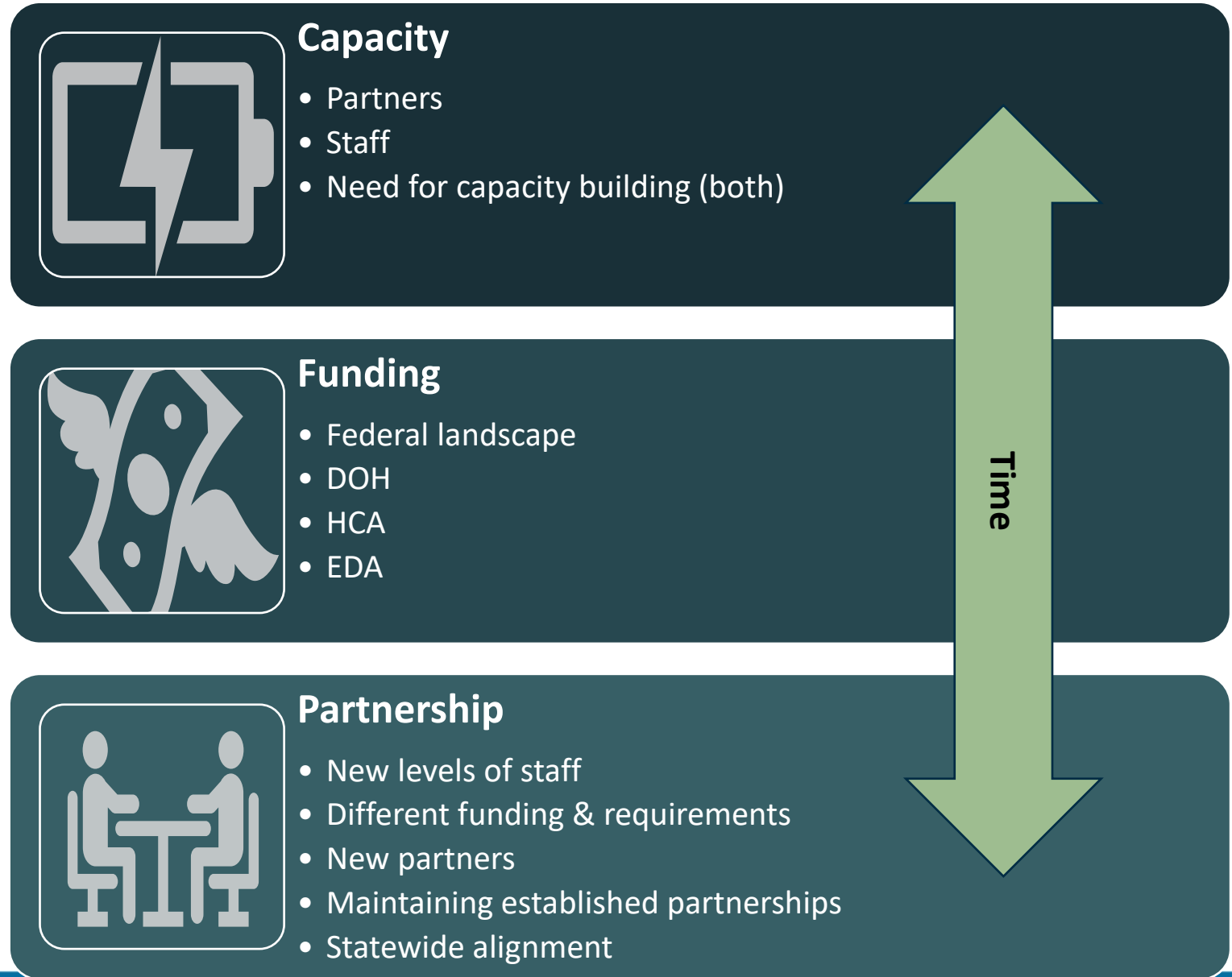
2025 Successes

Take stock of 2022-2026 strategic plan & begin to identify next steps

- 2025 Partner Network Analysis (results Oct)
- Preparation, Board retreat & next steps



2025 Challenges & The Unexpected



What resonates?

What surprises you?

What's missing?

Staff thinking on 2026

- Staff will bring 2026 workplan & budget for Board approval in November.
 - Today is to brainstorm and collect inputs.
- For 2026, there are three “buckets” of work to plan for:
 - Olympic Connect
 - Strategic planning
 - Gradually add other work outside the hub (e.g., getting back to our roots in health transformation)

Silently, walk around the room and respond
to the questions



Then, let's look for similarities, themes, and
differences

What do you
see?

What don't you
see?

