

RMCHCS Board of Trustees hosts first public board meeting

Written by By Rick Abasta Sun Correspondent
Friday, 05 November 2021 04:43



The Rehoboth McKinley Christian Health Care Services Board of Trustees convened at the Grace Bible Church at 222 Boulder Dr. Oct. 20 for its first public board meeting in a step toward demonstrating transparency.

In addition to the new open board meeting format, the public was also allowed to speak.

The newly-added public comment period came early in the meeting,

One businesswoman, Mary Walker, took the opportunity to point out that she moved to Gallup

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four years ago and that her business Weaving in Beauty at 233 W. Coal Ave., which attracts students from France, Australia and China to learn Navajo weaving, wanted to offer students a safe environment.

“I’m becoming very concerned that might be in jeopardy,” she told the board.

She said her students have pumped \$1 million to \$2 million into the local economy in the last few years and that she would like to continue that economic development in the future.

Speakers were each given three minutes to talk and the board did not respond directly to their comments.

One doctor who also spoke during the public comment period, suggested to the board that information about the open format and the permission to speak be clarified, and that the community be made aware of the opportunity to speak well in advance of the date of the meeting.

The CEO Report was the next item on the agenda and RMCHCS interim CEO Don Smithburg reported that Women’s Health would be reopening Oct. 22, including the women’s labor and health delivery unit.

RMCHCS is also implementing Tele-ICU in Nov., he said, expanding the hospital’s ICU capabilities.

“That’s not in lieu of or replacing any of our current providers. Our head intensivist is to augment and provide us additional capacity to support ICU needs,” he said.

Smithburg announced local resident Ron Reed would take the position of head of clinics in two weeks.

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He also mentioned that the hospital would begin purchasing products and services in bulk in order to cut costs.

“We spent the last two days for the planning and implementation of this program and it looks like we will have a \$1.5 million annual savings,” he said.

Chief Financial Officer Mary Bevier talked about the costs for traveling personnel, something the hospital has relied on during the COVID-19 pandemic.

“Our traveler rates, just for your reference, are running between \$150 to \$200 per hour, as we see all over the U.S. and New Mexico,” Bevier said. “These rates are very similar to what we have been informed that the county is paying for their jail nurses.”

She also reported that the balance sheet summary showed \$7 million.

“Three million is restricted and just under \$2 million is for outstanding payments. That leaves us with \$2 million available,” Bevier said.

Board Chair Steve McKernan responded to Bevier’s report, indicating that income was down.

“Compared to the prior year for the month of September and effectively running year to date, is that our net revenues are significantly under what they were due to census issues.”

He said the hospital has fewer patients than it had before and expenses are running significantly higher than they were at the same time a year ago, at a rate of about \$1 million per month.

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“When you put those two things together, that is creating loss, and we have really got to be able to get either the expenses down or the revenue up,” McKernan said. “Our preference would be to get the revenue up.”

Board Member Bill Lee asked if there were plans to recruit local nurses in response to the skyrocketing costs of bringing them in from outside.

Smithburg said that if local nurses were available, the hospital would love for them to work at RMCHCS.

“The fact of the matter is there is a national nursing shortage,” he said.

Hospitals large and small across N.M. and the country are utilizing outside traveling nurses, Smithburg said, noting that he received that information during his call that morning with hospital CEOs across the state.

“Every institution, whether it’s in Albuquerque or the smallest hospital in Roosevelt County, they are all using outside traveling nurses,” he said. “Unfortunately, we’re all in the same ditch.”

Patient satisfaction with the hospital was next on the agenda.

McKernan explained a little about how that data was collected.

“CMS, which is Medicare and Medicaid, requires that hospitals as part of their conditions of participation, track patient satisfaction,” McKernan said. “We get those results back from organizations in the country and largest is known as Press Ganey.”

He said patients at RMCHCS and other N.M. hospitals receive surveys on their satisfaction with

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the hospital. The data is accumulated, reported back to the hospital, which in turn, reports the data to CMS.

RMCHCS Vice President of Quality Sharon Harper explained a little more about the overall star rating which is based on how well a hospital performs across different areas, such as treating heart attacks, pneumonia, readmission rates, and safety of care. Five stars is very good.

“Press Ganey gives organizations the insights, expertise, and solutions to achieve real impact in the new era of health care,” Harper said. “For RMCHCS, the overall star rating at this point is one star. The patient survey rating is one star.”

Out of 200,000 encounters last year, RMCHCS had 67 complaints and two grievances. Ninety seven percent of the data is made up of complaints, and grievances represented three percent Harper said.

She gave a breakdown of the complaints, saying that of the 97 percent of complaints, 28 percent of them came from the busiest department at the hospital, the emergency room. The clinic accounted for 23 percent, inpatient care accounted for 20 percent, diagnostics department had eight percent, admitting business office had five percent, surgical department had two percent, lobby one percent and treatment department had one percent.

Dr. Ayodele Erinle, Chief of Staff spoke up at that point, emphasizing his involvement with hospital quality.

“Every grievance is important, regardless of who submitted that grievance,” he said. “We look at what the grievance is, and the severity of [the] grievance. There are certain things we do not want to ignore.”

“The fact that we only had two grievances for the entire year is a testimony to the high quality [of care] that the providers are doing,” Erinle said. “This does not diminish the grievance that has been stated. Each grievance is something that is not taken lightly.”

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Before the meeting adjourned, Lee offered some parting words.

“Thank you for your patience and understanding. This hospital did not get to where it is overnight,” he said. “We know that there was some severe mismanagement that took place. Community involvement is what led to the hospital being changed.”

Lee said the county decision to change the lease in turn changed how the board was structured and operated. He pointed out that the public outcry was discussed months ago and that the board has been making steps toward transparency since that time.

“We want to see the hospital do better,” Lee said. “It’s going to take time. This board will continue to be open and transparent.”

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