

Soldiers' Home in Holyoke Board of Trustees Meeting

A special meeting of the Board of Trustees of the Soldiers' Home Holyoke (HLY) was held telephonically on Tuesday, March 30, 2021. The meeting began at 5:09 PM.

Members Present:

Gary Keefe, Chairman; Mark Bigda; Sean Collins; Kevin Jourdain, Cindy Lacoste, Isaac Mass and Carmen Ostrander

Also Present:

Cheryl Poppe, Secretary, Department of Veterans Services (DVS); Mark Yankopoulos, Legal Counsel; Matt Deacon, Legal Counsel, DVS; Catherine Starr, Secretariat Human Resources Director; Jessica Sherer, Secretary Director of Talent Acquisition; Faythe Abber-Van Dam, Director of Recruitment Executive Office of Health and Human Services; Jamie Gaitan, Tech Support; and Kathleen Denner, Recording Secretary. Support and Interview panelists from the community: Eric Segundo, Pam Quirk and Mary Moscato.

Roll Call is as follows: Mark Bigda (Yes); Sean Collins (Yes); Kevin Jourdain (Yes); Cindy Lacoste (Yes); Isaac Mass (Yes); Carmen Ostrander (Yes); Gary Keefe (Yes).

Pledge of Allegiance - All present recited the Pledge of Allegiance.

Public Comment: No public comment this month. No Public Comment at this Special Meeting. This Special Meeting will be open to the public. The purpose of this Special Meeting of the Board of Trustees is to conduct final interviews for the position of Superintendent. After the Pledge of Allegiance, the Board will conduct interviews during open session.

Chairman Keefe explained the interview process and each candidate will have 4 minutes to answer the question. He made everyone aware that we are being recorded. We will pause for a moment of silence at 6:45 pm to recognize the Veterans, that a year ago, lost their lives due to COVID.

Interviews of the two finalists for Superintendent

Rick Holloway and Robert Engell.

Question 1 read by Chairman Keefe

What do you consider to be your top 3 strength(s) coming into this position and how will they benefit the Home?

Robert Engell's response to Question 1

I am curious, passionate and committed to the work that needs to be done. How that will help the Holyoke Soldiers' Home is that the work that needs to be done there. The healing process, the trust building that needs to occur with our team members they truly need someone curious to learn and understand and spend time with our team members. I am passionate in that I have a commitment to make things happen and to see the work that needs to be done accomplished. Holyoke Soldiers' Home speaks to him at a visceral level as a veteran and as someone who has served. I have a sense of commitment to the organization and to the Veterans we are privileged to serve. I am accountable for the work that gets done. So that we can set up the steps for the work that needs to

be accomplished and work together as an effective team. Raise questions, ask questions maintain the commitments that we set and through that and using tools of data analysis and metrics, make sure that we achieve those goals that we set mutually.

Rick Holloway's response to Question 1

I would say my top three strengths includes first attention to detail facility operations and making sure we are in compliance with state and federal regulations. Number two being able to bring a team together in order to reach a common goal, in this case, quality of care, quality of life for our Veterans. As well as providing a good work environment for staff. And number 3 is managing financial performance, so the facility can continue to provide care for veterans not only for the current period, but also for years to come.

Question 2 read by Trustee Ostrander

What steps would you take to rebuild and shape the Holyoke Soldiers' Home reputation and image?

Robert Engell's response to Question 2

to build the external image and reputation of the Home we need to focus on the internal work that needs to be done. Start healing our team members by building trust and stabilize leadership. If you take a look back over the past 2-3 years pretty much every senior position has changed at least once, with the exception of one VCC unit managers. We need to stabilize our leadership. Build a shared vision and then communicate effectively to all of our audiences both internal and external. The role of the Superintendent would be as an ambassador for the organization meeting with coalition, the board, and families. Now that we are starting to open up, we're able to have both virtual and some in person meetings. The other thing we would need to do as we are rebuilding the Home is work on culture change and create a true transformation of the organization to what it can become. Our staffing patterns are strong. Working on culture change, to work on our communication amongst ourselves we can then as individual ambassadors in the community. With 300 staff members and those that we are privileged to care for our Veterans and their families they can share the message of all the good work that is being done. Also making ourselves available for communication and being open to honest effective communication.

