



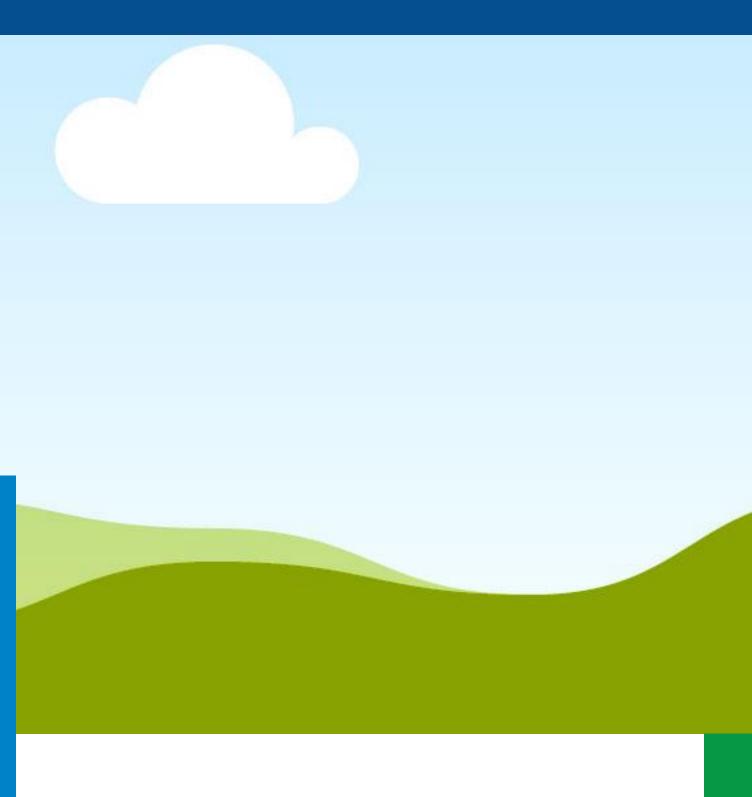


# **Greystone Park Psychiatric** Hospital **Annual Public Meeting**

December 21, 2023



## THOMAS ROSAMILIA, Interim Chief Executive Officer





# **GREYSTONE'S BOARD OF TRUSTEES**

## Membership

- Jim DiGiulio, Chairman
- Sheriff James Gannon, Vice Chairman
- Louis Modugno
- Peter Simon
- Bruce Sisler
- Tomika Carter
- Christine Dahlgren

## BOARD OF TRUSTEES





# "Foster Hope, Practice Wellness, Live Recovery



Areas of concentration

Greystone's innovative team collaborates to ✓ Interprovide quality patient-centered care, based on individual's strengths, needs, abilities and preferences, to help the patient reach their full ✓ Active potential. We promote a culture of wellness and ✓ Violarecovery that starts in the hospital and ✓ Wor

- ✓ Integrated Health addressing the physical,
  - mental and substance use health issues
- ✓ Active Treatment
- ✓ Violence Reduction
- ✓ Workforce Development



# **SAFETY & VIOLENCE REDUCTION EFFORTS**

- **Chief Clinical Officer** lacksquare
- Patient Information Centers (PICs)  $\bullet$
- Staff Trainings  $\bullet$ ullet
- Medical Security Officers  $\bullet$
- Special Instructors Services Unit (SISU)  $\bullet$
- Behavior Analyst  $\bullet$
- **Patient Programming**  $\bullet$

- Norix Furniture
- Equipment  $\bullet$



Promotion of recovery concepts

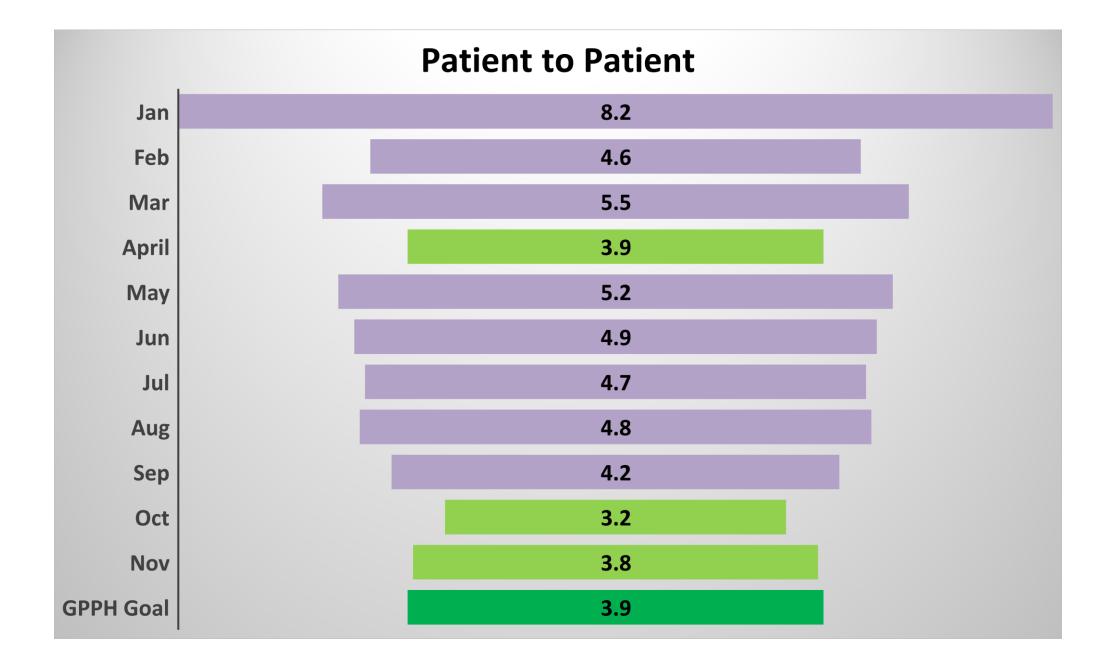
Evidence based practices

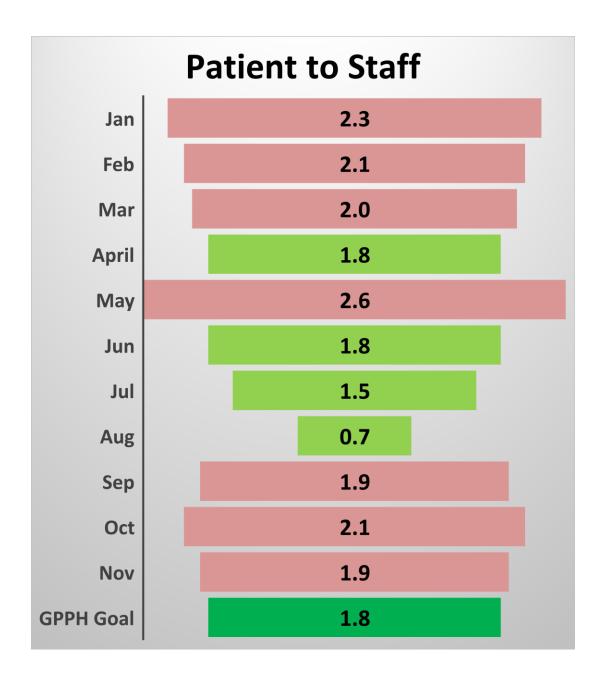
• Culture of Respect & Dignity



# **ASSAULT RATE**

### 2023 Assault Rates per 1000 days







# NURSING

- On <u>Day & Evening shifts</u>, we maintain between (2.50-2.75 : 1) ulletPatient to Staff Ratio.
- On Night shift we maintain a Ratio of less than (3.50 : 1) Patients to lacksquareStaff.
- One (1) Nursing Staffing Emergency declared in 2023 •

