Human Resources and Executive Compensation Committee

Tuesday, September 21, 2021 2:00 pm

ProVidence Suite - Trauma Building 5th Floor

Las Vegas, NV 89102

AGENDA

University Medical Center of Southern Nevada
UMC GOVERNING BOARD
HUMAN RESOURCES AND EXECUTIVE COMPENSATION COMMITTEE
September 21, 2021 2:00 p.m.
800 Hope Place, Las Vegas, Nevada
Trauma Building, ProVidence Suite 5th Floor

Notice is hereby given that a meeting of the UMC Governing Board Human Resources and Executive Compensation Committee has been called and will be held at the time and location indicated above, to consider the following matters:

This meeting has been properly noticed and posted online at University Medical Center of Southern Nevada's website http://www.umcsn.com and at Nevada Public Notice at https://notice.nv.gov/, and at University Medical Center 1800 W. Charleston Blvd. Las Vegas, NV (Principal Office)

- The main agenda is available on University Medical Center of Southern Nevada's website http://www.umcsn.com. For copies of agenda items and supporting back-up materials, please contact Terra Lovelin, Board Secretary, at (702) 765-7949. The Human Resources and Executive Compensation Committee may combine two or more agenda items for consideration.
- Items on the agenda may be taken out of order.
- The Human Resources and Executive Compensation Committee may remove an item from the agenda or delay discussion relating to an item at any time.
- Consent Agenda - All matters in this sub-category are considered by the Human Resources and Executive Compensation Committee to be routine and may be acted upon in one motion. Most agenda items are phrased for a positive action. However, the Committee may take other actions such as hold, table, amend, etc.
- Consent Agenda items are routine and can be taken in one motion unless a Committee member requests that an item be taken separately. For all items left on the Consent Agenda, the action taken will be staff's recommendation as indicated on the item.
- Items taken separately from the Consent Agenda by Committee members at the meeting will be heard in order.

SECTION 1. OPENING CEREMONIES

CALL TO ORDER

1. Public Comment

   PUBLIC COMMENT. This is a period devoted to comments by the general public about items on ***this*** agenda. If you wish to speak to the Committee about items within its jurisdiction but not appearing on this agenda, you must wait until the "Comments by the General Public" period listed at the end of this agenda. Comments will be limited to three minutes. Please step up to the speaker's podium, clearly state your name and address and please ***spell*** your last name for the record. If any member of the Committee wishes to extend the length of a presentation, this will be done by the Chair, or the Committee by majority vote.

2. Approval of minutes of the regular meeting of the UMC Governing Board Human Resources and Executive Compensation Committee meeting on August 23, 2021. *(For possible action)*

3. Approval of Agenda. *(For possible action)*

SECTION 2. BUSINESS ITEMS

4. Review and discuss recommendations for FY22 Human Resources and Executive Compensation Committee CEO Performance Goals, and make a recommendation for approval by the UMC Governing Board; and take action as deemed appropriate. *(For possible action)*

5. Review and discuss the policy for Vaccination of Healthcare Workers for SARS COVID-19, and make a recommendation for approval by the UMC Governing Board; and take action as deemed appropriate. *(For possible action)*

6. Receive an update regarding matters related to UMC's nurse staffing status; and take action as deemed appropriate. *(For possible action)*

SECTION 3. EMERGING ISSUES

7. Identify emerging issues to be addressed by staff or by the UMC Governing Board Human Resources and Executive Compensation Committee at future meetings; and direct staff accordingly. *(For possible action)*

COMMENTS BY THE GENERAL PUBLIC

A period devoted to comments by the general public about matters relevant to the Committee's jurisdiction will be held. No action may be taken on a matter not listed on the posted agenda. Comments will be limited to three minutes. Please step up to the speaker's podium, clearly state your name and address and please ***spell*** your last name for the record.

All comments by speakers should be relevant to the Committee's action and jurisdiction.

UMC ADMINISTRATION KEEPS THE OFFICIAL RECORD OF ALL PROCEEDINGS OF UMC GOVERNING BOARD HUMAN RESOURCES AND EXECUTIVE COMPENSATION COMMITTEE. IN ORDER TO MAINTAIN A COMPLETE AND ACCURATE RECORD OF ALL PROCEEDINGS, ANY PHOTOGRAPH, MAP, CHART, OR ANY OTHER DOCUMENT USED IN ANY PRESENTATION TO THE BOARD SHOULD BE SUBMITTED TO UMC ADMINISTRATION. IF MATERIALS ARE TO BE DISTRIBUTED TO THE COMMITTEE, PLEASE PROVIDE SUFFICIENT COPIES FOR DISTRIBUTION TO UMC ADMINISTRATION AND LEGAL COUNSEL.

THE COMMITTEE MEETING ROOM IS ACCESSIBLE TO INDIVIDUALS WITH DISABILITIES. WITH TWENTY-FOUR (24) HOUR ADVANCE REQUEST, A SIGN LANGUAGE INTERPRETER MAY BE MADE AVAILABLE (PHONE: 765-7949).

