

Joint work session describes rollercoaster ride between county, hospital

Written by By Rick Abasta Sun Correspondent
Friday, 05 November 2021 04:44



Public comment period attracts 30 speakers

It was standing room only when persistent issues at Rehoboth McKinley Christian Health Care Services came up at a joint work session between the City of Gallup, the McKinley County Board of Commissioners, and the hospital Oct. 18.

County attorney Doug Decker began the work session with a detailed history of the relationship between McKinley County and RMCHCS, covering the lease agreement, mill levy funding, and a recent county audit that uncovered co-mingling and mismanagement of county funds.

Decker described the relationship between the county and RMCHCS as a “rollercoaster ride,” noting that he has worked for the county since 1995. He said primary issues the hospital grappled with included leasing, building and maintenance repairs, and changes to the Safety Net Care Program implemented between 2010-2014.

“Right now, we are in the third amended lease, which was negotiated and fixed a lot of the problems we learned [about] over the years,” Decker said.

At the request of the McKinley County Board of Supervisors, the hospital board composition was changed due to the need for a more responsive board to address the issues of the hospital,

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he added.

“In our perception, [a non-responsive board] allowed CEOs to run roughshod over the board with no control,” Decker said.

RMCHCS Board Chairman Steve McKernan spoke next, providing information about the board and the process for selecting members. He also talked about the importance of the non-profit status of the hospital.

McKernan said that the lease with the county is actually a function of the Hospital Funding Act. Centers for Medicare & Medicaid Services, which has licensed 5,000 hospitals nationally, and delegates states to carry out its functions via the U. S. Department of Health and Human Services.

Copies of the conditions of participation were provided to county commissioners and city councilors. The document is also available for public viewing on the RMCHCS website.

“Our hospital operates under a shared governance model,” McKernan said. “The shared governance model defines what management is supposed to do in terms of operating and managing the hospital, and what the medical staff is supposed to do.”

In addition, McKernan said the hospital adheres to the Health Care Quality Improvement Act, a federal law that defines elements in the medical staff bylaws and the operations of the hospital board to ensure the hospital qualifies and provides high quality services.

RMCHCS has a new seven member board, but only four positions are currently filled. McKernan said the hospital is actively recruiting to fill the remaining spots.

“Our very strong preference are (sic) for people from McKinley County,” he said.

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But when City Councilor Fran Palochak, Dist. 4 got her chance to speak, she challenged that statement.

“My main concern as a citizen of this town, is that there will not be health care here because of mismanagement, not caring, and having people from the outside running the hospital,” she said.

Palochak said that her goal when she became a public official and when she worked for the courts, was to home-grow professionals in Gallup.

“Because as we know from living here, not everybody wants to live here in rural Gallup, New Mexico,” Palochak continued. “When we bring outsiders, many times they will not stay.”

“They don’t find value here. They don’t find purpose to live here,” she added.

Palochak herself pointed out that she was born and raised in Gallup, leaving only to serve in the U.S. Navy and to attend state college in New Mexico.

Throughout the meeting there were a number of comments about Palochak’s daughter, a nurse, who had worked at the hospital at one time, and was no longer there.

She also made a point of addressing the staff shortage at the Women’s Health Center, which reopened Oct. 22 after being closed for nearly a month.

“There’s a national nursing shortage, it’s true,” she said. “On the same token, what are we doing locally to recruit graduates from UNM Gallup?” she asked.

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McKinley County Board of Commissioners Chairman Billy Moore, Dist. 1, followed Palochak and said the county met with RMCHCS numerous times over the last few months in an effort to keep it open for business.

“We have to have a hospital. Our community needs a hospital,” Moore said. “We have decided as a commission to make every effort we can to help improve this [hospital].”

Moore said many doctors made sacrifices years ago in order for the hospital to exist.

“That’s the point we’re at. We all have to make some sacrifices to make sure our hospital is sustainable,” he emphasized. “It’s going to take effort on everybody’s part to get through this crisis.”

RMCHCS interim CEO Don Smithburg spoke next, taking the opportunity to respond to some of the points raised by city councilors and county commissioners, beginning with the suspension of behavioral health services at the WellSpring Recovery Center.

As he has mentioned to the *Sun* in previous interviews, it is not customary for general hospitals to operate addiction and recovery centers. Smithburg said such centers are more often run by content specialists.

