

Bartlett Regional Hospital

Minutes
BOARD OF DIRECTORS MEETING
July 28, 2020 – 5:30 p.m.
Zoom videoconference

CALL TO ORDER – The Board of Director’s meeting was called to order at 5:34 p.m. by Lance Stevens, Board President

BOARD MEMBERS PRESENT

Lance Stevens, President	Rosemary Hagevig, Vice President	Brenda Knapp
Kenny Solomon-Gross – Secretary	Mark Johnson	Marshal Kendziorek
Deb Johnston	Iola Young	Lindy Jones, MD

ALSO PRESENT

Chuck Bill, CEO	Kevin Benson, CFO	Billy Gardner, COO
Bradley Grigg, CBHO	Dallas Hargrave, HR Director	Rose Lawhorne, CNO
Megan Costello, CLO	Joy Neyhart, DO, COS	Don Haberber
Anita Moffitt, Executive Assistant		

APPROVAL OF THE AGENDA – *MOTION by Ms. Hagevig to approve the agenda as presented. Mr. Kendziorek seconded. Agenda approved.*

PUBLIC PARTICIPATION – Don Haberber, Community Coordinator for the Juneau Reentry Coalition stated the mission of the Coalition is to promote public safety by identifying and implementing strategies that increase the well-being of justice-involved individuals within the community and reduces the likelihood of recidivism. He noted Behavioral Health care services are a significant part of a successful reentry strategy for many and expressed frustration in obtaining information about these services provided by BRH and Rainforest Recovery Center. He would like to see a Rainforest Recovery Center prospectus that provides a summary of the new and improved activity center that describes in a short, succinct manner, new improvements to addiction treatment and services and to behavioral health care services, improvements to access to services, bed and staff increases, crisis intervention improvements and improved hours of operations. In other words, this document should describe where we are going with our RRC investment. It would be helpful to him in talking with other community members and coalitions about the advancements that Juneau is making and to communicate to reentrants as they are transitioning back into the community. Mr. Bill noted that he and Mr. Grigg would make this happen.

CONSENT AGENDA – *MOTION by Ms. Hagevig to approve the consent agenda as presented. Mr. Kendziorek seconded. Consent agenda approved.*

NEW BUSINESS - None

Medical Staff Report – Dr. Neyhart noted the credentialing report and the minutes from the July 7 Medical Staff Meeting are in the executive session of the packet. She inquired whether there was something specific the Board would like her to report on. It was clarified that this item is listed on the agenda to allow time for the medical staff to discuss any priorities that they want to make the board aware of, any capital needs that they are endorsing, etc.

COMMITTEE REPORTS:

Physician Recruitment Committee Meeting – Draft minutes from the June 24th meeting are in the packet. Mr. Johnson noted the committee did recommend recruiting another general surgeon and are looking at anesthesiology and oncology coverage.

Finance Committee Meeting – Ms. Johnston noted the July 10th draft meeting minutes are in the packet. Mr. Bill reported that BRH has applied for the latest round of CARES ACT funding. BRH, the only Alaska hospital to receive additional funding, received \$5 Million in July to offset lost revenues due to COVID. Some of it has been applied to the month of June and the rest will be applied to future lost revenues. BRH has applied for \$1 Million from the Alaska Community Foundation for loss of revenue to Rainforest Recovery Center and is in the process of applying for FEMA funding to help reimburse costs associated with COVID.

Executive Committee Meeting – Draft minutes from the July 13th meeting are in the packet. The committee met to discuss the CEO evaluation and compensation. ***MOTION by Ms. Hagevig to accept the CEO evaluation as recommended by the Executive Committee. Mr. Solomon-Gross seconded.*** There being no discussion or objection, ***CEO evaluation accepted.***

Board Quality Meeting – Ms. Hagevig noted the draft minutes from the July 15th meeting are in the packet and accurately reflect the content of the meeting. The Quality Committee has identified some board education opportunities to take place in the future. She stated that James Caldwell, Director of Quality will really be missed.

