



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 virtually via Microsoft Teams on Thursday, January 16, 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:**

<u>Present:</u>	<u>Excused</u>
Chairman, James (Jim) DiGiulio, Esq.	
Vice Chairman, Sheriff James M. Gannon	
Louis Modugno, Esq.	
Tomika Carter, MSW	X
Christine Dahlgren	

**Hospital Administrators Attendance:**

<u>Present:</u>	<u>Excused</u>
Joshua Belsky, Chief Executive Officer	
Eric Madurki, Deputy Chief Executive Officer	X
Quinzell McKenzie, Chief Operating Officer	
Julie VanHouten, Chief Nursing Officer	
Christopher Dorian, Chief Clinical Officer	
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	
Timothy Dimitrios, Administrative Analyst 4	X
Maria Jazenback, Secretary to the Board	
Stephanie Gabelmann, GPA Liaison	X

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

**II. APPROVAL OF MINUTES:**

The November 21, 2024, and December 19, 2024, GPPH Board Meeting Minutes were presented for approval. Vice Chairman, Sheriff James Gannon gave the 1<sup>st</sup> motion to approve the minutes. Christine Dahlgren gave the 2<sup>nd</sup> motion to approve the minutes. All in favor. The November 21, 2024, and December 19, 2024, GPPH Board Meeting Minutes were adopted.

### III. CEO REPORT:

*Mr. Joshua Belsky, Chief Executive Officer (CEO) at Greystone Park Psychiatric Hospital (GPPH) presented the CEO Report during this meeting.*

**November:** The average census was 386.7. There was a total of fifteen (15) admissions and nine (9) discharges for the month of November. There were sixty-eight (68) patients on CEPP status in November which is about 17.4% of the patient population. There were seventy-one (71) KROL patients in November. The violence data was reviewed during this meeting. It was presented that for patient-to-patient incidents there were forty-five (45) assaults in November. Of the forty-five (45) incidents, one (1) was a major injury, one (1) was a moderate injury, fourteen (14) were minor injuries, and twenty-nine (29) were no injuries. There was a total of twelve (12) patient-to-staff assault incidents in November. Of the twelve (12) incidents, three (3) had moderate injuries and nine (9) had no injury. It was also presented that for patient-to-patient assault incidents there were 3.79/1000 patient days (2023 was 4.64). It was also presented that for patient-to-staff incidents there were 1.03/1000 patient days (2023 was 1.81). There was a total of fourteen (14) seclusions, seventeen (17) restraints, sixteen (16) holds, and four (4) contraband incidents (2 of which were tobacco related).

*Departmental Reports:* Human Resources: We are currently at eighty-two (82) staff vacancies in which forty-one (41) are direct care positions and forty-one (41) are indirect care positions. Quality Assurance: Falls are increasing however there are plans to address this increase in numbers. Rehabilitation Services: Migration continues, comparing September to November shows an increase of thirty percent (30%) more groups off the unit and a fifty percent (50%) increase in individual contacts. Planning for the holidays occurred in November. Social Services: Discharges have been challenging for a variety of reasons however, many discharges are scheduled for December. Psychiatry/Medicine: All positions are filled with permanent/temporary doctors. We moved an Advanced Practice Nurse (APN) to the Admissions units and are recruiting for an additional APN at this time. Nursing: Interviewing Supervisors, posted for an additional Director of Nursing position.

*Major Happenings/Events/Projects:* PIC Ceiling Project and work on the units is continuing. One (1) unit is completed, and second unit has started however, seven (7) units remain undone. Started POESv2 Implementation by adding Informatics Position and Weekly Planning Meeting. All but one (1) ATS system has been replaced. Planning for new safety measures at entrance occurring as well as adding two more handicap spots will be occurring soon. ID Badge project progressing, and new badges are going out to staff. UPS system updated and Command Center initiated in November.

*CEO Activities:* All senior staff evaluations were completed and started for the new year. Attended more Professional Advisory Committee Meetings. Held meeting with AFSCME union to address concerns. Attended Health and Safety Committee regarding drills. PowerDMS policy database kickoff discussed.

*Concerning Issues:* Rising census continues and GPPH is nearing patient capacity.

