

API Governance Committee Meeting Minutes – Draft

Date: Wednesday – June 27, 2018 / Time: 1:40pm –3:30pm

	Valerie Davidson, DHSS Commissioner	Tel	Charlene Tautfest, AMHB Member	X	Tina Williams, CFO
LV	Karen Forrest, DHSS Deputy Commissioner (Telecon)	X	Gavin Carmichael, API COO		
X	Jay Butler, MD SOA Medical Examiner	X	Anthony Blanford, MD API Chief of Psychiatry		Visitor:
X	Randall Burns, DBH Director	X	Sharon Bergstedt, API DON		Visitor:
X	Ron Hale, API CEO	X	Jacqueline Adelman, API QIC		Visitor:

(X=Voting Members)

#	Standing Agenda Items	Lead Assigned	Discussion	Action Item	Due Date
A.	Welcome -Introductions (Roll call) -Review and Approve Agenda	CEO	-Roll taken -Group reviewed agenda.	-Quorum established to conduct Governance business -Group added an executive session after Old Business on the Agenda. -Agenda approved with update.	Completed
B.	Review March 2, 2018 Governance Meeting Minutes	CEO	Committee reviewed March 2, 2018 minutes	Group approved minutes. Approved by: DBH Director Burns Second by: Dr. Jay Butler	Completed
C.	Medical Staff Report -Medical Staff:	MD	<ul style="list-style-type: none"> o <u>New Hires:</u> <ul style="list-style-type: none"> ▪ John Bellville, MD and Lee Ann Gee, MD have hired onto the API Psychiatry staff. Both have been given 90 day temporary privileges until final reference is received. o <u>No Locum Tenens at this time.</u> o <u>Vacancies:</u> <ul style="list-style-type: none"> ▪ We have 2 vacant psychiatry positions. o <u>Resignations:</u> <ul style="list-style-type: none"> ▪ There have been 2 resignations received. <ul style="list-style-type: none"> -Kahnaz Khari, MD resignation effective May 31, 2018 -David Mack, MD resignation effective May 11, 2018 o <u>Credentialing and Re-Appointment Procedures for API Medical Staff:</u> <ul style="list-style-type: none"> ▪ Current medical staff bylaws and medical staff rules and regulations are under review, last updated 2014. 	<ul style="list-style-type: none"> ▪ Approval for full core psychiatry privileges are requested ▪ Group discussed the SHARP I and III Programs. MD Blanford advised we have put in an application for SHARP I, we are awaiting more information on when SHARP III becomes available. DBH Director Burns advise that CEO Hale and MD Blanford should look into particulars for the SHARP I and III (i.e. staff interest and cost) ▪ We anticipate needing at least one of these psychiatrist positions filled to avoid the need for locum tenens in the near future. ▪ We have 3 off cycle re-credentialing provider packets (Martone, ANP, & Montgomery, ANP, and Tamara Russell, PsyD) in process at this time. 	<p style="text-align: center;">Closed</p> <p style="text-align: center;">On going</p>

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C.	Medical Staff Report (cont'd) -Academic Integrity Committee Report		<ul style="list-style-type: none"> ○ <u>Forensic Team Update:</u> <ul style="list-style-type: none"> ▪ Group discussed program developments for Taku and Denali units, number of competency evaluations outstanding, and the need to intermittently conduct culpability evaluations ▪ We are losing a forensic intern, their last day is June 21, 2018. ○ <u>Academic Integrity Committee Report:</u> <ul style="list-style-type: none"> ▪ MD Blanford advised the group that Dr. Mischado, ABA (Applied Behavioral Analyst) is doing wonderful work here at API. 	<ul style="list-style-type: none"> ▪ Our team is working closely with current Administration to carefully address the ongoing needs of both the courts and community, while maintaining adequate bed space for civil patients at API. ▪ We have another forensic intern coming in, they will be in training for a couple of months before providing reports (with supervisor oversight) ▪ Group agrees and encourages the use of ABAs here at API to train staff. 	On going
D.	Required Quarterly Reporting and Approvals: Status / Performance Report		<ul style="list-style-type: none"> ○ <u>API Renovation Period Nov 2017-Apr 2018</u> <ul style="list-style-type: none"> ▪ ASIIP (API Safety Interior Improvement Project) ○ <u>Calendar Year Snap Shot of API Utilization</u> ○ <u>Average Daily Census by Month and Unit</u> ○ <u>Average Length of Stay (LOS) by Unit and Month</u> ○ <u>API Monthly 30 and 180-day Patient Re-admission Rates, Jan 2016-May 2018</u> ○ <u>ORYX Data Review</u> <ul style="list-style-type: none"> ▪ Patient Injury rate ▪ Elopement Rate ▪ Seclusion Hours ▪ Patients Secluded ▪ Patients Restrained ▪ 30 Day Readmission Rate ▪ Restraint Hours ▪ Patient Survey – Outcome ▪ Patient Survey – Dignity ▪ Patient Survey – Rights ▪ Patient Survey – Participation ▪ Patient Survey – Environment ○ <u>Injury & Assaults</u> <ul style="list-style-type: none"> ▪ Falls per 1000 Inpatient Days and Falls per 1000 Patients Served, Jan 2016-May 2018 ▪ API Patient and Staff Injury Rates per 1000 Inpatient Days, Jan-May 2018 ▪ Patient and Staff Injuries Due to Assault Jan-May 2018 ▪ Assault Incidents by Victim Type, Injury Status, and Month, Jan-May 2018 	<p>Group reviewed and discussed material presented by QIC Adelman.</p> <ul style="list-style-type: none"> ▪ Included to remind us that the ORYX data is used to compare us to the national mean. ▪ Dr. Butler asked “When a seclusion/restraint (S/R) occurs, was the NSS being notified within 30 minutes? And, are these S/Rs happened during the evening and/or night shift? QIC Adelman to research and advise the group. ▪ DBH Director Burns asked for a comparison between API and other psychiatric facilities. QIC Adelman advised that the numbers would be skewed as we are a small facility with a focus on acute psychiatric care. QIC Adelman is currently reaching out to WPSHA for benchmark information on WPSHA Injury & Assaults. 	Quarterly

