

Greystone Park Psychiatric Hospital
Board of Trustees Meeting
March 2025 Meeting Minutes



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, March 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:

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

Hospital Administrators Attendance:

<u>Present:</u>	<u>Excused</u>
Joshua Belsky, Chief Executive Officer	
Eric Madurki, Deputy Chief Executive Officer	
Quinzell McKenzie, Chief Operating Officer	X
Julie VanHouten, Chief Nursing Officer	
Christopher Dorian, Chief Clinical Officer	
Dr. Harlan Mellk, MD, Acting Medical Director	
Jack Frey, Business Manager	
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, Jim DiGiulio. It was discussed that public comment and questions will occur at the end of the meeting.

II. APPROVAL OF MINUTES:

The February 20, 2025, GPPH Board Meeting Minutes were presented for approval. Christine Dahlgren gave the 1st motion to approve the minutes Sheriff James Gannon gave the 2nd motion to approve the minutes. All in favor. The February 20, 2025, 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.

February 2025: The average census was 379 at the end of the month and the average for the month was 381. There was a total of eight (8) admissions and ten (10) discharges for the month of February. There were seventy-two (72) patients on CEPP status in February which is about 18.9% of the patient population. There were seventy (70) KROL patients in February. The violence data was reviewed during this meeting. The patient-to-patient incidents were presented for February. The total is 3.84 per 1000 patient days and 3.9 vs. 2024 average. There were zero (0) incidents with moderate injury, and zero (0) incidents with severe injury. The patient-to-staff incidents were reviewed for February. The total is .84 per 1000 patient days and 1.4 vs. 2024 average. There were zero (0) incidents with moderate injury, and zero (0) incidents with severe injury. Seclusions in February decreased from the prior month. Restraints decreased from the prior month. The number of holds also decreased from the prior month. There was an increase of contraband from the prior month by one (1).

Departmental Reports: Human Resources: There were four (4) new hires in February, one (1) employee left, this is a total increase of three (3) employees despite the current hiring freeze. Nursing: Nursing students started from Rutgers. We had one (1) staff emergency on February 6th day shift due to weather. Annual Nursing Competencies were held and 99% of our professional staff attended as well as 97% of our paraprofessional staff. New Director of Nursing has been selected however, a current Director of Nursing (David Hutchinson) has advised of his retirement beginning of May. Quality Assurance (QA): QA continues to prepare for the Joint Commission which is expected to arrive at GPPH in 2026 for our triennial review. Rehabilitation Services: Migration to the J-Wing continues and we are currently working on addressing any patients that have missed groups. Rehab Department has 4700 more patient contacts vs. February 2024. Social Services: Social Services has a new Social Worker that has started. Social Services' CEPP numbers are down to under 20%. Psychiatry/Medicine: We have two (2) new Psychiatrists in orientation. One (1) is a temp and one (1) is a temp to permanent employee. Psychology: Psychologists are completing 89% of violence risk assessments completed on time despite being short staffed. We are recruiting for two (2) current positions and one (1) intern. Co-Occurring: Co-Occurring Department is taking the lead to update training at all state facilities.

Major Happenings/Events/Projects: The CEO is working on ensuring GPPH attends Systems Review Committee meetings regularly. We also continue to work on attendance in the Professional Advisory Committees for all counties in which we serve. Our 2024 Performance Improvement Project is nearing completion. Trauma Informed Care training is at an 89.7% completion rate. Nursing is at a 93% completion rate for this training. We will be starting Thai Chi to help with falls. Hardening of PIC Ceiling Tiles is completed on another unit. We have five (5) more units left to secure. New Uninterrupted Power System had tests down and passed.

CEO Activities: We have begun establishing committees for the 2025 PI Project and the 150th Anniversary Celebration. We have started new screening procedures as of March 11th. We are planning to upgrade Automated External Defibrillators at GPPH. We continue to focus on recruiting for necessary positions within the hospital. Meetings between the CEO and Pharmacy are occurring regularly.

Concerning Issues: Succession planning/retirements, Medicaid potential cuts, and discharge difficulties were discussed as potential concerns at GPPH.

IV. FINANCIAL REPORT:

The patient welfare fund information for February 2025 was reviewed by the Board of Trustees prior to this meeting. The beginning balance for February 2025 was reviewed as \$75,985.07 with \$8,009.53 deposited and \$12,690.88 in disbursements. The ending balance was \$71,303.72. Balance of cash management fund was \$544,714.60 and the total patient welfare fund available balance ended at \$616,018.32.

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The Board of Trustees previously approved \$1,503 for food for the Cottage patients to enjoy a Black History Event. This was approved via email. The Board of Trustees also previously approved cottage community integration costs which totaled \$600. This was also approved via email. Vice Chairman, Sheriff James Gannon gave 1st motion to approve the funds from the patient welfare fund account for the Cottage patients and Lou Modugno gave 2nd motion. All in favor. Funds of \$1,503 and \$600 were approved.

Jack Frey, Business Manager advised the Board of Trustees that at the next meeting a sizeable request for funds will be presented.

