

# Bartlett Regional Hospital

3260 Hospital Drive, Juneau, Alaska 99801 907.796.8900 [www.bartlethospital.org](http://www.bartlethospital.org)

Planning Committee Meeting Minutes  
May 5, 2022 – 12:00 p.m. Zoom Videoconference

**Called to order at 12:01 p.m., by Planning Committee Chair, Brenda Knapp.**

**PLANNING COMMITTEE\* AND BOARD MEMBERS PRESENT:** Brenda Knapp\*, Lance Stevens\*, Mark Johnson\*, Deb Johnston, Hal Geiger, Iola Young and Kenny Solomon-Gross

**ALSO PRESENT:** Jerel Humphrey, Robert Tyk, Kim McDowell, Dallas Hargrave, Marc Walker, Jeanne Rynne, Claire Stremple and Anita Moffitt

**APPROVAL OF AGENDA – Mr. Stevens made a MOTION to approve the agenda as written. Mr. Johnson seconded. There being no objections, agenda approved.**

**PUBLIC PARTICIPATION – None**

**APPROVAL OF THE MINUTES – Mr. Johnson made a MOTION to approve the minutes from the April 1, 2022 Planning Committee meeting. Mr. Stevens seconded. There being no objections, minutes approved as presented.**

**MASTER FACILITY PLAN AND TIMELINE –** Mr. Walker reported the facility plan and timeline, included in the packet, is up to date. Color coding clarified at Ms. Knapp's request: Green represents small projects less than \$500,000, yellow are projects between \$500 Thousand and \$2 Million, orange are projects \$2 Million to \$10 Million and red are major projects greater than \$10 Million. We are still in design for power conditioning and surge suppression.

**CURRENT PROJECTS UPDATE –** Mr. Walker provided an overview of the project update list included in the packet. He reported the water main and site improvement project is well underway and moving along quicker than anticipated. Parking is very limited. The ASU-11 Endoscopy fan project is ongoing. RRC siding and window replacement should be finished by the end of this month. Doors are due to be here mid to late July for the door replacement project and will be installed in phases. Surge suppression project is close to going out to bid. CT/MRI 100% bid documents due May 9<sup>th</sup>. ED addition and renovation meetings ongoing. Underground fuel line project will soon go out to bid with caveats that work cannot start until after the site work is complete. The windows and siding replacement of the administration building is an ongoing project that will drag out over the next year. The hospitalist sleep room renovation is on hold until the fall.

**BOPS / CRISIS STABILIZATION PROJECT UPDATE –** Ms. Rynne reported construction is moving along very well. Steel erection completed this week, interior framing going in, main roof dried in yesterday. The only roofing left to do is the entry canopy. Some utilities are being relocated.

**ED EXPANSION PROJECT UPDATE -** Ms. Rynne reported we are moving along through design, concept drawing submittals due to be received today. Cost estimate with concept drawing expected next week. She presented a procurement methodology for the project and requests consideration of approval by the committee. CBJ procurement code allows alternative public works upon approval by the Assembly. It might be beneficial to use this methodology for this project. A recommendation to use the GC/CM (General Contractor/Construction Manager) approach was made. This allows a general contractor to come on board early to give input on phasing and provide pricing as we work our way through design. Renovation of the ED is a complex job and will need to be done in phases to cause as little disruption in operations as possible. GC/CM methodology allows for a qualifications based selection of the contractor versus taking the lowest bidder. It allows prices to be locked in on scopes of work for trades earlier in the project and spreads the risk of

construction escalation over time. Senior Leadership has reviewed this methodology and recommends committee approval. Because using this option requires an ordinance to be passed by the assembly, it also needs to go to Public Works and Facility Committee and the Assembly for approval. She noted the best time to bring this procurement method on board is between schematic design (July 11<sup>th</sup>) and design development (September). Architect is working on the components of the Certificate of Need (CON) application related to the design. Nathan Overson is in conversations with the State about the CON. Ms. Knapp obtained confirmation that use of this alternate procurement methodology is determined on a case by case basis. At Mr. Solomon-Gross' request, Ms. Rynne explained the differences between the options presented in the packet. It was agreed that it would be prudent to go through Bartlett's process first, as outlined in option 2. There is an RFP (Request for Proposal) specifically for receiving GC/CM pre-construction services. Ms. Johnston noted she has successfully used this methodology in the past and expressed her support. Mr. Geiger also expressed support of this methodology and enquired why this is a board issue and not a management issue. Requests to go before the Assembly on behalf of BRH need board approval. Mr. Stevens expressed support of the methodology.

***MOTION by Mr. Stevens to accept option number 2 and the timeline it represents for this project. Mr. Johnson seconded. There being no objection, MOTION approved.*** This will now be presented to the board for approval.

**Bartlett Surgery and Specialty Clinic (BSSC) Relocation** – Mr. Humphrey reported SEARHC has agreed to extend the BSSC lease for 3 months. BSSC will have a semi-permanent home in the Juneau Medical Center building when behavioral health services move into their new space.

**Prioritization of Strategic Goal Initiatives** – Ms. Knapp reported she and Mr. Humphrey met to discuss the strategic initiatives assigned to Planning. Some initiatives can be worked on simultaneously but staff input and recommendations are needed. Mr. Humphrey noted we are already working on expanding workforce development programs and he has had discussions with Mr. Tyk about exploring the feasibility of a hospital run clinic. A return on investment evaluation will be done on any new services brought on. Expansion or affiliation will be Board directed with an expectation that the facility would have telemedicine capabilities to help build BRH's telemedicine capabilities. A Business Development Analyst is coming on board in a couple of months and will be expected to run with this project when an affiliate is identified. Ms. Knapp agreed that it makes sense that expanding workforce development programs rests with HR and the clinical staff; they can advise the board on progress. Mr. Tyk is to provide input about the feasibility and practicality of hospital run clinics and employed physicians. Ms. Knapp suggests committee members review the recommendations of the affiliation study conducted by ECG in 2020. Mr. Stevens said it's important to evaluate what we're already doing. The evaluation of clinics is a great step and we should use Mr. Tyk's expertise while we have it. We are 2-3 months away from hiring a CEO. The CEO and the Business Development Analyst are going to drive the affiliations and buildouts process so it would be wise to pause for now to get their input in the early process. Mr. Tyk cautions that small independent hospitals need to be careful when it affiliates with a large organization. Historically, small facilities become gobbled up and become a feeder to the bigger hospital. It is important for the board to take time and effort to make sure both parties benefit. Ms. Knapp and Mr. Johnson agree with Mr. Tyk. Mr. Johnson also agrees that it would be good to pause until a new CEO is in place. He also noted it wouldn't hurt to explore the federally funded qualified health center issue but it isn't easy to justify the need for one. Brief discussion held about whether Front Street Clinic qualified as one or not.

**Comments** – Mr. Geiger requested a COVID update. Ms. McDowell reported 2 positive patients in house and 15 positive employees. BRH has taken over CCFR COVID testing and it is now being done on campus. Supplies are good. COVID case numbers keep increasing in the community. The current strains are more transmissible but have less impact, partly due to high vaccination rates. BRH has had no critically ill COVID patients in a while. COVID updates will continue to be provided at monthly board meetings as a standing agenda item but not at committee meetings.

**Next Meeting** – To be determined. Ms. Knapp will be out of town June 3<sup>rd</sup>. Mr. Stevens will no longer be on the board. Ms. Knapp will work with Ms. Moffitt to identify a date and will speak with Mr. Solomon-Gross about replacing Mr. Stevens on the committee.

**Adjourned** – 12:54 pm.

