

# VPCH Advisory Committee

May 24, 2021

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Attendees: Laurie Emerson (NAMI), Karen Barber (DMH), Nicole Julian, Jeremy Smith (VPCH), Greg Tomasulo (VPCH), Sarah Sherbrook (VPCH), Stephanie Shaw (VPCH), Dr. Alisson Richards (VPCH), Diane Bugbee, Zachary Hozid (DRVT), Anne Donahue

## Medical Director Update: (Dr. Richards)

All the work that was put into shutting everything down in the beginning of the pandemic was difficult, but we are finding that opening everything back up again has been even more challenging. We get guidance from VDH, CDC, and CMS along with watching what other facilities in Vermont are doing.

Working with the department to get persons hospitalized in and out as soon as possible and doing our part to facilitate flow within the system. We are helping make beds for people so we can get them out of the emergency room.

Q: Wondering about the vaccination status, any update?

A: We have worked hard with DMH and VDH along with our Director of Pharmacy, because of this we are able to get vaccines for any person hospitalized that would like it. We query often even if they have responded no in the past. VPCH is currently getting the Johnson and Johnson vaccine since it is one shot and you do not need to store it in such cold temperatures.

Q: What is the current census, how many beds online, and how many people are waiting?

A: I am not sure how many people are waiting and maybe Karen can weigh in on that, but we are operating 16 beds, it really comes down to staffing. The state is struggling to get travel nurses and there needs to be a longer-term plan to get and retain nurses in Vermont. We have open beds, but we cannot safely staff them due to not being able to go below certain staff minimums. Karen added that as of 6:30AM we had six involuntary adults and one involuntary child but did not include the voluntary.

Q: If persons hospitalized want the vaccine but are at risk for blood clots, could we get them an alternative vaccine?

A: Yes, we would be able to do that.

### Psychology Update: (Greg Tomasulo)

We have been without a Social Services Chief for several months but starting June 7<sup>th</sup> Elizabeth Kanard will be stepping into that role. She will be a great addition and Greg applauded her commitment to patient centered care. Our most senior Social Worker has been serving in the interim and has been doing amazing. We are down a Social Worker as well; they are in the process of hiring for that position.

Last week our intern Kathryn Murray left she was working 20 hours a week; we already have another intern lined up to start in August.

Next week our four Recovery Services Clinicians will be returning to work after being remote. They work in a shared office and will be required to wear masks. This will be the first time we have had them all in the same building since March of 2020, they are already planning an outdoor social for staff and patients next week.

### Nursing Update: (Stephanie Shaw)

Our focus has been reopening and following all the changing guidance from VDH. We had a quarantine unit that was being used but that has changed and now persons hospitalized will be placed there if they are high risk of transmission and need to do so. Our travel and exposure guidance has changed, staff can do what they want if they are vaccinated and not have to worry. We changed our employee screening, and groups will be different now with our Recovery Services team returning. Visitation is next on the list along with other entities entering the building to work on projects that were put on hold due to the pandemic.

Travel nurse agencies have become hard to compete with in the job market and getting contracts from our current travel agencies has been difficult. We have been unable to compete with other facilities who might be offering large bonuses. We are continuing recruitment and retention strategies and we had two travel nurses start today.

### Quality Update: (Sarah Sherbrook & Jeremy Smith)

Sarah is currently looking at data priorities and how they influence our continuing improvement plan and asked if members had thoughts on our dashboard. We will add this to the agenda for the next meeting so members were asked to think of what they would like to see on the dashboard that is not currently on there.

See dashboard, attached.

### Department of Mental Health Update: (Karen Barber)

Commissioner Squirrell has given her notice and her last day is July 1<sup>st</sup>. Commissioner Squirrell has done a lot with the department in the past two years and her leadership and vision for DMH will be missed. Karen was unsure what our new leadership will look like but hopes to have more news soon.

Our staff are currently working 12-hour shifts that are temporary, we are in the process of negotiating and continuing the 12-hour shifts permanently but there is still a chance we may go back to 8-hour shifts.

Big legislative session, the Forensic Care bill/S.3 passed.

We received funds for the Secure Residential facility that will be in Essex and the Certificate of Need is pending.

DMH received money for mobile response, this is more for kids, but it is a project worth mentioning. This one-year pilot in Rutland will provide mobile family intervention which will give families the support they need without them having to go somewhere.

The state hiring freeze has been lifted, on another note Frank Reed has retired.

The wait list is down today, lower than what it has been. There are a lot of beds closed across the system and a lot of places are seeing staffing issues like VPCH. This issuing is occurring at the DA level as well and is unacceptable, all systems need to work together and find a solution.

Q: Can you share information about the beds opening at Brattleboro?

A: Currently having issues getting staff.

Q: RFP for residential?

A: This is not a project Karen is on, but they are working on it.

Q: What about peer outreach?

A: Again, this is not something Karen is on but knows they are working on it.

Karen added that a lot of DMH staff attended the NAMI virtual conference and it went well, she thanked those who put it on.

### Questions:

Q: Where do we stand on the revamp of the patient handbook?

A: Emily re-circulated it with the inputs from Anne, but some members did not receive this copy. Stephanie will ask Emily to email this group the most recent version and then get it to print as soon as possible. Greg added that we are currently getting patient feedback as well and he will provide Emily with that once she returns.

Q: What is the plan for in person groups? How long till that might happen and how long till visitors or patient representatives would be allowed back?

A: Stephanie felt a couple of weeks is a good time frame, if there is a pressing need to meet with someone in person, we can accommodate that. She added that attorneys have been able to visit when needed. The full opening of our doors again to visitors is a current discussion.

Nicole added that she has been weekly virtual meetings, they do not get the same attendance as in person but the nurses who have set it up along with Greg have been great about making sure patients are able to talk if they want. Zach added that his weekly group has been going well too but hoping to come back in the next couple weeks.