

Bartlett Regional Hospital

Minutes

BOARD OF DIRECTORS MEETING

July 23, 2019 – 5:30 p.m.

Robert F. Valliant Boardroom

CALL TO ORDER – The Board of Director’s meeting was called to order at 5:32 p.m. by Lance Stevens, Board President

ATTENDANCE

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

ALSO IN ATTENDANCE

Chuck Bill, CEO	Kevin Benson, CFO	Billy Gardner, COO
Dallas Hargrave, HR Director	Bradley Grigg, CBHO	Don Schneider, MD, COS
Scott Chille, IT Director	Jane Johnson, Billing Supervisor	Linda Beckner, Fiscal Tech
Anita Moffitt, Executive Assistant	Michelle Hale, CBJ Liaison	

ATTENDEES VIA ZOOM VIDEO CONFERENCE

Megan Costello, CBJ Law Rose Lawhorne, CNO

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

PUBLIC PARTICIPATION – Community member, Dennis Harris introduced himself and expressed frustration for having to fill out registration forms for repeat lab visits scheduled 10-14 days apart. It’s very time consuming for patients and staff since the document is to be scanned and disposed of. He suggested providing patients with identification cards with scan bars and obtaining verbal verification that information is accurate. After Mr. Harris’ departure, Ms. Hale acknowledged that this was a good observation. This topic had been discussed at the Governance Institute’s Leadership conference and good suggestions had been made regarding the use of electronic capabilities to address this issue.

CONSENT AGENDA – Mr. Johnson noted incorrect spelling of Rasmuson Foundation in the Board of Director minutes and CBHO report. *MOTION by Mr. Johnson to approve the consent agenda with the corrected spelling of Rasmuson. Mr. Solomon-Gross seconded. Consent agenda approved.*

BOARD EDUCATION

AETNA REFUND PROCESS – Jane Johnson and Linda Beckner reported that a review of Aetna’s credit balance showed opportunity for improvement in Patient Financial Services’ (PFS) refund process. They then highlighted the goals, data analysis and action plans for improving PFS’ refund process. In the last 3 months, Aetna refund checks have dropped from 30 to 7. The goal is set to have 0 refund checks by December 31, 2019.

IT INFRASTRUCTURE PLAN – Mr. Chille reported that we have a large scale IT infrastructure change due. Our current system storage is in various stages of life cycle replacement, takes up lots of space and power, generates a lot of heat, has increasing operating expense support costs and has a lack of redundancy. Future needs demand a refresh and VxBLOCK is the proposed solution to meet our needs. It will decrease our physical footprint from 6 racks to 2, decrease electrical load and reduce overall heat output, 5 year maintenance is included in the purchase so will have decreased operation expense costs and manageable capital expense increases as storage and computer capacity demands occur. VxBLOCK will blend environments and be able to share computer storage, support and resources across each environment. It will provide better redundancy and be able to reduce downtime impact on most systems. The cost benefit analysis reflects a \$2.3 Million investment in hardware, approximately \$110,000 in migration of PACS data and \$45,000 in migration of Meditech data. Total projected benefits is a savings of \$1.1 Million over the 5 year investment. Information was provided about alternative solutions that had been reviewed and justification provided for the conclusion made. The purchase has been approved in the capital budget. In response to Dr. Urata’s query as to the flexibility of VxBLOCK to accommodate a different system in the future, Mr. Chille stated that it would depend on the system. The VxBLOCK is a validated solution for Epic, Meditech and Cerner at this time. Mr. Kendziorek expressed his support of this solution. Clarification was provided regarding the maintenance agreement and it was noted that replacement hardware components will be readily accessible via Reliable Transfer.

Medical Staff Report – Dr. Schneider noted the June 4th Medical Staff meeting minutes in the packet. He reported the following were discussed at the July 2nd meeting: 24 hour pharmacy is up and running, CCFR running the sleep off program and the Emergency Department’s concerns regarding this transition, point of care ultrasounds, Credentials Committee developing criteria to allow privileges in robotic surgeries in case we get a robotics program at BRH and iStat is to go live in August. A discussion was held regarding the Emergency Department’s concerns about sleep off and the actions being taken to address them. Mr. Bill noted that in response to the board’s request for more information, Medical Staff Quality Improvement will provide a monthly dashboard report to the Chief of Staff for board reporting purposes.

