

# Bartlett Regional Hospital

## BOARD OF DIRECTORS

### Minutes

June 26, 2018

#### I. CALL TO ORDER At 5:30 p.m. by Brenda Knapp

##### ATTENDANCE

Brenda Knapp, President	Marshal Kendziorek, Vice-President
Bob Storer	Lance Stevens
Mark Johnson	Cate Buley, MD
Linda Thomas	Rosemary Hagevig

##### ABSENT

Bob Urata, MD

##### ALSO IN ATTENDANCE

Chuck Bill, CEO	Billy Gardner, CCO
Dallas Hargrave, HR	Bradley Grigg, CBHO
Joe Wanner, CFO	Jane Mores, CLO
Theresa Shanley, Chief of Staff	Maria Gladziszewski, CBJ Liaison
Megan Taylor, Executive Asst	Debbie Kesselring, CPCS

#### II. ROLL CALL

Done

#### III. APPROVE AGENDA

*Mr. Storer made a motion to approve as presented, Ms. Hagevig seconded.*

#### IV. PUBLIC PARTICIPATION

None

#### V. BOARD EDUCATION – Scott Chille

- **Security Advanced Training** – Scott Chille reviewed the security advance training and answered questions from the Board. Review included statistics on phishing and BRH vulnerability tests. Ongoing employee training is critical and not once a year. BRH meets the regulatory measures however there are areas that need to be increased. After initial tests of email security, measures were put into place to prevent potential future malicious attempts. Emails and online training modules will be used here at BRH, and accessible at home, available to employees

and the BRH BOD, for the purpose of reinforcing proper security practices. Modules are 1-2 minutes each for a total of 45 minutes. Enhancements to be added to Outlook and tests with thumb drives to be performed. A report will be sent out to Managers/Supervisors. Implementation plan will begin this week. The cost will be about \$8,000 per year to provide the education.

Ms. Thomas asked why it has taken the hospital this long to put this into effect as her organization has been doing it for two years. She also asked what the plan is to restore information if an incident occurs. Mr. Chille states there was a transitional period before he arrived, which may account for the delay, but he is settled in and working on making the necessary implementations. Information is on a cloud and/or back-up in the event information needs to be restored. Mr. Kendziorek stated that a year ago he was told that financial information/data was not being backed-up. Mr. Wanner reported that everything is being backed-up now on a file server.

## **VI. CONSENT AGENDA**

- A. May 22, 2018 Board of Directors minutes (Pending) – Minutes not available. May and June minutes will be available for review before July meeting.
- B. May Management reports (Pg. 3)

***Mr. Kendziorek made a motion to approve consent agenda as modified. Mr. Johnson seconded. Motion passed.***

Question re: Behavioral Health report: Mr. Johnson asked what the plan is for behavioral health as the report stated it has coverage through August. Mr. Grigg replied that coverage is currently in place through September with two locum tenens. Mr. Johnson clarified the interview policy for interviewing lead places. In addition, what about the crisis intervention center? Mr. Bill pulled a meeting with specific stakeholders. They are trying to get ahead of the issue with involvement of state, city and private entities.

## **VII. OLD BUSINESS**

- A. **Moss Adams project update –Joe Wanner** – They received the draft report and will be presenting at the Joint Finance meeting Tuesday, July 3, 2018 at 7:00 a.m. Mr. Kendziorek asked how “drafty” the report is – is it in a final form soon? It was suggested by CBJ legal to keep it in draft until it will be finalized based on the public meeting act. Jane Mores will look into

the issue to see if it needs to be reviewed in executive session. Ms. Knapp stated the Board should have the right to review before making the plan finalized. Ms. Hagevig asked that it be posted to the blue folder. Mr. Bill said it is the plan to be posted tomorrow. Ms. Thomas asked for a reminder as to what will be presented in a high-level overview. Mr. Bill stated that they will be presenting 3 components: Revenue stream (operational), Methodology propriety to allocate costs across the organization, and potential to improve productivity in areas the hospital might want to review and move forward. Mr. Bill said it is part of the strategic planning method.

- B. Psych Recruiting –Bradley Grigg** – We are in the process of interviewing three candidates. We will continue to recruit locum tenens using an agency to assist with the process of selecting and interviewing.

