

## API GOVERNING BODY MINUTES

**LOCATION:** Hybrid: In Person and Microsoft Teams Meeting  
Alaska Psychiatric Institute, 3700 Piper Street, Room 27C,  
Anchorage, AK 99508  
[Teams Link](#): Passcode: 3zM2Me64  
Dial in by phone: 1-907-202-7104  
Phone Conference ID: 837 662 811 #

**DATE:** July 22, 2025

**START TIME:** 1:33PM



### 1:30PM: CALL TO ORDER

**Mission & Vision** - Vice-Chair Elizabeth King

**MISSION:** *Providing compassionate health care to support Alaskans in living their best possible lives.*

**VISION:** *An Alaska where everyone receives the care they need, when they need it, without judgment.*

### Attendance

#### **Present:**

Elizabeth King, Chair  
Chrissy Vogeley, Acting Deputy Commissioner, Department of Family and Community Services, Vice-Chair  
Ann Ringstad, Secretary  
Summer LeFebvre, Treasurer  
Dr. Lisa Linquist, Alaska Native Health Board  
Tracy Dompeling, Director, Behavioral Health Division, Department of Health  
Esther Pitts, Alaska Mental Health Trust  
Kermit Wilson, Alaska Mental Health Board/Alaska Board on Alcoholism and Drug Abuse  
Ken Cole, CEO, Alaska Psychiatric Institute  
Commissioner Kim Kovol, Department of Family and Community Services  
Dr. Robert Lawrence, Chief Medical Officer, Department of Health

#### **Absent**

Kara Nelson  
Tony Newman

#### **Guests**

Dr. Kristy Becker, API Staff  
Dr. Robert Long, API Staff  
Christy Winn, API Staff  
Karina Liranzo API Staff  
Dolly Lamont API Staff  
Jason Pickens, API Staff  
Mark Regan, Attorney, Disability Law Center

### **Review and Approval of Agenda**

Motion to approve the agenda, moved by Director Tracy Dompeling, seconded by Commissioner Kim Kovol.  
No discussion. Passed unanimously.

## Review and Approval of Minutes

Commissioner Kim Kovol made a motion to approve the minutes from the last meeting on 3/25/25. Second by Summer Lefebvre. No discussion. Passes no objection.

## 1:35PM: PUBLIC COMMENT

None

## 1:40PM: NEW BUSINESS

### A. Informational Item – Credentialing, Contracted Forensic Evaluators

Ken Cole

Ken Cole discussed a memorandum regarding the hospital's decision, based on regulatory review, not to credential contracted forensic evaluators.

Kim Kovol (FCS) requested a resend of the memo for review.

Discussion on the liability and credentialing process for contracted providers.

Explanation provided on the roles and insurance requirements of contracted forensic evaluators.

### Joint Commission, CMS Survey and OSHA Visit Updates

Christie Winn

#### B. Joint Commission Visit

29 areas of improvement identified by the Joint Commission (TJC) during the survey, 20 focused on building maintenance and they were each corrected while the surveyors were present at API. The remaining nine findings are related to documentation and treatment plans. API is monitoring and auditing compliance.

#### C. CMS Survey

CMS surveyed API three times between April 2025 and June 2025 related to the unexpected death of a patient in March 2025. There were multiple visits and reviews conducted, and CMS made their final visit on June 9th.

API usually is given 45 days by CMS to implement the Plan of Correction related to a survey. However, less time provided this time and API has until August 8<sup>th</sup> to implement the Plan of Correction.

API received two conditional level findings related to patient rights and nursing services. The hospital also was cited for freedom of chemical restraint related to a patient not being given an opportunity to decline his medication orally.

CMS accepted our Plan of Correction as of this morning (July 22). API already put into place several training initiatives. Additional training ongoing for RNs and PNAs on recognizing deteriorating physical status, medication administration, and trauma-informed care. Emphasis on improving the culture of safety and empathy with patients on the units.

Clarification that none of the identified events directly led to the patient's death, but improvements are needed to prevent future risks.

