# **Bartlett Regional Hospital**

#### **AGENDA** PLANNING COMMITTEE MEETING Friday, May 07, 2021 – 12:00 p.m. **Bartlett Regional Hospital Zoom Video Conference**

Public may follow the meeting via the following link <a href="https://bartletthospital.zoom.us/j/94747501805">https://bartletthospital.zoom.us/j/94747501805</a>

#### or call 1-253-215-8782 and enter webinar ID 947 4750 1805

- I. **CALL TO ORDER** II. **PUBLIC COMMENT** III. APPROVAL OF THE MINUTES March 12, 2021 Draft Planning Committee Meeting Minutes (Pg.2)**OLD BUSINESS** IV. 1. COVID status Master Facility Plan Update 3. Current Projects Status (Pg.5)a) Road Project (Hospital Dr.) b) ED Ventilation c) ASU-11/Endo Fan d) Physician Call Room e) ASU 1 Conversion to Glycol f) Power Conditioning 4. Molecular Lab Update V. **NEW BUSINESS** 1. BOPS/Crisis Stabilization Project – Bradley Grigg

Project Execution Memo (Pg.6)

- 2. Telehealth Billy Gardner
- VI. **FUTURE AGENDA ITEMS** 1. EHR/EMR

**COMMENTS** 

- VIII. **NEXT MEETING** 
  - IX. **ADJOURN**

VII.



## **Bartlett Regional Hospital**

3260 Hospital Drive, Juneau, Alaska 99801 907.796.8900 www.bartletthospital.org

Planning Committee Meeting Minutes
March 12, 2021 – 12:00 p.m.
Bartlett Regional Hospital Boardroom / Zoom Videoconference

Called to order at 12:00 p.m., by Planning Committee Chair, Lance Stevens.

**Planning Committee\* and Board Members:** \*Lance Stevens, \*Hal Geiger, Rosemary Hagevig, and Brenda Knapp.

**Also Present:** Kevin Benson, Billy Gardner, Bradley Grigg, Rose Lawhorne, Marc Walker, Gail Moorehead, Anita Moffitt, Nathan Coffee, Jeanne Rynne, Michelle Hale and Rachael Byrd

#### **PUBLIC PARTICIPATION** – None

APPROVAL OF THE MINUTES – Mr. Geiger made a MOTION to approve the minutes from February 12, 2021 Planning Committee meeting. There being no objections, minutes approved.

BRH PLANNING COMMITTEE MEETING INVITATION TO CBJ - An invitation to attend today's meeting had been sent to Mayor Weldon, Michelle Hale and Rorie Watt to discuss Bartlett's role in Community Health. It has been determined that a separate meeting, to include the new CEO, will be held to discuss this topic. Ms. Hale felt the invitation had been unclear about what was to be achieved and requests clearer communications in the future. Mr. Stevens stated that Community Health and Bartlett's role had been raised as a concern in the community and is part of the goals of the Assembly. BRH has not received guidance and what the expectations are. The Assembly and BRH need to work together to develop a plan to meet the community needs. Ms. Knapp noted that CBJ had a Health Department in the past, separate from State's Health Department and the hospital. They provided community oriented public health services such as vaccinations and ran its own mental health center. She suggests a historical look at what that Health Department used to provide and see if what the city is feeling a lack of now, is something in that arena. Ms. Hagevig highlighted reasons the department was eliminated and agrees that there may have been some significant services that fell through the cracks when it closed. She feels that BRH has done a great job at stepping up to the plate to fill the needs where it can and suggests an analysis be conducted to help identify the needs of the community. Ms. Hale encourages the Board to ask her, as the CBJ liaison, what the thought was when the Assembly came up with this goal. She said the Assembly wants to make sure that BRH is coordinating with other entities for all of the community services provided. They also want to understand what voids there are, who should be doing what and how to communicate that among all the parties. Ms. Knapp suggests specific examples of what functions or work products that the assembly feel are missing would be very helpful.

