# Alaska Psychiatric Institute Governing Body, June 16, 2022, Meeting Minutes

#### I.Call to Order

Co-Chair Elizabeth King called Alaska Psychiatric Institute Governing Body meeting of the to order at 1:46PM via Zoom on June 16, 2022.

#### II.Introduction and Roll Call

## **Voting Members Present:**

Vice Chair- Elizabeth King, Alaska State Hospital and Nursing Home Association

Treasurer - Summer LeFebvre, Alaska Behavioral Health Association

Secretary - Jason Lessard, National Alliance on Mental Illness

Dr. Rick Ellsasser, Alaska Native Health Board

Dr. Anne Zink, Chief Medical Officer

Charlene Tautfest, Mental Health Board

Scott York, Alaska Psychiatric Institute Chief Executive Officer

John Lee, Director of Senior, and Disability Services

### **Voting Members Absent:**

Chair - Clinton Lasley, Deputy Commissioner of Family Community, and Integrated Services

Adam Crum, Commissioner of Department of Health, and Social Services

Gennifer Moreau-Johnson, Director of Behavioral Health

Jennifer Peeks, Alaska Primary Care Association

# **Non-Voting Members Present:**

Leslie Jaehnig, Disability Law Center

### **Non-Voting Members Absent:**

Adam Rutherford, Department of Correction

Aesha Pallesen, Alaska Court System

Beverly Schoonover, Alaska Mental Health Board

Daniel Delfino, Alaska Housing Finance Corporation

Dr. David Moxley, University of Alaska

Dr. Helen Adams, American College of Emergency Physicians

Katie Baldwin Johnson, Alaska Mental Health Trust Authority

Mark Regin, Disability Law Center

Vacant, Alaska Academy of Family Physicians.

Vacant, Alaska Coalition on housing and homelessness

Vacant, City of Anchorage Department of Health and Social Services.

Vacant, City of Anchorage Police Department.

Vacant, Office of Public Advocacy

Chrissy Vogeley, DHSS Special Assistant

Steven Bookman, Department of Law

### **API Staff Reporting:**

Erica Steeves, Director of Nursing

Christy Winn, QAPI Director

Kristy Becker, Director of Clinical Services

### III.Review and Approval of the Agenda:

**John Lee motion to approve the agenda,** Charlene Tautfest seconded the motion to include amending agenda to add to old business Training for Transgender Patient Policy, Communication Plan with DSS, and add Update on OPRC to new business and Impact on API as the closures of shelters are underway. The Co-Chair called for discussion or debate on the main motion on the floor. Motion **carries, approved by unanimous consent.** 

## IV.Review and approval of Minutes:

**John Lee motion to approve the minutes**. Summer LeFebvre seconded the motion with editorial corrections within the nurse's report and clarification on sentence structure within Nursing Report. The Chair called for discussion or debate on the main motion on the floor. Motion carries, approved by unanimous consent.

**The Co-Chair went on record to announce** the name change of Alaska State Hospital & Nursing Home Association has changed and their official name is now Alaska Hospital & Healthcare Association.

# V.Items for Consent:

## Policy Review/Approval

No policies to review

### **Policy Presentation**

CEO conveyed to the GB the change in process of API and presenting policy for approval by GB. He stated moving forward all policies presented to the GB will have the CEO (signature or initials). This will indicate the policy has undergone a review process to include errors, language, sentence structure and will be indication policy is acceptable as it relates to grammar. He explained that this change is to improve the utilization of time and allow the GB to focus on the contents of policy. Co-Chair informed API that moving forward policies, information, not received seven-days prior to public notice will not be taken up during the meeting. He responded by informing the GB that API is drafting a timeline around preparation for GB meetings, the draft will include internal deadlines for document collection and review, draft agenda to the GB, public notice, etc. He stated once draft is complete it will be sent to executive members for review and will become a permanent guide for API moving forward.

The Co-Chair asked if any members had any additional thoughts or comments on this topic. There was no further discussion.

#### VI.New Business:

## **Imminent Shelter Closures and Impact on API**

Scott provided an overall view of the potential effects on API and the shelter closure. He stated that in recent times the inability to discharge has increased. He pointed out that the GR funds have not been distributed however we are on an upward slope with discharges, however it is still not where it needs to be. He further stated that API Social Worker Director has shifted his team to focus on the mayor's work plan which contained a list of resources to help increase discharges. He provided a list of resources in the mayor's plan. (See below) He deferred and asked for status update of GR funds from John Lee, John stated that the funding had passed, and the Governor has until end of month to sign. He further stated that the process will take longer, and he is not able to provide an exact date as the proposal requires a change to regulation. He concluded by stating once the process is completed, it will deliver and increase to AFL rates currently \$70.00/day to \$104/per day. Scott continued his presentation to GB by displaying a chart representing API current average length of stay for non-forensic patients. There was a brief discussion with Q&A regarding the data shared

Dr Zink requested clarification on the average daily census; he responded that API is circling around 60 between ALFs, discharging and admission. He further stated not being able to discharge, effects directly effects the total number of admissions.