Executive Session – Mr. Stevens noted changes to the language to be used when going into and coming out of Executive Session. ***Motion made by Mr. Kendziorek to recess into executive session to discuss several matters:***

- *Those which by law, municipal charter, or ordinance are required to be confidential or involve consideration of records that are not subject to public disclosure, specifically the patient safety dashboard, the confidential chief of staff report, and the credentialing report.*

And

- *To discuss possible BRH litigation, specifically a candid discussion of the facts and litigation strategies with the BRH attorney. (Unnecessary staff and Medical Chief of staff are excused from this portion of the session.)*

And

- *To discuss subjects that may tend to prejudice the reputation and character of a person, provided the person may request a public discussion, specifically, the CEO evaluation. (Staff and CEO and Medical Chief of Staff are excused from this section of the session, but may be called in to answer question as appropriate.)*

Mr. Johnson seconded. Motion approved. The committee entered executive session at 6:10 pm and returned to regular session at 7:03 pm.

- A. Credentialing report (BLUE FOLDER): ***Motion by Ms. Knapp to approve the credentialing recommendations. Dr. Urata seconded. Credentialing recommendations approved.***
- B. Confidential Chief of Staff Report (BLUE FOLDER): No action to be taken. The Board reviewed the confidential chief of staff report.
- C. Patient Safety Dashboard (BLUE FOLDER): No action to be taken. The Board reviewed the Patient Safety Dashboard.
- D. Legal and Litigation Review: The Board provided direction to BRH attorney regarding litigation strategies.
- E. CEO Evaluation review (BLUE FOLDER): ***Motion by Ms. Knapp to continue employing Charles Bill as the CEO of the Hospital, with his pay to be increased by 1% and a list of goals to be provided. Roll call vote taken. Motion passed 8 to 1 with Mr. Johnson being only member opposed.***

OLD BUSINESS:

CAMPUS PLAN UPDATE – Mr. Bill provided an overview of the proposed project schedule from Jensen Yorba Wall (JYW) included in the packet. Managers have already begun responding to questionnaires regarding their departments. Meetings have been scheduled for JYW to meet with senior leaders and department managers to allow further discussions regarding future needs to be considered. Medical Staff input will also be sought. The plan will come back to the Planning Committee and to the Board before its finalized. The completed plan will be used to help guide us at our annual Strategic Planning meeting. Mr. Kendziorek is pleased with the details outlining the project schedule.

CRISIS INTERVENTION UPDATE – Mr. Grigg reported that the design RFP posted yesterday. A pre-proposal meeting is scheduled to take place July 29th. We anticipate hearing from the Alaska Mental Health Trust on or before July 31st, Premera on or before August 10th and the Rasmuson Foundation in November regarding Capital Grant Funding. The Mental Health Trust and Premera funding would be FY20 capital dollars. Rasmuson funding would be FY21 capital dollars. Dr. Urata suggested looking into the Murdock Trust as a possible funding source. Mr. Bill confirmed a 1st floor parking garage is to be included in the designs as an option to be considered.

NEW BUSINESS:

STATE BUDGET – Mr. Bill noted there is not much to report as of this afternoon. He gave a brief overview of the latest status and expressed concern for the incredible impact proposed cuts to the State, the economy and the loss of insured patients would have on BRH. He stated that when we know what the budget will look like, we may want to have a special meeting to strategize. A brief discussion was held about PERS liability.

