

# Alaska Psychiatric Institute Governing Body

November 14, 2023

## Meeting Minutes

### I. Call to Order

Elizabeth called the meeting of the Alaska Psychiatric Institute Governing Body to order at 1:30 PM via Zoom on November 12, 2023. Mission and Vision of API.

### II. Introduction and Roll Call

#### **Voting Members Present:**

Elizabeth King, *Alaska Hospital and Healthcare Association*

Summer LeFebvre, *Alaska Behavioral Health Association*

Brenda Moore, *Alaska Mental Health Board*

Katie Baldwin Johnson, *Alaska Mental Health Trust Authority*

Tracy Dompeling, *Director of DBH*

Ann Ringstad, *NAMI Alaska*

Dr. Rick Ellsasser, *Alaska Native Health Board (was listed under absent)*

#### **Absent:**

Dr. Anne Zink, *Chief Medical Officer*

Denali Daniels, *Visitor*

Dr. Bri Oswald

#### **Other Members:**

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

Kim Kovol, *Commissioner of Community and Family Services*

#### **Other Members Not Present:**

#### **Visitors:**

Steph Hopkins, *AMHN/ABADA*

Promise Hagedon

Randy Smith

Christel Brito

Cassandra Trombi

#### **API Staff Reporting:**

Scott York, *CEO*

Kristy Becker, *Chief Clinical Officer*

Erica Steeves, *Director of Nursing*

Robert Long, *Medical Director*

Christy Winn, *QAPI Director*

April Andrews, *Chief Financial Officer*

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

Motion to approve agenda with current edits: Denali Daniels will not be on the call. Scott York will give a brief update on Strategic Planning. Kristy Becker, CFO will speak about Forensic Restoration: Outpatient and Jail-Based during her Clinical report. DC Clinton Lasley informed that Dr. Bri Oswald will not speak on Complex Placement due to other conflicting out-of-town commitments. **Agenda approved.**

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### IV. Review and approval of Minutes:

September minutes were reviewed, and the motion was approved with no edits. Katie Baldwin Johnson motioned, and Summer LeFebvre seconded. **Minutes approved.**

### V. New Business:

#### 1. Policy Review:

##### Approved via SharePoint:

- LD.02.02.01 Conflict of Interest (aka PRE-010-02.01 Ethics) 2023
- LD.03.01.01 Code of Conduct (aka HR-040-06 Standard of Conduct) 2023 edits
- LD-03-01.01 Prevention of Bullying and Harassment at Work 09-01-17 to ARCHIVE
- IM-050-05.03 Abbreviations 2023 No Changes
- IC-700 Employee Health Program
- IC-640 Staff Requirements and Responsibilities for Infection Control
- IC-300 Tuberculosis Exposure Control Plan
- PRE-010-04.04 Institutional Review Board 08.28.23 edits
- ASSESS-030-08 Nutritional Screening\_06012023 revisions
- IC-001 Infection Control Program

#### a. Policy Approval Options:

- Scott York discussed that Governing Body is not required to approve policies according to WICHE Consultant and API's research. Instead, Governing Body assigns a group of people or a committee to approve policies, which would be API Policy Committee. Scott York provided two options:
  - Governing Body could either continue to review and approve policies or API could provide a report with any policies outstanding, barriers of success to get policies completed, and when we anticipate the policies to be approved.
  - We will move to a Special software package where all staff will have access to review the policies not to edit/change the policies. To add more licenses, the cost would be an additional \$1000 which is expensive. Scott York posed the question if Governing Body wants to continue to review and approve policies or alternatively, receive a quarterly report.
  - Discussion:
    - Elizabeth King prefers a more comprehensive understanding of the policies to understand API functions rather than just a quarterly report. API approval of policies should not be contingent on waiting for Governing Body approval.
    - DC Clinton Lasley proposed policies continue to be reviewed by Governing Body not for approval purposes but more for informational purposes. Once Governing Body reviews policies and have concerns or questions, these concerns or questions can be addressed at the Governing Body meetings. Governing Body policy approval process has become burdensome not improving the process for API.
    - Elizabeth King asked if DC Clinton Lasley's recommendations are possible without increasing API costs to obtain additional licenses for the Governing Body. Elizabeth inquired about how this would appear.
    - Christy Winn recommended spending the extra \$1000 for additional licenses to allow Governing Body to review policies. Governing Body would be able to review or ask questions on these policies but would not approve these policies.

