

**MINUTES OF A REGULAR MEETING
BOARD OF TRUSTEES
TRENTON PSYCHIATRIC HOSPITAL**

A meeting of the Board of Trustees of Trenton Psychiatric Hospital was held on **Thursday, March 16, 2023**, pursuant to notice duly given. In conformance with the Public Open Meetings Law, notice of the meeting has been sent to The Trenton Times, The Trentonian, Newark Star-Ledger and the Secretary of State and a notice placed on the bulletin board of Trenton Psychiatric Hospital.

Present:

***Carolyn Torre - RN, MA APN Chairperson
***Patricia Carr – Vice Chairperson
***Neil Weisfeld, Esq.
***Maureen Lebel – MSW, PhD.

Excused:

Susan Rubino, MD

*****Board Member Via Microsoft Team and Via
call in on Microsoft teams**

TPH Staff Attendance:

Intikhab Ahmad, M.D., Clinical Director; James Hollen, Deputy Chief Executive Officer - Operations (DCEO); Faith Johnson, Deputy Chief Executive Officer-Clinical (DCEO); Michelle Senni, Executive Assistant to the CEO; Towana Wilkins, Business Manager; Sheila Kwoka, Secretary to the Board of Trustees

Guest:

Mary Jean Weston, DMHAS; Timothy Loesch, Raycroft Complex Administrator;
Dr. Heshman Soliman, M.D. – Director of the Department of Medicine;
Marcial Martinez-Gomez, Human Service Police

Excused:

Maria Christensen, CEO; Julie Van Houten, Chief Nursing Officer;
Frank Miller, QI Director

ROLL CALL/CALL TO ORDER/MINUTES APPROVAL:

Roll call was conducted via Microsoft Teams and Microsoft Teams Call-in. The Board of Trustees meeting was called to order at 9:30 a.m. Minutes from the February 16, 2023, meeting were approved with changes.

BOARD REPORT:

February Monthly Report:

- Dr. Lebel noted the Close Observation (1:1) reduction. There was an average of twenty-eight (28) patients on (1:1).
- Dr. Lebel noted that there were 4 A+ incidents in the month of February.
- Dr. Lebel was very pleased that the Delinquency Rate for the month of February was at 0%.
- Mr. Weisfeld noted that there were no site visits from the Patient Service Compliance Unit (PSCU). PSCU does come to the Hospital when they get calls to do inspections.
- Mr. Weisfeld noted that there are no COVID infections at this time for the HAI (Healthcare Associated Infections). Infection Prevention is checking with the Epidemiologist to see when we will be coming off of Outbreak Status.
- Ms. Carr positively noted the hard work of the New Leaf Gardeners. She would like to recognize them for their hard work.
- Ms. Carr inquired about the status of the Boutique expenses. She would like to see the revenue shown separately on the Welfare Fund Budget Status monthly report.
- Ms. Torre noted the Assault rate is down 20%. The totals keep fluctuating.

AUXILIARY REPORT:

- The auxiliary is working very hard in supplying the patients with activities for the Evening Programming. The Auxiliary is accepting donations for the patients.

COMMITTEE REPORTS:

- **Incident Committee - Dr. Maureen Lebel**

No report at this time. Dr. Ahmad is going to send the Powerpoint on Violence Prevention to Michelle Senni to send to Dr. Lebel.

- **Legislative Committee – Mr. Neil Weisfeld**

I. BILLS AFFECTING MENTAL HEALTH SERVICES

The Committee continues to monitor the following bills. **Actions taken since the Committee's last report appear in boldface (thus).**

A2764/S1068

Increases Medicaid reimbursement for certain evidence-based mental health services.

Sponsors: Assembly reps. Sterley S. Stanley (D), Sadaf F. Jaffer (D), Daniel R. Benson (D); Senators Joseph F. Vitale (D), Vin Gopal (D)

Approved by Assembly Human Services Committee 9-0 on February 9, referred to Assembly Health Committee. Referred to Senate Health, Human Services, and Senior Citizens Committee January 31 (2022).

A4275/S3461

Establishes ombudsman for mental health and addiction services.

Sponsors: Assembly reps. Angela V. McKnight (D), Benjie E. Wimberly (D), Daniel R. Benson (D); Senator James Beach (D)

Approved by Assembly Health Committee 12-0 on February 13, referred to Assembly Appropriations Committee. Referred to Senate Health, Human Services, and Senior Citizens Committee January 12.

A4615/S1153

Requires state to help develop graduate medical education programs in behavioral health care.

