

**COUNCIL WORK SESSION
OCTOBER 13, 2010 @ 6:00 PM
LITTLE CHAPEL MEETING ROOM
MINUTES**

A. CALL TO ORDER

Kitty Farnham called the Council work session to order at 6:00 pm on October 13, 2010 in the Little Chapel Meeting Room. *Corrine Ericson* led the audience in an Invocation.

B. ROLL CALL

Mayor James Kallander called the City Council meeting to order. Present were *Mayor James Kallander*, Council members *David Allison*, *Bret Bradford*, and *David Reggiani*. Council members *Keith van den Broek*, *James Kacsh*, *EJ Cheshier* and *Robert Beedle* were absent. Also present were City Manager *Mark Lynch* and City Clerk *Susan Bourgeois*.

Native Village of Eyak Tribal Council was called to order by its President *Robert Henrichs*. Present was President *Robert Henrichs*. Council Members *Jack Hopkins*, *Mark King*, and *Patience Faulkner* arrived later. *Herb Jensen* was absent.

Health Services Board was called to order by its President *David Allison*. Present were President *David Allison*, Board Members *Sandra Aspen*, and *Glenn Ujioka*. Absent were Board Members *Kristin Carpenter*, *EJ Cheshier*, *Kerin Kramer*, and *John Renner*.

Ilnaka Community Wellness Advisory Council was called to order by its Chairman *Noel Pallas*. Present were Chairman *Noel Pallas*, Council Members *Faye Allen*, *Bob Dotson*, *Corrine Erickson*, *Dan McDaniel*, and *Charter Tsingi*. *Patience Faulkner*, *Mark Hoover*, and *Bootslyn Udani-Roemhildt* arrived later. *Cindy Bradford* was absent.

C. COMMUNICATIONS BY AND PETITIONS FROM VISITORS

1. Audience Comments regarding agenda items

D. WORK SESSION TOPIC

2. Joint Work Session with City Council, Health Services Board, Native Village of Eyak Tribal Council, and Ilnaka Community Wellness Advisory Council – facilitated by *Kitty Farnham* of Catalyst Consulting – working on the strategic planning for health care in Cordova

Kitty Farnham thanked the other consultants that have been working on this project with her. *Mike Bell* of Michael R. Bell & Company, PLLC as the financial analyst and *Jean Craciun* of the Craciun Research Group whose research for this project is in the packet.

Farnham started the meeting by explaining that this is a work session and as such, no decisions or actions will be taken tonight. A review of the projects' results to date will be presented followed by discussions and dialogue on planned next steps.

Farnham thanked the task force for its hard work. This task force is not a decision making board but a research board which will present its research to the governing boards and councils that are represented here today for the ultimate decision.

TASK FORCE PRESENTATION OF RESEARCH

Keren Kelley presented the Strategic Assessment Project, Projects Milestones, and Draft Report/Results to date. The Vision Statement was presented "A financially sustainable and stable health care system that provides quality care for the health & wellness of all Cordovans." She shared that the SWOT and SOAR analysis's were surveys taken by our current health care provider asking what they felt are the strengths and weaknesses of our health care system.

Mark Lynch presented the considerations for operators. These covered bringing in a separate entity to run the operation, rent out the current building, or straight out own the operation. Several options for interested parties are being looked into.

Angela Arnold presented the difference between the options the interested parties are considering. Cordova has not chosen, as of yet, which direction for operating the facility will be. Priority is that this is not going to be a system set into place that can be just "fail and bail". She presented the initial criteria to evaluate strategies that the task force is taking into consideration.

Mike Bell presented the financial analysis of the current operation. He stated Cordova is one of several communities in Alaska struggling in the department of Health Care. He stated that this is an issue that needs to, not only be addressed at the community level, but also the State level. Financially there are many big decisions to be made if this community is going to continue to fund the operation. *Farnham* stated that this was just a high-level report there will be an in-depth financial meeting in the future.

Sandra Aspen stated that so far the forums have been mostly reviewing results and addressing misinformation. The common theme throughout all the meetings and on the street is "Change".

