Bartlett Regional Hospital

Minutes BOARD OF DIRECTORS MEETING February 23, 2021 – 5:30 p.m. Zoom videoconference

CALL TO ORDER - Meeting called to order at 5:30 p.m. by Kenny Solomon-Gross, Board President

BOARD MEMBERS PRESENT

Kenny Solomon-Gross – President Rosemary Hagevig, Vice-President Mark Johnson, Secretary Brenda Knapp Lance Stevens Lindy Jones, MD

Iola Young Hal Geiger

ABSENT – Deb Johnston

ALSO PRESENT

Kevin Benson, Interim CEO/CFO Billy Gardner, COO Rose Lawhorne, CNO Bradley Grigg, CBHO Dallas Hargrave, HR Director Robert Palmer, City Attorney Barbara Nault, Legal Advisor Keegan Jackson, MD, COS Michelle Hale, CBJ Liaison Anita Moffitt, Executive Assistant Gail Moorehead, Quality Director Kris Muller (BRH Staff) Debbie Kesselring, BRH Staff Joy Neyhart, DO Joe Wanner (Guest) KRoseman (Guest) Jeremy Hsieh (Guest) LAJ New (Guest)

APPROVE AGENDA – MOTION by Ms. Knapp to approve the agenda as written. Ms. Hagevig seconded. There being no objections, agenda approved.

PUBLIC PARTICIPATION - None

CONSENT AGENDA - MOTION by Ms. Hagevig to approve the consent agenda as written. Mr. Johnson seconded. There being no objections, consent agenda approved.

NEW BUSINESS – None **OLD BUSINESS** – None

MEDICAL STAFF REPORT – Dr. Jackson reported that the upgrade to Meditech Expanse electronic medical record (EMR) was discussed at the February 2nd Medical Staff meeting. Go live date for this EMR system is Monday, March 1st. Upgrade happening due to end of support for Meditech 6.0 (our current version) and upgrade will also allow for the outpatient component for Behavioral Health to go live as well. Also discussed was the Emergency Department's (ED) continued use of T-Systems and when they would switch over to the same software system the rest of the hospital uses. Mr. Bill had expressed at the Medical Staff meeting that it is the expectation that the ED would move to the Meditech Expanse EMR system. Dr. Jones voiced concerns of switching to Meditech and questions if there is a better system available to help improve patient care. Brief discussion held about Bartlett's decision to choose Meditech over Cerner. It was noted that conversion to a new system is frustrating to learn and very costly in time and money. Affiliations with other organizations may offer more opportunities in our choice of EMR system. Ms. Knapp stated that this is a matter for the new CEO to consider. Dr. Jones and other ED staff will visit Island Hospital in Anacortes, WA to see Meditech Expanse in the ED setting. It was stated that BRH needs one

EMR system that is user friendly for all providers and assists in providing quality patient care. Dr. Jackson reported that the role of Oncology nurse practitioners was also discussed at the Medical Staff Meeting. Ms. Hagevig clarified that the Medical Staff Executive Committee is to review the revised policy for the Oncology Nurse Practitioner role before sending it back to the Credentials Committee.

COMMITTEE REPORTS:

CEO Recruitment Committee Meeting – Minutes from the 8 CEO Recruitment meetings held since the January Board of Directors meeting are in the packet.

Physician Recruitment Committee Meeting – Minutes from the February 9th meeting are in the packet. Mr. Johnson reported the following were discussed: Pediatric care and Pediatric care in behavioral health, General Surgery, Medical Oncology and Urology. Mr. Grigg and Dr. Gartenberg are to write a position description and scope of work for the position in behavioral health and will discuss at the March 15th meeting. Also to be discussed are updates on recruitment of another General Surgeon, Medical Oncologist, Psychiatrists and Urologist. We have received notice that Dr. Saltzman is closing his practice. Mr. Grigg stated that providing pediatric behavioral healthcare is not an effort to become a primary care provider and the job description will have clear caveats as set forth by the committee. Ms. Lawhorne reported that nurse practitioners are working in the outpatient Oncology Clinic and are working through the credentialing process for infusion therapy. There are no applicants for a Medical Oncologist at this time and recruitment efforts have been escalated. Ms. Knapp initiated discussion about the recruitment of Psychiatrists. Mr. Grigg reported that we are in the offer phase of recruitment of 2 full time Psychiatrist. He also noted that it is cheaper to hire 3 full time Psychiatrist than to hire 2 full time locums. Local pediatric providers have been included in discussions regarding pediatric care in behavioral health and will have the opportunity for review and comment on the job description to be provided by Mr. Grigg. Mr. Grigg noted the importance of having more staff psychiatrists on board to help develop a succession plan in anticipation of Dr. Gartenberg's future retirement.