**COVID STATUS** – Ms. Moorehead provided a COVID status update while participating in today's community vaccination clinic at Centennial Hall. In a partnership with SEARHC, 2,200 doses are to be given today and tomorrow. Another 2,000 doses will be given next week during the clinics scheduled to



take place Monday through Saturday. We have received an extra allocation of 1,100 doses from the State and will hold another clinic on March 23<sup>rd</sup>. Everyone over the age of 16 is now eligible to receive a vaccine. We have 250–300 community volunteers helping with these clinics. Approximately 75% of BRH staff are vaccinated at this time and approximately 30% of the community will be vaccinated by the end of March. The one dose, Johnson and Johnson vaccine is starting to be administered in the community. There is a vaccination clinic for veterans scheduled to take place at the Coast Guard station on Saturday. A brief discussion was held about why people have not received vaccines yet. Juneau is the leader in Alaska and Alaska is leading the nation in vaccinations.

MASTER FACILITY PLAN UPDATE – Mr. Gardner provided an update to the changes made to the project priority list. He reported that the Board approved combining the Emergency Department (ED) renovation with the ventilation upgrade at the last Board meeting. This is reflected in the revised Master Facility Plan under C-1. In addition, the Board had also approved \$425,000 to begin the design phase of the ED addition, ventilation upgrade. Nathan Coffee has requested an action from the Public Works and Facilities Committee to approve and request appropriation of \$425,000 from the Assembly for these projects.

**CURRENT PROJECTS STATUS -** Mr. Gardner reported the Gantt chart has been adjusted due to the changes and reminded everyone that the master facility plan and Gantt chart are fluid documents. He then reported the following updates on ongoing projects:

- ED Waiting Area/PAS Window was completed and need for changes were identified. Maintenance has met with the department and is currently getting prices for the requested changes. The work will be done by contractors and BRH maintenance staff.
- Underground fuel line replacement Currently being worked on by CBJ Engineering. Taku Engineering was awarded the contract. A meeting will be held next week to discuss timeline.
- ASU-1 heating oil conversion to glycol Bid opened up on March 9<sup>th</sup>. Schmolck Mechanical was awarded the contract.
- Fire door replacement and door upgrades for security CBJ has set up an account for this project under deferred maintenance dollars. Professional Services Term Contract Solicitation has gone out with a response request by March 11<sup>th</sup>.

COBAS 6800 ROCHE ANALYZER/ MASS TESTING UPDATE – Mr. Gardner reported that this analyzer has had minor breakdowns on two occasions. BRH staff was able to repair equipment the first time but not the second time. A technician had to be flown in to make repairs. Cepheid Analyzer was used to process tests during the downtime. Legal has finished the review of contracts to establish relationships with other entities needing this testing. We have tried to establish contracts with Beacon, Coeur Mining and UnCruise Adventures but they are not returning our calls. We are also reaching out to local schools and Capstone and will continue to try to offer these services to other outside entities. We are currently running about 50 samples a day. Ms. Hale will speak to Ms. Cosgrove to try to get people on-board. There is a lot of concern about the drop in testing. It was noted that some medical clinics in town are able to provide testing. In response to Ms. Hagevig's questions about BRH reaching out to other communities about providing testing and looking at other applications for this testing equipment, Mr. Gardner responded yes, we have reached out. As far as other testing, it would cost BRH more to run the tests this machine is capable of than it would to send them out.

**ASU-11 FAN UPDATE** – This ventilation system controls humidity, pressure, air exchanges and temperatures in the OR. The old fan is being replaced due to end of life and inability to get repair parts. Replacement equipment has started to arrive. A thirty day notice will be given to the OR Director when all parts are here to give staff and surgeons notice about down time to conduct the work. The OR will be



down for three days, Saturday and Sunday accounting for two of them. This project is on schedule for the estimated completion date of April 13<sup>th</sup>. The C-section room will be available for emergency surgeries during the downtime.

STRESS TEST VOLUMES – There is an average of 15 stress tests performed monthly. Renovation to stress test space is being conducted because it is too small to accommodate the multiple people in the room with the patient undergoing treadmill stress testing to meet social distancing requirements.

