

Bartlett Regional Hospital

AGENDA
PHYSICIAN RECRUITMENT COMMITTEE
March 15, 2021; 5:00 p.m.
Bartlett Regional Hospital – Zoom Teleconference

Public may follow the meeting via the following link: <https://bartlethospital.zoom.us/j/98272144607>
or call
1-253-215-8782 and enter webinar ID 982 7214 4607

- I. CALL TO ORDER
- II. PUBLIC PARTICIPATION
- III. APPROVAL OF MINUTES – [February 9, 2021](#) (Pg. 2)
- IV. PEDIATRIC BEHAVIORAL HEALTH PROVIDER
 - A. [Dr. Dressel’s letter to the Recruitment Committee and the Board](#) (Pg. 4)
 - B. [BH Pediatrician Duties and Responsibilities](#) (Pg. 9)
- V. UPDATES
 - A. General Surgery
 - [Dr. David Miller’s email to the Recruitment Committee](#) (Pg. 11)
 - B. Psychiatry
 - C. Medical Oncology
 - D. Neurology
 - E. Urology
 - [Dr. Saltzman’s closing Southeast Urology notification](#) (Pg.12)
- VI. EXECUTIVE SESSION
 - Behavioral Health Pediatrician Position
- VII. COMMENTS
- VIII. ADJOURNMENT

Bartlett Regional Hospital

PHYSICIAN RECRUITMENT COMMITTEE

February 9, 2021 5:00 pm Minutes

Mission Statement

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

Members Present: Mark Johnson, Chair, Steve Strickler, DO, Lindy Jones, MD, John Raster, MD, Iola Young, Catherine Peimann, MD, Kevin Benson, CEO-Interim, Kathy Callahan, Dir. Physician Services

Guests: Joanne Gartenberg, MD, Joy Neyhart, DO, Keegan Jackson, MD, Amy Dressel, MD, Dorothy Hernandez, MD, Bradley Grigg, CBHO, Michael Saltzman, MD, Kenny Solomon-Gross, Anita Moffitt

- I. **Called to Order 5:03 pm via Zoom**
- II. **Public Participation Invitation- None**
- III. Mark Johnson called the meeting to order. Mr. Johnson asked Members to review the minutes from the September 15, 2020 meeting. A **MOTION** to approve was made by Steven Strickler, DO and seconded by Lindy Jones, MD and approved.
- IV. **Pediatrician in Behavioral Health Program** - A description of the proposed positions role in the behavioral program was presented by Dr. Joanne Gartenberg and Bradley Grigg. The proposed position is intended to assist with stabilizing the patient with complex behavioral and medical/developmental concerns and returning them to their Primary pediatric provider. This was followed by a lengthy discussion with the pediatric providers representing local clinics Glacier Pediatrics, Valley Medical Care, Rainforest Pediatrics and SEARHC. Joy Neyhart, DO expressed support for the position. Amy Dressel, MD, Dorothy Hernandez, MD and Keegan Jackson, MD expressed concern for the hospital entering into the primary care realm and felt that the patient is best served in their primary care home. Iola Young asked for numbers of patients and proposed number of hours per week the provider would be working.
- V. **Updates:**
 - a. **General Surgery:** Kathy provided a report that BRH will be hosting two site visits in the next month and hope that one will be a good fit for the open position

- b. Medical Oncology:** Kathy reported that there is not any activity in the medical oncologist search.
- c. Urology:** Dr. Saltzman attended the meeting to share with the committee that he is back in Juneau and serving the urologic patients after a long absence related to COVID. He feels that the practice is realistically a half time practice based on low volumes. He is not essential service so solving the on call needs continues to be a struggle. He stated that he does not intend to be in Juneau full time but when pressed by members he felt that he would commit to 2 weeks per month.

MOTION by Dr. Jones to move into executive session for committee deliberation to include committee members, Kathy Callahan, Anita Moffitt, Kenny Solomon-Gross, Bradley Grigg, Kevin Benson. Dr. Raster seconded. Committee entered executive session at 5:58pm and returned to regular session at 6:33 pm. No action taken.