UMC ProVidence Suite
Trauma Building, 5th Floor
800 Hope Place
Las Vegas, Clark County, Nevada
Monday, August 23, 2021
2:00 p.m.

CALL TO ORDER

The University Medical Center Governing Board Human Resources and Executive Compensation Committee met at the time and location listed above. The meeting was called to order at the hour of 2:01 p.m. by Chair Jeff Ellis and the following members were present, which constituted a quorum of the members thereof:

Committee Members:

Present:
Jeff Ellis, Chair (via phone)
Laura Lopez-Hobbs
Renee Franklin
Barbara Fraser – Ex-officio (via phone)

Absent:
none

Others Present:
Tony Marinello, Chief Operating Officer
Kurt Houser, Chief Human Resources Officer
Ricky Russell, Director Human Resources
James Conway, Assistant General Counsel
Stephanie Ceccarelli, Board Secretary

SECTION 1. OPENING CEREMONIES

ITEM NO. 1 PUBLIC COMMENT

Chairman Ellis asked if there were any persons present in the audience wishing to be heard on the item listed on this agenda.

None present.

ITEM NO. 2 Approval of minutes of the regular meeting of the UMC Governing Board Human Resources and Executive Compensation meeting on June 21, 2021. *(For possible action)*

FINAL ACTION: A motion was made by Member Hobbs that the minutes be approved as recommended. Motion carried by unanimous vote.

ITEM NO. 3 Approval of Agenda *(For possible action)*

FINAL ACTION: A motion was made by Member Franklin that the agenda be approved as recommended. Motion carried by unanimous vote.

SECTION 2. BUSINESS ITEMS

ITEM NO. 4 Discuss, score, and approve the Human Resource and Executive Compensation Committee CEO Performance Goals for FY 2021; discuss, score and approve all other Governing Board Committee CEO Performance Goals for FY2021; and make a recommendation for approval by the UMC Governing Board; and direct staff accordingly. (For possible action)

DOCUMENTS SUBMITTED:

- FY21 Achievement Presentation

DISCUSSION:

Mr. Houser, Chief Human Resources Officer provided a high level overview of the HR CEO Performance Goals for FY2021.

1. **Develop and implement the employee engagement survey with a >50% participation rate. Evaluate survey data to identify action items**

   This goal was achieved. The completion rate was 61%. A summary of findings was provided to Administration and the Governing Board and staff in in June.

2. **Review and update the employee off-boarding program to include a revised Exit Survey**

   This goal was achieved. The survey has been revised and the completion time has been reduced. There has been increased participation.

3. **In support of UMC's mission to be fiscally responsible, execute established staffing standards prior to budget year beginning July 2021**

   This goal has been achieved. Staffing standards have been developed and applied in all departments as of May 2021, to make sure we are staffing to appropriate benchmarks.

4. **Update Leadership Boot Camp material based on lessons learned, and new CBA with all managers attending by the end of FY 21**

   This goal was achieved. All new leaders have completed the required boot camp during FY21 and more are scheduled for the fall of this year.

5. **Develop interdisciplinary participation in all major organizational training programs**

This goal was achieved. All programs were reviewed to include interdisciplinary training and cultural competency training has been added to all training initiatives.

6. **Review and update entry level job descriptions.**

   This goal was achieved. Every job description has been reviewed and updated. Requirements for some entry level positions were removed. Development and succession planning has also been reviewed.

7. **Further develop staff skills within the Employee Development and Succession Planning Programs**

   This goal was achieved. The succession planning program has been extended to include managers and above.

8. **In collaboration with the Communication and Diversity Committee, provide educational materials to all MPLAN staff via the online Harvard Implicit Association Tests, and attend Cultural Competency training to foster introspection in regards to implicit bias, cultural competency, and inclusive leadership.**

   This goal was achieved. Tools were made available and M-Plan employees voluntarily communicated their findings to the EEO Program Manager. Training is provided through the Diversity Committee.

Chair Ellis stated that the team did a great job in accomplishing these goals.

Mr. Conway informed the Committee that they had to weigh 20% of the total overall CEO goals. The Committee recommends 20% be awarded for the HR Goals, which equals 100% of the goals met.

FINAL ACTION:

A motion was made by Member Franklin that 100% be awarded for the HR Committee Performance Goal for FY21. Motion carried by unanimous vote.

Next the Committee discussed the bonus for the CEO. Chair Ellis stated that all of the committees would like to reach an overall 100% award to compensate for the impact that COVID had on hospital operations.

Member Hobbs commented that there would be no compensation from last year's bonus plan due to COVID. Chair Ellis responded that because the 2020 bonus was accrued, it was assumed there could be payout of some of that bonus money. He explained additional payout could not be done unless the contract was amended and contractually the maximum that could be awarded would be 100% for this year. Since nothing could be done for the 2020 service year, the Committee felt it should have the flexibility to move round the achievement up

from the actual of 93.75% to 100%. The discussion continued regarding Mr. Van Houweling's leadership in the community and statewide. There was agreement that because of this he deserves 100% award.

