

Greystone Park Psychiatric Hospital
Board of Trustees Meeting
September 2024 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 in person on Thursday, September 19, 2024, 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	X
Louis Modugno, Esq.	X
Tomika Carter, MSW	Arrived at 3:24pm
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
Christopher Dorian, Chief Clinical Officer	
Dr. Harlan Mellk, MD, Acting Medical Director	
Jack Frey, Business Manager	
Dorothea Josephs-Spaulding, Director of Quality Assurance	
Timothy Dimitrios, Administrative Analyst 4	X
Dr. Laura Romano, Director of Nursing	
David Hutchinson, Director of Nursing	
Maria Jazenback, Secretary to the Board	
Stephanie Gabelmann, GPA Liaison	

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 June 20, 2024, GPPH Board Meeting Minutes and July 18, 2024 GPPH Board Meeting Minutes were presented for approval. Tomika Carter gave the 1st motion to approve the minutes. Christine Dahlgren gave the 2nd motion to approve the minutes. All in favor. The June 20, 2024, and July 18, 2024 GPPH Board Meeting Minutes were adopted.

III. **CEO REPORT:**

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

July Report: The average census was 355 with eleven (11) admissions and eleven (11) discharges with a total of 360 patients as of the end of July. There were sixty-seven (67) patients on CEPP status in July which is about 18.6% of the patient population which was the lowest percentage of all the state psychiatric hospitals. There were also 133 special status patients totaling 37% of the patient population for the month. The violence data was reviewed during the meeting. It was presented that for patient-to-patient incidents there were 3.73/1000 patient days (below 4.64 in 2023) with a total of thirty-four (34) incidents for the month. Of the thirty-four (34) incidents, thirteen (13) were no injuries, seventeen (17) were minor injuries and four (4) were moderate injuries. It was also presented that for patient-to-staff incidents there were 2.27/1000 patient days (above 1.81 in 2023) with a total of twenty-seven (27) incidents for the month. Of the twenty-seven (27) incidents, thirteen (13) were no injuries, thirteen (13) were minor injuries and one (1) was a moderate injury. There were seven (7) incidents of seclusion, eighteen (18) incidents of restraints, fourteen (14) incidents of holds and zero (0) contraband incidents.

Departmental Reports: Nursing is working on starting a new face sheet for the TREVR project as well as is working on a lithium toxicity project. Human Resources hired fifteen (15) staff in July and there were two (2) staff leaves. Co-Occurring staff are being trained in gambling addiction. There were nine (9) Medical Security Officers that attended a four (4) day intensive training. Human Resources and the Business Office were in Covid quarantine for most of the month. Rehabilitation Services ran 1,516 groups with a total of 8,403 patient contacts and completed 874 groups off the unit. Social Services had two (2) new staff start in orientation and there are two (2) more pending Human Resources clearance.

Major Happenings/Events/Projects: Trauma Informed Care training continues, and we are now at 75% of the staff having taken the training. July 4th events and trips occurred. Safewards continues in admissions and the cottages and is going to be starting on two (2) new units. The new Medical Director should be starting in November. The new Chief Nursing Officer should be starting in October. The Board of Trustees Picnic occurred in July. Staff and patients enjoyed the picnic and thanked the Board of Trustees for the wonderful event.

A Hazmat Spill occurred in which an old transformer was leaking oil. The area was kept closed until cleaned up.

August Report: The average census was 361.3 with eighteen (18) admissions and eleven (11) discharges with a total of 364 patients as of the end of August. There were sixty-eight (68) patients on CEPP status in August which is about 18.6% of the patient population which was the lowest percentage of all the state psychiatric hospitals. There were also 134 special status patients. The violence data was reviewed during the meeting. It was presented that for patient-to-patient incidents there were 4.91/1000 patient days (above 4.64 in 2023) with a total of fifty-five (55) incidents for the month. Of the fifty-five (55) incidents, thirty-two (32) were no injuries, sixteen (16) were minor injuries and zero (0) were moderate injuries. It was also presented that for patient-to-staff incidents there were 1.25/1000 patient days (below 1.81 in 2023) with a total of fifteen (15) incidents for the month. Of the fifteen (15) incidents, six (6) were no injuries, nine (9) were minor injuries and zero (0) were a moderate injury. There were nineteen (19) incidents of seclusion, seventeen (17) restraints, nineteen (19) holds and zero (0) contraband incidents.

Departmental Reports: The Medical Security Officers reported 95% of calls received resulted in positive outcomes. Nursing implemented a new falls assessment policy as well as a lithium project was initiated for the entire hospital and cottages. Psychology reported that despite multiple staff being out on leave, the department was 78% compliant with violence risk assessments completed in a timely manner. Rehabilitation

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Services conducted 1,569 groups, made 9,235 patient contacts, and completed 839 groups off the unit. Engineering continues to wait for state approval on UPS replacement, ATS replacements, and shed removals. Fire Department reported panel issues related to the UPS, plan system UPS is back up. Food Services' new oven was installed and has added new menu items to Park Place Café. A new psychiatrist joined B2 unit. An agency psychiatrist is leaving, and a replacement has been found. Migration to the J-Wing is to restart as well as a increase in trips to malls, museums, etc. has been occurring. There were two (2) new mobile restraint chairs that have been added to the facility. POES v2 implementation kickoff meetings have begun. PIC ceiling tiles hardening project is beginning October 15th and will continue until all ceiling tiles are hardened over the next several months.

