

Bartlett Regional Hospital

Minutes
BOARD OF DIRECTORS MEETING
May 28, 2019 – 5:30 p.m.
Robert F. Valliant Boardroom

CALL TO ORDER – The Board of Director’s meeting was called to order at 5:30 p.m. by Rosemary Hagevig, Board Vice-President

ATTENDANCE

Rosemary Hagevig, Vice-President	Bob Urata, MD, Secretary	Brenda Knapp, Past President
Marshal Kendziorek	Mark Johnson	Lindy Jones, MD
Kenny Solomon-Gross		

ABSENT

Lance Stevens, President	Deb Johnston
--------------------------	--------------

ALSO IN ATTENDANCE

Chuck Bill, CEO	Billy Gardner, CCO	Megan Costello, CBJ Law
Dallas Hargrave, HR Director	Bradley Grigg, CBHO	Joy Neyhart, DO
Rose Lawhorne, Assistant CCO	Michelle Hale, CBJ Liaison	Sarah Hargrave, Quality Director
Jeannette Lacey, Director of Case Management		Anna Bullock, Case Manager
Anita Moffitt, Executive Assistant		

APPROVAL OF THE AGENDA – A request was made to move the Medical Staff report and Executive session ahead of the Consent Agenda and to add Governance Committee Report under New Business.

Mr. Kendziorek made a MOTION to approve the agenda as modified. Dr. Urata seconded and modified agenda was approved.

Medical Staff Report – Dr. Neyhart provided information regarding a letter of support from the medical staff requesting more plant-based food choices in the hospital cafeteria and on patient menus. Mr. Bill noted that we are working with Dietary to move forward with this request.

Executive Session – ***Dr. Urata made a MOTION to go into executive session to discuss the credentialing report and patient safety dashboard, both of which are confidential by nature and protected by law. Mr. Kendziorek seconded and motion approved.*** The committee entered executive session at 5:33 pm and returned to regular session at 5:37 pm.

Mr. Kendziorek made a MOTION to approve the credentialing report as presented. Dr. Urata seconded and it was approved.

CONSENT AGENDA – ***Dr. Urata made a MOTION to approve the consent agenda. Mr. Kendziorek seconded. The consent agenda was approved as presented.***

PUBLIC PARTICIPATION – None

BOARD EDUCATION – Sarah Hargrave and Jeannette Lacey presented the goals and actions plans for intradepartmental collaborations to improve care for multi-visit patients (MVP). 3-4% of our patients made up 15% of our visits in 2018. The goal is to decrease the average number of MVP visits to the ED by 10% by December 31, 2019. MVP are patients with 10 or more ED visits in a year; or 5 or more in a quarter; or 3 or more in a month. Identifying what is driving the utilization of ED services, developing a care plan that includes community resources and following up with patients has proven to be very effective. Monthly reports of the highest utilizers are reviewed and care plans are developed. Ms. Bullock provided examples of care plans already implemented which have resulted in reduced utilization of the ED by the patients. This is a multi-disciplinary approach of Case Management, the Quality Department, ED staff, Behavioral Health, Security, Community Navigators, SEARHC, AWARE, JAMHI, Housing First, etc. Patient information is put into a care guideline in the EDIE system for providers to access in real time. Addressing underlying issues helps get to the next level of treatment. Ms. Hale noted that CCFR will be taking over sleep off and should also be included in these collaborations. Ms. Hagevig noted that Gatekeeper Services of SE Senior Services often receive information from the postal service and cable and telephone companies that possible welfare checks are in order for some of their customers.

OLD BUSINESS:

CAMPUS PLAN UPDATE – The RFP has been awarded to Jensen Yorba Lott, Inc. Mr. Bill has a follow-up meeting scheduled for Thursday, May 30th with the architect that has been assigned the project. The plan will show us our existing infrastructure and show potential areas of construction. It will be used to help identify the domino effect of taking on other projects such as the Crisis Intervention Center, identify potential building sites and address parking issues. Mr. Kendziorek noted that the Planning Committee will be taking a more in depth look at this at the 7:00am meeting scheduled for Monday, June 3rd. He encourages all board members to attend if available. Ms. Hale initiated a conversation about the CIP process. Mr. Bill stated that this campus plan will be the foundation for future projects.

Crisis Intervention Update – Mr. Grigg reported that we are on the agenda to introduce the appropriation request to the Assembly on Monday, June 3rd for the initial \$500,000 capital money that was approved in November. The request will be heard again on June 24th. This will then allow us to move forward with the design RFP. Mr. Bill noted that the Assembly will also have the first readings to the changes to Title 40 and discussions will be held about Sleep Off changes at the June 3rd meeting.

NEW BUSINESS:

ORTHOPEDIC EQUIPMENT PURCHASE – Mr. Bill noted that a motion was made to approve the purchase of orthopedic equipment (mistakenly identified as ophthalmology equipment) for Dr. Hightower at last month's Board of Directors meeting. Because this action item had not been listed on the agenda, the purchase for the orthopedic equipment has been brought forward for approval at this meeting.