Request for another meeting to be held in a month with a job description for the BH Pediatrician available for review.

Meeting adjourned at 6:35 pm

GLACIER PEDIATRICS, LLC
Amy Dressel, M.D.
Kim Gardner, F.N.P. • Lauren Hopson, P.N.P.

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Updated March 9th 2021

Mr. Kevin Benson, Interim CEO Bartlett Regional Hospital

Bartlett Regional Hospital Board of Directors

Bartlett Hospital Physician Recruitment Committee Members

To Whom It May Concern,

This is a letter to follow up on two different meetings discussing pediatrics in Juneau, Alaska at Bartlett Regional Hospital (BRH) in first part of 2021.

The most recent discussion was on February 9th to discuss placement of a general pediatrician in the Bartlett Outpatient Psychiatry Services (BOPS) office to function as a case manager. This previously was discussed in fall 2020 with Mr. Bradley Grigg (BRH CBHO) and myself along with my business partner Kim Gardner, PNP, and we were led to believe that this was not a current need nor was it being "planned on". No additional discussion was ever approached. The meeting for physician recruitment for a pediatric provider BOPS position was brought up suddenly without any prior discussion with the Juneau general pediatric providers and was concerning. It was apparent to me at that meeting that there is a decrease in understanding of what primary care does for mental health. In the past, there has been intermittent mental health help for pediatrics, and as a result the primary care pediatricians here at Glacier Pediatrics have been working with different resources to provide diagnoses, treatment and care coordination for any child or adolescent having mental health issues (both in state and out of state). We also had a partnering mental health practice for a while in our office space and realized how helpful that was. We discussed with Mr. Grigg possibly having clinicians housed at Glacier Pediatrics (and are still interested in this possibility). Glacier Pediatrics has worked hard to maintain mental health and behavioral appointments into our schedules on a regular basis as well as implemented telehealth so that these patients can be seen in an appropriate time and place. It is widely known that the best practice is to have children in a medical home with

their primary care physician helping to coordinate meds, drug levels, refills, etc. During COVID it has been noted that numbers of children seeking services at BOPS has increased (also noted in multiple articles, journals that serious mental health issues like suicidality have increased this year as well). What a great time for BOPS to focus on what it does well-- like counseling patients and treating/ following significant mental health issues instead of getting into expanding into pediatric primary care. Therefore, we at Glacier Pediatrics strongly oppose having a general pediatrician in the BOPS clinic but we support the hiring of a case manager. Due to the increased need for psychiatric care due to COVID and the desire for primary care help, would it be helpful to BRH BOPS for different primary care providers provide services there (i.e each office send a provider aka do week on call at BOPS)? It would get providers there sooner as well and possibly help during this "time of crisis". Of note: both providers from Glacier Pediatrics, SEARHC and Valley Medical Care were present at this meeting and all vocalized their concern over the proposal and need to have issues researched further with all members involved.

Another issue to consider with BOPS having a primary care provider is around the issues of call-- currently there are proposals (see below) outlining the need for more primary care pediatric providers in town to "cover" the call schedule--if there is a provider at BOPS that would add to the pool of pediatric providers in town who are not adding to the call pool and therefor causing a bigger issue with the "pool" of pediatric providers. Also it would add further issues in regards to possible need for further recruitment (if there was an increased need) -- would Bartlett says, in the future, "there are enough pediatricians in town" and not help support those who help staff the hospital by recruitment efforts when necessary?

An additional topic of discussion at this meeting was the desire for help around diagnosing patients with autism. At the current time there are a couple types of providers who can diagnose autism spectrum disorders in the state of Alaska. These are specialist (like pediatric neurologist or neurodevelopmental pediatricians (who have undergone extra years of training)) and psychologist, neuropsychologist and/ or psychiatrist. There has been talk about " classes" for primary care providers to be able to diagnose but this has not happened in the state of Alaska yet. For clarification on the use of providers who had additional credentials (such as the LEND program) I will quote the LEND program itself: The LEND program that University of Alaska Anchorage has created helps medical providers "training to provide family-centered coordinated systems of health care and related services to improve the health of infants, children and adolescents who have, or are at risk for developing, autism or other developmental disabilities". Someone who has been through the program can help coordinate care for issues around diagnosed developmental issues. Since the need is greater for diagnosis, we also support BOPS at either working with or obtaining a neurodevelopmental physician for helping diagnose the patients they serve. It is super helpful that BOPS has a neuropsychologist who will perform testing and can help with diagnosis as well.

