

FOR YOUR INFORMATION. These minutes will not become official until they are formally acted upon at the next Board meeting.

# MINUTES OF A REGULAR MEETING BOARD OF TRUSTEES GREYSTONE PARK PSYCHIATRIC HOSPITAL

I. The Board of Trustees Meeting at Greystone Park Psychiatric Hospital (GPPH) was held via telephone conference call on Thursday, November 17, 2022, pursuant to the notice duly given. In conformance with the Public Open Meetings law, notices for the meeting were sent to Daily Record and the Star-Ledger.

#### **Board Member Attendance:**

Present:	Excused
Chairman James (Jim) DiGiulio, Esq.	
Sheriff James M. Gannon	
Peter Simon, Esq.	X
Bruce Sisler, Esq.	
Louis Modugno, Esq.	

**Hospital Administrators Attendance:** 

Present:	Excused
Thomas Rosamilia, Interim Chief Executive Officer	
Eric Madurki, Deputy Chief Executive Officer	
Dr. Ritesha Krishnappa MD, Interim Medical Director	X
Dr. Laura Romano, Chief Nursing Officer	X
Jack Frey, Business Manager	
Dorothea Josephs-Spaulding, Director of Quality	
Management	
Timothy Dimitrios, Administrative Analyst 4	
David Hutchinson, Director of Nursing	X
Maria Jazenback, Secretary to the Board	
Stephanie Gabelmann, GPA Liaison	

**CALL TO ORDER** at 3:15pm by Chairman, James DiGiulio. It was discussed that since the meeting is being held via telephone conference call that all parties phones are to be muted but at the end of the meeting the line will be opened for any public comments.

## II. APPROVAL OF MINUTES:

The October 20, 2022 Board minutes were presented for approval. Vice Chairman, Sheriff James Gannon gave the 1<sup>st</sup> motion for approval. Louis Modugno gave the 2<sup>nd</sup> motion for approval. All in favor. The October 2022 minutes were adopted.

## III. CEO REPORT:

Mr. Tom Rosamilia, Interim Chief Executive Officer at Greystone Park Psychiatric Hospital presented the CEO Report for the board meeting.

The CEO discussed that Covid is active at GPPH. B1 is off isolation but have had a few positive cases over the last week. There are two (2) patients on G2 and two (2) patients on D2 that are positive. These patients were moved to G3 as an isolation unit. We do have some patients/units on quarantine at this time as well. We have been notably successful in keeping the number of positive patients down. We have a conservative approach that we use that seems to be working. Our patient visits far exceeds combined totals of our sister hospitals. Norix furniture, dining room tables, came to A1 and will be coming to B1 today. We are still experiencing some supply chain issues at this time.

Census average is 359.

Social Services Statistics: We had a low discharge month in September but the discharges in October were twenty three (23) total. There were five (5) patients that went to A+ Group Homes, three (3) that went to Nursing Homes, three (3) that went to DDD placements, nine (9) went back to their private residences, one (1) went to an assisted living, one (1) went to supportive housing, and one (1) RHCF.

Ann Klein Forensic Center's referral process has been streamlines to make it more prompt and efficient.

Chaplaincy Statistics: Chaplaincy ran 627 individual sessions and had 112 patient contacts.

Co-Occurring Statistics: Co-Occurring had 108 individual contact hours, 164 groups were held, and 909 patients attended groups.

Discussed that hiring Advanced Practice Nurses has been a challenge. We have about twenty one (21) employees in New Employee Orientation this month which is the largest New Employee Orientation that we have had in some time. We have two (2) full time and a Medical on Duty Psychiatrist in hiring queue which will enhance psychiatric care and will make us less reliant on locum doctors to fill in the gaps. There were two (2) social workers that onboarded this month. We are down with notable vacancies in Human Service Technician positions and Human Service Assistant positions. We are developing a new program of Medical Service Officers which is basically a more trained Human Service Technician staff. Food Service Department and Training Department are still short staffed as well.

Nutrition Statistics: Nutrition ran thirty-eight (38) unit groups that 316 patients attended.

Rehabilitation Statistics: Rehab ran 1,371 groups and had 7,613 patient contacts.

Assaults: There were 101 patient to patient or patient to staff assaults this month. This is the highest number for 2022 thus far. It appears to be the activities of three (3) or four (4) patients which are increasing the numbers. Specialized treatment team meetings occurred on the units these patients are located and efforts to modify care are being made.

Restraint & Seclusion: There were thirty-seven (37) episodes of seclusion – this number is higher than normal. The average is one (1) to two (2) hours per event and about seventy (70) hours total. We are still in the first and 2<sup>nd</sup> percentile in number of seclusions.

Restraint: There were seven (7) episodes in total of under eleven (11) hours.

Falls: There were twenty-three (23) falls total. The average is about twenty (20) per month typically so we are a little higher than normal his month.

One to One: We had a higher number of 1:1's utilized on a daily basis and are up about thirty percent since September.

Removing and replacing PIC ceilings on A3 was completed in early November. We will not be able to move patients at this time to complete another unit due to F3 being a covid unit at this time. We will resume once a unit opens up.

October is annual training month which is online trainings that are conducted based on title and role and then there is an in person training. At this time, 1,118 employees completed the training which brought us to about 83% of active staff which completed the training. We assume we are closer to 90% than 83% but we are havin some database issues which could be skewing numbers. The issues should be fixed by next month.