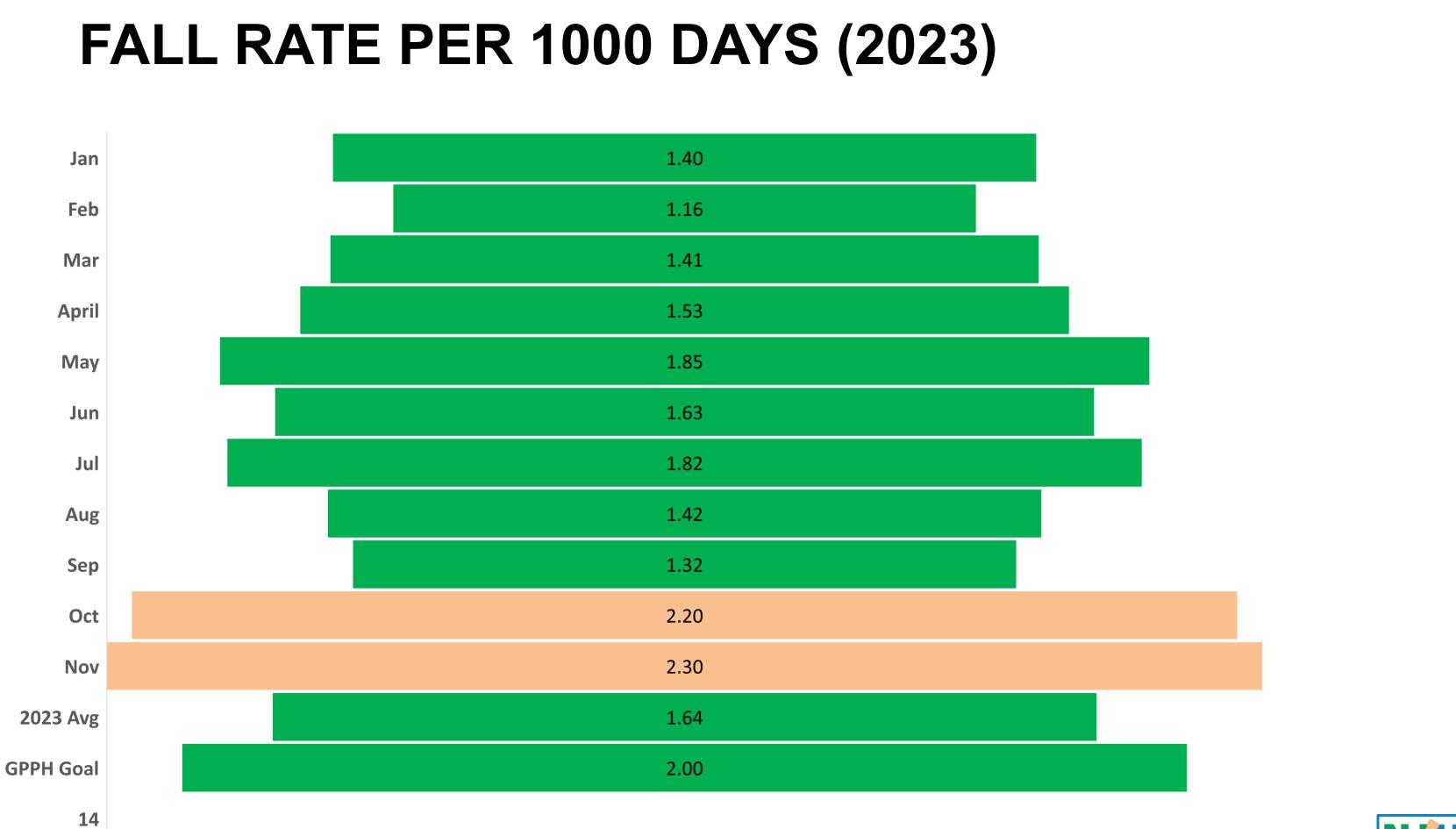


# **NURSING EDUCATION**

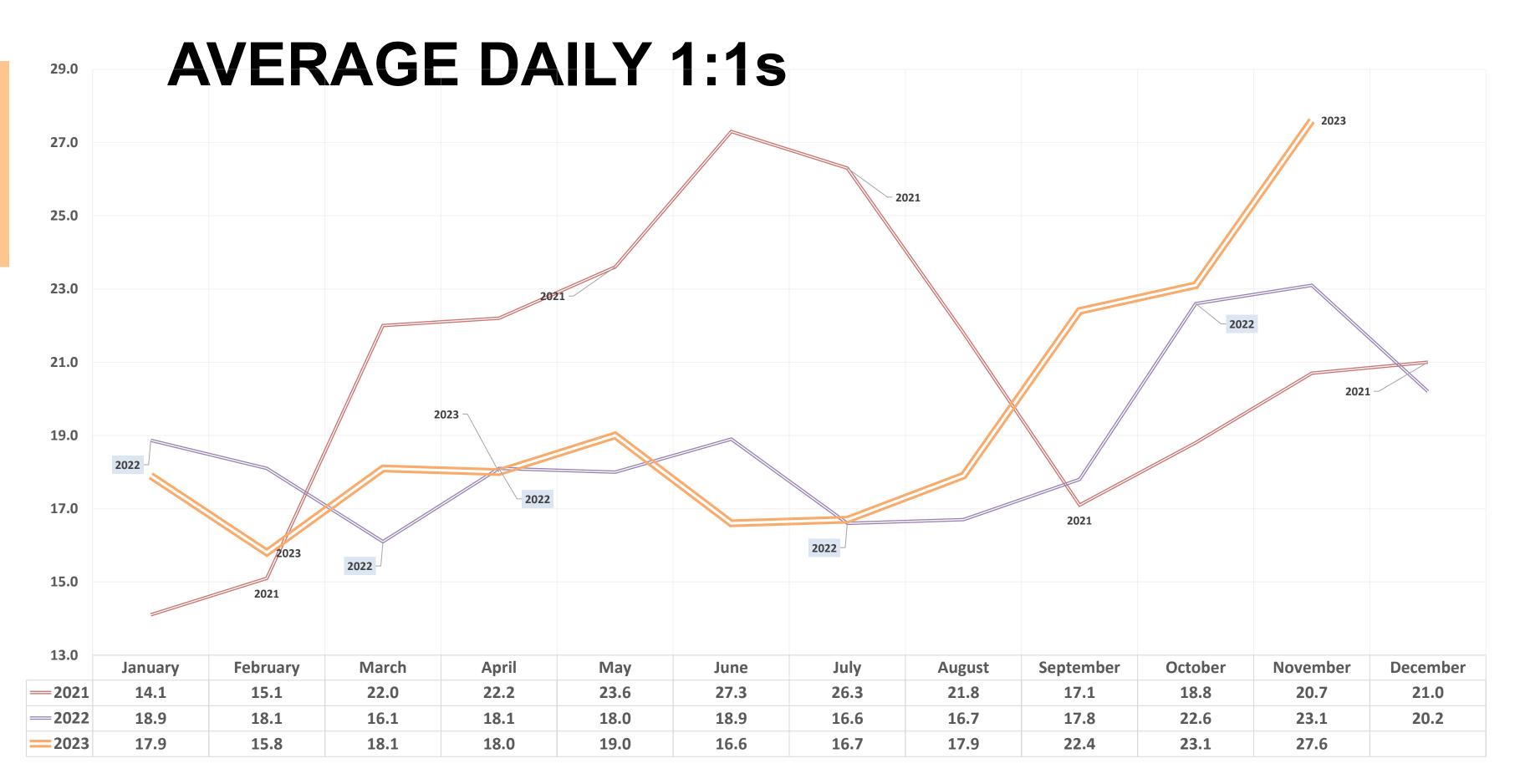
- Trauma Informed Care (TIC)
- Basic Life Support (BLS) CPR ullet
- Columbia Suicide severity rating scale ullet
- **Therapeutic Options** lacksquare
- Safe Patient Handling ullet

Nursing Education / Training	Monthly Avg	Last 12 Months
Mock Code Drills	22.3	268
New Nursing Orientation students	8.5	94
Garrett Wand in-service students	8.0	96





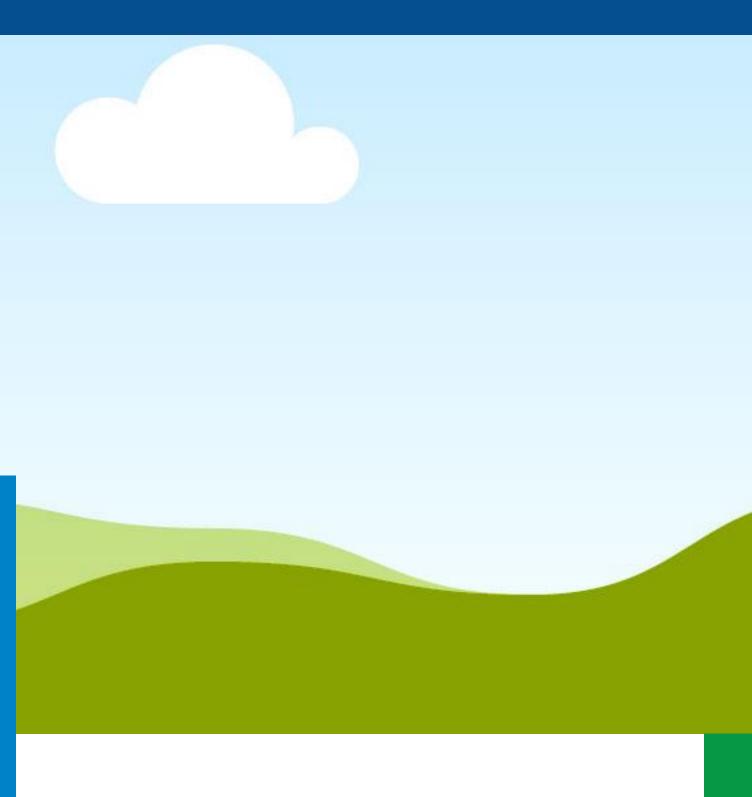






# HUMAN RESOURCES

MELISSA BALLARD, Human Resources Manager





# HUMAN RESOURCES

2023 Statistics					
Visitors served	550/mo				
New employees & Contractors hired	219				
- Registered Nurses	30				
- Human Services Assistants	81				
Retirees	47				
The HR Dept staffed up to 17 employees					

### eCats Training

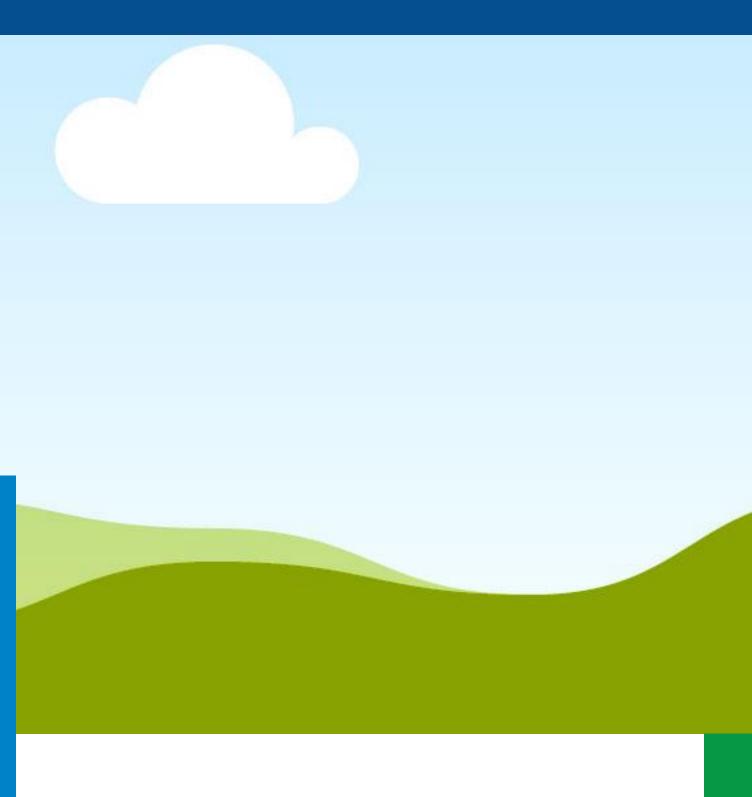
The compensation team was tasked with a large project to convert all employees on to the Electronic payroll system called eCats. This project took several months to complete and was finished ahead of the deadline set by the department. Human resources provided training to over 800 employees across all three shifts on the use of eCats and assisted with log in issues as needed.

