



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

**MINUTES OF A REGULAR MEETING  
 BOARD OF TRUSTEES  
 GREYSTONE PARK PSYCHIATRIC HOSPITAL**

- I. The Board of Trustees Meeting at Greystone Park Psychiatric Hospital (GPPH) was held in person on Thursday, September 18, 2025, 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. Roll Call is as follows:

**Board Member Attendance:**

<u>Present:</u>	<u>Excused</u>
Chairman, James (Jim) DiGiulio, Esq.	
Vice Chairman, Sheriff James M. Gannon	X
Louis Modugno, Esq.	X
Tomika Carter, MSW	
Christine Dahlgren	
Mayor Jason Karr	
Lisa Vara, MA	X

**Hospital Administrators Attendance:**

<u>Present:</u>	<u>Excused</u>
Joshua Belsky, Chief Executive Officer	
Eric Madurki, Deputy Chief Executive Officer	X
Quinzell McKenzie, Chief Operating Officer	
Julie VanHouten, Chief Nursing Officer	
Christopher Dorian, Chief Clinical Officer	
Dr. Harlan Mellk, MD, Acting Medical Director	
Jack Frey, Business Manager	
Dorothea Josephs-Spaulding, Director of Quality Assurance	
Arlington King, Associate Hospital Administrator 2	
Timothy Dimitrios, Administrative Analyst 4	
Maria Jazenback, Secretary to the Board	X
Stephanie Gabelmann, GPA Liaison	

**CALL TO ORDER** at 3:15pm by Chairman, James (Jim) DiGiulio, Esq. This is an in-person meeting today.

## II. APPROVAL OF MINUTES:

The July 17, 2025, GPPH Board Meeting Minutes were presented for approval. Christine Dahlgren gave the 1<sup>st</sup> motion to approve the minutes. Mayor Jason Karr gave the 2<sup>nd</sup> motion to approve the minutes. All in favor. The July 17, 2025, GPPH Board Meeting Minutes were adopted.

## III. CEO's PRESENTATION

*Mr. Joshua Belsky, Chief Executive Officer (CEO) at Greystone Park Psychiatric Hospital (GPPH) presented the CEO Report during this meeting.*

**July 2025:** The census was 384 at the end of the month and averaged 386. There was a total of eleven (11) admissions and ten (10) discharges for the month of July. There were fifty-three (53) patients on CEPP status in July which is about 13.6% of the patient population. There were seventy-two (72) KROL patients in July. The violence data was reviewed during this meeting. There were fifty-five (55) patient-to-patient incidents in July. The total is 4.0 per 1000 patient days which is higher than the 2024 average of 3.9. There were no (0) incidents with moderate injury, and fifteen (15) incidents with mild injuries. There were fifteen (15) patient-to-staff incidents in July. The assault rate is 1.25 per 1000 patient days, about the same average as was in 2024. Regarding patient to staff assaults, there were zero (0) incidents with moderate injuries, six (6) incidents with mild injuries, and zero (0) incidents with severe injury. There were eighteen (18) seclusions in July which is lower than data from the prior month. Restraints decreased from the prior month. The number of holds decreased from the prior month. There were zero (0) contraband issues. This is a decrease from the prior month of five (5).

**August 2025:** *The census reporting will now include beds that are being held for patients that are expected to return.* The census was 392 at the end of the month and averaged 390.5. There was a total of eight (8) admissions and five (5) discharges for the month of August. There were fifty-one (51) patients on CEPP status in August which is about 13.0% of the patient population. There were seventy-one (71) KROL patients in August. The violence data was reviewed during this meeting. There were forty-three (43) patient-to-patient incidents in August. The total is 3.59 per 1000 patient days which is lower than the 2024 average of 3.9. There was (0) incidents with moderate injury, and seventeen (17) incidents with mild injuries. There were twenty-two (22) patient-to-staff incidents in August. The total is 1.84 per 1000 patient days and 1.4 which is higher than the average in 2024. There were zero (0) incidents with moderate injury, and three (3) incidents with mild injuries. There were seven (7) seclusions in August which is lower than the prior month. Restraints increased from the prior month. The number of holds also increased from the prior month. There were two (2) contraband issues, of which, one (1) was related to substances, tobacco or weapons. There was an increase from the prior month of zero (0).

