

Bartlett Regional Hospital

Minutes
BOARD OF DIRECTORS MEETING
March 22, 2022 – 5:30 p.m.
BRH Zoom videoconference

CALL TO ORDER – Meeting called to order at 5:32 p.m. by Kenny Solomon-Gross, Board President. Attendance noted.

BOARD MEMBERS PRESENT (*Zoom Participants in Italics*)

Kenny Solomon-Gross, President	<i>Rosemary Hagevig, Vice President</i>	<i>Brenda Knapp</i>
Lance Stevens	<i>Hal Geiger</i>	<i>Deborah Johnston</i>
Iola Young	<i>Lindy Jones, MD</i>	

ABSENT – Mark Johnson, Secretary

ALSO PRESENT (*Zoom Participants in Italics*)

<i>Jerel Humphrey, Interim CEO</i>	<i>Robert Tyk, Interim CFO</i>	<i>Kim McDowell, CCO</i>
<i>Dallas Hargrave, HR Director</i>	<i>Karen Forrest, Interim CBHO</i>	<i>Barbara Nault, Legal Advisor</i>
<i>Joseph Roth, MD, COS</i>	<i>Erin Hardin, Dir. Marketing/Strategy</i>	<i>Anita Moffitt, Executive Assistant</i>

APPROVE AGENDA – **MOTION** by Mr. Stevens to approve the agenda as written. Ms. Young seconded. There being no objections, agenda approved.

PUBLIC PARTICIPATION – None

CONSENT AGENDA - **MOTION** by Mr. Stevens to approve the consent agenda as presented. Ms. Young seconded. There being no objection, the February 22, 2022 Board of Directors minutes and January 2022 Financials approved.

OLD BUSINESS

Covid-19 Update - Ms. McDowell reported 3 Covid positive patients in-house, none on ventilators, and 3 staff members out on Covid restrictions. Community case levels continue to drop. PPE and staffing levels are stable.

NEW BUSINESS

FY23 Budget Review – Mr. Tyk reported the FY23 budget, included in the packet was reviewed and approved by the Finance Committee at the March 16th meeting. Discussed at that meeting: Increase in gross patient revenues and decrease in other operating revenues; Federal money received over the last couple of years no longer available; Decrease in contract labor and increase in salary and wages. The bottom line for this budget is 4 times greater than what is projected for this current fiscal year. He noted that budgets are developed based on where you've been and built on those numbers. Because of Covid, it has been difficult to figure out where we've been. We've given it our best shot at coming up with a conservative budget. The \$5.8 M capital plan was also included in the budget. \$2.6 M of this is for the MRI project and another \$818,000 earmarked for IT projects. (58% of the capital budget is just within those two areas.) After Board approval of the budget, it will be submitted for the Assembly's approval on April 20th. In response to Ms. Young's question about available fund balance usage for large expenditures that are not bonded, Mr. Tyk explained the available fund balance is an accumulation of the organization's profitability over its life, not necessarily cash. Some projects may require an appropriation to be submitted to the Assembly for additional funding if costs are more than anticipated. In response to Mr. Geiger's request for clarification, it was explained that an appropriation to the Assembly would be asking their permission to use the funds out of our own

reserves. Ms. Hale noted this is correct and the Assembly will want to know why the costs have gone up when an appropriation is submitted. Ms. Knapp observed that as a governmental entity, we would need permission from the Assembly to receive excess funds as well. This is an account mechanism to make sure all money is accounted for. Mr. Tyk is working with management to look at where BRH expends all of its funds. BRH needs to make as much from operations as it possibly can and not rely on funds that might go away. ***MOTION by Ms. Johnston to approve and forward the FY23 budget to the Assembly for approval at their April meeting. Mr. Stevens seconded. There being no objection, MOTION approved.***

MEDICAL STAFF REPORT – Dr. Roth reported the following: He met with Mr. Humphrey today, as he does every month to discuss issues. 2) In tonight’s packet, there is an action item for Medical Staff bylaw changes. 3) He requests consideration of a \$10,000 donation to the Alaska State Medical Association (ASMA) to support its Physician Health Committee. This committee takes care of physicians with mental health and substance abuse issues. BRH has supported this in the past. Physicians in the program do pay a fee but some are out of work. ASMA relies on hospital support to keep this service going. 4) He acknowledged that the Physician Recruitment Committee is a Board committee, not a Medical Staff committee. Proposed changes to the makeup of the Physician Recruitment Committee, allowing only two physicians on the committee, does not feel like a collaborative process to Medical Staff. 5) Work continues to get Meditech support for the physicians. 6) Physicians are very tired after this pandemic and are refusing to chair committees due to the amount of time involved. He believes the hospital is going to have to start paying physicians for their roles on committees. ***MOTION by Mr. Stevens to approve the Medical staff bylaws revisions as presented. Ms. Young seconded. There being no objection, MOTION approved.***

COMMITTEE REPORTS:

Compliance Committee - Ms. Young noted the draft minutes from the March 2, 2022 annual compliance training meeting in the packet accurately reflect what happened in the meeting. She noted it was great to see so many staff members also in attendance.