**VIII. NEW BUSINESS** (None)

**IX. MEDICAL STAFF REPORT**

Medical Staff met June 5<sup>th</sup> – routine meeting and nothing to bring forward.

6:05 p.m. ***Mr. Kendziorek made a motion to go into executive session, Mr. Johnson seconded.***

**X. EXECUTIVE SESSION I**

- A. Credentialing report (BLUE FOLDER)
- B. Patient Safety Dashboard (BLUE FOLDER)
- C. Litigation Update – Jane Mores

6:22 p.m. reconvened.

***Mr. Kendziorek made a motion to accept credentialing report, Ms. Knapp seconded.***

**XI. CEO REPORT**

- **Orthopedic coverage/recruiting** – Continue to have challenges with orthopedic coverage. There are logistical issues as locums contract for Dr. Hightower was over May 31, 2018. There is no coverage in place in July. He has to be sponsored by a physician group needing coverage or he should reinstate his contract. He has asked for Active staff membership that would be reviewed in July MSEC and the BOD. There are 5 days currently not covered. Ms. Thomas asked for input since it is an essential service. If there is no contract soon, then we will reach out to another locum agency to recruit coverage. Locums do not have clinic

hours, only provide emergency call. The Board needs to weigh if it is financially feasible to pay for a locum or to leave it uncovered. Mr. Bill said it was addressed during the recruiting committee. Mr. Johnson stated that the impact on the community and the patients is more than the few thousand dollars that it would cost to have the locum tenens. He feels the board needs to weigh in and not let the issue slide. Ms. Hagevig reported that July is a few days away and is concerned. Dr. Buley stated that the week in June was a surprise and asked for clarification. Mr. Bill reported that the schedule is out in January. We committed to provide a week of coverage per month. Somewhere in March/April Dr. Hightower was asked to do 2 weeks in May. Mr. Bill said then there would need to be coverage by JBJC in June. Dr. Schwarting sent out an email. It was reported that Dr. Schwarting was in town but not on the schedule. Dr. William Martin returned to town early and provided call midweek-on. Mr. Bill said he needs feedback for a more in depth plan. Mr. Johnson said the confusing issue is Dr. Ted Schwarting said its 13 weeks per year and Mr. Bill states he agreed to 1 week per month (12 weeks per year). Mr. Kendziorek asked for an issue paper outlining the concerns and possible recommendations for resolution of the orthopedic coverage concern. Ms. Hagevig stated that the immediate issue is coverage in July. Mr. Bill said the option is to have Dr. Hightower sign the locum tenens contract that would allow for the interim coverage. If that is not an option then he will have to jump into an emergent plan. He also stated he asked if the community can support four orthopedic surgeons, JBJC said no. Who pays for locum coverage? Ms. Knapp reiterated that Mr. Bill will pull issues together in the issue paper, coordinate with planning committee, and bring back to the Board.

- **Mental Health ED holds** - In a holding pattern. Luckily there have been beds available on MHU and safe beds. There are two rooms that have been converted into the safe beds in the ED. There was an update on the API remodel and financial investment given by the legislation; they hope to open in August 1<sup>st</sup>. In the next 12 months there will be a 20 bed unit open in Wasilla.
- **Joint Commission review** – Received a draft report. Overall survey went well. Immediate response items have been addressed and corrected. MHU went well especially after the remodel. Mr. Johnson asked for a copy of the Joint Commission report to be put in the blue folder.
- **ASHNHA activity** – Department of Health reinstated 5% cut plus inflation factor on the inpatient side that increases payment approximately \$200 per day. Outpatient rates will be increased to 53% of charges. This will

have a projected total impact of about \$1.2 million. They announced the rebasing of the rates for behavioral, which is still open to public comment, but would result in additional \$700,000, which will be an opportunity for the hospital to provide services that recently have been operating as a loss.

- **Succession Plan** – Recommended a two-step approach. The administrator on-call would be the first-line coverage. At the point the BRH BOD wants to move on, the CFO would step into being the interim CEO.

