



PERSHING GENERAL HOSPITAL & NURSING HOME BOARD OF TRUSTEES

Regular Board Meeting

MINUTES

Thursday, November 18, 2021

ATTENDING: Board: Chair Charles Safford, Vice Chair Ted Bendure, Secretary Dana Tueller, Trustee Philip Dickerman
Absent: N/A
Others Present: N/A
Staff Present: Cynthia Hixenbaugh, Lynn Broyles, Debora Mock, KayDawn Hughes, Lola Montes
Present by Zoom: Trustee Jayce Montes, Legal Counsel Bryce Shields, Jake Montes, Radiology Manager and Kamin VanGuilder, MD

- 1) **CALL TO ORDER** – Chair Charles Safford called the meeting to order at 5:35 P.M.
- 2) **PUBLIC COMMENT** – None.
- 3) **CONSENT AGENDA** - The Board will consider, for possible action, these items in their entirety without discussion – **For Possible Action.**
 - a. Meeting minutes for the Regular Board Meeting October 28, 2021
 - b. Warrants (Check Register)
 - c. Acceptance by proxy for Renown Telehealth appointment Novia Anderson, LCSW, Kristen Arnold, MD, Daniris Lundbom, APRN, and Thinh Tang, DO
 - d. Acceptance by proxy of vRad reappointment of Dr. Lawrence Briggs and Dr. Scott Sullivan

ACTION

A motion to approve the Consent Agenda as presented was made by Vice Chair Ted Bendure. Second made Secretary Tueller. Motion approved unanimously.

4) **REPORTS**

a. **Risk Manager: Update by KayDawn Hughes**

i. NRS 439.875 Patient Safety Committee Update

- There were no sentinel events to report for the month of October. 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.

Complaints and Quality Indicator Results

- There was one complaint of a urine specimen being contaminated. This has been added as a Quality Assurance project and the cost of the culture was removed from the bill.
- 92% goal for October
- Vital signs within 20 min of discharge: 98%
- Opioids prescribing in ER (AB 474): 50%
- Critical Labs reported to Provider within 60 minutes: 100%
- ED Transfers Communication: 100%

b. **Chief Nursing Officer:**

i. Critical Access Hospital (CAH) and Skilled Nursing Facility (SNF) Utilization Report

- Admissions – PGH had three acute admits in October 2021. There were 131 emergency visits.
- Acute/E.D. – There were two “AMA/Left Without Being Seen” and three “Returns within 72 hours.”
- Long-Term Care – The current census is 19: 17 Medicaid, and two Private Pay.
- Referrals – Out of 38 referrals for Long-Term Care (LTC) and Swing, we were unable to accept any due to staffing shortages.
- Staffing
 - There are five open FTE nurse positions and float positions that are being covered by our current staff and agency.
 - There are ten open FTE CNA positions.
 - Congratulations to our six CNA students. They all passed their written and clinical tests. They are now Nursing Assistants in Training (NAT). They will be scheduled in Long Term Care and ER/Acute for November and can continue working for 120 days or until they pass their state exams. Thank you to Christina Dickerman, our former CNO, and Paulie Carson, LTC Director for their commitment in providing the class on training our new Nursing Assistants in Training.

ii. COVID-19 Update

- Twenty states have seen daily case s jump by at least 10% in the last two weeks. The State of Nevada is one of those states.
- On November 4th, CMS and the federal government issued emergency regulations requiring COVID-19 vaccination of eligible staff at healthcare facilities that participate in the Medicare and Medicaid programs.
- Facilities covered by this regulation must establish a policy ensuring all eligible staff have received the first dose of two-dose COVID-19 vaccine or a one-dose COVID-19 vaccine prior to providing any care, treatment, or other services by December 5th. The expectation is for all eligible staff to be fully vaccinated by January 4th.
- The regulation also provides for exemptions based on recognized medical conditions or religious beliefs, observances or practices. Facility must develop a similar process or plan for permitting exemptions in alignment with federal law.
- CMS plans to ensure compliance with these requirements through established survey and enforcement processes.
- On October 29th the FDA granted EUA for the Pfizer-BioNTech COVID-19 vaccine for children ages 5-11 years. DCD made an interim recommendation for this on November 2nd.
- Long Term Care visitation has changed again – we are required to allow unrestricted visitation in our LTC following the core principles of infection control.
- Teri Grassau completed her Interim CNO assignment on November 15th. She expressed her thanks via this report to the Board for their commitment to their community, residents and patients at PGH. She appreciated the welcoming spirit she received and enjoyed working with Cindy and the rest of the team over the last three months.

c. **Chief Financial Officer: Update by Lynn Broyles**

i. Approve Financial Statement for period ending October 31, 2021 – **For Possible Action**

Lynn reviewed the financial statement for October expressing that the facility is in a strong cash position to cover the losses over the month. She stated she will submit an amended budget to the State of Nevada toward the end of the fiscal year.