We were grateful to BOPS when more clinicians and counselors were available to help with the load and when there were pediatric specific providers available for increased psychiatric needs. This last couple years has brought tremendous growth to BOPS through use of nurse practitioners, clinicians, as well as recent development of crisis stabilization team!! This has been incredibly helpful for the Juneau pediatric population. These recent changes also included a play-based clinician for children "too young for 'talking therapy' ", and we were relieved that they were willing to take Medicaid patients. At Glacier Pediatrics we work with many different counselors in Juneau and try to help care coordinate as we can; currently we have had a hard time getting any information, including patient records, from BOPS when patients (or parents) sign the BOPS release of information . We worked hard to refer as many patients as possible to help the new counseling program get "up and running" and feel as those efforts were not reciprocated.

It has also been stated that patients "have a hard time getting primary care in Juneau". At this time no one from BOPS has reached out to us (at Glacier Pediatrics) or to any other local health care providers asking if we would be willing to do primary care for children who are being seen there. At this time I can also confirm that we at Glacier Pediatrics have space for new patients. Also, this was discussed with other primary care providers in town and both Valley Medical, SEARHC and Family Practice Physicians all stated they have room and are willing as well.

This leads into the second pediatric issue. At the meeting on January 22nd with previous BRH CEO Mr. Bill, Interim BRH CEO Mr. Benson and physicians from Rainforest Pediatric Care (Drs. Neyhart and Kilgore) as well as Dr. Hernandez (representing Valley Medical Care) and Dr. Jackson (representing SEARHC) as well as myself and my partner Kim Gardner, PNP, the topic of BRH owning/ running/ maintaining a primary care pediatric clinic was discussed. At this meeting it was stated that "Bartlett is not interested in competing with local clinics and not interested in primary care unless there is a need". We have appreciated having another primary pediatric care clinics in town as many patients/ parents do want options. The providers at Glacier Pediatrics were saddened to hear of the possible desire to to close Rainforest Pediatric Care. It has been helpful to have colleagues to consult on difficult patients and we at Glacier Pediatrics have been willing and have continued to cover both practices for phone calls after hours on weekends. However, the current state of pediatric patients in Juneau was discussed at that meeting and it was determined that the existing clinics who see pediatrics (Glacier Pediatrics, Valley Medical, SEARHC and Family Practice Physicians) would be willing and able to "absorb" patients if there was no further Rainforest Pediatric Care. Since the BRH has stated it remains dedicated to not encroaching on existing primary care and therefor driving them out of business, it seems there is no need for an additional clinic to be opened at this time by BRH.

The idea of certain physicians not being able to "handle" specific pediatric patients/ cases was also brought up. Currently the majority of children in our town are seen at family practice run

clinics and most likely will continue to be served by them in the future. Even Rainforest Pediatric Care asks family medicine doctors to cover their clinic when Drs. Neyhart or Kilgore are not available. I do recognize that the training for a pediatrician is different from that of family medicine physicians but feel as though many of our colleagues work hard to stay educated as well as take certification classes to keep skills "up to date" and therefore do a good job caring for Juneau pediatric patients. Also, currently the majority of specialists available to consult on patient needs and the willingness to be available for co-managing patients with chronic medical conditions are impressive and helpful (from both here in Alaska and in Seattle). There is no reason to believe that BRH would need to contract with specialists if there was one less pediatric clinic in town.

