

Bartlett Regional Hospital

Minutes
BOARD OF DIRECTORS MEETING
June 22, 2021 – 5:30 p.m.
Zoom videoconference

CALL TO ORDER – Meeting called to order at 5:30 p.m. by Kenny Solomon-Gross, Board President

BOARD MEMBERS PRESENT (*Virtual attendees italicized*)

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| Kenny Solomon-Gross – President | Rosemary Hagevig, Vice-President | <i>Mark Johnson, Secretary</i> |
| Brenda Knapp | Hal Geiger | Iola Young |
| <i>Deb Johnston</i> | <i>Lindy Jones, MD</i> | |

ABSENT - Lance Stevens

ALSO PRESENT (*Virtual attendees italicized*)

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| Rose Lawhorne, CEO | Kevin Benson, CFO | Kim McDowell, CNO |
| <i>Dallas Hargrave, HR Director</i> | <i>Keegan Jackson, MD, COS</i> | <i>Robert Palmer, CBJ Attorney</i> |
| <i>Barbara Nault, Legal Advisor</i> | Michelle Hale, CBJ Liaison | <i>Joy Neyhart, DO</i> |
| <i>Gail Moorehead, Quality Director</i> | Anita Moffitt, Executive Assistant | <i>Loren Jones, CBJ Assembly</i> |
| <i>Nathan Overson, Compliance Director</i> | <i>Kris Muller, Fiscal Analyst</i> | <i>Blessy Robert, Accounting Director</i> |
| <i>KRoseman (Public)</i> | Rod Wilson (Public) | |

APPROVE AGENDA – MOTION by Ms. Hagevig to approve the agenda as presented. Mr. Johnson seconded. There being no objections, agenda approved.

PUBLIC PARTICIPATION – Rod Wilson stated that he wanted to express to the Board how great Bartlett Regional Hospital (BRH) is. He reported that he came to BRH on the 21st of March, 2020, the first COVID patient of BRH. He spoke about the excellent care received here and the coordination of care with Virginia Mason (VM) before being medevacked there two days later. He was in a medically induced coma for 55 days and on a ventilator for 42 days, the longest any COVID patient had been on a ventilator to date. After 13 days, his daughter was informed that he would probably be a vegetable when he came back. Thankfully, he came back with some ill effects but between BRH, VM and Hearthstone Recovery Center, he is almost back 100%. He had returned to Juneau just before Labor Day and needed to resume physical therapy as soon as possible. Within two weeks, he met Clarissa Graves and Rachelle Cummins, BRH physical therapists. He could not express enough how helpful and accommodating they were. By Thanksgiving, he finished PT. A baseline pulmonary function test conducted by David Job revealed that Mr. Wilson was down to less than ¾ of normal capacity. 60 days later, he had gained 9% in one category and 11% in another and is due for his final pulmonary test soon. During a visit to the ED in September for a non COVID matter, the ED nurse remembered the night Mr. Wilson was airlifted out of Juneau, she hadn't expected to see him alive again. He shared that he had actually died two times at VM. Mr. Solomon-Gross thanked Mr. Wilson for sharing his story and expressed happiness that he survived. Mr. Wilson added that not only does the staff provide great care great here at the hospital, Ms. Lawhorne, a stranger, took care of his dog from the time he became ill until October without hesitation. He stated that the staff and what BRH does here is marvelous, the connections with hospitals down south is astronomical and to keep it up! Attendees applauded Mr. Wilson, thanked him for sharing his story and wished him well.