ACTION

A motion to approve the Financial Statements for period ending October 31, 2021 was made by Vice Chair Ted Bendure. Second made by Secretary Tueller. Motion approved unanimously.

ii. Revenue Cycle Dashboard

There was no dashboard available due to this meeting being scheduled earlier in the month than usual due to the Thanksgiving holiday.

d. **Revenue Cycle Manager: Update by Debbie Mock**

i. Approval of the Patient Account Write-Offs for October 2021 – **For Possible Action**

There were no Write-offs presented at this meeting due to it being scheduled earlier than usual. There will be write offs to present next month.

ACTION

No action required.

ii. TruBridge Financial Analysis - Debbie presented the TruBridge Financial Analysis to the Board. She has seen a reduction in AR with some still over 90 days. Debbie reported that her staffing is better with her new experienced commercial biller starting in December.

e. **Administrator/CEO: Update by Cynthia Hixenbaugh**

i. Rural Health Clinic Utilization Report

- October – 753 patients. 28 were new patients. There was 116 outside visits under the tent and 48 positive cases.
- Appointment slots continue to be blocked to accommodate possible COVID patients as well as any other urgent patient needs.
- 89 COVID vaccinations were given in October. We have scheduled days every week for COVID vaccine as well as the booster MRNA doses.
- The Clinic is working with Coeur Rochester Mine scheduling a day for one of our MA's to go to the mine site and give COVID-19 vaccines to their employees, as well as the school district. Coeur is set to begin

on December 2 and we hope to be at the school soon in coordination with their school nurse, Christina Dickerman.

- We are also in the process of scheduling children ages 5-11 for their COVID-19 vaccines in the Clinic.

