

**ALASKA PSYCHIATRIC INSTITUTE
GOVERNING BODY BYLAWS**

ARTICLE I

SECTION 1. OWNERSHIP AND CONTROL

- A. The Alaska Psychiatric Institute (hereinafter called "hospital" or "API" or "facility") is a state-licensed psychiatric hospital under the jurisdiction, management, and control of the State of Alaska, Department of Family and Community Services (DFCS).

SECTION 2. ROLE AND PURPOSE

- A. API provides inpatient psychiatric care. Services include inpatient psychiatric hospitalization for individuals involuntarily committed to the facility by court order in accordance with [AS 12.47.100](#), and individuals involuntarily committed to the facility in accordance with [AS 47.30.700](#) *et seq.*

SECTION 3. MISSION

- A. 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

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**ARTICLE II
GOVERNING BODY OF THE HOSPITAL**

SECTION 1. LEGAL AUTHORITY AND ORGANIZATIONAL STRUCTURE

- A. The Department of Family and Community Services is statutorily established by the State of Alaska as a department of the Executive Branch and the Commissioner of DFCS is the individual responsible for API.
- B. The Commissioner delegates certain API duties and responsibilities, as described in Section 3 of Article II, to the Governing Body.
- C. The API Governing Body shall be composed of members as described in Article II, Section 2 of these Bylaws.
- D. API exists within DFCS as a Division and is led and managed by a Chief Executive Officer (CEO). In the absence of the CEO, the CEO has the authority to delegate an individual to oversee 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. Overseeing the implementation of the annual Utilization and Review Plan using criteria approved by the Governing Body;
 - c. Implementing a strategic plan that addresses identified problems and budgetary constraints, in collaboration with the Governing Body. The strategic plan will be a detailed, written document of guidance concerning the budget, structure, outcome measures, quality assurance, safety, and operation of API;
 - d. Making medical, clinical, and professional staff appointments, reappointments, termination of appointments, and granting or revising clinical privileges on an emergency basis; with subsequent review and approval to be obtained from the Governing Body within 45 days of the action;
 - e. Assuring that appropriate and available resources are used to support quality assurance and improvement functions and risk management functions related to patient care and safety;
 - f. The authority to appoint, promote, and discipline employees and contract with other service providers consistent with the rules and regulations governing DFCS and applicable personnel and purchasing state law rules and procedures;
 - g. Complying with all applicable laws and regulations and acting promptly upon reports and reviews of regulatory, inspecting, and accrediting agencies; and
 - h. Approving the involvement of volunteer or auxiliary organizations.

SECTION 2. MEMBERSHIP

- A. The Governing Body shall consist of three voting members and three non-voting members. The Governing Body retains the right to select non-voting members in the event the state agency listed below is unable to provide or nominate a member. If a Voting Member position is held for a period (e.g. due to Acting status) by the same individual, a designee can be identified by the Commissioner. This designee shall only serve until the vacant position is filled.

Voting Members:

- a. The DFCS Commissioner; (Governing Body Chair)
- b. The DFCS Deputy Commissioner (Governing Body Vice Chair); and,
- c. The DFCS Assistant Commissioner.

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Non-voting Members:

- d. The API Chief Executive Officer;
- e. The Alaska Department of Health, Chief Medical Officer; and
- f. The Alaska Department of Health, Division of Behavioral Health Director.

SECTION 3. DUTIES AND RESPONSIBILITIES

- A. The members of the 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 Governing Body.
- B. Claims against any of the members of the Governing Body and all departmental employees are subject to the provisions of [AS 09.50.250](#) and [AS 09.50.253](#).
- C. The Governing Body voting members 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.
- D. The Governing Body reviews and approves the hospital scope of services to ensure the highest quality of inpatient psychiatric services to patients of the hospital.
- E. 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 Governing Body and provides input and recommendations regarding issues pertaining to quality patient care.
- F. 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.
- G. 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 MSB.
 - 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 is incorporated by reference.
- H. The Governing Body has the power to approve, modify, and disapprove bylaws, rules and regulations, and to assign, curtail, or terminate privileges.
- I. The Governing Body has a fiscal responsibility to approve the Hospital's annual operating budget and long-term capital budget before it is submitted to the Governor.
- 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. 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.
- K. The Governing Body ensures that a process is in place for assuring that all individuals

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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.

