

Alaska Psychiatric Institute Governing Body, June 13, 2023, Meeting Minutes

I. Call to Order

Elizabeth called the meeting of the Alaska Psychiatric Institute Governing Body to order at 1:31 PM via Zoom on June 13, 2023. Mission and Vision of API.

II. Introduction and Roll Call

Voting Members Present:

Elizabeth King, *Alaska State Hospital and Nursing Home Association*

Summer LeFebvre, *Alaska Behavioral Health Association*

Brenda Moore, *Mental Health Board*

Katie Baldwin Johnson, *Mental Health Trust Board*

Dr. Rick Elsasser, *Alaska Native Health Board*

Farina Brown, *Director of DBH*

Ann Ringstad, *NAMI Alaska*

Absent:

Dr. Anne Zink, *Chief Medical Officer*

Kim Koval, *Commissioner*

Clinton Lasley, *Deputy Commissioner of Family Community, and Integrated Services*

Other Members:

Other Members Not Present:

Director Newman

Visitors:

Kurt Hoenack

Margaret Bauer

Jarmyn Kramlich

Promise Hagedon

Randy Smith

Christel Brito

API Staff Reporting:

Scott York, CEO

Robert Long, Medical Director

Christy Winn, QAPI Director

Rebecca Morrissey, Nurse Educator

Kristy Becker, Chief Clinical Officer

Erica Steeves, Director of Nursing

Farina Brown stepping down and Tracy Dompling is the new Director for Division of Behavioral Health.

III. Review and Approval of the Agenda:

Motion to approve agenda with current edits. **Agenda approved.**

Review and approval of Minutes:

April minutes reviewed and motion to approved with corrections by Elizabeth King, Katie Baldwin Johnson, Brenda Moore seconded. No discussion. **Minutes approved.**

IV. Covid Update:

York reported 10 patients and 4 staff have tested positive for Covid.

Discussion that GB members have access to SharePoint for updates. Elizabeth King asked about staff that tested positive and mitigation plans.

V.Strategic Planning:

Margaret Bauer with Denali Daniels and Associates reviewed summary for strategic planning for API. Series of partner meetings in April.

What is working well at API?

What can be improved at API?

What priorities should be included in a 5-year plan for API?

York discussed areas of improvement that team members at API presented for further review.

Team has developed a framework to help identify the priorities. Extended timeline to September for further engagement. July will hold more sessions with key areas:

1. Crisis Now changes.
2. Focused conversation of bed projections
3. Governance of API
4. Telehealth
5. Outpatient restorations
6. Jail based restoration.
7. Outpatient medication clinic

Open to other ideas or discussions.

Phase in July completed the draft plan should be ready.

Final document planning in September

Opened for discussion: Elizabeth King could not access planning page. A new link was provided to GB Members.

VI.Items for Consent:

Policies:

Approved via Email:

- EOC-205 Lost and Found
- PC-060-14 Close Observation Status
- SC-030-02.02c Voluntary Timeout
- EOC 210 Searches Contraband and Restricted Items Including Weapons
- SC-030-02.01 Restriction of Patient's Rights
- PC-01-03.01Nursing Care Plan May 2023
- NPSG. 16.01.01 Health Care Disparity Policy
- ASSESS-01-02-03 Registration and Admission and Assessment Procedure
- EOC-202 Security Failure
- PC-02.01.01 Animal Assisted Therapy
- EOC 050 Tobacco and Smoke-Free Campus

Approved with Discussion:

- PC-01-01-01 Capacity and External Notification: Policy on calling capacity. Discussion on why capacity is being called and processes. Policy approved. Elizabeth requested to put it on the agenda for September.
- LD-040-07 Damage to employee property. Policy approved.

Discussion on policy review. Options are being developed on how to approve or reject in SharePoint. Currently, it will be one email sent one week prior to the public notice posting. If no quorum on policies, then all policies will be reviewed in the next GB meeting.

VII. New Business:

Pharmacy Feasibility Study:

York discussed the pharmacy feasibility study. Consultant came in with RFP with Nash Healthcare. Pharmacist consultant met with various entities at API and Pioneer Homes. Final report by end of July.

SB53:

Dr. Becker did discuss SB53, and concerns brought up about the gap in the legal system who are competent, and charges are dismissed. Discussion and questions. Elizabeth King asked about any benefit if this law was to pass.

