

***University Medical Center of Southern Nevada
Governing Board Meeting
August 27, 2025***

Emerald Conference Room (1st Floor)
Delta Point Building
901 Rancho Lane
Las Vegas, Clark County, Nevada
Wednesday, August 27, 2025
2:00 PM

The University Medical Center Governing Board met in regular session, at the location and date above, at the hour of 2:00 PM. The meeting was called to order at the hour of 2:06 PM by Chair O'Reilly. The following members were present, which constituted a quorum of the members thereof:

CALL TO ORDER

Board Members:

Present:

John O'Reilly, Chair
Harry Hagerty, Vice Chair
Donald Mackay, M.D.
Laura Lopez-Hobbs
Mary Lynn Palenik
Renee Franklin
Bill Noonan
Robyn Caspersen (WebEx)
Chris Haase (WebEx)

Ex-Officio Members:

Present:

John Fildes, MD, Ex-Officio
Dr. Meena Vohra, Chief of Staff
Alison Netski, Dean of Kirk Kerkorian SOM at UNLV

Absent:

None

Others Present:

Mason Van Houweling, Chief Executive Officer
Tony Marinello, Chief Operating Officer
Jennifer Wakem, Chief Financial Officer
Deb Fox, Chief Nursing Officer
Col. Jeremy Kilburn, M.D., Office of Military Medicine
Patty Scott, Quality, Safety and Regulatory Officer
James Conway, Assistant General Counsel
Stephanie Ceccarelli, Governing Board Secretary

SECTION 1: OPENING CEREMONIES

CALL TO ORDER

PLEDGE OF ALLEGIANCE

INVOCATION

TRANQUILITY MOMENT

The Board members participated in an exercise provided by the UMC Tranquility Nursing team. The Board members participated in an interactive exercise involving guided imagery through the UMC Care Channel to promote healing and relaxation. The Care Channel is a service available at UMC.CareChannel.net.

ITEM NO. 1 PUBLIC COMMENT

Chair O'Reilly asked if there were any persons present in the audience wishing to be heard on any item on this agenda.

Speakers: None

ITEM NO. 2 Approval of Minutes of the regular Meeting of the UMC Governing Board held on July 30, 2025. (Available at University Medical Center, Administrative Office) (For possible action)

FINAL ACTION:

A motion was made by Member Mackay that the minutes be approved as presented. Motion carried by unanimous vote.

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

FINAL ACTION:

A motion was made by Member Hagerty that the agenda be approved as presented. Motion carried by unanimous vote.

SECTION 2: CONSENT ITEMS

ITEM NO. 4 Approve the August 2025 Medical and Dental Staff Credentialing Activities for University Medical Center of Southern Nevada (UMC) as authorized by the Medical Executive Committee (MEC) on August 26, 2025; and take action as deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

- Credentialing Activities

ITEM NO. 5 Approve the Clinical Quality and Professional Affairs Committee's recommendation for approval of the UMC Policies and Procedures

Committee's activities from its meetings held on June 4, 2025 and July 2, 2025; and take any action deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Policies and Procedures June 2025
- Policies and Procedures July 2025

ITEM NO. 6 Approve changes to various HR Policies and Procedures; and take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Recruitment and Selection Policy
- Position Classification and Compensation Plans Policy
- Performance Evaluation Program Policy
- HR Procedure Disciplinary Hearing Process

ITEM NO. 7 Approve the revisions to the UMC Governing Board Policies and Procedures related to committee responsibilities; and make any changes deemed necessary. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Governing Board Policies and Procedures

ITEM NO. 8 Ratify the Fifth Amendment to the Hospital Service Agreement with Cigna Health and Life Insurance Company for Managed Care Services; or take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Hospital Services Agreement Amendment 5 – Redacted
- Disclosure of Ownership

ITEM NO. 9 Ratify the Fifth Amendment to the Hospital Services Agreement with Optum Health Networks, Inc. for Managed Care Services; or take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Hospital Services Agreement Amendment 5 – Redacted
- Disclosure of Ownership