### **Key positions filled in 2023**

- **Associate Hospital Administrators (x3)** Ο
- **Employee Relations Coordinator** Ο
- **Clinical Psychiatrists post certified (x2)**  $\bigcirc$
- **Physician Specialist** Ο
- **Clinical Nutritionist (x2)**  $\bigcirc$
- Social Worker 1 (x2) Ο



ERIC MADURKI, Deputy Chief Executive Officer

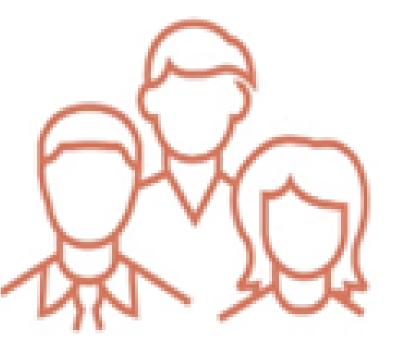




# **ADMISSIONS - 2023**

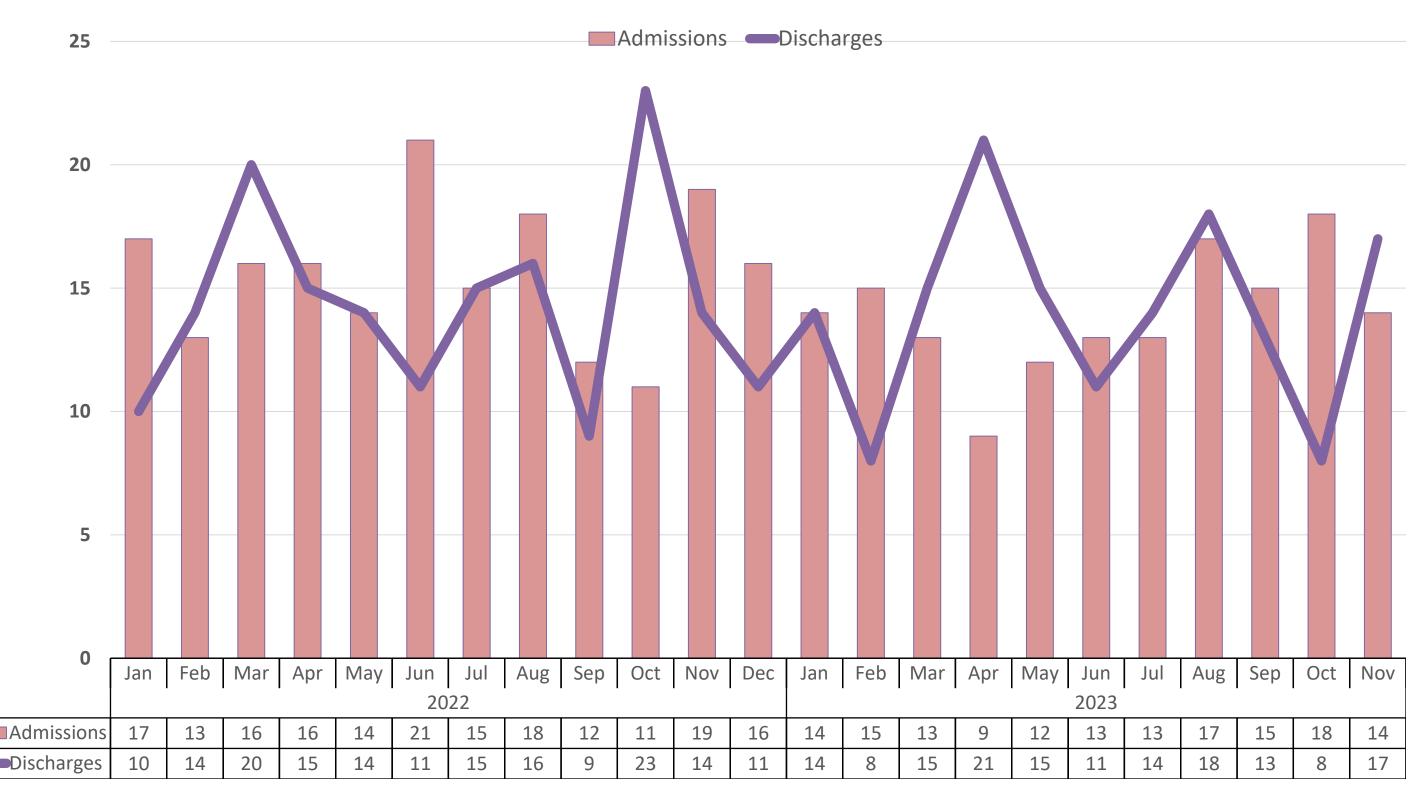
County		Legal Status	Geriatric
	% of Patients	(11%)	(7%)
Bergen	(7.8%)	3	3
Essex		4	-
Hunterdon		-	-
Morris	(28.8%)	-	2
Passaic	(11.1%)	3	3
Somerset	(9.8%)	1	2
Sussex		2	-
Union	(9.2%)	2	-
Warren	(4.6%)	1	-
other		1	1
out of state	(3.3%)	-	-
Total		17	11

## Total





# **ADMISSIONS & DISCHARGES**



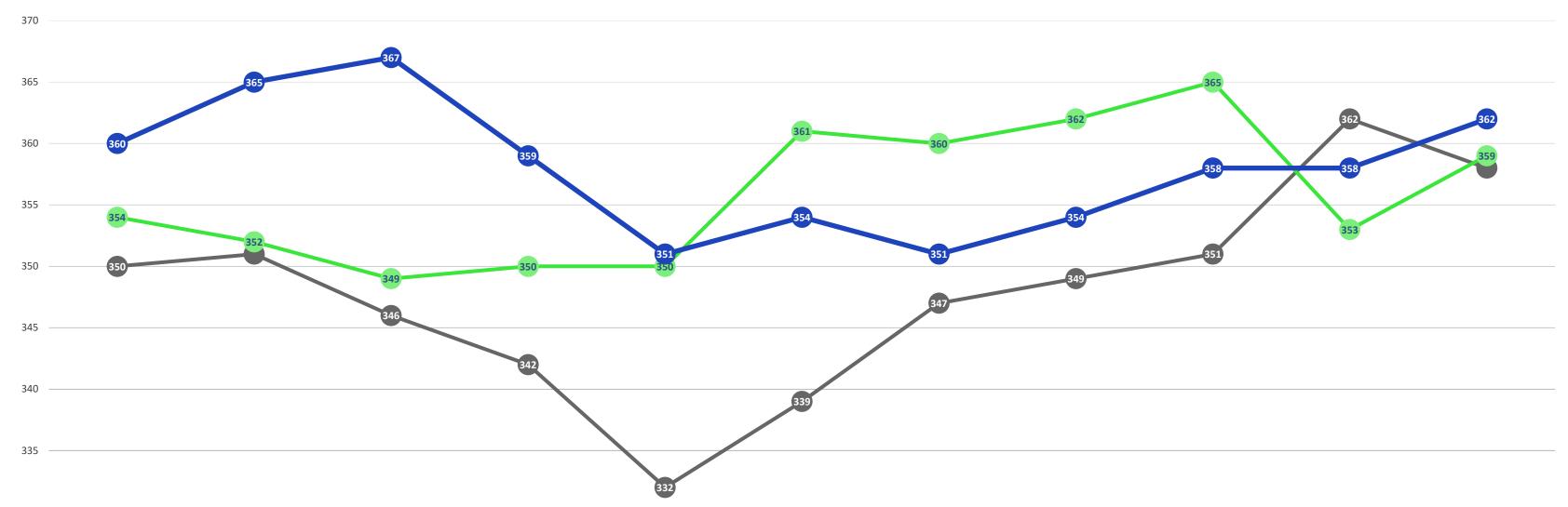
Last 12-month Averages: Admissions = 14.1 **AKFC = 1.3** Geriatric = 1

**Discharges = 13.8** 

**Current CEPP patients = 90** 







330	January	February	March	April	May	June	July	August	September	October	November
2021	350	351	346	342	332	339	347	349	351	362	358
2022	354	352	349	350	350	361	360	362	365	353	359
-2023	360	365	367	359	351	354	351	354	358	358	362