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- Katie Baldwin-Johnson, Ann Ringstad, Brenda Moore, Summer LeFebvre agreed. They would still like to review policy changes.
- Scott York outcome is API policy Committee will approve and will provide Governing Body with approved policies.

### **b. Secretary Selection/Voting:**

- Elizabeth King asked if anyone would like to be on the board as a secretary.
- Katie Baldwin Johnson inquired about the secretary role and scope and asked if the secretary would need to be a voting member.
- Discussion of the secretary role and scope, including being a part of the Executive Team of Governing Body. Per API Bylaws, executive members are not required to be voting members. Elizabeth King reviewed bylaws. Per API Bylaws, secretary term would start January 2024.
- Ann Ringstad volunteered as secretary. Open nomination to approve Ann Ringstad as secretary.  
**Approved unanimously.**

### **WICHE Consultant Site Visit Findings:**

- Christy Winn discussed WICHE consultants' report findings. Strategy was not discussed due to time.
- WICHE provided ideas where to work and improve processes. WICHE will be back January 2024 to look at focus areas.
- Elizabeth King had concerns and asked for an explanation of page 3: Compliance with Standards: This could be identified by The Joint Commission as a demonstration of noncompliance with the relevant Leadership Standard, including the responsibility of the Governing Body.
- Christy Winn clarified that API Governing Body is an advisory rather than a decision maker; the final decision-making is at the state level rather than the Governing Body level.
- Elizabeth King's concern is on "demonstration of noncompliance". She asked Governing Body role and if, they are compliant with Joint Commission standards.
- Christy Winn stated Governing Body is compliant with Joint Commission standards. Governing Body has the commissioner and deputy commissioner on the board to assist with final decision-making.

### **CMS Site Visit:**

**Christy Winn** discussed CMS visit regarding a sexual assault complaint. CMS findings: API was not at fault or in violation of standards; therefore, the case was closed. Process improvements were made. API followed all policies, guidelines, and conduct— Staff made sure the patient was cared for.

### **Complex Placement:**

- Dr. Bri Oswald was not available to present Complex Placement. DC Clinton Lasley summarized her presentation. Dr. Bri Oswald is gathering information across all four divisions of DFCS to assess the number of inpatient days for individuals either hospitalized or institutionalized in high acuity level settings. Presently, the State of Alaska lacks community-level care options catering to complex youth who can live in a residential setting: less acute and less restrictive levels of care. The goal is to create pilot programs for API youth who could potentially thrive in community-level, care level setting and determine the necessary staffing levels needed in this type of setting. A mid-December meeting with the Department of Health is scheduled to discuss detailed plans. Topics include identifying levels of staffing needed, how to license these homes and addressing how to obtain funding for this initiative. This will entail both youth and adults, primarily housed at API, so that we can initiate across the State of Alaska. The additional funding for the pilot programs were requested and will come from the FY25 budget, he is

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unsure if this will be included in the Governor's budget. We will work together across the departments to find long-term solutions that are feasible. These facilities are not what the departments would operate. We aim to develop a lasting design and mechanism for private settings.

### **Psychiatry Residence Program:**

- Dr. Rick Ellsasser discussed psychiatry residence program. Currently, Dr. Rick Ellsasser and Dr. Van Hafften with the University of Washington to bring students from Southcentral and AKBH for elective rotations. There is renewed interest to bring psychiatry residence programs to Alaska. They need the participation of other hospitals. They are currently working out the details and reviewing contracts.
- Elizabeth King inquired if this would be the first psychiatry residence program in Alaska. Dr. Rick Ellsasser said yes. Elizabeth King inquired if Governing Body could do anything to provide support.
- Dr. Rick Ellsasser said yes, any support the state can provide to assist with student learning in Alaska would be beneficial. He thinks this will alleviate Alaska's workforce issues.

### **VI. Old Business:**

#### **a. Strategic Planning:**

- Denali Daniles was not available. Scott York stated there is a meeting December 4 for Governing Body and API Leadership to discuss the issue paper involving all stakeholder meetings that Denali conducted. There is an internal document that will be emailed and discussed at this meeting. After, Denali Daniels will schedule community forums to share the Strategic Plan.

#### **b. Forensic Restoration:**

- Dr. Kristy Becker will discuss in her Clinical Report.

