



FOR YOUR INFORMATION. These minutes will not become official until they are formally acted upon at the next Board meeting.

**MINUTES OF THE ANNUAL PUBLIC MEETING
 BOARD OF TRUSTEES
 GREYSTONE PARK PSYCHIATRIC HOSPITAL**

- I. The Board of Trustees Annual Public Meeting at Greystone Park Psychiatric Hospital (GPPH) was held in person and virtually via Microsoft Teams on Thursday, December 21, 2023, 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.	
Sheriff James M. Gannon	
Peter Simon, Esq.	X
Bruce Sisler, Esq.	X
Louis Modugno, Esq.	
Tomika Carter, MSW	
Christine Dahlgren	

Hospital Administrators Attendance:

<u>Present:</u>	<u>Excused</u>
Thomas Rosamilia, Interim Chief Executive Officer	
Eric Madurki, Deputy Chief Executive Officer	
Quinzell McKenzie, Chief Operating Officer	
Christopher Dorian, Chief Clinical Officer	
Dr. Harlan Mellk, MD, Acting Medical Director	
Samantha Hernandez, Chief Nursing Officer	
Jack Frey, Business Manager	
Dorothea Josephs-Spaulding, Director of Quality Management	
Arlington King, Settlement Liaison	X
Melissa Ballard, Human Resources Manager	
Timothy Dimitrios, Administrative Analyst 4	
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. All participating in the meeting virtually should remain

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muted on the phone until public comment occurs. The Chairman thanked everyone for coming to the Annual Public Meeting just a few days before the Christmas holiday. The Chairman discussed that the Annual Public Meeting Presentation will focus on Greystone Park Psychiatric Hospital's accomplishments for the 2023 year. All areas of service will be discussed in this thoughtful and thorough presentation by the leadership team. The Chairman also welcomed the newest board member, Christine Dahlgren to the Meeting.

II. FIRE SAFETY:

Fire Chief, Christopher Weiss reviewed the emergency exits and evacuation process for those attending the meeting in person in the event of an emergency. There were no questions from the public in regard to the evacuation procedures.

III. CEO REPORT:

Mr. Tom Rosamilia, Interim Chief Executive Officer (CEO) at Greystone Park Psychiatric Hospital (GPPH) presented the CEO Report with his Leadership Team for the Annual Public Meeting.

Tom Rosamilia, CEO began the presentation with his team by thanking the Board of Trustees for their support in 2023. The CEO then discussed the mission of GPPH stating that Greystone's innovative team collaborates to provide quality patient-centered care, based on individual's strengths, needs, abilities, and preferences, to help the patient reach their full potential. We promote a culture of wellness and recovery that starts in the hospital and continues into the community. The areas of concentration for the leadership at GPPH is Integrated Health – addressing the physical, mental and substance use health issues, Active Treatment, Violence Reduction, and Workforce Development.

To address Safety and Violence in the Hospital the CEO discussed that the Chief Clinical Officer position was created, patient information centers (PICs) will be enclosed, staff will continue to receive ongoing trainings, medical security officers were hired, special instructors services unit continues to assist with challenging cases, behavior analyst assists with behavioral needs and plans, patient programming expanded and put back in place since covid precautions, norix furniture placed on the units, promotion of recovery concepts, evidence based practices, and also discussed that GPPH formed a culture of respect and dignity. Assault Rate table was shared with those present at the meeting and it was discussed that patient-to-patient assaults per 1000 days is currently at 3.8 for November and our goal was 3.9. The assault rate per 1000 days for patient to staff assaults is currently at 1.9 for November and our goal is 1.8.

On day and evening shifts in Nursing, we maintain between 2.5-2.75:1 patient to staff ratio. On night shift, we maintain a ratio of less than 3.5:1 patient to staff ratio. There was one nursing staffing emergency declared in 2023. Nursing Education provides training on Trauma Informed Care (TIC), Basic Life Support (BLS), Columbia Suicide Severity Rating Scale, Therapeutic Options, Safe Patient Handling, and many more trainings. In the last 12 months, nursing education provided 268 mock code drills with staff and in-serviced 96 staff on the Garrett Wand. There were also 94 New Nursing Orientation Students in 2023. The fall rate per 1000 days in 2023 was shown to all present at the meeting but it was discussed that on average in 2023 we were at 1.64 and the goal for GPPH is 2. The average daily 1:1s were reviewed for the year during this meeting and it was discussed that the numbers in 2023 are slightly higher than 2022 mainly due to a few specific patients as well as number of patients total in the hospital did increase slightly.