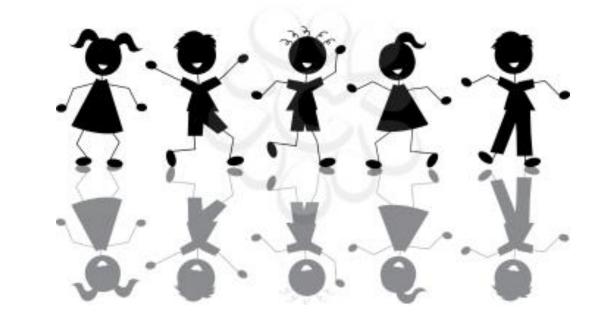
## 2023 Avg = 358.1



# AREAS 1, 2, 3 & COTTAGES

- Re-launched Patient Orientation booklet in
   English & Spanish
- Launched new Language tablets for patients not primary in English
- Norix Furniture for ALL 18 Units
- Blockhouse Furniture for ALL Patient Cottages
- New flip-phones for every patient unit/cottage

- Installed 1<sup>st</sup> Non-Pay Phone on G1
- Monthly patient birthday parties reinstated
- Opened unit Reward Stores
- Re-instated Community Trips & Outings





# **STAFF DEVELOPMENT & TRAINING**

Г	New Employee Orientation		Octo
-	13 NEO cycles including a Psych-Intern rotation		entir
	209 new employees trained		and i
		1	97%
<b>Clinical Instruction</b>			
<ul> <li>Peer Leadership Prog</li> </ul>	gram for Psychiatry	<u>OSHA</u>	A / F
<ul> <li>Mobile Restraint Cha</li> </ul>	air (MRC)	_	Осс
<ul> <li>Psych Mock Code In-</li> </ul>	services for Nurses	_	PEO
<ul> <li>Psych Mock Code For</li> </ul>	r MSO's & SISU	_	Indu
<ul> <li>Full Therapeutic Opt</li> </ul>	ions (TO) Instructor certification for		cert
Core and Adjunct sta	off	_	OS⊦
<ul> <li>Therapeutic Commu</li> </ul>	nication - resetting our preconceptions	_	OS⊦
and focusing on peop	ple and not their status as patients.		mar

### oberfest Annual Training Fair

- ire hospital mandates, competency checks,
- information on patient care and safety
- 6 Compliance

## PEOSH Staff Development

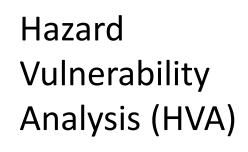
- cupational Health and Safety Initiative
- OSH/OSHA compliance priority topics
- lustrial Powered Truck operator's
- rtification course
- HA 10 Operations training program
- HA 30 Operations training program for
- nagement and safety



## EMERGENCY MANAGEMENT PLAN 🥣 📴 营 🛹 🤺 📲 🖬 💼 💼

GPPH's EMP emphasizes leadership participation & oversight. GPPH leadership have created Emergency Management Subcommittees within the hospital that oversee all aspects of GPPH's **Emergency Management program.** 







We are finalizing our 2023 HVA. The hazards that were identified in the HVA are detailed throughout the updated EMP. While it's not possible to predict every potential hazard, the EMP shares policies, plans and procedures to improve preparedness for unforeseen emergencies.



## STATE SPECIALIZED INPATIENT PROGRAM

## Unit A2 is the SSIP unit at GPPH

- Worked with central office to produce the policy for Deaf and hard of ----hearing clients in the Dept of Health
- Revised the AKFC policy specifically for deaf patients
- Completed MasterWord program (virtual interpreters) testing to insure Wi-— Fi capability throughout the entire hospital. Trained staff to the use of devices.
- Continue active recruiting for deaf staff through our collaborative relationship with Bergen Community College and Camden County College.



September 28th marked 30 years of the SSIP program at Greystone!



## **DEPARTMENT OF LANGUAGE & CULTURE**

- Volunteer staff are now able to train as interpreters after completing a successful language assessment. This has made a significant growth in our language bank to 10 qualified staff.
- Languages include Spanish, Cantonese, Mandarin, Polish, Russian,
   Creole/French & Arabic.
- 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.

### WANTED LANGUAGE INTERPRETERS



Are you bilingual?

Do you want to volunteer as an interpreter?

Do you want to improve patient care by providing services in their language?

### Free training is offered to staff!

Contact the Department of Language & Culture for more information

Call extension 5498 or email Yeidy.diaz@doh.nj.gov



# FIRE DEPARTMENT

ACTUAL FIRE CALLS IN 2023						
January	18					
February	20					
March	26					
April	30					
May	34					
June	46					
July	46					
August	28					
September	38					
October	28					
November	28					
Total	342					

## Fire / Safety Training Drills at Octoberfest

- 1191 staff passed
- 97%

## Interim Life Safety Measures

- We currently have 1 in place regarding Hazardous
  - Storage Areas until the hospitals Life Safety drawings are
  - updated.

## Christopher Weiss became our new Fire Chief



# **CLIENT SERVICES**

Conducts the Involuntary Medication Administration (IMAR) Review

hearings.

- Serves as the point for patients, family and other resources.
- Happy to welcome a new Staff in November.



# SAFETY DEPARTMENT

## Initiatives

—	Emergency Management (EM) and Preparedness	– Evaluat
_	Environment of Care (EC) Plans	– Eyewas
—	Patient Product Review	– Evaluat
_	Pre-Construction Risk Assessments	– Assist i
—	Hazardous Surveillance Rounds	– Assiste
_	Wastewater Treatment Plant	– Patient
—	State Psychiatric Hospital Safety Officer's Meeting	– Hospita
	Best practices	– Coordii
	<ul> <li>Hosted DOH Employee Health &amp; Safety program</li> </ul>	includi
	<ul> <li>Visited sister facilities AKFC &amp; TPH</li> </ul>	meruun

- tion of patient devices
- sh station training
- tion of Hand Hygiene monitoring
- in removal of Hazardous Materials
- ed in flood remediation
- unit emergency lights
- al Signage
- nating implementing enhanced security
- ng x-ray and metal detectors



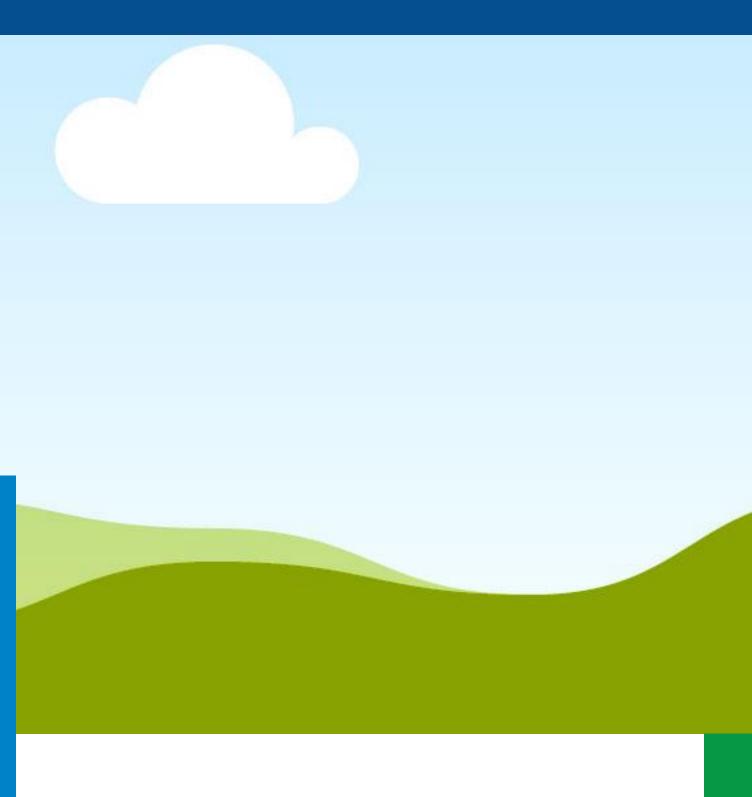
# SECURITY

Security Report	# Staff	# of Proxy	Card IDs	rd IDs # of Keys		Dhone Tickets Classed	
		Lost	Broken/Replaced	Lost	Broken/Replaced	Phone Tickets Closed	
Month Avg	8.0	2.0	4.4	4.8	0.9	33.1	
Total	96	24	53	57	11	130	

In 2023, we have added 8 new Guards in anticipation of screening all comers to the hospital using Metal detectors and X-Ray machines. More information to follow.



## CHRISTOPHER DORIAN, Chief Clinical Officer





# **CO-OCCURRING DISORDERS**

- Certified and Licensed Drug and Alcohol Counselors
- Avg. 165 groups monthly plus individual sessions
- On grounds and virtual AA/NA/SMART Recovery meetings weekly
- Special events such as celebration of Recovery Month, Alcohol Awareness Month, the Great American Smokeout, Opioid Overdose Awareness Day, program graduations
- Increasing variety of programming offered, program structure, and use of tech



# MEDICAL SECURITY OFFICERS (MSOs)

- Launched at GPPH in 2023, absorbed SISU which was active since 2018 •
- Currently have a staff of 18
- Trained in and utilize violence prevention strategies, trauma informed care, and therapeutic communication
- Promote patient recovery and a culture of safety and security
- Pre-crisis prevention team
- Prohibited from utilizing physical restraint or involuntary medication without first being able to attempt verbal methods



# **PSYCHOLOGY**

- Utilized EBPs 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, Positive Behavioral Support • For 2023, 575 psychological assessments completed including assessments in Violence Risk, Suicide Risk, Diagnostic, Personality, Intellectual, Functional Behavioral, Dementia, and Age-
- Related Needs
- Highly competitive APA-Accredited internship received 77 applications from students nationwide for 4 positions