Member Hobbs feels the Committee has the ability to revisit 2020 and provide a performance award for 50% for management of the 2020 service year. Mr. Conway clarified if she was speaking of the M-Plan, not the CEO bonus. Member Hobbs would like to make a recommendation to amend the contract. A conversation ensued regarding this subject matter.

FINAL ACTION:

A motion was made by Chair Ellis to recommend to the Governing Board a 100% bonus award for FY 2021 and 10% for the merit increase. Motion carried by unanimous vote.

Member Fraser states it was such an extraordinary year that the idea of proposing a revised bonus plan for next year is appropriate. Discussion continued regarding how to move forward with the bonus structure moving forward.

Member Hobbs would be comfortable with providing a partial bonus for last year. There was continued conversation regarding the performance goal award of 2020 and the financial situation at the time.

The Committee asked if would be possible to recommend that staff go back and assess the ability to develop another contract modification in order to recognize the contributions of the CEO from last cycle which would allow the Committee to authorize some payment of the accrued bonus from last year.

Mr. Conway affirmed that a contract modification would be required.

FINAL ACTION:

A motion was made by Member Hobbs to recommend to the Governing Board a 10% merit increase for the FY2021 goals. Motion carried by unanimous vote.

ITEM NO. 5 Identify emerging issues to be addressed by staff or by the UMC governing board Human resources and Executive Compensation. Committee at future meetings; and direct staff accordingly.

The committee would like to discuss the following items at a future meeting:

Revisions to the bonus program and past performance recognition

Nursing shortage issues.

Staffing Model

2022 Goals relating to development and leadership succession plan process.

COMMENTS BY THE GENERAL PUBLIC:

At this time, Chair Ellis asked if there were any persons present in the audience wishing to be heard on any items not listed on the posted agenda.

SPEAKERS(S): None

There being no further business to come before the Committee at this time, at the hour of 2:47 p.m. Chairman Ellis adjourned the meeting.

Approved:
Minutes Prepared by: Stephanie Ceccarelli

UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA
GOVERNING BOARD
HUMAN RESOURCES AND EXECUTIVE COMPENSATION COMMITTEE
AGENDA ITEM

Issue:	**CEO Performance Goals for FY2022**	**Back-up:**
Petitioner:	**Kurt Houser, Chief Human Resource Officer**	**Clerk Ref. #**

Recommendation:

That the Human Resources and Executive Compensation Committee review and discuss the CEO FY22 Recommended Goals, and make a recommendation for approval by the UMC Governing Board; and take action as deemed appropriate. ***(For possible action)***

FISCAL IMPACT:

Unknown

BACKGROUND:

The Committees of the Governing Board propose recommended performance goals for the CEO each fiscal year.

Cleared for Agenda
September 21, 2021

Agenda Item #

UMC UNIVERSITY MEDICAL CENTER

The Highest Level of Care in Nevada

UMC Human Resources and Executive Compensation Committee
FY22 Goal Recommendations

FY2022 HR Recommended Goals

- Identify “5-whys” and create an action plan to address departments with the lowest score on the 2021 Employee Engagement Survey
- Design the framework for an enhanced leadership program to respond to improvement areas identified in the 2021 Employee Engagement Survey to include improving team and cross-department engagement
- Decrease the Average Time to Hire metric to less than 70 days
- Implement market adjustments for the most under-market, and difficult to recruit and retain classifications; using recent Mercer Market Data Survey
- Demonstrate success in moving MPLAN level employees, using the 9-box tool, toward upper level/management succession

UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA
GOVERNING BOARD
HUMAN RESOURCES AND EXECUTIVE COMPENSATION COMMITTEE
AGENDA ITEM

Issue:	**SARS COVID-19 Vaccination for UMC Employees**	**Back-up:**
Petitioner:	**Kurt Houser, Chief Human Resource Officer**	**Clerk Ref. #**

Recommendation:

That the Human Resources and Executive Compensation Committee review and discuss the Policy for Vaccination of Healthcare Workers for SARS COVID-19, and make a recommendation for approval by the UMC Governing Board; and take action as deemed appropriate. ***(For possible action)***

FISCAL IMPACT:

Unknown

BACKGROUND:

UMC will require its healthcare workers to be fully vaccinated against SARS COVID-19 by November 1, 2021, unless an individual has received an accommodation.

Cleared for Agenda
September 21, 2021

Agenda Item #

1. POLICY: Vaccination of Healthcare Workers For SARS-COVID 19

2. OWNER OF POLICY: Administration

3. EFFECTIVE DATE:

4. SCOPE:

This Policy shall apply to all healthcare workers entering, accessing, or performing services within facilities operated by the University Medical Center of Southern Nevada ("UMC"). For the purposes of this Policy, the term healthcare workers shall be interpreted as including, without limitation, all UMC employees, medical staff members, privileged practitioners, vendors, contractors, volunteers, and students ("Healthcare Worker(s)").