Next Steps

Our next strategic plan

- Staff will compile notes from today
- Identify 3-4 board members/alternates to sit on a short-term strategic plan committee to move this work forward
- Staff will organize a roadmap including quantitative data review, hearing from network partners, hearing from community, summarizing the national landscape, etc. Goal is to adopt new strategic plan at next year's board retreat

Key priorities for 2026

- Staff will compile notes from today
- Staff will bring back a workplan and budget for your approval in November



Stronger Together: 2025 Partner Network Report



Olympic Community of Health brings together health-serving partners from a variety of sectors and Tribes across Clallam, Jefferson, and Kitsap counties, and seven sovereign tribal nations, to tackle health issues no single sector or Tribe can tackle alone. Together, we are working to foster a region of healthy people, thriving communities.

In 2022, Olympic Community of Health conducted the [first partner network analysis](#) to better understand the collaborative network of partners, evaluate network relationships, quantify collaboration, and identify key opportunities to expand the partner network. In 2025, Olympic Community of Health repeated the partner network analysis to capture growth and re-evaluate opportunities for improved partnerships and relationships.

Network Overview

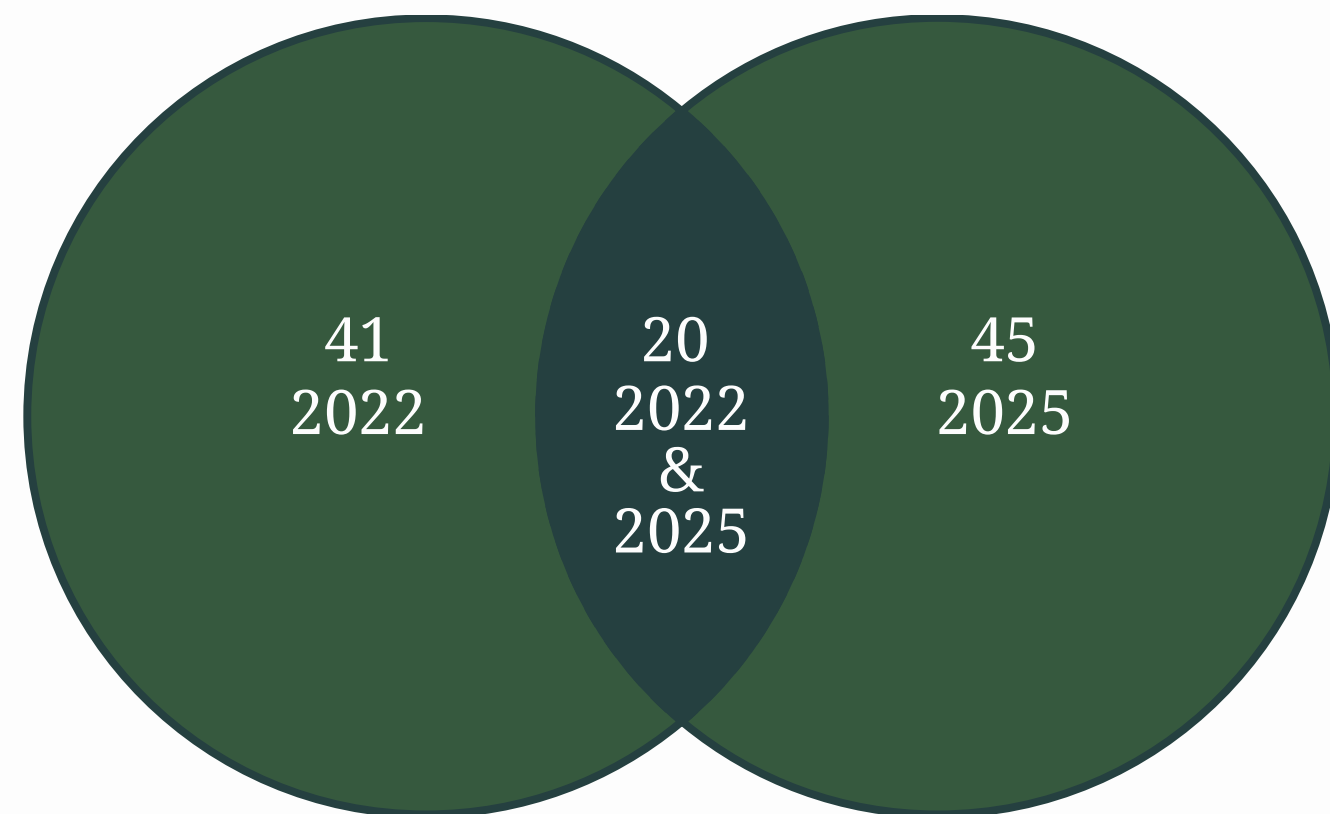


Figure 1: Number of partners that took the survey

Partners

- In 2022, 41 partners participated
- In 2025, 45 partners participated
- **Small partner overlap:** 20 partners participated both in 2022 and 2025

Relationships

- In 2022, there were 529 relationships
- In 2025, there are 2,038 relationships (see figure 2)



There are more partner network relationships in 2025.
The partner network relationships appear less developed than in 2022.