Board Compliance Meeting – Draft minutes from the July 21st meeting are in the packet. Mr. Kendziorek encourages all board members to read the *Evaluation of Corporate Compliance Programs* document from the Department of Justice. It defines what we need to do and why compliance is so important, the need for training, what is meant by compliance and what is meant by audit.

Governance Committee Meeting – Draft minutes of the July 21st meeting are in the packet. Ms. Knapp noted there is also a draft revision of the bylaws included in the packet. The Governance Committee has worked on these revisions for about three months with input from board members and the senior leadership team. Ms. Costello clarified that these revisions are presented for review and discussion only at tonight's meeting and are to be presented for adoption at next month's board meeting. Mr. Johnson initiated a conversation about a change to section 154 – Committee Functions. He and Mr. Kendziorek expressed objections to the removal of *only for a term of one year* under the Executive Committee section. The need for institutional knowledge and continuity was discussed. Different options of allowing the past president to serve on and advise the committee were presented. Mr. Bill noted committee participation is extremely important, however, the board chair has a broader responsibility and meets with the CEO on a regular basis and has a deeper knowledge base than most of the board members do. This is an important distinction to consider as this moves forward. These bylaw revisions will be an action item put forward for a vote at next month's board meeting. If the prevailing vote is at least 6 board members approving, the bylaw revisions will move forward to the Assembly for approval and resolution.

MANAGEMENT REPORTS:

CNO report – At the request of Ms. Young, Ms. Lawhorne provided a synopsis of the PPE and mock code education for the emergency department physicians and nurses. These mock codes ensure that all processes are ironed out and everyone gets to practice providing advanced life support on a mock COVID positive patient. Mr. Solomon-Gross requested more information about the fetal demise counseling

project. Ms. Lawhorne identified coordinated efforts to meet the physical and emotional needs of patients after a fetal demise. She stated that stress debriefing and counseling opportunities are available for staff during these difficult times as well.

COO report – Ms. Young requested further information on the Dual-energy X-ray absorptiometry (DXA) and how it interfaces with the providers in the community that are providing DEXA screening. The DXA is used for bone density scanning and these services will be advertised in the community. DXA is helpful in diagnosing osteoporosis and bone issues and can also provide body fat percentages. Valley Medical and Southeast Medical Clinics already offer these service to their patients. Mr. Johnson requested that acronyms not be used without identifying what they stand for. Mr. Gardner will research whether SEARHC will use these services at BRH. Mr. Bill noted that this DXA machine has more capabilities than machines currently in the local clinics.

CEO REPORT – Mr. Bill reported that a new Gynecologist will be joining Dr. Newbury’s practice in September. Dr. Newbury has expressed a desire to move into the larger space currently occupied by Bartlett Outpatient Psychiatric Services (BOPS) when the space is vacated. If not a viable option, he may have to look for space off campus to meet his needs. BRH did help with recruitment of new provider. Dr. Saltzman has indicated that he plans on staying in Juneau and will maintain his current lease set to expire in about 2 years. Mr. Bill has had a series of meeting with the anesthesiologists to talk about what has been learned from COVID, what the challenges in having all anesthesiologists remote are, and conveying the interest of having at least a couple of anesthesia providers living full time in Juneau. Dr. Chang has purchased a house in Juneau and plans to move here full time in the fall. Dr. Powers has indicated that he intends to buy a condo and move up here full time as well. This is a significant improvement in the stability of our anesthesia operation. Discussions are also being held about whether the anesthesiologists could form a group that we could contract with for services and that would allow them to become in network providers for AETNA and Premera. Surprise billing from the anesthesiologists has been cited as a reason for sending patients out of town for surgeries. Mr. Bill seconded Ms. Hagevig’s statement about missing Quality Director, James Caldwell. He was the right person at the right time to help us with COVID. He brought a lot of experience and knowledge to the table. We have tentative acceptance of the Quality Director position by Gail Moorehead, Director of Education. She has been closely involved with the last four Quality Directors and will bring a lot of stability and skill sets to the table. Mr. Caldwell will continue to be a resource to her. In response to Mr. Johnson’s request for an update for the plans for local testing capabilities, Mr. Bill reported that there is a community task force organized through the Unified Incident Command through CBJ that is tasked with defining what our options are, funding and challenges we will face to make this happen. BRH currently has two four channel Cepheid machines. If we purchase two 16 channel Cepheid machines, we would be able to process up to a thousand tests a day, IF we could get the test kits. The test kits are still being rationed at this time. There are two other machine options being looked at by the task force. Both are bigger, more complex, require more staffing but have less requirements for specific test kits and can use the basic reagents. All three units have been ordered to get us on the wait list. Payment is not due until we actually accept the unit, allowing us time to make a decision about which to choose. Funding and ordering is going through CBJ, not BRH. This task force meets every Monday for updates and to keep the ball rolling. Ms. Hagevig noted that the state is involved in putting together a state wide strategy for testing but there is a question as to whether the state will continue paying for testing due to lack of funding. The business community, mining, fishing and tourism industries, are very interested in moving forward with local testing capabilities. She stated that Juneau really needs to step forward with some kind of a system that absolutely precludes any interruption of the legislature to conduct state business in Juneau. Mr. Kendziorek initiated a discussion about PCR machines and if they were still being considered. He expressed a need for a home harmless agreement so BRH is not responsible if something goes wrong. Mr. Bill and Mr. Gardner provided an update on supply