5. PURPOSE:

Authorized vaccines for SARS-COVID 19 are readily available and provide a safe and effective tool in reducing the spread of infection and serious disease. Hospitals and other healthcare facilities are particularly high-risk settings where COVID-19 outbreaks can have significant consequences for personnel, patients, and vulnerable populations. Unvaccinated individuals pose an increased and significant risk of substantial harm to the health and safety of vulnerable patients and personnel within such high-risk settings. Accordingly, the purpose of this Policy is to require that all UMC Healthcare Workers receive an authorized SARS-COVID 19 vaccine to protect all patients, personnel, and others from the known and substantial risks posed by the SARS-COVID 19 virus.

6. POLICY

A. Mandatory Vaccination of Healthcare Workers

As of November 1, 2021, all Healthcare Workers must submit proof of full vaccination against the SARS-COVID 19 virus prior to entering, accessing, or performing services within facilities operated by UMC. For the purposes of this policy, a Healthcare Worker is considered fully vaccinated upon receipt of either:

(i) a second vaccine dose in a 2-dose vaccine series (e.g. Pfizer-BioNTech or Moderna vaccines); or

(ii) one dose of a single-dose vaccine (e.g. Johnson and Johnson (J&J)/Janssen vaccine).

Healthcare Workers may demonstrate proof of vaccination by submitting (i) a copy of vaccination card issued by the U.S. Centers for Disease Control and Prevention ("CDC") (or foreign equivalent); (ii) official documentation via a State or other governmental vaccine registry; or (iii)

other documentation deemed by UMC as sufficient evidence of vaccination. UMC employees should submit their proof to UMC Employee Health Services. Healthcare Workers who are not employees of UMC should submit proof of vaccination to the UMC Department to which they report.

B. Exemptions and Accommodations

Healthcare Workers may request an exemption from the requirements set forth within Section 6.A. of this Policy on the basis of a qualifying medical or religious exemption. Requests for medical exemptions shall be evaluated in accordance with CDC-recognized contraindications to the SARS-COVID 19 vaccine or if based upon a disability, in accordance with the Americans With Disabilities Act ("ADA"). Requests for religious exemptions must be based upon a Healthcare Worker's sincerely held religious belief, practice, or observance, in accordance with Title VII of the Civil Rights Act of 1964, as amended.

Any current UMC Healthcare Worker seeking an exemption must submit their request to accommodation.request@umcsn.com. Any requests for exemptions must include all information reasonably necessary to evaluate the request and any supporting documentation. Any request for exemption shall be subject to evaluation and approval by UMC. If a request for exemption is denied and the Healthcare Worker does not otherwise receive an accommodation, the Healthcare Worker shall be required to become fully vaccinated in accordance with this Policy.

In the event that a Healthcare Worker receives an approved exemption from vaccination, the Healthcare Worker shall be required to comply with UMC's infection control practices related to unvaccinated Healthcare Workers, including, without limitation, testing for SARS-COVID 19 at intervals established by UMC and the wearing of a mask at all times within UMC facilities.

C. Application to COVID-19 Vaccine Booster Shots

Requirements relating to Healthcare Workers and any approved SARS-COVID 19 vaccine booster shot shall be evaluated at a future date in accordance with the guidance of the U.S. Food and Drug Administration, the CDC, and the CDC's Advisory Committee on Immunization Practices.

D. Maintenance of Records

Consistent with applicable privacy laws and regulations, UMC shall maintain records of Healthcare Workers' vaccination or exemption status. Employee Health Services will maintain a record of vaccinations/exemptions for all employees of UMC within the Employee Health Database. All other Departments with personnel who are not considered UMC employees are required to keep records of vaccination status for personnel performing services within their Department.

E. Non-Compliance with Policy

Failure to comply with the this Policy by November 1, 2021 will result in any non-compliant Healthcare Worker being prohibited from entering, accessing, or performing services within UMC facilities. UMC employees shall be subject to discipline, including termination.

F. Compliance with Superseding Public Health Directives or Law

In the event of any inconsistency between this Policy and any applicable federal, state, or local laws, ordinances, rules, directives, or regulations regarding mandatory vaccinations, this Policy shall remain in full force and effect to the extent it is not inconsistent or in direct conflict with such act.

7. REFERENCES

A. Interim Clinical Considerations for Use of COVID-19 Vaccines Currently Approved or Authorized in the United States (https://www.cdc.gov/vaccines/covid-19/clinical-considerations/covid-19-vaccines-us.html)

B. Myths and Facts about COVID 19 Vaccines (https://www.cdc.gov/coronavirus/2019-ncov/vaccines/facts.html)

C. Key Things to Know About COVID-19 Vaccines (https://www.cdc.gov/coronavirus/2019-ncov/vaccines/keythingstoknow.html)

D. COVID-19 ACIP Vaccine Recommendations (https://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/covid-19.html)

E. COVID-19 Vaccine Booster Shot https://www.cdc.gov/coronavirus/2019-ncov/vaccines/booster-shot.html

F. What You Should Know About COVID-19 and the ADA, the Rehabilitation Act, and Other EEO Laws (https://www.eeoc.gov/wysk/what-you-should-know-about-covid-19-and-ada-rehabilitation-act-and-other-eeo-laws)

G. CMS Press Release – Biden-Harris Administration to Expand Vaccination Requirements for Health Care Settings (https://www.cms.gov/newsroom/press-releases/biden-harris-administration-expand-vaccination-requirements-health-care-settings)

1) **POLICY TITLE: Employee Health Services Policy 6.1**

2) **EFFECTIVE DATE**: 1/2021

3) **PURPOSE**: To prevent disease and reduce the risk of occupational acquired infections to healthcare workers (HCW). By preventing disease and reducing risk in HCWs, the risk for patients acquiring infections is also reduced. Healthcare workers (HCW) includes but is not limited to medical staff, employees, contractors, volunteers, students at UMC.