Rick Holloway's response to Question 2

The first is to assess the skill set and the qualifications of the staff we have in place make. I need to know who I am working with and making sure that they have the skillset as well as the dedication to move the facility forward. Second of all evaluating the current systems that caused the facility to go off the tracks and rebuild those systems. Using several years of experience and consulting work for hospitals, nursing home facilities, including Veterans homes to get back into full compliance. To meet regulatory req. gain the confidence of the groups and families in facility. The third thing is to gain the confidence of our Veteran support groups, families and residents. Show them we have a common vision and mission to make sure that the services we are providing are top quality.

Question 3 read by Secretary Poppe

What did you find most valuable in supporting your success as an Administrator/Leader?

Rick Holloway's response to Question 3

The think I found most valuable without a doubt building up the people around me. The best thing to do is to hire good people, make sure they have the skills and resources and then get out of their way. Let them do their job. Provide them with direction and allow them to be able to accomplish things that they, number 1 couldn't have accomplished on their own and number 2 exceed the goals that they set for themselves and build themselves up. Then I feel I have succeeded.

Robert Engell's response to Question 3

The things to be most valuable to be a successful leader is the support and trust of board and team. Knowing that I have had the opportunity to work with the board and my team to create a shared vision and then we have open communication to achieve. Knowing we are aligned with the mission and supported by the board and senior leadership. Knowing that we are heading in the right direction and that we are effectively managing the issues at hand.

Question 4 read by Trustee Jourdain

What do you envision your role as Superintendent will be in the design, re-imagining and construction of the new Holyoke Soldiers' Home Facility?

Robert Engell's response to Question 4

We are om the design phase now and are trying to match the needs of the Veteran, community, interest groups, board of trustees, Department of Veteran Services, EOHHS, and the State as we move forward to create a world class facility. This will probably bet the first construction project that comes forward in long term care that recognized the needs for infection control prevention programming. As well as quality of life. As we move forward, we need to have a lot of forums and involve the public. Allow the public to allow to come in and learn and what the project is all about. It will be meeting needs of veterans and welcome the community into the Home and feel comfortable. To be able to have multi generation programs, local college can use for trainings. Communicate what the home is going to become, what the vision and how the design will reflect the quality of care. The quality of care and the quality of life is what is all about. Privileged to be part of the design team and learning the needs of the community of veterans. This is an exciting time. It is my job to make sure our interest groups are aware, advised, informed and included in the process.

Rick Holloway's response to Question 4

First thing for me would be absolute integrity, transparency and dedication to the mission to the facility. An absolute unwavering dedication to staff and everyone, within and without the facility, understands my commitment and the team to take care of the veterans. Comply with the Regulatory requirements of the VA and CMS to make sure we are providing top quality care to the veteran. Number on is to be the Leader that people will follow and be willing to follow because they know it is best future for the facility.

Question 5 read by Trustee Collins

Many challenges exist when patients enter a long-term care facility. In your experience, how would you describe a best practice for addressing medical Orders for Life-Sustaining Treatment (MOLST) for our clients?

Rick Holloway's response to Question 5

The best practice for medical orders for life-saving treatment has to be weighed against the advanced directives of the resident. There are Some res have gone through a lot and they are ready to finish out their life and we have to abide by their advanced directives for the residents who are on a full code status. There have been times in my past where I have had to discuss with a family and the resident whether or not to continue or consider an advanced directive especially if they start declining. It is extraordinarily painful to see a person achieve great things in their younger years to have disease and disability creep up on them to where they cannot make decisions anymore. In that case we need to have the physician, social services and family involved to make the right decision so that lifesaving treatment is provided. Sometimes you also have to be the counselor for the family.