# CHAPLAINCY

- 45,000 patient contact made so far this year
- Celebrated holidays including Christmas, Easter, Hannukah, Rosh Hashanah, Yom Kippur, Ramadan, Eid-al-Fitr, Ed-Al-Adha, Diwali, Karwa Chauth, Dusshera, Memorial of Jesus's Death
- Weekly/Monthly Services inc. Judaism, Christianity, Catholicism, Interfaith, Islamic
- Memorial and Funeral services for patients and staff
- New groups include Wild Spirituality, Spiritual Journaling
- Source of support and guidance for patients and staff



# **SOCIAL SERVICES**

- Discharges in 2023 166
- Avg 155 groups monthly plus individual contacts
- Thousands of family and community contacts
- Project to get appropriate IDs—153 total patients
- 1 intern working towards credentialling
- Average of CEPP patients has decreased in the last three years



# REHABILITATION

- Recreational, occupational, speech, vocational, rehabilitative, and educational services
- Average 1,507 groups monthly on and off units while focusing on maintaining patient engagement
- Worked in collaboration with CSPNJ for wellness services, peer recovery services, and patient cell phone project (41 so far in 2023!)
- Manages TX Mall, Park Place, Gym, Library, CEC
- 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



# REHABILITATION

	Tota	ls	Patients per	Monthy Average	
Program Area	Groups Held	# of Patients	Group	Groups	# of Patients
Area 1	1,777	14,217	8.0	148	1,185
Area 2	1,762	10,444	5.9	147	870
Area 3	1,802	11,220	6.2	150	935
Area 4	2,051	14,768	7.2	171	1,231
Mountain Meadow	525	1,562	3.0	44	130
Occupational Therapy	1,181	3,552	3.0	98	296
Art/Music	2,468	11,960	4.8	206	997
J-Wing	170	853	5.0	21	107
Gym	1,622	13,565	8.4	135	1,130
Acad Ed / CPU	1,348	8,863	6.6	112	739
Vocational (CEC)	2,742	7,464	2.7	229	622

## Programming stats last 12 months





# **STAFF LIBRARY**

- **UpToDate**: Evidence-based medical content reference tool
- Psychiatry Online: Authoritative mental health information; includes DSM-5 access for all staff
- PsycINFO: Database resource for abstracts and citations of behavioral and social science research
- Academic Journals: British Journal of Psychiatry, Behavioral Interventions, Journal of Clinical Psychology, Journal of Dual Diagnosis, Journal of Pastoral Care and Counseling, Journal of Spirituality in Mental Health, Journal of Applied Behavior Analysis, Journal of Experimental Analysis of Behavior, Psychiatric Rehabilitation Journal, Psychiatric Services, Social Work, Today's Dietitian, American Journal of Nursing, Nursing, Nursing Management, Nursing Made Incredibly Easy, Audio Digest
- Health Newsletters: Mayo Clinic Health Letter, Psychiatry Drug Alerts, Medical Letter on Drugs and Therapeutics



## Trauma **Informed Care:**

upon people providing services.

Shifting focus from "What's wrong with you?" to "What happened to you?"

# **Care that recognizes the impact of trauma** upon people seeking services and also



Therapeutic **Response to** Elevated **Violence Risk** (TREVR)

TREVR establishes strong, two-way communication between the treatment team and all 3 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 promotes 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.

## Safewards

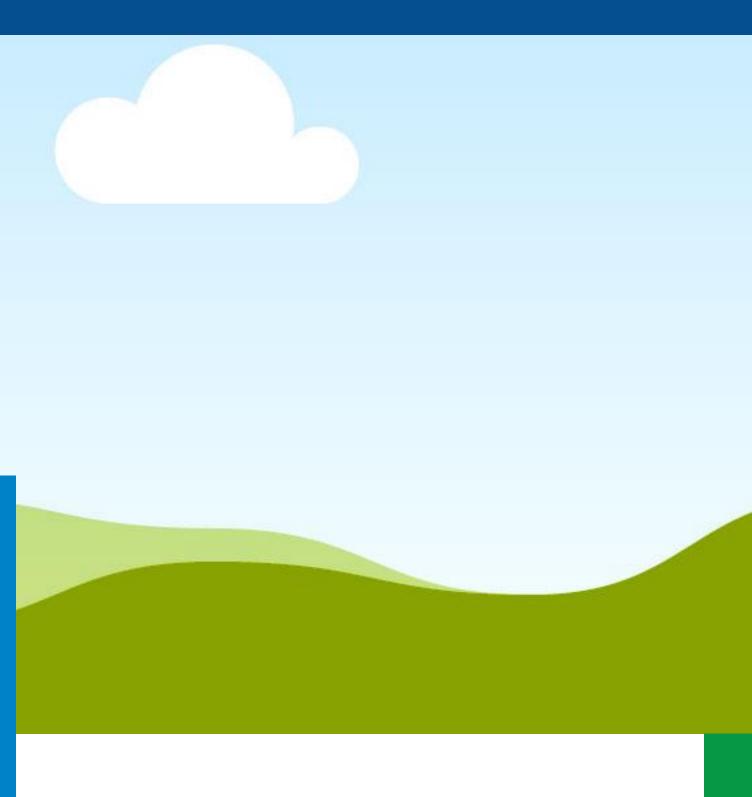
These interventions help staff manage patient frustration and provide useful tools for patients and staff to work together

Currently there are 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





## **PSYCHIATRY**

- Staffing: Hired 2 full-time state psychiatrists, 2 full-time locums psychiatrists, and 2 state on call psychiatrists. Currently in process of credentialing 2 psychiatrists.
- 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 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).



## **PSYCHIATRY**

• Forensic work group established in April, working towards promoting safety and reduction of violence amongst the forensic population

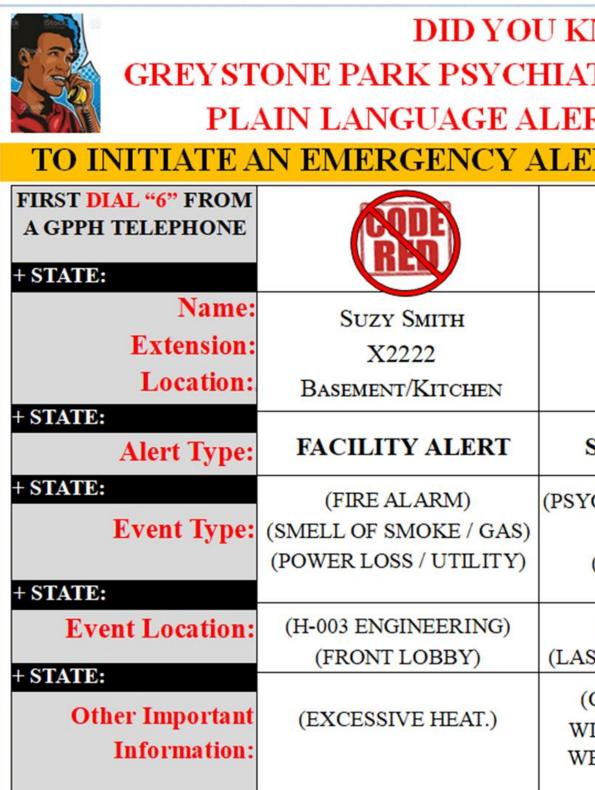
Over 20 Clinical Analytic Process (CAP) meetings : with 3 patient being discharged into the community and identifying 2 patients who needed a higher level of care and transferred to another facility.

Department wide initiative to improve documentation with more comprehensive treatment plan interventions and more detailed progress notes.



## PLAIN LANGUAGE ALERTS

"All Available Help" ended with the start of Plain Language Alerts on September 12, 2023



NOW THAT	N			
TRIC HOSPITAL (GPPH) USES				
RT COMMUNICATIONS?				
ERT FOLLOW THESE DIRECTIONS*				
CITER DE LE	de Blue			
SUZY SMITH	SUZY SMITH			
X2222	X2222			
G1	A1			
SECURITY ALERT	MEDICAL ALERT			
CHIATRIC EMERGENCY)	(STAFF KICKED)			
(ELOPEMENT)	AMBULANCE REQUIRED			
(ACTIVE SHOOTER)	(CARDIAC ARREST )			
	(UNCONSCIOUS PERSON)			
(J110 ART STUDIO)	(I-129 PHARMACY)			
ST SEEN IN COTTAGE 19)	(ALPHA ONE (1))			
(CAUCASIAN FEMALE /ITH BROWN HAIR, 5'3" /EARING BLUE JEANS. )	(PATIENT FELL.)			