- L. The Governing Body monitors and evaluates the quality of patient care through the review and approval of an organized performance improvement plan presented annually to the Governing Body by the CEO and the Quality Improvement Director. In addition, the Governing Body will review performance improvement data to monitor the hospital's performance.
- M. The Governing Body ensures that a process is in place to obtain the necessary information to fulfill its duties and responsibilities.
- N. The Governing Body annually evaluates the Hospital's performance in relation to its Mission, Vision, and Goals.
- O. The Governing Body ensures that an effective safety management program is in place and receives regular reports on its performance.
- P. The Governing Body is responsible for maintaining a grievance process for patients. This process will include at least the following:
 - a. Written and oral notification of patient rights must be provided to patients;
 - b. The presence and availability of a Patient Advocate 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 PAB will be nominated by any member of the Governing Body 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. The PAB will include both members of the Governing Body and Advisory Board and will require a quorum of at least three members to conduct business.
 - 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 API.
- Q. 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.

SECTION 4. ADVISORY BOARD

A. Establishment and Purpose

The Governing Body shall establish an Advisory Board. The purpose of the Advisory Board is to provide the Governing Body with non-binding strategic advice, technical expertise, and community and Tribal perspective. The Advisory Board shall have no legal, fiduciary, or other authority over the hospital.

B. Membership and Appointment

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- a. The Governing Body shall appoint a maximum of seven (7) Advisory Board members, with no more than three (3) of those members being employees of the State of Alaska. Prioritization should be given to individuals with lived experience and rural providers.
- b. The Governing Body shall request nominations for representation from, The Alaska Native Health Board, The Alaska Mental Health Trust Authority, The National Alliance on Mental Illness Alaska, and key stakeholders within the Alaska behavioral healthcare system.
- c. The Governing Body shall appoint nominated Advisory Board members to the Advisory Board by a majority vote.
- d. Members shall be chosen based on their expertise, reputation, or ability to further API's mission.
- e. Each member shall serve a term of two (2) years, which may be renewed at the discretion of the Governing Body.

C. Authority and Limitations

The Advisory Board is a consultative body. To maintain the legal distinction between the Governing Body and the Advisory Board:

- a. Advisory Board members shall not have the right to vote on any matter before the Governing Body.
- b. Advisory Board members do not have fiduciary responsibilities and shall not be held liable for the acts of the Governing Body.
- c. No member of the Advisory Board shall have the power to bind the hospital to any contract, debt, or obligation.

D. Meeting and participation

- a. The Advisory Board shall meet at least quarterly. Regular Advisory Board meetings are held concurrently with the Governing Body meetings. If additional meetings are necessary, the Advisory Board may meet independently.

E. Compensation and Expenses

Members of the Advisory Board shall serve without compensation.

SECTION 5. MEETINGS

- A. The Governing Body shall meet at least quarterly. Two (2) voting members will establish a quorum.
- 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. Each meeting shall have a period of time set aside for any public comment. Governing Body meetings may include attendance by hospital staff or individuals from outside the hospital.
- C. Minutes of all meetings will be maintained by hospital staff.
- 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.

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SECTION 6. COMMITTEES

SECTION 7. 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.

Adoption and Amendment

The Bylaws of the Alaska Psychiatric Institute Governing Body shall become effective when signed and approved by the members of the API Governing Body of Alaska Psychiatric Institute. This document shall be reviewed at least annually and may be revised as necessary at the discretion of the Governing Body.

Tracy A. Dompeling 3/25/26
Tracy Dompeling, Chair Date

Elizabeth King 3/25/26
Elizabeth King, Vice-Chair Date

Summer LeFebvre Digitally signed by Summer LeFebvre
Date: 2026.03.30
07:59:11 -0800 3/30/26
Summer LeFebvre, Treasurer Date

Ann Ringstad 3/30/26
Ann Ringstad, Secretary Date