Bartlett Regional Hospital

AGENDA PLANNING COMMITTEE MEETING Thursday, August 22, 2019 - 7:00 a.m. Bartlett Regional Hospital – BRH Boardroom

Mission Statement

Bartlett Regional Hospital provides its community with quality, patient-centered care in a sustainable manner.

CALL TO ORDER

APPROVAL OF THE MINUTES - July 19, 2019

Public Comment

Old Business

- A. Campus Plan update
- B. RRC update
- C. Crisis Stabilization Plan Status
- D. Ophthalmology Updates
- E. Satellite Pharmacy Project Status
- F. Community Needs Assessment

New Business

• Affiliation Analysis

Future Agenda Items

Next meeting

Comments

Adjourn

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Bartlett Regional Hospital

MINUTES

PLANNING COMMITTEE MEETING Friday July 19, 2019 – 7:00 a.m. Bartlett Regional Hospital - Boardroom

COMMITTEE AND BOARD MEMBERS PRESENT:

Marshal Kendziorek Bob Urata, MD Kenny Solomon-Gross

Brenda Knapp

ALSO PRESENT:

Chuck Bill, CEO Rose Lawhorne, CNO Anita Moffitt, Executive Assistant Bradley Grigg, CBHO Kevin Benson, CFO

Billy Gardner, COO Megan Costello, CLO

CALL TO ORDER - Planning Committee meeting was called to order at 7:00 a.m. by Marshal Kendziorek, Committee Chair.

APPROVAL OF THE MINUTES – *Mr. Solomon-Gross made a motion to approve the June* 3, 2019 minutes. *Ms. Knapp seconded. There being no objection, they were approved.*

PUBLIC COMMENT - None

OLD BUSINESS

- A. Campus Plan Update Mr. Bill provided an overview of Jensen Yorba Wall's project schedule included in the packet. The overall plan will look at options for future growth whether on existing property or elsewhere. JYW will meet with each of the departments to receive input. An update will be given to the Planning Committee in late August. The completed plan will be presented at the Board Strategic Planning meeting to be held in November. Discussions were held about demolition and rebuilding existing structures, project coordination, and future possibilities for BRH such as an outpatient surgery center and an urgent care facility to accommodate cruise ship passengers.
- B. Campus walk to include tour of BOPS to take place at the end of the meeting
- C. Crisis Stabilization Plan Status Mr. Grigg reported that he and Mr. Bill reviewed the RFP for the design of the crisis stabilization and psychiatric outpatient services building. An optional component has been added to include an alternative option that would allow a first floor parking garage, making the facility three stories instead of two. It had been determined that a two story building would cost about \$7 Million. A 20-23 space parking garage would increase the costs by \$1.5 Million. There is a meeting with CBJ this afternoon to finalize the RFP before it is posted on Monday. We will know if Capital Funding was approved by the Mental Health Trust Authority at the end of July, from

Premera in August and from the Rasmussen Foundation in November. Mental Health Trust and Premera funding would be FY20 capital dollars, the Rasmussen Foundation would be FY2021. A discussion was held about an outside elevator and van parking designations. Mr. Grigg noted that we did get a notice that we will get the federal \$8 Million grant funding for crisis services operations.

- D. Ophthalmology Updates Mr. Bill reported that Dr. Kopstein met with clinic and OR staff yesterday to make sure we have processes, equipment and supplies in place for him to begin providing services in Juneau. He also had a roundtable session with the local optometrists. Dr. Kopstein will provide surgical services but won't do refractions, glasses, etc. He is meeting with Dr. Jones today to discuss ED support. He will begin seeing patients in the clinic on August 29th and in the operating room on August 30th. Macular degeneration shots will be done on clinic days. Dr. Urata suggested Dr, Kopstein attend a medical staff meeting and introduce himself to the medical staff.
- E. RRC Project Status Mr. Grigg reported that construction started last week. Temporary walls have been set up and a fire panel has been installed. Demolition of the right side of the building will start on Monday. The project deadline is May 31, 2020. Grand opening will take place in the fall of 2020. Detox will continue to be provided on the medical unit during this time. We have not received notice that we will continue to receive the operations grant funding for RRC. A discussion was held about the loss of parking spaces on campus and the efforts in place to address the shortage. 18 parking spaces will be rented from Juneau Bone and Joint and 15 spaces will be rented from the Birth Center. Small incentives will be used to encourage carpooling, public transportation, bike riding, etc. A parking garage will be considered in campus planning.
- F. Satellite Pharmacy Project Status Mr. Gardner reported that this project is driven by USB 800, a federal mandate on sterile vs non-sterile compounding medications and hoods. It must be completed by January 1, 2020. This 3 phase project will kick off on August 15th. The satellite pharmacy with the compounding hood will be in the infusion clinic. Silverbow Construction won the bid to do the construction. They have been informed of the immunization and infection control guidelines that are in place and of the criminal background check requirements that will be coming in the near future. The project will wrap up in mid-December. BRH will supply the custom built hood. The gift shop has temporarily moved to the Juneau Medical Center building to allow for construction of the pharmacy. The OB waiting area will be remodeled to house the gift shop and coffee bar. BOPS will move into the Juneau Medical Center when the gift shop moves out.