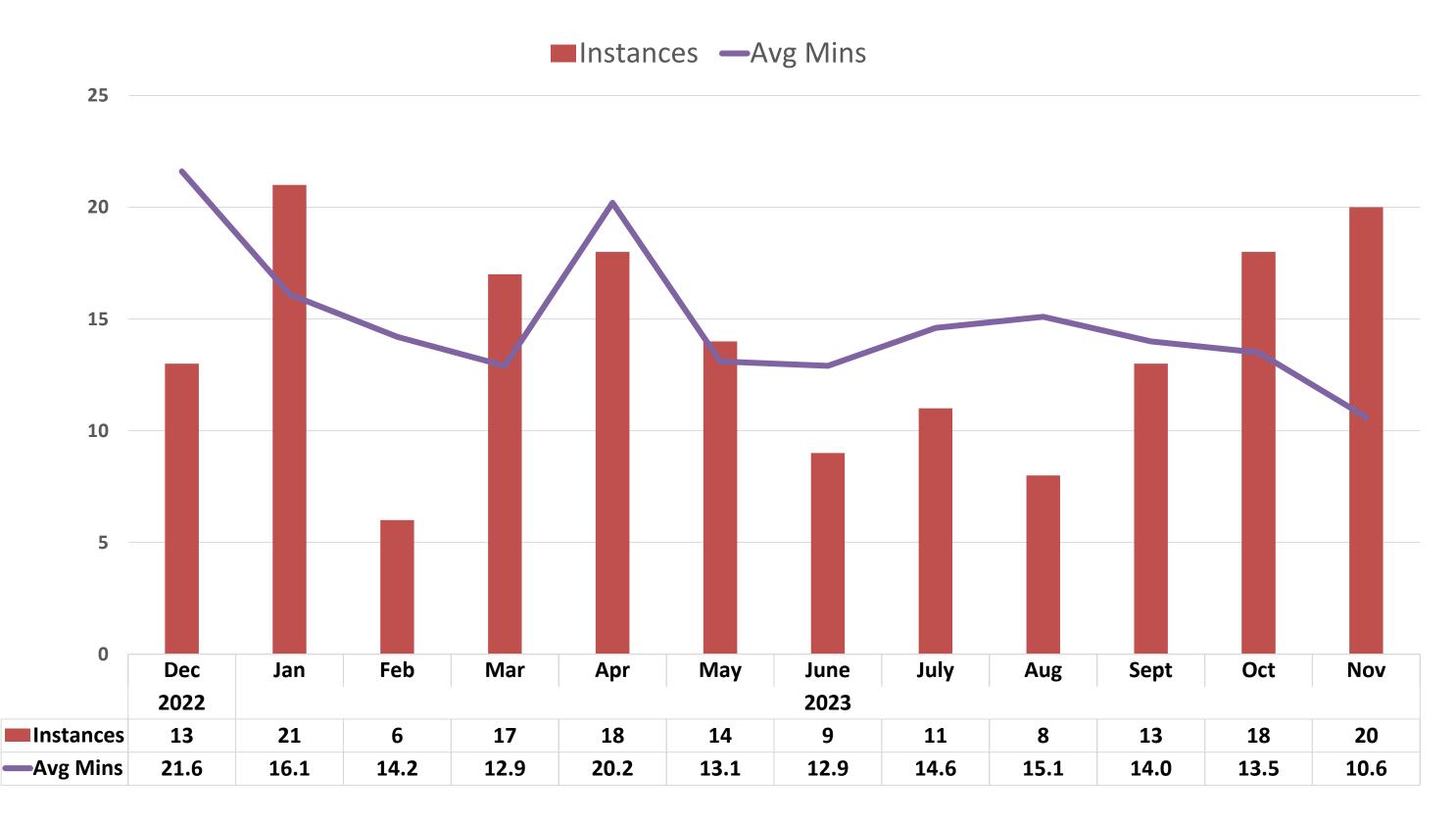
## **PSYCHIATRIC EMERGENCY**

2023 by time of day

Unit	7 - 9 AM	9 - 3 PM	3 - 5 PM	5 - 11 PM	11 - 1 AM	1 - 7 AM	Total
total	72	321	123	236	40	68	860
time %	8%	37%	14%	27%	5%	8%	



#### **GPPH Ambulance** Report 2023



In the last 12 months there were 168 instances of calling the ambulance.

The average response time was 14.9 minutes.

Over the last 3 months, the response time has decreased by 19%



## INFECTION PREVENTION

Last 12 months

Average Infection Rate

Total # of Infections

Number of Patients who received the Influenza Vaccine

Number of Patients who refused the Influenza Vaccine

Number of Staff who received the Influenza Vaccine: (In House)

Number of Staff who received the Influenza Vaccine: (In the Con

Number of Staff who are medically exempt

Number of Staff who has a Religious Accommodation

1.14
152

	83
	283
)	715
ommunity)	64
	1
	0



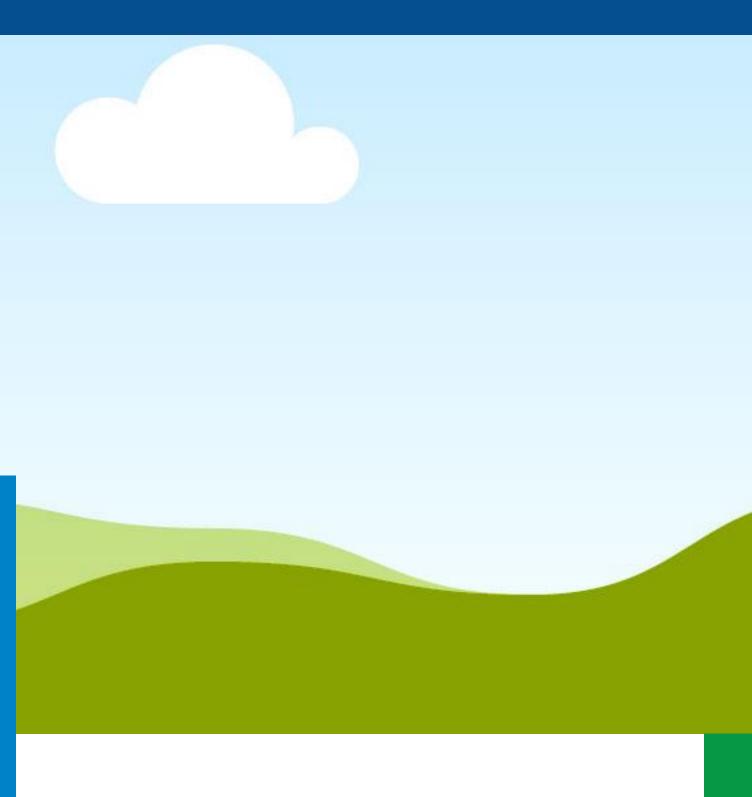
## **CONTINUING MEDICAL EDUCATION (CME)**

- **15 Events Hosted**
- 910 total attendees (283 physicians, 627 non-physicians)
- 23 total credit hours
- Programs delivered remotely via MS Teams which allows other state psychiatric hospitals to participate
- **Educational topics:**
- Clozapine lacksquare
- Olanzapine lacksquare
- End of Life
- Violence Risk Assessment
- Antibiotic Stewardship

- Pharmacology and Agitation
- TBI and Criminal Responsibility
- Plain Language Emergency Alerts



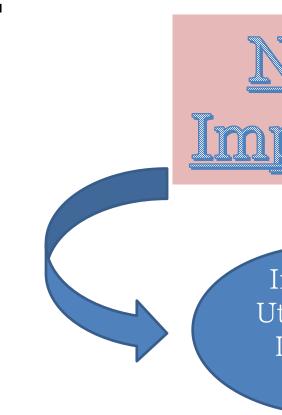
#### DR. DOROTHEA JOSEPHS-SPAULDING, Director of Quality Assurance





## QUALITY ASSURANCE

Joint Commission's Triennial Survey took place from September 18, 2023, to September 22, 2023. All conditional items were successfully addressed and approved by Joint Commission on November 6, 2023. All required Evidence of Standards Compliance was successfully submitted to JC on December 1, 2023.





### <u>New Performance</u> Improvement Projects

Improving Utilization of Language Services

Reduce Urinary Tract Infections







#### HEALTHCARE EQUITY COMMITTEE

#### GOAL 16 (NPSG.04.03.08)

THE HOSPITAL ADDRESSES HEALTHCARE DISPARITIES AS A QUALITY AND SAFETY PRIORITY

#### **Equality** vs. **Equity**

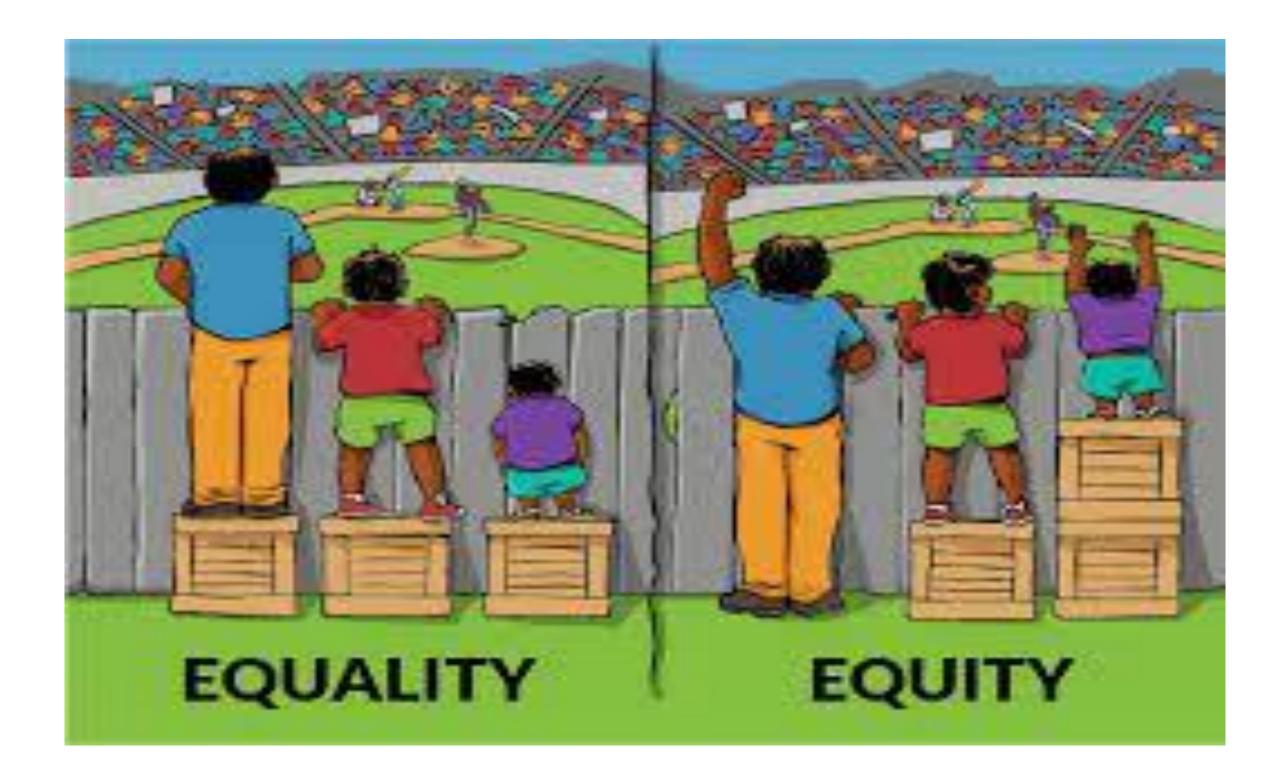
"Equality is leaving the door open for anyone who has the means to approach it; equity is ensuring there is a pathway to that door for those who need it."

