

API Governing Body Meeting Minutes

Date: February 13, 2020 / Time: 1:30 p.m. – 3:30 p.m.
3601 C Street Room 902

X	Albert Wall, Chairman & DHSS DC		Adam Rutherford, DOC	X	Erica Steeves, QAPI Director
X	Clinton Lasley, DHSS DC		Dr. Michael Alexander, Chief of Psychiatry, MEC		Jillian Gellings, DHSS
X	Dr. Anne Zink, CMO, DHSS		Primary Care Association, Member at Large	x	James Farley, API CFO
X	Charlene Taufest, AMHB Member		Jeff Jessee, UAA	X	Laura Russell, DHSS
X	Gennifer Moreau-Johnson, DBH Director		Daniel Delfino, AHFC		Promise Hagedon, API DON
X	Jason Lessard, NAMI	X	Elizabeth Russo, OPA		Steven Bookman DOL
X	John Lee, Director SDS	X	Natasha Pineda, ADH Director		Alyssa Hutchins, DHSS
X	Dr. Alexander von Hafften, APA		Anchorage Police Department, Member at Large		Jerry Jenkins, ABHA
X	Summer LeFebvre, AKBHPA		Joanna Cahoon, DLC	x	Ron Cowan, API
X	Elizabeth King, ASHNHA	X	Lynn Cole, Vendor Representative	x	Beverly Schoonover, AMHB
x	Dr. Shane Coleman, ANHB	x	Dr. Helen Adams, American College of Emergency Physicians Member at Large, ACEP		Rebecca Helfand, WICHE
	Adam Crum, Commissioner, DHSS		Dr. Nathan Kasukonis, API		Rose Scogin
X	Noel Rea, Acting CEO API	x	Katie Baldwin-Johnson, AMHTA	x	Mark Kraft, API
		x	Tammy Wilson, DHSS	x	Dr. Brad McConnell, API
		x	Christine Marasigan, Legislative Aid to Representative Spohnholz		
			David Moxley, UAA		

Notes: Marked boxes indicate attendance; with physical attendance indicating an "X" and no indicator, meaning call in attendance.

Voting members in blue

Ex-Officio members in black

- Member's not in attendance and or in the process of selecting a Member at Large depicted by yellow highlighted title.
- Staff members or stakeholder of API and the behavioral health continuum of care depicted in red.

#	Standing Agenda Items	Lead Assigned	Discussion	Action Item	Due Date
1a.	Welcome Introductions (Roll call)	Chairman	<u>Al Wall</u> : Chairman	Quorum established to conduct governance business.	Completed
1b.	Review and Approve Agenda	Chairman	Motion to approve agenda: Elizabeth King Second: Summer LeFebvre All in favor	Motion to approve	Completed
1c.	Review and Approve Minutes	Chairman	Approval of minutes with edit to Item 14, changing from more options to other options. Motion to approve agenda: John Lee Second: Jason Lessard All in favor	Minutes approved with edit.	Completed
2.	CEO Update	Chairman	<u>Al Wall</u> : Reintroduced Noel Rea and asked for items for discussion. <u>Noel Rea</u> : -Will send out weekly updates of items going on in the hospital. -Asked for any feedback. -Suggested GB and hospital leadership meet prior to GB meetings to add items to GB meeting agenda. <u>Al Wall</u> : Provided additional update on CEO search. Interviewed two candidates. One candidate was not selected and the other candidate will have a second interview at API.	No action needed	Completed

3.	Wellpath Update	Lynn Cole	<p><u>Lynn Cole:</u> Enter update into record. Written document provided with meeting materials.</p>	No action needed	Completed
4.	Policy Review Committee	Chairman	No updates	No action	Completed
5.	Bylaws	Chairman	<p><u>Al Wall:</u> Bylaws have two parts: Governing Body Bylaws and Medical Staff Bylaws.</p> <p>Reminder, between now and end of fiscal year the Governing Body will need to update the GB bylaws, officers in particular.</p> <p>Medical Staff Bylaws: -Are still being revising. -Dr. Alexander is the chair of the Medical Staff. -All proposed changes to the Medical Staff Bylaws will need to come through the GB for approval.</p>	No action	Completed
6.	Kepro QIO Contract Approval	Erica Steeves	<p><u>Erica Steeves:</u> Informed the GB that the GB needs to approve the updated Kepro QIO contract. This is a Medicare (CMS) requirement.</p> <p>The contract was signed in June Goal of the QIO program is to improve the quality of care for Medicare beneficiaries, including addressing individual complaints, requests for QIO review, and to protect the Medicare Trust Fund.</p> <p>Request to approve this contract. <u>Al Wall:</u> A couple things to point out: -The GB needs to continue educating the public about the regulations and requirements regarding API and this is another specific example regarding CMS and the role of the GB.</p>	Motion to approve (See below)	Completed