Dr. Becker discussed the complexity of these cases. Dr. Becker does believe that this bill will not fix the problems with these patients and defendants. Discussion on why some complex patients can be housed versus IDD and autistic patients.

VIII.Public Comment:

No public comment

IX.Ad-hoc Committee Reports:

None

X.Executive Session:

Executive Session for Outpatient Commitments and Recent Discharges by Courts.

XI.QAPI Monthly Reports:**Regulatory Compliance**

Winn presented information on Patient advocacy and the increase in exit surveys for the month since incorporating 2 advocates. Winn also presented information on calls from APS reports to CMS and Ombudsman.

Health Care equality and recognizing patient needs is a new national patient safety goal for TJC. STI's is the current disparity being addressed by API this year.

Treatment Plan Implementation Update

Treatment plan is ongoing. Rebecca Morrissey discussed Treatment Progress. Katmai and Susitna have been trained and will move to smaller units by the end of July for training.

XII.Executive Reports**CEO Report**

- Health care appreciation week was a success. Slide were presented.
- New EMR Netsmart to have kick off June 21-22
- Medicaid Reimbursement medical necessity reviews have been reinstated with the ending of the Public Health Emergency. Due to our high length of stay we have seen an increase in denials. Discharge barriers remain a concern. In May, the Chilkat unit had 7 denials encompassing 146 days at a revenue loss of \$246,000.
- RFP for Billing and Coding: York will develop an RFP for a contractor to audit/evaluate APIs billing and coding processes to learn how we can maximize our processes/collections.
- Discussion what was the data prior to covid. I don't understand this??
- State and patient WiFi are still moving towards completion.

CFO Report

- Andrews spoke to vacancies and reporting timelines.
- Reporting timelines of when we get these reports has changed. The report will be completed and presented at GB meeting next month. For the past 3 months (January, February, and March), the API

average vacancy rate has held at 21.4 percent. In April, a little improvement to the vacancy rate went down to 20.6 percent with 66 vacancies out of 320 total positions.

- Andrews continues to work on recruitment needs in administrative areas.
- End of the fiscal year June 30th and reappropriation period starting July 1, 2023; as a result, there are fiscal and budgetarily deadlines.

Medical Staff Report

- Dr. Long presented slides on medical staff updates.
- Discussed he's working on medical staff bylaws.
- Dr. Long has completed yearly state evaluations.
- Ninth (9th) medical student is starting end of June.
- Continue to work with SDS on discharge plans and placement for our multiple developmentally delayed clients.

Clinical Report:

- Dr. Becker gave program updates on Outpatient Competency Restoration (OPCR), Jail-Based Outpatient Competency Restoration (JBOPCR), Outpatient commitment, and Alaska Psychology Internship Consortium (AKPIC).
- Outpatients visit for outpatient commitment. August is the plan for opening. Jail-based in late July/August.

Nursing Report:

- Steeves reported on nursing open positions. Continue to use travel nurses. Expecting 7 more to bridge summer gaps.
- Hiring challenges continue. Surveying staff to identify any schedule change recommendations. Reaching out to schools of nursing to advertise with their new graduate RN's. Working with education to ensure that orientation and onboarding of new nurses is meeting needs.
- Nursing leadership is creating additional assistant manager roles and redesigning org charts and proposing to the commissioner's office. This will decrease the number of staff managers must supervise.
- Patient population change: increased acuity across the facility continues.
- Wound care clinic started by medical on Thursdays
- We have seen an increase in medically fragile patients; for example, we had 2 patients requiring an indwelling Foley catheter.
- Weekly topic posted by education on a clinical assessment for a medical condition to support clinical decision-making on the floors.
- Weekly topic posted by education, on different subjects related to medical conditions, to support or reinforce clinical decision-making on the floors.

Changes that were needed to meet medical demands.

- Purchased a bladder scanner.
- Purchased a Sara Steady mobility device.
- Clinical team meeting to assess additional support, training, and tools.
- Leadership development Nurse Managers
 - Dare to Lead Book with nurse managers training.

XIII. Adjourned:

Elizabeth King called for adjournment. It was seconded. There was no further discussion. **Motion to adjourn** was passed with unanimous consent at 4:03.