CONSENT AGENDA - *MOTION by Ms. Hagevig to approve the consent agenda as written. Ms. Knapp seconded.*

Mr. Geiger suggested a change to the minutes. For the benefit of anyone who was not in attendance, he requests a sentence be added to identify what clarification was provided as referenced in the first section of the Medical Staff report. Ms. Knapp identified a typographical error under the Governance Committee report. ***MOTION amended by Ms. Hagevig to approve the consent agenda subject to clerical changes. There being no objection, the May 25, 2021 Board of Directors meeting minutes as amended and the April 2021 Financials approved.***

MEDICAL STAFF REPORT – Dr. Jackson reported that it was business as usual at the June 1st, Medical Staff meeting. Routine committee reports were provided. Bylaw revisions had been presented regarding resident and student learners, what their capabilities are and what requires direct supervision. A reminder was given to the Medical Staff about the completion of medical records and having them signed off on within 30 days. Discussions about the Meditech Expanse upgrade included the ongoing need for support as we transition to the new edition. The Medical Staff recommends local people be used for providing support as it is difficult to get support in a timely manner after hours and on weekends.

COMMITTEE REPORTS:

Planning Committee Meeting – Draft minutes from the June 4th meeting are in the packet. Mr. Solomon-Gross reported what is going on with our properties as well as campus plans had been discussed at the meeting. The next Planning meeting is July 2nd.

Finance Committee Meeting – Draft minutes from the June 11th meeting are in the packet. Ms. Johnston reported that the meeting was fairly short and pretty straight forward. An update had been provided on where we were at in April. We had mixed results and are pretty close to break even for the month and the year.

MANAGEMENT REPORTS:

Legal Report – Ms. Nault provided a summary of projects she has been working on since last month's meeting. Terms have been agreed upon for renewal of CT services agreement with Southeast Radiation Oncology and we are finalizing the business associate agreement with them. Finalized a renewal of the professional services agreement for Emergency Department coverage. Completed updates to the Hospitalist employment agreements. Ongoing projects include reviewing independent contractor agreements for licensed counselors and working on updates to the medical resident policy and affiliation agreements.

Mr. Palmer reported that the Systemic Racism Review Committee (SRRC) is close to finishing their tool to evaluate any legislation that comes to them. Changes that BRH wants to its code, or that requires resolution that the Assembly needs to adopt, requires review by the SRRC. This review may add a month's worth of time to a resolution through the approval process. Ms. Knapp received confirmation that bylaw revisions would require review by the SRRC. Ms. Hagevig asked if there is a way to know in advance what we should be aware of and what kind of content has to be there to expedite the process. She expressed concern about the extra time as much of the Board's work is time sensitive. Mr. Palmer clarified that the SRRC is only charged at looking at resolutions that are going to be placed on the Assembly's agenda for adoption or ordinances that are set for public hearing. Their charge is very narrow and they have a short window to review and make a recommendation. It's an up or down recommendation; Does the proposed legislation likely include or perpetuate systemic racism or not? When they finalize the tool, it will be distributed to BRH staff and the Board so they know what the review entails. He is not aware of any other municipality doing this review process and it may change in the future. Ms. Knapp suggested a training session be offered by CBJ staff when this evaluation tool becomes available so all boards hear the same thing. Ms. Hale noted that what is envisioned by the Assembly is that the SRRC will conduct their review and make a recommendation. (This does not mean that anyone has to do anything with that recommendation.) The SRRC guidelines are to help the Assembly when drafting legislation by identifying any potential impacts. Ms. Hagevig stated that the work the enterprise boards do is highly specialized and technical. Unless there is someone on the committee that has the same level of knowledge, a general overview framework may or may not be successful. She also supports training by CBJ staff. Ms. Hale noted that the SRRC is not a subject matter expert in hospitals or docks and harbors, they are subject matter experts in systemic racism and that is what they are looking for. They would not bog down the process.

Mr. Palmer stated that he brought this to the Board as an awareness item and it will be discussed further when the information comes out. Mr. Solomon-Gross agreed that training should be provided.

HR Report – Mr. Hargrave reported that he is on the Governance Committee meeting agenda to discuss the Board’s self-evaluation to be conducted through the Governance Institute. He will send an email to the Board with details about the evaluation and a link to the survey. He also reported that he, Mr. Solomon-Gross and Ms. Lawhorne are to meet next week to set some draft goals for the CEO to present at the next Board meeting. Nothing has been finalized yet with an executive coach for the CEO but it is moving forward. Reference checks are being conducted and agreement is to be executed.

