

Bartlett Regional Hospital

Minutes
BOARD OF DIRECTORS MEETING
May 25, 2021 – 5:30 p.m.
Zoom videoconference

CALL TO ORDER – Meeting called to order at 5:32 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	Iola Young
Hal Geiger	Deb Johnston	Lindy Jones, MD

ALSO PRESENT

Rose Lawhorne, CEO	Kevin Benson, CFO	Kim McDowell, CNO
Bradley Grigg, CBHO	Dallas Hargrave, HR Director	Keegan Jackson, MD, COS
Barbara Nault, Legal Advisor	Gail Moorehead, Quality Director	Anita Moffitt, Executive Assistant
Nathan Overson, Compliance Director	Joy Neyhart, DO	Loren Jones, CBJ Assembly

APPROVE AGENDA – Mr. Solomon-Gross requested the removal of item E (COO Vacancy) listed under the Executive Session of the agenda. ***MOTION by Ms. Hagevig to approve the agenda as amended. Mr. Johnson seconded. There being no objections, agenda approved as amended. .***

PUBLIC PARTICIPATION – None

CONSENT AGENDA - ***MOTION by Ms. Hagevig to approve the consent agenda as written. Mr. Johnson seconded. There being no objections, the April 27, 2021 Board of Directors meeting minutes and the March 2021 Financials approved.***

NEW BUSINESS - None

OLD BUSINESS - None

MEDICAL STAFF REPORT – Clarification provided about why the medical staff report is given during open session but medical staff meeting minutes are reviewed in executive session. Medical Staff meetings are not open to the public so minutes are kept confidential. The medical staff report allows the Chief of Staff to relay general information about current topics, concerns and programs, etc. of the medical staff.

Dr. Jackson reported that it was business as usual at the May 4th, Medical Staff meeting. The biggest thing on people’s minds is easing into the Meditech Expanse update. The Med Staff Quality Improvement Committee (MSQIC) is conducting a study of patient safety secondary to the update. As a whole of the groups she has talked to, physician feedback is varied but overall consensus is that this is not just an upgrade. There’s a lot of features in the inpatient realm that are more complicated and various physicians are struggling. With the FDA allowing the Johnson & Johnson vaccine to be distributed again, BRH has begun to administer them to inpatients as well as Emergency Department patients wishing to receive one. Ongoing conversation about collegiality, inpatient consults and who does what between primary care and the specialists. Conversations being held with various departments to see how we can improve this to better serve patients. Also discussed was what it means for BRH in terms of competition when SEARHC opens an after-hours care clinic.

COMMITTEE REPORTS:

Committee of the Whole – Draft minutes from the May 7th meeting are in the packet. Mr. Solomon-Gross reported that a tentative union agreement was discussed. The Committee of the Whole recommended that the Assembly ratify the agreement. Mr. Hargrave reported that the Assembly ratified the agreement at last night's meeting. The Union has tallied the votes and have also ratified it. Implementation and educating supervisors about the changes is the next step. The terms of the agreement will apply to non-represented employees, not under another employment agreement. A review of personnel rules for non-union employees will be reviewed and updated. During the meeting, Ms. Lawhorne had introduced the new Chief Nursing Officer, Kim McDowell, provided her background information and welcomed her to her new role. Mr. Geiger recommended a minor change to the draft minutes.

Planning Committee Meeting – Draft minutes from the May 7th meeting are in the packet. Mr. Stevens reported that there was a review of the project status and no changes added.

Board Quality Committee Meeting - Draft minutes from the May 12th meeting are in the packet. Ms. Hagevig reported that as per usual practice, there was a review of various dashboards; with very few exceptions, BRH is doing great. The new employee orientation program is being well received. A new process in place to send thank you cards back to staff when they receive recognition from the public. There was an overview of patient safety.

Finance Committee Meeting – Draft minutes from the May 14th meeting are in the packet. Ms. Johnston reported that a discussion of the union contract was held. Also discussed provider based billing. We will not be doing this right away but will look at it in the future as an option to enhance revenue. No actions were recommended at this meeting.

Board Compliance and Audit Meeting – Draft minutes from the May 18th meeting are in the packet. Ms. Young reported that there was some training provided. There was an update on 3rd party compliance program review. The final report is not complete yet and we will meet again when it is. The dashboard and compliance work plan was reviewed. The 340B program was discussed during executive session and will be discussed during executive session tonight.

Governance Committee Meeting – Draft minutes from the May 21st meeting are in the packet. Ms. Knapp reported there was a review of the Governance Institute's (GI) new board self-evaluation tool (included in tonight's packet). The cost for this tool is included in our membership with the Governance Institute (GI). Per the Board bylaws, self-evaluations are required. As this is a new tool, there will be no initial benchmarks. Benchmarks are anticipated to be developed by this fall, after at least 30 organizations complete the evaluations. Survey results will be provided quickly. A second report with comparisons is to be provided after benchmarks are developed.