ITEM NO. 10 Ratify the Amendment Nine to the Primary Care Provider Group Services Agreement with Optum Health Networks, Inc. for Managed Care Services; or take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Participation Agreement - Amendment 9
- Disclosure of Ownership

ITEM NO. 11 Approve and authorize the Chief Executive Officer to sign the Participating Health System Agreement with Multiplan, Inc. for Managed Care Services; or take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Provider Agreement
- Disclosure of Ownership

ITEM NO. 12 Approve and authorize the Chief Executive Officer to sign the Agreement for Pest Prevention Services with Rentokil North America, Inc.; authorize the Chief Executive Officer to execute future amendments and extensions; or take action as deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

- Pest Prevention Service Agreement
- Sourcing Letter
- Disclosure of Ownership

ITEM NO. 13 Approve and authorize the Chief Executive Officer to sign the Board the Agreements with Gage Technologies Inc., Extreme Networks, Inc., Insight Direct USA, Inc., and Lumen Technologies Group for the Telephone System Upgrade Project; authorize the Chief Executive Officer to execute extensions and amendments; or take action as deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

- Agreement Avaya Communications Solution
- Extreme Networks – Quote
- Insight Direct USA – Quote
- Lumen – Quote
- Gage – Disclosure of Ownership
- Extreme Networks – Disclosure of Ownership
- Insight Direct USA – Disclosure of Ownership
- Lumen – Disclosure of Ownership

ITEM NO. 14 Approve and authorize the Chief Executive Officer to sign the Master Equipment and Products Agreement, Supplement and Addendum with Siemens Healthcare Diagnostics, Inc.; authorize the Chief Executive Officer to execute future amendments and extensions; or take action as deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

- Agreement – Redacted
- Sourcing Letter
- Disclosure of Ownership

ITEM NO. 15 Review and authorize the Chief Executive Officer to sign the Transplant Listing Fee Agreement with United Network For Organ Sharing (UNOS); authorize the Chief Executive Officer to execute future amendments and extensions; or take action as deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

- Transplant Listing Fee Agreement

- ITEM NO. 16 Approve the overall FY2025 Organizational Performance Objectives as reviewed and recommended by the Human Resources and Executive Compensation Committee; and take any action deemed appropriate. (For possible action)**

DOCUMENT(S) SUBMITTED:

- FY25 UMC Organizational Goal Results

- ITEM NO. 17 Approve the overall FY2026 Organizational Performance Objectives as recommended by the Human Resources and Executive Compensation Committee; and take any action deemed appropriate. (For possible action)**

DOCUMENT(S) SUBMITTED:

- FY26 Organizational Performance Objectives

- ITEM NO. 18 Approve the recommended CEO merit salary adjustment and incentive bonus for Fiscal Year 2025; and recommend for ratification by the Board of Hospital Trustees for the University Medical Center of Southern Nevada; and take any action deemed appropriate. (For possible action)**

DOCUMENT(S) SUBMITTED:

- FY25 UMC Organizational Goal Results

FINAL ACTION:

A motion was made by Member Noonan that Consent Items 4-18 be approved as presented. Motion carried by unanimous vote.

SECTION 3: BUSINESS ITEMS

- ITEM NO. 19 Receive an educational overview from Col. Jeremy Kilburn, MD, regarding the Office of Military Medicine; and direct staff accordingly. (For possible action)**

DOCUMENT(S) SUBMITTED:

- PowerPoint Presentation

DISCUSSION:

Col. Jeremy Kilburn, MD - Director, Office of Military Medicine, shared an update regarding the Las Vegas Military/Civilian Partnership. This partnership represents the largest and most advanced military-civilian medical collaboration in the US and continues to grow. UMC is the principle strategic partner, along with UNLV and three major Air Force organizations. The Office of Military Medicine oversees all of the military medicine at UMC.

There are over 40 integrated providers, 40 rotating providers, 11 integrated nurses with 100 rotators per year and 18 integrated technicians with approximately 250 rotating per year. The military medics have been fully integrated at UMC to assist in medically serving the community. The Air Force

sponsors 41 UNLV GME positions in ER, Surgery, Ob/Gyn, and Pulmonary and Critical Care. Future growth is expected in both GME and non-GME positions.

