

# Alaska Psychiatric Institute Governing Body, October 22, 2022, Meeting Minutes

## ***I. Call to Order***

Chair Elizabeth King called the meeting of the Alaska Psychiatric Institute Governing Body to order at 1:30 PM via Zoom on October 22, 2022.

## ***II. Introduction and Roll Call***

### **Voting Members Present:**

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

**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*

Charlene Tautfest, *Mental Health Board*

Scott York, *Alaska Psychiatric Institute Chief Executive Officer*

John Lee, *Director of Senior and Disability Services*

Jennifer Peeks, *Alaska Primary Care Association*

Dr. Rick Ellsasser, *Alaska Native Health Board*

Gennifer Moreau-Johnson, *Director of Behavioral Health*

### **Voting Members Absent:**

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

Dr. Anne Zink, *Chief Medical Officer*

### **Non-Voting Members Present:**

Aesha Pallesen, *Alaska Court System*

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*

Beverly Schoonover, *Alaska Mental Health Board*

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

Adam Rutherford, *Department of Correction*

Daniel Delfino, *Alaska Housing Finance Corporation*

Elizabeth Russo, *Office of Public Advocacy*

Leslie Jaehning, *Disability Law Center*

Vacant, *Alaska Coalition on housing and homelessness*

Vacant, *Alaska Academy of Family Physicians.*

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

Vacant, *City of Anchorage Police Department.*

### **API Staff Reporting:**

Christy Wynn, *QAPI Director*

Dr. Kristy Becker,

Erica Steeves, *Director of Nursing*

Promise Hagedon, *Assistant Director of Nursing*

Robert Long, *Chief Medical Director*

April Andrews, *Chief Financial Officer*

Ed Czech, *ASO Manager*

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

**The Chair moved to approve the agenda.** The motion on the floor was seconded by DC Lasley. 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:***

No minutes reviewed from last meeting due to not having a quorum. Jason Lessard asked about needing to address last minutes. Jason Lessard proposed missing minutes be presented prior to next meeting. Chair also approved. Jarmyn will send last minutes.

***V. Items for Consent:***

**Policy Review/Approval**

**1. Revised Policies**

Jason Lessard asked about numerous policies and are all the policies and as there was no quorum at last meeting, policies not approved. Charlene asked about the policies having gone through policy committee. The GB does not have its own policy committee. Elizabeth sits on the policy committee for API. DC Lasley asked that these are not in final version. Clean and draft versions need to be presented to GB on policies. Jason Lessard motioned to approve consent agenda. Erica Steeves did bring up a policy software tracker to help track policies.

**PC-060-06-5 Deterioration of Physical Status**

**SC-030-02.1b Seclusion and Restraint**

**IC-103 Infection Rate Calculation**

**IC-104 Infection Definitions Identification**

**IC -111 Investigation Protocol of Suspected Epidemic**

**IC-112 Reporting Communicable Disease to Alaska Department of Public Health**

**IC-113 Antibiotic Usage Review Monitoring**

**IC-114 Antibiotic Usage Data Collection**

**IC-200 Surveillance-Environmental**

**IC-608 Rehab Kitchen Infection Control**

**IC-640 Staff Requirements and Responsibilities for Infection Control**

**IC-643 Nursing Department Infection Control**

**PT-030-17 Food and Drug Interactions**

**PT-060-01.14 Attachment After Hour Carts**

**PT-060-01.14 Emergency Medication After Regular Pharmacy Hours**

**PT-080-01.01 Medication Management Team**

**After Discussion, The Chair asked for a motion to approve revised policies. Motion Carries approved by unanimous consent.**

***VI. New Business:***

**Department/Project Spotlight Admission Screening Office**

Ed Czech presented power point presentation on admissions and referrals to API.

API has had over 1000 referrals for 21/22. Highlights included a fluctuation in API admittable due to staffing and high need clients. Highest resources of referrals are PAMC, ARH, ANMC, DOC and the community exparte's. Almost all exparte's are brought into API. 65 referrals for minors since opening Chilkat adolescent unit. 2 community exparte's and API was unable to meet the demand due to adolescent unit being full. PAMC, Fairbanks and Bethel top 4 hospitals referrals for adolescents.

Waitlist for API over the year has fluctuated and average ranges anywhere between 8.5 to 24. Waitlist increased during the winter. June 2022 showed an increase of 68 admissions and waitlist went down. Adolescent data showed a waitlist in the winter and not a lot of referrals this fall. New data and will continue to monitor.