7.	Finance Subcommittee	James Farley	<p>-Just on the second page of the contract, there are seven GB statutory obligations required by Medicare (CMS) for compliance. -Additionally, most standalone hospitals use contractors to meet certain regulations and expectations. -This is important for the public to understand.</p> <p>Will wait for end of updates to vote.</p> <p><u>Dr. von Hafften</u>: Makes sense to but do not see a fiscal note for this. <u>James Farley</u>: This is a MOA. <u>Noel Rea</u>: This is normally funded out of CMS for acute care. Might be Mountain Pacific. <u>Al Wall</u>: An ask for finance might be to get an updated list of all contracts with name, amount, and end dates.</p> <p><u>James Farley</u>: Met on January 31st. Purpose of that meeting was to make financial recommendations to GB regarding Wellpath. -Contract set to expire March 31st with option to renew. -Reviewed contract and amendments. <u>Al Wall</u>: Two issues: First, we asked Medical Staff for a needs assessment. Second, we need clarity regarding a supplemental request. GB has asked for control of finances. However, we are unable to address these issues until after Dr. Alexander returns. Need his perspective prior to a recommendation and proposal. Table until these two issues are clarified.</p> <p>Item of consent to vote for Kepro Contract (name change)</p> <p>Motion to approve agenda: Dr. von Hafften Second: Elizabeth King All in favor</p>	No action	Table until return of Dr. Alexander
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8.	Updates	Chairman	<p><u>Al Wall:</u> Update on EDIE. -Dr. Zink continues working on EDIE. -Ashley Christopherson will schedule Collective Medical to work with API. GB invited as well. -HIE continuing to review. -Elizabeth King working on finances. <u>Elizabeth King:</u> -Funding available through OSMAP but needs to be invoiced by end of March. -Also talked to Collective Medical and brainstormed ways to connect possibly through flat file. <u>Noel Rea:</u> API staff have a lot of questions. -Believe API staff want an in-API conversation with State leadership. API staff meets every Tuesday. If possible, good time to meet. <u>Dr. Zink:</u> Leah Farzin is legal liaison and we can get her connected to API. <u>Noel Rea:</u> There are a couple policy questions staff would like answered prior to meeting with the vendor. <u>Dr. Zink:</u> Understand but also want to continue to move IDIE forward. The vendor presentation is not technical, it provides information on how others are using it and feedback on experiences. <u>Al Wall:</u> I believe I am hearing a question about policy. Are staff asking why and what is end product? <u>Noel Rea:</u> Yes. <u>Al Wall:</u> Understand but this is an area we need to move on. The more expertise we have in the room the better and hope to see staff engaged. <u>Elizabeth King:</u> Might be helpful to have a provider that uses the system in office to talk about the "why." <u>Dr. von Hafften:</u> I would like to throw out a perspective in, most understand the importance but what really needs to be clarified is the directive from Department of Law. <u>Al Wall:</u> Leah and Steven Bookman need to be in on this conversation. Believe we need to set up staff time to meet.</p>	Ashley will set up meeting with Collective Medical and API staff. Invite to LAW	Completed
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9.	HB175 Update	Chairman	<p><u>Al Wall:</u> Workgroup drafted a response. Have Jane Conway on the phone from Senator Giessel's office and Christine Marasigan from Representative Spohnholz's office. We hope to be able to provide input as statute moves forward.</p> <p>Overview of the response: -Cover letter: summary of issues. -Body of letter: divided into three sections and list line by line analysis. -Mentioned a couple times our different regulatory requirements. We need to be in compliance with all three. Al Wall read cover letter.</p> <p><u>Al Wall:</u> We want to make clear that this is bigger than Commissioner's Office. We talked a great deal about API and what we can do to allow API to be a hospital that takes care of patients. Al Wall asked Elizabeth King to speak on any areas. <u>Elizabeth King:</u> Walked through key points. The key challenge for the API GB is not having true authority. GB can't make administrative decisions or choices on other issues. We don't want to be an advisory board. <u>Al Wall:</u> Pointed out a number of specific examples. <u>Dr. von Hafften:</u> Provided feedback that it is difficult to fully understand unless you pay close attention to the foot notes. <u>Dr. Coleman:</u> Wants to make sure that it is clear in the big picture and questions how the GB interacts with State authority. <u>Dr. von Hafften:</u> Current status of GB has many flaws since we can't get the legislature to do anything we recommend (no action is required by the legislature) and there is no obligation for anyone to follow any GB recommendations. We are largely locked into State</p>	Motion to forward cover letter and packet and to be open for continued conversations.	Completed