Sponsors: Assembly reps. Louis D. Greenwald (D), Verlina Reynolds-Jackson (D), Ellen J. Park (D)

Approved by Assembly Higher Education Committee 12-0 on February 13, approved by Assembly Appropriations Committee 10-0 on February 23, passed by the Assembly 78-0 on February 27. Referred to Senate Health, Human Services, and Senior Citizens Committee February 28.

A4755/S3261

Permits behavioral and mental health providers to operate in homeless shelters.

Sponsors: Assembly reps. Yvonne Lopez (D), William F. Moen (D), Shanique Speight (D); Senator Renee C. Burgess (D).

Approved by Assembly Housing Committee 6-0 on October 13, approved by Assembly Human Services Committee 9-0 on December 8, passed by the Assembly 77-0 on December 15. Approved by the Senate Health, Human Services, and Senior Citizens Committee 8-0 on January 19.

A3514/S704

Prohibits mental health professionals from disclosing mental health notes to health insurers.

Sponsors: Assembly reps. Clinton Calabrese (D), Angelica M. Jimenez (D), Reginald W. Atkins (D); Senators Richard J. Codey (D), Anthony M. Bucco (R)

Approved by Senate Commerce Committee 4-0 on May 16, passed by the Senate 38-0 on June 16. Referred to Assembly Financial Institutions and Insurance Committee June 16.

A508/S2668

Establishes annual cost-of-living adjustment for mental health, substance use disorder, and developmental disability services.

Sponsors: Assembly reps. Daniel R. Benson (D), Carol A. Murphy (D); Senators Linda R. Greenstein (D), Joseph F. Vitale (D), Vin Gopal (D)

Referred to Assembly Human Services Committee January 11 (2022). Approved by Senate Health, Human Services, and Senior Citizens Committee 7-0 on October 6, referred to Senate Budget and Appropriations Committee.

A1700/S524

Creates a mental health diversion program to divert eligible persons from the criminal justice system.

Sponsors: Assembly reps. Annette Quijano (D), Raj Mukherji (D), Reginald W. Atkins (D); Senators M. Teresa Ruiz (D), Sandra B. Cunningham (D)

Approved by Assembly Judiciary Committee 4-0 on September 29, referred to Assembly Human Services Committee. Referred to Senate Judiciary Committee January 11 (2022).

A1924/S3031

Mandates reimbursement of mental health treatment for domestic violence by health insurers.

Sponsors: Assembly reps. Lisa Swain (D), Daniel R. Benson (D); Senators Vin Gopal (D), M. Teresa Ruiz (D)

Referred to Assembly Financial Institutions and Insurance Committee January 11 (2022). Referred to Senate Health, Human Services, and Senior Citizens Committee September 22.

A4604/S682

Mandates suicide prevention training for mental health practitioners

Sponsors: Assembly rep. Kevin J. Rooney (R); Senators Anthony M. Bucco (R), Vin Gopal (D).

Referred to Assembly Health Committee September 22. Referred to Senate Health, Human Services, and Senior Citizens Committee January 11 (2022).

A4540/S1153

Mandates mental health evaluation of all adult and juvenile animal cruelty offenders ("Shyanne's Law").

Sponsors: Assembly rep. Angelica M. Jimenez (D); Senator Joseph F. Vitale (D)

Referred to Assembly Agriculture and Food Security Committee September 22.

Referred to Senate Health, Human Services, and Senior Citizens Committee January 31 (2022).

A4618/S3122

Creates online job portal for behavioral health care workers and online externship and internship portal for health care students.

Sponsors: Assembly reps. Roy Freiman (D), Carol A. Murphy (D), Louis D. Greenwald (D); Senator Andrew Zwickler (D)

Approved by Assembly Labor Committee 9-0 on December 8, **approved by Assembly Appropriations Committee 10-0 on February 23, passed by the Assembly 78-0 on February 27. Referred to Senate Health, Human Services, and Senior Citizens Committee February 28.**

II. NOTE ON GOVERNOR'S BUDGET

Governor Murphy's proposed state budget for fiscal year 2024, as announced on February 28, includes ". . . over \$8 million in increased State funds for the first-in-the-nation statewide expansion of the Alternative Responses to Reduce Instances of Violence and Escalation – the ARRIVE Together program – which pairs police officers and State Troopers with mental health professionals when responding to a person who is experiencing a mental health crisis." (Source: <https://www.nj.gov/governor/news/news/562023/20230228c.shtml>) This is in addition to the \$2 million previously authorized by the Legislature for the ARRIVE Together pilot program.

Mr. Hollen appreciated the input on the APN Legislation. The APN Legislation still needs approval by the Senate.

