

Bartlett Regional Hospital

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Planning Committee Minutes
February 13, 2020 – 7:00 a.m.
Bartlett Regional Hospital Boardroom

Called to order at 7:00 a.m., by Planning Committee Chair, Marshal Kendziorek

Planning Committee and Board Members: Marshal Kendziorek, Kenny Solomon-Gross, Iola Young

Staff: Chuck Bill, CEO, Kevin Benson, CFO, Rose Lawhorne, CNO, Billy Gardner, COO, Dallas Hargrave, HR Director, Megan Costello, CLO, Bradley Grigg, CBHO and Megan Rinkenberger, Executive Assistant

Mr. Solomon-Gross made a MOTION to approve the minutes from January 17, 2020. Ms. Young seconded, and minutes were approved.

PUBLIC PARTICIPATION – None

Campus Plan Review – Chuck Bill (see Handout):

Following the projects listed from top to bottom, Mr. Bill began by discussing the First Floor Renovation/Reconfiguration (1). This conversation began with the need for abatement of the few areas that contain asbestos in the first floor around the Materials Management department. This led to talks around the opportunity to resolve issues regarding spacial constraints to other areas. Cafeteria eating space could be expanded, including to a second floor above the cafeteria. The current structure is already designed to accept an additional floor. BRH is looking at options for relocating (temporarily or permanently) the Materials Management department, as well as laundry, etc.

An addition to the Emergency Department (2) was discussed, but would make navigation around the corner between the ambulance bay and the Bartlett House difficult. It also may present the logistical challenge of requiring a Certificate of Need. An alternative proposition would be a potential Urgent Care clinic downtown that would function only in the Summer/cruise ship season to specifically address medical needs of cruise ship passengers and tourists. This would take seasonal pressure off the Emergency Department.

The north addition (3) is a two story possibility, involving the demolition of the Juneau Medical Complex, and repositioning or expanding the OR. This would involve finding alternative space for the providers currently operating there.

The north parking garage project (7) would address the need for finding alternative provider space and is high on the sequencing list, and fairly high on the priority list. This would be a first floor parking garage with medical offices in the second story. The second floor would provide the opportunity for a retail space, specifically a retail pharmacy – providing 24 hour access for hospital patients, and as a dispensary for CBJ employees at discounted rates, and allowing access to specialty medications that are normally sent out for. This project could coincide with the North Parking Lot Access Reconfiguration (10) on the handout, in that during the process of constructing the parking garage/office building, they

could move the road access to the north side of the parking lots. This addresses the current safety issue of staff crossing the street on foot between the parking lots and the hospital campus buildings.

Surgical Services renovation (4) can be addressed partially by the north addition (3) project, but is not a high priority and does require many steps before this can happen. This project will be kept on the list, but at one of the lowest priorities.

The South Addition (5) only requires an addition of a South entrance (9) to the hospital campus, and therefore could be done earlier in the timeline, and with little difficulty. This would allow relocation of the lab, which is currently above the boiler room and receives more heat than is ideal. There was a discussion of the options for a South Entrance, from a restricted access gravel road, to full access pavement road, and even discovery of a DOT diagram showing potential overpass access. This additional access is necessary for disaster planning, efficient access during construction of the main access road, and access for deliveries.

The project list shows South Parking Garage (8) as off the table due to the North Parking Garage as a more feasible priority.

The Medical Arts building (6) needs updating and renovating, but is not a priority. The committee decides this should be postponed out to a 10- or 15-year plan.

Community Healthcare Needs Assessment Review – Chuck Bill:

There have been minor corrections to the assessment. Further discussion and review will happen at a future meeting, to include specialists in the community.

Provider Network Development Study Update – Chuck Bill:

Senior leaders have heard from the top three respondents. All bids came in well over expected amounts. After analyzing the top three proposals, and scoring them independently, all four senior leaders scored ECG the highest. Their proposed cost was \$200K-\$230K (not to exceed \$230K). There was a discussion that some pieces of the work may already be complete, as they performed a study for SEARHC, and could potentially use some of that research, and the Community Healthcare Needs Assessment information that was just completed, as well. Any conflict of interest concerns the committee had regarding ECG working with both SEARHC and BRH were discussed and resolved. Mr. Kendziorek requests clarification on their intention and definition when using the word “partnership”, specifically regarding tasks 10 & 11 in the document. Mr. Bill stated that he had the discussion that BRH will maintain local control through any “partnership”.

Project Updates:

Pharmacy Clean Room construction progress – Mr. Gardner: The latest deadline for substantial completion is February 27, 2020. The project is on budget. Testing will begin once construction is complete. Final completion date for reveal and tour is difficult to say.

Hospital Access Road Project – Mr. Gardner: There was a meeting last night with local businesses regarding the effect of construction on their business. There will be a water outage that was discussed, as well as ambulance access during construction. BRH does have access to emergency water sources, especially if there is advanced notice to potential work on the line.

PAS Employee Window at Emergency Department – Mr. Gardner: Phase one design plans have been received by the city, for a June 30, 2020 completion date using the city’s contracted construction team.

JMC Fire Alarm Replacement – Mr. Gardner: The design came back, and will go out to bid March 25, 2020, with a July 1, 2020 expected completion.

After Hours Lockdown – Mr. Gardner: There is one more piece to phase one, getting control panels on the elevators. See board report for more details on phases.

Central Sterile Processing in the OR – Mr. Gardner: This is part of the supply fan replacement. There is a deep triple sink to be replaced early in the renovation to alleviate an employee health concern, as well as make contracting work easier.

RRC Renovation – Detox Unit and Assessment Center – Mr. Grigg: Phase one (new construction) is expected to be completed April 17, 2020, and phase two (renovating apex wall of horseshoe) will begin in early May 2020, and will not impact patient care or operations. BRH anticipates being able to start serving patients in new facility in June or July 2020. There will be a new conference room created for group activities. Tours will be available before patients begin using new facility. A new roof is complete over the entire facility.

Crisis Stabilization – Mr. Grigg: The fees for project management with Northwind architects have been finalized, and CBJ finalized architect reports. A more detailed timeline for phase one, which involves tearing down the BOPS building, is expected by Feb 29, 2020. Completion is expected in Summer 2022. The total cost of the facility – \$7.7 million, plus \$1.5 million for first floor parking garage (15-20 spots, including a handicap spot), and other variables \$1.3 million, for a total of \$10.5 million. Without a parking area, the project would be \$9 million. Since a North Parking Garage is under consideration, all factors will need to be considered together to determine the worth of the additional cost for the parking garage. Capital Fundraising: \$1 million from Premera, Mental Health Trust \$200K, DHSS \$500K, and Rasmusen Foundation \$400K-\$600K (November 2020). BRH will seek another \$200K for FY21 from the Mental Health Trust, as well as reaching out to Murdock and others. Operational grants have funded Crisis Stabilization services, with 19 minors served since January, and they awarded additional funds for the next FY as well.

Planning Committee Charter and By-laws Review – Marshal Kendziorek:

Mr. Kendziorek encouraged the committee to review and become familiar with the charter and by-laws document to know the expectations of the committee.

FUTURE AGENDA ITEMS – Project Updates with Timelines, Schedule a Committee of the Whole Planning Meeting to review CIP project handout

Next meeting: To be determined

COMMENTS – None

Adjourned - 8:32 a.m.