

**Compliance Agreement**  
**Division of Public and Behavioral Health and Valley Hospital Medical Center**

This Compliance Agreement is made and entered into effective on the 16 day of June, 2023, by, between, and among the Division of Public and Behavioral Health (hereinafter "Division") and Valley Hospital Medical Center (hereinafter "VHMC"), License #667-HQS.

**RECITALS:**

A. The goal of this compliance agreement is to enable VHMC to operate the former Desert Springs Hospital's emergency department as a temporary remote emergency department (hereinafter "TRED") as an outpatient emergency department as part of VHMC license until March 01, 2026. VHMC is located at 620 Shadow Lane, Las Vegas, Nevada 89106. The TRED is located at 2075 East Flamingo Road, Las Vegas, Nevada 89119. The TRED will be affiliated as an outpatient department of VHMC at the end of June 2023. The Desert Springs Hospital has decommissioned its inpatient services, and will maintain its emergency department to be viable as TRED for VHMC. This compliance agreement would allow (1) VHMC sufficient time to construct a new, remote emergency department (hereinafter "RED") on the former Desert Springs Hospital campus until March 01, 2026; and (2) to allow VHMC to continue to operate the TRED without having to bring all of the pre-existing and cost prohibitive remote emergency department code features to match the current requirements.

Desert Springs Hospital has been operating since 1971, until the recent decommissioning in 2023. Desert Springs has been exempt from some of the code updates in the past due to Nevada Administrative Code (NAC) 449.3154(7), which provides, "Notwithstanding any provision of this section to the contrary, a hospital which was licensed on January 1, 1999, shall be deemed to be in compliance with this section if the use of the physical space in the hospital does not change and the existing construction of the hospital does not have any deficiencies which are likely to cause serious injury, serious harm or impairment to public health and welfare." Also, this project is subject to NAC 449.312(1) "Upon a change in ownership, change of use or change in construction, a hospital shall notify the Bureau of the changes and identify all areas of noncompliance with the guidelines specified in NAC 449.3154 before the change in ownership, use or construction may take place." The emergency department transition from Desert Springs Hospital to VHMC is a "change of ownership." The transition from a hospital emergency department to become a temporary remote (hospital outpatient) emergency department is a "change of use." Desert Springs Hospital has demonstrated that it has maintained and was current with its building's fire safety features. Desert Springs Hospital has also made a number of physical changes to conform to the current Facility Guidelines Institute (FGI Guidelines), "Guidelines for Design and Construction of Hospitals (2018 Edition)," since the Division's Advisory Survey was conducted in December 2022.

Not all codes could readily be brought into compliance or were determined by the facility as very cost prohibitive. It is these codes that relief is being sought for the second requirement of this compliance agreement. Those codes and topics that cannot readily be corrected are itemized and identified below.

B. The cost prohibitive and not readily correctable FGI Guidelines deficiencies are identified and listed below.

- 1) Section 2.3-3.4.6 Accommodations for Care of Persons of Size (See Section 2.1-2.3)
  - a) Section 2.3-2.3.1.3 Patient Lift.
  - b) Section 2.3-2.3.2.2 Space Requirements and Clearances.
  - c) Section 2.3-2.3.5 Patient Toilet Room.
  - d) Section 2.3-2.3.6 Patient Bathing Facilities.
  - e) Section 2.3-2.3.7 Single Patient Examination or Treatment Room.
  - f) Section 2.3-2.3.8 Equipment and Supply Storage.
  - g) Section 2.3-2.3.9 Waiting Areas.

h) Section 2.3-2.3.10 Special Design Elements for Spaces for Care of Persons of Size.

i) Plumbing fixtures, grab bars, other furnishings, and equipment.

ii) Door openings.

2) Section 2.3-3.4.2 Single Treatment Room (See Section 2.1-3.2.2). Treatment room #19 (revised to Room #12) was undersized and not at least 120 square feet in area.

3) Section 2.3-3.4.4 Trauma Room (See Section 2.2-3.1.3.3.6(4)). The trauma room did not have all of the required support features; such as, scrub sink and a door opening that had the minimum door opening sized of 72 inches wide and 83.5 inches in height.

4) Section 2.3-3.5.2 Airborne Infection Isolation Room (AIIR) (See Section 2.1-2.4.2.4). The AIIR (Room #31) did not have a dedicated toilet room.