LEVEL IV TRAUMA HOSPITAL DESIGNATION RESOLUTION – BRH has submitted a request for a verification site visit relative to Level IV trauma facility capability to DHSS. The preferred time frame for the surveyors visit would be between November 10 and December 15. Designation of facilities as Level IV trauma centers are made by the State of Alaska based on recommendations from the verification surveyors and the Board of Directors must resolve to provide the resources necessary to achieve and sustain a level IV trauma hospital designation. In response to Mr. Johnson's questioning if BRH has considered adding a pediatric facility recognition, Ms. Lawhorne stated it has been and discussions are taking place. A discussion was held about physician champions for Level IV designation. ***Motion by Mr. Kendziorek to adopt the Level IV Trauma Hospital Designation resolution. Dr. Urata seconded. Motion passed.***

ANESTHESIOLOGY EQUIPMENT PURCHASE – ***Motion by Dr. Urata to approve the Finance Committee's request for \$281,000 to update our anesthesia equipment.*** The quote is included in the packet and had been approved by the Finance Committee with no objections. ***Ms. Hagevig seconded. Motion passed.***

MANAGEMENT REPORTS – No questions regarding management reports included in the packet. Mr. Johnson commented that the reports are getting better and better. Ms. Hagevig agreed.

CEO REPORT – Mr. Bill reported the following: As a response to the recent survey conducted, the management reports are to be included in the Bartlett Buzz and in the monthly Medical Staff packets. Dr. Kopstein was here July 18-20 to meet with Optometrists, clinic and OR staff and to make sure we have processes, equipment and supplies in place for him. He will begin to see patients in clinic on August 29, in the operating room on August 30 and surgical post-ops and clinic visits on August 31. For now, he will provide services 3 days a month with a future goal to be here full time. Dr. Jones noted that it will be a new revolution of eye care in Juneau and he is very excited about it.

FOCUS AND EXECUTE UPDATE – Mr. Bill presented an overview of Focus and Execute goal number 4, the finance plan. We are about 77% complete in the improved revenue cycle practices. Mr. Benson identified some of the projects implemented to accomplish this. A discussion was held about staffing benchmarks and how we do that with our uniqueness.

Mr. Bill reported that Title 40 was approved unanimously by the Assembly at last night's meeting. Dr. Urata commented that we need to be aware of unforeseen circumstances to private practitioners in our community as a result of this. Mr. Bill noted that he will be the presenter at the Chamber meeting on August 1. He reported that the status of the injunction filed by ASHNHA against the rate decreases from DHSS is that the state has moved for summary judgement to dismiss. The hearing is scheduled for August 14. Mr. Bill will keep the board updated. A preliminary report has been received for the healthcare workforce analysis recently conducted. The final report is to be given at the annual Southeast Conference in Sitka scheduled to take place in September. One takeaway from the preliminary report is the prediction that 500 new nurses will be needed in SE Alaska over the next 5 years.

STRATEGIC DISCUSSION – Mr. Bill provided in depth information about the roles of the COO and the CNO. He also explained how information is communicated between him and the rest of the senior leadership team.

PRESIDENT REPORT – Mr. Stevens reported that he had met with Rorie Watt, City Manager and Mila Cosgrove, Deputy City Manager to provide updates on the CEO evaluation process. Mr. Watt was very complimentary in the way Mr. Bill has interacted with the city portion of his job and appreciates the strategic approach to campus planning and integrating that into the CIP process. Ms. Cosgrove identified that leadership is not addressed in our CEO review process and we may want to consider adding it. Mr. Stevens said we may also want to consider a board review process. He then shared his appreciation for the ED department and the difficult job they have. He strongly encourages that in addition to taking care of their patients, they use the resources available to take care of themselves.

BOARD CALENDAR – August calendar reviewed. No changes requested. Ms. Knapp noted the Governance meeting on August 12 has one single agenda item, Affiliation Analysis RFP. She encouraged board members to provide input regarding the information to be included in the RFP and to attend the meeting if available.

BOARD COMMENTS AND QUESTIONS – Mr. Johnson would like to know how things are going with Meditech since the system upgrade. Did the costs exceed our expectations and what can it do or not do that some of the other systems can do? This information is to be provided at a future meeting.

ADJOURNMENT – 7:50 p.m.