The Military Health System Strategic Partnership of the American College of Surgeons Report highlighted committed leadership between UMC and the Air Force, excellent infrastructure in the Office of Military Medicine, clinical volume, support, and many other strengths in the program. Opportunities for growth include live tissue training, further GME investment and military specific curriculum.

The Mission Zero grant has been awarded to fund support for credentialing, UMC salaries, medical malpractice coverage, and education. As part of the DoD Skillbridge partnership, the program assists individuals leaving the military in participating in a 4–6-month internship, with the possibility of becoming a UMC employee. Col. Kilburn highlighted the accomplishments of the new research program. Slides displayed military medics providing care at UMC, as well as during deployment in military service over the years.

He concluded his presentation by thanking Mr. Van Houweling, Shana Tello, Nicole Owens, and the UMC Administration and staff for their leadership, mentorship, and continued support of this collaboration. There was continued conversation regarding the great partnership with military medicine and the training provided.

Chairman O'Reilly thanked the Military Medicine team for the success of the program.

FINAL ACTION:

None

ITEM NO. 20 Receive and discuss the Governing Board 2025 Action Plan, to include an update from Patty Scott, Quality, Safety, and Regulatory Officer, regarding the DNV survey results; and take any action deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

- PowerPoint Presentation

DISCUSSION:

Patricia Scott, Quality Patient Safety & Regulatory Officer, provided a brief update on the 2025 DNV Hospital Surveys. The initial 3-day survey in April included a total of eight surveyors. The Comprehensive Stroke Center Certification was in May for 2 days with two surveyors.

UMC received a full 3-year hospital accreditation, as well as Comprehensive Stroke Center Certification in June.

Ms. Scott next reviewed the timeline for future surveys. Monitoring and evaluation data is submitted in September as evidence of compliance and

ongoing sustainability. DNV returns annually with unannounced surveys. The second and third year surveys are considered periodic checks, with fewer surveyors and fewer days. ISO 9001 concepts are introduced during this timeframe. She added that this is an opportunity to follow up on critical findings from previous surveys and provides lessons learned from other surveys. The fourth survey will begin the triennial survey period.

The Board congratulated the team for their successes.

FINAL ACTION:

None

ITEM NO. 21 Receive a report from the Governing Board Clinical Quality and Professional Affairs Committee; and take any action deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

- None

DISCUSSION:

Member Franklin provided a report on the meeting, which was held on Monday, August 11th at 2:00 p.m. A quorum was in attendance. There was no public comment, and the minutes and agenda were both approved unanimously as presented.

The committee reviewed the Governing Board Policies and Procedures.

Next, The Committee received an educational update from Sabrina Holloway regarding the death certificate process. The committee discussed some of the challenges in the process, as well as the hospital, provider, funeral home, and State responsibilities. Process improvements and collaboration opportunities were discussed.

Goals for FY2025 and FY2026 were reviewed. The goals were recommended to the HR Committee and the Governing Board for approval and were a part of today's consent agenda.

Regulatory and Safety program items were discussed and approved.

There were no emerging issues, no public comment, and the meeting adjourned.

FINAL ACTION:

None

ITEM NO. 22 Receive a report from the Governing Board Strategic Planning Committee; and take any action deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

- None

DISCUSSION:

Member Hagerty provided a report on the meeting, which was held on Thursday, August 14th, at 9:00 a.m. A quorum was in attendance. There was no public comment, and the minutes and agenda were both approved unanimously as presented.

The Committee reviewed inpatient market share data for a 12-month period. UMC's inpatient share was 8.8% and moved up to 4th in the market. Share has increased quarter over quarter during the past three quarters. The committee reviewed market share for all of the focused service lines.

Next, the Committee reviewed trends highlighting growth, improvements, and challenges in the focused service lines, which included surgery, orthopedics, cardiac services, ambulatory care, women's, and children's services.

Organizational performance goals for FY2025 were reviewed, and the committee recommended an award of 95% of the goals as being met. The goals were recommended to the HR Committee and the Governing Board for approval and were a part of today's consent agenda.