“The current unit was not run or managed from a medically-driven perspective,” Smithburg said. “We felt that it was necessary to partner with an entity that does nothing but addiction and recovery,” adding that the hospital expects to announce a new partnership at the end of the year.

There were legitimate patient safety concerns that factored into the decision for the new partnership as well, he said.

Smithburg said the issues with the Women’s Health Center at RMCHCS are also being

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addressed, noting that the center has now reopened.

“We said when we suspended operations that it was due to an unexpected exodus of several nurses,” he said. “This is not unusual. There is a national nursing shortage.”

“It’s very real and mostly in rural America,” he continued, adding that the nursing shortage required recruitment of outside talent.

“Since we’ve been here, I’m proud to say the first audit that came out is a clean audit and reflects a lot of change and a lot of hard work by a lot of people,” Smithburg pointed out. “The truth is that the hospital is in a lot of distress financially.”

The staffing costs for the hospital were 30 percent higher than before the COVID-19 pandemic began. Smithburg said outside talent had to be brought in to the hospital to make up for staffing shortages as the pandemic progressed.

“A lot of the staffing costs were attributed to what we call ‘travelers’ who come and work a 13-week assignment and get paid somewhere in the neighborhood of \$150 to \$180 an hour,” he said. “[That’s] compared to our nurses, on average they get \$30 to \$35 an hour.”

In the spring of 2021, the hospital cut the travelers in almost every area. The hospital also eliminated vacant positions that were hard to fill. Despite the reporting of a mass exodus of employees, Smithburg said fewer than five people were terminated due to personnel issues.

“These are very unpopular decisions. We knew it would be messy, it’s always messy,” he told the working group. “Having to let go of one person is one person too many.”

When the public comment portion of the joint work session began, 30 people stepped forward to express their grievances against the hospital.

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Dr. Marcy Richmond, a family medicine physician at RMCHCS, said she came to the hospital in 2020 as a volunteer hospitalist during the first wave of COVID-19.

“I was only there for month, but it left a lasting impression. In Aug. 2021, I returned to RMCHCS, where I work as a hospitalist, OB provider, resident faculty, and associate program director,” she said. “I love the work here, my patients, and my colleagues.”

She said her recruitment was a direct result of knowing many of the doctors and nurses that were reporting their experiences working for the hospital.

“These folks, among many other RMCHCS staff, current and former, are my heroes,” Richmond said. “So nothing is more baffling to me than an administration that is trying to drive them away rather than fighting to keep them.”

She said the current administration is marred by inertia, absence, and pettiness.

“We are asking the county to take action to save our hospital,” she said.

Another physician expressed similar sentiments.

Dr. Naman Shah, a family physician and infectious disease epidemiologist and Chief of Hospital Medicine at RMCHCS, said he first visited Gallup after being invited by friends.

“I’m speaking here today as a cry for help, at the risk of retribution and losing my job and risking my family’s well-being,” he said. “I am here with grave concerns for our patients, and as a result our ability to work according to our oaths.”

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Since arriving in Gallup and starting work at RMCHCS, Shah said the conditions at the hospital have only worsened. There are issues with staffing, equipment, and the ability to care for enough of the community.

“Worst of all has been the decline and absence of trust, compassion, and stability. We’ve heard how medical staff and board are supposed to work,” Shah said. “I will tell you the reality is different.”

Shah believes RMCHCS has lost quality doctors and nurses, not because of a national shortage, but due to frustration and disappointment.

“If you have questions, ask the nurses and doctors who left,” Shah said. “In my department alone, we have lost two of our six local doctors.”

One staffer was terminated after speaking out and the other staffer resigned from burnout. He said the replacement staff costs the hospital more, especially since they have to be flown in and out of Gallup.

“If we are so hard to recruit, then please stop driving us out,” Shah said. “The same goes for long term nurses.” He said the hospital is also at risk of losing new residents.

During the last COVID-19 surge, Shah worked for 36 consecutive hours in an effort to help keep the hospital doors open.

“Our residency director was just served a final written warning by RMCH for bringing up challenges that need to be met to keep our program viable,” he said. “My comments are not personal. These concerns and this request is professional, to give the people of this county the quality care they deserve.”

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