

Bartlett Regional Hospital

3260 Hospital Drive, Juneau, Alaska 99801 907.796.8900 www.bartletthospital.org

Board of Directors

June 25, 2013

Robert Valliant Center

Called to order at 5:15 p.m.

Roll Call

Linda Thomas, President	Reed Reynolds, Vice-President (by phone)
Alex Malter, MD, Secretary	Bob Storer, Past President (by phone)
Mary Borthwick	Nancy Davis
Kristen Bomengen	Lauree Morton (by phone)
Nate Peimann, MD	

Absent

None

Also present

Chris Harff, CEO	Ken Brough, CFO
Norma Adams, HR	Dick Monkman, Esq. (by phone)
Ben Miller, DO, Chief of Staff	Karen Crane, CBJ Liaison
Jim Strader, Community Relations	

Ms. Thomas called the meeting to order at 5:15 p.m.

Ms. Thomas requested to move the Medical Staff report up on the agenda. *Approved.*

Public Participation – Ms. Thomas announced this is the time on the agenda that the public can provide comments. Ms. Thomas informed the audience that we have limited time and would like to keep it no more than five minutes if possible.

Mr. Gardner; "I've got six questions I'd like to ask to the Board and Senior Leadership. I'd like to ask the questions before they get answered."

Ms. Thomas asked him who he was and he said he lived in Juneau.

Mr. Gardner: "My first question is why is the HR Director part of Senior Leadership, to me that's a conflict of interest. My second question is how many people have left Bartlett in the last 8 months with the new Senior Leadership. My third question why is Senior Leadership still allowed to make major changes when an investigation for a hostile work environment is going on. The fourth one is why was there no response to the letter from the courier service dated 2/19/2013 by the Board or Senior Leadership. Another one is has anyone from Senior Leadership been asked to leave a hospital while working for or as a consultant for the hospital for a hostile work environment in the last 15 years and is it true Senior Leadership is it true Senior Leadership is trying to get Bartlett sold to Providence? Those are my six questions."

Ms. Thomas asked if there were any questions from the Board. Ms. Thomas said those will be taken into consideration and thanked Mr. Gardner.

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Approval of Minutes – Ms. Borthwick made a MOTION to approve the minutes from the May 28, 2013 Board of Directors meeting. Ms. Bomengen seconded the motion for the purposes of discussion. Ms. Crane stated that she was in attendance. Ms. Thomas asked to add Amy Mead and Karen Crane to the minutes for attendance purposes. Mr. Monkman stated that he had emailed a proposed change. Ms. Thomas asked if these minutes could be tabled until the July Board meeting to make the necessary edits. Ms. Bomengen made a MOTION to table the minutes until July and Ms. Borthwick seconded and it was approved.

Ms. Borthwick made a MOTION to go into executive session at 5:35 p.m., to discuss matters which are confidential by law regarding the Medical Staff report. Ms. Bomengen seconded and it was approved.

The Board came out of executive session at 5:45 p.m., no action was taken.

Meaningful Use Presentation – Martha Palicka, Clinical Systems Analyst, gave a brief overview on the status of where we are on meeting meaningful use. (Meaningful use is the set of standards defined by the Centers for Medicare & Medicaid Services (CMS) Incentive Programs that governs the use of electronic health records and allows eligible providers and hospitals to earn incentive payments by meeting specific criteria.) She reported that the project is on schedule. There has been a lot of work done. Mr. Wray registered BRH with Medicare Monday. We will be completing the Medicaid registration this week. We will begin Meaningful Use stage one attestation June 30th. We have until September 27th to complete. Our current version of Meditech 5.66 is certified as well as T-Systems and we will be using a combination of both medical records to get us to stage one.

Ms. Borthwick asked if there is a plan for potential for glitches. Ms. Palicka said part of our reason in waiting is to make sure we have really prepared for this. There has been a lot of work done and we went through all the criteria before we began. Ms. Palicka said she wasn't expecting any glitches. Stage one is the initial phase in meaningful use and by comparison, stage two and its requirements get much more stringent. Stage one is mainly getting hospitals on board with it.

Ms. Davis asked Ms. Palicka with the upgrade to Meditech, how she would characterize the user's response to any changes the upgrade brought since people were preparing for something greater. Ms. Palicka said she doesn't think people are seeing this as that type of project. They weren't expecting a big drastic change with this. There were no interruptions.

CEO Report - Ms. Harff reports

Billy Gardner, Director of Nursing, will be leading a project to improve our documentation and to implement recommendations made by Xtend. He has assembled a team and has the reviews by Xtend and the RAC audits to begin the work. He will be reaching out to the medical staff, nursing, Case Management and Quality Improvement to discuss those.

The issue of pediatric call will be discussed at the Joint Conference Committee meeting.

Administration continues to work with the Pathologists and doing some homework on that.

The Radiologist contract is up as well, so they have begun negotiations with that.

