

**University Medical Center of Southern Nevada
Governing Board Meeting
October 27, 2021**

Emerald Conference Room
Delta Point Building (1st Floor)
901 Rancho Lane,
Las Vegas, Clark County, Nevada
Wednesday, October 27, 2021
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 2:14 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
Donald Mackay, M.D., Vice-Chair
Laura Lopez-Hobbs
Robyn Caspersen
Renee Franklin
Chris Haase (via WebEx)
Harry Hagerty
Jeff Ellis (via WebEx)

Ex-Officio Members:

Present:

Barbara Fraser, Ex-Officio
Dr. Frederick Lippmann, Chief of Staff
Dr. Marc Kahn Dean UNLV

Absent:

Mary Lynn Palenik (Excused)

Others Present:

Mason Van Houweling, Chief Executive Officer
Tony Marinello, Chief Operating Officer
Jennifer Wakem, Chief Financial Officer
Kurt Houser, Chief Human Resource Officer
Danita Cohen, Chief Experience Officer
Susan Pitz, General Counsel
Stephanie Ceccarelli, Board Secretary

SECTION 1. OPENING CEREMONIES

CALL TO ORDER

PLEDGE OF ALLEGIANCE

INVOCATION

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 meeting of the UMC Governing Board held on September 29, 2021. (Available at University Medical Center, Administrative Office) (For possible action)

FINAL ACTION:

A motion was made by Member Mackay that the agenda 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: CONSENT ITEMS

ITEM NO. 4 Approve the October 2021 Medical and Dental Staff Credentialing Activities for University Medical Center of Southern Nevada (UMC) as authorized by the Medical Executive Committee (MEC) on October 26, 2021; and take action as deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

- Credentialing Activities

ITEM NO. 5 Approve and recommend approval by the UMC Board of Hospital Trustees the proposed amendments to the UMC Medical and Dental Staff Bylaws and Rules & Regulations; as approved and recommended by the Medical Executive Committee on September 28, 2021; and take action as deemed appropriate. (For possible action).

DOCUMENT(S) SUBMITTED:

- Memo Bylaws
- Proposed Revisions

- ITEM NO. 6** Approve and authorize the Chief Executive Officer to sign the Secondary Commitment Agreement with Cardinal Health 200, LLC for Medical/Surgical Products and exercise any extension options; or take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Secondary Commitment Agreement
- Disclosure of Ownership
- Sourcing Letter

- ITEM NO. 7** Approve and authorize the Chief Executive Officer to sign the Contract for Services with Patricia Tondorf, Independent Contractor to provide Patient Accounting Services, exercise any extension options and execute future amendments within his yearly delegation of authority; or take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Services Contract
- Disclosure of Ownership
- Business Associate Agreement

- ITEM NO. 8** Approve and authorize the Chief Executive Officer to sign the Agreements with Sophos Limited and ROI-IT for Managed Response IT Services; or take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Quote
- Disclosure of Ownership
- End User License Agreement
- Enterprise Terms and Conditions

- ITEM NO. 9** Approve and authorize the Chief Executive Officer to sign the Amendment One to Service Agreement with Cloudmed Solutions LLC for revenue recovery services, exercise the extension option and execute future Statements of Work within his yearly delegation of authority; or take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Amendment one to Service Agreement

- ITEM NO. 10** Approve and authorize the Chief Executive Officer to sign the Coding Services Agreement with Excite IT Partners, LLC d/b/a Excite Health Partners for remote coder services, exercise any extension options and execute future amendments within his yearly delegation of authority; or take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Coding Services Agreement

- ITEM NO. 11** Approve and authorize the Chief Executive Officer to sign the Coding Services Agreement with Medovent Solutions LLC for onsite and remote

coder services, exercise any extension options and execute future amendments within his yearly delegation of authority; or take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Coding Services Agreement

ITEM NO. 12 Approve and authorize the Chief Executive Officer to sign the Amendment One to SAAS Service Agreement, and exercise any extension options with FrontRunnerHC, Inc. for COVID-Assist software subscription services; or take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Amendment One to SAAS Service Agreement

