

**SIERRA VISTA HOSPITAL
GOVERNING BOARD REGULAR MEETING MINUTES**

September 26, 2023

12:00pm

**Elephant Butte Lake RV Resort
Event Center**

1. The Governing Board of Sierra Vista Hospital met September 26, 2023, at 12:00 pm at Elephant Butte Lake RV Resort Event Center for a regular meeting. Bruce Swingle, Chairperson, called the meeting to order at 12:05.

2. Pledge of Allegiance

3. Roll Call

GOVERNING BOARD -----

SIERRA COUNTY

Kathi Pape, **Vice Chair** – Present
Serina Bartoo, Member – Absent
Shawnee R. Williams, Member – Present

ELEPHANT BUTTE

Katharine Elverum, Member – Present
John Mascaro, Member- Present

CITY OF T O R C

Bruce Swingle, **Chairperson** – Present
Jesus Baray, Member- Present
Greg D’Amour, Member- Present

EX-OFFICIO

Amanda Cardona, Clerk VofW- Present
John Mascaro, City Manager EB- Present
Amber Vaughn, County Manager- Present
Angie Gonzales, City Manager- Absent
Jim Paxon, JPC Chairperson- Excused
Phillip Mortenson, JPC Vice-Chair- Present

VILLAGE OF WILLIAMSBURG

Denise Addie, **Secretary** – Present by phone

STAFF

Frank Corcoran, CEO- Present
Ming Huang, CFO- Present
Sheila Adams, CNO- Excused
LJ Baker, HR Director- Excused
Heather Johnson, HIM Mgr., Excused
Zach Heard, Operations Manager, Present

GUEST:

Erika Sundrud, Ovation by phone
David Perry, Ovation
Wanda Wright, Ovation
Bernard Ronga, Ovation
Veronica, Amplify

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There is a quorum.

4. Approval of Agenda

Bruce Swingle, Chairperson

Kathi Pape motioned to approve the agenda. John Mascaro seconded. Motion carried unanimously.

“Are there any items on this agenda that could cause a potential conflict of interest by any Governing Board Member?”

None

5. Approval of minutes

Bruce Swingle, Chairperson

A. August 22, 2023 Regular Meeting

Kathi Pape motioned to approve the August 22, 2023 minutes. Katharine Elverum seconded. Motion carried unanimously.

6. Public Input –

Wendy Kessinger addressed the Governing Board with concern regarding her observation of SVH EMS at an accident scene here in town. Perhaps EMS should revisit immobilization, back-boarding, and head blocking techniques as none of these were done before transporting this patient.

7. Old Business-

Bruce Swingle, Chairperson

None

8. New Business-

None

9. Finance Committee-

A. August Financial Report - Ming Huang, CFO, directed board members to page FC5. We had 105 days cash on hand at the end of August which equals \$9,294,689. Accounts receivable net days were 20 and accounts payable days were 22. The net income for August was \$82,302 compared to a budget loss of (\$221,591). Hospital gross revenue was \$5,937,549 which is \$527,477 more than budget. Patient days were 52, 16 less than July, outpatient visits were 872, 264 less than July, RHC visits were 1,037, 290 more than July and ER visits were 765, 53 more than July.

Revenue deductions for August were \$3,144,106 or \$441,654 more than budget. Other operating revenue was \$206,464 including \$149,992 in Pharmacy 340B revenue. Non-operating revenue was \$199,315.

Hospital operating expenses for August were \$2,706,574 which is under budget by \$121,226.

EBITDA was \$501,926 versus a budget of \$196,804. Year to date, EBITDA is \$464,498 versus a budget of \$393,607.

Bruce Swingle noted that August was the second highest month of revenue, May was the highest at \$6.3. The EBITDA percentage for August is 16%. Year to date, EBITDA is 8%.

Kathi Pape stated that volume trends look stable, and surgery is increasing. Ming provided a breakdown of contract services. In August, contract services equaled \$839,230. Items that are above \$10,000 have descriptions next to them. 34% of contract services expenses are agency staffing.

The bond coverage ratio in August was 167% versus an expected ratio of 130%.

