AGENDA
EXECUTIVE COMMITTEE MEETING
Thursday April 22, 2021; 12:00 p.m.
Bartlett Regional Hospital – Zoom Teleconference

Public may follow the meeting via the following link https://bartletthospital.zoom.us/j/93742825103
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I. CALL TO ORDER
II. PUBLIC PARTICIPATION

III. APPROVAL OF THE MINUTES
  ➢ February 1, 2021 Executive Committee

IV. CRISIS STABILIZATION CENTER PROPOSED DESIGN CHANGE

V. BOARD SELF EVALUATION

VI. CEO COMPENSATION AND PERFORMANCE EVALUATION

VII. PEDIATRIC BEHAVIORAL HEALTH PHYSICIAN

VIII. COMMENTS AND QUESTIONS

IX. ADJOURNMENT
Minutes
EXECUTIVE COMMITTEE MEETING
February 1, 2021 – 12:00 p.m.
Zoom Videoconference

Called to order at 12:00 p.m., by Kenny Solomon-Gross, Board President

Executive Committee* and Board Members Present: Kenny Solomon-Gross*, Board President; Rosemary Hagevig*, Vice-President; Mark Johnson*, Secretary; Lance Stevens*, Past Board President; Iola Young and Hal Geiger

Also Present: Chuck Bill, CEO; Kevin Benson, CFO/Interim CEO; and Anita Moffitt, Executive Assistant

APPROVAL OF THE AGENDA – Mr. Solomon-Gross noted this is a one item agenda. MOTION by Mr. Stevens to approve the agenda. Mr. Johnson seconded. Agenda approved.

PUBLIC PARTICIPATION – None

Due to a personal conflict with this matter, Mr. Solomon-Gross recused himself from this discussion and turned the gavel over to Ms. Hagevig to run the meeting.

PROPERTY PURCHASE DISCUSSION – Ms. Hagevig noted the item before the committee is new language recommended by Mr. Benson to be presented to the Lands Committee in the matter regarding purchase of the property located at 3225 Hospital Drive. The recommendation is to insert “up to $2.5 Million pending receipt and an analysis of the engineer’s report for the building under consideration”. She reminded the committee that there had been a roll call vote at the January 26th Board of Directors meeting limiting the amount to $2 Million. The vote had passed unanimously. This meeting was called today because the buyer rejected the $2 Million offer. Mr. Johnson stated that the report provided identified items that need a more thorough engineer’s inspection. He does support what Mr. Benson is recommending and also suggests we obtain cost estimates for the items identified for needed repairs due to water damage; the slope of the sidewalk, roof and the oil tanks. Mr. Geiger noted the report referenced is not from a licensed engineer but the inspection was done by someone who is very qualified to talk about buildings. He also expressed his concerns that the roof may have asbestos in it. If so, it would require certified asbestos removers and would be very costly to repair.

Mr. Benson stated that the purpose of this meeting was to modify what is going to be presented to the City, understanding that the sellers will not sell the property for $2 Million. The amount is to be raised to $2.5 Million, not to make a decision to purchase today, but in the event that the Board chooses to move ahead with the purchase, we don’t have to go through the City again to look for additional appropriation. In response to Mr. Geiger’s question about his recommendation, Mr. Benson supports his recommendation and said by doing this,
the Board can choose to accept the higher offer or choose to not do anything. If that’s the case the appropriation would be withdrawn. Mr. Johnson supports the recommendation but wants to know what the costs would be to get the building up to acceptable standards. Ms. Hagevig confirmed that Mr. Benson will attend the Lands Committee meeting at 5:00pm this evening. She asked if approved by the Lands Committee, would it then go to the full Assembly to introduce an appropriation ordinance and would it require the Hospital Board to go ahead with the purchase. It would not require the Board to go ahead with the purchase. We would delay the appropriation going to the Assembly until the Board has made a decision one way or the other. It is unknown how long the seller will keep it off the market. In response to Mr. Johnson’s query about what the backup plan is if this building is sold to someone else, Mr. Bill said we would hope to renew our lease for the space we are currently using until we had a more permanent solution. Mr. Stevens asked if we plan to dive deeper into the issues with the fuel tanks and roof before we commit. Yes, Mr. Benson will try to get cost estimates for repairs. Mr. Johnson identified other needed repairs and expressed the importance of knowing those costs.

Ms. Hagevig noted the question before us for tonight’s Lands Committee meeting is whether Mr. Benson is authorized to move forward with the amended language of “up to $2.5 Million” for purposes of getting through the CBJ process. **MOTION by Mr. Johnson that we request the Lands Committee to approve up to $2.5 Million for the purchase of the property located at 3225 Hospital Drive, contingent on the engineer’s report. Mr. Stevens seconded.** Hearing no objections **MOTION approved.**

**Comments and Questions** – Mr. Johnson requests cost estimates for repairs. Mr. Benson will try to obtain them before the next Finance Committee meeting. Ms. Hagevig suggested the estimates may impact our bargaining position. Mr. Geiger suggested the cost of the new roof on the fire station may be used as a possible benchmark. Hearing no other comments, Ms. Hagevig handed the gavel back to Mr. Solomon-Gross. He thanked everyone for their time and adjourned the meeting.