### **VII. Public Comment:**

No public comment

### **VIII. Ad-hoc Committee Reports:**

No Ad-hoc Committee Reports

### **IX. QAPI Monthly Reports:**

**QAPI Dashboard:** Chrisy Winn No changes; there will be changes on the next dashboard.

- **Observing Hospital Acquired Infections:** skin infections, etc. at API's wound clinic. Rehab Therapy percentages decreased 1:1 sessions, due to Dr. Bri Oswald accepting a new position. An occupational therapist has been hired so 1:1 sessions should increase. Med management will be focused on adverse drug reaction reports. Education has been sent out percentages should increase. Barcode scan rate is above average at 96 percent. In 2024, we will observe ER visits.
- **Readmission Rates:** reported to SAMSHA: rates are decreasing from 2022. Reduction from over 20% and 30% last year to under 10% this year. Q2: 30 Day Readmission: 8%, 90-day delayed discharge 6% and 180-date readmission rate 13%. Despite improvements, API is still striving to meet a target of 3%. API and community are working on this matter for complex discharges and on how to improve readmission rates.
- **Regulatory Concerns:** CMS visit regarding a complaint of sexual assault. No Citations. RCA findings included: staff awareness and communication. Broken Jaw: RCA findings included: no identified behaviors prior to the event to warrant attack. CMS will visit API on this matter. Sexual activity: initial investigation included patients planning this and patient aware of where cameras located and watching staff availability.

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- Elizabeth King asked if all the situations in the regulatory concerns occurred within the last three months and Christy Winn affirmed and stated by multiple patients.
- **Staff Injuries Work Comp:** Worker's Compensation trend is decreasing. Serious injuries are 5 employees or less who had a loss of work.
  - Elizabeth King asked about staff injuries and if, they can be decreased, prevented, or mitigated.
  - Christy Winn responded that nursing has increased staffing where staffing is needed, doing 1:1, 2:1, etc. There are many components that factor into injuries. Erica Steeves stated executive session may be warranted. **End of QAPI Report.**
  - **Motion to move to Executive Session with Governing Board and Erica Steeves:**  
**(Motion/Seconded)**  
Executive Session held.

## CEO Report

- Scott York presented slides:
- *Netsmart/My Avatar* update: implementation change. Netsmart will build an Electronic Medical Records (EMR) for API to review and then API can adjust. Netsmart Psych hospital EMR demo will be in December.
  - Elizabeth King asked if *Netsmart's* original plan was not to build API EMR. Scott York responded their original plan was to complete discovery of API's needs but during this time there was little communication or follow up from Netsmart. The process needed to change; however, there have been challenges with no communication and miscommunication on *Netsmart's* side. Christy Winn specified data and discovery were provided to Netsmart to build a testing environment; however, there were uncertainty about system capabilities on both sides. As a result, they opted to construct an EMR in a testing environment and gather feedback from API staff.
- Request for Proposals (RFP): Nurse recruiter: currently, being recruited; physician recruiter: waiting status; billing/collections: to assess API's coding company to make gains in billing/collections, to determine opportunities to increase revenues and growth, to build EMR for the business process, and pharmacy consultant for efficiencies and processes.
- Environment of Care/Projects: State and Patient Wi-Fi: IT is assisting with blocking certain sites, Overhead Paging: issues and obtaining a new one, and Nurse Call and Access: a two-year process with ongoing technical issues and failure points. The access part has been completed. Maintenance supervisor Randall Smith is setting up a meeting with the contractor, DOT, the nurse call vendor, and the facilities manager to determine what needs to be done to complete this process.

## CFO Report

- April Andrews reporting on staffing at API. A report is missing for August staffing. October and November will be reported on the next meeting, and they may have August reports by then. In September, the vacancy rate was 22.1% with 72 vacancies out of 254 total positions. A 96.9% retention rate number of separations from filled positions; 8 Separations and 10 hired, 2 resignations, 2 transfer to another department, and 2 promotions. Executive offices 100% filled with 10 positions, facility support 5 vacancies with 10% vacancy rate, medical staff 5 vacancies with 16 positions that bringing it to a 31% vacancy, clinical support 15% vacancy rate with 2 vacancies out of 13, nursing unit 46 vacancies out of 149 bringing it to a 24% vacancy rate, and clinical unit 14 vacancies out of 46 bringing it to a 30% vacancy rate. Worker's Compensation number of injuries identified by patient on staff or staff on staff assaults; this is based on all Worker's Compensation claims. In August, 16 Worker's Compensation claims reported and 10 in September. For August, 13 of the 16 were patient on staff assaults and the

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other 3 were other types of injuries not involving another person. For September 9 were reported to be patient on staff assaults bringing it to 90 percent rate for the Worker's Compensation claims. Previously, the Governing Body wanted to add the number of travelers for nursing positions and provider/locum tenens positions to this report. April and her team are compiling data and will have it at the next meeting.