CNO Report – Mr. Solomon-Gross thanked Ms. McDowell for the thorough report. Ms. Young expressed appreciation for the inclusion of identification of the acronyms used in the report. Ms. Hagevig congratulated the OB department for the 34 births.

CBHO Report – Ms. Knapp wondered if the 118 individuals (94 adults and 22 children/adolescents) assessed in the emergency department for behavioral health crisis is significantly above the monthly average. Ms. Lawhorne reported that there has been a steady increase in volumes. She also reported that we are focusing on offering annual contracts with our Psychiatry Locums. There are efforts to recruit contract therapists until we can bring them on full time. There are 21 people on a waitlist for BOPS (Bartlett Outpatient Psychiatric Services). We are making progress in staffing but it’s not a steady environment, the more we hire, the more we need. Mr. Geiger asked about staffing levels in BOPS and telehealth services. There is a blend of psychiatrists and nurse practitioners that provide services in person and via telehealth. The majority of services are provided via telehealth. BOPS is an outpatient service with extended hours, but does not operate 24 hours a day. Ms. Young asked for clarification about integration of Neuro-Psychology services and creating a community referral process to begin referral later this summer as written in the CBHO report. Does this mean accepting referrals from Primary Care? (Yes) She also received clarification that the Applied Behavioral Analysis Clinic is receiving enquiries now but is not accepting referrals until June 30th. Ms. Lawhorne reported that we have posted for the Pediatric physician position at BOPS. There has been interest and we are negotiating a contract for the physician to begin as soon as possible. This position was included in the FY22 budget.

In response to Ms. Knapp’s questions about the glycol conversion project and the Living Will Registry, Mr. Benson responded that the glycol conversion project is the circulation systems in the hospital, primarily the intake of outside air. Glycol will prevent freezing of the systems during cold weather. Ms. Lawhorne responded that the living will registry is not new to us. We are renewing our agreement with them to provide end of life directives. It is compliant with the State of Alaska regulations.

CFO Report – Mr. Benson made the Board aware of how tight staffing is and that it is going to result in overtime pay for staff to cover the gaps. We are working to find creative solutions to address this issue that effects multiple departments. There are a number of issues contributing to this nationwide problem; COVID burnout and being able to travel again among them. Ms. Knapp noted the need to be ready when Cruise ships return. Ms. Lawhorne stated that what worked before is not working now. Because of the national shortage, there is new legislation to fund through Medicare, additional student programs for physicians and nurses to try to draw people in. She also noted that historically, there has been interest in other types of personnel, such as EMTs and paramedics, to reinforce BRH staff, however, there are regulatory requirements about bringing non-nursing personnel into the nursing world. Ms. McDowell is working with her staff to ensure that we have a compliant staffing program and supplementing where we can. Ms. Lawhorne has meetings with the Chancellor of UAS and people at the nursing school to look at the nursing needs of Alaska. She is joining an ASHNA work group that is trying to find support for the healthcare workforce. As there are a lot of elements to the problem, we are going to have to hit it with a multi-faceted approach. Ms. Young asked what cruise season volume assumptions were used for determining the FY22 budget. Mr. Benson responded that we planned for no cruise ships in 2021 but that they would return in 2022. Mr. Geiger noted there are a people from smaller cruise ships in town now and they seem to be younger than the geriatric cruisers normally seen during cruise season. He asked if we are seeing any evidence of increased visits to BRH from out of town folks now. Dr. Jones reported that some are trickling in. He also said he feels that the ED is staffed well enough to meet the needs of the cruise ship passengers. When asked if there is a need to staff up in other departments, Ms. McDowell reiterated that we are having staffing issues and not knowing the number of passengers makes it hard to plan. Mr. Benson noted most of the activity we see from the cruise ships is in the ED. Ms. Hale suggested that getting the cruise ship schedule may be helpful to the hospital to make preparations.