ITEM NO. 13 Approve and authorize the Chief Executive Officer to sign the Service Agreement and Addendum with Philips Healthcare for the Azurion X-Ray Equipment and execute future renewals within his delegation of authority; or take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Quote
- Disclosure of Ownership
- Philips Terms and Conditions of Service

ITEM NO. 14 Approve and authorize the Chief Executive Officer to sign the Quote with GE Healthcare for the purchase of anesthesia machines; or take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Quote Summary

ITEM NO. 15 Approve the award of Bid No. 2021-02 First Floor Refresh to DM Stanek Corporation, the lowest responsive and responsible bidder; authorize the Chief Executive Officer to exercise any Change Orders within his delegation of authority; or take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Bid 2021-02 First Floor Refresh
- Supplier Response
- Award Letter
- Disclosure of Ownership

ITEM NO. 16 Approve and authorize the Chief Executive Officer to sign the Amendment #1 to the Agreement for Landscaping Services with Brightview Landscape Services; authorize the Chief Executive Officer to exercise any extension options; and take action as deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

- Services Agreement Amendment One

FINAL ACTION:

A motion was made by Member Hagerty that Consent Items 4-16 be approved as presented. Motion carried by unanimous vote.

SECTION 3: BUSINESS ITEMS

ITEM NO. 17 Receive a refresher education from Shaunda Phillips, UMC Risk Manager on patient complaints and grievance handling process; and take any action deemed appropriate. *(For possible action)*

DOCUMENT(S) SUBMITTED:

PowerPoint Presentation

DISCUSSION:

Shaunda Philips, UMC Risk Manager, provided a review of the UMC Complaints and Grievance Policy. Contained in the CMS hospital conditions of participation is a requirement that UMC has a process for addressing issues of dissatisfaction that are reported by patients or family members. UMC has adopted the policy entitled Patient Complaint, Grievance and Insurance Inquiry Process.

Ms. Phillips focused on the processes involved in investigating complaints and grievances. Complaints are issues of dissatisfaction that are reported verbally by admitted or current patients. Grievances, are issues that may be received verbally or in writing, after the patient has been discharged. Processes have been revised to support staff and empower them to attempt to resolve complaints when they are received or follow the chain of command to resolve matters quickly.

Risk management is responsible for the following: maintaining a grievance log, reviewing and investigating the grievance, notifying department leadership, preparing the required response and preparing quarterly reports, which are reviewed by Patient Safety and the Clinical Quality Committee.

In conclusion, Ms. Phillips emphasized that the process has been streamlined to maintain consistency of message, compliance of various regulations and UMC obligations, tracking and reporting.

There has been positive feedback from the nursing staff with the changes in processes. Although there had been a decline overall in the number of grievances received, there has been an increase in grievances related to COVID visitation processes.

Lastly, Ms. Phillips briefly described the working relationship risk management has with other departments, such as compliance, privacy and legal.

FINAL ACTION:

None

ITEM NO. 18 Review and discuss the Governing Board 2021 Action Plan, to include an informational presentation on current supply chain challenges facing UMC; and take any action deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

PowerPoint Presentation

DISCUSSION:

Douglas Moser, Director Materials Management presented supply chain challenges that have affected UMC.

Hospitals across the nation and globally continue to face challenges in logistics and supplies. Mr. Moser described the ripple effect created by the trucking shortage, which impacts shipping from the manufacturer to the facility. Dock closures due to COVID, the backlog in freight and the scarcity in shipping containers has created widespread shortages in supplies, increased costs and longer wait times for deliveries.

Despite these challenges, UMC has been strategic in purchasing PPE, with the effort to mitigate the shortages that we are facing. A list of affected products was shown. UMC continues keep ahead of the challenges by working closely with our vendors to source products, buying in bulk, planning ahead on projects and anticipating delays. A discussion ensued regarding community partnerships that could help mitigate shortages in food supplies.

FINAL ACTION:

None

ITEM NO. 19 Receive a report from the Clinical Quality and Professional Affairs Committee; and take any action deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

None

DISCUSSION:

Member Mackay provided a report on the meeting held on Monday, October 4, 2021 at 3:02 pm. There was a quorum in attendance. There was no public comment. The minutes and the agenda were both approved.

