

VPCH Advisory Committee Notes – June 26, 2017

Attending: Cathy Rickerby, Eva Belatski, Laurie Emerson, Michael Sabourin, Scott Perry, Heidi Gee, Karen Barber, Frank Reed

CEO update – Frank Reed

Alisson Richards, Medical Director, away at a conference this week. Dr. Patricia Fintak covering for Dr. Richardson until 7/6. No Medical Director Report this month.

Recruitment update:

Hiring for CEO – Screening interviews completed for 7 current applicants. We have had both in-state and out-of-state interest. Follow-up interviews have occurred with one applicant and a second is scheduled for next week. Two candidates appear solid and we are pursuing opportunities to bring them in to meet with hospital staff.

Hiring for CNO - Screening interviews completed on 3 of 5 current applicants. We have had both in-state and out-of-state interest. Interviews have been conducted with 2 applicants so far. We are continuing to gather information and references.

Questions raised regarding how broadly these applicants will be vetted prior to hire. Frank explained that as exempt positions these were appointments by the Governor through AHS Secretary and Commissioner. Commissioner has indicated interest in having candidates meet with hospital personnel as part of final process. Frank indicated that he would bring their question back to the Commissioner's Office.

Jeremy Smith, who has been the nurse supervisor of the Middlesex Program is coming to VPCH QM. Kristin Farrell, a staff nurse at VPCH, has accepted the nurse supervisor position in Middlesex. They will begin their transition during July.

Electronic Health Record – Peter Mills-Brown in Education and Ann Mackay both went to Alabama to continue training on the EHR capacities. Peter is involved both in his role as a trainer for nurses on the EHR, but also as interface with physician platform of medical record. Developing more familiarity and expertise with the various EHR modules will expedite user training and ability to address remaining customization needs.

VPCH is doing preliminary exploration of reinstating a time and attendance management system (e.g. time clock) as the current process remains very time consuming and labor intensive for the staffing office. Business needs analysis has been completed and information being gathered from a number of vendors. An RFP will follow for open bidding. Cost savings in staffing time and efficiencies achieved are expected to offset much of the system expense.

Public Service Recognition Week – Postings of employee years of service and photos receiving certificates of recognition from Commissioner are posted in the front lobby of the hospital in the display case.

Hospital Staff across all shifts have all completed a cultural diversity training as part of VPCH's ongoing efforts to identify areas of training in the workplace. The program better prepares the hospital staff to appreciate and respect cultural differences or experiences of others whether patients or co-workers.

Operations Update – Heidi Gee

Excessive rains, shady areas, and mulch in the gardens has proven to be a breeding ground for small brown mushrooms in one of the outdoor yard areas. Some of the small mushroom varieties could be ingested with negative side effects for patients. Mitigation work is underway to remove the beds and replace the area with grass.

Paintings by staff and patients that were discussed in May are now hanging in the Admissions Suite, Recovery Services, and outside kitchen areas.

Policy/Legislative Updates – Karen Barber

VOSHA – Karen overviewed current status: initial citations were withdrawn due to errors by VOSHA and the citations had just been reissued. DMH plans to contest. First step is an informal conference. Karen indicated that she was not going to go into particulars because of the contest. Cathy and others raised concerns about what VOSHA was asking – did they really want staff to be in gear all the time? How would that impact the therapeutic environment? What about all the work VPCH was doing around Six Core Strategies?

S. 133 – There will be follow-up over the course of the summer in various workgroups

S.3 (Now Act 51) Kuligowski: signed into law by the governor and took effect immediately upon his signature. A return to the previous *Peck* standard. Great success by a large group of stakeholders and a good example of how advocates, providers and the state can work together.

Cathy raised questions about a criminal court proceeding where the examining psychiatrist identified a patient by name and indicated that the patient was at VPCH. The psychiatrist went on to comment about the patient having rocks in a sock as a possible weapon. Karen indicated that during a criminal proceeding and subsequent testimony, which are open to the public, a psychiatrist may share information about a patient they assess. However, due to HIPAA, VPCH still cannot speak about specific patients. Cathy questioned about the accuracy of a report about rocks in a sock. Frank clarified that he could say with confidence that no incident of a patient having rocks in his socks has been reported at VPCH to date.

Cathy asked about Six Core Strategies and how competency is assessed for each staff member. Frank indicated that not all staff have attended the Six Core Strategies training, but staff members who have worked through the sub-committee structure to implement and spread the practices contained in the training. Scott indicated that staff are exposed to the concepts through Orientation, but he did not have the specifics. Frank indicated that there are multiple on-line mandatories in a number of areas that staff are expected to complete to a level of proficiency by answering several multiple choice questions at the end of each mandatory. Pro-Act proficiency was also discussed.

Eva raised a question about patients not being able to access their public defenders or get their calls returned. She asked if there was a legal basis for this delay. Karen asked for more context and it

appears to be a public defender follow-up issue. Karen suggested Eva reach out to the Public Defender's Office to express her concerns and see if the PD's office would be willing to work with DRVT.

Michael indicated that there isn't a forum for talking about broader system issues anymore since there wasn't a transformation council meeting now. Frank indicated that the Adult Program Standing Committee still exists and continues to serve as a forum for input. Public comment time is available there and can speak to topics outside of just the agenda items listed.

Eva referenced that RRMC has developed a brochure about civil commitment that was helpful to patients. She offered to send the information to the people present if there is interest in possibly doing something like that for civil and/or forensic patients at VPCH.

Next Advisory Committee Meeting July 31, 2017