Network Overview

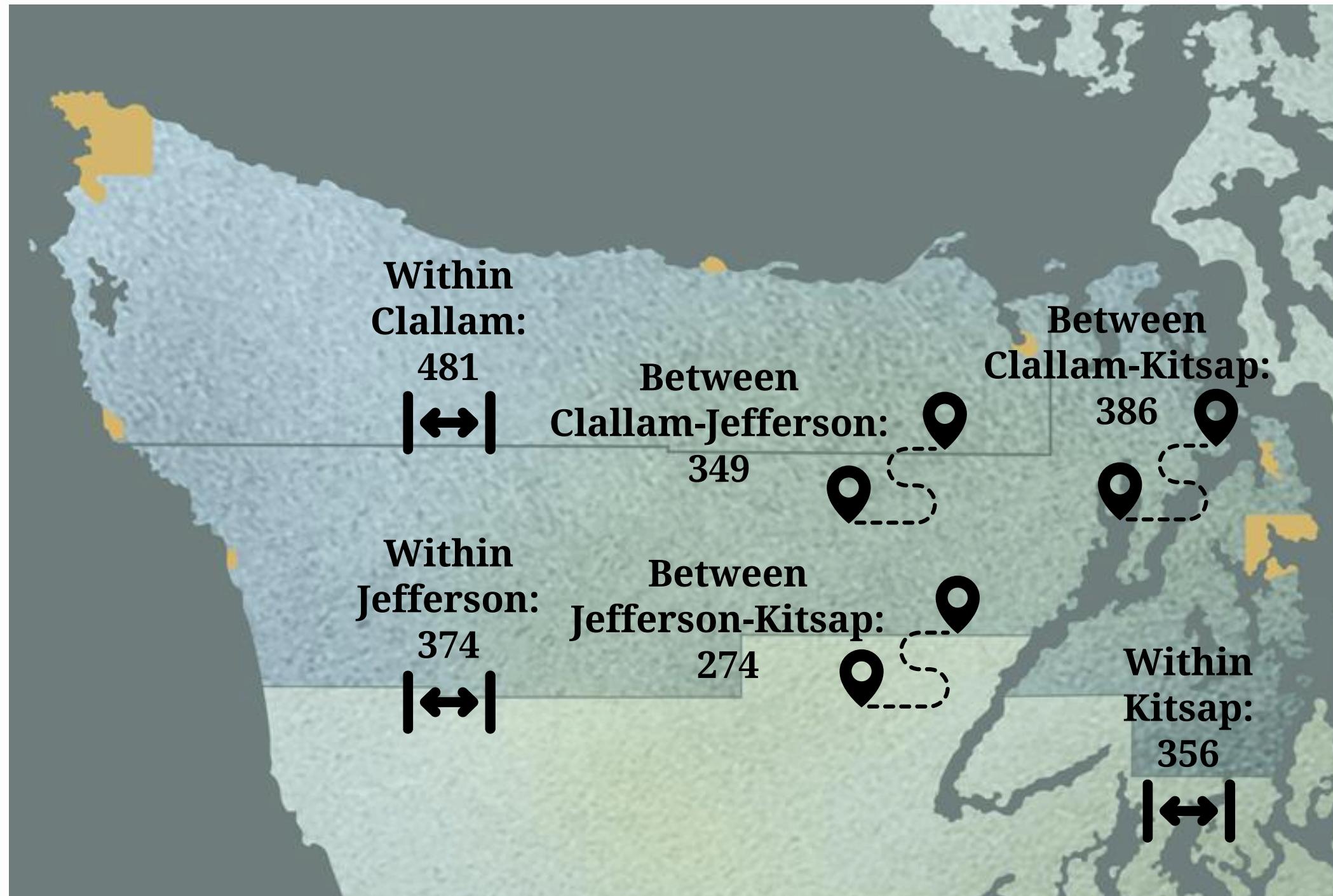
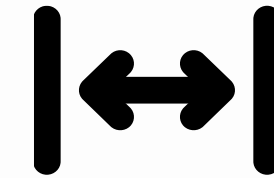


Figure 2: This map shows the **partner relationships** within each county and between each county. There are more relationships in 2025 than in 2022 and those relationships appear less developed.