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10.	Fiscal Status Update	James Farley	<p>system but decisions are not always made with our hospital in mind.</p> <p><u>Al Wall:</u> I want to go back to the cover letter. Pointed out bullet point 1: Instability in leadership. Governor appoints the CEO and this can change at any time. The new CEO can also change the direction of the hospital at any time.</p> <p>This clarifies the need for more authority, outlines request to hire/fire CEO as well as some additional staffing areas.</p> <p><u>Summer LeFebvre:</u> I agree it didn't go far enough and not specific enough but comfortable with changes and would like to move forward and get a response. It was apparent at the Mental Health Trust Authority meeting that people do not know how to work with the GB and view us as an advising committee.</p> <p><u>Al Wall:</u> Thank you for your comments. I believe as a board, we need a resolution to send the response forward and to make ourselves available for further discussion. Don't want this to become the administration versus legislature. We want to continue focusing on the needs of the community.</p> <p>Motion to formally move cover letter and response forward: Dr. von Hafften Second: Dr. Coleman All in favor</p> <p><u>Dr. Coleman:</u> Asked a question regarding footnote 8. Requested feedback from GB about goal of API and how API's role is unique. Have to consider clinical aspects other hospitals don't. Discussed history and how it used to be called API Recovery Center.</p> <p><u>Al Wall:</u> Asked for any further comments.</p> <p><u>James Farley:</u> -Made an offer for the HR support position.</p>	No action needed	Completed
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11.	Census and Placement	Dr. McConnell	<p>-Continually recruiting mental health clinicians, psychiatrist, and other high needs positions. -Waiting on supplemental request.</p> <p><u>Dr. McConnell:</u> Filling in while Dr. Alexander is out. -There are a few locums coming. -The MD staff tool is being used.</p> <p>Census: 48 with 3 planned discharges. 10 pending evaluations. Estimated wait is 5 days. Title-12 (T-12) estimated wait of 90 days.</p> <p><u>Elizabeth King:</u> Currently 10 T-12 patients at API? <u>Dr. McConnell:</u> No, 9. <u>Elizabeth King:</u> Is Taku full? Is API able to take an adolescent needing placement? <u>Noel Rea:</u> Not prepared to take an adolescent at this time. GB discussed history of youth at API. <u>Laura Russell:</u> Department has put a lot of energy into finding placements. Work groups, crisis response teams that involve every department. We want to find the most appropriate placement for each child and I can't imagine API would be because if a child was placed their currently they would be alone. If we took a child in currently it would need to be fully staffed.</p>	No action needed	Completed
12.	Public Comment	Chairman	No comments at this time. Will check back in.	No public comment	Completed
13.	Quality Assurance Performance Improvement	Erica Steeves	<p><u>Erica Steeves:</u> Provided group with slides that show the blocker added to doors. -These had to be fabricated and installed, process went really well.</p>	No action needed	Completed

14.	Regulatory/PI Events Update	Erica Steeves	<p>-In the process now of installing handles. -Another shipment will arrive at the end of the month and we will evaluate if we need a CMS waiver extension.</p> <p>Also doing an internal review: -furniture is one area of discussion and trying to engage staff.</p> <p>Received notification of state survey, no deficiencies.</p> <p>Four regulatory entities visited in four days: Disability Law Center, CMS, and OSHA.</p> <p>Extended an invitation to anyone to visit API.</p> <p>Lynn and Erica did a cross walk of all the open action items that aren't yet in compliance. -There were over 400 items total. -Focusing on 28 items. -Most are in progress. -Can provide more detail if needed.</p> <p>Another ask for public comment</p> <p>3:30 Motion to adjourn</p>	<p>No action needed</p> <p>No public comment</p>	Completed
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Next Meeting: March 19, 2020

Minutes prepared by: Ashley Christopherson

Approved by: _____
(Initial) Date