## IV. FINANCIAL REPORTS:

The patient welfare fund information for October 2022 was reviewed by the Board of Trustees prior to this meeting. The beginning balance for October 2022 was reviewed as \$72,748.28 with \$7,600.30 deposited and \$4,688.71 in disbursements. The ending balance was \$75,659.87. Balance of cash management fund was \$486,155.36 and the total patient welfare fund available balance ended at \$561,815.23.

## V. OLD BUSINESS

There was no old business discussed at this meeting.

## VI. NEW BUSINESS

There was no new business discussed at this meeting.

## VII. OFFICE OF COMMUNITY SERVICES REPORTING

John Verney, Office of Community Services reported the following:

- 1. Request For Proposal: The New Jersey Division of Mental Health and Addiction Services (DMHAS) announces the availability of funding for Gambling Disorder Clinician Services programs in both licensed Substance Use Disorder (SUD) and Mental Health (MH) treatment programs. This Request for Proposals (RFP) is issued by DMHAS to develop gambling disorder services rendered through a Gambling Disorder Clinician to provide treatment and case management for individuals with a primary diagnosis of Gambling Disorder or a dual disorder of gambling and MH issues and/or SUD. Total annualized funding for this RFP is \$600,000. Funding is available for State Fiscal Year 2023. DMHAS anticipates making five (5) awards up to approximately \$120,000 each to providers licensed as MH and/or SUD treatment providers. Awarded providers will hire, at minimum, one Full Time Equivalent (FTE) Gambling Disorder Clinician. Proposals are due on November 23. The Notification Date is December 21, 2022
- 2. DMHAS is alerting its applicable partners (e.g. Short Term Care Facilities) of the following. The NJ Supreme Court directive requires that all of the initial involuntary civil commitment hearings will commence in-person on March 1, 2023. This does not yet include review and CEPP hearings, though it is anticipated that there will be a gradual return to in-person hearings at some point.
- 3. The Office of New Americans in the Department of Human Services has developed a Welcome Booklet for Newcomers to support information, referral and navigation of key services and resources available to newly arrived immigrants. The booklet provides an outline of the immediate services- from legal supports, food assistance and healthcare that can assist newly arrived immigrants to New Jersey. If you need a copy of the booklet, you can go to:

https://www.nj.gov/humanservices/njnewamericans/newcomers/docs/Welcome-Booklet en2.pdf

- 4. The Division of Mental Health and Addiction Services (DMHAS) is administering a survey of all of its contracted residential providers to learn more about all staffing matters in this community services. Recruitment, retention and salaries are among the areas of inquiry.
- 5. The Division of Mental Health and Addiction Services' funded **Statewide Clinical Outreach Program** (S-COPE) through Trinitas Regional Medical Center is providing it annual conference entiled, "WHOSE CRISIS IS IT ANYWAY?". The dates: November 15th from (9:00am 12:00pm) & November 16th from (9:00am 12:00pm). Up to 6.0 continuing education units are available.

Registration is at: https://rutgers.cloud-cme.com/course/courseoverview?P=0&EID=16876

Topics will include: Learn What Constitutes a Crisis from Leaders in LTC; Use of Long Term Injectables; Dementia Associated with Lyme Diseases and Parkinsonian Syndromes.

Target Audience: Physicians, Nurses, Psychologists, Social workers, Screeners, Licensed Nursing Home Administrator, Certified Assisted Living Administrators, Licensed Professional Counselors, Addiction Professionals, and Other integrative healthcare professionals.

## VIII. GREYSTONE PARK ASSOCIATION

Greystone Park Association was not in attendance at this meeting. The November 2022 report for GPA was submitted to the Board of Trustees prior to the meeting.

#### IX. COMMENTS FROM THE PUBLIC

Chairman, James DiGiulio opened the floor for questions and/or comments. Members of the public were reminded that they had five (5) minutes to state their question(s)/comments. Any questions/concerns that can not be addressed during this meeting will be addressed during the next meeting.

#### **Public Member**

Ms. Ann Weber asked the following questions:

Is an autopsy always conducted by the county Coroner?

The Interim CEO, Thomas Rosamilia discussed that the coroner makes the decision on whether the autopsy is to be done but is not always conducted for every patient.

Are both entrance disability ramps in compliance with codes? Is there a level for resting?

The Interim CEO, Thomas Rosamilia discussed that he would need to look into this prior to the next meeting.

In October 2022 were there any assaults in A1 in regard to geriatric patients?

The Interim CEO, Thomas Rosamilia discussed that he did not have this data with him at this time and would need to look into this prior to the next meeting.

How many vacant units are there at GPPH?

As of right now, there are no vacant units. We are trying to keep one unit open but have covid patients currently on that unit quarantining. B2 is on our other open unit due to work being done on B2's unit.

## X. ADJOURNMENT:

Bruce Sisler gave the 1<sup>st</sup> motion to adjourn the meeting and Vice Chairman, Sheriff James Gannon provided the 2<sup>nd</sup> motion to adjourn the meeting. The meeting was adjourned at **3:50pm**.

# XI. NEXT MEETING:

The next meeting of the Greystone Park Psychiatric Hospital Board of Trustees will be held on Thursday, December 15, 2022 at 3:15pm This meeting will be the Annual Public Meeting for GPPH. The public should

provide the front desk guards wit their photo ID and a copy of their covid vaccination card. The public may be asked to take a covid test upon arrival. Please ensure you wear a mask in the facility at all times.

Respectfully Submitted

Maria Jazenback, Secretary GPPH's Board of Trustees Witnessed By?

James DiGiulio, Chairman GPPH's Board of Trustees