Planning Committee Meeting – Minutes from the February 12th meeting are in the packet. Mr. Stevens reported that several items that came out of the Planning Committee meeting will be discussed during the Finance report. Two actions taken were: 1) Combining items C1-C3, ventilation upgrades in patient rooms and the ED addition, in the master facility plan into one project because of the overlapping nature of the projects. There is a request for facilitating the design phase process. 2) Four items were added to the project priority list; a physician call room, power conditioner, stress test room renovation and replacement of fire doors. Some of these projects are such a high priority they were presented to Finance to request money so we can start taking action. The rest of the committee updates are noted in the COO report. **Board Compliance and Audit Committee** – Minutes from the February 17th meeting are in the packet. Ms. Young reported that the third party review of our compliance program is just getting started. We expect the review to be completed in about 12 weeks. The committee will meet again after receiving the draft report. It is recommended to have a review every two to three years. The last one was conducted in 2017. This review did go through the RFP process. Governance Committee Meeting – The minutes from the February 18th meeting are in the packet. Ms. Knapp reported that the charges of the committee were reviewed. There are three major areas of responsibility. Two specific areas are the annual review of the bylaws and the board policy and procedure manual to identify necessary updates. Another area, not discussed is the responsibility for establishing criteria for the annual board self-evaluation of performance. We also look at board education and training needs. The third major area of responsibility of this committee is to keep apprised of current standards and regulations. This area will be important when we begin looking at affiliations with other organizations after the new CEO is hired. Reviews of the bylaws and policy and procedures manual will not begin until after mid-year as these were completed near the end of last year.

Finance Committee Meeting – Draft minutes from the January 8th meeting are in the packet. Mr. Stevens reported that finances were reviewed. It was noted that births are down but we expect COVID bump soon. BRH finished almost \$1M short on revenue but was able to realize the rest of the \$13.2 Million of CARES Act funding that had been received. Also noted, a supply correction of \$500K was made due to a technical issue that is being resolved to prevent future errors. There are two action items coming out of the Finance Committee. The first item is the purchase of the clinic building

located at 3225 Hospital Drive. Mr. Solomon-Gross reported that he had a conflict of interest with this matter and passed the gavel to Ms. Hagevig for this action item. Mr. Stevens stated the Finance Committee is moving to the board a recommendation to purchase the clinic building not to exceed \$2.5 Million with encouraged negotiation on behalf of the City. At Ms. Kanpp's request, Mr. Stevens provided highlights of construction costs provided by Nathan Coffee. Even with the costs of repairs, this building is in a good price point per square foot vs. building a new building and it provides value to BRH at the price being offered. Mr. Geiger expressed concerns about the 30 year old heating/mechanical system and the cost of replacement and about fuel tank leakage near Salmon Creek. Mr. Johnson also expressed concerns about other repair costs and is cautious of spending money right now. Mr. Benson provided justification for purchase and identified proposed usage of the building. Mr. Geiger initiated discussion about renovation plans and who would do them. Ms. Knapp noted that Mr. Coffee's observation is that while the building is not new and needs some work, it is a serviceable office building that is reasonably well maintained. She is still in favor of moving ahead. It is unknown if an assessment has been done to see if an additional floor could be supported on top of the clinical side of the building as suggested in Mr. Coffee's report. Ms. Hagevig no longer opposes purchasing this building and feels that it is in Bartlett's best interest to be in control of this property instead of the competition. She then raised the issue of parking availability. Mr. Stevens noted that our lease expires next year. We pay \$181,000 a year for that space but would recapture that cost from the purchase price in 10-13 years if we use that space as it is. He also stressed that we will need space to relocate people if we move ahead with the master facility plans and we can sell the building when we no longer need it. Hearing no further discussion, a roll call vote taken for the following:

Should the Bartlett Board recommend to the Borough Assembly that the purchase of this building proceed? Purchase not to exceed \$2.5 Million with encouraged negotiation on behalf of the City. Motion passes 4-3. Yes votes from Mr. Stevens, Ms. Hagevig, Ms. Knapp and Dr. Jones. No votes from Mr. Geiger, Mr. Johnson and Ms. Young. (Mr. Solomon-Gross and Ms. Johnston did not vote.)