4) **SCOPE:** Employee Health Services offer healthcare required immunizations, TB assessment, testing and screening, fit testing with N-95 respirators, and post exposure assessments and treatment or required testing and education. All these services and pre-employment services are offered to employees free of charge.

5) **POLICY**: Employee Health Services complies with current CDC guidelines, any applicable Nevada State laws and regulations and Infection Control Committee recommendations pertaining to the reduction of infections for all HCWs. The Employee Health Program includes, but is not limited to, the provisions and conditions set forth in this policy.

6) **PROCEDURES**
   a) **Pre-Employment:**
      i) **Health Screening**: All UMC employees are required to complete a health screening through UMC Employee Services. This screening covers all healthcare related vaccinations, TB assessment and testing, fit testing with N-95 respirators (if applicable according to job description) and color blind testing. A physical may be required for any employee requiring a fit testing, and/or counseling for latent TB.
         (1) **Color Blind Testing:** Required for all UMC employees.
         (2) **Fit Testing:** All employees whose job descriptions are listed as Category IA and whose job duties are listed in the Airborne Pathogen Risk Assessment will be fit tested for a N-95 Respirator. (See Respiratory Protection Program I-210, and Administration of Fit testing for N-95 Respirators EH policy 6.3 for program details.)
         (3) **Vaccinations:** All employees will be screened for vaccines or immunity as outlined in section “c” of this policy. UMC employees requiring titers or vaccines may receive these through Employee Health Services. Vaccines or titers drawn elsewhere are accepted with the proper documentation.
         (4) **Initial TB Assessment and Symptom Review:** All new hires will be screened for active and latent TB. See screening details listed in section “b” of this policy.
      ii) **Volunteers, students, UNLV residents, contracts and medical staff** are required to complete a health screening which includes an initial TB risk assessment, TB

symptom review, TB testing as indicated, and healthcare vaccinations as listed in this policy. Volunteer Services, Human Resources, Medical Staff may have more specific instructions regarding completing this initial screening process.

b) TB Assessment and Screening:

i) Initial TB Assessment and Symptom Review: All HCW must be initially screened for mycobacterium tuberculosis (TB) by completing a TB risk assessment and symptom review form, (TB Risk Assessment and Symptom Review for Healthcare workers - NMU02705), and TB testing. A TB test is considered either a 2 step TB skin test or an Interferon-Gamma Release Assay (IGRA). TB testing guidelines:

(1) 2 STEP TB SKIN TESTING: consists of two documented TB skin tests (TST) within the last calendar year, with the most recent of TB skin test occurring within approximately 45 days of hire/ start at UMC.

(2) IGRA test date must be within approximately 45 days of hire.

(3) Interpretation of TB Testing

(a) All TB testing must be documented, if no test documentation is available a new TB test must be completed. Documentation must be either lab result for IGRA or documented dates of testing with results in millimeters for TST testing.

(b) HCW with *negative* sign and symptom review and negative TB testing will be cleared to begin work.

(c) Immunocompromised HCW with *negative* TB testing must have answered *no* to all signs and symptoms of TB on the screening form to be cleared to begin work. HCW are considered immunocompromised if they are taking any medications, or have any of the diseases listed on the screening form.

(d) Immunocompromised HCW with *negative* TB testing that have answered *yes* to any signs and symptoms of TB on the screening form will be cleared by a UMC Healthcare provider. A chest x-ray may also be required.

(e) HCW with a *positive* TB test and *risk factors* for TB will be considered to have latent TB (LTBI).

(f) A HCW with a positive test and *no risk factors* for LTBI may be asked to repeat testing 3 months after the first test. A HCW will only be considered to have LTBI if both the first and second test are positive.

(g) HCW *with a positive TB test* will be required to complete a chest-x-ray. A chest x-ray dated within 3 months prior to hire is acceptable. All newly positive UMC employees will be counseled for latent TB (LTBI). Other HCW will be given education on LTBI and referred to a primary care provider for LTBI counseling and treatment. Clearance to work is provided under the following circumstances:

(i) *negative* chest x-ray and a *negative* sign and symptom review in the TB assessment may be cleared to work.

(ii) negative chest x-ray, and a positive sign and symptom review will be evaluated by the Employee Health LIP for clearance to work.

(iii) positive or questionable chest x-ray will be sent to the Southern Nevada Health District TB Department for work clearance.

ii) Annual TB Screening

(1) Serial screening and testing for HCW without LTBI is not required.

(2) All UMC employees will be required to complete annual education on mycobacterium tuberculosis.

