

**ALASKA PSYCHIATRIC INSTITUTE
GOVERNING BODY
BYLAWS**

ARTICLE I

SECTION 1. OWNERSHIP AND CONTROL

- A. The Alaska Psychiatric Institute ("Hospital" or "API" or "Facility") shall be the official name of the Hospital located at 3700 Piper Street, Anchorage, AK, 99508. The Hospital is a state-licensed Psychiatric Specialty Hospital pursuant to [7 AAC 12.215](#) under the jurisdiction, management, and control of the State of Alaska, Department of Family and Community Services.

SECTION 2. ROLE AND PURPOSE

- A. API exists to provide inpatient psychiatric care in accordance with [7 AAC 140.350](#). Services provided include inpatient psychiatric hospitalization for 1) individuals voluntarily consenting to treatment at the Hospital for inpatient psychiatric care, 2) individuals involuntarily committed to the Facility by court order in accordance with [AS 12.47.100](#), and 3) individuals involuntarily committed to the Facility in accordance with [AS 47.30.700](#) *et seq.*

SECTION 3. STATEMENT OF MISSION

- A. The mission of the Alaska Psychiatric Institute is providing compassionate health care to support Alaskans in living their best possible lives.

SECTION 4. VISION

- A. An Alaska where everyone receives the care they need, when they need it, without judgment.

SECTION 5. VALUES

- A. The Hospital values: I.D.E.A.S.
- a. Integrity
 - b. Dignity
 - c. Excellence
 - d. Accountability
 - e. Safety

**ARTICLE II
GOVERNING BODY OF THE HOSPITAL**

SECTION 1. LEGAL AUTHORITY AND ORGANIZATIONAL STRUCTURE

- A. The Department of Family and Community Services ("DFCS") is statutorily established by the State of Alaska as one of the principal Departments of the Executive Branch of the government of the State of Alaska and is headed by the Commissioner.
- B. The Commissioner delegates the responsibilities of operations of the Hospital to the

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Governing Body. The Governing Body of the Alaska Psychiatric Institute shall be comprised of members as described in Section 2 of this Article.

- a. The API Governing Body's primary roles are:
 - i. Setting the strategic direction for the Hospital.
 - ii. Making decisions about the hospitals' vision, mission, and strategies.
 - iii. Establishing policies, overseeing credentialing, setting the tone regarding hospital focus and commitments, and ensuring quality mechanisms and metrics are in place for monitoring implementation.
- b. Responsibilities of the Board are:
 - i. Financial oversight – ensuring the budget prepared by the Hospital fully supports its operational needs and strategic priorities.
 - ii. Board members are sensitive to the expectations and needs of citizens and community organizations. Fostering community relationships supports communication and mutual understanding.
 - iii. Board officers will advocate for the Hospital's priorities through the Governor's office and the State Legislature.
- C. The Alaska Psychiatric Institute exists within DFCS as a specifically budgeted Division and is headed by a Chief Executive Officer ("CEO"). In the absence of the CEO, the CEO has the authority to delegate a person to be in charge of the Hospital. The CEO is delegated the following responsibilities and authority by the Governing Body:
 - a. The day-to-day operations of the Hospital;
 - b. Reviewing and approving the Annual Utilization and Review Plan using criteria approved by the Governing Body;
 - c. In collaboration with the Governing Body, the CEO will draft a Strategic Plan that addresses identified problems and budgetary constraints. The Strategic Plan will be a detailed, written document of guidance concerning the budget, structure, outcome measures, quality assurance, safety, and operation of the Alaska Psychiatric Institute;
 - d. The authority to make medical, clinical, and professional staff appointments, reappointments, termination of appointments, and to grant or revise clinical privileges on an emergency basis; with subsequent review and approval to be obtained by the Governing Body within 45 days;
 - e. The authority to develop a mechanism that assures a single level of patient care without discrimination for patients with the same health problems;
 - f. The authority to develop a mechanism that assures that all individuals responsible for the assessment, treatment, or care of patients are competent in the following, as appropriate to the ages of the persons served:
 - i. The ability to obtain information and interpret information in terms of patient needs;
 - ii. Knowledge of growth and development; and
 - iii. Understanding of the range of treatment needed by these patients.
 - g. The authority to assure the appropriate and available resources are used to support systems for the quality assessment and improvement functions and risk management functions related to patient care and safety;
 - h. The authority to appoint, promote, and discipline employees and contract with other service providers consistent with the rules and regulations governing the Department of Family and Community Services and applicable personnel and the purchasing state law rules and procedures;
 - i. Will be responsible for meeting all applicable laws and regulations pertaining to the Hospital and acting promptly upon reports and reviews of regulatory, inspecting, and accrediting agencies; and

