Alaska Psychiatric Institute Governing Body, July 21, 2022, Meeting Minutes

I.Call to Order

Co-Chair Elizabeth King called Alaska Psychiatric Institute Governing Body meeting of the to order at 1:30pm via Zoom on July 21, 2022.

II.Introduction and Roll Call

Voting Members Present:

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

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:

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

Beverly Schoonover, Alaska Mental Health Board

Stephanie Hopkins, Alaska Mental Health Board

Gennifer Moreau-Johnson, Director of Behavioral Health

Jennifer Peeks, Alaska Primary Care Association

Non-Voting Members Present:

Aesha Pallesen, Alaska Court System

Dr. Helen Adams, American College of Emergency Physicians

Katie Baldwin Johnson, Alaska Mental Health Trust Authority

Leslie Jaehnig, Disability Law Center

Non-Voting Members Absent:

Adam Rutherford, Department of Correction

Daniel Delfino, Alaska Housing Finance Corporation

Dr. David Moxley, University of Alaska

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:

April Andrews, Chief Financial Officer (replacement)
Erica Steeves, Director of Nursing
Christy Winn, QAPI Director
Kristy Becker, Director of Clinical Services
Scott York, Chief Executive Officer
Tina Cochran, Chief Financial Officer (retiring)
Robert Long, Medical Director/Chief of Psych

III.Review and Approval of the Agenda:

Jason Lessard motion **to approve the agenda**, John Lee seconded the motion The Co-Chair called for discussion or debate on the main motion on the floor. There was no discussion or debate **motion carries, approved by unanimous consent.**

IV. Review and approval of Minutes:

Jason Lessard motion to approve the minutes. John Lee seconded the motion. The Chair called for discussion or debate on the main motion on the floor. There was no discussion or debate **motion carries**, **approved by unanimous consent.**

The Co-Chair introduced and welcomed Commissioner Kim Kovol for attending the GB meeting. Commissioner Kim Kovol responded with her gratitude to be invited and state she is traveling, and her goal is to meet all sites and meet all staff with in the first 30 days of her appointment and she has accomplished to visit twenty-one.

V.Items for Consent:

a. Policy Review/Approval

Scott York provided a brief explanation of the process generated inhouse at API to ensure that all documents are prepared and timely per the requirements of the bylaws and public notice. The GB provided positive feedback to API for their continued effort in accommodating and respecting others time and the bylaws. There was a brief discussion about the new process. API and the GB agreed moving forward all documents will be sent to the GB officers to include the edited version of any policies that will need to be approved at the upcoming meeting at the same time as the public notice, and the only the required documents including the final version for approval for a policy be placed on public notice.

b. PC-030-012 Consults or Transfer for Provision of Care Outside of API

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

The Co-Chair asked for a motion to approve policy PC-030-012. John Lee moves to approve the policy. The motion was seconded by Summer LeFebvre. Motion Carries approved by unanimous consent.

c. LD -04-03.09 Contracted, Contractor Services

The Co-Chair asked if any members had any additional thoughts or comments on this policy. There was a brief discussion.

The Co-Chair asked for a motion to approve policy LD-04-03.09. The Co-Chair moves to approve the policy. The motion was seconded by John Lee. Motion Carries approved by unanimous consent.

VI.New Business:

Department /Project Spotlight:

Nothing to provide

Collaboration on tentative in-person meetings

The Co-Chair proposed to move the GB meeting to in-person starting next month or September. There was a brief discussion around having the appropriate space at API. The GB and API agreed to reconvene in September to in-person meetings contingent on COVID.

VII.Old Business:

Department split

DC Clinton Lasley updated the GB regarding the finalized split which took effect July 1, 2022. We are now part of Department of Family Community Services (DFCS). He thanked Commissioner Kim Kovol for taking time to join the meeting. He updated the GB that weekly meetings are being held with the executive leadership team within the new department around ongoing collective communication, collaborative meetings, working on streamlining processes to include sharing procedures across department. He provided update on the plan for community recognition and API. He opens the floor to questions.

Katie Baldwin Johnson – What is the conversation around the issues and concerns with complex care cases with the two different departments?

DC Clinton Lasley responded by providing an example with a recent complex case with a youth, and how working across departments displayed the great efforts and accomplishment. He concluded by stating that we want to continue moving forward to improve the process of cross collaboration.

Scott York responded that we have currently found acute placement for an adolescent in Arizona. Scott spoke with CEO with Aurora Behavioral Health for adolescents, and would they be willing to have conversations about offering special needs services in Alaska. He further stated he is also looking into other facilities for adults who would be willing to provide similar services in our area.

