



PERSHING GENERAL HOSPITAL & NURSING HOME BOARD OF TRUSTEES
Regular Board Meeting Minutes
Thursday, June 25, 2020

ENTITY: Pershing General Hospital
DATE: June 25, 2020
TIME: 5:30 P.M. – Regular Meeting
PLACE: Pershing General Hospital
850 6th Street, Suite 103 – Conference Rm
Zoom Phone number: 1-669-900-9128
PLACES POSTED: Pershing General Hospital
Pershing County Courthouse
US Post Office
Pershing County Library
www.pershinghospital.org
ID: 7752732621

ATTENDING: Board: Chair Carolyn Hultgren, Vice Chair Charles Safford, Secretary Ted Bendure, Trustee Joe Pierce
Board via Zoom: Trustee Dana Tueller
Absent: No board members were absent.
Staff: Cynthia Hixenbaugh, Lynn Broyles, KayDawn Hughes, Pam Weeldreyer.
Other by Zoom: Bryce Shields (Board Counsel), Carol Shank (County Commissioner-Liaison), Debbie Mock, Debra Reid (Press)

- 1) **REGULAR MEETING CALLED TO ORDER AT 5:32 by Chair Hultgren.**
- 2) **PUBLIC COMMENT – No Public Comment**
- 3) **CONSENT AGENDA** - The Board will consider for possible action these items in their entirety without discussion – **For Possible Action.**
 - a. Meeting minutes for Regular Board Meeting May 28, 2020
 - b. Warrants (Check Register)
 - c. Approval of Proxy Credentialing for Renown TeleHealth Practitioners: Dr. Pratt, Dr. VanderClay, Dr. Charlat, Therapist Hudson, Dr. Patrick, Therapist Volk, Dr. Harvinder, Dr. Gonzales, Dr. Gray, and Dr. Barangan.
 - d. Acknowledgement of departing Renown TeleHealth Providers: Dr. Anderson, Dr. Manno, Dr. Krull, Dr. Kelley.

ACTION

A motion to approve the Consent Agenda as presented was made by Secretary Bendure. Second made by Trustee Pierce. Motion approved unanimously.

4) REPORTS

a. Risk Manager: Update by KayDawn Hughes

- NRS 439.875 Patient Safety Committee – The number of sentinel events was one (an unexpected death). The number of acquired infections in-house for acute was zero and long-term care was zero. There were no recommendations to reduce the number and severity of sentinel events and infections that occurred.
- There was one complaint for May. The incident was investigated and resolved.
- Quality Improvement Report
 - COVID-19 – We are all working on COVID-19. The clinic has instituted a lot of new processes including VSee visits; and a drive-through tent for all sick or suspected COVID. Patients are coming in for simple visits, such as, DM visits, blood pressure checks, and pain management. All patients must wear a mask.
 - The Quality Indicator Result for E.R. visits is at 92% of goal for the current quarter.
 - Vital signs within 20 minutes of discharge – Qtr. 1 through the current date is 97 percent.
 - Opioid prescribing in the E.R. (AB474): Last report was 33% (one out of three) and this quarter to date is at 50% (three out of six).
 - Critical Labs reported to Provider within 60 minutes for Qtr. 1 to date is 90% (18 out of 20). Two were reported to M.A.s out of town.
 - Emergency Department Transfers Communication for Qtr. 1 to date is 96% (25 transfers).

b. Chief Nursing Officer: Update given by Cynthia Hixenbaugh

- i. Critical Access Hospital and Skilled Nursing Facility Utilization
 - Admissions – PGH had one acute admit in May. There was one swing admit and there were 102 Emergency visits.
 - Transfers – Of ten transfers in May, five were medical, one was mental health, and four were trauma.
 - Acute/E.D. – There were four “Return within 72 Hours Same Diagnosis” and one “AMA/Left Without Being Seen.”