Mr. Stevens noted the door replacement project with fire doors being a major component, will come out of approved maintenance funds but will need to go through the RFP process because costs are projected to be about \$300,000. Fire doors are considered to be a life safety matter and updates must be submitted to CMS every 90 days until completed. Consolidation of projects C1-C3 (ventilation upgrades and ED addition) moves from the Planning Committee, through the Finance Committee to the Board, a MOTION to approve \$425,000 in design fees for the combined \$7 Million project. In response to Mr. Johnson's question, Mr. Benson said funding would come from internal reserves and would need to go through the appropriation process. Mr. Stevens suggested working with our own internal finance and CBJ finance departments, determining the best source of funds would be an appropriate conversation. There being no further discussion a roll call vote taken for the following: Approve \$425,000 per the estimate by CBJ Engineer for architectural group to design this combined \$7 Million project. Motion passed unanimously.

Mr. Solomon-Gross thanked the committees for their thorough reports.

MANAGEMENT REPORTS:

Legal report – Ms. Nault provided a summary of the projects her company has been working on. Mr. Palmer will provide litigation updates during executive session.

HR report – Mr. Hargrave noted details about the Studer Leadership Development program are in his report. Mr. Stevens asked how many nurse graduates have been placed in various departments. Ms. Lawhorne responded that we have 4-5 that are being considered for positions right now. That does not include the class that will be graduating in the spring. **CNO report** – No questions. Mr. Solomon-Gross is happy to see the start of a CNA program at BRH.

COO report – Mr. Gardner stated the power conditioner is a high priority project as a means to protect BRH from damages due to power surges. A power surge over the weekend (the second one since November) effected equipment throughout the hospital; MRI and CT scanners, lighting in the ED and trauma bay, dryers, televisions and multiple IS system failures. The MRI is still down and parts are delayed due to weather down south. Staff in facilities, IS department and contractors have worked around the clock to try to get these issues resolved. The power conditioner project is currently in the design phase and needs to be expedited. A meeting is to be held with Nathan Coffee, CBJ Engineering; Greg Smith, CBJ Contract Administrator and the City Manager to find a way to expedite this process by using emergency orders. These issues do affect patient safety and operations. Ms. Hale said the right steps are being taken and while we

want to expedite it, we must do it legally. A timeframe cannot be established until the design phase is complete and the scope of the project is known. Ms. Hagevig initiated discussion about what fast tracking this project means. Mr. Palmer reported that the Assembly still has an Emergency Declaration in effect and it does allow for certain contracting procurement provisions to be expedited. In addition, our procurement code does have "escape valves" for these types of situations. The COVID lab is operational now that first run of sample batches crossed over with no issues. We will be doing procedural and inpatient testing. Beacon will be our first client with a Memorandum of Understanding in place. Senator Murkowski spent an hour in the lab last week discussing the testing equipment, ongoing operational costs and supply chains and how the Governor's Emergency Order affects us. Dr. Jones is very excited to have this machine and for the opportunities it allows us to respond to the community needs. He expressed appreciation for everyone's hard work. Siemens is on campus and ready to repair the MRI when the parts come in. Mr. Gardner reported that we had an x-ray machine go down in fluoroscopy too and Siemens will also repair that equipment. Mr. Geiger initiated conversation about the increase in Radiologist shifts. Work has begun by Schmolck Mechanical on the ASU-11/Endo fan. Estimated completion date is April 13th. There is a three day down time planned for the OR while the work is being done. The ED triage building is up and operational. This has been announced through public notices, the radio and our Facebook page. CBHO report – Mr. Grigg reported that we have received a \$1 Million check from Premera Pacific Northwest for capital funds towards the Crisis Stabilization project. We are working on a press release to acknowledge all of the donors that have contributed to this capital project to this point. Mr. Solomon-Gross expressed appreciation for the success stories provided in Mr. Grigg's written report. Ms. Knapp initiated a conversation about the cause of the increase in children receiving behavioral health services, most are COVID related.