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At the end of August, we had \$9,294,689 in the bank. Under receivables on the balance sheet, other receivables are \$1,376,084. Of that amount, approximately \$700,000 is HAP/TAP funds for three quarters of this year that we have not received yet. Under the cost report settlement, we have a receivable of \$417,000.

Kathi Pape summarized the Finance Committee meeting with good discussions regarding unexpected expenses such as the tunnel and the new generator and monies that are still owed to us by various sources.

Kathi Pape motioned based on the recommendation of the Finance Committee acceptance of the August Finance report. Katharine Elverum seconded. Bruce Swingle stated that under the circumstances in the state of New Mexico and the difficulties that the healthcare industry is facing, financially, Sierra Vista Hospital is doing very well. Motion carried unanimously.

10. Board Quality- Denise Addie, Chairperson, asked Shawnee William to discuss the Board Quality meeting. Shawnee stated that Board Quality met on Monday, September 25th and discussed the following policy as well as QAPI Plan FY24, Risk and Privileges.

A. Med Staff

1. Policy Review -

*OP Consent Form Revision – Sheila Adams explained that this form is a combination of many other forms including assignment of benefits, patient consent, consent to release information, notice of privacy, general consent and more. When the patient has signed the form it will be scanned into their file in Cerner. Bruce Swingle asked if this has been reviewed by legal? LJ Baker said he would make sure it goes through proper legal review.

Kathi Pape motioned to approve the OP Consent Form revision pending approval from legal. John Mascaro seconded. Motion carried unanimously.

Note: QAPI Plan FY24 is on the agenda in closed session, however, Sheila Adams did explain the plan at this time. The quality management, patient safety and performance improvement plan for FY 2024 details the process by which the timeliness, effectiveness and appropriateness of patient care and related support services are monitored to facilitate the detection of opportunities for improvement and coordinate and integrate changes through the active participation of the Board of Directors, management, and clinical leaders of the Hospital, and insure the appropriate delivery of high-quality care.

Priority one is departments will maintain and advance department PI plans (performance improvement) using PDSA (Plan, Do, Study, Act). Priority two is proactive risk assessment and priority three is survey of culture and increase reporting of events including near misses.

Denise Addie motioned based on the recommendation of the Board Quality Committee approval of the QAPI Plan FY24. Shawnee Williams seconded. Motion carried unanimously.

11. Administrative Reports

A. Human Resources - LJ Baker, HR Director, reported that priority of effort is support of expanding service lines and reorganization for efficiency. Our billing department staff have been placed in other positions throughout the hospital as Amplify takes over billing and collection duties with Cerner. To date, we have had 14 new or rehires, 15 terminations and our current staff total is 210.

We have hired a speech therapist PRN. We have also hired a licensed Psychologist to work in our Behavioral Health clinic. We continue to recruit a psychiatrist.

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Key initiatives include working with our Government Reps both State and Federal for urgent facility improvement and EMS and Rehab buildings.

Our Annual 5K Breast Cancer Awareness event will take place on October 21st at the Sierra del Rio Golf Course. We are receiving applications from students for our S.O.A.R. program with HSHS. Working with the City of T or C, we will be hosting a job fair in November at the Civic Center.

Contract staff numbers are holding steady. The 3% cost of living adjustment for employees hired before April will go into effect on September 24th.

Greg D'Amour asked about the morale of staff, especially the business office staff that are now in new positions. LJ stated that it depends on who you ask.

B. Nursing Services - Sheila Adams, CNO, reported that the annual nursing services skills fair will take place on September 30. Two of our critical care paramedics competed in a national conference last week and placed fourth.

Acute admissions increased in August to 31 and we had two swing bed admissions. The ER averaged 24 patients per day in August.

EMS ALICE online training is complete, and they are in the planning phase for a mock incident. EMS had 638 responses and 401 transitional care management contacts. Surgery did 14 scopes, four surgeries and five surgical consults in August.

Sleep studies are available at home or overnight in the hospital. Evaluation for home oxygen needs and pulmonary function testing is available for outpatients.

We had 108 traumas in August, and we are still waiting for our trauma survey. Our team is ready.