ii. Administrator's Report

- Staffing Update: Lola Montes provided a staffing up for the Board. The hospital currently employs 96 people. We have 3 agency LTC nurses, 2 agency CNAs and we are waiting on 2 Acute CNA agency to arrive. Current position openings: 10 CNAs; 2 NATs will become FT once licensed then we will have 8 openings. 6 nurse positions – we have 4 full time staffed and we need 4 in LTC and 2 in Acute/ER. Radiology – 1 FT and 1 on call opening and 1 Ultrasound on call opening. Ward Clerk – 1 FT needed, Environmental Services – 2 FT housekeepers, Laboratory – 1 FT lab assistant needed, Laundry – 1 PT Laundry, Administration – 1 assistant needed, LTC – DON and CAH – CNO. We have a total of 25 openings. Lola works with multiple agencies for temporary and permanent placements and with local recruitment efforts.
- Review health benefit plan changes beginning January 2022 to include change to hospital HAS contributions for employees – Cindy notified the Board that with a change in deductible to the PPO plan and a reduction to the HSA facility contribution, we see no increase in premium costs. We had two rate passes over the last two years and Hometown Health came in with an initial 6.5% increase. With the adjustments to the plans, we were able to stay budget neutral. The hospital is able to continue to pay 100% of the employee premiums with the adjustments.
- The hospital is preparing for the mandate by presenting a policy for compliance at this meeting. We would like to implement this tomorrow. We have 28 total unvaccinated staff with 1 pending resignation. They have to receive their first vaccine by December 5th. Lola Montes will meet with individual employees with the approved policy so they are aware of their responsibilities as employees of Pershing General Hospital and the requirements of the exemption process. We have employees in all departments who are unvaccinated including a manager. Cindy reviewed the departments that would be affected and the positions that are affected. The State and Federal government says they believe employees will get vaccinated and won't leave the medical field, but we won't know until the deadline. Cindy stated she believes if the majority of the unvaccinated haven't gotten the vaccine yet, they will most likely will not get it. Long Term Care is most worrisome as most of the unvaccinated staff work there. Once the exemptions are submitted and reviewed or if the staff become vaccinated, we will be able to have better idea what this will do to the facility. Cindy suggested a special board meeting on December 6th to discuss next steps and outcome from the December 5th deadline. The Board members agreed for a special meeting to be scheduled.
- Mandate Update: With respect to employees, we have the mandate, it's written, we have to follow it, we have to comply by December 5th. We'll review the policy with you line by line because it changed again and I'm sorry it didn't get to you sooner. If employees don't have the vaccine by December 5th or an eligible-qualified exemption by the 5th they will be placed on unpaid leave. They cannot work until they comply. We will give them 14 days to comply. Beyond that date, they will not be able to work. Ted Bendure asked if the employees' health insurance will term – the insurance will term at the end of the month the employee terms in. We expect people to complete exemptions, and NRHP was going to form an ethics review committee, but they are not going to do it. We will review religious exemptions. We were advised to not focus on the person, but how can we accommodate it unless the request goes in to political beliefs. A board member asked what criteria the hospital will use to determine an approved exemption. It was stated that the employee will have the exemption forms to complete and we will follow federal law with regard to these types of exemptions and focus on reasonable accommodations. We must consider first how we can protect our vulnerable populations if we have to provide reasonable accommodations such as wearing a mask and shield or N95 mask. Since most are direct patient care givers, the onus is on the facility to ensure those exemptions are not going to affect our patients. If an outbreak occurs and it is traced back to staff, we will have an immediate jeopardy and this violation leads to loss of CMS funding and designation status. We have been told by surveyors what to expect with regard to allowing exemptions in our facility – it is on us to make sure staff are following the policy. Are they wearing their masks and face shields appropriately, they cannot eat in communal areas with other employees or patients; if found without their mask, they will get one warning, if found again, terminated. Surveyors will receive a list of vaccinated staff and the policy. Ted Bendure wanted to know what happens if a vaccinated employee gets COVID. And, again it goes to appropriate use of PPE and following policies. Philip Dickerman wanted to know the HIPAA

requirement for providing a list of vaccinated staff to surveyors. We are required to provide the information upon request. Their thought process is when you went in the medical field, you get vaccinated for one thing and another so this should be no different. Its going to be important to determine what reasonable accommodations can be made and then followed by the employee. It will not be easy, but in accordance with the policy and guidelines, if they have exemptions submitted, they will be considered. Medical exemptions will be approved because there is a low likelihood that another doctor will dispute it. We can review at a special meeting the number of exemptions received. If we don't receive Medicare and Medicaid funding, we have no facility. I hope they do what's best for themselves, but mostly hope they do what's best for the hospital to provide care for our community. Ted Bendure asked if there is a database to show when staff received the vaccine – we verify on WebIZ for Nevada, but we are unable to verify from other states. We do receive their vaccine information though if they come from out of state. We appreciate those who have complied and understand why those who have held out, have done so. There are 22 states that are opposing the OSHA mandate and does not include Nevada. I would expect it to also happen with the CMS Mandate. Next steps for the Board could be hard decisions. We would like people to comply as much as possible with the policy. If we give them an accommodation, they must follow it. It is simply because of the vulnerable population that we serve.

- LiCON – the new MRI is doing so well, we are seeing a reduction per patient cost. We are up \$65k for the repairs fund. The per patient cost will be \$500 retro to July 1. The technology is superb. The ceremony was held on Friday, it was really nice. We had several community leaders attend and it was a nice day. Dana and Ted attended on behalf of the Board. Articles were shared with the Board regarding the new MRI.

5) CRITICAL ACCESS HOSPITAL (CAH) ITEMS

a. UNFINISHED BUSINESS – For Possible Action

There was no unfinished business at this meeting.

b. NEW BUSINESS – For Possible Action

i. Review and Approval of COVID-19 OSHA ETS Employee Illness Policy – For Possible Action

Lola Montes presented the policy for Board review. She explained the OSHA requirement for this policy and that it is required to be included in our ETS manual. We have to pay employees if they are out for COVID sickness. Employees need to use Sick and PTO first. If they run out, we have to pay them a specific amount per OSHA. This is for all employees regardless of status (full time, part time, casual call). They can only receive up to \$1,400 total over time.