Shows the relationships within each county:

- 481 within Clallam County
- 374 within Jefferson County
- 356 within Kitsap County

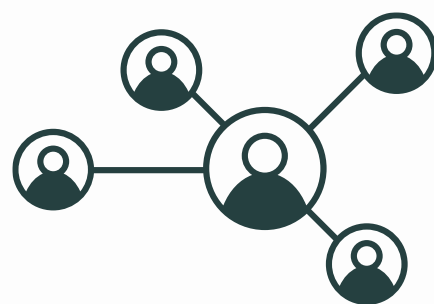


Shows the relationships between each county:

- 349 between Clallam and Jefferson Counties
- 274 between Jefferson and Kitsap Counties
- 386 between Clallam and Kitsap Counties

Network Overview

What this means:



The overall network of partners has expanded from 2022 to 2025.



The partnership network is changing:

Olympic Community of Health made intentional efforts to expand the partner network with different funding opportunities available over the years to engage more partners, and was a recommendation that came out of the 2022 findings.



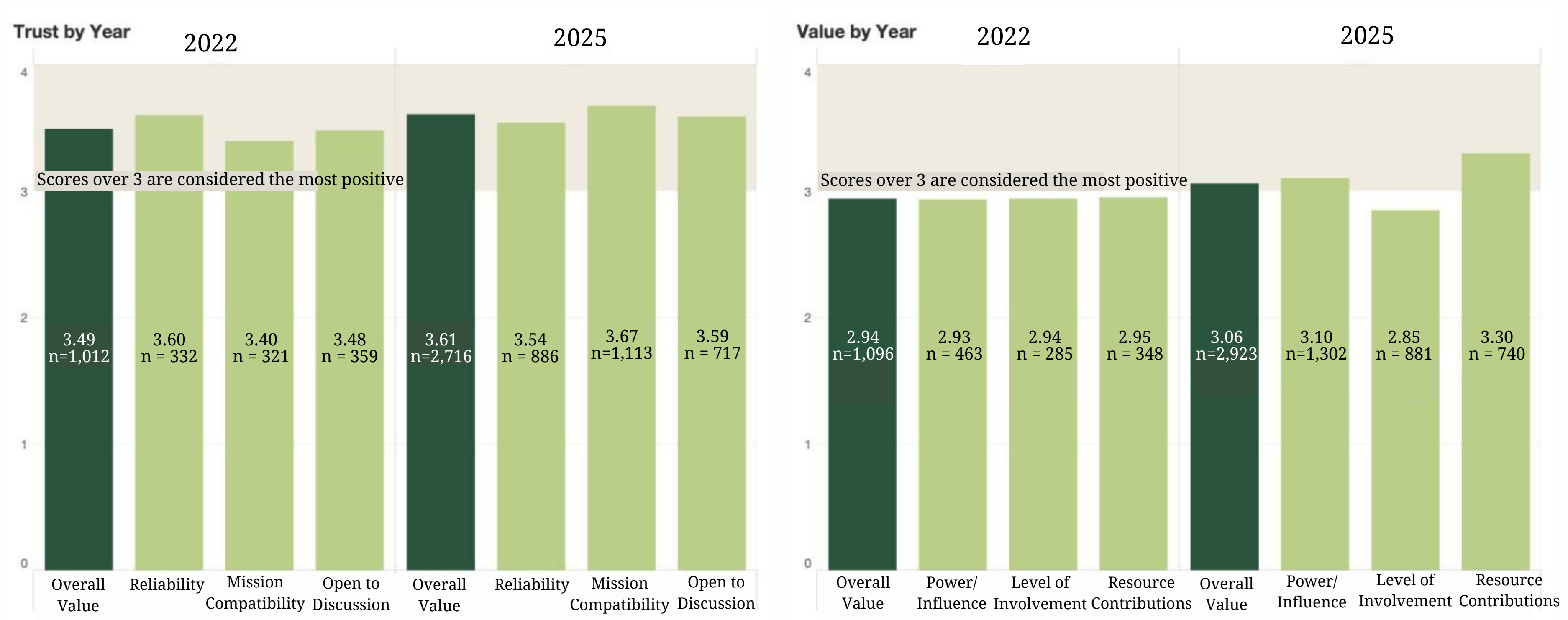
Our collaborative work is changing. Some partners may not see themselves in our new priorities, while other partners are new and coming to the table for the first time or in a more collaborative way.



The incentive methodology changed. 2022 was contract-led while 2025 was incentive-payment led.