**POWER CONDITIONER UPDATE** – Nathan Coffee collaborated with CBJ, BRH and outside vendors to present the plan included in the packet. Recent power surges have caused significant damage throughout the hospital making this a high priority project. 9 surge suppression devices will be installed by the end of March at selected power panels while work with PDC mechanical will continue to address the larger issue. These surge protectors will protect equipment in all patient care areas. Power conditioning options for phase two will be presented after a thorough investigation by PDC. Phase one of this project is not to exceed \$50K. As the scope of work is not yet defined, a timeline cannot be provided.

BOPS / CRISIS STABILIZATION PROJECT UPDATE – Mr. Grigg reported that we had a proposal out for bid for this project. Feedback about original timeframe of completion in the summer of 2022 suggests this is not realistic due to shipping delays and supply shortages. The price of wood has increased by 170% since April 2020 making this project more expensive. Mr. Coffee reported that lead time on engineered beams are now months as opposed to weeks. To address this, a second base bid option has been added to extend the contract approximately 5 ½ months. This would move completion of the project to December 2022. We anticipate bids to come in high but hope to award one by using deductive alternates. Discussions with the selected contractor will be held to help identify less expensive options to save funds while not compromising functionality of the facility. The bid is scheduled to open March 16<sup>th</sup>. So as not to have to pull the project and redesign the building, the bid has to be awarded before alternate options are discussed.

**REVIEW EXISTING AND PLANNED COMMUNITY HEALTH INITIATIVES** – BRH staff will review what is currently being done by the hospital and will share this information with the Planning Committee. This information will be shared with CBJ representatives when the meeting to discuss community health needs is held.

Future Agenda Items: Nothing noted

**Comments**: Mr. Stevens thanked everybody for their hard work. Discussion held to determine a new day for future meetings. The third Friday of each month does not work due to unavailable space for in person meetings. It was determined that the Planning Committee meetings should be held before the monthly Finance meetings to help the flow of the approval process. The first Friday of each month was identified as a good day. Ms. Moffitt will confirm this day and time will work for Ms. Young.

Next meeting: 12:00pm, Friday – April 2<sup>nd</sup>

**Adjourned** – 12:59 p.m.



#### Project List from April 2021 COO Board Report

#### **Maintenance Department (Marc Walker)**

- ED Ortho/ Trauma rooms: Professional Services contract in place and design team is working through the design. Project estimated completion date updated to August 2 2021.
- Cardiac Rehab space expansion: The design team is working through the final details.
- ASU-11/Endo Fan: The fan installation was completed. The week of 04/19 balancing will occur.
- Physician Call room update: Nothwind Archicts have been awarded the Professional Services Contract. Design is underway.
- Side Walk Phase 1 Replacement: Currently being worked on by CBJ Engineering and Dowl. Meeting with BRH on the January 6<sup>th</sup> to confirm the project scope. Construction estimate \$1.2M, Professional Services \$120K (Deferred Maintenance) Estimated Bid first week of May 2021. Construction 4 months middle of summer 2021. The project will be phased and continue in the summer of 2022.
- Underground Fuel Line Replacement: Currently being worked on by CBJ Engineering. Construction estimate \$120K, Professional Services \$25K (Deferred Maintenance). Construction 2 months' summer 2021. Professional Services Contract awarded to Taku Engineering. A site visit was conducted by Taku Engineering and a project scope was determined. The professional services team is currently working on design.
- New South Entrance: Currently being worked on by CBJ Engineering and Dowl.
- Hospital Drive: Construction is currently underway.
- CSR Equipment upgrade: Awaiting Final Design from PDC Engineers. PDC Working with the OR Director to finalize equipment lists.
- ASU 1 Conversion to Glycol: 100% drawings completed 12/21. Construction estimate \$125K, Professional Services estimate \$25K (Deferred Maintenance). Contract awarded to Schmolck Mechanical. Current estimated completion July 2021.
- RRC Siding and Window Replacement: Project awarded to Island Contractors.
- Behavioral Health Facility: Awarded to Dawson Construction. Demolition of the current BOPS Building tentatively scheduled for the week of April 26<sup>th</sup>.
- Fire Door Replacement and door upgrades for security: CBJ has set up an account for the
  project using BRH Deferred Maintenance Dollars for funding. JYW Architects has been
  awarded the Professional Services Contract for this project. An onsite visit has be
  conducted by the Design team and they are currently working through design and
  specifications.
- Power Conditioning: Phase one suppressors have been installed. A change order to add more suppression is currently being established. The design team will continue to develop the complete system that will likely include secondary suppressors and a system to clean up transitions to and from generator power.



