

**COUNCIL WORK SESSION  
NOVEMBER 23, 2010 @ 6:00 PM  
LITTLE CHAPEL MEETING ROOM  
MINUTES**

**A. CALL TO ORDER**

*Vice-Mayor David Reggiani* called the Council work session to order at 6:00 pm on November 23, 2010 in the Little Chapel Meeting Room.

*Corrine Ericson* led the audience in an Invocation.

**B. ROLL CALL**

Present from the City Council were *Vice-Mayor David Reggiani* and Council members *Keith van den Broek, James Kacsh, David Allison, Bret Bradford, and Robert Beedle*. Council member *EJ Cheshier* arrived at 6:25 pm. *Mayor James Kallander* was absent. Also present were City Manager *Mark Lynch* and City Clerk *Susan Bourgeois*.

Health Services Board roll was called. Present were President *David Allison*, Board Members *Sandra Aspen, Kerin Kramer* and *EJ Cheshier* (arrived at 6:25 pm). Absent Board Members were *Kristin Carpenter* and *Glenn Ujioka*.

Ilnaka Community Wellness Advisory Committee roll was called. Present were Chairman *Noel Pallas*, Council Members *Corrine Erickson, Mark Hoover* and *Bob Dotson*. Council members *Faye Allen, Bootslyn Udani-Roemhildt, Charter Tsingi* and *Dan McDaniel* were absent.

Native Village of Eyak Tribal Council roll was called. Present was President *Robert Henrichs*, Council Members *Mark King, Jack Hopkins, Patience Anderson-Faulkner* and *Herb Jensen*.

**C. COMMUNICATIONS BY AND PETITIONS FROM VISITORS**

1. Audience Comments regarding agenda items - none

**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* presented an overview of the work sessions agenda. She mentioned that *Mike Bell* would be calling in a financial report. Then the task force would give an update of their research. Following the update she would open the work session part of the night for dialog. In the work session there would be about 30 minutes dedicated to each scenario discussing the different areas that need more researched. The outcome of the meeting should be to get us closer to a joint plan for future work.

- a. Review results of draft strategic assessment report
  - Overview of community forum 11/22

*Farnham* gave a brief overview of the 11/22 community forum outcome. They reviewed the draft report that now has some edits based on the community input, which mostly came from the discussions they had as they made their way through the report with lots of Q&A time. The night wrapped up with everybody present using a green dot put onto sheets for each A, B, C options. The tally stands that 11 felt improvements with reduced duplication was a good idea (option A), 13 felt option “A” with utilizing the NVE structure was the best idea (option B), and 4 votes were interested in pursuing the third party with its benefits (option C). *Lynch* offered that there were about 40 people present so several didn’t feel comfortable placing a dot vote. *Farnham* stated that the last thing they asked of that community forum was for requests and offers to present to those who will be making these decisions. These suggestions

and comments will be incorporated into this meeting. **Mike Bell** was called for the financial report. He stated that his purpose on the team was to look for financial opportunities in the different options for comparison. He spoke to the Medicare and Medicaid opportunities, regulations, and restrictions that have to be considered. He stated that everything that can be done in "A" also can be done in "B" with some additional opportunities available. Option "C" varies depending on the company chosen and the management contract. **Bradford** asked for clarification on **Bell's** statement that there would be some additional reimbursement opportunities with option "B". Is there an estimate on the amount difference? **Bell** stated that he feels that option "B" is the only viable option as they have access to better grant funding opportunities, as a tribal organization, as well as the fact that they get reimbursement from Medicare and Medicaid at a higher rate. Tribal organization can work with other tribal entities for aide and grant opportunities too. This option would leave the ownership of the building with the City and the operations ownership with the tribal organization, which could have some challenges with grants for building improvements and maintenance. The specific dollar amount will vary with the grant opportunities available. The phone call with **Mike Bell** ended and the meeting was turned over to the task force.

- Task force reports

**Sandra Aspen** explained that at the beginning of this process she felt the third party was the best option because it presented a clean slate without politics. After all the research, community input, and work that was put into this process so far she is feeling option "B" is the best option. She stated that she isn't married to the option though as this needs to be a community decision. The transition to option "B" would be easy, the financial opportunities will increase, duplication of services would cease, and there would be a unified leadership established in Cordova's health care. She could see option "A" working but she is concerned that it would slide into a comfort zone and may not be enough change. However, after option "A" has been actualized options "B" & "C" can be looked into further.

**Noel Pallas** stated that he thinks it's time to make a decision; it is time to make a recommendation. He feels it is time to put out RFP's to NVE and to whoever else might be interested in becoming a third party. He put his dot on "A" because we need to start to do something now. To continue to do what we are doing is a misuse of public funds. We need to transition into option "A" and then decide, based on the RFP's which option to move into. None of the options is a financial fantasy but action needs to be made soon.

**David Reggiani** stated that agreed with **Pallas** that the task force is at its end. They are not ready to take any of the options off the table but they have gone as far as they can go in their research. Putting RFP's out will help take things off the table and define the decisions to be made. The decision can't be made till we have the information the RFP's will provide can be reviewed. **Farnham** stated that this is the hope of tonight to get us to the next step.

**Mark Lynch** stated that he thinks everything has been done, without making a decision that can be done. Currently we are operating under an "A" scenario. Perhaps we could get a long-term goal and get the RFP process started, which does not have to be an in-depth RFP, but could just ask if there are entities out there that are interested. We then would know which options really are available. He was unable to place a green dot because he feels each has its merit but there isn't enough information from actual providers to make an educated decision.

**Mark Hoover** stated that lots of research has been done and we have no solution. He thinks "B" could be a solution that could be jumped into. To start with "A" is a good idea and the City is going to have to ask for more information in order for "C" to be a viable option.