Lastly, the Committee approved the organizational performance goals for FY2026.

There were no emerging issues, no public comment, and the meeting adjourned.

FINAL ACTION:

None

ITEM NO. 23 Receive a report from the Governing Board Human Resources and Executive Compensation Committee; and take any action deemed appropriate. *(For possible action)***DOCUMENT(S) SUBMITTED:**

- None

DISCUSSION:

Member Lopez-Hobbs provided a report on the meeting, which was held on Monday, August 25th, at 2:00 p.m. A quorum was in attendance. There was no public comment, and the minutes and agenda were both approved unanimously as presented.

The Committee reviewed and discussed minor changes to various HR policies.

The committee reviewed the HR FY2025 goals, and four of the five goals were achieved. The committee discussed the overall hospital organizational goals; achievement was 93.25% overall and was recommended to the Governing Board for approval on today's consent agenda.

The committee next performed a performance review of the CEO. Many achievements were highlighted and the committee had a lengthy discussion and approved the CEO bonus, which was recommended for approval and is a part of today's consent agenda.

The Committee next reviewed the FY2026 performance goals specific to the HR Committee and also approved the overall hospital organizational goals for FY2026 for approval by the Governing Board.

There was one emerging issue discussed, no public comments and the meeting was adjourned.

FINAL ACTION:

None

ITEM NO. 24 Receive a report from the Governing Board Audit and Finance Committee; and take action as deemed appropriate. (*For possible action*)

DOCUMENT(S) SUBMITTED:

- None

DISCUSSION:

Member Caspersen provided a report on the meeting, which was held on Wednesday, August 20th 2025, at 2:00 p.m. A quorum was in attendance. There was no public comment, and the minutes and agenda were both approved unanimously as presented.

The CFO presented a report on the monthly financial results and the fiscal year-end financials for July 2025. The discussion covered factors affecting financial outcomes, comparisons to the budget, as well as operating and financial metrics. Ms. Wakem next presented a report of the ReVITALize project, which was completed on time and on budget. She also reported that the external audit with the BDO external auditors has begun.

The committee goals related to FY26 were discussed, finalized, and recommended to the Governing Board for approval on today's consent agenda.

The other business items were reviewed and approved or ratified by the Committee during the meeting. All of the contracts that were approved during the meeting are a part of today's consent agenda.

There were no emerging issues identified, no public comment, and the meeting adjourned.

FINAL ACTION:

None

ITEM NO. 25 Receive the monthly financial report from the Chief Financial Officer for the June FY25 year-end results and the July FY26 financial report; and take any action deemed appropriate. (*For possible action*)

DOCUMENT(S) SUBMITTED:

- June FY25 Financial Report
- July FY26 Financial Report

DISCUSSION:

Ms. Wakem provided a summary of the monthly financial reports for June FY25 and July FY26.

The key indicators for year to date for June showed admissions on budget. The AADC was 375. Average length of stay was 5.47 days. Overall hospital acuity was 1.81 and Medicare CMI was 2.15. Inpatient surgeries were up slightly. Outpatient surgeries were above budget 8 cases. There were 20 transplant cases. Approximately 22% of ER patients are being admitted. Quick cares were below budget, and primary cares were on budget. There were 371 telehealth visits and orthopedic clinic were up significantly. There were 134 deliveries. The Crisis Stabilization Center was added as a new service line for June.

The income statement for the month showed operating revenue was below budget \$800k. Total operating expenses were below budget \$1.4 million. Total earnings before depreciation and amortization was \$4.8 million on a budget of \$4.5 million, exceeding budget by \$300k.

Ms. Wakem next provided a brief year-to-date overview compared to prior year. There was a 4% increase in total admissions. Observation cases have declined. Length of stay was 6% below prior year, and observation length of stay is being managed well and CMI is consistent with prior year. Surgical cases were 473 more than prior year and outpatient surgical cases were 1500 more than prior year. Transplant cases were above prior year, and ED conversion rate is consistent. Quick care volumes were slightly below prior year, and primary cares had strong volumes. Ortho clinic visits show a 40% increase.