Dr. Zink asked if API was tracking data around what the percentage of API patients are homeless and what percentage of were discharged to shelters; he responded that as of May API had 69 discharges and 26 of the discharges were to shelters with an overall 26%

Dr. Zink expressed that she was happy that API is tracking this data and she offered suggestion on capturing the data, she also offered resources from the department.

Co-Chair asked if the data calculated was based on the month notated on the graph; his response was yes, it is the total of number patient stays and discharges divided number of patients

- Current list from mayor's plan:
  - o Tudor Gospel Mission
  - o Alaska Behavioral Health Residential Treatment
  - Sockeye Inn
  - Brother Francis
  - o Hope Center
  - Soup Kitchen
  - Hope Suites Housing

#### VII.Old Business:

### **Department split**

Chrissy Vogeley reported to the GB that the departments names and logos have been chosen, they will take effect July 1, 2022.

#### Capacity at API

Scott York reported to the GB that API current capacity is at sixty-four the census is directly related to filling nursing staff position, retention, and comparable wages. He asked that Erica Steeves provide more detailed information on the staffing issues within her area and issues that are contributing factors to the current capacity. Erica informed the GB that API is struggling in hiring RNs on the nursing side as well as PNAs. She further informed the members that API is short two-unit managers and need on-call (non-permenant) and weekend applicants. To bridge the gaps API is using travelers. She concluded by explaining that API has been able to work with vocational rehab services with hopes of discharging clients. She further stated she was pleased to announce that API was able to work with Pioneer Homes to discharge a long-term complex case that has been in facility for 100 days requiring two turns every two hours. She states that API is working with all resources but find that most are running into staffing issues which is also hindering their admissions. Scott further explained APIs approach to increase applicant pool by including a possible raise increases for weekend staff and on call non-permanent. He concluded with offering additional outlets to advertise that API is seeking applicants he suggested that we may need to post at the unemployment offices for patient PNA's.

The Chair asked if any members had any thoughts or comments on this topic. There was no further discussion.

#### **Mission Statement**

A meeting with API leadership and the GB Executive members is scheduled for June 28<sup>th</sup>. The meeting will again be led by Diane Decker. The focus will be on wordsmithing the draft developed by the API leadership and then working on the Vision Statement and Core Values.

## **API Performance Evaluation**

No Report

## **Governing Body Bylaws Review**

No report

#### **GB Performance Evaluation**

No Report

## **Forensic Waitlist Policy**

Chrissy Vogeley explained the Forensic Waitlist Policy has been finalize and approved. The policy will take effect July 1, 2022

## **Training on Transgender Update**

Jason Lessard requested an update from API, regarding the training on transgender offered to staff. Erica Steeves answered and provided an update to the GB that API has assigned all required employees to complete the training found in AspireAlaska. However, she stated that API is still looking and working for other options.

## Communication Between DSS/ Public Recognition of the API

Scott York reported that Deputy Commissioner Clinton Lasley requested this be placed on pause due to the department split. He further stated this is paused as there are three (3) other divisions needing recognition and understanding of the political landscape at this time. Deputy Commissioner will share the departments plan at a future meeting. Co-Chair stated she understands this has been paused however expressed the desire for the GB to continue to keep thinking on how to change the public perception by showing API in a positive light sharing some of the significant changes, enhancements, accommodation to remove the stigma that has be lingering, over the last couple of years. There was a brief discussion about the focus on API and understanding the position of the Deputy Commissioner to pause

### VIII.Public Comment:

Chair open the floor for open public comment at 2:55p

### IX.Ad-hoc Committee Reports:

## **Employee Wellbeing**

Summer LeFebvre reported to the GB that she is going to schedule the first meeting the second week of July. She continued by asking members if they are willing to join the committee and work with her. She received volunteers from Jason Lessard and Elizabeth King. She further asked API if they had potential staff who may want to join this committee; Erica and Dr Becker responded they will take it up with their staff and if they are they will reach out to Summer and provide their contact information.

#### **Strategic Planning**

Tabled - No Report

#### X.Executive Session:

No session called

#### XI.Public Comment:

Chair open the floor for open public comment at 3:00p

## XII.QAPI Monthly Required Reporting:

## **Regulatory Compliance**

Christy Winn reviewed the dashboard data (See below), there was a brief discussion on the notable change in the numbers. She continued by reporting the improvement on discharge and readmission rates. She further stated that API discharge planning report is due next quarter, and it will provide more detail. Co-Chair compliment API and was pleased to see the decrease in numbers.