C. CEO Report - Frank Corcoran, CEO. As LJ mentioned, we have made an offer to a behavioral health nurse practitioner pending contract approval. The RHC walk-in clinic is off to a great start. Jamie is seeing an average of 10 patients per day Wednesday through Friday and an average of five on Saturday. A few of the walk-ins have had to go to the ER because they were acute. We are looking at expanding telemed services to include infectious disease, endocrine, pulmonology and hematology.

Cerner has provided a status summary of where we are at with our IT system replacement. On page GB19 there is a schedule of major milestones and the date we hit them or expect to hit them. IT-2 testing starts this week and our "go live" is expected November 6th.

We are in the process of applying for SB7 Rural Health Care Delivery Funds. With these funds we want to expand surgery, pain management, community EMS and telemedicine. These funds would help offset any operational losses as we get started. There is about \$80 million available.

Sierra Vista Hospital has received two quality awards from the New Mexico Hospital Association. One recognizing our Community EMS and the other, Dr. Walker.

The CMS Acute survey from the DOH resulted in two minor findings which Sheila Adams has addressed. The Life Safety survey resulted in seven minor findings including exit signs, inspection of the kitchen hood and smoke detectors. Overall, we did really well on both surveys.

D. Governing Board - Bruce Swingle, Chairperson

No open session report.

Motion to Close Meeting:

John Mascaro motioned to close the meeting and move into Executive Session. Kathi Pape seconded.

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12. Executive Session – In accordance with Open Meetings Act, NMSA 1978, Chapter 10, Article 15, Section 10-15-1 (H) 2,7,9 including credentialing under NM Review Organization Immunity Act, NMSA Section 41-2E (8) and 41-9-5 the Governing Board will vote to close the meeting to discuss the following items:

Order of business to be determined by Chairperson:

10-15-1(H) 2 – Limited Personnel Matters

A. Privileges Frank Corcoran

60-Day Temporary to Provisional

Laurentine Uwamahoro, CNP
Peter Razma, MD
Andrew Costin, CRNA

RadPartners Initial

Michael Hovsepian, MD

RadPartners Reappointment

Lance Dell, MD - **Approved with 6-month period of FPPE (external peer review)**
Patrick D. Kelly, MD

B. Behavioral Health Provider Contract Frank Corcoran

10-15-1 (H) 7 – Attorney Client Privilege/ Pending Litigation

A. Risk Report Heather Johnson

10-15-1 (H) 9 – Public Hospital Board Meetings, Strategic and long-range business plans

A. Ovation Team Report to Board	Erika Sundrud and Guests
B. Executive Dashboard	Frank Corcoran, CEO
C. QAPI Plan FY24	Sheila Adams, CNO
D. Board Self-assessment	Bruce Swingle, Chairperson
E. Office Space	Frank Corcoran, CEO

Roll Call to Close Meeting:

Kathi Pape – Y	Shawnee Williams – Y	Bruce Swingle – Y
Greg D’Amour – Y	Denise Addie – Y	Katharine Elverum – Y
John Mascaro – Y	Jesus Baray - Y	

Note: Jesus Baray and Shawnee Williams left the meeting before closed session ended.

13. Re-Open Meeting – As required by Section 10-15-1(J), NMSA 1978 matters discussed in executive session were limited only to those specified in the motion to close the meeting.

10-15-1(H) 2 – Limited Personnel Matters

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A. Privileges

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Katharine Elverum motioned to approve all privileges listed above. John Mascaro seconded.
Motion carried unanimously.

B. Behavioral Health Provider Contract-

Kathi Pape motioned to approve the behavioral health provider contract. Greg D'Amour seconded. Motion carried unanimously.

10-15-1 (H) 7 – Attorney Client Privilege/ Pending Litigation

A. Risk Report

No Action

10-15-1 (H) 9 - Public Hospital Board Meetings- Strategic and long-range business plans

A. Ovation Team Report to Board

No Action

B. Executive Dashboard

No Action

C. QAPI Plan FY25

Reported in open session.

D. Board Self-Assessment

No Action

E. Office Space

No Action

14. Other

Next Regular Governing Board meeting will be on Tuesday, October 24, 2023 at 12:00. Finance Committee will be on October 24th at 10:30. Board Quality will be on Monday, October 23rd 1:00:54

15. Adjournment

Action

JB

10/24/23

Jennifer Burns, Recording Secretary

Date

Bruce Swingle, Chairperson

Date