June year-to-date EBIDTA was \$41.1 million on a budget of \$38.7 million.

June SWB showed labor over budget \$13.5 million. Overtime was managed well, but contract labor was higher than anticipated. All other expenses were \$21.6 million due to supplies and 340B revenue.

July is the first month of FY2026. The key indicators for July showed admissions were on budget. Observation cases were below budget. The AADC was 366. Average length of stay was a record 5.12 days. Overall hospital acuity was 1.88 and Medicare CMI was slightly under budget. Inpatient surgeries were 2% above budget. Outpatient surgeries were 12% above budget. Inpatient and outpatient surgeries were above budget. There were 14 transplant cases. ER visits showed 578 visits. Approximately 21.82% of ED patients are being admitted. Quick care and primary cares were below budget. Ortho clinic is exceeding budget and there were 107 deliveries. There were 40 CSC visits.

The income statement for the month showed operating revenue \$3.4 million below budget. Total operating expenses were \$1.6 million below budget. Total earnings were \$2.2 million below budget. Ms. Wakem explained losses from the Crisis Stabilization Center.

Salaries, wages, and benefits were over budget approximately \$1.2 million for the month, primarily due to radiology and contract labor. Overtime is over budget by approximately \$1.2 million. All other expenses were \$2.9 million favorable to budget.

FINAL ACTION:

None

ITEM NO.26 Receive an update from the Dean of the Kirk Kerkorian School of Medicine at UNLV; and take any action deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

- None

Dean Alison Netski provided highlights on the activities for the School of Medicine.

The Dean shared the following highlights:

Due to the passage of SB280, support is provided for the Cleft and Craniofacial Clinic to restart. Funds will be allocated to the UNLV School of Dental Medicine to facilitate the clinic's restart for this region. This will be a partnership with a variety of community partners and a beneficial addition to the community.

The Dean highlighted that Nadia Gomez, Vice Dean of Clinical Affairs, will be performing a innovative procedure with radiofrequency ablation for intrauterine fibroids here at UMC.

UNLV Health has been recognized as Healthcare Partner of the Year by the Nevada Cancer Coalition for its extensive surgical oncology services in the community. The school continues to recruit for medical oncology to meet the community's needs.

The UNLV campus semester for new graduates and undergraduates has begun with record enrollment of 3,300 students and 8,000 new college students. A new degree program for Insurance and Risk Management has been added.

Graduate Medical Education: The recent orientation in July welcomed 25 new Fellows across all programs and 4 Fellows were matched early in the Acute Care Surgery program.

Community engagement highlights for back-to-school included participation in back-to-school programs.

Progress in the collaboration between UMC and UNLV in clinical research projects were discussed briefly.

Faculty: Burn Director, Dr. Nizamani, is leading the ABA Verification process for the Lions Burn Center. Chief of Trauma, Deb Kuhls, and Vice Chief, Allison McNickle, are collaboratively leading the ACS Reverification at UMC.

Chair O'Reilly inquired on the status of a possible collaborative sponsorship program for medical students between UNLV and UMC.

FINAL ACTION:

None

ITEM NO. 27 Receive an update from the Hospital CEO; and take any action deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

- PowerPoint Presentation

DISCUSSION:

Mason Van Houweling, UMC CEO, provided the following updates:

- State of Nevada update – UMC is working closely with the State to ensure patient care and information has been protected.
- Senator Rosen visit – Updates from UMC News brochure were highlighted.
- Magnet update – This has been a 10-year journey. Site visit survey is scheduled for November 17-20.
- Main lobby construction is underway
- UMC's CNA program is starting in fall 2025. This is a 6-week program, beginning with 20 students.
- UMC Trauma and Burn Conference will be September 26th
- Best of Las Vegas voting now underway
- Mr. Van Houweling recognized Member Lopez-Hobbs for donating Beanie Babies for the children in pediatrics.
-

FINAL ACTION:

None

SECTION 4: EMERGING ISSUES

ITEM NO. 28 Identify emerging issues to be addressed by staff or by the Board at future meetings; and direct staff accordingly. (For possible action)

DISCUSSION:

Member Noonan shared a positive experience of care patient care at UMC.