Melissa Ballard, Human Resources Manager presented the 2023 statistics for the Human Resources Department. Melissa discussed that there were 550 visitors served per month, 219 new employees and contractors hired, 30 of which were Registered Nurses and 81 of which were Human Services Assistants. In 2023, we also had 47 employees retire. The Human Resources Department has a total of 17 employees.

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The key positions filled in 2023 were three Associate Hospital Administrators, an Employee Relations Coordinator, two Clinical Psychiatrists Post Certified, a Physician Specialist, two Clinical Nutritionists, and one Social Worker I. The compensation team was tasked with a large project to convert all employees onto the Electronic Payroll System called eCATs. This project took several months to complete and was finished ahead of the deadline set by the Department of Health. Human Resources provided training to over 800 employees across all three shifts on the use of eCATs and assisted with login issues as needed.

Eric Madurki, Deputy Chief Executive Officer discussed the admissions numbers with all present at the meeting including the total of legal status patients which was seventeen (17), geriatric patients which was eleven (11), and a total of 153 patients total for 2023. An admissions and discharge comparison graph was shown to all present and focused on the last twelve months averages. There was a 14.1 admissions average, 1.3 admissions average from Ann Klein Forensic Center, and one (1) admissions average for geriatric population. There was a total of an average of 13.8 discharges. The census for the last three (3) years graph was shown to all in attendance and it was discussed that the average census for 2023 was 358.1.

Areas 1, 2, 3, 4, and Cottages had many successes over the last year including re-launched patient orientation booklet in English and Spanish, launched new language tablets for patients not primary in English, Norix furniture for all eighteen (18) units, blockhouse furniture for all patient cottages, new flip-phones for every patient unit/cottage, installed first non-pay phone on G1, monthly patient birthday parties were reinstated, opened unit reward stores, and re-instated community trips and outings.

Staff Development and Training provided New Employee Orientation (NEO) to thirteen (13) NEO cycles including a psych-intern rotation which included training 209 new employees. Our Annual Octoberfest Training Fair was very successful with a 97% compliance rate. This is a training for all employees on hospital mandates, competency checks, and information on patient care and safety. Clinical Instruction for staff completed by Training Department included peer leadership program for psychiatry, mobile restraint chair trainings, psych mock code in-services for Nurses, psych mock code for Medical Security Officers and Special Instructional Services Unit, and full therapeutic options instructor certification for core and adjunct staff, therapeutic communication. OSHA/PEOSH Staff Development trainings included occupational health and safety initiative, PEOSH/OSHA compliance priority topics, industrial powered truck operator's certification course, OSHA 10 operations training program, and OSHA 30 operations training program for management and safety.

The Emergency Management Plan (EMP) emphasizes leadership participation and oversight. GPPH Leadership has created Emergency Management Subcommittees within the hospital that oversees all aspects of GPPH's Emergency Management program. We are finalizing our 2023 Hazard Vulnerability Analysis (HVA). The hazards that were identified in the HVA are detailed throughout the updated EMP. While it is not possible to predict every potential hazard, the EMP shares policies, plans, and procedures to improve preparedness for unforeseen emergencies.

State Specialized Inpatient Program (SSIP) was discussed as Unit A2 and on September 28th marked 30 years of the SSIP program at Greystone. SSIP worked with central office to produce the policy for Deaf and Hard of Hearing patients in the Department of Health. SSIP also revised the AKFC policy specifically for deaf patients. They also completed MasterWord program (virtual interpreters) testing to ensure Wi-Fi capability throughout GPPH and trained staff on the use of devices. The SSIP program continues to actively recruit for deaf staff through our collaborative relationship with Bergen Community College and Camden County College.

Department of Language and Culture includes languages such as Spanish, Cantonese, Mandarin, Polish, Russian, Creole/French, and Arabic. Volunteer staff are now able to train as interpreters after completing

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a successful language assessment. This has made a significant growth in our language bank to ten qualified staff. The department notes an increase in the utilization of interpreters and translation services. ESL class has expanded to serving all hospital units. The department has begun translating important documents including the patient orientation booklet and managing difficult life experiences booklet.

The Fire Department completed a total of 342 fire calls in 2023. The Fire Department trained 1,191 staff on fire/safety training totaling 97% of GPPH staff trained in 2023. We currently have one interim life safety measure in place at GPPH regarding Hazardous Storage Areas until the hospitals Life Safety drawings are updated.