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- j. The authority to approve or deny the involvement of volunteer or auxiliary organizations.

SECTION 2. MEMBERSHIP

- A. The Governing Body consists of ten voting members and four *ex officio* members, with the Commissioner of DFCS having a vote. Membership to the Board will follow the guidelines per Governing Body policy number GB-22-0001. The Board retains the right to select members in the event the organization listed is unable to provide or nominate a member.
- B. Voting members:
 - a. The DFCS Deputy Commissioner;
 - b. The Director of Behavioral Health or Department of Health (DOH) delegate;
 - c. A member who is an advocate for individuals with mental illness, an individual with lived experience, or a family member of an individual with lived experience nominated by the National Alliance on Mental Illness;
 - d. A member nominated by the Alaska Mental Health Board;
 - e. A member nominated by the Alaska Hospital and Healthcare Association;
 - f. A member with expertise in behavioral health outpatient experience nominated by Alaska Behavioral Health Association;
 - g. A member nominated by the Alaska Mental Health Trust Authority;
 - h. A member-at-large with tribal, behavioral healthcare experience;
 - i. A member-at-large who is a health care practitioner specific to psychiatric care who is either a psychiatrist or an advanced nurse practitioner; and
 - j. A member-at-large who is an individual with lived experience or a family member of an individual with lived experience who can apply to the Board via the application process.
- C. *Ex Officio* members:
 - a. The Commissioner of the Department of Family and Community Services shall be an *ex officio* member of the Governing Body, shall have a vote, and will not be counted toward a quorum for purposes of attendance;
 - b. The Chief Executive Officer of the Hospital shall be an *ex officio* member of the Governing Body, shall not have a vote, and will not be counted toward a quorum for purposes of attendance;
 - c. The DOH Chief Medical Officer shall not have a vote and will not be counted toward a quorum for purposes of attendance; and
 - d. The Director of Senior Disability Services shall not have a vote and will not be counted toward a quorum for purposes of attendance.
- D. Non-officer members will serve a three-year term and be eligible for reappointment.
- E. The roles of the Officers of the Governing Body shall be maintained in accordance with Robert's Rules of Order concerning their authority and function. When there is a vacancy in an Office, a voting member (including *ex officio* members) may be nominated by any member of the Governing Body (including non-voting members). Nominations must be confirmed by a majority vote of the voting members. Officers are elected for a period of two years and may be elected for other terms of that office following their first year of service. Officers may serve two consecutive terms with one year off before they are

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eligible to serve another term. Officers of the Governing Body shall be:

- a. Chairperson: shall be the DFCS Deputy Commissioner. The Chairperson of the Governing Body is authorized to act for and on behalf of the Governing Body between meetings. This authority may be delegated to another individual as deemed appropriate;
- b. Vice-Chairperson: shall serve from their election until December 31 of even-numbered years;
- c. Secretary: shall serve from their election until December 31 of odd-numbered years; and
- d. Treasurer: shall serve from their election until December 31 of even-numbered years.