Chairman, Jim DiGiulio thanked the CEO for his report and for getting the hospital back on track to some normalcy from Covid. The reporting of off grounds events, expanding of menus and the special projects reports were great to hear this month. It is a hard balance between getting things back to how they were pre-covid and keeping everyone safe. It sounds like GPPH has been doing a great job in this area. Chairman, Jim DiGiulio asked the CEO, Josh Belsky how he is doing with the adjustment of being at GPPH? How is staffing going? Josh Belsky advised most days it is very rewarding to work at GPPH as there are great people here that care about the patients. Josh advised he is happy with the progress that GPPH is making however advised that we are just scratching the surface and have a lot of plans coming up in the next several months. The executive team is great, and Josh expressed that he is giving them the tools they need to help them achieve these plans. Josh also advised that the executive team and staff at GPPH want things to change for the better and together they will achieve making these changes.

Board of Trustees member, Christine Dahlgren asked if routine bloodwork is occurring for patients on lithium regarding toxicity reports. Dr. Harlan Mellk, Acting Medical Director/Chief of Medicine advised that there is routine bloodwork for patients on lithium.

Board of Trustees member, Tomika Carter asked about the mobile restraint chair and how many deployments occurred so far this year. The Chief Clinical Officer, Chris Dorian advised that between January 2024 to August 2024 there have been a total of about forty-seven (47) deployments. One (1) patient is about 40% of those deployments and another patient is about 30% of the deployments. New straps were added to the new Mobile Restraint Chairs (MRC) as well as a head pad, staff will be trained on the new straps. These new straps were added for patients to still be able to apply sign language and for amputees. The box restraint chairs can't be fixed or replaced anymore therefore the hospital is moving slowly to the MRCs. Only Medical Security Officers and a few other staff can use the MRCs. Tomika Carter asked if the MRCs were implanted into the treatment plans for the two (2) patients? It was discussed that one (1) patient wanted the chair, so a plan was developed for the team to fill the desire in other ways. Deployments have been going down for other patients. Often times, if we safely wait it out, the MRC is not needed.

IV. FINANCIAL REPORT:

The patient welfare fund information for July 2024 was reviewed by the Board of Trustees prior to this meeting. The beginning balance for July 2024 was reviewed as \$63,194.35 with \$8,239.75 deposited and \$3,823 in disbursements. The ending balance was \$67,611.10. Balance of cash management fund was \$529,982.56 and the total patient welfare fund available balance ended at \$597,593.66.

The patient welfare fund information for August 2024 was reviewed by the Board of Trustees prior to this meeting. The beginning balance for August 2024 was reviewed as \$67,611.10 with \$7,957.96 deposited and \$6,962.85 in disbursements. The ending balance was \$68,606.21. Balance of cash management fund was \$532,357.61 and the total patient welfare fund available balance ended at \$600,963.82.

V. OFFICE OF COMMUNITY SERVICES REPORT:

John Verney from the Office of Community Services was not present at the meeting however he provided his report to the Board of Trustees prior to the meeting.

VII. NEW BUSINESS:

There was no new business to address.

VIII. OLD BUSINESS:

There was no old business to address.

IX. 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:

How many PIC Ceilings have been secured?

Josh Belsky, CEO advised that ten (10) units' ceilings above the PICs have been hardened/secured and there are eight (8) units remaining to be completed within the next several months.

Will the uninterrupted power supply secure unit doors? Ms. Weber advised that in the past she was at the facility and a power outage occurred however the unit doors unlocked, and all unit doors had to be manned by staff so that patients could not leave their units without permission.

Quinzell McKenzie, Chief Operating Officer advised that the unit doors have not unlocked during the time he has been working at GPPH but that the UPS and PLC powers the doors and when the generator kicks on there is a slight interruption, but the doors should not unlock.

Does GPPH do bloodwork here?

Dr. Harlan Mellk, Acting Medical Director/Chief of Medicine advised that we do draw blood from patients at GPPH, but it gets sent out and the results come back same day around 5pm-6pm.

Is ECT being used much? Is it offered to patients. Ms. Weber expressed she feels it is very beneficial and wanted to ensure it is offered to anyone who may benefit from it.

Dr. Harlan Mellk, Acting Medical Director/Chief of Medicine advised that there are currently two (2) patients using ECT and it is offered when beneficial.

X. ADJOURNMENT:

The meeting was adjourned at 3:46pm.


XI. NEXT MEETING:

The next meeting of the Greystone Park Psychiatric Hospital Board of Trustees will be held on Thursday, October 17, 2024, via Microsoft Teams at 3:15pm.

Respectfully Submitted,


Maria Jizerback, Secretary
GPPH's Board of Trustees

Witnessed By,


James DiGiulio, Chairman
GPPH's Board of Trustees