- **Schulley Trading Post – Mr. Neil Weisfeld**

The floor in the Schulley Trading Post is being replaced. The floor should be completed shortly.

- **Therapeutic Environment Committee – Ms. Patricia Carr**

Recent Accomplishments

- Bench Painting Touch-up in continuing weather is slowing progress.

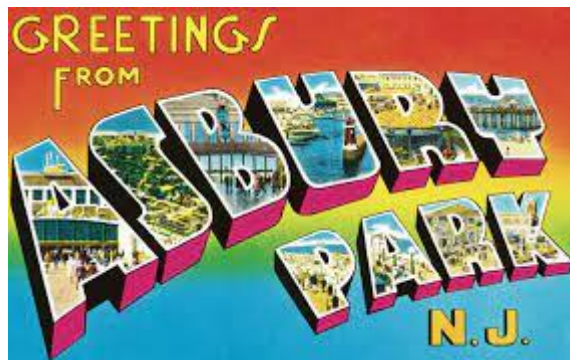
Currently in Progress-

Avante Garden Day Festival- April 28, 2023 - All Day Event

- Tree planting
- Planting Bench
- Face painting
- Tee shirt & Cap Designing
- Canvas painting
- Tissue paper flower designing
- Large Games for independent use - Staff not needed to facilitate participation

Projects Waiting in the Wings (depending on timing/funding)

- Mural outside Drake Units for patients and staff to paint.
- Welcome to Drake Postcard Image.
- Outlined to look like below completed:



- Designed to encourage staff and patients to complete together during Evening and Weekend Programming activity is currently on hold!
- Awaiting staff and patients to paint. All materials available upon request!

Wish List

- Awning for Lincoln Complex
 - Potting shed roof insulated
 - The lower panels in greenhouse four should be replaced (they are getting brittle and developing holes)
 - Pave the driveway from parking lot up to storage sheds
 - Smart tv hooked up to the internet to view educational horticulture videos.
 - An additional greenhouse. A new classroom building for the individuals in the program
- **Welfare Fund – Ms. Torre**

Ms. Torre noted that there is a positive Income of \$1000.00 from Schulley Trading Post. As Mr. Weisfeld noted, a seamless floor is being installed there now, and a new serving line will be added soon.

Report from Ms. Mary Jean Weston, MSW, Regional Coordinator Office of Community Services, Division of Mental Health & Addiction Services (DMHAS) (March 16, 2023)

1. Listening Sessions by New Jersey Age-Friendly Advisory Council

On Tuesday, March 14th, at 10am, and Tuesday, March 21st, at 5pm, the and the New Jersey Department of Human Services will be holding two virtual listening sessions to hear from New Jersey residents about how to make the state a better place for all ages. Governor Murphy has tasked the department to create a blueprint that outlines the best practices to make New Jersey more age-friendly, and getting input from the people for whom this matters most is an important part of this process.

2. Free Training for Hospital Providers (Prescribers Specifically)

Registration is available for our Center of Excellence training course on hospital-based addiction care in ED and inpatient settings. The course is an in-person, full day didactic, and 8 AOA Category 1–A and 8 AMA PRA Category 1™ credits and certificates of completion will be offered to all licensees who successfully complete the content activity and content evaluation materials. The course will take place on Friday, March 31, from 8:30am to 5pm at Cooper University Hospital. Content overview and registration information is available at bit.ly/coe033123 or on the flyer below.



SNJMATCOE CME
Didactic 03312023 Fly

3. RFPs/RLIs

a. Open Access to Medication for OUD in Homeless Shelters

This initiative is to increase access to buprenorphine and other ancillary services for individuals with a substance use disorder (SUD) through current programming available at homeless shelters that are licensed by New Jersey Department of Community Affairs' Bureau of Rooming and Boarding House Standards. These providers will develop the capacity to provide medication and support services for individuals who reside or drop in at homeless shelters. The intent of the program is to provide low threshold medication services to individuals with a SUD who present in these settings.

b. Prevention Services for LGBTQ Youth in NJ Middle or High Schools

This initiative is to provide Prevention Services for Lesbian/Gay/Bisexual/Transgendered or Queer/Questioning (LGBTQ) youth in central New Jersey middle or high schools. DMHAS currently funds two programs that serve LGBTQ youth in northern and southern New Jersey. Eligible counties include: Hunterdon, Mercer, Middlesex, Monmouth, Somerset, and Union.

More Information on these funding opportunities and the RFP/RLI documents is available at: <https://www.state.nj.us/humanservices/dmhas/provider/funding/>

COMMUNICATIONS: – There were no communications this month.