SECTION 3. DUTIES AND RESPONSIBILITIES

- A. The members of the API Governing Body agree to be bound by the underlying principles and rules in [AS 39.52](#) governing ethics for public employees as part of their tenure on the Alaska Psychiatric Institutes Governing Body..
- B. Claims against any of the members of the API Governing Body and all departmental employees are subject to the provisions of [AS 09.50.250](#) and [AS 09.50.253](#).
- C. Members of the API Governing Body accept fiduciary oversight for the Hospital and its operations, policies, governance, and the obligation to continuously strive to provide safe and high-quality care to the patients who seek health services from the Facility.
- D. The API Governing Body shall act as the final arbiter of conflicts between administrative/management groups that cannot be resolved by the customary administrative process.
- E. The Governing Body is empowered to determine and maintain the objectives, purposes, and values of the Hospital and approve the scope of services to ensure the highest quality of inpatient psychiatric services to patients of the Hospital.
- F. The Governing Body has the authority to establish the Medical Executive Committee (MEC). The MEC is the official entity that assures medical staff representation at meetings of the API Governing Body and will provide input and recommendations regarding issues pertaining to quality patient care. Further, the Governing Body is responsible for approving the Medical Staff Bylaws (MSB), rules, and regulations that govern medical staff and other professional staff at the Hospital. The MEC will develop the MSB, review it annually, and present it and any changes to the Governing Body for approval. The Governing Body is responsible for the appointment, reappointment, termination of appointments, and the granting or revision of clinical privileges, as set forth by the Document.
 - a. Any differences between medical staff or professional staff recommendations and the CEO shall be resolved by the Governing Body within 45 days of formal complaint; and
 - b. The MSB will be an attachment to these Bylaws and accepted by reference.
- G. The Governing Body has the power to approve, modify, and disapprove bylaws, rules and regulations, and to assign, curtail, or terminate privileges. Further, the Governing Body is responsible for the approval of all Policies & Procedures.
- H. The Governing Body has a fiscal responsibility to approve the Hospital's annual operation

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budget and long-term capital budget before it is submitted to the Governor.

- I. The Governing Body is responsible for broad policy making in accordance with applicable State of Alaska laws and regulations.
- J. The Governing Body is responsible for maintaining a systematic and effective mechanism for communication between the Governing Body members and the management, medical, clinical, and support staff of the Hospital. The Governing Body is responsible for providing an effective mechanism for maintaining communication with patients, families, and consumers of Hospital services and any other health care delivery organizations that interact with the Hospital.
- K. Working collaboratively with the API CEO, the Governing Body is responsible for establishing a mechanism for conducting institutional planning that invites participation in the process of Hospital management, medical, clinical, and support staff.
- L. The Governing Body ensures that a process is in place for assuring that all individuals providing patient care services, who are not subject to the medical staff privilege process, are competent and qualified to provide such services to all populations served.
- M. The Governing Body ensures that a process is in place for monitoring and evaluating the quality of patient care through an organized performance improvement plan and for the provision of a consistent level of care in the Hospital.
- N. The Governing Body ensures that a process is in place to obtain the necessary information to fulfill its duties and responsibilities.
- O. The Governing Body annually evaluates the Hospital's performance in relation to its Mission, Vision, and Goals.
- P. The Governing Body will evaluate its own performance on an annual basis per Governing Body policy number GB-22-0002.
- Q. The leadership of API will evaluate the Governing Body on an annual basis per Governing Body policy number GB-22-0002.
- R. The Governing Body ensures that an effective safety management program is in place and receives regular reports on its performance.
- S. The Governing Body is responsible for maintaining a grievance process for patients. This process will include at least the following:
 - a. Written notification of patient rights must be provided to patients;
 - b. The presence and availability of Patient Advocates on-site;
 - c. The right of each patient to file complaints both in writing and verbally to staff;
 - d. The right of each patient to appeal any decision made by staff to the Patient Appeals Board (PAB). The PAB is a subcommittee of the Governing Body. The membership of this subcommittee shall be as follows:
 - i. The Chair of the Patient Appeals Board will be an at-large member of the Governing Body. The Chair may be nominated by any member of the Governing Body (including non-voting members) and shall be elected by a majority vote of the voting members. The Chair shall be elected for a term of two years and may be elected for additional terms.

