

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

1. The Board of Trustees Meeting at Greystone Park Psychiatric Hospital (GPPH) was held virtually via Microsoft Teams on Thursday, February 20, 2025, 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.	X	
Vice Chairman, Sheriff James M. Gannon		
Louis Modugno, Esq.		
Tomika Carter, MSW		
Christine Dahlgren		

# **Hospital Administrators Attendance:**

Present:	<u>Excused</u>
Joshua Belsky, Chief Executive Officer	X
Eric Madurki, Deputy Chief Executive Officer	
Quinzell McKenzie, Chief Operating Officer	
Julie VanHouten, Chief Nursing Officer	
Christopher Dorian, Chief Clinical Officer	X
Dr. Harlan Mellk, MD, Acting Medical Director	X
Jack Frey, Business Manager	X
Dorothea Josephs-Spaulding, Director of Quality Assurance	
Arlington King, Associate Hospital Administrator 2	X
Timothy Dimitrios, Administrative Analyst 4	
Maria Jazenback, Secretary to the Board	
Stephanie Gabelmann, GPA Liaison	

**CALL TO ORDER** at 3:15pm by Vice Chairman, Sheriff James Gannon. It was discussed that public comment and questions will occur at the end of the meeting.

## II. APPROVAL OF MINUTES:

The January 16, 2025, GPPH Board Meeting Minutes were presented for approval. Tomika Carter gave the 1<sup>st</sup> motion to approve the minutes. Louis Modugno gave the 2<sup>nd</sup> motion to approve the minutes. All in favor. The January 16, 2025, GPPH Board Meeting Minutes were adopted.

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# / III. CEO REPORT:

Mr. Eric Madurki, Deputy Chief Executive Officer (CEO) at Greystone Park Psychiatric Hospital (GPPH) presented the CEO Report during this meeting.

January 2025: The average census was 378 at the end of the month and the average for the month was 378.6. There was a total of eleven (11) admissions and thirteen (13) discharges for the month of January. There were eighty (80) patients on CEPP status in January which is about 21% of the patient population. There were seventy (70) KROL patients in January. The violence data was reviewed during this meeting. It was presented that for patient-to-patient incidents there were twenty-three (23) assaults in January. This total is 1.96 per 1000 patient days and 3.9 vs 2024 average. There were fifteen (15) incidents with no injury, eight (8) incidents with minor injury, zero (0) incidents with moderate injury, and zero (0) incidents with major injury. There was a total of eleven (11) patient-to-staff assault incidents in January. This total is .94 per 1000 patient days and 1.4 vs 2024 average. There were four (4) incidents with no injury, six (6) incidents with minor injury, one (1) incident with moderate injury, and zero (0) incidents with no injury. There were seventeen (17) seclusions which is an increase from the prior month of thirteen (13). There were fifteen (15) restraints which is an increase from the prior month of seven (7). There was one (1) incident of contraband which is a decrease from the prior month of three (3).

Departmental Reports: Human Resources: Despite the hiring freeze (we are mostly exempt but have to justify positions), there are thirteen (13) new positions added and two (2) employees left which is an increase of eleven (11) employees. Nursing: Interviewed and selected a candidate for Director of Nursing position as well as are interviewing for two (2) APN positions. Started Annual Nursing Competencies at the end of the month. Quality Assurance: Beginning to prepare for next Joint Commission Review. Rehabilitation Services: Migration is continuing for patients in the J-Wing. There were 1,713 groups held and 389 were in the J-Wing. Rehab had 12,223 patient contacts in the month. Social Services: There were six (6) new patients converted to CEPP. Psychiatry/Medicine: We are hiring two (2) new temporary psychiatrists however, one (1) will be permanent. Two (2) temporary psychiatrists will be leaving GPPH.

Major Happenings/Events/Projects: We are continuing to work on the POES v2 implementation as well as are continuing with the UPS replacement. On January 9th, a pope burst, flooding the A&B towers on all 3 floors. The issue was resolved within a day however, staff did have to relocate their offices and the medication room. There were no injuries, and the situation was handled well by engineering, housekeeping, and nursing departments.