Robert Engell's response to Question 5

The MOLST form are discussions about end of life care should be starting with long before a person comes into a nursing home. I personally brought home the five wishes book home and shared it with my family. As people transition across the settings where care occurs, the level of care that they are receiving we would want to readdress the MOLST what we would do engage in a conversation with doctor, social service, nurses and clergy to address any concerns that may come up. I became very involved with learning and understanding better both advanced directives, the five wishes as well as the MOLST when we started the hospice agency. We spent time discussing best practices for helping people talk through what their interests were for life sustaining treatment. How they made decisions about CPR, ventilation, do not hospitalize so that their interests were known. The Health Care Proxy would be invoked if needed. Family support structure involved. We all need to be involved and engaged and make sure it is a complete conversation; knowing full well that will change and that people's minds can change. People need to understand their health status and goals for care. As a person changes in their status it should be included in quarterly care plan meeting and any substantial changes discussed. These are some of the best practices I have been involved with. It involves a lot of education, support and communication. A lot of validation is necessary so that what we heard is really what the individual meant.

Question 6 read by Trustee Bigda

How do you stay current on best practices and trends related to veteran's issues and Long-Term Care?

Robert Engell's response to Question 6

Staying current is a lot of hard work with standards and requirements you have to meet with in terms of continuing education that you participate in. I have always been active in professional organizations. When I was in hospitals it was the ACHE (American College of Healthcare Executives) and know that I am in long term care it is the AHCA (American College Health

Association). I am also involved in our local chapter the New England Association has conferences a couple times a year. Before coming to the Soldiers' Home while I was still in the public sector, we were members with the Mass Senior Care Federation and also Leading Age, both of them are excellent resources. The Department of Public Health has great updates and the VA has tremendous resources they are big data personified. They do a lot of research and analysis. I have been in industry for a while and I have a lot of colleagues who keep me informed. I read several articles a day to keep current. By being part of the community of long-term care executives we learn from each other. The Joint Commission is another great source. VA Homes group has monthly meetings and is another source. You really have to be open, curious and attentive; and do the hard work to stay current.

Rick Holloway's response to Question 6

McKnight's Long-Term Care News is a great resource on information on trends and updated protocols, new equipment and new procedures. I get approximately 10 McKnight's emails a day. In my current position I get information from The Compliance Store is a terrific resource. We have access to American Healthcare Association because they are members of the Idaho Healthcare Association as a licensed skilled facility. They have up to date information on new regulations and treatment protocols. Has access to the VA regulations for both the skilled nursing facility as well as to the DOM regulations. I do a lot of reading and networking with colleagues not only within Idaho but at the National Association of State Veterans Homes.

Trustee Collins asked about McKnight's. Rick Holloway answered that it is a national publication I on nursing and long-term care facilities. It is the best resource for up to date information. They have an electronic and hard copy of the publication. It offers changes in regulations, updates to reimbursement protocols and continuing educations opportunities as well as new equipment that can be useful in a skilled nursing environment.

Question 7 read by Community Member Pam Quirk

Describe an emergency situation in which you had to act quickly. Would you do anything different, if you had to do it again?

Rick Holloway's response to Question 7

In our facility the most recent emergency situation where we had to act quickly was when we had COVID identified in our facility. Tested all staff and 3 residents tested positive. We immediately mobilized and we got rooms ready. We brought the positive cases to isolate. Started working on how to isolate the residents so that we could prevent the spread of COVID through our facility. We had already done a 100% negative pressure system within the facility. We put ionizers in all of the air ducts so as the air was being pulled out of the rooms it was automatically being ionized before it was redistributed throughout the facility. We have UV light scrubbers as well as several sanitation stations. Were able to contain the two residents. Was questioned from the VA why they were testing a resident who tested positive last week. No one had told them the resident had tested positive. The resident had full access and wound up spreading COVID throughout one of the wings. At that point we had to pivot and change from one unit to another unit with more beds. Had to cohort the first 12 residents and then continue to grow as it went through the facility. What I would do differently is number one, we did not have adequate follow thru from VA, we should have

followed thru and verified test results on Thursday from VA. Second of all I would do testing on all residents twice a week. The final thing I would do we got caught where we did not have enough PPE for an outbreak and had to scramble to get adequate PPE to prevent transmission.