Key Takeaways: Trust & Value

Average perceptions of trust and value among partners. Scores over 3 are considered the most positive. **Perceptions of trust and value are critical to building a network.**



Key Takeaways: Trust & Value



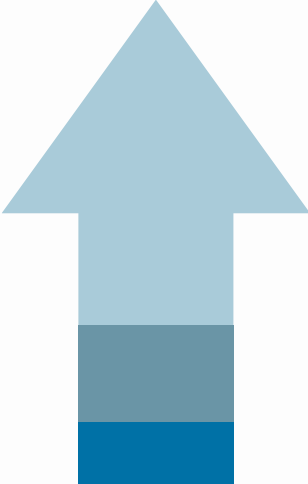
Trust

Trust in network relationships facilitates effective information exchange and decision-making and reduces competition among members.



Value

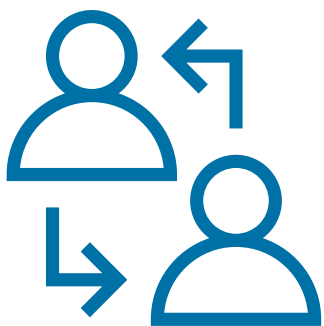
Understanding the perceived value of network relationships is important in leveraging the different ways in which members contribute to the network.



There were favorable shifts from 2022-2025. The partner network saw improvement in both trust and value scores. In 2022, fostering a greater sense of value across the partner network was identified as an opportunity and this was accomplished.

Key Takeaways: Levels of Engagement

The frequency in which partners interact with one another on Olympic Community of Health-related projects correlates with various engagement levels. The more engaged a partner is, the more frequently they interact.

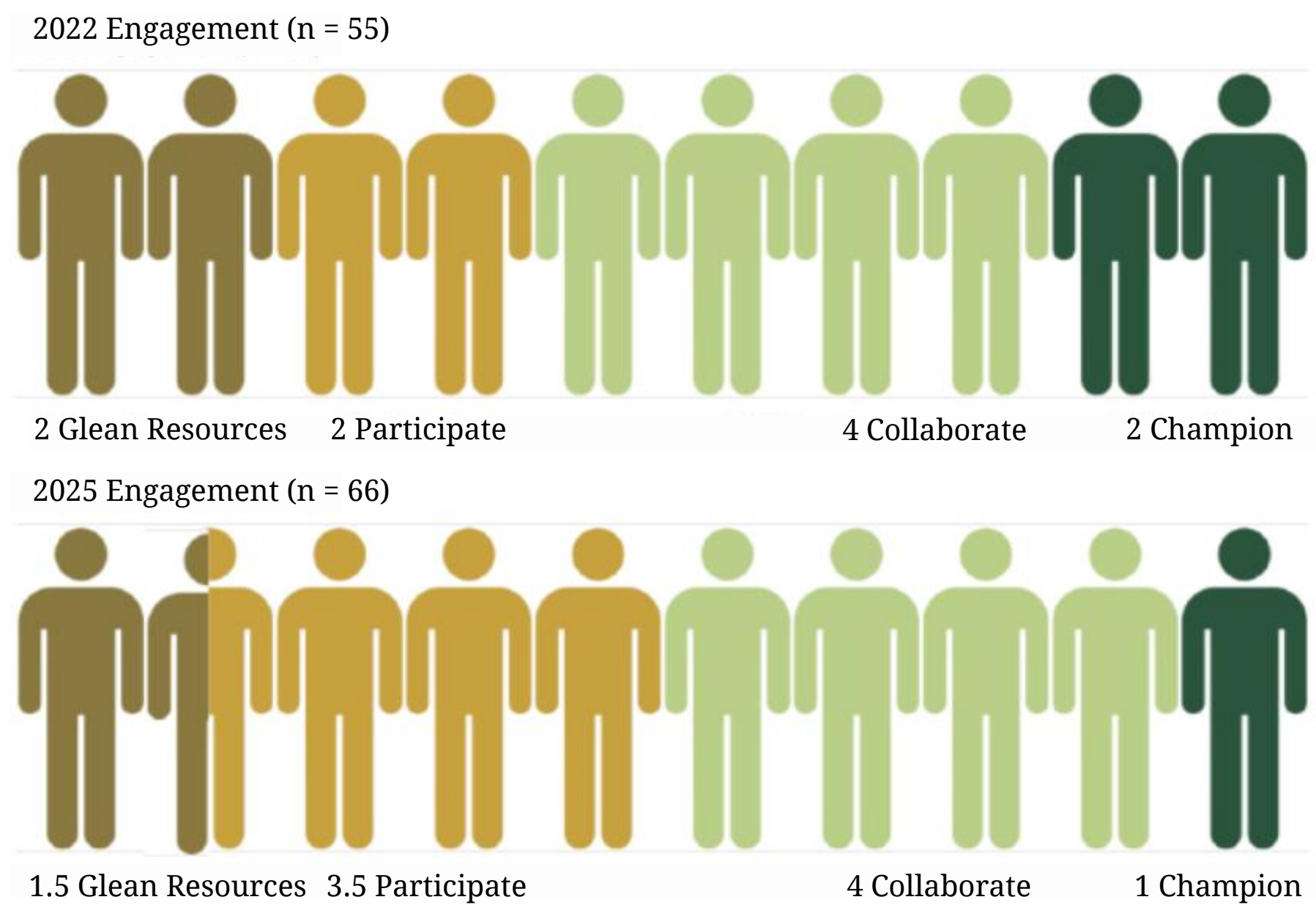


The highs and lows (glean resources & champion) of level of engagement decreased from 2022 to 2025.



