

Bartlett Regional Hospital

Minutes

BOARD OF DIRECTORS MEETING

June 25, 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 Lance Stevens, Board President

Introductions: Ms. Costello introduced Ewan Hamilton-Short. Mr. Hamilton-Short is a law clerk intern working with Ms. Costello and CBJ Law Department for the summer. Robert Follett introduced himself as the Director of Respiratory Therapy/Cardiac Rehab/Sleep Lab. He also introduced Jacob Sitzman, coordinator of Cardiac Rehab.

ATTENDANCE

Lance Stevens, President	Rosemary Hagevig, Vice-President	Bob Urata, MD, Secretary
Brenda Knapp, Past President	Mark Johnson	Kenny Solomon-Gross
Deb Johnston	Marshal Kendziorek (via phone)	Lindy Jones, MD

ALSO IN ATTENDANCE

Chuck Bill, CEO	Kevin Benson, CFO	Billy Gardner, COO
Megan Costello, CBJ Law	Dallas Hargrave, HR Director	Bradley Grigg, CBHO
Theresa Shanley, MD	Megan Costello, CBJ Law	Robert Palmer, CBJ Law
Anita Moffitt, Executive Assistant	Rose Lawhorne, CNO (via video conference)	

APPROVAL OF THE AGENDA – *Ms. Hagevig made a MOTION to approve the agenda as written. Mr. Johnson seconded, agenda approved.*

CONSENT AGENDA – Mr. Solomon-Gross noted an error in the Board of Director minutes. An amendment to correctly identify Mr. Kendziorek instead of Ms. is to be made. **Mr. Solomon-Gross made a MOTION to approve the consent agenda with the amended May 28, 2019 Board of Director Minutes. Ms. Knapp seconded. The consent agenda was approved.**

PUBLIC PARTICIPATION – None

BOARD EDUCATION

OUTCOMES IN CARDIAC REHAB - Jacob Sitzman presented the goals and action plans for the Cardiac Rehabilitation Program (CRP). Correlation between peak functional capacity and morbidity and mortality is very strong so the goal of the CRP is to improve outcomes in functional capacity, optimal blood pressure control, tobacco use intervention, depression, lipids and hemoglobin A1c. An overview of the data collection and analysis, change management, and activity summary was provided. Individualized treatment plans that include positive reinforcement, patient/family centered care, education, proper exercise programming, an enjoyable atmosphere and listening to the patients are to be used to achieve these goals. Dr. Jones invited Mr. Sitzman to speak with him, Case Management and the Emergency Room staff to help develop a plan to encourage

patients to obtain referrals from primary care physicians and to participate in cardiac rehabilitation. Question and answer session was held.

CONFLICT OF INTEREST – Robert Palmer stated that as part of CBJ, BRH and its Board of Directors (BOD) are subject to the same ordinances as CBJ, including conflict of interest. Conflict of interest is also outlined in the Board Bylaws. As municipal officers, board members are prohibited from using their position to receive personal or financial gains. Mr. Palmer provided an overview of the standards and penalties pertaining to conflict of interest and provided several examples. If uncertain if a conflict of interest exists, BOD members are advised to seek counsel from CBJ law. Board members must declare conflict of interest as well as potential conflict of interest. A ruling will be made as to whether the board member may participate in discussions and decisions of the matter under consideration. As long as there is a declaration of potential conflict of interest, there is no liability. Mr. Palmer confirmed that the same rules apply to the medical staff. Dr. Urata requested that Mr. Palmer attend a meeting to speak to the medical staff about conflict of interest.

Medical Staff Report – Dr. Shanley reported that the May 7th Medical Staff meeting minutes in the packet give a good review of what’s been going on. There was nothing remarkable at the June 4th meeting. Minutes from that meeting will be in the July board packet.

Executive Session – *Mr. Solomon-Gross made a MOTION to go into executive session to discuss the credentialing report, patient safety dashboard and CEO evaluation, all of which are confidential by nature and protected by law. Ms. Hagevig seconded and motion approved.* The committee entered executive session at 6:14 pm and returned to regular session at 6:45 pm. Mr. Kendziorek left the meeting at the conclusion of the executive session.

Mr. Solomon-Gross made a MOTION to approve the credentialing report as presented. Ms. Hagevig seconded and it was approved.

Mr. Stevens congratulated Mr. Gardner on his new role as Chief Operations Officer (COO) and Ms. Lawhorne on her new role as Chief Nursing Officer (CNO).

OLD BUSINESS:

CAMPUS PLAN UPDATE – Jensen Yorba Lott, now called Jensen Yorba Wall (JYW), has been hired to update the campus plan. Mr. Bill has been working with them to finalize the contract for services. JYW is to begin work on July 1st and has a 90 day completion period. Not included in the initial bid but added to the contract, is for JYW to conduct an analysis to stress the existing facility to see if there is capacity to add stories up on the existing hospital. This raises the cost of services to \$88,000, an increase of \$20,000. An update meeting will be scheduled for the Planning Committee when JYW is about halfway through the process. The final product will be presented to the Planning Committee and then to the BOD as a whole for the board’s adoption. Each department will provide input for the campus plan.