Also concerns over "hospital call coverage" were discussed. With the addition in last couple years of hospitalists to the call rotation at BRH, the number of call days that need "covering" by pediatric providers has significantly decreased. The hospitalist program has been committed to covering at least half of the month with providers who also provide pediatric support (and have done an excellent job doing so). In the past, I myself covered 30 out of 31 days per month of pediatric call for 3 years and did so without compensation and minimal breaks. I would have no difficulties covering the current need of 12 to 15 days a month (less than some of the subspecialist in Juneau currently). In addition, I reviewed that if I were not available for certain call days that several family medicine and/ or additional pediatric providers are currently willing to cover a few days of call a month as well in order to help keep the call schedule covered. So there would not be a lag in call coverage at Bartlett without the additional pediatric providers.

The last point brought forward was aging population of pediatric providers in Juneau and "lack of interested" younger pediatricians. I do agree that this is an issue overall for Juneau medical community and needs further exploration. One of the ways we can help work through this is by using allied health professionals more, which something Juneau and, in general, BRH is behind on but currently exploring and working on. In addition, the concern over continuing to keep a primary care practice in business during COVID was noted to be stressful and "not profitable". We at Glacier Pediatrics have experienced this as well and have made several adaptations to how we operate, schedule and see patients in order to continue to serve Juneau's pediatric population. We also remain committed to this community and want to see pediatrics prosper as much as possible. We also are continuing to try to help pediatric specialists provide outreach clinics here to help further the health of Juneau's younger population.

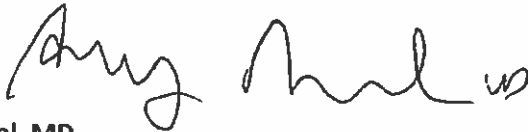
In summary, there is a need for expanded psychiatric services in Juneau and we support continuing with what we have/ We at Glacier Pediatrics also agree more neurodevelopmental assessments are needed as well as crisis stabilization and case management but don't agree that this can be accomplished with a primary care pediatrician. There needs to be more open communication with primary care and BOPS (which we at Glacier Pediatrics look forward to). Currently there is enough primary care availability in Juneau so additional resources are not

required and future of pediatric care needs to be looked into more vigorously. Also the pediatric provider call schedule will continue to be covered by existing staff/ providers even if there are a couple of providers absent but adding to the "pool" of providers who live in town but do not provider call / coverage services in Juneau would be detrimental.

A discussion of possible committee to look at issues around pediatrics was brought up and I gladly volunteered to join (and am still interested if this goes forward). I am highly dedicated to the pediatric population of Juneau, involved not only in BRH pediatric care but also through several boards I have sat on, volunteered at and/or helped create (including JYS, AWARE, JAHC, Juneau Parks and Rec, FASD, SAFE CAC , cleft palate team).

Hopefully this helps answers some of the questions BRH Board members have as well as clarifies some of the information given previously. I will gladly talk to any BRH administration, physician, BOPS, BRH Board members about information included within this letter. I have been happy to work at Bartlett for past 21 + years (providing extra coverage and filling in frequently when needed, doing extra work on committees, coordinating pediatric call schedule as well as serving as previous chief of staff for more than 3 years, all uncompensated) and hope that the right decision can be made for Juneau's pediatric population. I thank you for reading this. Please feel free to reach out with any concerns.

Sincerely



Amy Dressel, MD

adressel@glacierpediatricsllc.com

907-321-3768

APPENDIX A: Job Description

PHYSICIAN'S DUTIES AND RESPONSIBILITIES Behavioral Health Pediatrician

GENERAL DESCRIPTION

- Provider is hired and qualified to integrate behavioral health specific pediatric services to patients engaged in behavioral health services at Bartlett Regional Hospital
- These services may also be available for the dependents of chronic adult psychiatric patients who have challenges navigating community health resources.
- Provider will remain in the office and be available during scheduled shifts.
- Provider will provide consultation services to behavioral health medical providers and therapists, regarding medical and psychiatric co-morbidities and developmental disabilities.
- What about call? Would this provider be part of the provider call schedule?? NO CALL REQUIREMENTS AT THIS TIME

QUALIFICATIONS

- Licensed physician and member of Bartlett Regional Hospital Medical Staff
- Training and/or experience in pediatric medicine
- Career interest in pediatric medicine, behavioral health and developmental disabilities
- Advanced Cardiac Life Support certification