CEO Report – No questions or comments

CEO REPORT/STRATEGIC DISCUSSION – Ms. Lawhorne reported that she and the Senior Leadership Team (SLT) are working to support our staff by being present as the SLT, conducting monthly rounding while serving coffee and tea to staff, looking at safety aspects and the dynamics in the changing direction of healthcare and trying to preemptively address some of the challenges people are experiencing. Rounding and recognizing employees has been very well received. She reported Dr. John Huffer, Urologist has begun providing services in Juneau and performed his first surgical procedure in our OR today. He is currently in a temporary space while remodeling his long term practice space on Vintage Boulevard. He is already getting referrals from local physicians. Ms. Hagevig asked if we know when the Joint Commission is going to arrive at BRH. Ms. Lawhorne said no, but we remain in a state of readiness for their survey. Dr. Jones commented that it is lovely to see our CEO cruise through the hospital and engage with staff, it brings a sense of positivity. In response to Ms. Young's question about the progress in the recruitment of a COO, Ms. Lawhorne reported that we do have a possible candidate and are moving forward.

PRESIDENT REPORT – Mr. Solomon-Gross said one of his goals, as the Board President this year is to increase communications with the other board members. He and Ms. Lawhorne have set a goal for her to meet with each of the board members on a quarterly basis. Ms. Moffitt has already begun scheduling these meetings. He reported that he has been busy working on campus planning. He is also working with Ms. Lawhorne and Mr. Hargrave to develop goals for the CEO to present at next month's Board meeting. Board members are going to a Leadership Conference in October. There is specific language in the open meetings act that allows for this type of activity. All board members are to inform Ms. Moffitt what travel arrangements are to be made by her. Transportation will need to be coordinated to and from the airport. Mr. Geiger asked about the appropriateness of individual board members meeting with the CEO. It was clarified that the CEO is to meet with each Board member as a way for the CEO to get to know the Board members and build relationships. These meetings are not meant for the board members to lobby the CEO for their individual interests.

CBJ LIAISON REPORT - Ms. Hale reported that the Assembly has returned to a normal flow of work. Mr. Solomon-Gross expressed appreciation for the continuation of hybrid meetings offering in person as well as virtual participation. The BRH Board will continue this as well. Ms. Hale reported the Assembly has changed the rules of procedure and must continue to allow virtual participation. It has increased public participation remarkably.

BOARD CALENDAR – July calendar reviewed. No changes made. Mr. Geiger will be out of town but will try to attend the July Board meeting virtually. Mr. Solomon-Gross will not be here for the August Board meeting, Ms. Hagevig will chair the meeting.

BOARD COMMENTS AND QUESTIONS –Mr. Johnson asked about the Delta variant of COVID and wondered if anyone had any thoughts since it is more easily spread but is covered by the vaccine. Dr. Jones stated that in the ER, we are seeing younger people, not vaccinated, but there has been no upsurge. He has not seen anyone that has received a vaccine that has gotten COVID and gotten sick. We try to vaccinate anyone that comes to the hospital. Ms. Hagevig asked if CBJ is going to need paperwork since board members will begin getting paid for their services beginning July 1st. Ms. Hale said if there is, the City Clerk will reach out. Assembly member Jones promoted this \$250.00 per month per board member as a token of recognition for the hard work and responsibility of the BRH Board. The Assembly approved. Mr. Solomon-Gross expressed appreciation to the Assembly for the recognition.

EXECUTIVE SESSION – *MOTION by Mr. Geiger 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 minutes and the patient safety dashboard.*

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 information presented that the immediate knowledge of which would clearly have an adverse effect upon the finances of BRH; that being a discussion about campus planning. (Unnecessary staff and Medical Chief of staff are excused from this portion of the session.)*

Ms. Hagevig seconded. The Board entered executive session at 7:05 p.m. after taking a 10 minute recess. They returned to regular session at 7:56 p.m.

MOTION by Ms. Hagevig to approve the credentialing report as presented. Mr. Johnson seconded. There being no objections, credentialing report approved.

ADJOURNMENT: 7:57 p.m.

NEXT MEETING: 5:30 p.m. – Tuesday, July 27, 2021