### CFO Budget Presentation

April presented slides on API budget overview topics:

- State budget process: discussed fiscal years and appropriation bills: operating, capital, mental health, supplemental, API's funding source, outlined Alaska's Budget Cycle.
- How expenditures vs. revenue authority operates: described how the budget is organized and structured by departments, explained what API can spend? (fund sources: Unrestricted General Fund (UGF), Designated General Funds, Other and Federal) 40% of API's budget is UGF and 60% is other.
- A look at this fiscal year's budget: outlined fund source and FY2024 Operating Budget, explained where the revenue comes from, detailed figures of Component API FY2024 which illustrated how funding is allocated across various funding categories, presented a graph that depicts how the money is spent, figures of FY2024 Operating Budget Authority By Line Item, detailed figures of FY2024 Operating Budget Funding Sources, FY2024 changes: API received an increase of \$800K for competency restoration and jail based program.
- Capital funding: outlined the available capital budget funds.
- What's to come: What's new for FY2025: API is collaborating with the Alaska Mental Health Trust Authority: 200K additional funds GF/MH for expanded SHARP.

### Discussion:

- Elizabeth King inquired about billing practices, seeking information on the amount of revenue generated from billing, its destination, and the proportion of total revenue attributed to billing.
- April Andrews responded the statutory fund source allows API to bill other agencies for patient billing. The revenue is used to offset the actual expenditures associated with patient care. April Andrews responded the statutory fund source allows us to bill other agencies for patient billing. The revenue is used to offset the actual expenditures associated with patient care. The statutory designated program receipt authority constitutes 19 percent of API's budget.

### Medical Staff Report

- Dr. Robret Long presented slides on medical staff updates.
  - General Updates: coverage continues to be an issue. Dr. Christine Sawyer's last day is November 17. Locum Tenens: Dr. Joseph Pace and Dr. Monika Karazja arrived. Vanessa Urban and Dr. Mia Galimoto scheduled to start approximately December or before.
  - Medical Staff Coordinator: Cassandra (Cassie) Trombi started November 1, 2023.
  - Medical Staff Bylaws pending.
  - University of Washington Medical Students: API will begin hosting its twelfth UW medical student in January 2024. UW Student: Annie Long arrived in October.
  - *Future Goals*: continuing with Strategic Planning, continue strengthening working relationships with other facilities. Have completed the search for a site to begin pilot telepsychiatry program, we have chosen Central Peninsula Hospital as the pilot site.

### Clinical Report:

- Dr. Kristy Becker presented a slide on clinical services updates.

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- API had a successful OPCR ribbon cutting at the Gambell site. Kristy mentioned they already have potential patients for this program. On November 30, API will host an open house for Legislature, Governing Body members, and other individuals identified by our Commissioner Kim Kovol's office, policies and procedures to be presented to GB, inclusion criteria and exclusion criteria: individuals with only misdemeanors, no crimes of force against a person, not violent or frightening in nature, and don't require long-term hospitalization or institutionalization at DOC.
- Highlighted students and interns coming to API for training in 2024.
- Complex discharges are progressing smoothly with Complex Discharge list and fail safes within the hospital.
- Seasonal Reminder: with winter here, let's be attentive to patient needs including, shelter, attire, and mental health condition.

### Nursing Report:

- Erica Steeves, DON presented slides on the Nursing Report.
  - Travelers continue to be used to fill existing vacancies. Erica Steeves discussed nurse coverage and recruitment efforts.
  - New Taku Manager: Promise Hagedon, RN BSN
  - Acting ADON: Desiree Alvarez and acting Susitna manager: Tyler Morris,
  - Quality Improvement: The nursing team is actively elevating Strategic Planning meeting discussions and integrating API Philosophy of Care to reach the next level. The objective is to improve quality of care while giving patients autonomy. They are collaborating with different departments to determine types of activities and the groups that will be hosted during the trial to create a Mega unit 2.0 PDSA. Denali Trial unit will focus on Activities of Daily Living (ADL). Staff will encourage patients to independently manage their ADL and assist with any gaps. Trial will consist of focusing on documentation and support, assessment of staff training needs, development of visual prompts for patients, and goal is to improve quality of life for patients.

### X. Adjourned:

**Elizabeth King called for adjournment.** Katie Baldwin Johnson motion and it was seconded Brenda Moore. There was no further discussion. **The motion to adjourn** was passed with unanimous consent at 4:30 pm.