**Departmental Reports July 2025:** **Human Resources:** There were fifteen (15) new hires in July, fifteen (15) employees departed. HR focusing on hiring nursing, food service and housekeeping staff. **Nursing:** Selected a third Director of Nursing (DON). Continuing Q15 check with 99.9% compliance. Began roll out of phase two of POESv2 (Point of Entry Ordering System). **Quality Assurance (QA):** Preparing for Joint Commission visit expected in the Fall of 2026. **Rehabilitation Services:** Documented 93% of groups. 68% of groups were attended by patients. 39,802 patients serviced year-to-date. **Psychiatry/Medicine:** Dr. Peter Mehta started as the Interim Chief of Psychiatry. **Psychology:** 89% of risk assessment completed on time, despite shortage of staff. They are actively recruiting for staff. Four (4) undergraduates are entering data. **MSO Staff:** Moved into their new office space, which is more centrally located and can accommodate its growing number of staff. **Co-Occurring:** Has achieved Performance Improvement (P.I.) goal of over 90% assessments completed within five (5) days.

**Departmental Reports August 2025:** **Human Resources:** There were fourteen (14) new hires in August, thirteen (13) employees departed. **Nursing:** POESv2 phase 2 has been implemented. There have been issues with IT Department and census reporting. The new DON started. St. Elizabeths University nursing interns began

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their rotation at GPPH. The new residency program had their first graduate. This is an internal program that CNO brought to GPPH to assist nurses that are either new graduates or nurses that may not have had a background working with behavioral health patients. **Rehabilitation Services:** Group attendance continues to be high. **Social Services:** The director is scheduled to present at NJAMHAA meeting on Safewards. The Safewards Committee is expanding the program hospital wide. **Psychiatry/Medicine:** A perspective Medical Director candidate will be interviewed, and we are in the process of recruiting for a permanent Chief of Psychiatry. **Chaplaincy:** Will present in September at the Suicide Prevention Conference. **Co-Occurring:** They are leading SMART Recovery Training which will be utilized at all the state psychiatric facilities.

**Major Happenings/Events/Projects: "Summer 2025 Highlights"** The gym renovations are in progress and are almost complete. Special thanks to the GPPH Board of Trustees for their generous donation for the gym renovations. The pool remains open and operational and will be closed at the end of the month. Community trips and brief visits (BV's) for patients continue. Commissioner Brown visited the hospital on July 24<sup>th</sup>. The 150<sup>th</sup> Anniversary Committee continues planning for upcoming activities throughout the year. Some events may include a circus, retro themes for Oktoberfest, a GPPH film festival, projections from the old chapel and meditation room, a field day event, art/music projects, high school career day, numerous speakers and a CEO roundtable, just to name a few. Mr. Thomas Shaffer, former Training Director, has been selected as the new Director of Emergency Management. The new Medical Staff Bylaws were shared. All doctors at GPPH have signed off on the Bylaws and new committees are being formed. All Patient Information Center's (PIC's) ceiling tiles have now been secured as per the settlement agreement. All unit payphones have been replaced. The Cottages will soon receive new phones. The 2024 I.D. Badge Project has been completed, and the 2025 I.D. badges were also updated. Crisis Support Team discussions began. MHA peer support meeting was held. Discussions were held regarding peer support returning to the hospital to engage discharge hesitant patients. There were two (2) water main breaks on grounds. The 150 Anniversary Kick-off celebration was held on August 15<sup>th</sup>. As a result of the contributions from Greystone Park Association (GPA) and the Board of Trustees (BOT) the 150th Anniversary Kick-off celebration was a tremendous success. Both patients and staff had a wonderful time. The quarterly Health and Safety meeting was held on August 25<sup>th</sup>.

**Concerning Issues:** Census, community and discharges

**IV. PATIENT WELFARE FUND:**

The July 31, 2025, and August 31, 2025, Patient Welfare Financial Report was provided to all Board of Trustee Members for review.

**VI. OFFICE OF COMMUNITY SERVICES:**

**Behavioral Health Program Service Standards Proposal:** Proposed New Rules: N.J.A.C. 10-36 (Attached). By way of update, a Notice of Proposal (NOP) for proposed new N.J.A.C. 10-36, Behavioral Health Program Service Standards, and proposed repeals of N.J.A.C. 10-37E, Outpatient Service Standards, and 10-37F, Partial Care Services Standards, has been published in the August 18th edition of the New Jersey Register (57 N.J.R. 1779). See attached. Additionally, the Notice may be found on the NJ DHS website at <https://www.nj.gov/humanservices/providers/rulefees/ruleprop/>. The public may submit written comments regarding this rule proposal to DMHAS by no later than October 17, 2025. Instructions for how the public may submit written comments are described in the Notice of Proposal.

**Recent Funding Awards (Northern Region): Medical Legal Partnership (MLP) for Individuals with a Substance Use Disorder (SUD) at Licensed SUD Treatment Agencies**

Awards are for legal and navigation services for individuals with a substance use disorder (SUD). Services will help address legal and social issues that present as barriers to accessing needed services (medical, behavioral

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health, housing, insurance, entitlements, etc.) for individuals with a SUD and to reduce the burden of outstanding legal issues that negatively impact an individual's recovery process and ability to successfully live in the community of their choosing. The goal is to avoid incarceration whenever safely possible and to address any social inequities from a legal perspective. A medical-legal partnership (MLP) is a collaboration between health care providers and legal personnel (attorneys and legal navigators) to address social needs that impact health. Attorneys will not serve as primary counsel in Superior Court matters but may liaison with the public defender or the individual's private counsel to assist in the individual's case.