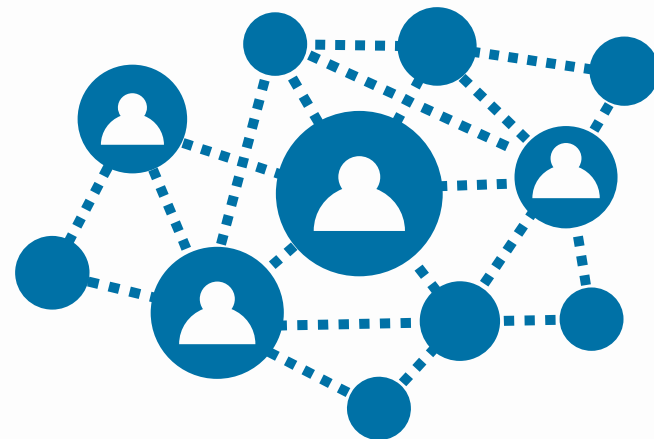
Partners are collaborating and participating more in 2025 than in 2022.

How engaged are partners? Out of every 10...



Key Takeaways: Partner Contributions

Partners ranked the following their most important contributions to improving health across the Olympic region. 2022 and 2025 were consistent in rankings:



Building community connections (bringing new partners to the table, deepening connections across sectors, Tribes, and communities)



Improving systems, policies, and practices in collaboration with another organization or Tribe



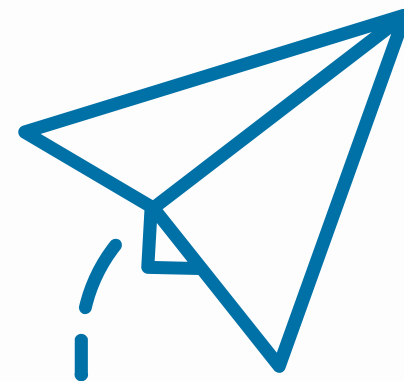
Improving systems, policies, and practices within your organization or Tribe

Key Takeaways: Shared Activities

Partners reported participating in the following shared activities in the partner network.
The top two activities are the same identified in 2022:



Exchange general information/resources



Send and receive referrals



Joint programming/service delivery

Key Takeaways: Network Successes

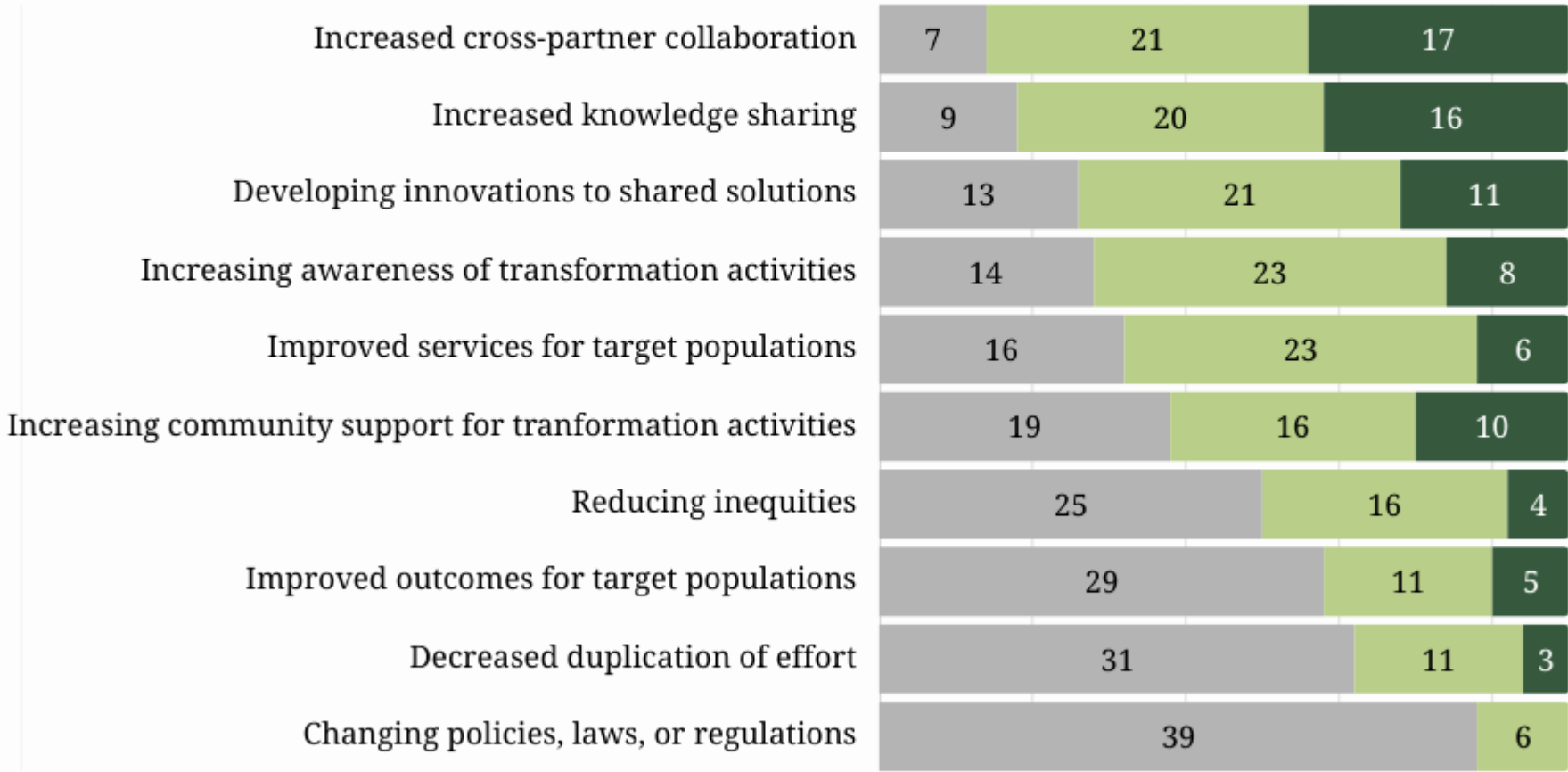
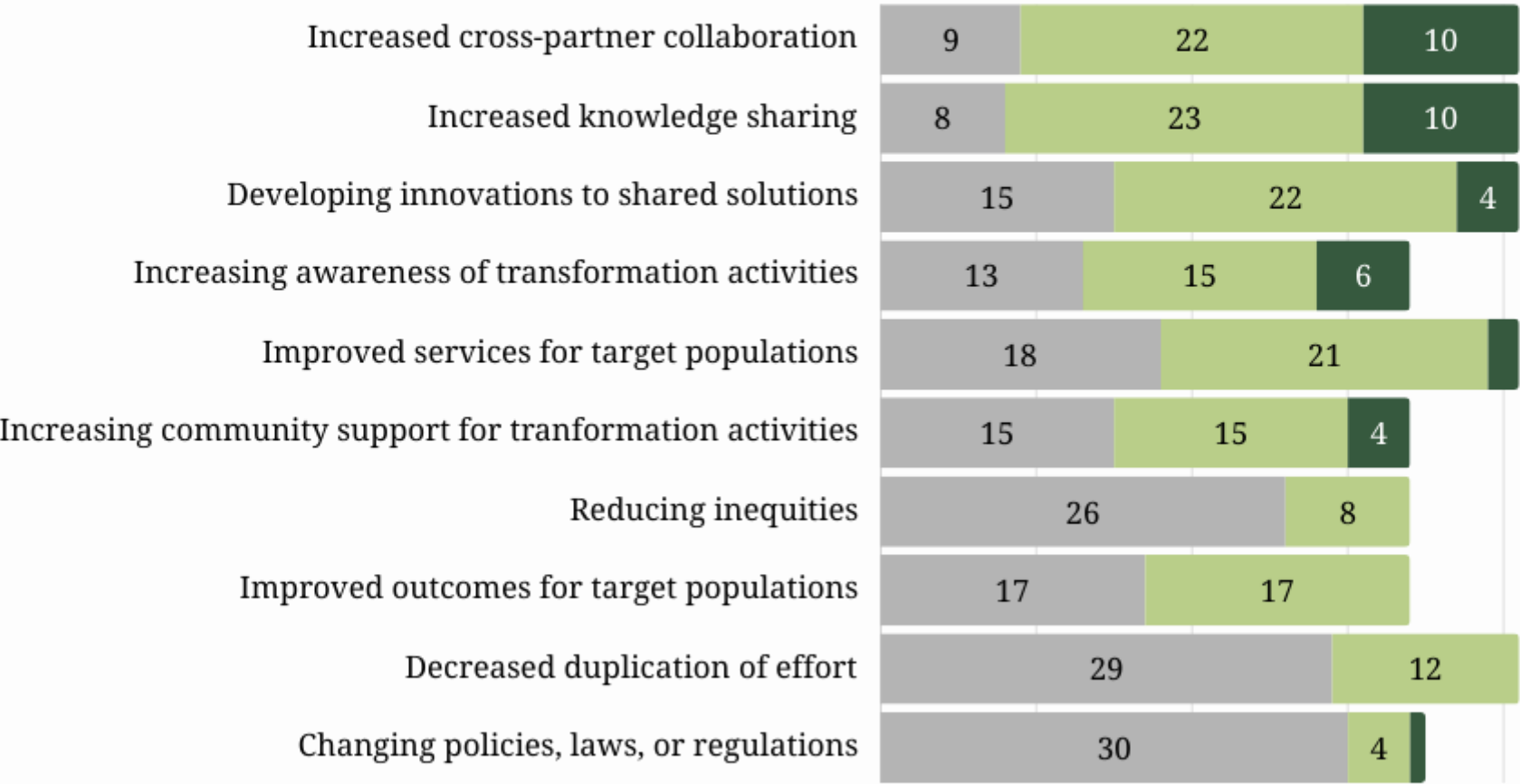
Partners were asked, “Over the last two years, or, since you’ve been engaged with OCH, how successful has the network of OCH partners been at facilitating or achieving the following activities and outcomes?”