usage and supplies on hand at BRH. Dr. Jones expressed his fear of relying on Cepheid tests due to limited test kits. He is very supportive of the hospital and our community to control its own destiny for testing and this requires PCR test machines. Ms. Hagevig noted that the task force had identified a machine called Panther. This machine has a lot more applications that could meet our immediate needs for COVID. A purchase order has been submitted as a place holder. We would not be able to get any of the identified testing machines until sometime between November and January. Mr. Bill reported that BRH has had 2 employees test positive for COVID. Both were exposed outside of the hospital. The first one is fully recovered. The second one is in quarantine. Dr. Jones stated that he thinks COVID is going to be the new normal. As a board, we need to think about how we change our facility plans to make the adjustments we need for the new normal and make them work better for our new flow. Mr. Kendziorek will list this as an agenda item for the next Planning Committee meeting and it will be discussed at Strategic Planning retreat.

PRESIDENT REPORT – Mr. Stevens noted the Strategic Planning retreat is scheduled to take place on September 19th at 9:00am. This will be held in person and via Zoom. Please let Ms. Moffitt know if you plan to participate via Zoom. The September Governance Institute’s Leadership conference is now scheduled to take place virtually on September 14th and 15th. Agendas and access information to be provided about a week before the conference. There are several board members registered to attend the Leadership Conference to be held in Arizona November 12th – 14th. If you plan to attend but have not yet registered, please let Ms. Moffitt know so she can make those registrations. Ms. Moffitt is going to send a poll to board members to identify a date and time to conduct the annual Board Compliance training. Make sure to respond when you receive it.

BOARD CALENDAR – August calendar reviewed. Mr. Bill will be out of office the first week of August. Mr. Stevens will be out of town the first two weeks of August. Finance Committee will meet at 12:00pm on Friday, August 21st. Planning Committee will meet at 7:00am, Tuesday, August 18. The Board of Directors will meet at 5:30pm on Tuesday, August 25th. A Governance Committee meeting will be scheduled to take place in September. Ms. Knapp requests that Committee and all board members look at the policy manual prior to that to identify needed changes.

BOARD COMMENTS AND QUESTIONS – None

Executive Session – *Motion by Mr. Kendziorek to recess into executive session as written in the agenda 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 credentialing report, Medical Staff meeting and the patient safety dashboard.*
And
- *To discuss decision and litigation strategies with the BRH attorney on the PRRB appeal. (Unnecessary staff and Medical Chief of staff are excused from this portion of the session.)*

Ms. Hagevig seconded. The Board entered executive session at 7:02 p.m. and returned to regular session at 7:41 p.m.

Mr. Kendziorek made a MOTION to approve the credentialing report as presented and adopt legal counsel’s advice. Ms. Hagevig seconded. Motion approved.

ADJOURNMENT – 7:43 p.m.