ACCOUNTABLE TO

Behavioral Health Medical Director/Chief of Staff

DUTIES AND RESPONSIBILITIES

1. Participates in communications with Behavioral Health Medical Director, timely as necessary.
2. Follows the latest Joint Commission standard policies, procedures, and medical protocols regarding patient care.
3. Ensures the success of the Behavioral Health Pediatric services by encouraging teamwork and participation.
4. Interact with the hospital staff, community partners, and specialists to ensure appropriate and timely patient care, patient transfers, and patient referrals.
5. Evaluate acute medical issues identified during psychiatric assessment, counseling or medication management visits, including acute illness, chronic illness, FASD, child abuse and neglect.
6. Liaison with primary care providers in the community, improving access to both medical and behavioral health services.
7. Coordinate the transition of patients coming out of residential psychiatric or behavioral treatment centers as they reenter Juneau with coordination of care for local medical community.
8. Participate in the Behavioral Health QI committee
9. Regularly attend other medical staff committees, as negotiated with Chief of Staff.
10. Provide direct patient care in Behavioral Health Pediatric patients for the agreed upon shifts per four-week block with the obligation to find coverage once the schedule is finalized.

- 11.** Contributes to an efficient operation of the practice, completing and submitting billing and completing documentation in a timely manner.
- 12.** Work cooperatively and supportively with Behavioral Health Leadership to ensure services are available and cost effective, meeting quality and regulatory guidelines.

Quality

- 1.** Promote/ensure patient satisfaction in all areas of patient care delivery.
- 2.** Supports the development and maintenance of continuous quality improvement programs by participating in the following:
 - a. monitoring and supporting medical quality improvement plan and peer review processes.
 - b. continuous monitoring and assurance of compliance of physician quality of care/safety programs.
- 3.** Responsible for other duties that may be defined in the bylaws of the hospital Medical Staff and/or as designated by the Chief Executive Officer, Chief of Staff, Behavioral Health Medical Director and/or their designees.

From: David A Miller MD
Sent: Wednesday, March 10, 2021 2:34 PM
To: Kathryn A. Callahan
Subject: Surgical recruitment

Kathy,
Please share this with the committee.

I am writing this letter to encourage the recruitment committee to reconsider its decision to recruit an additional general surgeon to Juneau.

The two previous surgeons who have been recruited to Juneau have discontinued their practice in favor of other locations and or types of practice due in large part to the lack of elective surgical cases. The current practice of bringing in locum surgeons to cover excess emergency call has been working well from my perspective and evidently is cost neutral with respect to hospital finances. I find it quite helpful to have board-certified surgeons available for first assisting on complex cases which is difficult to arrange sometimes with Ben because of scheduling conflicts.

I would welcome any surgeon who wishes to come to Juneau but I do not believe it is necessary to spend community resources to recruit and relocate a full-time surgeon at this time.

Thank you for your consideration.
Sincerely, David Miller MD FACS
Sent from my iPhone
External Email: Be cautious with URLs and Attachments.

Michael J. Saltzman, M.D.
Southeast Urology
3225 Hospital Dr. Suite 102
Juneau, AK 99801
907-500-9920

February 28, 2021

Dear Colleagues and BRH Staff:

It is with mixed feelings I have officially closed my practice this month. Juneau has been my home for over ten years. Last year is certainly one that I will never forget. I wish I had studied "Pandemics 101" in college. I wish you all the best during these challenging times. My sincere appreciation to all of you heroes who have soldiered on and put yourselves on the front lines to serve the community.

During my career, I have been in a partnership, an employed physician, and finally private practice. I truly believed Juneau was the last stop on the tour. I believe Juneau was a great fit for me, and I hope I was a good fit for Juneau. I wish the hospital the best in finding a suitable replacement.

My email and phone number listed below will remain the same. Please don't hesitate to reach out for any patient concerns, or just to say hello.

Thank you all for your wonderful support.

Sincerely,

Mike Saltzman
Msaltz2001@aol.com
Cell: 541-399-3742