OLD BUSINESS: –

No report currently.

NEW BUSINESS:

The Board would like to send a commendation letter to the New Leaf Gardeners Program. Ms. Carr has composed a letter for review by Dr. Christiansen; if approved, it will be sent on TPH letterhead.

COMMENTS FROM THE PUBLIC – There were no comments from the public.

Post-meeting Presentation:

Mr. Timothy Loech spoke to the Board about the discharges from the Raycroft complex.

Dr. Heshman Soliman made a presentation on the Medicine Physician Specialist Rotation Program.

ADJOURNMENT

The meeting was adjourned at 10:30 a.m. The next meeting is scheduled for Thursday, April 20, 2023, at 9:30 a.m., via Microsoft Teams.

Respectfully submitted,

Sheila Kwoka
Secretary Board of Trustees

Carolyn Torre RN, MA, APN, FAANP
Chairperson

CT/sk

Timothy Loesch, Raycroft Complex Administrator presentation:

In 2022 we had 73 patients sick with Covid and we were on quarantine for at least half of the year total. However, we were still able to have a total 67 discharges in Raycroft.

Nine of those patients were appropriately sent to AKFC as they needed more supervision that we could give.

Ten other patients were discharged back to corrections after being found competent.

Six of 67 patients were 48 hour discharges which means a lot of scrambling by the teams to get everything together and get the patient out as soon as possible!

Of those 67 discharged patients, if you take away patients that went to AKFC, the total length of stay for the rest of the patients totals 43,512 days. This is equal to just over 119 years that the patients remained in TPH as a sum total. A few of the patients discharged were in TPH for a significant amount of time, including:

D.B. (8 yrs. 11 months),

E.F. (a few days shy of 5 years),

V.P. (5 years, 10 months)

S.R. (5 years, 3 months);

S.S. (7 years, 2 months),

E.T. (13 years, 6 months).

These patients by all accounts are now living safely in the community thanks to your treatment and persistence with them.

Challenges

1. Contraband
2. Safety
3. Staff shortage

Dr. Heshman Soliman and Dr. Intikhab – Presentation on Medicine Physician Specialist Rotation Program

Four Month Rotation ---Physician Specialists at TPH

- Psychiatrists are “primary care providers” who coordinate care across various disciplines and Physician Specialists role is as “consultants” to the teams.
- Four-month rotation would ensure that each physician specialist completes on service and off service notes. The Department of Medicine has created an electronic medical form that each physician would be required to complete. This would ensure continuity of care, increased patient interaction and robust communication among physicians. Physicians would be required to meet patients, offer their expertise, and provide “hand off” to incoming physicians.
- We have physician specialists with different expertise and training backgrounds (e.g., internal medicine, primary care etc.) and rotation will provide the opportunity for every unit to benefit from physician’s expertise and training.
- Rotation will help with coverage during day and overnights as physicians would get to know patients across the hospitals and will help us to decrease ER visits.
- Rotation would provide “an extra set of eyes” in patient care. Every physician has its own critical thinking, and it can improve patient care when more physicians are involved in the care since everyone uses their own medical expertise and it will benefit patients. Each physician may offer a different perspective to improve patient care.
- It will reduce burnout among physicians since rotation will offer “fair” opportunity for everyone to provide services in all units e.g., admissions, “busy units” and “relatively slow units”
- Physicians would get to know most if not all patients in the hospital and their knowledge and feedback will be useful to improve patient care and reducing violence in the hospital
- Physicians will get the opportunity to work with most of the teams in the hospital and it will enhance teamwork and multidisciplinary team approach in patient care.



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Trenton Psychiatric Hospital Physician Off-Service Summary
TPH-183 PROTOCOL
Rev. 1/19/22 protocol for TPH-183

Purpose:

This flow sheet of the patient's physical health profile of the previous four months includes notable health information for a quick overview/reference. It will help Psychiatrists/Physician specialists, MOD's, and other healthcare personnel to get familiar with the patient's health issues easily upon transfer and physician rotation through the complexes/units.

Procedure:

This form must be completed by the departing physician specialist prior to the end of the physician's four-month rotation cycle within the unit, signed by both the departing and incoming physician at the end of the cycle and placed in the patient chart. All areas of the form should be updated with the most current information and necessary follow ups needed during the upcoming cycle.

Location & purging:

This form should be scanned and saved in a shared drive, under the Chief of Medicine folder. Original is to be placed in the History and Physical Section of the patient chart just after the Health Maintenance record. This form shall be purged annually.



ER trips in relations
to Physician Rotatio



SIB, injury
evaluations, etc.doc