2022

2025

● Not successful, somewhat successful, unsure
● Successful ● Very Successful

● Not successful, somewhat successful, unsure
● Successful ● Very Successful



2022 n = 376

2025 n = 450

There are significant favorable shifts in network successes ✓

Key Takeaways: Future Priorities

Partners ranked the following as the most important activities and outcomes that the network of partners should prioritize in the future:

2022 Priorities:



Developing innovative solutions to shared problems



Increased cross-partner collaboration



Improved services for target populations

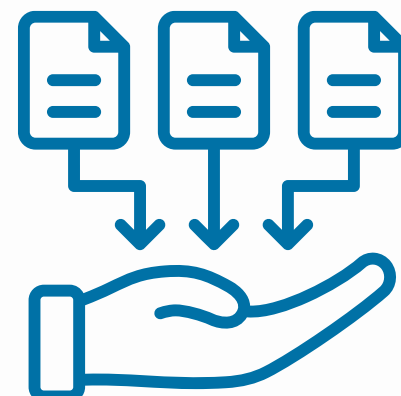
2025 Priorities:



Increased cross-partner collaboration



Improved services for target populations



Decreased duplication of effort

Moving to Action & Next Steps

Progress was made from the 2022 partner network next steps:

Successes:

Use findings to **inform partner engagement** including create targeted convenings, engage with new partners, and support cohesive messaging.



Foster a **greater sense of value across the partner network** through finding opportunities to raise awareness of various partner work and regularly sharing partner involvement with Board and broader network to increase awareness of contributions and decrease duplication of efforts.



Specify populations of emphasis in strategic plan action plans for each focus area and embed findings into the Connecting to Data tool on OCH website (to be updated fall 2025).



Opportunities:

Increase **community awareness** of the work OCH does and leverage “core partners” to serve as **ambassadors to engage** with new partners and communities.



Moving to Action & Next Steps

Next Steps:

With a strong foundation of partnership, trust, perceived value, and collaboration, OCH is well positioned to **continue to expand and enhance the partner network**. There is opportunity to usher more engaged partners into higher levels of engagement (e.g. collaborate & champion), leverage “core partners” to serve as ambassadors to engage with new partners missing from the partner network, as well as to re-engage partners who may not see themselves in our changing work.

Throughout 2024 and 2025, OCH prioritized establishing [Olympic Connect](#), the community care hub serving the Olympic region. In 2026, OCH will begin to expand our portfolio of projects as well as start the planning process for our next strategic plan to guide the next phase of the organization and these findings will serve as a **key input**.

1

Leverage core partners to engage with new partners missing from the partner network.

2

Re-engage partners less involved from 2022 to 2025.

3

Usher more engaged partners into **champion** levels of engagement.

4

Embed findings into **Connecting to Data tool** on OCH website (to be updated fall 2025) and uplift tool utility with partners.

5

Increase community awareness of OCH’s work and why collaboration is beneficial to improving health outcomes as well as ways to get involved.



Gratitude

We're stronger together. Partnerships and collaboration are the heart of our collective efforts toward creating healthy people and thriving communities. OCH expresses our deep gratitude to all partners who helped to measure the impact of regional collaboration by participating in the 2025 partner network analysis. This work is not possible without our valued partners. Thank you.

If you have questions about the partner network analysis, please email och@olympicch.org