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D.	Required Quarterly Reporting and Approvals (continued)	QIC (cont'd)	<ul style="list-style-type: none"> ▪ Assault Injuries by Victim Type, Treatment Severity, and Month, Jan 2018-May 2018 ○ <i>Patient Grievance:</i> <ul style="list-style-type: none"> ▪ Patient Feedback by Type and Month with Average Daily Census, Jun 2017-May 2018 ▪ Patient Complaint and Grievance Feedback by Resolution Status and Month, Jun 2017-May 2018 ▪ Patient Feedback by Type and Unit ▪ Type of Percentage of Patient of Patient Complaints with Examples, Jan 2018-May 2018 ▪ Type and Percentage of Patient Complaints/Grievances with Examples, Jan 2018-May 2018 	<ul style="list-style-type: none"> ▪ QIC to add when NAPPI classes began to show downward trend in assaults and injuries. <p>Group reviewed and discussed material presented by QIC Adelman.</p> <ul style="list-style-type: none"> ▪ QIC to include when API started using NAPPI, to show if the downward trend in S/Rs 	Quarterly
	Regulatory / PI Events	QIC	<ul style="list-style-type: none"> ○ <i>Regulatory Events – June 2018</i> <ul style="list-style-type: none"> ▪ AKOSH ▪ Disability Law Center ▪ Health Facilities Licensing and Certification, Plan of Correction 	Group reviewed and discussed information presented by QIC Adelman.	On going
	API Staffing Update and Census: ○ <i>API Contracts</i> ○ <i>API Personal Services/Vacancy Report</i>	CFO	API Provider Staffing Update and Census: <ul style="list-style-type: none"> ▪ Introducing Tina Williams as the new CFO at API ▪ CFO Williams discussed API Contracts, Personal Services, and Vacancy Report. 	<ul style="list-style-type: none"> ▪ CFO Williams advised the group that she and her team are working on a planning document for FY2019 expenditures. 	On going
	ASIIP Construction Project Update	COO	<u>ASIIP Construction Project Update (Gavin's Report)</u> <ul style="list-style-type: none"> ○ <i>Off unit bathroom doors are not completed. Hardware is different.</i> ○ <i>Issues being worked on:</i> <ul style="list-style-type: none"> ▪ Chillers-one is broken (air conditioners about \$20K cost) ▪ Anchor system for the roof ▪ Circuit boards and systems are failing. See Capital ist (Door system locks, Nurse call, HVAC, etc) ▪ Hardware/Software is becoming obsolete (issue mentioned on budget value). Nurse call system is antiquated ▪ Working with Kronos for timesheet systems, \$40K startup, \$3K per month for maintenance 	<ul style="list-style-type: none"> ▪ Contractor and COO Carmichael are working to complete the bathroom project. ▪ DBH Director Burns advised COO Carmichael to look into purchase 2 chillers for API. ▪ COO Carmichael and DSS Facilities Management Mr. Mark Moon are currently seeking bids to update this system. More to follow. ▪ Group discussed. Planning/Decision maker process starts in August. More to follow. 	On going

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	CEO Report	CEO	<ul style="list-style-type: none"> ○ CEO Hale advised group of upcoming projects: ○ Nursing is moving to 12 hour shifts July 16th. ○ DLC Forensic Psychology (30/60 day commitment day evaluations. CEO Hale and MD Blanford pursuing this (it's a contractual matter not a PCN). ○ API Bed Expansion Project ○ Statute Changes ○ SOA Special Investigations Attorney Mr. Evans has completed his interviews with API staff. 	<ul style="list-style-type: none"> ▪ DBH Director Burns advised that in FY20 we will ask for more personnel for the Forensic unit. ▪ Mr. Fishback will be meeting with department staff to discuss and get thoughts on upcoming 10 bed unit with individual departments. Mr. Fishback to provide report mid-August 2018. Mr. Evans will contact CEO Hale if he needs further information. 	<p>On going</p> <p>On going</p>
	Discharge Barriers	CEO	CEO Hale advised Governance that we continue to experience difficulties with discharges (housing, funding, GR, placement, etc)	Group discussed.	
E.	OLD Business:		None discussed		
	Executive Session	DBH Dir Burns	Closed session	Closed Meeting	Closed
	Meeting Ends.		Meeting adjourned at 3:30pm.	Group departed	Closed

Updated Minutes prepared by: Leilua Fadely

07/13/18
Date

Approved by: Ron Hale

RH
(Initial) _____
Date