**Angela Arnold** stated that the committee has listened to the community, employees, and each other and have done a lot of research. The cooperation that has been accomplished could not have been reached two years ago. Nothing but good things can come from working together. She feels that bringing in strangers from somewhere else to operate the health care in Cordova is something we do not need.

Option "A" is a clear easy way to get to where we need to be. This does not mean that things stay the way they are; there will be some changing and more collaboration. It would require that there be a permanent management position and to have an elected Health Services Board.

**Keren Kelley** stated that when the whole process started she was looking for clear direction from Council but it has been much more in-depth than she anticipated. We need to provide what is best for the patients, which is quality, affordable care. All three are viable options but the task force needs more direction to position ourselves for additional funding. All the grants are looking for collaborative services and we have achieved that. Option "B" is the best but will take a while to achieve and the community is already working its way towards "A". She would like to see Cordova move towards "A" moving next to "B". It will take formulation and then implementation of a plan.

**Farnham** stated that the consensus is that there is a strong need for decisive action. A joint plan will do nothing but make the future stronger.

b. Joint Council discussion

- Plan for action: look at each A, B, C, next steps in strategic assessment report

The Councils were given ten minutes to discuss option "A" and its next steps at their tables. Councils came back together to discuss the results thus far. **Farnham** stated that this exercise was not meant to be completed but to stimulate the Council's thinking. A thought was to start looking into the funding available from the state to help fund the consolidation process. Another thought was to have clear financial report and insert more accountability. **Kramer** mentioned that the financial statements will be up to date by December. They were only behind because of the audit. The format will be different but it will be more consistent and easier to read. The common concern with option "A" is who retains control? Who would the administrator be working for? How would a contract be worked out? A small group was formed to prepare a scenario of what that could look like to present to the Councils for consideration. The advisory and governing boards will start to have joint meetings. The meetings are meant not for action but for sharing of information to keep the doors revolving. Councils concurred that to start an elected Health Services Board would require a special election as it would not make it to the regular election and would require a charter change. Staff will research what a charter change will entail. The charter change would be a major step towards achieving "A" but would not keep options "B" or "C" from every being actualized. All of the options would require at least one, if not two, charter changes. Discussion followed of what negotiations would have to take place to transfer the employment of the Doctor from one entity to another. Research will be done on how to eliminate the two clinics to see if it is a viable option. Research will be done on electronic medical records systems and the sharing capabilities it can possess.

Recessed for a break then moved into a five-minute breakout session for discussing the next steps for option "B". Councils came back together to discuss the results thus far. This plan's next steps require asking NVE for a proposed business plan that would include specific grant/additional funding opportunities available with this plan. This plan should also include an overview of benefits for the employees. It was mentioned that research needs to be done on PERS but it is not necessarily for option "B" it just needs to be done. This option would also require a charter change.

The Councils moved into a five-minute breakout session for discussing the next steps for option "C". Councils came back together to discuss the results thus far. The Councils decided that the only action is to produce and distribute an RFI. Any other next steps would be based on speculation. Discussion followed that it does not have to be a full RFI but a brief one at first to weed through the options. The information those RFI's will produce will help identify the specific things to ask in a more in-depth RFI and carried over to an RFP.

- Sustain the momentum

**Farnham** stated that the community of Cordova has made a huge amount of progress in the last few months, even the last two years. We are now seeing steps forward and agreement between parties. Sometimes the amount of information needed was very great and it felt like it was going to take forever. However, the meeting, listening, learning and getting to a different level of ownership has brought a sense of hope about the quality of health care here in Cordova. It is important to keep this at a high level, to keep accountable and to keep moving forward with the progress. The Councils suggested that the list of "to do's" should be published publicly and to be updated as things get accomplished on a monthly basis. Recap is that no decisions were made today but action items were set for additional information to help narrow down the options. Each of the action steps has been assigned someone to do the action, a period to get it done, and a designated board to report it to.

#### CLOSING COMMENTS

**Bob Henrichs**, progress is being done here and the fact that everyone is in the same room working together is progress in and of itself. We are all here for the same reason, improved health care in Cordova.

**Vice-Mayor David Reggiani**, agreed with **Henrichs**, **Farnham**, a lot of work has gone into this process, and we have come a long way. A lot of man-hours and we are on a path to a better way.

#### E. AUDIENCE PARTICIPATION

**Patti Kallander** thanked everyone involved. She feels much more positive about the direction this process is going than before. There will be some good information coming out of this.

**Corrine Erickson** stated that she has been so many meetings on the hospital and there has been so much progress done thus far. She appreciates all the work that has been put into this. Do not give up. Keep moving forward. She is proud to be here because of the hospital and she will fight to keep it.

**Vince Patrick** stated that he is impressed with the work that has been done and what the task force has done. He recommended that the task force stay intact to help keep the momentum going. There is a lot of expertise and knowledge in that entity. It could continue to be an outreach entity to the community that is outside of the councils and boards. We did not have an independent entity looking over things before; the chatting on the streets stemming from this entity has been very beneficial.

**Matt Kelley** thanked everyone and stated that it has been nicely stated. He appreciates the work that was been put into this process.

**Jennifer Gibbins** stated she agrees that the task force does have a lot of knowledge and has been very useful. She posed the question that the cash needs keeps coming up and she wondered if the Council has considered that within the context of the drafting of the 2011 budget. **Reggiani** stated that the City Council is working on the CIP list at the next meeting. The hospital is being considered and those discussions will follow that meeting.

#### F. COUNCIL COMMENTS - none

#### G. ADJOURNMENT

Hearing no objections, **Kitty Farnham** adjourned the work session at 9:10 pm.

Approved: March 2, 2011

Attest:

  
Robyn Kincaid, Deputy City Clerk