Client Services conducts the involuntary medication administration (IMAR) review hearings and services as the point for patients, family, and other resources. The department welcomes a new staff in November.

The Safety Department initiatives include evaluation of patient devices, eyewash station training, evaluation of hand hygiene monitoring, assists in removal of hazardous materials, assisted in flood remediation, patient unit emergency lights, hospital signage, coordinating implementing enhanced security including X-ray and metal detectors.

The Security Department has added eight new guards in anticipation of screening all comers to the hospital using metal detectors and X-Ray machines. The department assisted ninety-six (96) staff with items such as proxy cards and key replacements due to lost or broken/replaced items in 2023.

Christopher Dorian, Chief Clinical Officer discussed the accomplishments for the Co-Occurring Department which included certified and licensed drug and alcohol counselors who provided an average of 165 groups monthly plus individual sessions. On grounds and virtual AA/NA/SMART Recovery meetings occurred weekly. Special events such as celebration of recovery month, alcohol awareness month, the great American smoke out, opioid overdose awareness day, and program graduations.

Medical Security Officers (MSO) launched at GPPH in 2023, absorbed the Specialized Instruction Services Unit (SISU) which was active since 2018. There are currently eighteen (18) staff trained in MSO and they are trained in and utilize violence prevention strategies, trauma informed care, and therapeutic communication. They promote patient recovery and a culture of safety and security as well as are a pre-crisis prevention team. Lastly, they are prohibited from utilizing physical restraint or involuntary medication without first being able to attempt verbal methods.

Psychology Department utilized evidence-based practices for group and individual interventions in the following: Dialectical Behavioral Therapy, Cognitive Behavioral Therapy for Psychosis, Metacognitive Training, Acceptance and Commitment Therapy, Schema Therapy, Cognitive Remediation, and Positive Behavioral Support. In 2023, 575 psychological assessments were completed. Highly competitive APA – Accredited internship received seventy-seven (77) applications from students nationwide for four (4) positions.

Chaplaincy made 45,000 patient contacts so far in 2023. Chaplaincy celebrated holidays including Christmas, Easter, Hannukah, Rosh Hashanah, Yom Kippur, Ramadan, Eid-al-Fitr, Ed-Al-Adha, Diwali, Karwa Chauth, Dusshera, Memorial of Jesus' Death, and many others. Weekly/Monthly Services including Judaism, Christianity, Catholicism, Interfaith, and Islamic occurs at GPPH. Chaplaincy takes the lead for memorial services for patients and staff as needed and is a source of support and guidance for patients and staff.

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Social Services discharged 166 patients so far in 2023. They conducted an average of 155 groups a month plus individual contacts as well as thousands of family and community contacts. Social Services takes the lead on obtaining appropriate IDs for our patients and completed this task for 153 total patients this year. Due to Social Services success, we have decreased our number of CEPP patients in the last three (3) years.

Rehabilitation Department includes recreational, occupational, speech, vocational, rehabilitative, and educational services for our patients. On average 1,507 groups occurred monthly on and off units while focusing on maintaining patient engagement. Rehab worked in collaboration with CSPNJ for wellness services, peer recovery services, and patient phone project which has successfully provided forty-one (41) patients with a cell phone so far in 2023. Rehab also manages the treatment mall (J-Wing), Park Place, Gym, Library, and the Creative Employment Center. Rehab helped organize and held dozens of special events over the course of the year to foster growth in social, life, and recovery skills, but also to provide excitement for our patients and staff.

The Staff Library provides up to date evidence based medical content reference tools. Psychiatry Online authoritative mental health information including DSM-5 access for all staff. PsychInfo is a database resource for abstracts and citations of behavioral and social science research. Health Newsletters such as Mayo Clinic Health Letter, Psychiatry Drug Alerts, Medical Letter on Drugs and Therapeutics as well as Academic Journals such as British Journal of Psychiatry, Behavioral Interventions, Journal of Clinical Psychology, etc.

Trauma Informed Care is care that recognizes the impact of trauma upon people seeking services and also upon people providing services. Shifting focus from "What's wrong with you?" to "What happened to you?" Therapeutic Response to Elevated Violence Risk (TREVR) established strong, two-way communication between the treatment team and all three shifts of nursing. Communication includes sharing the team's identified tools to assist a patient at risk for violence and clear descriptions of the outcome when a therapeutic response is used. TREVR is being piloted on A3 and B2.