CRISIS INTERVENTION UPDATE – Mr. Grigg reported that he met with our primary potential capital funders, the Mental Health Trust, Premera and the Rasmuson Foundation. He learned that the Mental Health Trust and Premera are taking their final recommended funding amounts to their boards for approval. The Rasmuson Foundation grant cycle is set to open July 1, 2019 and anticipated funding will be November 2019. A letter of interest to the Rasmuson Foundation has been submitted. The CBJ

Assembly had no objections to the appropriation request heard at last night's meeting. The final Crisis Stabilization Design RFP will be posted by June 28th.

SWING BED UPDATE – Mr. Benson provided an overview of a whitepaper included in the packet. Patients that are not sick enough to qualify for acute care but are not well enough to go home must to be placed in a in a skilled nursing facility. This usually means to a community outside of Juneau, away from their friends and families. A swing bed program would reduce or eliminate that need. An evaluation was conducted and it has been determined that a swing bed program appears to be financially viable assuming the Rural Demonstration Project continues. A recommendation was made to proceed with the implementation of a swing bed program effective in the 4th quarter of FY2020. Discussions were held about Medicare and Medicaid reimbursements as well as bed capacity.

ROBOTICS UPDATE – Mr. Benson reported on the feedback received during a visit to Central Peninsula Hospital. There had been the same concerns that BRH has about the robotics program but Central Peninsula Hospital reports that they are happy with the implementation and operation of the program. The main benefits they see are shorter patient recovery times offering the latest in technology and for physician recruitment.

NEW BUSINESS – None

MANAGEMENT REPORTS – In addition to the written reports included in the packet; Ms. Costello reported that the first reading of Title 40 was held June 24th and will go for public hearing on July 24th. Mr. Gardner noted that the iStat time line needs to be revised. The go-live will be planned for the end of July to early August. Mr. Grigg reported that an MOA was finalized for BRH to provide services to Petersburg psychiatric patients. Services are to be initiated in the next two to three weeks. The vast majority of the services will be done via telemedicine, however, BRH staff may be onsite in Petersburg to provide initial assessments up to 3 days a month.

CEO REPORT – Mr. Bill reported that the Division of Licensing has confirmed all of Dr. Kopstein's documents have been received and his license should be processed next week. There is a 6 week lead time needed for equipment to arrive. This postpones patient clinics until August. He also reported that the Assembly had no questions regarding Title 40 at the Assembly meeting last night so it will move forward. The appropriation of the \$500,000 Crisis Intervention funds was approved without comment. Mr. Bill and Mr. Benson met with Donna Steward, Deputy Commissioner of DHSS about the certified public expenditure process.

We have begun getting patient complaints about not being able to get opioids from the Emergency Department. Dr. Jones provided an overview of the Alaska Emergency Department Opioid and Controlled Substances Prescribing Guidelines adopted by Emergency providers in the State of Alaska.

Mr. Bill noted that board member BRH issued iPads are to be replaced. The new iPads will have the Nasdaq Boardvantage Portal as well as Zoom Meeting applications loaded on them before distribution. Mr. Johnson stated the importance of having prior studies/reports currently available in Egnyte, put into the new board portal and readily available. The most recent studies, as well as all documents uploaded will be available in the portal for a rolling one year period. A master listing of studies/reports will also be in the portal. Documents on the master listing and no longer available in the current rolling year period will be made available upon request.

STRATEGIC DISCUSSION – Mr. Bill noted that the state budget is not finalized and federal budget implications have not changed. We have received notice that we will get a 1.7% bump for the quality of care that we provide for Medicare patients. This means that we will get 1.7% less from the Rural Demonstration Project. Deputy Commissioner Steward had said we can expect a 5% cut in non-behavioral inpatient reimbursements.

PRESIDENT REPORT – Mr. Stevens thanked the Executive Committee and Mr. Hargrave for the work on the CEO evaluation. He also thanked the rest of the board members for completing the survey. He requests that board members send him their questions and recommendations as soon as possible. He also expressed his appreciation for the feedback received from the recent employee survey. The overall results were pretty positive. Leadership is to be proactive in addressing areas of concern. Mr. Bill stated that employee surveys will be conducted annually.

BOARD CALENDAR – The July calendar was reviewed. No changes requested. Ms. Hagevig will participate in the July Board meeting via zoom meeting. Based on the feedback regarding the CEO evaluation, an Executive Committee meeting may possibly be scheduled to take place on July 15th.

BOARD COMMENTS AND QUESTIONS – None

ADJOURNMENT – 7:41 p.m.