At the desire of the committee, *Ms. Knapp made a MOTION that the Board of Directors authorize utilization of the self-evaluation tool available through the Governance Institute. Ms. Hagevig seconded.*

Mr. Hargrave will notify the GI of the desire to complete the survey. Surveys will be sent to each board member to provide their anonymous responses. Mr. Hargrave will let the board know when to expect to receive the surveys. It's important for surveys to be completed within the designated timeframe. The GI will review the results with the board. It will be up to the board to discuss those results and develop a work plan to correct any identified areas that need improvement. *There being no objection, Motion approved.*

MANAGEMENT REPORTS:

Legal Report – Ms. Nault provided a summary of projects her company has been working on since last month's meeting. Urology physician recruitment; Updates to physician recruitment template; Ongoing assistance with CT services arrangement; Assisting with renewal negotiations for professional services agreement for Emergency Department coverage; Updates to medical residents affiliation agreements. Looked at medical staff's medical resident policy and made recommendations for medical staff to consider. Working with Senior Leadership and contract management on

reviewing and upgrading the hospitalists' employment agreements. Discussion held about sponsoring physicians and the type of residents doing rotations at BRH.

HR Report – Mr. Hargrave reported we have heard from Modern Healthcare regarding the employment engagement survey conducted. We did not meet the level of one of the best places to work in healthcare. After receiving the survey results later this summer, we will work to improve the employment experience of our employees based on those results.

CNO Report – Ms. McDowell thanked the Board for the welcome. She provided a thorough overview of her written report including OB's award of "Gold Recognition", the highest level of achievement, for their work in the AK Perinatal Quality Collaborative Hypertension in Pregnancy Initiative. Interviews for a new ED director have been concluded and we are in the process of making a selection. Mr. Stevens congratulated Ms. McDowell and the OB Department for the receiving the award.

COO Report – No questions or comments.

CBHO Report – Mr. Grigg reported that we are very close to having multiple psychiatrists on staff that are not in locum status. We have contracted with Dr. John Tarim in the last month to provide services in MHU and RRC. When we meet in June, we hope to have at least two more psychiatrists on staff. We are seeing a continued uptick in the need for psychiatric services. Inpatient and outpatient clinics have both seen increases in the last month resulting in a wait list. We are working on a plan to address the waitlist. Mr. Johnson thanked Mr. Grigg for the report. He noted that the State is working closely with Anchorage, Matsu and Fairbanks and wonders why BRH is not being acknowledged for the same work. Mr. Grigg reported that BRH is about 18 months ahead of those communities in terms of a structure in place and in services provided. The State is focusing their money on these other facilities to get them caught up and is using BRH as a consulting and replication piece. He also reported that we are meeting weekly with CBJ and Northwind Architects on the Crisis Stabilization Center. Dawson Construction has reported that demolition of the BOPS building will probably take place on Friday morning.

Ms. Lawhorne reported that the Associated Press and US News and World report saw the KTOO article included in tonight's packet. They have reached out to Mr. Grigg to discuss the behavioral health work here at BRH to be highlighted in their series on national hospital heroes during the pandemic. Mr. Johnson reported that Mr. Grigg has also agreed to give a presentation on our crisis stabilization program for kids at the national meeting of the AK Emergency Medical Services for Children. Ms. Hagevig noted that BRH and Bradley are so far ahead in the process that the Mental Health Trust didn't even know what was going on. We need to do a better job of highlighting what is being done at BRH. Congratulations to Mr. Grigg and team were expressed by multiple board members.

CFO Report – Ms. Hagevig asked if there have been any updates regarding the new round of federal dollars. We do have an opportunity to apply for \$230,000. We are waiting to hear how the \$8.3 Billion for Rural Hospitals is to be distributed.

CEO Report – Ms. Lawhorne acknowledged the Senior Leadership Team for stepping up and working hard with their departments to improve the hospital. There were two special sessions started on the 20th to look at the state budget and the permanent fund dividend. How that impacts Medicaid funding is yet to be seen. DHSS experienced a cyber-attack on May 18th. This has impacted our access to information that is shared between hospital systems and DHSS. Background checks and onboarding have also been disrupted. Be on the lookout for information on the ground breaking ceremony for the Crisis Stabilization Center. We will begin recruitment for the COO position immediately. The president has signed the American Tourism Restoration Act which allows cruise ships to come into Alaska without stopping in Canada. Mr. Solomon-Gross initiated conversation about staffing levels. Ms. Hagevig initiated discussion about expectations of board participation during this year's Joint Commission survey. Ms. Knapp resumed discussions about staffing. We will not need to staff for the cruise season. Staff will be reassigned to their pre-COVID roles.

CEO REPORT/STRATEGIC DISCUSSION – Ms. Lawhorne reported we had one COVID patient in house has now been discharged in stable condition. Incident Command Structure meetings are now being incorporated into our Management Team meetings for more efficiency. Vaccinations across the community are continuing to increase by several hundred per week. Everyone 12 years old and above are eligible for the vaccines. 63.8% of the total population of Juneau have received their first dose and 58.2% completely vaccinated. Testing continues to run smoothly at this time. 67.8 % of the eligible population are completely vaccinated.

PRESIDENT REPORT – Mr. Solomon-Gross has been out of town for the last three weeks but has kept in touch with Ms. Lawhorne and Mr. Hargrave. It was a good vacation and he thanks everyone for keeping things together during his absence.

BOARD CALENDAR – June calendar reviewed. A Governance meeting will be held at 12:00pm on Friday, June 18th and recurring meetings will take place at noon on the third Friday of every month. Mr. Stevens will be out of town after June 4th and will be unable to attend the rest of the meetings scheduled to take place in June.

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 and the patient safety dashboard.*

And

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

Mr. Johnson seconded. The Board entered executive session at 6:45p.m after taking a 5 minute recess. They returned to regular session at 7:14 p.m.

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

ADJOURNMENT: 7:15 p.m.

NEXT MEETING: 5:30 p.m. – Tuesday, June 22, 2021