Planning Committee – Draft minutes from the March 4th meeting in the packet. Ms. Knapp reported that there were updates on the current projects, master facility plan and timelines. Ms. Rynne had reported problems with city wide project bids coming in much higher than original estimates due to supply chain issues and increased material costs. The BOPS/Crisis Stabilization project is on schedule, final concrete pour completed and steel erected. The ED expansion project cost estimates have increased dramatically from 2021 to 2022. Several items have been sent to the Finance Committee for financing consideration. A site map for consideration of parking garage options, provided by Rorie Watt, had been reviewed. He had suggested moving ahead with a survey, geotechnical work and concept planning for these areas if feasible. Estimated cost of survey is \$150,000. The committee supports the idea of the study and asks that the Finance Committee find funding for it. Possible relocation site of the Bartlett Surgery and Specialty Clinic (BSSC) had been discussed. Using the second floor of the BOPS/Crisis Stabilization building upon opening, to expand behavioral health services if the BSSC doesn’t need to temporarily relocate there was also discussed. Cost and revenue estimates for changes to the behavioral health building to be brought to the April 1st Planning Committee meeting.

Quality Committee – Draft minutes from the March 9, 2022 meeting in the packet. Dr. Jones reported that the committee is looking at new quality measures with help from the Alaska State Hospital and Nursing Home Association (ASHNHA).

Finance Committee – Draft minutes from the March 11th meeting in the packet. Ms. Johnston reported the minutes accurately reflect the discussions from the meeting. The biggest discussion held was cost overages for the ED expansion project and funding options. It was agreed there was not enough information to make a recommendation. The Planning Committee and SLT will need to discuss project changes before bringing them back to Finance. Funding for the parking study did not make it on the agenda but will be discussed at the April 8th meeting. Ms. Knapp requests Finance identify a target cost allocation for the ED renovation project and that staff identify what can be scaled back. Ms. McDowell, staff

and CBJ architects met today to work on proposed changes. 3 design change options will be thoroughly reviewed before presenting at the April 1st Planning meeting. Ms. Knapp encouraged Ms. Johnston and Mr. Stevens to attend that meeting.

Governance Committee – Draft minutes from the March 15th meeting in the packet. Mr. Geiger reported the committee worked on drafting bylaw language regarding the Physician Recruitment Committee. The committee will meet again in May to finalize those changes. He requested anyone with feedback to present it to the committee before the next meeting. Mr. Solomon-Gross acknowledged the hard work Mr. Geiger has put into this project. He encouraged Dr. Roth and staff to provide input as well.

Ad-Hoc Finance Committee – Draft minutes from the March 16th meeting in the packet. Ms. Johnston noted that Mr. Tyk covered the FY23 budget information earlier this evening. She reported appreciation had been expressed at the meeting for the level of detail reflected in the budget and the inclusion of the summary page at the end. This has not been included in the past. She thanked Mr. Tyk and staff for pulling this budget together.

MANAGEMENT REPORTS:

Legal Report – Ms. Nault reported that since the last meeting, her firm has facilitated the hospital’s engagement of a Certificate of Need (CON) consultant. Worked on advise matters regarding expense documentation required for a forgivable loan made to a relocating physician and provided advise on the provision of detox and withdrawal management services in alternative locations within the hospital. Provided recommendation for corrective actions related to the hospital’s diabetes prevention program. Held a call with general counsel at SEARHC regarding a medical resident affiliation agreement. Worked with the compliance director on a memorandum of understanding between BRH and CCFR with respect to new hire and annual certification fitness for duty lab services. Participated in a clinical and legal discussion of parameters for updating the hospital’s policy regarding patient use of unprescribed substances. Continues to provide support to pharmacy and compliance with respect to the 340B contract pharmacy matter. Consulted with attorney at Horty Springer about practical matters and concerns about Board review of Medical Staff policies; she will come back to the next board meeting with options for consideration of how to move forward with this matter.

HR Report – Mr. Hargrave reported he and Mr. Solomon-Gross met with the BE Smith recruitment team earlier in the day to receive an update. Mick Ruel (BE Smith recruiter) held 22 meetings on March 3rd and 4th, some with multiple people, to obtain feedback from stakeholders, staff and physicians about the organization’s culture and the desired attributes of a CEO. The message was very consistent throughout the meetings. This information is being used to screen applicants and to compile a list of candidates for the CEO Recruitment Committee to interview. The committee will make recommendations to the board as to which candidates should move to the next round of interviews. Mr. Hargrave also reported that Ms. Forrest has a little flexibility but will likely leave the Interim Chief Behavioral Health Officer (CBHO) position before the new CEO is hired. He is working with Mr. Humphrey to recruit a permanent CBHO.

CCO Report – No questions or comments.