- Long-Term Care – The current census is 22. We are planning on one admission on June 25 and one admission on July 1 bringing the census to 24 residents.
 - Referrals – Out of nine referrals for Long-Term Care (LTC) and Swing, we were able to accept one LTC and one Swing. We declined three and there were four withdrawals due to no payer source, care exceeds capacity, or no open beds. Care exceeds capacity includes severe behavioral issues or medically complicated.
- ii. COVID-19 Update
- We are awaiting further guidance from state and federal entities regarding when to reopen Long Term Care for visiting. The staff is doing an amazing job trying to keep the resident feeling connected to family and friends; however, it is still difficult for the residents to not see their loved ones in person.
 - The required reporting during COVID includes Daily LTC symptom Surveillance; PPE weekly; Daily Bed Occupancy and Symptoms; and NHSN weekly.
 - Cynthia reviewed the most current statewide statistics regarding COVID-19.
- c. **Chief Procurement Officer: Update given by Cynthia Hixenbaugh**
- i. Pennington Grant Purchase Update
- COVID Grant
 - All items on the Pennington COVID grant have been ordered; however, there are four items that are backordered and we are awaiting their arrival.
 - Cynthia reported that Jim Weeldreyer, IT Director wanted the board to know that he has installed 17 internal cameras that were purchased through the grant and will be installing an additional five cameras outside.
- d. **Chief Financial Officer: Update given by Lynn Broyles**
- i. Revenue Cycle Dashboard March 2020
- ii. Revenue Cycle Dashboard April 2020
- iii. Financial Statements for the period ended April 30, 2020 – **For Possible Action**
- iv. Financial Statements for the period ended May 31, 2020 – **For Possible Action**
Lynn reviewed, discussed and presented both the April and May financial statements to the Board.
ACTION
A motion to approve d. iii. Financial Statements for the period ended April 30, 2020 and d. iv. Financial Statements for the period ended May 31, 2020 was made by Secretary Bendure. Second made by Trustee Pierce. Motion approved unanimously.
- v. Revenue Cycle Dashboard May 2020
Lynn reviewed and discussed the Revenue Cycle Dashboard for May with the Board. Discussion and possible action regarding FY20 Budget Augmentation – **For Possible Action** Lynn reviewed, discussed and presented the FY20 Budget Augmentation to the Board.
ACTION
A motion to approve the FY20 Budget Augmentation as presented was made by Secretary Bendure. Second by Vice Chair Safford. Motion approved unanimously.
- e. **Revenue Cycle Manager: Update given by Debbie Mock**
- i. Patient Account Write-Offs for May 2020 – **For Possible Action**
ACTION
Debbie presented the Patient Account Write-offs for May 2020.
A motion to approve the Patient Account Write-Offs for May 2020 was made by Trustee Pierce. Second by Vice Chair Safford. Motion approved unanimously.
- ii. Trubridge Financial Analysis
Debbie presented the Trubridge Financial Analysis to the Board.
- f. **Administrator/CEO: Update given by Cynthia Hixenbaugh**
- The PGH goal for Nevada Hospital Association’s Health PAC campaign is \$350.00; we have \$100.00 towards that goal. NHA is an advocacy association.
 - Legal holds for mental health crisis – There has been a minor issue of miscommunication between the E.R. staff and the Pershing County Sheriff’s Office (PCSO) regarding an NRS Statute and the words “may” or “will” in regards to the PCSO taking patients to a mental health facility while on legal hold.

- Cindy met with Sheriff Allen and discussed the PCSO's lack of staffing and the fact that the NRS does not state that law enforcement must take the patient to the facility.
 - PGH itself does not have safe transportation.
 - The undersheriff stated that we would have to get a court order for any future transports.
 - Cindy spoke with Bryce and he acquired buy-in from Judge Shirley to create a template for a court order to be faxed to a judge for approval especially on weekends. Cindy made sure to let the Sheriff know that we appreciate their assistance for community members in need of transport and also reminded him that the PCSO is one of our only resources to safely transport patients.
 - The court order would compel the Sheriff's Office to transport our patient who is in crisis to a bed for mental health services.
 - PGH has had 10 patients in need of transport since January.
 - This is about a person in crisis. Use of the volunteer ambulance service is not an option because a patient would have access to the driver in the ambulance and the ambulance does not have a lock on its back door.
 - Bryce offered in response to a question by Vice Chair Safford that he felt the situation has been resolved satisfactorily.
 - In the future there may be a possibility of joining in a contract for services with others in the state.
- During the annual insurance renewal, our liability carrier asked if we had activated our business continuity plan during the pandemic. We did activate our Emergency Operations Plan, but we do not have a Business Continuity Plan. Cynthia explained that she has found several examples and is working on one for PGH.