**Agency Amount Funded County of Award Care Plus NJ, Inc. \$392,857 Bergen  
The Center for Prevention and Counseling, Inc. \$247,344 Sussex  
Center for Family Services, Inc. \$392,857 Warren**

**More Information is available at:**

[https://www.nj.gov/humanservices/dmhas/provider/funding/RFP\\_Awards/Web-Award-Notification-MLP-RFP.pdf](https://www.nj.gov/humanservices/dmhas/provider/funding/RFP_Awards/Web-Award-Notification-MLP-RFP.pdf)

**Behavioral Health Integration Updates (Division of Medical Assistance and Health Services)**

The next Advisory Hub meeting is Friday, September 26, 2025 10:00 AM-11:30 AM

<https://chcs.zoom.us/meeting/register/9E3AvUCRR9GIKqqHMxNzuQ>

## **VII. GREYSTONE PARK ASSOCIATION**

**In order to support GPA more efficiently, the hospital has implemented two new changes:**

**Facility Support:** GPA/Cottage 12 is now bundled in with the rest of the GPPH cottages with regard to facilities issues. PCs from Cottage 15 assist in reporting issues and ensuring services such as HVAC maintenance, snow removal, and other upkeep issues are addressed.

**Appreciation:** The hospital now meets with GPA quarterly for lunch to discuss what assistance GPA may need. At these meetings the hospital shares how GPA funding has been spent as well as information about upcoming hospital events that GPA might like to support. The last appreciation lunch happened in July, and another is scheduled for October. Jack Frey and Suzanne Nong from the business office have been very helpful in making the appreciation lunches a success.

GPA was invited to and enjoyed the 150th kickoff event and picnic in August. They provided \$5,000 to the hospital for the cost of the band and part of the barbeque expense.

GPA has also agreed to provide \$29,500 for 150th Anniversary events and celebrations. It will be disbursed in quarterly increments of \$7,000 each plus an additional \$1,500 for a picnic/event in August 2026. They hope to see many fun events for the patients during this year.

In addition to the funding mentioned above, GPA's new budget will continue to provide quarterly allotments for patient activities and programs as well as an additional \$8,000 towards 2025 holiday events.

GPA is always seeking new volunteers to work in the store on Tuesdays and Thursdays. Anyone interested can call GPA at x5857 or Stephanie Gabelmann at x5262.

## **NEW BUSINESS:**

There was no new business to address.

## VIII. OLD BUSINESS:

### Questions and answers from July meeting:

**How many sent to and from AKFC?** In 2024 we sent 1 patient and received 21. In 2025, thus far, we have sent one (1) patient to AKFC and received eight (8) from AKFC.

**Why isn't this reported regularly.** This information may not be statistically relevant to report regularly.

**Why has the census increased?** Many factors have created increases in the census, (1) Challenges with discharges, (2) Sister hospitals are taking on IST's (incompetent to stand trial) cases. We continue receiving an increased number of patients from sister hospitals. Greystone is prohibited by law from receiving/housing IST patients. Ancora and Trenton Psychiatric Hospitals both continue to receive IST patients.

**Discharge issues - Group Home (GH) vacancies are limited.** Discharge hesitant patients do not want to leave GPPH. Federal agency staffing cuts pose an issue in receiving documentation in a timely manner. (Medicaid, Social Security DDD) Medicaid issues and cuts also effect discharges.

### Research Regarding Increase in Violence for May and June 2025:

May was the highest in 15 months and the 3<sup>rd</sup> highest since January 2023.

The Two months in question were high, but year-to-date, violence was similar to last year.

Of the 167 assaults in the 2 months, 48% were among 10 patients.

25% were by 3 patients. Of the top 3 patients, 1 was adjusting to medications, 2 patients, due to diagnosis, had daily impulse control issues with peers. These diagnoses should be treated in other settings that are difficult to discharge to.

## IX. COMMENTS FROM THE PUBLIC:

## X. ADJOURNMENT:

The meeting was adjourned at 3:38pm. Executive session was held.

## XI. NEXT MEETING:

The next meeting of the Greystone Park Psychiatric Hospital Board of Trustees will be held via Teams on October 16, 2025, at 3:15pm.

Respectfully Submitted,



Michelle Lucas, Management Assistant  
GPPH's Board of Trustees

Witnessed By



James DiGiulio, Esq., Chairman  
GPPH's Board of Trustees