Capacity at API

Scott York provided update on API staffing by listing areas of concerns, filling position, employee retention, relocation, termination, and comparable wages. He further reported to GB that API has taken action to fill in gaps with traveling nurses. He discussed the effects of the two incoming complex patient(s) simultaneously and the effect it has had on census. He further stated he is working on generating LOAs to build an on-call staff and weekend staff pool to assist with callouts etc. He is working with our HR business partner on possibly having walk-in interviews. He displayed a graph to show the number of discharges to shelters and ALFs and the different shelters that are available to API and the different obstacles found within the shelters and their abilities to

assist. He further stated that the closing of the Sullivan has not had any significant change to API. There was a brief Q&A and discussion.

- Charlene Tautfest Asked if API is discharging to parks? Dr. Long responded that discharging to a park would not follow our protocol for discharge. He further stated that Sullivan and the Centennial Park and the rise in homeless has not affected API today. He further stated API utilize the facilities that are available, and he provide Tudor Mission shelter as example.
- Commissioner Kim Kovol added by providing information regarding the shelters listed on the slide and added information on the type of shelters and the number of beds and the type of criteria of each shelter.
- DC Clinton Lasley Asked is API tracking homeless coming in discharges of homeless, shelters and ALF and the returns (based on>72hr 30 60 90 120 days) on where they are going. Christy Winn stated it is reported quarterly based on (30,90, 120 day) however it can be broken down for homeless specific and discharge location for the GB
- Charlene Tautfest Asked if API is tracking adolescent and where they are discharged to?
 Christy Winn stated API can add to dashboard return rates, locations etc. Dr Becker stated that adolescents would not be released from our facility without appropriate shelter and the Covenant House is the only appropriate shelter in our area. She continued to state that we tend to look for long term placement.
- Katie Baldwin Johnson Asked does API track patients discharged if they go to hospital. Dr Becker responded depending on how it is documented we may or may not, however if they are exparte then yes, we see that data and they are placed on waiting list but if they are not admitted or do not need the care its very likely that we will not receive that data
- Scott provided data about the patients over 100 days which include 4 adolescents (two adolescent with safety concerns and two waiting out of state placements and the referral has been made) 12 adults (six adults found to be no restorable to stand trial and have been placed on civil unit and seven with no placement to meet their needs (the no restorable patients make up 10% of the total adult population)
- Commissioner Kim Kovol responded to question raised by Jason Lessard about the Aviator project; she stated the Aviator (it is at pause) current legislative is looking for FEMA and if overruled could extend to September 90/10 and decrease as time moves on

Mission Statement/Vision Statement

Scott York displayed the finalized mission and vision statement developed between API and the GB.

- Mission Statement "Providing compassionate health care to support Alaskan's in living their best possible lives"
- Vision Statement "An Alaska where everyone receives the care they need, when they need it, without judgement"

The Co-Chair asked for a motion to approve the motion on the floor. John Lee moves to approve the policy. The motion was seconded by Scott York. Motion Carries approved by unanimous consent

The Chair asked if any members had any thoughts or comments on this topic. There was brief discussion.

Scott York concluded by reporting that API is working with their leadership and employees on developing the values and will be presenting to board soon.

API Performance Evaluation

Co-Chair explained that this evaluation is based on Joint Commission Standards and will be sent out to GB for review.

Governing Body Performance Evaluation

Co-Chair open the discussion stating this was tabled until split and now we need to revisit, she stated that there is not a set standard and provided the ideas from previous discussion which consist of API evaluating the GB as well as having GB evaluation their self

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

Governing Body Bylaws Review

DC Clinton Lasley stated that we need to have discussions regarding this review especially considering the split. He also stated that we need to look at the membership and the vacancy positions. He further recommended that the officers of the board conduct a review of the bylaws over the next 90 days to include the various subject experts to work with the officers which will include API and the officer will present to board in October.

The Chair asked if any members had any thoughts or comments on this topic. There was a brief discussion

VIII.Public Comment:

Chair open the floor for open public comment at 3:06pm

IX.Ad-hoc Committee Reports:

Employee Wellbeing

Summer LeFebvre reported to the GB that the committee had their first meeting July 7th with several member and API participation She provided a list of areas discussed at the committee such as employee recognitions, fundraising, more staff input (suggestion box). She reported the GB that the next meeting will be August 7th. She raised the question to the board what the ability of the board for fundraising?

The Chair asked if any members had any thoughts or comments on this topic. There was a brief discussion

Strategic Planning

Tabled until bylaws review has been completed, and all parties are involved.

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

X.Executive Session:

No session called

XI.QAPI Monthly Required Reporting:

Regulatory Compliance

Christy presented the QAPI Report dashboard for month of June. The QAPI report included utilization, suicide assessment, discharge planning, infection control, clinical care, rehab therapy, grievance and family support, environment of care and safety, and medication management information. There was a brief discussion regarding the different areas of the dashboard.