An update was received on clinical trials research activities from Ron Roemer, Director of Clinical Trials Research. A review of studies under consideration was provided. There are currently 114 studies that are open and there have been 441 completed since 2017.

Next, Deb Fox, CNO provided an update on the process of applying for reaccreditation for the PTAP program and the re-designation for Pathways to Excellence.

Jovi Remitio provided an update of the HCAHPS scores from Q4 2020 through Q2 2021 and the ICARE4U programs. It was noted that there was significant improvement in quietness. Patients' understanding of discharge instructions and communication still present a challenge.

Lastly, the Committee received an update on quality, safety, infection and regulatory information from Patty Scott. UMC Policies and Procedures were approved and Medical and Dental Staff Bylaws were also approved.

There were no emerging issues identified and no public comments. The meeting adjourned at 4:30 pm.

FINAL ACTION:

None

ITEM NO. 20 Receive a report from the 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 held on Thursday, October 7, 2021 at 9:00 am. There was a quorum in attendance. There was no public comment. The minutes and the agenda were both approved.

An update was provided on performance and the sacred six service lines in FY21 as compare to FY20. Surgery showed an increase in cases for the last 3 quarters of FY 21 and a significant increase in net revenue and profit contributions for the year. Perioperative Operations Council continues to drive operating efficiencies, with a focus on start times and reducing OR turnover time. There have been cost saving in OR supply expenses. There was also a review of orthopedic market, which had an increase in cases and a 5.9% increase in net revenue. There was a 53% increase in contribution dollars. Cardiac services also showed a 21% increase in contribution dollars. He continued his report by providing statistical updates in ambulatory, quick cares, oncology and pediatric services. Telemedicine capabilities are expected to be rolled out in phases.

Next, the Committee participated in a discussion with Dean Kahn regarding the relationship that UMC has with the Kirk Kerkorian School of Medicine at UNLV. The challenges that UMC faces with the GME program and the sacred six service lines and telemedicine expansion were discussed. The Committee welcomed regular updates from the Dean.

There were no emerging issues identified and no public comments. The meeting adjourned at 11:15 am.

FINAL ACTION:

None

ITEM NO. 21 Receive an update a report from the Governing Board Audit and Finance Committee; and take any action deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

None

DISCUSSION:

Member Caspersen provided a report on the meeting which was held on Wednesday, October 20, 2021 at 2:02 pm. There was a quorum in attendance. There was no public comment and minutes and the agenda were both approved unanimously.

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

Results from the September FY21 and year to date financials were reviewed. The discussion included various levels of functions, data and results, trending stats, including payor mix by major segments. Overall the trends in increased volumes continued, despite excess expenses. Staffing challenges continue to be monitored. Key financial indicators were reviewed. There was a lengthy discussion on capital spending and capital plans. Despite delays in receipt of federal supplemental payments, cash remains strong.

The FY 2021 independent BDO Audit progress has been delayed. Final results of the audit are expected in December.

There was one emerging issue regarding medical coding. There was no public comment and the meeting adjourned at 3:03 PM.

FINAL ACTION:

None

ITEM NO. 22 Receive the monthly financial report for September FY22; and take any action deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

September FY22 Financials

DISCUSSION:

Ms. Wakem provided a summary of the monthly financial report for September FY22.

The key indicators for September showed positive results and strong volumes. Admissions were above budget 4%. The AADC had an average of 616 for the month and acuity remains high. Hospital CMI was 2.02 and Medicare CMI was 2.05. Inpatient and outpatient surgeries were above budget. September set a record of outpatient surgeries with 587 cases. ER visits were above budget 16%. The conversion rate was 19%.

Quick cares were up 24% above budget with Nellis, Centennial and Summerlin being the key drivers. Primary care volumes were up 16%, with Peccole, Nellis and Spring Valley as the key drivers.

The income statement for the month showed net revenue above budget \$10.8 million. Operating expenses were above budget \$7 million. Income from ops landed at \$1.8 million in positive earnings, with a budgeted loss of \$1.8 million. The year to date P&L shows positive earnings of \$6.6 million on a budgeted loss of \$5.2 million.