Safewards is a program that promoted staff and patients working together to make the hospital a calmer, more positive place for everyone. Safewards interventions are strategies developed to manage sources of conflict on the unit. These interventions help staff manage patient frustration and provide useful tools for patients and staff to work together. Currently there are three (3) Safewards pilot areas: admissions, cottages, and G2. Teams are being coached by GPPH Safewards workgroup members.

Dr. Harlan Mellk, Acting Medical Director/Chief of Medicine discussed Psychiatry has hired two (2) full-time state psychiatrists, two (2) full-time locums psychiatrists, and two (2) state on-call psychiatrists. Currently in the process of credentialing two (2) additional psychiatrists. Psychiatry completed successful inhouse departmental trainings in emergency response, peer leadership, and psychiatric management of the mobile restraint chair. A more robust resident teaching program allowing residents to have more independence as treatment team leaders and prescribers. With PGY3 and 4 successfully rotating through our geriatric and forensic units. Completion of forensic geared literature review paper with Dr. Acosta Arias co-authored by Dr. Ijeoma Hassan titled "Forensic Assessment of Traumatic Brain Injury: Implications for Criminal Responsibility, a literature review" submitted to Journal of the American Academy of Psychiatry and the Law (JAAPL). Forensic Workgroup established in April, working towards promoting safety and reduction of violence amongst the forensic population. Over twenty (20) Clinical Analytic Process (CAP) meetings occurred with three (3) patients being discharged into the community and identifying two (2) patients who needed a higher level of care and were transferred to another facility. The department wide initiative is to improve documentation with a more comprehensive treatment plan interventions and more detailed progress notes.

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Plain Language Alerts began in September 2023. In 2023 thus far, there were 860 Psychiatric Emergencies at GPPH. In the last twelve (12) months, there were 168 instances of calling the ambulance for medical emergencies. The average response time was 14.9 minutes. Over the last three (3) months, the response time has decreased by 19%.

Infection Prevention had an average infection rate in the last twelve months of 1.14. The total number of infections in 2023 so far, is 152.

Continuing Medical Education hosted fifteen (15) events in 2023 with a total of 910 total attendees (283 physicians and 627 non-physicians). There was a total of twenty-three (23) total credit hours. Programs delivered remotely via MS Teams which allows other state psychiatric hospitals to participate.

Dr. Dorothea Josephs-Spaulding, Director of Quality Management discussed that Joint Commission's Triennial Survey took place from September 18-22, 2023. All conditional items were successfully addressed and approved by the Joint Commission on November 6, 2023. All required evident of standards compliance was successful submitted on December 1, 2023. We are currently working on two new performance improvement plans which are regarding improving utilization of language services and reducing urinary tract infections.

Healthcare Equity Committee is currently addressing healthcare disparities as a quality and safety priority. Equality vs. Equity was reviewed with all present and equality is leaving the door open for anyone who has the means to approach it. Equity is ensuring there is a pathway to that door for those who need it. Health Equality means all patients are treated equally. Healthcare Equity means all patients have the opportunity to attain their highest level of health.

There were 546 reviews not including December completed by the QM Department. There were nineteen (19) kitchen audits and eighty (80) room audits. QM staff also conducted 165 Dental Clinic Chart Audits including 100% of patients that had tooth extractions. There was also a total of thirty-five (35) contraband incidents for the year and nineteen (19) of those incidents involved smoking, tobacco, flame related in 2023.

Tom Rosamilia, Interim CEO discussed that there were four (4) patients with immigration issues who were discharged through assistance from the Immigration Coordinator. There were nineteen (19) patients in need of guardian that were assigned a guardian through coordination and submission of guardianship applications by the Guardianship Coordinator. On March 1, 2023, Greystone held in-person civil commitment hearings for the first time since March of 2020. 586 virtual hearings were an arduous task as court coordination staff had to move from unit to unit to facilitate patients' virtual appearances. On average, there were eleven (11) virtual hearings per scheduled court date. In addition to the weekly virtual civil commitment hearings, 156 Krol Hearings were coordinated by Court Coordination staff.

Jack Frey, Business Manager discussed maintenance of the patient welfare fund. Successful audits were conducted by the Department of Health Office of Auditing. These audits were performed on the following non-appropriated accounts: Rehabilitative Services Fund and Special Services Fund. Final Development and Testing of an Electronic Ordering System was discussed. In collaboration with Information Technology, an electronic order system was developed and tested for ordering of office supplies which will be deployed in 2024 and eventually expanded to full storehouse.

