

# Bartlett Regional Hospital

## Minutes

### BOARD OF DIRECTORS MEETING

January 22, 2018 – 5:30 p.m.

Robert F. Valliant Boardroom

#### ATTENDANCE

Brenda Knapp, Outgoing President	Bob Urata, MD, Secretary	Mark Johnson
Lance Stevens, Incoming President	Marshal Kendziorek	Deb Johnston
Rosemary Hagevig, Vice-President	Kenny Solomon-Gross	

#### ABSENT

Lindy Jones, MD

#### ALSO IN ATTENDANCE

Chuck Bill, CEO	Kevin Benson, CFO	Megan Costello, CBJ Law
Billy Gardner, CCO	Dallas Hargrave, HR Director	Don Schneider, MD, COS
Bradley Grigg, CBHO	Rose Lawhorne, Assistant CCO	Michelle Hale, CBJ Liaison
Kim McDowell, ED Director	Anita Moffitt, Executive Assistant	

**CALL TO ORDER** – The Board of Director’s meeting was called to order at 5:30 p.m. by Brenda Knapp, Outgoing Board President.

**INTRODUCTION OF NEW BOARD MEMBERS** – Ms. Knapp acknowledged the reappointment of Marshal Kendziorek to the BRH Board of Directors and introduced new board members Deborah (Deb) Johnston and Kenny Solomon-Gross. Also acknowledged as a new board member was Dr. Lindy Jones. Dr. Don Schneider was welcomed as the new Chief of Staff.

**PASSING THE GAVEL** – Outgoing Board President, Brenda Knapp passed over the gavel to Incoming Board President, Lance Stevens.

**APPROVAL OF THE AGENDA** – *Ms. Hagevig made a MOTION to approve the agenda as presented. Dr. Urata seconded and it was approved.*

**PUBLIC PARTICIPATION** – None

**BOARD EDUCATION** – Kim McDowell, Emergency Department Director presented the Emergency Department’s (ED) throughput goal and action plan of decreasing the amount of time it takes to treat a patient in the ED. The goal is to decrease the current ED length of stay by 25% by January 2020. Discussions were held regarding lab result wait times, i-Stat for bedside point of care testing and T-Systems interfacing and comparison with Meditech. Ms. McDowell also provided a brief update on the Trauma Program and reported that Dr. Gruchacz is the new Trauma Medical Director.

**CONSENT AGENDA – Mr. Kendziorek made a MOTION to approve the consent agenda as presented. Ms. Knapp seconded and it was approved.**

**OLD BUSINESS** – Mr. Bill provided an overview of where we are at in the process of entering action plans for meeting strategic planning goals into the Focus and Execute tool. Strategic objectives are:

- 1. Quality and Safety: Meet Joint Commission requirements and Alaskan and National quality and safety measures.**
  - Provide safe, quality patient care as evidenced by maintaining Joint Commission and other certifications and benchmarking against Alaskan and National quality and safety measures.
- 2. People: Create an atmosphere that enhances employee and physician satisfaction and improves our ability to recruit and retain.**
  - Create an atmosphere that enhances employee and physician satisfaction and improves our ability to recruit and retain.
- 3. Services: Develop and maintain a service portfolio that meets community needs and is sustainable.**
  - Develop and maintain a service portfolio that meets community needs and is sustainable. This includes collaborations with National, State and local agencies to maximize community benefits.
- 4. Financial: Improve net income to 3.7 Million by the end of FY2020**
  - Enhance efficiencies of current services and develop new profitable service lines and funding sources that allow us to perform at break even or better without the Rural Demonstrations Project funding (\$3.7 Million) by the end of FY2020.
- 5. Facility: Update the existing campus plan to identify major replacement needs and options for future revenue growth.**
  - Update the existing campus plan to identify major replacement needs and options for future revenue growth.
- 6. Compliance: Maintain compliance at all levels while accomplishing above goals**
  - Maintain compliance at all levels while accomplishing above goals.

Mangers will update their progress monthly. Quarterly updates will be provided to the Board by Mr. Bill.

**NEW BUSINESS** – In an effort to become more strategic during board meetings and allow the board more time to look forward, Mr. Stevens reported moving committee reports to the consent agenda is under consideration. How to make that transition needs to be determined. The process for removing an item from the consent agenda for further discussion was explained.

**Medical Staff Report** – Dr. Schneider reported that the January 8<sup>th</sup> Medical Staff meeting was business as usual. Margaret Brodie, Director of Alaska Department of Health and Social Services Division of Health Care Services was in attendance and spoke about the 72 hour rule for Medicaid documentation.