Robert Engell's response to Question 7

There are a number of different emergency situations I have dealt with in my career. What we try to do as a member, retired now, member of the military is you learn how to plan for emergencies and how to respond to emergencies. On the civilian side we have used the ICS training from FEMA to make sure that our leadership team is aware of what the standards are for command and control of an incident. It is teaching everybody their role and how to act and prepare for disaster situations. We would train and exercise around things, sometimes things happen that you do not expect. I described during an earlier interview a laundry fire event, but I didn't describe that the next step in learning was to make sure we clean those lint filters all the time. It is important to do the training so that your team is ready to respond. For example, at a prior organization we had an emergency where we lost heat during winter. I was on scene at 2 am figuring out what was going on. We brought in supplemental heat into the area that had lost heat and had to move very few people. We did not end up having a major evacuation event. MassMAP would have been able to help move people if we did need to evacuate. MassMAP has good training too. What we do is we train for each event and then we have a after action report review process. We talk through how to prevent an event and develop relationships with the folks we received the supplemental heat from to ensure quicker access. In New England we have snowstorms and blizzards where I have stayed overnight to help manage staff and care. Disaster response is a team effort with great communication.

Question 8 read by Trustee Jourdain

Have you had an opportunity to review the Pearlstein report regarding the events that occurred at the Soldiers' Home in Holyoke? If yes, please share with us your thoughts on Attorney Pearlstein's recommendations for the Home, as well as how you feel you can help implement those recommendations?

Robert Engell's response to Question 8

I have spent a lot of time reading the Pearlstein Report trying to understand it fully. In regards to recommendations I believe the first was talking about governance and wanting to make sure we had a sufficient number of healthcare trained professionals and in the governance, I think with Dr. Bigda and General Collins we've achieved that I think we also have another individual who's part of the healthcare, someone I believe who is pharmacy. We started to build the board with healthcare knowledge. Next is staff stabilization that talked about hiring a Superintendent with long term care and healthcare experience. I have over 30 years' experience with a master's in healthcare administration. Experience in hospitals, acute care, academic medical centers, nursing home, hospice, sub-acute and adult day. EOHHHS has been very successful in bringing key leadership positions into the Home. Many of the positions are new and would need a lot of team building and as Superintendent I would be spending time with those new team members working through with a shared vision of what we need to do. I would work with the team to create a shared vision in caring for our Veterans. The EMR work is moving forward. I was put as a member of implementation team and most recently the negotiation team and the senior advisory team. More importantly we need to make change in our practice. EMR will not make us a better organization but will help us identify

where we are inconsistent with Chelsea. It also discussed hiring and Occupational health nurse and we have done that. I have been the lead person working with the occupational health nurse as they define their role and as we're working to stabilize their role and create a space in the health of our organization they are the lead person with our COVID response. Once we are through COVID we were hopeful that this individual will also be working much more actively in the wellness aspect of our workforce and working closely with human resources in that role. Infection prevention a lot of work being done. We have hired a permanent infection prevention. Occupational health nurse has also been certified in infection prevention because this is truly a partnership role. We hired a director of education and training. Nurse educators and helping shape and direct the training. Elephant in the room is the good work that needs to be continued with labor and labor relations. We are not working as well together as needed. As the Superintendent I would be setting tone with leadership and labor union spend focus on open issues so can move forward together in partnership. Make sure the care we provide here is resident directed care. All the action items in Pearlstein Report in the first 6-9 months need to be acted on. That will require working with the Board and entire team to make the changes that need to occur.

Rick Holloway's response to Question 8

Yes, I have reviewed the report. I saw there were some missteps. I did know the previous Superintendent I had met him some NASVA (National Association of State Directors of Veterans) conventions and I knew he did not have a healthcare management background. I do think it is very important to have the background in this setting and the reason I say that is I have done over the course of my career when I was doing consulting work as well as when I owned and operated a nursing facilities myself. The lack of healthcare management background in a senior leadership position, and a healthcare facility is a pretty indicative of either current or future problems and so that administrator or the superintendent, this position is absolutely critical to set the tone and the culture of the organization as well as being able to know the regulations and non-regulatory issues which is the personal touch that we get to give to our Veterans as well as to our staff. Those were the primary things that I saw in the report also to care for staff and veterans. Being able to manage thru some of regulatory requirements and the clinical expectation of controlling the outbreak.

Question 9 read by Community Member Eric Segundo

Please guide us through your recommendations, preparation and process for ceremonial presentation of veterans?