FINAL ACTION:

None

COMMENTS BY THE GENERAL PUBLIC:

Comments from the general public were called for:

Speaker Michelle Maese – President of SEIU 1107 Las Vegas, NV 89102 :

Here to express concern regarding news received from Mason, indicating there were going to be layoffs coming at UMC and noted that the following day there was an advertisement regarding a hiring fair that UMC was going to be present at. Other members are present to voice concerns about having six hours of work per month and then being on unemployment, while other departments are on mandatory overtime. Ms. Maese stated that the Body is concerned about the community; we care about the community. She thanked the Member for his report regarding the pleasant stay at the hospital because of staff. The reason for the commendation is because of staff; staff works hard at the hospital, and she hopes that the Board recognizes the hard work that they do in taking care of it. While there seems to be a shortage in staffing, it is about the lack of dignity and respect for healthcare professionals. They want to work and care for the community the best they can, to the best of their ability. They cannot do so if they don't have hours or they are overworked. At this time, she turned the floor over to the SEIU members to speak.

Speaker Jody Domineck - Secretary Treasurer at SEIU 1107 and Nurse in the Community – 2250 South Rancho:

Echoed the statements from the workers at UMC. They are the ones who are hands-on with the patients and are preventing infections and delivering the high-quality care that will earn UMC Magnet status. Stands in support with the staff and welcomes the Board to listen to them as they express their realities of what it is like working at UMC.

Speaker Elizibeth Bolhouse – Elected SEIU Chief Nursing Stewart, UMC Peds ICU RN for 26 years – Las Vegas, NV:

She stated that she comes when it's important, and it's important. Her statement started with "Help." We've tried it UMC's way, and it is failing patients and us. We've tried 2 CNAs for 32 patients; that's 16 patients each for 1 CNA. We've tried 5 sitters that are required on our 2 South unit, which is MedSurg, Behavioral, L2K custody. They send home their unit clerk, despite having 20 out of 24 beds full. We've tried increasing the ratios. MedSurg nurses went from 1:5 to 1:6. IMC nurses went from 1:4 to 1:5. Tried Charge RN (inaudible) patient assignment. Tried calling off the unit clerks for cardiac monitor tests to keep Charge RNs out of assignment, as well as other adjustments in staffing. The Charge RN has to cover breaks and lunches. Bedside nursing cannot tolerate any more productivity cuts. You have to help us. One malpractice lawsuit will wipe out any cost savings, let alone the emotional detriment of everyone involved. Board of Governors, I am specifically asking you to please ask our CEO Mason to give a list of all new jobs created in the past 3 years and what positions actually physically care for and touch a patient, and what pay scale those jobs

have. UMC is top heavy. UMC has waste. I understand the Big Beautiful Bill law has devastating Medicaid cuts to come, but we cannot risk our present for the future. We have to look elsewhere within ourselves, as Nevada's highest level of care takes labor resources. Nurses are afraid to come to work, nurses are afraid of not being able to take care of patients. As more and more is being placed on us and less and less resources. Nurses, plural, nurses are in therapy for post-traumatic stress for working at UMC, and they are not the ones I thought would crack. They are strong, they're tough, they're smart. Why is no one listening? Cut the fluff and staff us. I promise I will work hard for UMC, but please don't make me work unsafe.

Speaker – Sylvia Cedano – NICU - 24-year employee – Las Vegas, NV:

My hours are being cut off. I have been working only 8 hours a week for 2-3 months. It is very stressful. I am concerned; nobody has answers for me. Just go home. I ask please, "what is it, productivity? They don't know what the productivity census is, it could be 16, 8, it could be 12, they're still gonna send me home. Every month that I come back, it has to be higher on the census. I am getting sick. I lost all my hair. Please, help us.