***Mr. Storer made a motion to approve proposed succession plan, Mr. Stevens seconded. Motioned passed.***

Ms. Thomas asked for clarification as to how the administrator on-call rotation works. Rose, Billy, Bradley, Joe, and Chuck rotate 24/7 coverage a week at a time. The house supervisor is also a 24/7 first responder. Mr. Gardner probably gets 80% of the calls as they are mostly clinical. The response time is 30 minutes just like physicians. Ms. Knapp states that if there is an interim CEO there would be training for that. Ms. Thomas asked about the response in the event there is a large-scale emergency incident. She asked if there is a copy of the manual that the Board could review. The house supervisor takes the role of the incident commander until the CEO arrives.

- **CFO** – There have been candidates narrowed in on. The 2<sup>nd</sup> choice from 2017 is interested in an interim (David Stob). He would begin August 8<sup>th</sup>/9<sup>th</sup> so there is overlap with Mr. Wanner. Mr. Stob will let Mr. Bill know within the week. There is another candidate who is arriving this Friday for an on-site visit. There are three levels of interview: Direct Reports, Managers/ Supervisors and Senior Leadership Team. Since Mr. Stevens will be out of town, the other candidates will be scheduled after he returns. Candidate has been CFO and senior controller. Since not making the cut last year, he has kept himself available in the event he could return. His credentials were reviewed and reported.
- **Housing First** – Jeanette Lacey Dunn reported that Housing First is going to head towards phase II. There is a good chance they will be looking to the hospital for financial involvement. The statistics of the program's success for the past 6 months, since moving into the Housing First, were reported. The impact of the program has been positive. Ms. Knapp stated she had previously been able to review some housing first programs in the lower 48. They are successful and they do work. Dr. Buley asked what phase II is but Mr. Bill was not sure.

## **XII. BREAK**

Due to time they kept moving and members could take a break if needed.

### XIII.

#### COMMITTEE REPORTS

**Finance Committee – Mr. Stevens** – They took a pause this month as a way to find a better way to review. May finances will be reviewed July 3<sup>rd</sup> at the finance committee meeting. Capital projects were discussed

- **Capital Expenditures – Joe Wanner** – action (~~Pg. 42~~) Actual action items on page 21.

Four item grouping: upgrades to hardware and 2<sup>nd</sup> phase of server rollout.

***Mr. Stevens made a motion on behalf of the finance committee for the board to approve. (Ms. Knapp stated already seconded since second member of the finance committee present as well.) Motion passed.***

Critical care unit flowsheet software is budgeted in fy19. It is expected to take three to four months to implement, and will use existing staff. If approved, it would be delivered in October 2018. Ms. Thomas made a friendly amendment for total cost not to exceed \$125,000. Lance agreed to revise the motion.

***Mr. Stevens made a motion on behalf of the finance committee for the board to approve the purchase with the cost not to exceed \$125,000. Motion passed.***

Ms. Thomas requested clarification on capital budget and \$1,000,000 rollover of unfinished projects. The master facility plan is not included.

**Governance Committee – Bob Storer-** Discussed board education at last meeting. Board member selection process. Jane revisited title 40. The plan is to have a work session tomorrow (June 27, 2018) mainly on education. No meeting in July. Will meet in August. First reading/adoption in August.

- **Board Education (Linda Thomas) (Pg. 41)** – Why are we looking at this? Do we have the time and money for education, etc? She researched other entities and states, and interviews with other board members at Providence, Central Peninsula and Ketchikan. Recommendations include: onboarding, education, and supplemental critical health care issues. Recommendations include: Delegating to the governance committee the educational responsibility to the board members, outlined in the board policy manual, developed by committee for board approval and updated on a regular basis. For example, strengthening board member orientation process through strengthening manual, assigning board mentor, 1<sup>st</sup> year requirement of online training or attending a conference, as well as additional continuing education. We do a

reasonable job but we could do a better job if we were systematic and agree upon what is improvement. Other high level recommendations are having Mr. Bill check with ASHNHA on other types of trustee's orientation, southeast region policy discussion, board self-review as to what training/ orientation, etc.

Mr. Kendziorek reported that he read it and was well written and enjoyed it. Ms. Knapp said much of the orientation training is consistent with governance training. Mr. Johnson stated he agreed with joint training that involved southeast region.