Rick Holloway's response to Question 9

Ceremonial presentations we have those within our facility. In the past what we see with our veterans home, and I expect to see the Holyoke facility, is that the ceremonies that we can provide is really a way to honor the legacy, dedication and service of our veterans and be able to highlight the contributions in a public settings. We spend a lot of time preparing for those public ceremonies and making sure the Veterans are involved. It also gives an opportunity for our active Military as well, as those reservists that are station at Gowen Field here in Boise to participate and to be able to maintain the contact with our veterans and it is beneficial on both sides. Finally, it also Involves our veteran service organizations who have been extremely willing to support and continue to stay involved with their brothers and sisters who have worked so hard to preserve our country.

Robert Engell's response to Question 9

I can share with you what I've done before I came to the facility and I would hope to be able to participate in the same way. Maggie, our Activities Director, is doing an amazing job with our Veterans. I would actively participate with our team and encourage our team's participation. It is one of the reasons why I wanted to come to the Veteran's Home so much, because it feels like home. It is a population of people that I have an affinity for and every time that we have an event in honor, we would to make sure that we recognize and reflect that. It is Women's Veterans Month and we need to have activities in the Home as it relates to that. I want to be actively involved in all of the events. It is important as a leader and almost the most important thing, as a leader, how you signal to your team what is important and honoring and respecting our veterans. I would work behind the scenes before the event and find out how I can help and what I can do to enhance and improve. I have been honored to be part of our Veterans last trip through the building as we honor and celebrate their lives. It is truly remarkable how we do it and honor the Veteran at the home with the service, the flag, the memorabilia, the family and a reflection of the Veterans life. Ultimately, leading to taps as they are going through the building that to me is one of the more significant farewells and honor we provide to our Veterans.

Question 10 read by Trustee Mass

Please discuss your experiences working with victims of traumatic brain injury and populations with behavior health issues?

Robert Engell's response to Question 10

I have not personally managed a building that specialized in TBI. I have had behavioral health and special care units in my buildings with special care units. As we know moving forward TBI's and behaviors, PTSD and other veterans' services will become more and more important. The best we can do is by having cultural awareness, understanding and sensitivity for our staff but we are led by our professionals. The home has 3, L.I.C.S.W. level, social work professionals who have joined the team they will be leading in the new home. I have had many conversations with our Director of Social Work to how best care for veteran population and have determined best cared for by organic staff in house. Meeting their needs through assessment and care planning and service delivery that is resident centric to meet their needs. We are currently implementing a trauma informed care policy speaks to the needs of this population as well. Director of social work will have training of all staff in terms of clinical assessment skills. Training all of our staff including non-clinical to understand triggers and how to respond and react. Everyone needs to be trained in best practices for de-escalation, how not to trigger, how to approach people and work in partnership and support of the clinical staff.

Rick Holloway's response to Question 10

I have been involved in skilled nursing care for almost 30 years. We have had to deal with traumatic brain injury victims. Ranging from a young woman who had a traumatic brain injury from an accident on her graduation night and before working with the Idaho Veteran's Home I worked in a facility in Cobalt, ID that dealt with behaviors as well as traumatic brain injured residents. The experiences I have had in this facility as well as Idaho Veteran's home is number one medications

are almost never the best intervention in dealing with TBI residents. They have their crossed and they do not respond the same. The number one thing that we need to do is validate where they are and identify the reasons for unacceptable behaviors and mitigate those triggers before they become problematic. We have found that in many cases meaningful activities is very important. Getting residents outside and active. Meaningful activities can substantially reduce the need for any medication.

Question 11 read by Trustee Lacoste

Give a specific example of how you have helped create an environment where differences are valued, encouraged and supported?

Rick Holloway's response to Question 11

A very specific example would be within my current facility when I was hired, we had very much a silo mentality where we had each department operating on their own. When there was a problem a lot of different viewpoints and they would collide. Then they would come to me to try and fix it and I found no matter a person's race, age, gender, or sexual preference they all have individual opinions. Trying to merge these opinions into a cohesive vision and mission for the facility is absolutely paramount. In our facility we have Jewish, Muslim, Catholics and many other religious backgrounds and it is important to get the opinion of all the staff members to be able to create an environment that is beneficial to all our residents. Because our residents also have different religions and backgrounds and races and so on. By looking at the backgrounds of our staff we are better able to meet the needs of our residents.