Noel Pallas shared and compared what other similar communities within Alaska are doing with their health care system. He stated that in every community the task force looked into the comment is the same that this will not happen overnight but in the end, the issues will be resolved and addressed.

Farnham led the meeting into a different direction. Stating that this part of the meeting will be open discussion on three different options; A, B, and C. These will be considered one at a time and discussed. This is not a time for action or decisions but a chance for the task force and each of the Councils and Boards to hear what everyone else is thinking.

COUNCIL'S DISCUSSION OF OPTIONS

Discussion was opened for 20 min to discuss "option A" which is considering the improvement within the existing health structure. Governance within the existing structure should be addressed. There is a concern that if there is no change the financial strain will still rest on the City. Collaboration between

the two entities is an important improvement. Coordinating the ER coverage with the clinic's employees as well as the hospital would be beneficial.

Discussion was opened for 20 min to discuss "**option B**" which is considering the restructuring of the existing health services entities. There are two avenues with this option one would be consolidation of the entities the other would be to implement a new designations/ billing structure for CCMC. Collaboration under Tribal designations would bring in more funding and would give the community access for specialists on a regular basis. The medical center would then be able to see all patients without limitations. Medical equipment and maintenance would be available at no charge. Availability of specialized training and specialized personnel for the community would be more consistent. By 2012 Electronic Medical Records (EMR's) system could be implemented. To collaborate would keep the entities on the same system where as if they were on separate systems they could develop an interface between the systems but this could be a very high cost. This would keep the billing simple and keep the revenue in the community instead of going to Anchorage for specialized training. There would be two large incomes from the Tribal medical health care funds and Medicare funds from the state. The Tribal clinic would not impact insurances at all as it wouldn't be viewed as a special clinic so co-pays and such will be the same and in fact easier if the new EMR was implemented. Question was posed that if the Tribal clinic is federally funded mostly the City would still need to fund the remainder and how would that fit into the City Council's realm of governance if it is owned and operated by NVE. Deciding how the City can still participate in the health center when it is operated under the Tribal governance will need to be addressed. Full financial disclosure would help keep some fluidity between parties.

Discussion was opened for 20 min to discuss "**option C**" which is considering bringing in a third party to operate the facilities. This could bring everything under the same umbrella or keep them as separate entities. To go with this option the City would have to pay a management fee and subsidy. This does take the control and choices away from the community but keeps the politics down. Depending on the third party, it may open up more opportunities for specialized medical care. Would the third party still be responsible for long-term care? There could be multiple third parties involved in the new system but that may inhibit fluidity of information and use of facilities. Cordova is a very political community and this system does not give them the option of being involved other than by contract. There could be a local advisory board to keep the community involved. Currently the system in place is having a hard time keeping each entity staffed, which may be a result of high turnover, and this option may improve that issue. Referral benefits and connections would be more readily available if the third party is Anchorage based. Cordova does want to keep as much in town as possible.

Farnham did an exercise to determine which options the Council members were considering so the task force can get a feeling for which direction to take. "**Option B**" got more than half the votes but the other two options also had some votes. Discussion centered on what it is going to take to make a decision. Restructuring the way an advisory board would function. A financial analysis will help determine the feasibility for each option. Council would like to have more detail on how it will influence the current employees as far as retirement, pensions, PERS, insurance and such goes. Both current health services entities have the same struggles so how are we going to fix those issues. A system to keep the politics out of the everyday functionality of the facilities is very important. Contracts and commitments would be important to keep all parties involved and invested in the new system. A big concern with the third party option is that there is a possibility that those employees currently employed would lose their jobs.

Farnham transitioned to a conclusion/recap of the meeting. This will take support from the community and the current entities for change to happen successfully. It can happen. This can be successful. It will take time and commitment to see this to completion. The big thing is to continue to listen and ask questions.

E. AUDIENCE PARTICIPATION

Dan Logan, Mile 2, offered thanks to those who have put so much time into this change. He stated that there will be some challenges to implementing any one of these options but he can see any one of them being successful in this community. Communication between the community and the Councils, the staff and management, and the Councils and the management will be critical to its success. Attention to detail has made this strategic planning work and if we can get a governing board that has that same attention to detail will help any action we take be successful.