CFO report – Mr. Benson reported that we are in the third week of budget meetings with managers to plan next year's budget. There is a bit of guesswork involved due to COVID impacts but it should be ready for review at the next Finance Committee meeting. Mr. Benson identified for Mr. Geiger, the acronyms used to identify the departments listed in the written CFO report. He also identified Jellyfish as a patient communication tool to help with registration and patient flow. In planning the budget for the next fiscal year, which begins July 1st, we do not anticipate any cruise activity through the fall of this year but do for spring of 2022.

CEO REPORT – Mr. Benson reported that the health emergency declaration was allowed to expire in Alaska making it the only state that doesn't have one in effect. It's anticipated that the House will work to reinstate that declaration. Discussion was held about what the impact the emergency declaration has on hospital operations. Telehealth services continue to be paid for by Medicaid. We have renewed our participation in the Rural Demonstration Project for another 5 years; the effective start date July 1, 2020. State surveyors have recently identified 6 deficiencies that place BRH out of compliance with Medicare conditions of participation. BRH must communicate within a 10 day timeframe, a corrective action plan that needs to be in place within 90 days. Most items identified are easily fixed and center on infection control. Ms. Knapp asked that the deficiency report be shared with the Board of Directors. Ms. Moffitt will forward the information. Meetings are being held to discuss how to cover the current roles filled by Kathy Callahan when she retires on April 30th.

MOTION by Ms. Hagevig to extend the meeting to 8:30 pm. Mr. Stevens seconded. There being no objections, MOTION approved.

Mr. Benson reported that we have no active COVID cases in the hospital. He also reported that he has asked Mr. Bill to continue on as our ASHNHA and legislative liaison. Mr. Solomon-Gross and Mr. Benson are to discuss other members of the senior leadership team attending ASHNHA meetings.

PRESIDENT REPORT – Mr. Solomon-Gross highlighted the Governance Institute's upcoming webinars and conferences. Thursday's webinar is "How to Hire a CEO". He encourages registration so the recording will be available to those unable to attend the live session. He also encourages Board members to attend one of the Leadership Conferences offered. Discussion held about resuming in person Board and Committee meetings. Ms. Hagevig suggested that we may be able to try this out during our CEO recruitment processes. Mr. Stevens suggested starting with committee meetings to allow us to work out any issues with placement and audio recordings. As several Board members are agreeable, Ms. Moffitt will begin working on a plan to safely accommodate hybrid meetings.

BOARD CALENDAR – March calendar reviewed. No changes requested. It was clarified that the Planning Committee meetings are to be held on the third Friday of each month beginning in April. Finance meetings are normally held the second Friday of each month but have requested to postpone by one week in March. Because of this, the Planning meeting moved up a week. Mr. Hargrave said we are tentatively looking to do most of the CEO finalist process on Friday, the 19th with a potential for the Board to conduct interviews that afternoon or the morning of Saturday, March 20th. The timing depends on what happens in executive session today. Once the finalists are confirmed, an announcement will be sent out and work will begin on travel arrangements for the candidates. Board members are encouraged to keep their calendars clear on those two dates.

BOARD COMMENTS AND QUESTIONS – None

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

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, the patient safety dashboard and union negotiations.

And

 To discuss pending litigation related to BRH, specifically a candid discussion of the facts and legal strategies with BRH's attorneys;

And

• To discuss subjects that tend to prejudice the reputation and character of any person, namely applicants for the Chief Executive Officer (BRH Board and Dallas Hargrave only.)

Ms. Hagevig seconded.

Mr. Solomon-Gross called for a recess before going into executive session. The Board took a recess from 7:42 p.m. until 7:47 p.m.

The Board entered executive session at 7:47 p.m. and returned to regular session at 9:38 p.m.

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

Mr. Stevens reported that during executive session, guidance was provided to our legal team for legal matters and to our labor bargaining team for contract negotiations. Ms. Knapp reported that guidance was also provided to HR Director on proceeding with candidate recruitment for the CEO position.

ADJOURNMENT – 9:42 p.m

NEXT MEETING: 5:30 p.m. - Tuesday, March 23, 2021