Norcal visited our facility in May to observe potential risk areas in the facility. A formal report will be sent in July.

Ms. Harff will be in meetings with CBJ to discuss other issues that came up in the Finance and Planning Committee meetings.

Dr. Peimann asked Ms. Harff if the Board was going to get a summary of the entire Xtend report. Ms. Harff said Linda Corley was in town and went over a summary, but they would like to see the report in more detail, it couldn't be done in a public forum due to personnel and confidential matters in the report.

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President's report – Linda Thomas reports

Ms. Thomas wanted to remind everyone that they should have received the Compliance Program Policy and Procedure Manual and Code of Conduct via email. The Board is being asked to attest that they have read the information by the next Board meeting. Ms. Thomas encourages everyone to do that and if they are not able to do, please let Ms. Thomas know individually. Ms. Davis asked for this information to be posted on Egnyte, which Ms. Petrie will handle.

Dr. Peimann wanted clarification on the point of having to read this information, if it's just for understanding or will we have the ability to comment on the content and/or change it. Ms. Thomas' interpretation was they could make comments and/or changes to the content for further review.

Mr. Wray responded that the intent of this was directed by CMS and Mr. Monkman mentioned that it has to do with Board oversight which is mandated.

Ms. Thomas asked if Administration could setup a couple of one hour training sessions, or individual sessions with Mr. Wray to help us work through these documents more effectively. Ms. Harff and Mr. Wray agreed to do this. Also, it was requested to move the internal deadline to August. There were no objections noted.

Executive Committee

Ms. Thomas would like the Chair of each committee to meet and discuss how this information will be reported at the Board meeting.

Planning – Dr. Peimann reports

The homework the Committee is working on includes doing more research on the pros and cons on the CAMHU and the surgery center. Also looking strategically at what the priorities are. We will also be looking and discussing and understanding the central services and how that impacts our utilization of resources.

Finance Committee – Dr. Malter reports

The attached financial statements in the packet were reviewed.

We are ahead of our budget in terms of our preliminary margin. Next month we will get the preliminary final report for the entire 12 month fiscal year. There were two items that the Finance Committee recommended to the full Board for approval. The first is a capital budget item. It's called a Glidescope. It's a piece of equipment that is used with neonatal resuscitation. This expenditure comes out of dedicated funds that came from a grant from the State funds that can't be used for other types of operations, so this won't come out of our operational bottom line.

Dr. Malter made a MOTION to approve the Glidescope not to exceed \$25,000.00. Ms. Bomengen seconded the motion and it passed by a roll call vote.

The second capital expenditure the Committee recommended to the full Board for approval was buying a new magnet to do breast MRI scans. Our current magnet is 13 years old. The purchase will come with a 10 year service agreement. This item was actually budgeted for next year, but since it stopped working, we are moving it up to this year's budget. ***Dr. Malter made a MOTION to approve the purchase of a magnet for the MRI. Ms. Bomengen seconded the motion and amended it not to exceed \$90,000. The motion passed by a roll call vote.***

There were four contracts up for renewal. They are to provide psychiatry services to the following entities;

1. Johnson Youth Center
2. Juneau Youth Services
3. JAMHI
4. Lynn Canal Counseling

Dr. Malter made a MOTION to approve the four psychiatry services contract. Ms. Bomengen seconded and they were approved by a roll call vote.

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Bylaw Committee – Ms. Borthwick hopes to report something at the July Board meeting.

BRH Foundation – Ms. Bomengen reports

The Foundation voted to fund the sexual assault training for up to 15 Emergency Room nurses at an estimated cost of \$32,000. The Foundation is planning the Seafood Gala on September 7th. The funds from this event will be dedicated to a project at the hospital. They have lost three trustees due to busy schedules and they are looking for members to serve on the Foundation Board.

Dr. Malter made a MOTION to go into executive session at 6:30 p.m., to discuss matters which are confidential by law. Dr. Peimann seconded the motion and it was approved.

The Board came out of executive session at 6:50 p.m., no action was taken.

Dr. Miller presented the Credentialing Report.

Dr. Malter made a MOTION to approve the Credentialing Report as presented. Mr. Reynolds seconded the motion and it was approved.

There was a motion that was tabled from the May Board meeting that needs to be addressed surrounding the Medical Staff on call;

Original motion:

Dr. Peimann made a MOTION that the Board will seek a solution from the medical staff or find a solution that serves best interest in patient safety and patient quality. Ms. Davis seconded. Ms. Morton would support the motion if there is a time certain. Dr. Malter would like a month to think about this before putting it into a motion. Dr. Peimann will agree to table the motion. ***Mr. Storer made a MOTION to table this motion for a month. Ms. Borthwick seconded and it was approved.***

Discussion:

Mr. Storer asked if this is a motion the Board feels capable of completing. Dr. Peimann said the Board has the ability to inform the medical staff at least of a minimum of their call schedule. Ms. Bomengen feels we are at the stage where we have already sought a solution from the Medical Staff with no solution. Ms. Bomengen would like to see an amendment to the motion that states the Board will refer this to the Joint Conference Committee to generate the options that we may be able to consider. There's been discussion and lots of things that can be done, but the Board needs more input on what those options are.