### Engineering and Public Works Department

155 South Seward Street Juneau, Alaska 99801

Telephone: 586-0800 Facsimile: 463-2606

DATE: May 6, 2021

TO: Rose Lawhorne, Chief Executive Officer

Bartlett Regional Hospital

FROM: Rorie Watt, City Manager

SUBJECT: BRH Behavioral Health Facility

CBJ leadership has discussed how to best proceed with BRH's desire to add a floor to the new Behavioral Health Facility whose construction bid was recently awarded to Dawson Construction. Each approach has pro's and con's and balance the approval process with the understanding of construction cost, project schedule and details of the changed facility.

First, a little bit of procurement terminology. As everyone is aware, the CBJ Charter requires award of construction contracts to the lowest bidder. Subsequent to award, *Change Orders* are often made to change the scope of the bid work. Infrequently, *Supplemental Agreements* are made to add work that is outside the scope of the bid work. In this case, adding an additional floor would require a *Supplemental Agreement*; this action requires Assembly approval.

#### There are three potential paths as follows:

- 1. Execution of a series of incremental change orders and supplemental agreements to the construction contract. It is likely that two change orders and two supplemental agreements would be required to incorporate the additional floor into the construction contract. The first steps would be change orders for modifications to site work and concrete foundations. These could be executed without Assembly approval and keep the Contractor moving forward with the initial work. The second step would be a supplemental agreement for the structural changes associated with the additional floor. The third step would be a supplemental agreement for the rest of the changes (architectural, mechanical, electrical, etc.) associated with the additional floor. The pros of this option are that it keeps the Contractor moving forward without delay and allows procurement of materials for the structure to occur as soon as practical. The con of this approach is that the total cost of the additional floor is not known at the start of construction. This approach also allows BRH to be more involved in details of the changes to the project for a longer period of time.
- 2. Execute a single supplemental agreement to the construction contract. This process would include the same initial change orders to keep the project moving forward but a single supplemental agreement for all the additional costs would be executed once **ALL** the cost associated with the redesigned facility were defined by the Contractor. The pro of this approach is that BRH would know the total cost of the additional floor prior to executing any of the work. The cons of this approach is that it would likely lead to schedule delays and, since Contractor would not place any material orders until the price was agreed upon, would likely lead to increase in initial project cost even if the additional floor was not added.

3. Execute a single supplemental agreement to the construction contract in a similar manner to Option 2 above but charge Dawson Construction with *design and construction* of the alterations to the project. The pros of this approach is that BRH would know the total cost of the additional floor prior to executing any of the work and Dawson may be able to streamline the procurement/redesign schedule resulting in less delays. The cons of this approach is that Dawson is not a design firm so would likely contract with our design team to complete the design, thus adding an additional mark-up to the redesign cost, and it may not lead to any schedule benefit. A potential 3B option would be to agree to a guaranteed maximum price for the cost associated with design and construction of an additional floor and have Dawson bill on a T&M basis. This would allow BRH to have some assurance of overall cost prior to Dawson fully completing the design and pricing and may help avoid delays. In these options, BRH would have less certainty about project details and scheduling, more certainty (early) about cost.

There are, of course, subtle variants on these approaches.

#### **Recommendation:**

Our recommendation is to proceed with the approach detailed in Option 1. It appears to best balance the needs of construction schedule, cost and budget. I make this recommendation because I believe that the details of the facility are very high on BRH's priorities.