Robert Engell's response to Question 11

A specific example I would give is at a small nursing home. I was the administrator and had the opportunity to hire a new director of nurses. The director of nurses we hired was a recent immigrant from Africa. At this nursing home we celebrated cultural differences. They had cultural appreciation events and activities. We would have culturally focused efforts where people would bring in food and dressed to reflect their cultural. We also reflected in hiring practices, started to change well and we were better able to recruit a more diverse workforce. Through that diversity we had an appreciation and understanding of cultures. It became a stronger and more resilient workforce.

Question 12 read by Trustee Collins

The mission of the Soldiers' Home in Holyoke is to provide "Care with Honor and Dignity" – what does this phrase mean to you?

Robert Engell's response to Question 12

To care and dignity means understating and appreciation of each Veteran. We need to know and care for each individual veteran. I want to move towards a resident veteran directed care. Staff will know and care for veteran their needs, interests, wants, they care they need to receive and engage in life. Honoring the dignity when they are living life to the fullest. When wake up they will be thinking of how they will be enjoying and living their life to the fullest, with purpose and meaning. And help them have a more meaningful experiences every day with purpose and value.

Rick Holloway's response to Question 12

Managed that it is not only what we do but how we do it. The care that we provide to our residents has to provide value to them and to provide an environment where, number 1, the staff are able and willing to provide that serviced to the veterans. The main key is to make sure every minute of every day is special to our veterans. Excellent and quality care, while maintaining regulations because the regulations are in fact geared toward the same goal that we have which is looking at the veterans as individuals. What I can do as Superintendent is show honor dignity to staff making sure they know that they are appreciated and have the tools to do their job. Provide quality of care not just basic tasks but how they do it is what yields that honor, dignity and respect that we provide for our Veterans.

Question 13 read by Trustee Jourdain

The Soldiers' Home in Holyoke fosters and environment of deep patriotism, love of country and respect for all who have worn our nation's uniform. For many of our residents this is their last duty station. As Superintendent, how do you feel you can support this culture and please share with us your experiences working with people who have served our nation in the military?

Rick Holloway's response to Question 13

With the consulting work that I have done with the state going back to 1998 as well as the Nevada State Veterans' Home down in Boulder City I have had ad multiple opportunities to interact with our veterans and hear personal stories. They don't tell about the bad things they tell about their commitment to the country and dedication to fellow soldiers. The veterans have a deep commitment to our country and our flag. I feel I can to continue to show my dedication is by getting to know every single one of the veterans personally. I take pride in being able to go out and say to every single one of our veterans in our facility.

Robert Engell's response to Question 13

As the grandson of immigrants, I felt it was duty to join the military. I served until I retired several years ago after coming back from deployment in Afghanistan. We cared for veterans and honor their service in nursing homes he has worked with. I would stop at each room and visit and honor each veteran recognizing their branch. And we tried to sing their service song and when we realized we couldn't we wound up singing God Bless American. Understanding the military culture and the things that brought them to the military in the first place. The best way I know to truly honor and bring the cultural sensitivity of patriotism to each and every one of our veterans. To understand them and talk with them and allow them to celebrate in talking with their friends. We also have symbols through the Home including flags. posters, images from service branches. We are proud we are a military home.

Question 14 read by Community Member Mary Moscato

What aspect(s) of this role will be the biggest challenge(s) for you?