Questions: Dr. Ellaser asked question asked about referrals and not admissions. How many referrals from each facility were admitted from each facility. Ed clarified that it could be added to the chart. Are some hospitals referring to soon and then squashing.

## ***VII. Old Business:***

### **Governing Body Bylaws**

DC Lasley discussed bylaws revision for review. The primary issues were to update the membership and filling vacant seats. Difficulty reaching quorums. Section 2 membership and reduced the number of members and updated the membership to be more inclusive for the people we serve. Changed some language where the Board had shared responsibility of API. The GB does not have fiduciary authority over the budget at API. Recommendations can go to the Governor and then Legislature. Language is more in line with the authority of the GB which is reviewing of the budget.

**After Discussion, the Chair asked for a motion to approve. Motion Carries approved by unanimous consent.**

### **Governing Body Policy and Procedure**

DC Lasley reviewed with the API GB on instituting policies for the GB. This is the 1<sup>st</sup> policy to accompany the new membership for the GB.

This policy discusses nominations and procedures.

**After Discussion, the Chair asked for a motion to approve. Motion Carries approved by unanimous consent.**

### **Department Split**

DC Lasley updated on re-organization of department split. Commissioner Koval is getting out and meeting all the facilities. Continuing to work and filled most positions at the department level.

### **Capacity at API**

Scott York presented capacity. Raised API capacity after 5 years to 70. New staff continuing to be oriented and get capacity to 79. 1 room is being utilized as a sensory room for patients.

Reasons that census could not increase is due to staffing, gender availability and, acuities of patients.

Scott presented discharge data for homeless patients.

DC Lasley discussed reasonable expectations of API census. Growth and future of API should be on the forefront of GB and how we are going to meet the needs of the community.

The Chair brought up that no institution should be operating at 100% capacity. Usually, for hospitals is about 90%.

### **API Performance Evaluation**

DC Lasley stated one was not done last year. Questions sent out for input last year. Questions need to be developed on how the GB is performing. DC Lasley will have Terri to send out proposed questions for input and get ready for vote next month.

The Chair brought up that an evaluation of GB based on TJC standards is available for review and, that an evaluation on API performance is also. Both need to put in survey tool for analyzation. DC Lasley and Elizabeth will cross send to GB members on the surveys.

## ***VIII. Public Comment:***

Chair open the floor for open public comment

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

None to report

### ***X.Executive Session:***

Dr. Becker presented information on complex case.

### ***XI.QAPI Monthly Reports:***

#### **Review of corrective action plans and outcomes**

Christy Winn reported to GB on the data of the dashboard. Christy discussed the new TJC requirement reporting requirements for API for 2023. More information to come on Health Care Disparity action plan for hospitals.

#### **Regulatory Compliance**

Christy Winn explained the purpose of adding the pharmacy data onto the dashboard, she noted that it is not a regulatory requirement.

#### **Quality Improve Projects**

Nothing to report

### ***XII.Executive Reports***

#### **CEO Report**

Scott York informed GB on Strategic Planning and what is the next level for API. 2 studies looked at expanding API by 24 beds. RFP to help with Strategic Planning. Scott presented information on projects at API. Completed and ongoing projects. EMR demonstrations to be done in November for leaders.

#### **CFO Report**

April Andrews presented vacant report and its narrowed down by 2 numbers compared to department report.

Currently, 246 filled and 82 vacant positions. 25% vacancy rate. Turnover rate is presented and why.

Contracts reports shows annual evaluations.

Charlene Tautfest asked, Are the unfilled positions due to workforce or funding? Challenges have been with recruiting. April reported that it's a time-consuming process to go through the State system.

#### **Medical Staff Report**

Dr. Long presented Stacy Johnson, ANP for recredentialing. Biannual OPPE is almost complete.

API is hosting its 5<sup>th</sup> student from UW Medical.

**After Discussion, Chair asked for a motion to approve. Motion Carries approved by unanimous consent.**

#### **Clinical Report:**

Dr. Becker did report that she will present competency beds at next meeting. Asked for GB to look at prior to next meeting. Outpatient competency location is still not available. After many years of working we have gotten Psychology job class study is completed.

#### **Nursing Report**

Nothing additional to reporting

### ***XIII.Adjourned:***

**Chair Elizabeth King called for adjournment if there was no further discussion from the board. There was no further discussion. Motion to adjourn was passed with unanimous consent at 4:26 pm.**