**Adjourned 12:16 p.m.**
MEMORANDUM

Date: April 20, 2021

To: Bartlett Regional Hospital Board of Directors Executive Committee

From: Dallas Hargrave
Human Resource Director

Re: CEO Performance and Compensation for new CEO

After an extensive recruitment and selection process the Board of Directors hired Rose Lawhorne to be Chief Executive Officer for Bartlett Regional Hospital. She started in the CEO position on April 4, 2021 and her starting compensation is $320,000 annually.

With the previous CEO, the Board developed annual performance goals and then evaluated the CEO on the accomplishment of those goals annually. Additionally, each year, the Board of Directors sought feedback from the CEO, the CEO’s Direct Reports, the Medical Executive Committee and the members of the Board regarding the CEO’s performance. Over the last four years, the Board asked the same questions so that annual feedback could be compared over the years. Although the previous CEO received an annual performance bonus at the beginning of his tenure, the Board eventually moved away from that model and considered annual salary increases at the time of the annual performance evaluation each year.

In March 2021, JB Reward Systems provided the Board a summary of the current state of CEO compensation at the national level. They stated:

There is a national trend occurring in the matter of executive compensation. As the average age of CEOs is younger, salary arrangements are also becoming simpler by focusing on salary and a straightforward conservative bonus opportunity based on business/financial, clinical, and community outcomes. Over the next two years, we expect ‘normal’ base salary growth and incentive plans that can pay 9%-15% (up to 40% with national and for-profit companies and those needing turnaround) based on performance.

Here are examples of emerging performance measures:
Cost of care efficiency
- Index combining value added for every $ of labor cost and material/support cost.
- Quality of care
- Physician, patient, and employee engagement

The offer of the CEO position that the Board of Directors extended to Ms. Lawhorne did not include a performance bonus. However, the offer did include the opportunity for engagement with an executive coach during the first year of Ms. Lawhorne’s service as the CEO. Currently, on behalf of the Board, I am in the process of exploring an executive coaching relationship for Ms. Lawhorne that would likely include the following components:

- A 12-month engagement with an executive coach specializing in healthcare
- An initial competency based self-assessment by Ms. Lawhorne and development of annual goals based on the results of the self-assessment
- An initial kick off meeting between Ms. Lawhorne and the executive coach of 1.5 – 2 days, followed quarterly day-long follow up meetings
- Coaching calls approximately every two weeks
- Quarterly sponsor calls where the executive coach and Ms. Lawhorne will provide updates to the Board President regarding the progress toward meeting the goals
- The executive coach interviewing up to 12 stakeholders approximately 3-6 months into the engagement so that Ms. Lawhorne can get feedback regarding her progress leading the hospital form key stakeholders.

After this coaching arrangement is finalized, the Board will have fulfilled the obligation to provide Ms. Lawhorne an executive coach that was contained in the employment offer. Additionally, the Board will have provided Ms. Lawhorne with an opportunity to receive professional coaching as she steps into this role with extensive knowledge of the hospital and healthcare in Southeast Alaska, but no prior CEO experience. Finally, the executive coaching process also provides a manner in which goals can be developed for Ms. Lawhorne in her first year as the CEO and the Board can receive regular feedback on the accomplishment of those goals. After a year in the CEO position, the Board will be able to use this information to formally conduct a CEO evaluation and then decide how to set goals and compensation for Ms. Lawhorne as she enters into her second year of employment as the CEO.
PHYSICIAN’S DUTIES AND RESPONSIBILITIES
Behavioral Health Pediatrician

Bartlett Behavioral Health and Addiction Medicine is looking to add a pediatrician with interest and specific experience in Behavioral Health and Developmental Pediatrics to join our outpatient services department.

This provider will be an integral part of a multidisciplinary team which is committed to provide timely, person-centered, culturally humble behavioral health services to children and families. The team consists of adult and child psychiatrists, psychiatric nurse practitioners, nurses, master’s level therapists and community navigators.

Provider will have an understanding of the complex interplay between behavioral health, developmental disabilities and medical illness as well as social determinants of health.

Provider will participate in regularly scheduled team meetings for children and families engaged in Crisis Intervention Services (CIS) and Bartlett Outpatient Psychiatric Services (BOPS), and be available for consultation with our psychiatrists, psychiatric nurse practitioners, and therapists, as well as other members
of the patient and family’s health care team.

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, and work with care team to develop appropriate treatment strategies.

6. Work with navigators to liaison with primary care providers in the community, improving access to both medical and behavioral health services.

7. Work with navigators and other providers to facilitate smooth transitions between different levels of care

8. Participate in the Behavioral Health QI committee

9. Regularly attend other medical staff committees, as negotiated with Chief of Staff.

10. Contributes to an efficient operation of the practice, completing and submitting billing and completing documentation in a timely manner.

11. 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.