

King County Harborview Leadership Group Meeting Wednesday, April 24, 2019 Minutes

COMMITTEE MEMBERS:

ORGANIZATION	MEMBER	PRESENT	MEMBER	PRESENT
King County	Rachel Smith	Yes	Kelli Carroll	Yes
Executive				
King County	Rod Dembowski	Yes	Joe McDermott	Yes
Council				
HMC Board of	Lisa Jensen	No	Lee Ann Prielipp	Yes
Trustees				
Mission Population	Gregory Francis	Yes	Nancy Dow	Yes
Labor	Lindsay Grad	No	Rod Palmquist	Yes
Representatives				
HMC Executive	Paul Hayes, RN	Yes		
Director				
HMC Medical	Rick Goss, MD	Yes		
Director				
UW Medicine	Cynthia Dold	No		
CHSO	(Designee)			
First Hill	Sam Russell	Yes		
Community				

ADDITIONAL ATTENDEES:

- Christina Hulet, Consultant
- Mark Ellerbrook, King County Community & Human Services
- Brook Buettner, King County Community & Human Services
- Lan Nguyen King County Council
- Kristina Logsdon, King County Council
- Leslie Harper-Miles, King County FMD
- Bailey Bryant, King County Executive
- Kera Dennis, UW Medicine
- Ian Goodhew, UW Medicine via telephone
- Christina Hulet, Consultant
- Ted Klainer, Harborview Medical Center

CALL TO ORDER

Christina Hulet called the meeting to order at 6:05 p.m.

INTRODUCTIONS – Christina Hulet

Introductions were made.

MARCH MEETING MINUTES – Christina Hulet

Motion to read and approve meeting minutes. Amendment to indicate that Leeann Prielipp was not in attendance at the March meeting. Amendment to add Lan Nguyen as an additional attendee at the March meeting. Approved, none opposed, no abstentions.

PUBLIC COMMENT

None.

HOUSING SUBCOMMITTEE PRESENTATION

Leslie Harper-Miles welcomed and introduced presenters for Housing Subcommittee Presentation

- Brook Buettner
- Mark Ellerbrook

Housing Subcommittee presentation and report provided in meeting materials.

FEEDBACK & QUESTIONS ON HOUSING SUBCOMMITTEE PRESENTATION

Regarding Respite

A question was asked as to whether the individuals in respite are released into homelessness.

• Presenters responded affirmatively that sometimes individuals can be released from respite back into homelessness.

A question was asked regarding the cost of respite beds compared to other typical housing costs.

• Presenters responded that the needs that can be met in respite provide a certain level of care that could not necessarily be met in a home alone.

A question was asked regarding the affect that respite has on patient flow in the hospital.

• Presenters responded that respite improves patient flow in the hospital by providing needs at a different location. Discussion followed.

Conversation followed regarding the practice of a layer-cake type structure and its benefits to meeting complex patient needs, including respite.

Regarding Permanent Supportive Housing

A question was posed regarding the guidelines needed to qualify for PSH housing in King County and who the PSH programs targeted populations are -i.e. those coming out of homelessness directly.

• Presenters responded that at this time Permanent Supportive Housing is structured around individuals who are coming out of homelessness directly. Conversation followed.

It was noted that Harborview has partnered with Plymouth PSH on 7th and Cherry by aiding in designing units and providing a nurse run clinic.

Regarding Affordable Workforce Housing

A questions was posed regarding the number of cost-burdened employees at Harborview and how the Housing Subcommittee arrived at the presented number.

• Presenters indicated that the number was calculated with help from unions and the university and the affordable housing data for King County.

Regarding Increased Shelter

A question was posed as to how bed allocation occurs once a shelter becomes 24/7.

• Presenters responded that bed allocation varies by shelter.

Additional:

A question was posed as to how these options can integrate with the move towards physical healthcare integration.

Conversation regarding the Behavioral Health Institute followed.

Action Items:

• Further confirmation of workforce affordable housing Harborview employee numbers. More information as to how this proposed option intersects with other agencies who are also focused on this issue.

HARBORVIEW MEDICAL CENTER SUBCOMMITTEE PRESENTATION

Presenters for Harborview Subcommittee Presentation

- Paul Hayes
- Ted Klainer

Harborview subcommittee presentation and report provided in meeting materials

FEEDBACK & QUESTIONS ON HARBORVIEW SUBCOMMITTEE PRESENTATION

A questions was posed to the subcommittee as to whether a proposed option assumes that the hospital would increase its licensed bed capacity.

• Presenters responded that there is no plan at this time to increase the licensed bed capacity. The ultimate goal would be to take the double rooms in the East Hospital and move beds to a single room.

A question was posed as to whether Harborview has considered increasing its licensure numbers in the long run.

• Presenters responded that it would be a possibility though it is not immediately on the table. A question was posed as to whether the presented options accomplish the goal of moving towards single patient rooms for the hospital.

• Presenters responded affirmatively that additional rooms as proposed in options would greatly increase the capacity for single patient rooms in the hospital.

A question was posed as to whether renovation of the Maleng building is contingent on the bond or is able to move forward prior to the bond.

• Presenters responded affirmatively that it is possible to move forward. Discussion followed.

There was a request to further clarify the finances around Maleng renovations and the desire to have the renovations as a part of the bond.

Conversation regarding specific location of proposed tower, details regarding capacity, and available space followed.

<u>LEGISLATIVE SESSION UPDATE</u> – Ian Goodhew

Key budget news and updates on the legislature. Overall budget is still being finalized in the capitol. The hospital has routinely received state support in past years. There has been significant support for the

behavioral health teaching hospital. An initial allocation of \$33.5 million has been made in order to begin building. That facility will have 90 day bed capacity to take pressure off of Western State. This hospital will also train and educate the work force and teach them how to handle the most acute and in need members of the population. Additionally, \$500,000 of pre-design money will be allocated by the legislature to the BHI.

<u>NEXT STEPS</u> – Christina Hulet

The next Leadership Group meeting is scheduled for May 22nd where the Behavioral Health Subcommittee will be presenting their analysis as well as follow-up presentations from Housing and the ITA court subcommittees.

Action Items:

Initial Housing Presentation from Behavioral Health sub-committee Community engagement update Update on state legislative session

<u>ADJOURNMENT</u> – Christina Hulet

With no further business, the meeting was adjourned at 7:53 p.m.