Quinzell McKenzie, Chief Operating Officer discussed that housekeeping purchased twenty-two (22) I-mops to get away from regular mops and purchased backpack vacuums to get away from brooms. Housekeeping implemented and installed a color-coded system for cleaning as well as an industrial hygiene class for chemical training. Housekeeping switched to and purchased forty (40) high security maid carts so patients cannot easily access these carts. Housekeeping began using better applicators to wax our floors.

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Housekeeping moved all Norix furniture for the patient units as well as purchased a new ride on floor scrubber to better clean our floors. Housekeepers received training from spruce industries on proper floor pad use, floor care and machine use and carpet cleaning training. Housekeeping also purchased a new carpet cleaning extractor.

Engineering completed 10,765 work orders. Paving of cottages and sealing of parking lots pictures were shown to the public during this meeting as one of the projects engineering completed in 2023. Engineering installed anti-ligature curtains and window treatments. Rectifier upgrades of telecommunications system was also completed as well as live valve insertions and water spool replacements. F2 medication room roll-up gate was installed. Valve Replacement for Boilers #1 and #3 were completed. E3 medication room exhaust fan replacement occurred. XL-10 Honeywell EBI HVAC completed. Cottage 17 kitchen countertop replacement was also completed as well as the J-Wing tree trimming in 2023.

Information Technology (IT) implemented fulfillment practices to meet and comply with requirements in an everchanging ESI/Digital Data Environment. Partnership with GPPH transportation team in transporting cell phones between Trenton, GPPH ITSM. IT improved GPPH New Employee Orientation/Termination process changes with HR validation process. ITSM staff task assignment rotation program to share knowledge evenly amongst the team. Enhanced and optimized inventory, asset management, and surplus of GPPH personal computing and accessories items. Upgrades/deployment around the hospital of older desktop personal computing. Implemented and rolled out the digital web forms versions for assets and access requests. Designed and implemented an automated lookup tool for ITSM User Access and Asset validation for Network management, security and compliance.

Food Service Department rolled out in collaboration with clinical nutrition and updated dysphagia. The hiring of seven (7) new supervisors of area operations along with one (1) operations supervisor occurred in 2023. Assuming the food service responsibilities of Park Place Café began in 2023. Provided many hospital themed meals and picnics throughout the year that included Black History month, St. Patrick's Day, Memorial Day, Juneteenth, Summer Picnics, Thanksgiving, and many more. Food Service serves approximately 425,00 meals annually. Updates of main kitchen equipment to include new conveyor dish machine, tilt skillet, two (2) new kettles, 45 qt electric food chopper, double stack convection oven, and eleven (11) new two-tiered Cambro heated food delivery carts.

Human Service Police flagpole is currently in the process of being installed. They currently have five (5) new Human Service Police Officers assigned to GPPH.

Tom Rosamilia, Interim CEO ended the meeting thanking everyone who participated in the presentation to the public as well as the staff at GPPH for their hard working in making the accomplishments discussed during this meeting a success.

IV. COMMENTS FROM THE PUBLIC

Chairman, James DiGiulio opened the floor for questions and/or comments. Members of the public were reminded that they had 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.

There were no comments from the public during this meeting.

VIII. ADJOURNMENT:

Jim DiGiulio, Chairman discussed that on behalf of the Board of Trustees he would like to thank everyone for coming to the Annual Public Meeting as we hope to have more in person meetings in 2024, however

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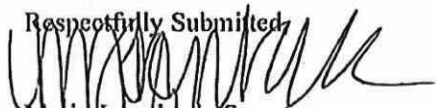
we know the risk we place on coming to the facility during high covid numbers and understand this may prevent some in person meetings in 2024 but will keep everyone's safety in mind for future meetings. Chairman thanked Tom Rosamilia, Melissa Ballard, Eric Madurki, Chris Dorian, Dr. Harlan Mellk, Dr. Dorothea Josephs-Spaulding, Jack Frey, and Quinzell McKenzie for such a thorough report as this must have been very time consuming to put together as it showed the board members and the public a good idea of what occurred at the hospital in 2023. Chairman thanked the public for coming and wished them a happy holidays.

The meeting was adjourned at 4:30pm.

IX. NEXT MEETING:

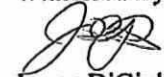
The next meeting of the Greystone Park Psychiatric Hospital Board of Trustees will be held on Thursday, January 18, 2024, at 3:15pm via telephone.

Respectfully Submitted,



Maria Jazembok, Secretary
GPPH's Board of Trustees

Witnessed By,



James DiGiulio, Chairman
GPPH's Board of Trustees