Salaries, wages and benefits is significantly over budget. She reminded the Board of the nursing shortage which is a challenge trending nationwide. Contract labor continues to be high. UMC is creating a nursing float pool to address these issues.

All other expenses for September are over budget due to increased volumes.

FINAL ACTION:

None

ITEM NO. 23 Receive an update on the Kirk Kerkorian School of Medicine at UNLV; and take any action deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

None

DISCUSSION:

Dr. Marc Kahn, Dean of the Kirk Kerkorian School of Medicine at UNLV, updated the Board on the activities of the school.

Construction continues ahead of schedule for the medical education building and the plan is to take occupancy by the end of summer of 2022. The School is entertaining an opportunity to attain funding for an ambulatory clinical building. Details of this project and financing are being discussed.

Dean Kahn briefly reviewed the leadership meeting with UMC and the School of Medicine held a leadership meeting held last week.

Lastly, the health district has mandated vaccines for all students and NSHE has mandated vaccinations for all faculty and staff.

The conversation continued on the subjects of vaccine dosage for children; vaccine immunity vs. natural immunity; and antibody testing results.

FINAL ACTION:

None

ITEM NO. 24 Receive an update from the Hospital CEO; and take any action deemed appropriate. (For possible action)

DOCUMENT(S) SUBMITTED:

CEO Update

DISCUSSION:

Mason Van Houweling, UMC CEO provided the following updates:

- COVID stats –30 patients in-house. He continued by providing county and statewide statistics.
- Supply chain strains –labor, transportation, raw materials.
- November 1st UMC will require mandatory vaccines for staff. The CMS press release memo dated September 9th was reviewed. UMC is 91% vaccinated. Many hospitals have adopted the vaccine mandate. An accommodation process is in place.
- Nellis AFB is pursuing their Level III Trauma Center designation.
- Projects:
 - Beaker – November 2nd is the go-live date.
 - First floor renovation with enhanced security desk, new flooring and bathroom remodel has begun.
- Capital requests:
 - 14 anesthesia machines and MRI compatible ventilators.
- NHA names Pat Kelly as the new President and CEO, replacing Bill Welch.
- UMC in the News: Burn Survivor returns to UMC to feed staff
- UMC Foundation 5K – raised \$29,000 – Thank you to the Board and staff for your support and participation.
- Halloween “Safe”tacular– Saturday, October 30th – 9:00 am –12:00 pm
- “RockinUMC Blues” Holiday Party at the Westgate – The event is scheduled to take place on December 1st.
- Save the Date: The first “Evening of Hope Gala” will be on October 20, 2022 at the Wynn Resort.

A discussion ensued regarding COVID hospitalization statistics.

FINAL ACTION:

None

SECTION 4: EMERGING ISSUES

ITEM NO. 25 Identify emerging issues to be addressed by staff or by the Board at future meetings; and direct staff accordingly. (For possible action)

DISCUSSION:

Chair O'Reilly suggested the following items for future agenda:

1. Full day Governing Board Special meeting for 2022
2. Board Member reappointments

FINAL ACTION:

None

COMMENTS BY THE GENERAL PUBLIC:

Comments from the general public were called. No such comments were heard.

A motion was made by Member Caspersen to go into closed session pursuant to NRS 241.015(3)(b)(2).

There being no further business to come before the Board at this time, at the hour of 3:18 PM, Chair O'Reilly adjourned the meeting, and the Board recessed to go into closed session.

SECTION 5: CLOSED SESSION

ITEM NO. 26 Go into closed session, NRS 241.015(3)(b)(2), 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*)

The meeting was reconvened in closed session at 3:20 PM.

At the hour of 3:33 PM, the closed session on the above topic ended.

FINAL ACTION TAKEN:

None

There being no further business to come before the Board at this time, at the hour of 3:33 PM. Chair O'Reilly adjourned the meeting.

APPROVED: November 18, 2021

Minutes Prepared by: Stephanie Ceccarelli, Board Secretary