Dr. Peimann asked for his to amend his motion to say the Board will seek a solution from the Medical Staff through Joint Conference, or find a solution that serves in the best interest in patient safety and patient quality. Ms. Davis seconded the motion.

Discussion:

Dr. Malter's expressed concern that Administration has not seen a clear solution that has been strongly recommended to the Board, and therefore he's not certain that the Board will come up with a solution. He's thought it might be possible that the Board might get the advice from the Administration to leave this at status quo for a while. There are other issues other than taking a vote; we also have to be able to afford it. Dr. Ben Miller thinks the Joint Conference Committee is a good place for this discussion.

Mr. Reynolds suggested getting some advice from John Harty of the firm Harty Springer.

Ms. Davis said there is a solution, but maybe not one everybody likes. You either get cooperation or at some point, if the risk is just too great for us to take and therefore when it gets to a certain risk then we will need to call a medevac.

Dr. Malter made a MOTION to table the entire motion including the amendment, until after the Board has worked on this with Joint Conference and gotten a recommendation by Administration. Ms. Morton seconded. The motion to table failed with 3 in favor and 6 opposed.

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Dr. Peimann again asked to amend his motion to say the Board will seek a solution from the Medical Staff through Joint Conference, or find a solution that serves in the best interest in patient safety and patient quality. Ms. Davis seconded the motion. The amendment to the motion passes with 8 in favor and 1 opposed.

The July calendar was reviewed and changes were made.

Board comments -

Dr. Peimann – He would like to recognize with Administration that we are really getting into that part of the season where every day staff are very busy on Med/Surg, ER, CCU, and he appreciates everyone's time during this tough time of the year.

Dr. Malter – someone mentioned their kid was trying to do a shadow or medical rotation here, he understands there are rules for credentialing, but he'd like to ask Administration if they have heard this complaint. Is there any latitude with the credentialing rules to allow medical students to come through with a little less time in advance to go through the process like it is for doctors? If so, could we potentially work on it to make it a little easier for students? Ms. Harff said she has never heard of this being a problem. Dr. Ben Miller agrees it's a lot harder to get students through this hospital. He doesn't know if it's an Alaska law, or what. This concern should be discussed with the Credentialing committee.

Ms. Davis - It's strange to have the public present a list of questions, then say thank you very much. It sort of feels like we don't do anything with it except thank them for their comment, especially since in Planning Committee we are trying to solicit more public participation.

Dr. Peimann asked if Mr. Monkman would have some comments on these types of questions because I think there are some conflicts there and maybe that's what we just need to acknowledge and we really can't openly address these right now.

Ms. Thomas said she knows that in CBJ and Assembly, public comment always comes first and then there's always an opportunity at the end as well, but often times the assembly members address things that are brought up during a public period at the end of the meeting. Ms. Thomas asked for Mr. Monkman to address Ms. Davis' comment.

Mr. Monkman said not every public comment can be addressed by the Board, especially when you are dealing with personnel issues or other sensitive issues. If there are other comments the Board feels they need to explore further, generally what the Assembly does is ask Administration to look into the matter or to ask the best staff member to look into whatever problem that might be brought up. So it is something where you have public comment so you can hear from the public and hearing is not only having a seat, but listening to what they have to say and if there's no appropriate action or appropriate response from the Board you can make it. Sometimes you don't have an answer when it is a subject that you can't answer in public. It might not be appropriate at that time, but it could be in the future.

Dr. Malter asked if it would it be appropriate to ask Administration to give us an informal input to the six items that were brought up at the executive committee. Some of them don't have answers, but then at least we feel that we have done due diligence.

Ms. Thomas said she understands some of the questions that were asked had to do with personnel and she thinks some of them could be answered. In her inclination, that would make sense to have a response or some research come back to the Executive Committee on Mr. Gardner's questions on things we can respond to and you can work with the attorney on what we can respond to and what we can't respond to in public. She asked for general consensus from the Board to address these questions in our Executive Committee and no objection was noted.

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Ms. Morton said they are having a similar discussion at her work about public comments and there is not really a lot of guidance, either from Robert's Rule of Order or any other kind of procedural thing that guide meetings. One of the things they are doing is drafting the process for themselves. It might be something that the Hospital Board also wants to do for ourselves.

Ms. Thomas asked Ms. Morton if she would be comfortable in emailing that document to the Board members, Administration and Mr. Monkman when she has it ready so we could see if it follows CBJ rules. Ms. Morton said she would send it.

The end of the agenda was met and the meeting adjourned at 7:45 p.m.

Board Secretary