- Decrease in discharge readmissions rates within 30 days
- Decrease in discharge readmissions rates within 180days
- Hand Hygiene continues to decrease due to the sanitizer station on units and continued real-time training
- Grievance and family support maintain 80%
- Weekend discharge have been at a consistent 80% API is evaluating the possibility of increase their goal.

## Review of corrective action plans and outcomes

 Christy Winn informed the GB that API patient surveys percentage is down, she highlights two contributing factors such as the warmer weather, allows patients to have more outdoor activities and the new Denali unit has allowed staff more time assisting and working with other patients

## **Quality Improve Projects**

No Report

## XIII.Executive Reports

### **CEO Report:**

No Report

## **CFO Report:**

### Administrative Dashboard

Scott York reported on the administrative dashboard which communicated monthly, quarterly, biannually and year to date data. The administrative dashboard included staff vacancy, retention, separations, hires, staff injuries, patient on staff assaults, staff on staff assaults, contracts, the current workers compensation claims, and provide status of contracts.

#### **Contracts**

Due to staffing shortage within Grants and Contracts, we were able to extend Centennial and RM Snow Plowing for an additional year. The three-contracts due for renewal in June APIs plan to renew.

#### **Financials**

Scott York stated \$6.5M is being carried over to FY2023. He stated with these funds API will be starting the year in an outstanding position and allows for the uncompleted projects from FY22 to be complete. The facility projects reported in previous meetings account from approximately \$2M. The projects have either been approved, in the process of approval and in some cases have been started.

#### New CFO

He reported that Tina Cochran is retiring and her last day in the hospital is June 15<sup>th</sup>. She will work remote three days a week (T, W, Th) thru July. He further reported that they have had interviews and have selected a candidate, however, waiting on approval to make an offer.

## **Medical Staff Report:**

Scott reported to the GB that Dr Long is on vacation, and he and Dr Becker would present on his behalf.

## Credentialing

Dr Becker presented Kristina Akopian-Beasley PsyD to the board for credentialing approval, **John Lee motion to approve**, the motion was seconded by Jason Lessard. The Co-Chair called for discussion or debate. There was no discussion or debate on the main motion on the floor. **Motion carries approved by unanimous consent.** 

She continued and presented Gregory Lobb, PhD, to the board for credentialing approval, **John Lee motion to approve**, the motion was seconded by Jason Lessard. The Co-Chair called for discussion or debate. There was no discussion or debate on the main motion on the floor. **Motion carries approved by unanimous consent.** 

### Psychiatrist Salaries

Scott shared that the 14% salary increase for psychiatrists was approved. This was the first increase for psychiatrists since 2015. It's believed that with the increase plus SHARP funds we have a very good opportunity to recruit 3 psychiatrists to full-time status. Two are current locum tenens with API and the other currently works in the community.

## **Clinical Report:**

- 1) Dr Becker reported to the GB that API is performing risk assessment based on the HCR 2020 training staff received late last year. It is helpful in determining the patient long term risk to the community.
- 2) She explained that she is waiting on two Letters of Agreements for two forensic psychologists for the outpatient program.
- 3) The class study for psychologist for a separate class for the state of Alaska, which is great news.
- 4) She concluded by reporting that is currently hosting two psychology students actively in school one at master level and the other at PhD level doing group work and induvial hopes to rejoin the internship and consortium

### **Nursing Report**

No Report

#### XIV.Open Discussion

Beverley Schoonover raised a question to API regarding passage of "Telehealth" bill 265 (not signed) and has API reviewed the bill to see if there was anything that would benefit API. Co-Chair noted that it is a two-sided coin and that it has been used in the past needing to support staff and the other providers and helping keeping patient in community. Scott responded that API is was considering telehealth early on when the pandemic hit, however API determined this was a last resort for our providers to minimize their exposure to the virus, he further stated if another facility is housing one of our patients that has med management needs, we it would be done over the phone and not virtual. Dr Zink added that CMS clarifies that this would count as telehealth, and this is part of the package sent to Governor.

House bill 172 "crisis now bill+ specific language that the department and mental health trust are going to pull together patient care and patient rights. Currently there is not a process yet but suggested that members of GB participate in the discussion. Dr Zink added that this bill is part of the package submitted to the governor and we are waiting on signature

### XV.Adjourned:

Co-Chair Elizabeth called for motion to adjourn if there was no further discussion from the board. There was no further discussion. John Lee motion to adjourn, the motion on the floor

pm.		

seconded by Summer LeFebvre. Motion to adjourn passed with unanimous consent at 3:30