(3) All HCW are considered at increased risk for TB if the following occurs:

(a) exposed to a person who has active TB or

(b) travel out of the country to another country where TB is endemic for greater than ≥ 1 month

(c) current or planned immunosuppression

Healthcare workers may contact Employee Health for any concerns related to these risk factors.

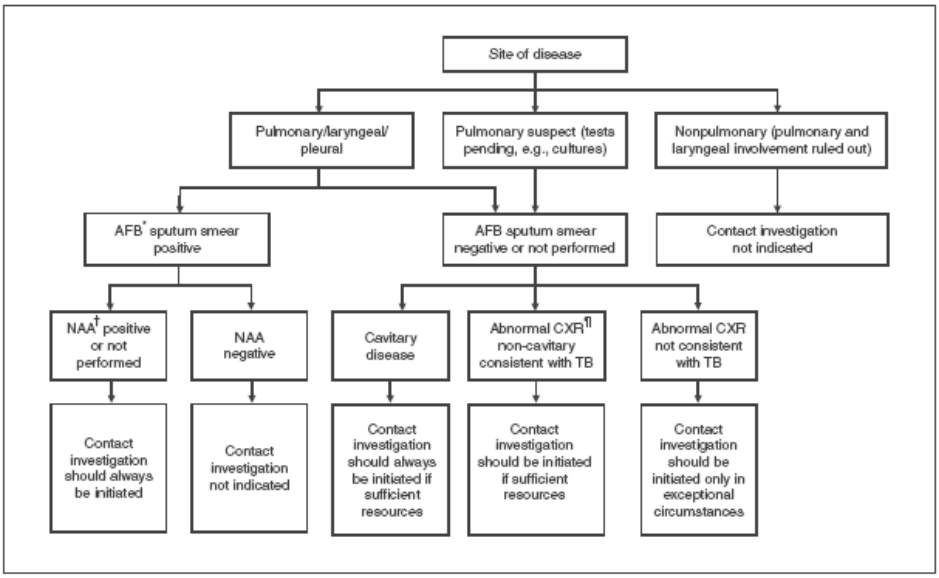
(4) All HCW with past positive TB test that has not completed treatment for LTBI or active TB disease will be required to complete the Annual TB Screening and Symptom Review form. This screening must be completed during the annual hospital TB screening program. Failure to complete the required TB screening prior to end of the designated period shall result in the employee being suspended until the form is completed and with Employee Health Services.

(5) Any HCW with a past positive TB test and a positive TB symptom review, unexplained by other medical conditions, will require a chest x-ray. The healthcare worker's chest x-rays will be reviewed by the Hospital Infectious Disease Physician. The HCW will either be cleared from active TB disease and may return to work, or be advised to seek care from a primary physician, or referred to SNHD for further evaluation. These cases will be reviewed with the Hospital Infectious Disease Physician and the Employee Health Nurse on an individual basis. The employee will be advised of the course of action to be taken if outside of the following treatment plan.

(6) A HCW with a positive or questionable chest x-ray, and positive sign and symptom review will be sent to the SNHD for clearance. They will not be allowed to return to work until clearance is obtained.

iii) HCW TB Exposure: Decisions to initiate a contact investigation following a TB exposure will be made following the most current CDC guidelines. The following table from the most recent CDC publication should be used as a guideline.

FIGURE 1. Decision to initiate a tuberculosis (TB) contact investigation



* Acid-fast bacilli.
† Nucleic acid assay.
§ According to CDC guidelines.
¶ Chest radiograph.

c) Vaccinations/Immunity: SARS COVID-19, Hepatitis B, measles, mumps, rubella, pertussis, influenza and varicella are all considered vaccine preventable diseases. Immunity to these diseases, or vaccination for these diseases are highly recommended for all HCW at UMC.

i) All vaccines are given following CDC guidelines and manufacture's recommendations. Standing orders are signed by the Hospital Infectious Disease Medical Director for all vaccines. Standing orders include identification of those needing vaccination, contraindications, precautions and administration details. The most current Vaccine Information Statements (VIS) will be given with each vaccine. All vaccinations will be entered into Nevada's WEB IZ.

(1) **Specific to UMC EMPLOYEES**: Vaccinations that are determined to be Healthcare related as defined by the CDC are provided with no out of pocket costs to UMC employees. Documentation of all highly recommended vaccinations are entered into the UMC Employee Health database. Titers will be drawn if there is previous history of the disease, or previous vaccinations without documentation.

ii) **SARS COVID 19** (*See* Administration Policy, Vaccination of Healthcare Workers for SARS-COVID 19)

(1) COVID-19 vaccination is required by UMC.

(2) Depending on the particular vaccine administered, vaccination is considered complete after administration of (i) a second dose in a 2-dose vaccine series or (ii) after receipt of a single-dose vaccine. UMC employees may choose from authorized SARS-COVID-19 vaccines available. Currently these vaccines are Pfizer-BioNTech, Moderna, and Johnson and Johnson (J&J)/Janssen COVID-19 vaccines.