**December:** The average census was 383.5. There was a total of nine (9) admissions and fifteen (15) discharges for the month of December. There were seventy (70) patients on CEPP status in December which is about 18% of the patient population. There were seventy-one (71) KROL patients in December. The violence data was reviewed during the meeting. It was presented that for patient-to-patient incidents there were thirty (30) assaults in December. Of the thirty (30) incidents, nineteen (19) were no injury, eleven (11) were minor injury. There was a total of twelve (12) patient-to-staff assault incidents. Of the twelve (12), there were seven (7) with no injury and five (5) with minor injuries. It was also presented that for patient-to-patient assault incidents there were 2.52/1000 patient days (2023 average was 4.64) and for patient-to-staff assault incidents there were 1.01/1000 patient days (2023 average was 1.81). In December, there were thirteen (13) seclusions, twelve (12) restraints, seven (7) holds and three (3) contraband incidents. The total number of contraband incidents for 2024 was thirty-

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four (34). Of the thirty-four (34) there were twelve (12) incidents related to tobacco. There were thirty-seven (37) incidents of contraband in 2023.

*Departmental Reports:* Human Resources: We are currently at seventy-five (75) staff vacancies in which thirty-six (36) are direct care positions and thirty-nine (39) are indirect care positions. The total number of vacancies has decreased by seven (7) positions since last month. Quality Assurance: Falls are at 3.13/1000 patient days vs. 1.68 in 2023. A plan to address this has been established. Rehabilitation Services: The numbers in JWing have decreased due to holiday events such as tree lighting, bands, New Years festivities and more. Social Services: Discharges have increased. A Safewards event was held during our Annual Staff Meeting in December. Nursing: Rutgers students to start in January 2025. We are currently working with St. Elizabeth's and are looking into Fairleigh Dickinson as well. Co-Occurring: Revised New Employee Orientation training to include contraband searches. Psychology: Began interviewing interns for positions as well as are interviewing next year's interns.

*Major Happenings/Events/Projects:* There are a total of 80% of the staff vaccinated for the flu and 2% are exempt. PIC ceiling project currently has two (2) units completed with six (6) more left to do. Last ATS will be replaced the first week in January. Moving forward will purchase new fire pump. Fixed the ambulance bay gate this month. ID Badge Project 75% complete as well as purchased new cameras for patient IDs. A new 2025 PI Project has been picked. The Hazard Vulnerability Analysis (HVA) has been completed.

*CEO Activities:* Revised mobile restraint chair guidelines. Assisted security trainings with New Jersey State Human Services Police. CEO met with Morristown Medical Center for a meet and greet. GPPH Organizational Meeting occurred as well as employee recognition given for increments of five (5) years of service. Meeting occurred with Psychology Department. Meditech (electronic health record) planning meeting occurred. A meeting also took place with DMHAS regarding Partnership and their beds.

*Concerning Issues:* Concerns in regard to the metal detectors being too sensitive, rising census, covid and flu upticks recently but clear as of today, as well as future staffing was discussed during this meeting.

Board of Trustees member, Christine Dahlgren discussed on page 18 there is a discrepancy in discharge numbers to what location the patients were discharged to. This information will be discussed at the next meeting. Christine Dahlgren also asked for clarification in regard to the ten (10) staff contacts from chaplaincy regarding injuries in page 4 of the November report. This information will be discussed at the next meeting.

#### IV. FINANCIAL REPORT:

The patient welfare fund information for November 2024 was reviewed by the Board of Trustees prior to this meeting. The beginning balance for November 2024 was reviewed as \$76,206.57 with \$8,079.38 deposited and \$7,173.34 in disbursements. The ending balance was \$77,112.61. Balance of cash management fund was \$538,899.62 and the total patient welfare fund available balance ended at \$616,012.23.

The patient welfare fund information for December 2024 was reviewed by the Board of Trustees prior to this meeting. The beginning balance for December 2024 was reviewed as \$77,112.61 with \$9,148.87 deposited and \$15,426.50 in disbursements. The ending balance was \$70,834.98. Balance of cash management fund was \$540,945.43 and the total patient welfare fund available balance ended at \$611,780.41.

The Board of Trustees previously approved funds from the Patient Welfare Fund for holiday events. The funds approved are as follows:

- Additional twenty-three (23) patients for ten dollars (\$10) added to their account for holidays totaling \$230.
- Table and chairs for tree lighting event totaling \$850.
- Patient meals for Holiday Breakfast and Lunch Celebration - \$5,000.