V. OFFICE OF COMMUNITY SERVICES REPORT:

The following report was provided by John Verney from the Office of Community Services:

1. Current Funding Opportunity: Request for Letters of Interest

Program Name: **Improving Access to 988 Suicide & Crisis Lifeline Services Purpose**

A Request for Letters of Interest (RLI) is issued by the Department of Human Services (DHS), Division of Mental Health and Addiction Services (DMHAS) to the two (2) current 988 Lifeline center agencies that have State contracts expiring as of March 31, 2025. The focus of this RLI is to provide funds for increasing capacity of staff and response structure to improve access to 988 services throughout the State of New Jersey with the goal of increasing the in-state response to 988 Lifeline calls, texts and chats. The funding for this RLI is specifically dedicated to maintaining and adding to the number of staff qualified to answer contacts and make follow-up contacts related to suicide prevention and mental health and substance use crisis. Available Funding Amount: Up to two (2) awards will be available for a combined total ceiling amount of approximately \$4,600,000 based on state and federal appropriations.

2. Mobile Crisis Outreach Support Team (MCORT)

As of March 3, MCORT is available to respond to non-emergent mental health/substance use crises, initially, between the hours of 7am-3pm (Mon-Friday). MCORT includes a 2-person team: Bachelor's level professional and a Peer Support Specialist dispatching in the field, with remote access to a clinical supervisor. Teams will arrive on-scene within an hour of dispatch if possible (e.g., depending on weather/traffic conditions and/or engagement in another outreach) to provide necessary services at a person's home; Follow-up services within a 72-hour window of initial dispatch.

3. Recent Funding Awards: Temporary Shelter Housing Services for Adults Who Use Substances

This Request for Proposal (RFP) was issued by the New Jersey Department of Human Services (DHS), Division of Mental Health and Addiction Services (DMHAS), to develop temporary housing services for adults with substance use disorders (SUD). The primary objective of this initiative is to address the housing needs within communities of color. As a result, the following cities were given priority in the selection process to better serve the populations in need: Newark, Camden, East Orange, Atlantic City, Trenton, Ewing, Paterson, Irvington, Plainfield and Jersey City. Total annualized funding is \$2,737,500, subject to New Jersey's Opioid Settlement State appropriations. The total funding for each temporary shelter housing bed is \$18,250 per year multiplied by the number of beds being offered. Up to 150 beds will be dedicated to serve approximately 450 individuals annually as part of this initiative. Northern region awards are:

Agency Name	Annualized Amount Funded*	# of Beds	County/ City of Services
Real House, Inc.	\$273,750	13	Essex/ Montclair
Catholic Charities of the Archdiocese of Newark	\$182,500	10	Hudson/ Jersey City
Homeless Solutions, Inc	\$273,750	15	Morris/ Morris Township
Eva's Village, Inc.	\$821,250	45	Passaic/ Paterson

VI. BOARD OF TRUSTEES BYLAWS:

New Board of Trustees Bylaws were presented to the Board of Trustees for review prior to this meeting. The Board of Trustees reviewed the bylaws and did not have any questions in regard to the changes. The Chairman, Jim DiGiulio discussed that the statute details what the Board of Trustees can and cannot do. He also advised that the Department of Health, Division of Behavioral Health Services would like all psychiatric hospitals bylaws to match and comport with the statute. 1st motion to approve the new Board of Trustees Bylaws was given by Chairman, Jim DiGiulio and 2nd motion was given by Lou Modugno. All in favor, the new Board of Trustees Bylaws have now been adopted.

VII. NEW BUSINESS:

There was no new business to address.

VIII. OLD BUSINESS:

Questions and answers from previous board meeting:

1. Trainings provided to Human Services Assistants and Human Services Technicians staff was discussed and the list was provided to the Board of Trustees via email prior to this meeting.
2. What is the education Requirement for Human Services Assistants and Human Services Technicians? They have no educational requirements
3. Total number of Phlebotomists at GPPH?
There is a total of one (1) Phlebotomist that is contracted and working full-time as well as there is a backup.
4. How many new covid vaccinations have been given to the hospital?
In December, we received fifty (50) vaccinations. Of the fifty (50), thirty-two (32) were given to patients, and eighteen (18) were offered to staff prior to expiration. If there is a change in covid numbers, or if a patient requests a covid vaccination, we can request additional vaccines.
5. What is the protocol for security responding to violence? How quickly do they respond and how do they respond?
All clinical staff are expected (if available) to respond. Time of response varies based on where they are in the unit/hospital.

IX. COMMENTS FROM THE PUBLIC:

Chairman, Jim 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:

If changes to Medicaid, do you see that affecting group homes?

The CEO advised potentially, yes. We just need to keep an eye on it as we are unsure what the cuts may be

Last month, how many 1:1s were assigned?

The CEO advised that typically per month we average about thirty-two (32) per month. Exact number of 1:1s will be provided at the next meeting.

Is there a limit to the number of 1:1s each month?

No, there is not a limit to the number of 1:1s allowed each month

Is there special training for 1:1 staff?

Yes, there is training including documentation and what to do as a 1:1.

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Has the state put into effect an electronic health record yet?

We are currently doing updates on our POES system which is now going to be version 2. As far as an electronic health record, the Department of Health has requested funding from the state as we intent to have an electronic health record in the future

X. ADJOURNMENT:

The meeting was adjourned at 3:57pm

XI. NEXT MEETING:

The next meeting of the Greystone Park Psychiatric Hospital Board of Trustees will be held in person at Greystone Park Psychiatric Hospital on April 17, 2025, at 3:15pm.

Respectfully Submitted,


Maria Jazehack, Secretary
GPPH's Board of Trustees

Witnessed By,


Jim DiGiulio, Chairman
GPPH's Board of Trustees