(3) As of November 1, 2021, all UMC employees are required to be fully vaccinated for SARS COVID-19 unless they have received an accommodation. In accordance

with CDC recommendations and guidance, employees shall further be required to receive available vaccine booster shots, as applicable.

iii) Hepatitis B

(1) Immunity is considered

(a) 3 doses of hepatitis B (Recombinant) or

(b) 2 doses of hepatitis B (Recombinant), Adjuvanted or

(c) Laboratory evidence of immunity

(d) Titers are recommended 1-2 months after completion of a hepatitis B series.

(e) A second vaccine series should be considered for a HCW who has a negative titer after the first series. If after the second series is repeated and the HCW is still non-responsive, the HCW is considered a primary non-responder and no further Hepatitis B vaccines are recommended.

(2) Any HCW declining a hepatitis B vaccination must sign declination form. A HCW may change their mind at any time, and receive the vaccine.

iv) Influenza vaccine – See policy EHN Influenza 6.5

(1) Seasonal vaccine

(a) Flu season is considered from October – April or longer

(b) Flu vaccine generally becomes available in September

(c) Highly recommended for all HCW

(d) Offered free of charge to anyone with a current UMC badge

v) Measles, mumps, rubella (MMR)

(1) Immunity to measles is required at UMC. Immunity is considered

(a) 2 doses of the MMR vaccine administered at least 28 days apart or

(b) 2 doses of live measles vaccine or

(c) Laboratory evidence of immunity or confirmation of disease

(i) If the measles (rubeola) titer is low- 2 documented MMR vaccines are recommended

(ii) If the mumps titer is low- 2 documented MMR vaccine is recommended

(iii) If the rubella titer is low - 1 documented MMR vaccines are required

(d) In the event that a HCW who has 2 documented doses of MMR vaccine is tested serologically and determined to have negative or equivocal measles (rubeola) or mumps titer results, it is not recommended that the person receive an additional dose of MMR vaccine. Such persons should be considered to have presumptive evidence of measles immunity. Documented age-appropriate vaccination supersedes the results of subsequent serologic testing.

vi) Meningococcal Vaccine for Lab personnel

(1) All clinical microbiologists and microbiology lab technicians who might be routinely exposed to isolates of N. meningitides will be offered the appropriate meningococcal vaccine per CDC recommendations.

vii) Tdap

(1) Highly recommended for all those working in the Maternal Child Areas
(2) HCW may receive Tdap every 10 years per CDC recommendations

viii) Varicella (Chicken Pox)

(1) Immunity to varicella is required. Immunity is considered
(a) 2 doses of varicella vaccines (chicken pox or shingles) or
(b) Healthcare provider documentation of shingles or
(c) Laboratory evidence of immunity or confirmation of disease

d) Workers Compensation or FMLA Return to work:

i) All Workers Compensation and FMLA employees returning to work will be referred to Human Resources. Employee Health and Infection Control are available for questions related to spread or prevention of infections within the workplace. Employees returning to work from FMLA or Workers Comp are not required to report to Employee Health Services. All Employee Health requirements for vaccinations, TB testing and fit testing must be met on return to work.

e) Healthcare Workers with, or suspected of an Infectious Disease or Exposed to an Infectious Disease All employees returning to work from *infectious disease* or illness (see table A) must have a return to work note from a healthcare provider that states they are free and clear of the infections disease or illness. Any questions regarding the returning employee can be directed to Employee Health Services or Infection Control. Employee Health or Infection Control should be notified in all cases listed in Table A.

i) Table A is a guide for HCW and management in regards to work restrictions for HCW with infectious diseases.

ii) Table B is a guide for post-exposure management of HCW. Post exposure management will be directed by the Hospital Infectious Disease Physician in conjunction with the Employee Health Nurse. Post exposure management will include assessing immunity or vaccination status of all involved HCW, notification and or offering of appropriate treatment.

iii) Diseases not listed on this table are subject to current CDC guidelines and will be reviewed by the Hospital Infectious Disease Physician, Employee Health and Infection Control

f) Employee Work Restrictions: Any employee with work restrictions or limitations which could affect an employee's ability to perform their job duties, would contact the Equal Opportunity Program Manager for an assessment as to their eligibility for a reasonable accommodation under the Americans with Disabilities Act. Human Resources will contact Infection Control/Employee health for any questions related to infection control/prevention practices for employees on light duty.

g) HCW Exposure to Blood borne Pathogens and Employee Health

i) Description of Employee Health responsibilities for HCW needle sticks, or blood or body fluid exposures are listed in Employee Health Policy 6.2 Blood Borne Pathogen Exposure Policy.

h) Maintenance of Employee Health Records

i) All Employee records will be maintained in compliance with state and local health laws. Records of employee's exposures to hazardous conditions such as blood borne pathogens will be kept for 30 years after their last working day. Records may include but are not limited to, blood tests, laboratory results, incident reports, medical treatment and other similar documentation.

7) **Accommodations**: If you believe you should be exempt from any of the requirements outlined in this policy for documented medical reason, please check with Employee Health Services. Also, per the UMC Equal Opportunity, Non-Discrimination, Anti-Harassment Action Plan, you may contact the Equal Opportunity Program Manager to request an accommodation evaluation under the Americans with Disabilities Act, as amended (for disability-related requests), or Title VII of the Civil Rights Act, as amended (religion-based accommodation requests).