Robert Engell's response to Question 14

The biggest challenge for me are the challenges for the home as we move forward. The implementation of the Pearlstein report. The big work is culture change and taking the organization in a transformational way forward. When I am talking about culture change, I am looking at in a number of different ways from a patient care perspective using simple tools like the Pioneer Network in Culture Change. We need to assess our readiness for resident focused care, and we need to have a culture change with staff. A lot of good hard work, the way we support ourselves, the way we communicate with one another, the way we are able to share support and criticism and quality of care. That is a lot of hard work that needs to be done. We are a very traditional nursing home and it's a very top down directed communication, so our CNA's and our Nurses are not involved in scheduling their work life, are not involved in the flexibility that comes from that. Labor relations and change the paradigm. We have really good team members, but we don't have great working relationships with labor, and we need to change that. Another big challenge we have is to create a learning organization. We have a new Director of staff education, a new Director of Nurses, several new nurse leaders a new director of social but we are a very nurse centric and care centric organization and we haven't infused psychosocial wellbeing and quality of life into our home. The education is that needs to be done is significant. Clinical staff needs to grow their skill set. We are not there yet but are working on the ability to have iv therapy. As we bring all of our clinical professionals forward in the environment as we become a resident directed organization forward.

Rick Holloway's response to Question 14

The biggest challenge I will have is pulling the team together and making sure that we have everybody working together. That is a strength I have but we have a long way to go. We will need to work very quickly to pull things together while taking care of the day to day business. I have been able to do that in the facility I am in and previous facilities also. Has experience in regulatory issues one of the buildings was back up to full compliance with four months. Because we have so far to go, not only from where it is but where I can be it will take a while, but I am certain we will get there.

Question 15 read by Trustee Ostrander

As Superintendent, what would you want to accomplish within your first six, nine, and twelve months of employment?

Rick Holloway's response to Question 15

Within the first six months I would want to first identify strength and weaknesses of the senior leaders within the facility. Determine where the issues caused the facility in positions it is in, get the facility back on track with a very aggressive plan of correction. Second of all I will go out and meet with staff members to see what they see as the issues within the facility. I would also get to know the residents to see what we are missing and see what we need to address within the facility. Outside the facility I would also be interacting and having regular meetings with the local medical center and seeing if there is concerns on their side that we can address. I will work with the state and local leaders. I know the facility is not certified currently for Medicare and Medicaid, but that is the direction I would like to see started and then better service organizations getting them involved and making sure they are part of the success of the organization. The last thing I would do is

identify the financial standing of the facility and make sure that we are not focused so hard on rebuilding systems that we lose sight of the financial viability of the facility.

Chairman Keefe asked Rick Holloway if he had any question. Rick Holloway answered that he had never used this forum for interviews but liked it. He asked what do you see as the primary goals for the Superintendent for 6, 9, and 12 months? Trustee Collins replied the items that came out of the Pearlstein report, the governance and oversight of the facility, working with the Board, addressing the issues working with staff and coming up with a staffing schedules, looking at electronic health records and implementing a new system, training and staff assessments. We have a big job ahead of us with the new building and the opportunities that reside with the construction project. Trustee Bigda added initially identifying the problems that led to this issue where we are now and with the consensus of enough people, identify what to do about that and what to plan for the aftermath of that, and then eliminate problems. Trustee Mass said knowing what your goal is first and foremost. My goal is for this not only to be a superior facility, but the best facility in the entire country. So that means examining best practices all across the country. Working throughout his process it seems to me that CMS is one of the things that is a high standard that we are nowhere close to meeting. Chairman Keefe asked if Rick Holloway had any more question. Rick Holloway answered that he had a final comment. From my responses, you can tell, I am big on teams. I used to be a horse trainer. I have always compared my management style to the 83-84 Boston Celtics because you have a team that came together and did amazing things and that is what I do in my facilities. I build people up so they can do great things. Trustee Collins asked with your experience with horses, how equine process people emotions. Do you know any research that is being done with veterans and horses? Rick Holloway has used horses in their therapy in their facility. I have found in training horses that the horse knows what you are going to do before you know. They have an incredible sense of a person's feelings. We have brought some of the smaller horses to the facility and the kinship between the veterans and the horses goes beyond anything you can describe.