Speaker – Eileen Torres – North Las Vegas, NV: Representing the Radiology Department and Xray:

Ms. Torres stated she had a couple of concerns and read a letter on behalf of the department. The letter is in representation of 48 x-ray technologist at UMC hospital. Dedicated professionals and committed to delivering high quality care. The critical challenge threaten patient safety and staff well-being. We urgently need your intervention. Since 2017, our radiology team has been chronically short staffed, creating an unsustainable workflow. Five consecutive years, on mandatory overtime since 2021, have forced technologists to work 16 plus hour shifts and return after 8 hours. A dangerous practice, risking patient care and causing burnout. Our below average wages make it impossible to attract or retain skilled technologists. Despite UMC demanding (inaudible), the radiology turnover rate is alarming, with experienced staff leaving due to toxic work environment. While specials procedures is thriving, only after moving to another director, exposing leadership failure. HR's failure to investigate this turnover shows a lack of accountability. The toxic environment has damaged UMC's reputation, with negative online reviews, criticizing management, and deteriorating applicants. The CAL program meant to reward staff and earn time off is unreliable. Many technologists have been approved leave, after revoked, after already having vacations books and tickets paid, causing distress. We proposed replacing mandatory overtime with incentive pay for voluntary extra shifts to boost morale and add safety, reduce burnout attract talent and preserve mental health. We also urge an investigation in HR and the radiology department to address the

turnover crisis. Please act swiftly to ensure a workplace to prioritize safety, fairness, and sustainability. – UMC Xray Staff

Speaker – Teresa McGowan – SEIU Chief Ancillary Stewart at UMC – Las Vegas, NV:

Here on behalf of ancillary staff. We need help. Our unit clerks and CMTs have been called off or cancelled since November, having to utilize and deplete their CAL. It is not fair. They haven't been properly sent to other units to float until recently. It is very, very stressful for them. They're constantly being called off and they are scared that their positions are going to be gone, MICU and SICU and Unit Clerks throughout the hospital. I am here to ask for help, please Governing Board. Give them consideration. They're vital. Thank you.

Speaker – Shelly Tabarez – 15 Year Employee – Las Vegas, NV:

Ms. Tabarez was representing ambulatory. We're losing hours, we're being called off, we're being sent home. We don't have the census. What can we do to protect our jobs? Three years ago, they brought in the MAs, we knew the LPNs were being phased out. I hope we don't lose 100 of our staff, because UMC is a great hospital. I love working here. Our patients deserve better.

Speaker – Eric Gasper – SEIU Bargaining Unit Vice President – Las Vegas, NV
With financial headwinds we face at UMC due to the Medicaid cuts, I am confident we are in capable hands. Mason and his team has turned a \$100 million shortfall into a \$33 million surplus in 2016 demonstrating strong leadership and vision. At the same time, we hope that staff concerns are heard with an open mind and compassion. By working together and listening to one another, and listening to one another, we can navigate these challenges successfully and continue building a stronger UMC for everyone.

At this time, the public comment section was closed.

Chairman O'Reilly commented that although this is not a time for discussion, the Board and the management team cares about each individual at the hospital. He commented that the communication between the management and the union liaison meet often. The meetings can be increased to address any issues identified. He thanked the Union for coming and bringing their concerns to the attention of the Board. He assured that Mason and the management team will address their concerns.

A motion was made by Member Franklin that the Board go into closed session.

FINAL ACTION TAKEN:

At this time, Member Franklin moved to go into the closed session, pursuant to NRS 241.015(4)(c) and NRS 450.140(3), as outlined in the agenda. The motion was carried by unanimous vote.

At 3:48 PM, the Board recessed to go into closed session.

The meeting was reconvened in closed session at 3:58 PM.

SECTION 5: CLOSED SESSION

ITEM NO. 29 Go into closed session, pursuant to NRS 241.015(4)(c), to receive information from the General Counsel regarding potential or existing litigation involving matters over which the Board had supervision, control, jurisdiction or advisory power, and to deliberate toward a decision on the matters; and direct staff accordingly. *(For possible action)*

ITEM NO. 30 Go into closed session pursuant to NRS 450.140(3) to discuss new or material expansion of UMC's health care services and hospital facilities.

FINAL ACTION:

At the hour of 4:42 PM, the closed sessions on the above topics ended and the meeting was adjourned.

APPROVED: September 24, 2025

Minutes Prepared by: Stephanie Ceccarelli, Governing Board Secretary