Table

A. HCW Work Restriction Guidelines
B. HCW Exposure Guidelines

References

1. Nevada Administrative Code. Chapter 441A Communicable Diseases

2. *MMWR*, December 30,2005 / 54(RR17);1-141,
Guidelines for Preventing Transmission of Mycobacterium Tuberculosis in Healthcare Settings, 2005 December 30, 2005/54(RR17);1-141
https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5417a1.htm

3. *MMWR*, May17, 2019 /68(19);439-443,
Tuberculosis Screening, Testing, and Treatment of U.S. Health Care Personnel: Recommendations from the National Tuberculosis Controllers Association and CDC, 2019
https://www.cdc.gov/mmwr/volumes/68/wr/mm6819a3.htm?s_cid=mm6819a3_w

4. *MMWR*, December 6, 2005 / 54(RR15);1-37
Guidelines for the Investigation of Contacts of Persons with Infectious Tuberculosis
https://www.cdc.gov/mmwr/preview/mmwrhtml/rr5415a1.htm

5. *MMWR*, January 24, 2020, Vol 69(3);77-83.
Use of Tetanus Toxoid, Reduced Diphtheria Toxoid, and Acellular Pertussis Vaccines: Updated Recommendations of the Advisory Committee on Immunization Practices — United States, 2019.

6. *MMWR*, April 27, 2018, Vol 67, (RR-2);1-44.
Prevention of Pertussis, Tetanus, and Diphtheria with Vaccines in the United States: Recommendations of the Advisory Committee on Immunization Practices (ACIP)

7. *MMWR*, April 20, 2018, Vol 67,(15);455-8
Recommendations of the Advisory Committee on Immunization Practices for Use of a Hepatitis B Vaccine with a Novel Adjuvant

8. *MMWR*, January 12, 2018, Vol 67,(1);1-31
Prevention of Hepatitis B Virus Infection in the United States: Recommendations of the Advisory Committee on Immunization Practices

9. *MMWR*, December 20, 2013 / 62(RR10);1-9,
CDC Guidance for Evaluating Health-Care Personnel for Hepatitis B Virus Protection and for Administering Post Exposure Management. Vol 62/No.10/December 20, 2013
http://www.cdc.gov/mmwr/preview/mmwrhtml/rr6210a1.htm?s_cid=rr6210a1_w

10. *MMWR*, November 25, 2011, Vol 60, #RR07
Immunization of Health-Care Personnel

11. Kroger AT, Duchin J, Vázquez M. General Best Practice Guidelines for Immunization. Best Practices Guidance of the Advisory Committee on Immunization Practices (ACIP).
https://www.cdc.gov/vaccines/hcp/acip-recs/general-recs/index.html

12. Association of Occupational Health Professionals in Healthcare 10/24/2014
https://www.aohp.org/aohp/portals/0/Documents/MemberServices/templateandform/WR4CD-HCW.pdf

13. *MMWR,* July 6, 2012 Vol 61, #3 Updated CDC Guidelines for the Management of Hepatitis B Virus Infected Health-Care Providers and Students
https://www.cdc.gov/mmwr/pdf/rr/rr6103.pdf

14. CDC Hepatitis C Questions and Answers for Health Professionals; work restrictions for HCV-infected healthcare personnel
https://www.cdc.gov/hepatitis/hcv/hcvfaq.htm#f5

15. CDC COVID-19 Vaccination; Clinical resources for vaccination
https://www.cdc.gov/vaccines/covid-19/index.html

UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA
GOVERNING BOARD
HUMAN RESOURCES AND EXECUTIVE COMPENSATION COMMITTEE
AGENDA ITEM

Issue:	**Nurse Staffing**	**Back-up:**
Petitioner:	**Kurt Houser, Chief Human Resource Officer**	**Clerk Ref. #**

Recommendation:

That the Human Resources and Executive Compensation Committee receive an update regarding matters related to UMC's nurse staffing status; and take action as deemed appropriate. ***(For possible action)***

FISCAL IMPACT:

Unknown

BACKGROUND:

UMC Chief Human Resource Officer, Kurt Houser, will provide an update on matters related to UMC's nurse staffing status.

Cleared for Agenda
September 21, 2021

Agenda Item # 6

UNIVERSITY MEDICAL CENTER OF SOUTHERN NEVADA
GOVERNING BOARD
HUMAN RESOURCES AND EXECUTIVE COMPENSATION COMMITTEE
AGENDA ITEM

Issue:	**Emerging Issues**	**Back-up:**
Petitioner:	**Kurt Houser, Chief Human Resource Officer**	**Clerk Ref. #**

Recommendation:

That the Human Resources and Executive Compensation Committee identify emerging issues to be addressed by staff or by the UMC Governing Board Human Resources and Executive Compensation Committee at future meetings; and direct staff accordingly. *(For possible action)*

FISCAL IMPACT:

None

BACKGROUND:

None

Cleared for Agenda
September 21, 2021

Agenda Item # 7