- Suicide Assessment one outlier 13-year-old that arrived late afternoon and was completed the next day however missed the 24hr mark
- Hand Hygiene one outlier in our observation
- Hospital Acquired infection one outlier patient which was pneumonia (explained there was nothing different within the hospital, however with the weather change and patient was a little more susceptible.
- Grievance and family support missed a few of the weekend patient discharges and we missed our goal of 80%
- Seclusion and Restraint there were zero for June and one of the highest contributing factors is the opening the Denali Unit

Review of corrective action plans and outcomes

• No Report

Quality Improve Projects

No Report

XII.Executive Reports

CEO Report:

Scott York provided the GB a detailed update on the current projects (listed below). He concluded by reporting to the GB that he is planning to do more networking with local partners and work with other agencies within the community to build relationships and open conversations on how to provide more options for patients discharging. There was a brief discussion around tiger text, and he provided a detailed outline of the application and opening inner internal communication across the network and potentially offer communication outside network.

• Camera/CCTV - \$550,000 project and is about 30%-40% completed

- Mini Mart has been completed and receiving positive feedback from staff is great and it allows the hospital to provide for the needs for all staff 24 hours
- Carpeting (2nd floor) replaced
- Direct Digital Controls on the horizon
- Sidewalk and curbing completed
- Parking Lot should be completed soon
- Boilers waiting on values that have been order
- Wi-Fi for patient's agreement signed and that should be completed shortly
- Property Smart Lockers should be initiated in October these will be placed in our gym storage to properly securing patient items
- Wi-Fi for State no update currently
- Nurse call System/Access controls we are still working on training on the system should have update next month
- Tiger Text currently identify who will have access to the text; the encrypted text app will be placed on state cellphones as well as desktops looking to see this in August.

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

CFO Report:

Administrative Dashboard

Tina Cochran 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.

- DC Clinton Lasley asked if there was a more detailed breakdown of the vacancy and why. Tina Cochran responded that this is possible, and API will work on this moving forward.

Contracts

She further explained that API has three contracts coming in June. She explained that the API performs evaluations on contracts three months prior to them ending to determine if we will extend or if any renewals or end of life. The three-contracts in June API has plans to renew.

Financials

She further stated \$6.5M is being carried over to FY2023 which will put API in an outstanding position. API will be moving forward in working to update the management plan of our medical records in essence bring API management system update. The budget has passed, and API is working on building the management plan for FY23. She informed the GB that they will not see projects at the next meeting, and this will not be reported again until September or October.

DC Clinton Lasley and the GB provided a big thank you to Tina Cochran for all the knowledge and expertise she brought to the table.

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

Medical Staff Report:

Dr Long reported that he is pleased that the goal to have a complete medical staff at API is happening. He continued by reporting to the GB that API is currently conducting the biannual set of peer review process. He further reported that API is currently working with UW third medical student which is going well. He also updated the GB that we have two contactors moving over to API employees, which will remove the constant need for Locums and to provide consistence with patient staff interaction

Recredentialing

Dr Long presented Dr. Joseph Pace, to the board for re credentialing approval, **Jason Lessard motion to approve**, the motion was seconded by John Lee. 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.**

He continued and presented Dr. Deborah Guris, to the board for credentialing approval, **Summer LeFebvre moved motion to approve**, the motion was seconded by John Lee. 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.**

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

Clinical Report:

Dr Becker reported, displayed, and explained the data around the discharges of API (see list below) She continued to update the GB on the onboarding of leadership for the OPCR, and discussed the possibility of working with DOC help coordinate services and open some type of restoration program within the jail. She continued to update the GB on the approval of CBP-T Cogent Behavioral Therapy-Psychosis training which will allow API to have eight staff members attend the training, risk assessments and staffing.

- Discharges to home setting increased from 2019
- Discharges to shelter/street increased significantly
- Discharges to DOC has decreased over the years
- Discharges by court/AMA is steady

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

Nursing Report

Erica Steeves gave the API Nursing report. She further elaborated on data provided by CFO by providing detailed vacancy positions for the nursing department. She provided to the GB that with the department split API has experienced issues with posting positions as others within the new department. She reported to the GB an update on the units, however the data displayed was outdated due to the two complex cases admitted over the holiday, and the closing of a unit to accommodate these cases. She reported that after discharging one of the complex cases, API was able to re-open the Denali unit. However, the gap in the census remained to allow for the patients transition back to the unit to adjust, giving nursing and medical staff the opportunity to access and decide on whether to increase census. She concluded on a positive note that the frontline team on the Denali Unit created a behavioral tracking tool based on patient behavioral plan and the

treatment plans on the unit. This tool tracks escalation data into 4 hours blocks, with the intent of determining when and what are the common trigger points and times of escalation. This is a work in progress and is intended to be overlapping with the medication given to provide to the complex treatment team to determine what the patients' needs and or triggers are, with the hope of possibly moving to a less restrictive living environment.

XIII.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 was seconded by Summer LeFebvre. Motion to adjourn passed with unanimous consent at 4:33 pm.