**Health** <u>*Equality*</u>- means all patients are treated equally.

**Health** <u>Equity</u>- means all patients have the opportunity to attain their highest level of health



### If you were the person wearing the purple shirt, would you prefer equality or equity?





## **QUALITY ASSURANCE**

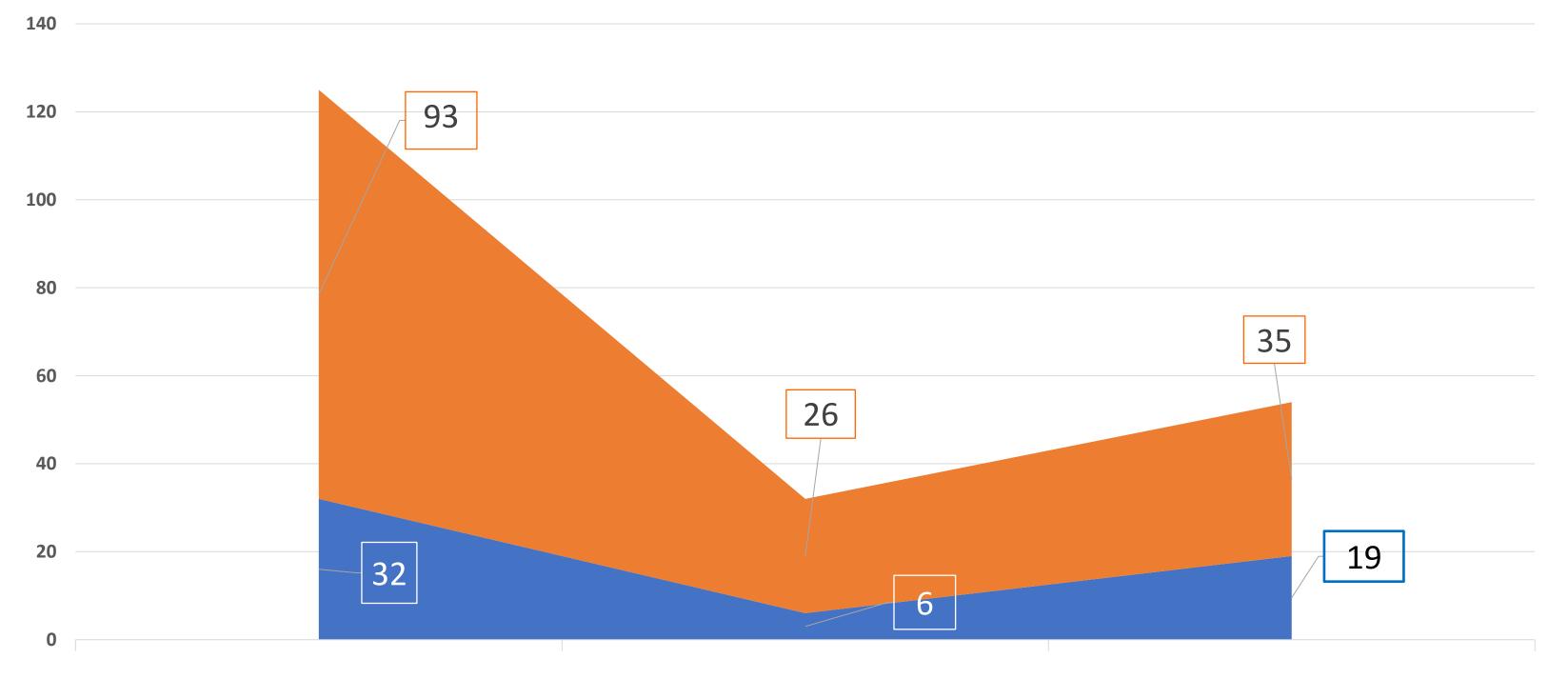
By the numbers in 2023	
Sentinel Events	4
Root Cause Analysis	3
PSCU site visits	5
Mock Tracers	15
Ombudsman Hotline complaints	10
Video requests for legal cases	26
Video reviews completed	198
Cases documents provided to HR	11
Entries loaded into UIRMS database	1,617

- For chart monitoring there were 546 chart reviews not including December.
- There were 19 kitchen audits and 80 medication room audits.
- QA staff also conducted 165 Dental Clinic Chart Audits including 100% of patients that had tooth extractions.



## CONTRABAND

Smoking, Tobacco, Flame Related Total Incidents

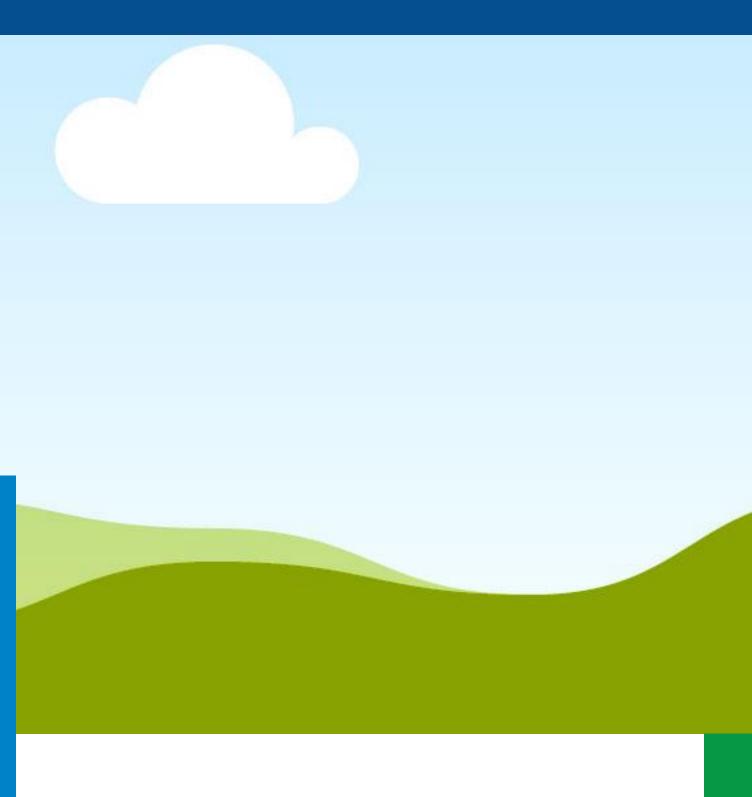






2023

ARLINGTON KING, Settlement Agreement Liaison, Court Coordination





## **COURT COORDINATION**

- Four (4) patients with immigration issues were discharged through assistance from the Immigration Coordinator.
- Nineteen (19) patients in need of a guardian were assigned a guardian through coordination and submission of guardianship applications by the Guardianship Coordinator.
- On March 1<sup>st</sup>, 2023, Greystone held in-person civil commitment hearings for the first time since March of 2020. 586 virtual civil commitment hearings were coordinated by Court Coordination staff. Coordination of these virtual hearings was an arduous task as Court Coordination staff had to move from unit to unit to facilitate patients' virtual appearances. On average, there were 11 virtual hearings per scheduled court date (civil commitment hearings occur twice per week). In addition to the weekly virtual civil commitment hearings, 156 virtual Krol hearings were coordinated by Court Coordination staff.



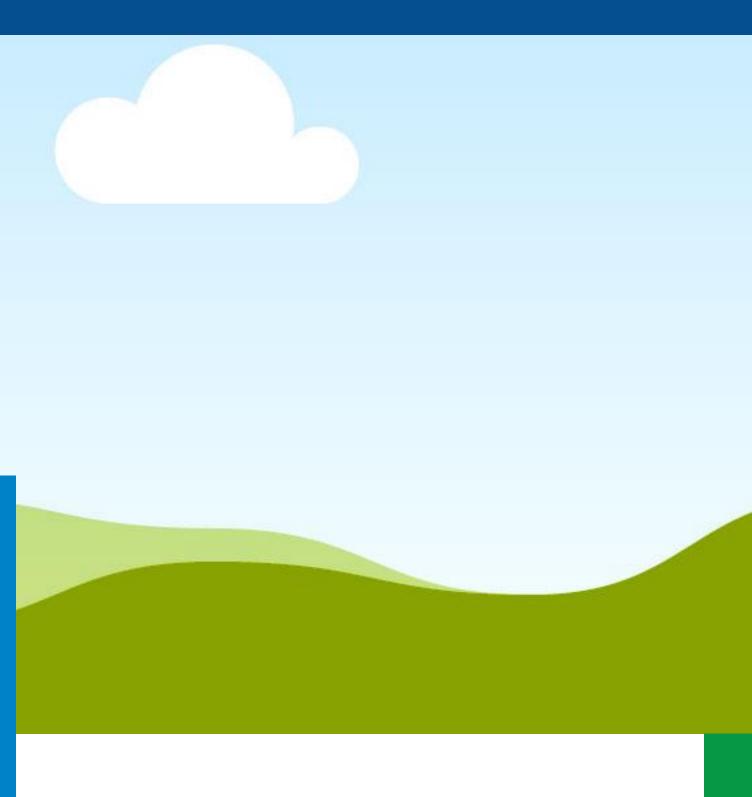


## **COURT COORDINATION**

SPECIAL STATUS PATIENTS	Monthly Average	% of Hospital Census	CIVIL COMMITMENT HEARINGS	Monthly Average	Total
KROL	80.1	22.3%	# Light		020
Civil	20.6	5.7%	# Held	76.7	920
Former IST	19.7	5.5%	CEPP recommend	8.1	97
Former KROL	5.9	1.6%	Made CEPP against recommend	3.3	40
Previous Former IST	3.0	0.8%	IOC convert	0.9	11
Sex Offend	1.3	0.4%		0.5	
Total	130.6	36.4%	Not made CEPP or converted to IOC	64.3	772