i. Rural Health Clinic Utilization

- During May, the clinic saw 563 patients. There were 16 new patients, 17 Telemed Patients, and 18 Telephone visits. Averaging 5-6 COVID testing each day.

ii. HICS COVID-19 2020 Update – **For Possible Action**

- HICS continues to meet weekly. Discussions are held regarding facility and patient needs. The CHO reports on testing issues and concerns, contact tracing, positive cases in the county as well as isolation and return to work requirements for staff who are suspected or tested for COVID.
- Cynthia reported that visitation restrictions remain the same at PGH due to the increase in positives and lack of social distancing, etc. and this is reviewed weekly. Long Term Care (LTC) continues to assist with window visits, and facetime/zoom visits.
- Masks continue to be required at all PGH facilities.
- Wellness Labs are now allowed on Tuesdays by appointment only.
- The Business Office is open for masked walk-in customers. It is still ok to pay by phone. PGH is still allowing discounts for old accounts through June 30.
- Will be creating a new committee to discuss purchase of equipment, PPE, and a mobile clinic with our stimulus funds. We will also use the stimulus funds to cover allowable revenue loss.
 - One mobile clinic would be placed outside of the clinic to keep staff and patients out of the elements. The mobile clinic would help with social distancing and exposures.
 - Another mobile clinic would be placed outside of the E.R. to also keep staff and patients out of the elements. Currently the ER has a shed to use and it is near the helipad. Cynthia is looking for dual purpose items. Afterwards we would be able to use them for rural outreach as a mobile clinic in our outlying communities. We could also use them for health fairs, or wellness labs.
 - We also need temperature-controlled storage containers for our PPE.
 - To be discussed are the modifications needed to offices and waiting areas to ensure social distancing and a generator for the clinic.

5) CRITICAL ACCESS HOSPITAL (CAH) ITEMS

- a. UNFINISHED BUSINESS
- b. NEW BUSINESS

- i. Approval of the Cooperative Agreement with the City of Lovelock for Use of Law Enforcement Personnel – **For Possible Action.**

ACTION

A motion to approve the Cooperative Agreement with the City of Lovelock for Use of Law Enforcement Personnel was made by Vice Chair Safford. Seconded by Secretary Bendure. Motion approved unanimously.

- ii. Approval to close the Nevada State Bank account that was originally opened to prepare for the Payroll Protection Program but is not needed – **For Possible Action.**

ACTION

A motion to approve the closing of the Nevada State Bank account that was originally opened to prepare for the Payroll Protection Program but is not needed was made by Secretary Bendure.

Second by Trustee Pierce. Motion approved unanimously.

6) PERSHING HEALTHCARE FOUNDATION: UPDATE given by Carolyn Hultgren

- The foundation dinner will be limited to 50 attendees. The effort and expenses of holding the dinner may outweigh any benefits received.
- There will be a meeting in July.

7) OTHER ITEMS

- a. CORRESPONDENCE – No correspondence.
- b. LEGAL – Bryce Shields reported no legal items.
- c. OPEN SESSION – **For Possible Action.**
 - i. Action regarding litigation or potential litigation.
- d. OTHER – No Other.

8) PUBLIC COMMENT – No public comment.

9) ADJOURN: Chair Hultgren adjourned the meeting at 6:54 P.M.

Respectfully submitted,

Pam Weeldreyer
PGH Executive Assistant