ACTION

A motion to approve the COVID-19 OSHA ETS Employee Illness Policy was made by Vice Chair Ted Bendure. Second made by Secretary Dana Tueller. Motion approved unanimously.

ii. Review and Approval of COVID-19 Mandatory Vaccination Policy and Exemption Request Forms. – For Possible Action

The Board members reviewed the policy with Lola Montes and discussed the process the facility will take to meet with the unvaccinated individuals to review this policy and the exemption request forms. Lola will meet with all individuals to ensure compliance with the CMS Mandate by December 5th. An acknowledgement that will be witnessed by Lola Montes will added for employees to sign that they have read and understand the information provided. A typo/change was found on the exemption form and requested to be fixed prior to meeting with staff. The Board recognizes the difficulty this mandate can create on staffing our facility and also understands if we do not follow the mandate, the facility may be in danger of losing Medicare and Medicaid funding which makes up for approximately 2/3 of Pershing County's population. The Critical Access Hospital designation is dependent on compliance with CMS and federal regulations. Our purpose is to provide care for our community. Charles Safford expressed his concern to legal counsel about being sued. Bryce Shields stated it's a mandate and the hospital is stuck between a rock and a hard place. The reasonable accommodations are outlined well and the hospital is required to implement the policy. The exposure is much greater if the hospital does not follow the mandate or implement the policy.

ACTION

A motion to approve the COVID-19 Mandatory Vaccination Policy and Exemption Request Forms with exceptions as discussed on exemption form and policy was made by Vice Chair Ted Bendure. Second made by Secretary Tueller. 4 Ayes and 1 Nay.

iii. Approval of The Helmsley Trust grant award in the amount of \$401,978 for the purchase of a CT, which includes \$1,238 for indirect costs and subcontractor costs of \$1,382. **For Possible Action**
Cindy reviewed the grant award approval from The Helmsley Trust that will bring in a state-of-the-art CT for our patients at Pershing General Hospital.

ACTION

A motion to approve The Helmsley Trust grant award in the amount of \$401,978 for the purchase of a CT, which includes \$1,238 for indirect costs and subcontractor costs of \$1,382 was made by Vice Chair Ted Bendure. Second approved by Trustee Philip Dickerman. Motion approved unanimously.

iv. Approve the purchase of a Canon Aquilion Lightning Whole Body CT Scanner \$398,458 utilizing grant funds not to exceed \$401,978. Costs in excess of the grant amount are the responsibility of Pershing General Hospital. **For Possible Action**

Jake Montes was available via Zoom for Board questions regarding the Canon CT and its capabilities. PGH is proud to bring this new technology to Pershing County.

ACTION

A motion to approve the purchase of a Canon Aquilion Lightning Whole Body CT Scanner (\$398,458 utilizing grant funds not to exceed \$401,978. Costs in excess of the grant amount are the responsibility of Pershing General Hospital was made by Vice Chair Ted Bendure. Second made by Trustee Philip Dickerman. Motion approved unanimously.

6) PERSHING HEALTHCARE FOUNDATION: Update by Lola Montes

- The Foundation will be represented at the Friends of the Library Craft Fair and will skip their December meeting. The next scheduled meeting will be held January 11, 2022. Lola Montes, Chairperson, reported that Tiffany Jensen, scholarship recipient, visited with the Foundation Board to thank them and Tiffany would like to be involved with the Foundation.

7) OTHER ITEMS

- a. CORRESPONDENCE – **None**
- b. LEGAL – **None**

The Pershing General Hospital and Nursing Home Board of Trustees may by law receive information from legal counsel regarding potential or existing litigation involving a matter over which the Pershing General Hospital and Nursing Home Board of Trustees has supervision, control, jurisdiction or advisory power, and such gathering does not constitute a meeting of the Pershing General Hospital and Nursing Home Board of Trustees pursuant to NRS 241.015.

- c. OTHER – Cindy reported that Paulie Carson, LTCD, has taken a leave of absence and we will recruit for her position. We hope for her to be ready to come back to work in another position in the future. No action was needed for this update.

8) PUBLIC COMMENT – None

9) ADJOURN: Chair Charles Safford adjourned the meeting at 7:04 p.m.

Respectfully submitted,
Cynthia Hixenbaugh, CEO

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