JACK FREY, Business Manager





## **BUSINESS OFFICE**

#### MAINTENANCE OF THE PATIENT WELFARE FUND

#### **SUCCESSFUL AUDITS WITH NO FINDINGS**

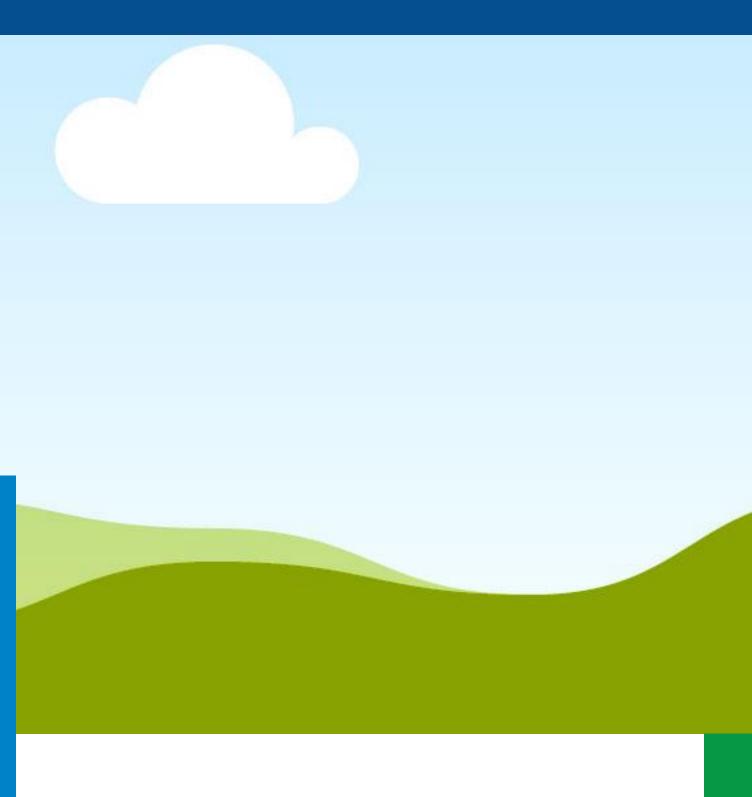
The Department of Health Office of Auditing performed field audits on the following nonappropriated accounts: Rehabilitative Services Fund and Special Services Fund

#### FINAL DEVELOPMENT AND TESTING OF AN ELECTRONIC ORDERING SYSTEM (EOS)

In collaboration with Information technology (IT), developed and tested an electronic ordering system (eos) for the ordering of office supplies which will be deployed in 2024 and eventually expanded to full storehouse



#### QUINZELL McKENZIE, Chief Operating Officer





### HOUSEKEEPING

- Purchased (22) I-mops to get away from regular mops
- Purchased backpack vacuums to get away from brooms
- Implemented and installed a color-coded system for cleaning
- Implemented an industrial Hygiene class for chemical training
- Switched to and purchased 40 high security maid carts so patients cannot easily access our carts
- Began using better applicator to wax our floors

- Moved all Norix furniture for the patient units
- Purchased a new ride on floor scrubber to better clean our floors
- Received special training from spruce industries on proper floor pad use
- Received special training from spruce industries on
  - floor care and machine use
- Received carpet cleaning training from Spruce
  - industries
- Purchased (1) new carpet cleaning extractor



#### ENGINEERING

- 2023 WORK ORDERS COMPLETED = 10,765
- Paving of Cottages and Sealing of Parking Lots











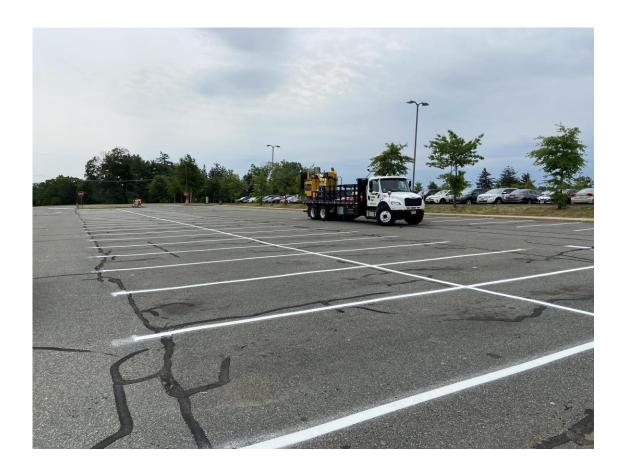








#### ENGINEERING













### ENGINEERING

- Installed Anti Ligature Curtains/Window Treatments
- Rectifier Upgrades of Telecommunications System
- Live Valve Insertions
- Water Spool Replacement
- Installed F2 Medication Room Roll-up Gate
- Valve Replacement for Boilers #1 & 3
- E3 Medication Room Exhaust Fan Replacement
- XL-10 Honeywell (EBI) HVAC
- Cottage 17 Kitchen Countertop Replacement
- J-Wing Tree Trimming



#### **INFORMATION TECHNOLOGY SERVICES (ITS)**

- Implement Fulfillment practices to meet and comply with requirements in an everchanging ESI/Digital  $\bullet$ Data environment.
- Partnership with GPPH Transportation team in transporting Cell phones between Trenton, GPPH ITSM  $\bullet$
- Improved GPPH NEO/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  $\bullet$ accessories items.
- Upgrades/deployment around the Hospital of older Desktop Personal Computing
- Implementation and rollout of the digital Web Forms versions for Assets and Access requests.  $\bullet$
- Designed and implemented automated lookup tool for ITSM User Access and Asset validation for  $\bullet$ Network management, security, and compliance.



### **FOOD SERVICE**

- Rolled out in collaboration with clinical nutrition and updated Dysphagia.  $\bullet$
- The Hiring of 7 new Supervisors of area operations along with 1 Operations Supervisor
- Assuming the food service responsibilities of Park Place Café.
- Provided many holiday 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.
- Serve approximately 425,000 meals annually.



Updates of main Kitchen equipment to include new conveyor dish • machine, tilt skillet, 2 new kettles, 45qt electric food chopper, Double stack convection oven, and 11 new two-tiered Cambro heated food delivery carts.



Replaced undercounter dish machines in all 18 units



### **HUMAN SERVICES POLICE DEPARTMENT (HSPD)**

New Flagpole in progress of

being installed



5 New HSP officers assigned to GPPH





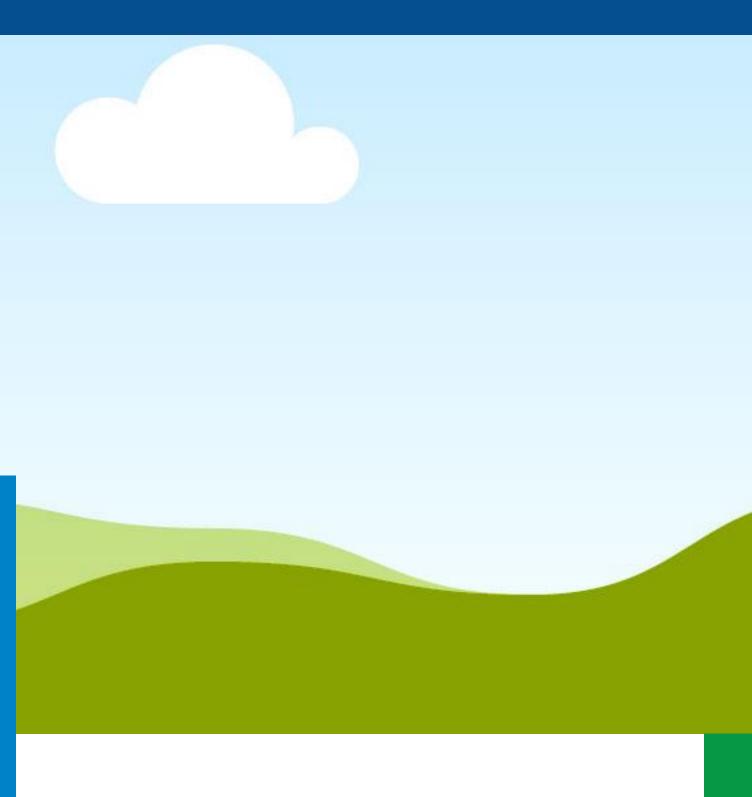
### LOOK AHEAD IN 2024

- Patient information center (PIC) enclosures
- New HVAC in IT/Telecom Server room
- New exterior freezer
- New fire stairs at grounds building
- New roof on grounds electrical vault



#### THOMAS ROSAMILIA,

Interim Chief Executive Officer





# THANK YOU



#### nj.gov/health