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- ii. The Patient Appeals Board may include both voting and non-voting members of the Governing Body and will require a quorum of at least three Governing Body voting members to conduct business.
 - iii. To mitigate potential conflicts of interest, Governing Body members who are Alaska Psychiatric Institute employees or State of Alaska Department of Family and Community Services employees will be excluded from all PAB meetings. However, the Chair of the PAB shall retain the authority to invite to any PAB meeting Governing Body members who are Alaska Psychiatric Institute employees or State of Alaska Department of Family and Community Services employees.
 - e. The PAB shall meet on matters of patient advocacy and review any appeal within 30 days of submission. Meetings will be publicly noticed, and to ensure patient privacy, the PAB will go into Executive Session when reviewing complaints and appeals. The PAB will submit written recommendations to the Governing Body.
 - f. As a subcommittee of the Governing Body, the PAB will meet as often as necessary. Meeting space – physical and/or virtual - shall be provided by the Alaska Psychiatric Institute.
- T. The Governing Body shall establish a Community Engagement Committee (CEC) that will be responsible for hosting public forums. The CEC shall be a subcommittee of the Governing Body. The membership of this subcommittee shall be as follows:
 - a. The Chair of the CEC shall be a member of the Governing Body. The Chair may be a voting or non-voting member of the Governing Body. The Chair shall be nominated by any member of the Governing Body (including non-voting members) and shall be elected by a majority vote of all Governing Body members (including non-voting members). The Chair shall be elected for a term of two years and may be elected for additional terms.
 - b. CEC forums/events will be held at least quarterly and will be accessible online to ensure state-wide ability to participate. CEC meetings will be publicly noticed and will provide opportunities for questions.
 - c. CEC meeting space - physical and/or virtual – shall be provided by the Alaska Psychiatric Institute.
- U. The Governing Body shall hire a qualified Chief Executive Officer (CEO) and entrust to them the authority and responsibility of the day-to-day operation of the Hospital. The Governing Body has the authority to discipline and remove the CEO should that become necessary. The Governing Body will evaluate the CEO annually and is responsible for guiding and monitoring the CEO's performance.

SECTION 4. MEETINGS

- A. The Governing Body shall meet at least quarterly. Five (5) or more voting members, with no less than four of those not being employed by the Department of Family and Community Services in attendance, will establish a quorum. These meetings will be to conduct the business of the Hospital.
- B. API Governing Body meetings shall be scheduled with reasonable public notice and are open to the public except as otherwise provided by [AS 44.62.310](#). Meeting protocol shall adhere to applicable state laws with motions being approved with a simple majority vote unless otherwise specified in this document. All meetings will have an opportunity for general discussion of its members and a period available for public comment. Governing Body meetings may include staff, or individuals from outside the Hospital, by invitation

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or be closed for an executive session by the Chairperson as permitted by [AS 44.62.310](#).

- C. Minutes of all meetings will be maintained in accordance with Robert's Rules of Order.
- D. Meetings of the Governing Body will have a published agenda posted seven (7) days before the meeting, will include a time for public comment, and may have an Executive Session as permitted by [AS 44.62.310](#). Public notices will be posted seven (7) days prior to the meetings.
- E. Members of the Governing Body shall specify any potential conflict of interest and abstain from voting on matters that may be in conflict.
- F. API Governing Body meetings shall be scheduled with reasonable public notice and are open to the public except as otherwise provided by [AS 44.62.310](#). Meeting protocol shall adhere to applicable state laws with motions being approved by a simple majority vote unless otherwise specified in this document. All meetings will have an opportunity for general discussion of its members and a period available for public comment. Governing Body meetings may include staff, or individuals from outside the Hospital, by invitation or be closed for an executive session by the Chairperson or Vice-Chairperson as permitted by [AS 44.62.310](#).

SECTION 5. COMMITTEES

- A. The Governing Body may establish committees to carry out specific duties and functions as necessary. When the establishment of a committee is deemed appropriate, the Governing Body may delegate authority and responsibility to a committee but retains the prerogative to withdraw authority as appropriate. These Committees may be made up of members of the Governing Body (voting or non-voting), members of staff, or other individuals as seems appropriate to the Governing Body. The Chairperson of the Governing Body shall be an *ex officio* member of any Committee. Committee Chairpersons will be appointed by a majority vote of the Governing Body.

SECTION 6. ADOPTION, REVISION, AND AMENDMENTS

- A. Revisions and amendments of the Governing Body Bylaws may be made at any time by a two-thirds majority vote of the Governing Body. Bylaws shall be reviewed annually and revised as needed. Governing Body members will review the Bylaws with input from the MEC and staff of the Hospital.