5) Section 2.3-3.5.4 Cardiac Observation Room (See Section 2.2-3.2.2). The facility did have a single-bed cardiac observation room (#31), but it had no patient shower.

6) Section 2.3-3.6 Imaging Services (See Section 2.2-3.4.2.2) Clearances. The Computed Tomography (CT) Scan did not have the four foot clearance at the north end of the CT Scan's gantry. There was only 32 inches of clearance.

7) Section 2.3-3.6 Imaging Services (See Table 2.1-3 (Medical Gas) Station Outlets in Hospitals). The CT Scan room only had (1) oxygen outlet and (1) vacuum outlet for their medical gas systems. The facility did not have the (1) Medical Air outlet as part of their medical gas system for this room.

8) Section 2.3-3.4.4 Trauma/Resuscitation Room (See Table 2.1-3 (Medical Gas) Station Outlets in Hospitals). The Trauma/Resuscitation Room only had (2) oxygen outlet, (2) vacuum outlet and (2) medical air outlets for their medical gas systems in this room. The facility was missing the third vacuum outlet as part of their medical gas systems for this single patient treatment room.

9) Section 2.3-6.2.1 Entrances. The TRED does not have an ambulance entry cover that spanned the distance between the entry door and the emergency vehicles to accommodate patient transportation along with the emergency medical crew. There was a small overhead cover for the ambulance hospital door entry only.

C. The State worked with Desert Springs Hospital to complete (1) their decommissioning of the hospital inpatient services, while retaining those outpatient services to be included with, and are required for, the TRED; and (2) to correct all issues that potentially and possibly could cause serious injury, serious harm or impairment to public health and welfare, along with any other identifiable and fixable issues prior to transitioning the emergency department into a TRED for VHMC. These processes and concerns have been completed. Those pre-existing issues that are "not" likely to cause serious injury, serious harm or impairment to public health and welfare, and that could not readily be resolved related to both the "Change in Ownership" and the "Change of Use," are included in this compliance agreement, as indicated above.

D. The VHMC will take responsibility for the temporary remote emergency department located on the former Desert Springs Hospital Campus, 2074 East Flamingo Road, Las Vegas, Nevada 89119 at the end of June 2023.

E. The Division intends to move forward with approaching the Nevada Board of Health to support the facility's request to have the TRED operational until March 01, 2026, to (1) allow VHMC to construct the proposed, new RED; and (2) to allow for the above noted deficiencies to continue to exist at the TRED.

F. Nevada Administrative Code (NAC) 439.280(3) provides the following: In those areas of the State which are not in a health district, or in case of a regulation enforced exclusively by the State Board of Health, the Chief Medical Officer may postpone the enforcement of and agree to a schedule for compliance with the regulation. If the period needed by such a person to comply exceeds 45 days, the schedule must be submitted to the Nevada State Board of Health for approval.

NOW, THEREFORE, it is hereby agreed as follows:

1. The Chief Medical Officer agrees to the above described temporary use of the temporary remote emergency department without requiring changes to the hospital licensure for a duration date of March 01, 2026.

**TERM OF AGREEMENT:**

2. This Agreement shall remain in effect for a period not to exceed 45 days. Since the proposed period is intended to be a longer period of approximately 33 months, this agreement will need approval by the Board of Health. If submitted to the Board of Health, and thereafter approved, the Agreement shall remain in effect until such time as the Chief Medical Officer revokes the Agreement or until VHMC comes into compliance with the above-outlined regulations, whichever is earlier.

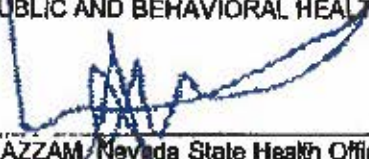
IN WITNESS WHEREOF, the parties have executed this Agreement effective the day and year first above written.

VALLEY HOSPITAL MEDICAL CENTER

Signed:   
COLLIN MCLAUGHLIN, Administrator

Date: 6/16/23

NEVADA DEPARTMENT OF HEALTH AND HUMAN SERVICES  
DIVISION OF PUBLIC AND BEHAVIORAL HEALTH

Signed:   
IHSAN AZZAM, Nevada State Health Officer

Date: June 19, 23

Approved by Board of Health on:

Signed: \_\_\_\_\_  
CODY PHINNEY, Administrator,  
Division of Public and Behavioral Health,  
Executive Officer of Board of Health

Date: \_\_\_\_\_, 23