Robert Engell's response to Question 15

I want to work with Board to develop a strategy to move forward. Work with leadership team to make sure we are moving in the same direction. Then, my job as a senior leader would be coaching the executive team. Making sure we are in fact aligned and that we build those relationships giving stability to leadership. Organizations do best with stable leadership. Then I will focus on performance. What you don't measure you don't achieve, and you need to have the right metrics to evaluate. Will work with operations committee to make sure focused on right things as an organization. The next is working on culture. We have talked a lot about culture and use different tools. We need to start the culture change initiative soon. I will also be serving as an ambassador and advocating for the Home. We need to change the perception in the community. I will be spending a lot of time learning about the organization, to truly understand and be provide leadership that is necessary. Very specific tasks are we need to address the Pearlstein report, get ready for the Joint Commission survey, keep moving the EMR forward. We also need to make sure that our organization is infused with infection prevention and control understanding operations. The education and training programs. We need to use the DVS resources and training. Training in cultural diversity and equity diversity and inclusion. Continue working on the admission process. Need to do outreach. Meet with all employees and veterans and families and learn from them how to meet their goals. Work with labor to build up relations. The new facility. Finishing up refresh. Superintendent is to be ambassador for the Home.

Chairman Keefe asked Robert Engell if he had any question. Robert Engell asked. How do you see the board and superintendent relationship? What support does the board need and want from the superintendent? Chairman Keefe explained the role with superintendent, EOHHS team and board of trustees would work all together. Strategic vision as we look at new construction, new innovative care that is out there. Making sure we are all moving in the right direction. Difficult to build cohesiveness during these COVID times WebEx has made some challenges. The Boards job is to get you the resources you need and empower you to make this the best veteran's home in the state. Trustee Mass added it is important the relationship be one where honesty and integrity between the board and the superintendent. The questions may be difficult, and the answers may be hard to hear but needs to be honest.

Robert Engell asked what is their key measure of success? Chairman Keefe said I would use the answers you gave for what you would like to accomplish in 6, 9 12 months. The Pearlstein report will be used as a scorecard. Also, what the team doing as we are coming out of COVID to rebuild relationships. Trustee Jourdain said the focus is the Pearlstein recommendations. We have to make sure we are doing the DPH surveys and make sure we have as much transparency as possible. I feel the success is that we foster a culture that says, we are going to say it like it is and even if it puts the State agency in an unflattering light, we are going to level with the people of Massachusetts as to how things really are here. There will be no veneer only transparent and we are going to hold ourselves to the highest standards the same standards that are held of all other nursing homes in Massachusetts. I think if we do that and get away from a lot of this anachronistic stuff where, you know there is an exemption for veterans homes that you know we don't have to do what all the other nursing homes do because somebody make a rule 100 years ago. I think if we are transparent when there is a problem, work to fix it. I think we need a culture of excellence, openness, and listening. One of the biggest things I hear is that no one wants to listen to us, we get lip service. It is a lot of communication break downs and If we can fix that it would be a huge success. I hear it from the community, they don't get openness. I would like the board to have an advisory board so that we are listening to community stakeholders. A lot of people want us to be a success that is beauty here at the end of the day everybody wants the same thing. If you help open the door to the facility, in terms of transparency about listening to people creating a culture of openness and success it is going to take us so far because we have an excellent staff we have financially by every measure we have everything you could possibly want. Legislatures tell me whatever you need just let us know and we will give it to the Holyoke Soldiers' Home. So, there is no reason we can't be a success. Now it is up to us to make it a success and I think it starts with creating culture, but that is in the brain and that is institutionalize and habit that don't go away easily. Let's hope that we can mend our past bad ways and create a culture of success.

Chairman Keefe asked if Secretary Poppe had anything she would like to add in response to Robert Engell's final question. Secretary Poppe shared she felt everyone captured a lot of the issues. Most of all getting to know the people, learning our strengths and weaknesses, working with the board and DVS, plans for the new facility including adult day health care, EMR and this will be a cultural change in itself. These are the key items in the months and years ahead.

Robert Engell followed up with the adult day health care program will be a huge benefit to the campus and a lot of outreach will have to be done. It will offer great support for families who are caring for their loved ones at home

Adjourn:

Trustee Mass made a motion and it was seconded by Trustee Collins to conclude the Public Session

Roll Call Vote is as follows: Mark Bigda (Yes); Sean Collins (Yes); Kevin Jourdain (Yes), Cindy Lacoste (Yes), Isaac Mass (Yes), Carmen Ostrander (Yes), Gary Keefe (Yes). It was unanimously VOTED to concluded at 7:43 pm.

Respectfully submitted,

Kathleen Denner
Acting Secretary for the Board of Trustees