Christine Dahlgren gave the 1<sup>st</sup> motion to approve the additional patient welfare funds for holiday events and Vice Chairman, Sheriff Gannon gave the 2<sup>nd</sup> motion to approve the additional patient welfare funds. All in favor. The additional patient welfare funds for holiday events were approved.

## **V. OFFICE OF COMMUNITY SERVICES REPORT:**

John Verney from the Office of Community Services presented the following report:

1. The Department of Community Affairs (DCA) published a Public Notice on December 9, 2024, announcing the opening of the waiting lists for the State Rental Assistance Program (SRAP). SRAP preliminary applications will be available online at: [www.waitlistcheck.com/NJ559](http://www.waitlistcheck.com/NJ559) beginning Monday, January 13, 2025, at 9:00 a.m. until Friday, January 31, 2025, at 5:00 p.m. Applicants must have an email address to apply. DCA has adopted the following preferences for admission to the waiting list: Veterans, Elderly, Homeless, Disabled, Local and Residency.

### **2. Division of Medical Assistance and Health Services Behavioral Health Integration Important Provider Go-Live Update**

Managed Care Organizations (MCO)s will continue to support providers in getting in-network and reimbursed for the services you provide. Regardless of providers' contracting and/or credentialing status, starting January 1, 2025:

- Current Medicaid FFS providers will be able to bill MCOs for services provided, and will be paid accordingly
  - NJ FamilyCare members will be covered for authorized behavioral health services, with active authorizations seamlessly transferred from Division of Medical Assistance and Health Services (DMAHS) to MCOs, and all prior authorizations will be auto approved for the first 90 days of implementation
- Provider questions, please reach out to [Dmahs.behavioralhealth@dhs.nj.gov](mailto:Dmahs.behavioralhealth@dhs.nj.gov) or specific MCO contacts.

### **3. Supplemental Nutrition Assistance Program Skimming Update:**

Clients whose benefits were stolen between September 1, 2023, and December 20, 2024, still have 30 days from when they noticed their benefits were stolen to request replacement. Benefits may be electronically stolen in the following ways:

- Skimming means illegally attaching a device to a point-of-sale machine to steal EBT card information or a PIN.
- Cloning means copying stolen EBT card information to a new card.
- Scamming means convincing someone to disclose their EBT card information, often by a fraudulent phone call or text message that pretends to be from an official government agency (commonly known as phishing.)

Individuals who believe their SNAP benefits were stolen electronically between September 1, 2023, and December 20, 2024, must complete and return a Request for Replacement Form within 30 days of discovering the benefits were stolen. Further assistance is available online or in person at their County Social Service Agency.

## **VI. NEW BUSINESS:**

There was no new business to address.

## **VII. OLD BUSINESS:**

What is the Chief of Medicine's Salary? CEO advised the salary is \$225,000.

What is the Medical Director's Salary? CEO advised the salary is \$280,000.

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Are chair exercise groups available for geriatric patients? CEO advised all groups are available for geriatric patients however activities are made available and are geared toward patient/individual needs. There is no specific group called chair exercise group.

**VIII. COMMENTS FROM THE PUBLIC:**

Chairman, James DiGiulio 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:

Is there a Chief of Psychiatry?

The CEO advised this position is currently vacant.

For all three (3) titles there is only one (1) person?

The CEO advised there is one (1) person covering however, we do have a *Medical Director of the Division of Behavioral Health Services* that supports these roles.

How many geriatric beds are there assigned?

The CEO advised we have units that are geared toward geriatric patients, but they can be filled with patients that are not geriatric. Each unit holds twenty-five (25) patients but are not geriatric only units.

There are no education requirements for HSA/HST positions but what is the training for them? Is training intensive? When going on medical appointments are HSAs/HSTs trained on the paperwork and what to do?

The CEO asked that this be discussed at the next meeting due to not having the information readily available in the meeting.


**IX. ADJOURNMENT:**

The meeting was adjourned at 4:02pm.


**X. NEXT MEETING:**

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

Respectfully Submitted,

  
Maria Jazemback, Secretary  
GPPH's Board of Trustees

Witnessed By,

  
James DiGiulio, Chairman  
GPPH's Board of Trustees