Dr. Urata made a MOTION to approve \$178,649.30 for the purchase of orthopedic equipment as recommended by the Finance Committee. Mr. Johnson seconded. There being no opposition, the motion passed.

IT HARDWARE PURCHASE – Replacement of IT hardware equipment has been budgeted for next year but a decision has been made to move this purchase up. The core servers are in need of replacement so as not to interfere with patient safety. This purchase has been reviewed and approved by the Finance Committee and falls within the spending authority of the CEO for approved budgeted items. Because of

this, it was requested that the IT hardware purchase not be listed as an action item but as information only.

OPHTHALMOLOGY EQUIPMENT PURCHASE – Mr. Bill presented a listing of Ophthalmological equipment needed to support Dr. Kopstein in establishing an Ophthalmology program. He stated that we obtained a signed contract from Dr. Kopstein last week and are working to expedite his credentials and Alaska medical license. The hope is that he will be able to begin to see patients by the end of June.

Dr. Urata made a MOTION to approve the purchase of Ophthalmology equipment for Dr. Kopstein, or any other Ophthalmologist that chooses to use it, for office and exam rooms. The amount of the purchase is not to exceed \$350,000. Mr. Johnson seconded. There being no opposition, the motion passed.

SAFETY MANAGEMENT PROGRAM – The Safety Management Program was presented for its annual evaluation review. Mr. Bill noted that Nathan Overson is the new Workforce Safety Committee Chair.

Mr. Kendziorek made a MOTION to accept the Safety Management Program. Ms. Knapp seconded. The motion was approved. Mr. Kendziorek expressed his appreciation for the report and commends the staff for the hard work.

GOVERNANCE COMMITTEE REPORT – Ms. Knapp reported that the Governance Committee met on Friday, May 24th. The two main items discussed were Board oversight of physician recruitment and affiliation options for BRH as opposed to mergers. It was agreed that we need to look very closely at the Board's oversight of the recruitment responsibility. She noted that we have received an unsolicited affiliation proposal from Virginia Mason. Providence and University of Washington were also suggested as affiliation opportunities. A more in depth discussion on these subjects will be discussed at the July 16th meeting.

A discussion was held about the Board's oversight and responsibility; is the Board meeting its due diligence responsibility, asking the right questions and receiving adequate information. Dr. Urata stated that the Board should be governed by the strategic plan. It was noted that reports from the Medical Staff, Medical Staff Quality and other subcommittee meetings should provide more information to better inform the Board as to what is going on in the hospital. Dr. Urata provided an overview of the Quality Committee's oversight processes. Ms. Hale stated that the BRH Board is here to represent the community of Juneau, not BRH. The community has the right to know what is going on at BRH. She also stated that Planning and the Strategic Plan should really look out at the 10 year horizon and adjustments be made as we go. Discussions continued about what should be reported to the Board. It was suggested that minutes from the Medical Staff meetings be included in future Board packets.

MANAGEMENT REPORTS – Ms. Hagevig expressed her appreciation for the extended information included in the management reports. Ms. Costello noted that she will have a law clerk intern working at CBJ beginning June 3rd and will accompany her to future meetings. Mr. Bill reported that an interim Finance Manager starts on June 3rd. He will fill this role until a Controller is hired.

CEO REPORT – Since we are behind schedule, Focus and Execute update will be deferred until next month. Ophthalmology updates discussed previously. Mr. Bill has a meeting with Jensen Yorba Lott scheduled to take place on Thursday to discuss the campus planning.

STRATEGIC DISCUSSION – Mr. Bill noted there is a lot of limbo with what is going on in the state. At the ASHHA Board meeting, the information received was that the legislature is still pretty set on the 5% proposed cuts across the board. Diagnosis Related Grouping (DRG) billing will not be implemented

in January. It will be pushed back until July 2020. Even though considered a long shot, discussions are taking place with the Commissioner of Finance about relief for rural hospitals struggling with the PERS obligations. Mr. Johnson expressed his opinion that the unfunded obligation to PERS should not apply to employees in Tier 4. CMS is supportive of a program that allows the state to contract for program cost rates using our cost report data. Looking at the budget implication at the federal level, the net impact to us and the changes to Medicare itself will be about a 1.9% increase over what we are currently getting. This will benefit us for outpatient services. Congressman Young's office is actively working on moving the Rural Demonstration Project forward.

PRESIDENT REPORT – None

BOARD CALENDAR – The June calendar was reviewed. No changes requested. Mr. Bill stated that the September Board meeting will need to be moved. A doodle poll will be sent out to identify a date. Mr. Bill announced that a decision was made to make some changes to the Senior Leadership Team. Effective June 2, Billy Gardner will be the COO. Rose Lawhorne will be the CNO.

BOARD COMMENTS AND QUESTIONS – Dr. Jones reiterated the request for the Quality Committee to provide more information to the Board. Mr. Solomon-Gross expressed appreciation for the details provided in the management reports. Ms. Hagevig stated that she was surprised about how many babies have been born and noted the great care she recently received in the Emergency Department.

ADJOURNMENT – 7:20 p.m.