***Mr. Storer moved that the board delegate the board training to the governance committee. Mr. Johnson seconded. Motion passed.***

Tomorrow is a work session and board members can attend, however Mr. Storer stated that August meeting would be the better time to attend. Ms. Hagevig stated that Rob Allen (Administrator for Sitka community Hospital) historically put together a regional opportunity where issues that affect everyone is discussed. He would be a good resource. Dr. Joe Roth, Valley Medical Care would be another good resource.

**Recruitment Committee – Mark Johnson** – Committee met May 29<sup>th</sup> with Dr. Buley, Rosemary Hagevig, Dr. Lindy Jones, Dr. Steve Strickler, Kathy Callahan, Joe Wanner, Bradley Grigg, and Dr. John Raster were in attendance. Psychiatry, OB/GYN, Medical Oncology, Orthopedic, and Ophthalmology. Psychiatry: Mr. Grigg had nothing to add to psychiatry report. Dr. Buley recommended that having a resident rotate could be a great way to recruit psychiatrists to Alaska. A MOA and funds would need to be made. She recommends partnering with 1-2 residency programs, and 3-6 residents a year is a good number. Ophthalmology: Dr. Rob Breffeilh closing practice in July 2018. The process of finding someone to take over has been unsuccessful. In short term, Dr. Lindy Jones asked that a relationship be made with local optometrist to help in emergent issues. Mr. Bill said right now optometrists are not on the credentialing list, per the BRH Medical Staff bylaws, to provide inpatient care, and would have to work with the medical staff to take call for emergencies, but wouldn't be doing surgical intervention. Kathy and he are reaching out to local optometrist to see if they are interested in joint venture collegial actions. OB/GYN: last year the board voted to assist in recruiting. Dr. Newbury has been using a locum tenens Brenda Knapp, MD and a SEARHC provider (Dr. Linderman) to assist with coverage. He is comfortable with this. Medical oncology: Dr. Gurkamal Chatta (July 2018), Dr. Saifuddin Kasubhai is waiting for license to be issued. The plan is for providers to see patients weekly, two days per month to start. No retirement date for Dr. Paul

Weiden. Orthopedic: (Already discussed) The point is, for 24/7 coverage we need four orthopedic surgeons. We do not have that without locums. Need to continue to explore. Mr. Bill stated that Dr. Martin has confirmed with the group that he was going to try to maintain his relationship in JBJC but will be taking a administrative position in Chicago. His intent is to continue here for a while, then gone for a while, but his intent is to continue here until his daughter has completed high school in September 2021. The medical staff development plan needs to be reviewed and/or approved. Dr. Buley asked about clinic/call pertaining to Dr. Martin. Mr. Bill said that per Dr. Schwarting, Dr. Martin still plans on being a 1 FTE but it would be in blocks of time rather than ongoing.

#### **Executive Committee – Brenda Knapp**

CFO recruitment: At the last Board meeting some of Joe Wanner's direct reports wrote a letter and spoke.

Joint Commission report

Executive Session to review survey responses regarding CEO evaluation

#### **XIV. BOARD CALENDAR July:**

**Finance** (joint planning) 7:00 a.m. July 3<sup>rd</sup> to review Moss Adams draft report. (hold joint committee first for the purpose of Moss Adams, then the finance committee thereafter)

**Compliance** – Don't need both meetings, Mr. Bill to clarify

**Executive** – No need to meet in July (?), no longer regularly occurring, now as needed

**PIC** – July 11<sup>th</sup>

**Board Quality** – July 11<sup>th</sup>

**Planning** – July 16<sup>th</sup> to look at Moss Adams report/response in depth

**Board** – July 24<sup>th</sup> – Brenda out of country July 14<sup>th</sup> – August 5<sup>th</sup> – Dr. Bob Urata will be the chair of the July 24<sup>th</sup> board meeting. Ms. Hagevig will call in. Bob Storer may or may not come, may call in. Mr. Bill will verify quorum beforehand.

#### **XV. EXECUTIVE SESSION II 7:45 p.m.**

- CEO Evaluation

Reconvened at 9:14 p.m.

#### **XVI. BOARD COMMENTS AND QUESTIONS (None)**

#### **XVII. ADJOURNMENT at 9:15 p.m.**