CBHO Report – Ms. Forrest reported Rainforest Recovery Center (RRC) is working towards opening up fully and be able to serve up to 11 patients while following Covid protocols. The Mental Health Unit (MHU) had to reduce its census last week due to staffing shortages. We are still accepting admit patients from around Southeast but have put a stop to accepting statewide admits for now. BOPS continues to see an increase in patients. Several meetings have been held with the Alaska Mental Health Trust Authority about the “Crisis Now” model. They are interested in providing BRH technical assistance to implement this model in our community. There have been collaborative meetings about crisis response with JPD, CCFR, JAMHI and other organizations in the community to discuss how best to develop these services. In response to Ms. Young’s question about staffing, Ms. Forrest reported the nursing shortage is a battle and we are trying to use our nurses as effectively as possible across the hospital. In response to Mr. Solomon-Gross, she reported if a bed is not available for an involuntary committed patient, we must hold them in the ED or find another location to take them. Internal protocols have been developed with CBJ Law’s assistance to ensure we are following the civil commitment process. Dr. Jones noted that we have not had any psychiatric hold patients in a long time.

CFO Report – Mr. Tyk stated he is very impressed with the people he has been working over the past month. His direct reports are very anxious for good direction and leadership and really want to do the right thing. Mr. Solomon-Gross thanked him for being here and providing good leadership.

CEO Report – Mr. Humphrey reported that he had reached out to Charles Clement, CEO of SEARHC to talk about collaboration between BRH and SEARHC. He had also requested a 6-month extension of the lease agreement for the BSSC space. An answer will be forthcoming. He then introduced Erin Hardin, Director of Marketing and Strategy. Ms. Hardin provided background information about herself. She was born and raised in Juneau. She spent the last decade in communications at the state government level and is excited to bring her experience to healthcare. Marketing update briefs have been included in the two most recent CEO reports. She is currently in a discovery phase to get an understanding of what the status quo is at BRH and to help her make informed decisions going forward. She has included a survey for the public in the most recent edition of House Calls to find out if House Calls is a useful communication tool. Surveys will also be sent to staff and Board to solicit feedback about communications. She is excited to develop a strategy on how to get BRH's name out into the community. She expressed appreciation for the robust policies in place at BRH regarding media relations and patient privacy. These policies are posted on the BRH website. All media requests are to be routed through her. Mr. Solomon-Gross expressed appreciation for having Ms. Hardin on staff and for all of her work so far. He looks forward to working with her and getting the information out about the great things at BRH.

Mr. Geiger noted that a formal request from ASMA or Dr. Roth should be sent to Mr. Humphrey requesting a donation to support the Physician Health Committee. This supports falls within the hospital's mission and is within the CEO's authority to approve. Board approval is not required but Board support was expressed. Mr. Solomon-Gross thanked Mr. Humphrey for speaking to Mr. Clement and looks forward to hearing his response.

LIAISON REPORT – Ms. Hale reported that the Assembly is negotiating union contracts. The EOC is demobilizing at the end of April. Current mitigation measures also end at the end of April and there are no plans to put anything else in place. Federal funding is ending and there are no more testing funds for uninsured patients. She commended the EOC and BRH staff that participated in the EOC, for doing such an outstanding job of helping Juneau through this pandemic.

PRESIDENT REPORT – Mr. Solomon-Gross reminded board members about the Employee Service Awards Ceremony and asked that anyone that has not sent an RSVP to Ms. Moffitt to please do so. He also requested feedback regarding the strategic planning initiatives ownership and prioritization be sent. Board members that have not yet confirmed whether they plan to attend the Leadership Conference in September or not are asked to do so. In response to Mr. Stevens' inquiry, members of the Senior Leadership Team will also be offered the opportunity to attend the conference.

BOARD CALENDAR – April calendar reviewed. Mr. Solomon-Gross and Mr. Johnson will be out of town and may be unable to attend the Planning Committee meeting on April 1st. Mr. Solomon-Gross and Ms. Young will be out of town and unable to attend the April 26th Board meeting; Mr. Stevens will chair the meeting.

BOARD COMMENTS AND QUESTIONS – Ms. Moffitt reminded Board members to submit their compliance training attestations if they have not yet done so.

Mr. Solomon-Gross called for a 5-minute break at 7:00 p.m. Meeting resumed at 7:05 p.m.

EXECUTIVE SESSION – *MOTION by Mr. Stevens to recess into executive session to discuss several matters as written in the agenda:*

- *Those which by law, municipal charter, or ordinance are required to be confidential or involve consideration of records that are not subject to public disclosure, specifically the Credentialing report, Medical Staff Meeting minutes and patient safety dashboard.*

And

- *To discuss possible BRH litigation, specifically a candid discussion of facts and litigation strategies with the BRH and Municipal attorney. (Unnecessary staff and Medical Chief of staff may be excused from this portion of the session.)*

And

- *To discuss information presented that the immediate knowledge of which would clearly have an adverse effect upon the finances of BRH; that being a discussion about campus planning. (Unnecessary staff and Medical Chief of staff may be excused from this portion of the session.)*

Ms. Young seconded. The Board entered executive session at 7:06 p.m. They returned to regular session at 7:31 p.m.

MOTION by Ms. Hagevig to approve the credentialing report as presented. Mr. Stevens seconded. There being no objections, credentialing report approved.

ADJOURNMENT: 7:33 p.m.

NEXT MEETING: 5:30 p.m. – Tuesday, April 26, 2022