API expects a follow-up visit from CMS shortly after August 8th to ensure compliance. The Governing Body discussed opportunities to improve the system. A priority is work being done to strengthen the culture of safety in all units. (Agenda topic for September 2025 meeting)

#### D. OSHA Visit on 7/02/25:

AK OSHA visited on July 2, 2025 to investigate a complaint about partial failure of the API prox card access system and broken windows inside the lobby and the admitting area at ASO. The windows in the lobby have been replaced. There is still one window in the lobby that is still damaged and is waiting to be replaced. The other concern was about the fire alarm system that went down. At time of departure, OSHA staff said they did not see where there would be a citation and there were no concerns at that time.

**E. CFO Report**

Karina Liranzo

- Review of revenue, position vacancies, and expenditures FY23 - FY25.
- Expenditures for 2025 fiscal year at \$52 million, in line with FY24.
- Revenue review for 2025 there was a decrease in revenue, with a difference of about \$7M which we are hoping to see improvement in 2026.

Billing team is recognized for their efforts in improving revenue through addressing denials and reworking and secondary claims.

Ongoing efforts in cash reconciliation, cost controls, and inventory management. Karina is working with Barry Dunn with transition to *MyAvatar* and getting all policies and procedures into it and trying to find those different workflows.

**F. CEO Report**

Ken Cole

The CEO acknowledged the team's hard work on survey plans of correction.

Plans to restructure the Monthly Operating Report to include important measures and indicators that need to be tracked here at the hospital.

Looking at the QAPI process and what data the Core Leadership team can look at monthly and what reports we have available so that we can watch trends, both positively and negatively, both internally and for the Governing Body.

Emphasis on monitoring trends and data to drive performance improvement.

Focus on improving the culture of safety and empathy within the hospital.

CEO and team are examining ways to facilitate the discharge of patients ready to leave the hospital.

Discussion on the importance of active programming and patient hope for discharge.

Announcement of a staff picnic on August 13th.

**G. Nursing Department Update**

Ken Cole (for Erica Steeves)

Current use of 12 travel nurses, with plans to reduce to 7-8 after summer.

We recently hired 2 full-time nurses, and we have 9 vacant PCNS and recruiting 27 vacant PNA positions.

We are covering some vacancies with pool staff.

There is one vacant nurse manager position on the Taku unit and two vacant unit clerk positions.

**2:30PM: OLD BUSINESS**

**A. CMS Survey Update – 2/14/25 (Paperwork Deficiency)**

Christie Winn

Update on CMS survey from February, closed out with corrections made to court-ordered medications documentation. This has been corrected.

**B. Netsmart implementation Update**

Christie Winn

Progress on form build, with 90% completion.

Challenges with restraint seclusion template and psychiatric workflow.

Ongoing efforts to customize and build forms to meet regulatory standards.

No set go-live date due to ongoing issues with NetSmart. It won't roll out until there are assurances it won't compromise patient care.

**C. API / DOC Collaboration**

Dr. Kristy Becker

Ongoing collaboration with the Department of Corrections to improve jail-based restoration services.

Preliminary planning meetings and tours conducted.

Potential for a designated unit for API to run, pending staffing and other considerations.

Collaborative discussion happening, not finalized yet - on the logistics of implementing the program, including space, staffing, and training requirements.

Consideration of the distinction between general psychiatry and forensic psychiatry in providing services.

Impact on reducing the waitlist and improving treatment timelines.

Discussion on staffing projections and resource allocation.

**D. Psychology Internship Funding**

Dr. Kristy Becker

Loss of partial funding for the Alaska Psychology Internship Consortium could impact future pre-doctoral psychology interns. There are ongoing efforts to secure alternative funding (WICHE possibility) and the importance of the program for staffing. There is enough funding to cover this year, but for the following year we will not have enough to cover it.

**E. Medical Staff Update:**

Dr. Robert Long

Challenges with coverage due to loss of providers and reliance on locums.

Efforts to recruit new providers and conduct salary studies for mid-levels and MDs.

Importance of consistency in clinical leadership for culture change and safety.

Update on potential new recruit joining in September 2026.

Discussion on the impact of locum tenens on census and staffing stability.

**2:49 pm** - Governing Body members went into Executive Session for the purpose of discussing a legal matter.

**3:00PM: ADJOURN**

**3:04 pm** - Governing Body came out of Executive Session and Chair adjourned meeting.

**NEXT MEETING:**

**Next API Governing Body meeting: September 23, 2025 at 1:30 pm - 3:00 pm (Hybrid and In Person)**

/dl/ar