CEO Activities. The CEO continued rounding at PAC meetings. The CEO also coordinated a Cottage and Partnership Meeting which is scheduled to occur on March 14, 2025. Interviewed and hired new psychiatrists. A new position, Section Chief for Emergency Management was also interviewed for in the past few weeks. The CEO also worked with the Medical Executive Committee on improving the workflow of the Committee. The CEO developed a plan for immigration. Lastly, the CEO did judicial grand rounds attendance.

Concerning Issues: Weather call outs, ICE, and replacing key staff retiring was discussed. We have key staff retiring in medical records, business office, engineering and nursing departments. There were two (2) staff deaths (1 expected and 1 sudden) but both deaths were not related to work. There was also one (1) patient death which was expected.

## IV. FINANCIAL REPORT:

The patient welfare fund information for January 2025 was reviewed by the Board of Trustees prior to this meeting. The beginning balance for January 2025 was reviewed as \$70,834.98 with \$8,216.09 deposited and \$3,066 in disbursements. The ending balance was \$75,985.07. Balance of cash management fund was \$543,188.85 and the total patient welfare fund available balance ended at \$619,173.92.

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# V. OFFICE OF COMMUNITY SERVICES REPORT:

There was no report given from the Office of Community Services during this meeting.

#### VI. GREYSTONE PARK ASSOCIATION:

Since the last report in November, approximately 139 clothing items and four (4) discharge packages were given out to patients. June 2024 to January 2025 total is about 889 clothing items and thirteen (13) patient discharge packages. In addition to the \$7000 provided by GPA for patient holidays, they collected hundreds of puzzle books, fun socks, slippers, pajama pants, hats and gloves from local churches and public citizens looking to provide for patients during the holidays. The items were brought to a conference room where staff could come and choose items for their patients. GPA was the recipient of two very generous donations during the holiday season. This is very much appreciated and it's nice to see those who understand the work GPA does giving back to them. The donations were \$2000 from O'Toole Scrivo Law Firm and \$2000 from an "Anonymous" donor. GPA agreed to fund a proposal for \$598 submitted by the Co-Occurring department for the Inside Out Smart Recovery program and curriculum. GPA is currently on a modified schedule and is only opening on Tuesdays until about mid-March.

# VII. NEW BUSINESS:

There was no new business to address.

# VIII. OLD BUSINESS:

Questions and answers from previous board meeting:

- 1. Discrepancy in report of discharges: Thank you for bringing this to our attention. There were fifteen (15) discharges.
- 2. Discrepancy between number of injuries and chaplain calls: Chaplain calls are not only from the month and may include the prior month's injuries or follow ups.
- 3. Training for HSA/HSTs: HSA and HST staff receive training in New Employee Orientation, which is 5.5 days of training, Nursing Orientation which is 4.5 days of training, annual renewal during Octoberfest and Annual Nursing Competencies Training. The Training does include Patient Escort Responsibilities which would include training on medical appointments/hospital visits. Christine Dahlgren asked that more information be given regarding HSA and HST trainings. This information will be reviewed with Christine by the CEO.

# IX. COMMENTS FROM THE PUBLIC:

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

### Public Member:

Ms. Ann Weber asked the following questions:

HSAs and HSTs have no education requirement or a high school education requirement? Deputy CEO, Eric Madurki advised he will verify this for next month.

Is there only one (1) phlebotomist for the whole hospital?

Deputy CEO, Eric Madurki advised this information will be provided at the next meeting.

How many new covid vaccines have been given to the hospital?

Deputy CEO, Eric Madurki advised this information will be provided at the next meeting.

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What is the protocol for security responding to violence? Deputy CBO, Eric Madurki advised that those who are available are expected to attend.

How quickly do they respond and how do they respond? Deputy CEO, Eric Madurki advised this information will be provided at the next meeting.

#### X. ADJOURNMENT:

Christine Dahlgren gave the 1st motion to end the meeting and Louis Modugno gave the 2nd motion. All in favor. The meeting was adjourned at 3:40pm.

#### XI. **NEXT MEETING:**

The next meeting of the Greystone Park Psychiatric Hospital Board of Trustees will be held virtually via Microsoft Teams on March 20, 2025, at 3:15pm.

GPPH's Board of Trustees

SheriffJames Gannon, Vice Chairman

GPPH's Board of Trustees

Witnessed By,