**Executive Session** – *Mr. Kendziorek made a MOTION to go into executive session to discuss the credentialing report and patient dashboards, both of which are confidential by nature and protected by*

**law. Motion approved.** The committee entered executive session at 6:15 pm and returned to regular session at 6:27 pm.

**Ms. Knapp made a MOTION to approve the credentialing report as presented. Dr. Urata seconded and it was approved.**

**CEO Report** – Mr. Bill reported that the ophthalmologist that we have been talking to about providing services in Juneau is leaving Alaska and will be unable to do so. We have a potential lead on another ophthalmologist in Tacoma interested in providing surgical services in Juneau. He will plan a trip here to meet with the local optometrists and to check out BRH’s operating room.

ASHNHA update – There is a credentialing education program coming up. Ms. Hagevig has been forwarded the information and is encouraged to attend. The legislative fly in is on February 26<sup>th</sup>. The CEO’s from skilled facilities and hospitals around the state will fly to Juneau to meet with the legislators. The governor’s budget is due to come out on February 15<sup>th</sup>. The ASHNHA board and the Alaska Medical Association are developing aggressive campaigns to counter the anticipated healthcare budget.

Mr. Bill reported that he, and Max Mertz will be out of town February 4 – 6 for the CMS hearing scheduled to take place on February 5<sup>th</sup>. There is a joint Assembly meeting with the BRH Board scheduled for 5:30 pm on March 19<sup>th</sup> in the Assembly Chambers. There was a Title 40 meeting held earlier this afternoon. The proposed changes to Title 40 will be presented to the medical staff at next month’s meeting and the results will be brought back to the Board during its February meeting. A discussion was held about a proposed bill to repeal the Certificate of Need. Discussion was also held about the impact of Dr. Hightower’s active medical staff status. Ms. Hagevig reported that the Pioneer Home system is moving ahead with its initiative to add a fourth level of care and change part of the residential area of the Anchorage Pioneer Home into a specialized program for behavioral health persons who are 65 plus years of age with complex behaviors. There is a statewide provider group working on this and if all goes well, they are hoping to have the initial group ready to admit by early next year.

## **Committee Reports**

- Planning Committee – Mr. Kendziorek reported that the Planning Committee met on December 7<sup>th</sup>. Discussed were facility planning efforts, the Crisis Stabilization grant and the Strategic Planning meeting. The next Planning Committee meeting will be held at 7:00am on Monday, January 28<sup>th</sup>. All board members are encouraged to attend if available.
- Compliance Committee – There was no meeting to report on.
- Quality Committee – The Quality Committee met on January 9<sup>th</sup>. Items from that meeting will be brought forward to the February Board meeting.
- Finance Committee – Mr. Stevens reported that the finance meeting was held on January 9<sup>th</sup>. A review of the financials shows BRH is on track. Contract labor and overtime was up. We are still seeing the benefits of the PERS forfeitures resulting from employees leaving BRH before becoming fully vested. Continuing trends are Medicare and Medicaid billings vs private insurers. We are starting to see more revenue and a leveling of expenses. We will begin to see an increase in requests for Capital purchases soon. We are continuing to evaluate the ECRI robotics surgery equipment. A conference call is scheduled to take place with ECRI on January 23<sup>rd</sup> to discuss expectations and timelines.

A discussion was held regarding Bartlett's cash on hand. It was noted that about half of that is funded depreciation that will be spent on the hospital in the future. By having it in cash, it gives a picture that is not necessarily true. It should be considered restricted funds for the purpose of the facility. Work needs to begin to categorize these funds appropriately and will be discussed at the Finance Committee meeting.

**PRESIDENT REPORT** – Mr. Stevens reported that he will meet with Mr. Bill on a regular basis to discuss hospital workings. He also discussed upcoming conferences and webinars offered by the Governance Institute. Board members are encouraged to take advantage of these offerings.

Board member committee assignments were reviewed. A discussion was held about the recruitment committee and the need for a primary care physician to be appointed to the committee to ensure balance in representation.

**Board Calendar** – The February board calendar was reviewed. Due to committee members' unavailability, the Finance Committee Meeting will be held at 7:00am on February 14<sup>th</sup>. A date for a Governance Committee meeting will be identified.

**BOARD COMMENTS AND QUESTIONS** – Ms. Hagevig welcomed the new board members.

**ADJOURNMENT** – 7:12 p.m.