Mark Frohnappel, 828 Woodland Drive, thanks everyone for coming out tonight. He has seen both Kodiak and Sitka when those hospitals made their Health Care transitions and in neither situation did any of the employees lose their jobs. There was some timidity with the change but in the end, it proved to be successful. He does like the idea of having the doctors be provided by someone else giving the clinic the opportunity to provide providers. He does see an issue with an advisory board being made up of community volunteers running a profit-based business by committee.

Jennifer Gibbins wants to thank all the entities who have been involved with this strategic planning. She stated that the process the task force has chosen to use has been great and would like to see this process adopted throughout the community. She feels the education and politics of what is really happening with health care in Cordova is critical. She has been writing in the newspaper some soft comments on the process hoping to encourage the community to get involved with the process. She hopes that those involved keep the personal ownership of health care because it gives a great example to the rest of the community.

Sam Ronnegard posed the question of “Why the community can’t keep doctors in Cordova?” He felt there has to be a reason they won’t stay and once we figure that out things will be better.

F. COUNCIL COMMENTS

Bob Henrichs, he has seen large sums of money pass by Cordova because the Tribe did not own their own facility. He quoted Chuck Knox, Coach of the Seahawks, “What you do speaks largely of what you say” He thinks it is appropriate for this situation because we can put in a lot of work here and if we don’t take positive action it will not get fixed. He is ready to see change.

Sandra Aspen thinks it is everyone present’s responsibility to leave this meeting and spread facts not opinions to keep the gossip and miscommunication from getting out of control. She reiterated that today was discussion and there were no decisions made tonight.

Glenn Ujioka, considering the entire community is being involved with this new system, he pointed out that the tribe does not have a specific location but is integrated throughout the community. They live here, work here, and spend their money here. Because of their tribal designation, they have in the past

and continue to receive funds for medical care. It has never been the tribe's wish to make those services exclusive to the tribe as long as the caring for the community was not detrimental to the tribal members. The Tribal Council has this in mind and is 100% interested in making health care work for the community. They will continue to put in the time, as the City Council has, to make the best health care available to all cordovans.

Patience Andersen-Faulkner provided some information of how the NVE has in the past assisted in the medical providing to the community. With the present ILANKA medical center, they have been able to do even more for the community. She would like to see better fluidity between the two medical centers.

Bret Bradford stated he is very glad to see the way this process has been going. It was a good thing for the Councils to come together to work on creating better health care.

Bob Henrichs, wanted to point out that as a tribe they are not required to pay property tax but have chosen to do so in order to be a positive part of the community. He felt this could show how much NVE is interested in the community as a whole.

Mark King, stated that the reason the NVE started their own clinic was because of some of the care the elders were receiving and an inconsistency in medication availability. When the ILANKA medical center started so many were helped and felt at ease receiving medical care. He, himself, was undecided when it came to deciding to start collaborating with the Cordova Medical Clinic and is to this day still receiving some concerns towards that past decision. There are so many concerns now because of those decisions of what the future Health Care in Cordova may look like.

CLOSING COMMENTS

Bob Henrichs stated that NVE started their own medical center as a result of not being satisfied with the health care they were receiving. He does not want to see that happen again so he is glad the Councils can come together to make these decision for the best of the community as a whole.

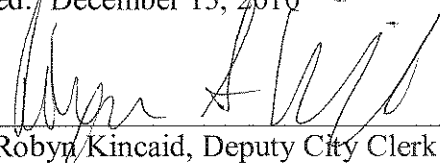
Mayor Jim Kallander thanked everyone for coming out to this work session. There has been a lot of work accomplished and thinks people have been very understanding. Having the view of the community and the Tribe has been a good first step. He looks forward to the newspaper article to see if it will get a response from the community. The City Council works for the community whether Native or non-native and he thinks it is very important to have good reporting and answer questions from the community.

F. ADJOURNMENT

Hearing no objections, *Mayor Jim Kallander* adjourned the work session at 9:15 pm.

Approved: December 15, 2010

Attest:


Robyn Kincaid, Deputy City Clerk