NEW BUSINESS

• **Community Needs Assessment** – Mr. Bill reported that the Governance Committee has directed that a community needs assessment study be conducted. These are to be conducted every 3 years. The design process for a community assessment RFP has begun. A tentative bid has been received from David Sandberg who provides our Focus

and Execute tool. Information from the needs assessment would be integrated into the Focus and Execute strategic planning. The timeline for this assessment needs to be fairly aggressive. Results will be used in the campus planning. Dr. Urata requests a specific look at anticipated increased ER visits based on the predictions of increasing tourists be included in the assessment. A discussion was held about the increased size of cruise ships and the potential for cruise ship accidents.

FUTURE AGENDA ITEMS

- Campus Plan update
- RRC update
- Crisis Stabilization Plan update
- Ophthalmology update
- Satellite Pharmacy Project update

Next meeting - 7:00am - Friday, August 23, 2019

Comments – Mr. Kendziorek will be the only board member on the campus tour this morning

Adjournment – Meeting adjourned at 7:58 am

BARTLETT REGIONAL HOSPITAL AFFILIATION OPTIONS ANALYSIS

Bartlett Regional Hospital (BRH) is seeking to retain an advisor to assist its board and management in considering its situation, the feasibility of remaining independent, and available strategic alternatives. In that regard, we would like to develop an enhanced understanding of BRH's business, medical, and market circumstance, and the range of options, involving ownership change and no ownership change, which might be available.

BRH is an independent, sole community hospital owned and operated by the City and Borough of Juneau located in Juneau, AK. Its primary facility is a 73 bed full-service acute care hospital. Management and our board believe BRH has a strong financial and market position. However, in light of changes in the hospital industry, we would like to proactively consider the potential for change. Please respond to the following questions:

General qualifications

- Overview of your firm, its history, ownership, industries served, and product offerings.
- How many comparable assignments have you completed? Of these, how many clients elected to remain independent and how many sought a partner.
 - Describe several comparable engagements with similar systems, including clients in Alaska.
 - Please review your experience in advising local-government-owned hospitals in business combination transactions. These would include hospitals whose assets or business, or both, are owned by either counties, boroughs, parishes, cities, or districts.
- Which team of people from your firm would be dedicated to this project?
 - Describe their backgrounds and relevant experience?
 - How many of the assignments referred to in the previous question were these individuals involved in.
 - How long has this group of individuals worked together?
 - What is their role within your organization?
 - Are the individuals specialists in m&a or generalists?
- How will other departments at your firm work together on this project? Who will oversee the project?
- Describe a creative example of a hospital partnership or affiliation agreement developed by your firm.
- Does your firm currently have any relationships or business activities with any company that has hospital operations in Alaska?
 - Do you have existing engagements or on-going roles with any potential partners for BRH, including investor-owned companies as well as tribally-run or affiliated hospital or healthcare entities?
 - Has your firm provided advisory, underwriting, consulting services, or other products for any of these companies?

• Please provide your view of the most important elements in the selection of an advisor.

Approach to the Engagement

- Describe your approach to BRH's needs and objectives and the process you would recommend in order to consider its situation, options, and potential transaction alternatives.
 - What information needs would you have?
- Describe your anticipated interaction with the Board of BRH, including your experience working with special committees.
- Which commercial and organizational factors would you consider most relevant to helping BRH develop an understanding of its situation?
- Your view regarding the impact of market developments in Alaska, and nationally, on BRH.
- How would you expect to consider the role of BRH's medical staff in your process?
- Should BRH elect to consider some form of business combination, please provide the following input:
 - Please describe the relevant transaction forms to consider; describe the economic and cash flow implications of each.
 - What types of possible sale processes exist, describe the pros and cons of each?
 - Are there likely to be one or multiple steps in the selected process?
 - Describe the services and advice that you would provide during each step of a transaction.
 - What financial and non-financial issues are present in transactions of this sort?
 - Are there any economic tradeoffs between these?
 - What are the likely financial variables in these tradeoffs?
 - What is your experience with state Attorneys General?
 - Has a transaction you were advising on ever been challenged by a regulatory agency.
- What are typical risk exchange trade-offs in transactions of this sort?
 - Where would the largest elements of transaction risk lie?
 - Have you ever advised on a transaction where a letter of intent was signed that failed to close?
- How can we retain management during the pendency of a potential transaction?
 - Is it appropriate to grant severance arrangements?
- Please provide references, including for those clients that elected to seek a partner and those that elected to remain independent. Please include references from physicians who were not board members.
- Please estimate the amount of time involved for each phase of your proposed advisory work. What time commitment, on the part of board members and management, would you expect?

- Describe your approach and philosophy regarding compensation arrangements that you are willing to consider.
- Please provide proposed fees.
- How would this project be communicated to the Medical Staff, employees and public to minimize unwarranted anxiety?