

## **Soldiers' Home in Holyoke Board of Trustees Operations Committee Meeting**

A meeting of the Board of Trustees Operations Committee of the Soldiers' Home Holyoke (HLY) was held virtually and telephonically on Tuesday, October 26, 2022. The meeting began at 6:02 PM.

### **Committee Members Present on WebEx:**

Chairman, Sean Collins, Mark Bigda, and Carmen Ostrander

### **Also Present on WebEx:**

Dr. Diane Dietzen, CMO (HLY); Kelly Jones, DON (HLY); Linda Lariviere, Quality Manager (HLY); Michael Lazo, Interim Superintendent (HLY) Caitlin Menard, Director of Social Work, (HLY); Brett Walker, General Council (HLY); and Kathleen Denner, Recording Secretary (HLY).

### **Roll Call:**

Chairman Collins conducted a Roll Call as follows: Mark Bigda (Yes), Carmen Ostrander (Yes), and Sean Collins (Yes).

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

### **Approval of Minutes**

Upon motion by Trustee Bigda and seconded by Trustee Ostrander to accept the minutes as amended of the September 27, 2022, Board of Trustees Operations Committee meeting, it was unanimously VOTED to accept the minutes of the Board of Trustees Operations Committee meeting held on September 27, 2022.

### **Old Business**

#### **Update on Contract Listing Review**

Trustee Collins thanked Mr. Lazo for supplying the contract listing for review, the setup is excellent and seems to be much more organized. He continued the only thing that I see here is some courses expired in the June timeframe and he was curious if you are you going to let those pass and the second question is does the Home have to pay for that or does that state. Mr. Lazo asked if he reference courses? Trustee Collins replied the Trauma Informed Leadership Programs. Mr. Lazo shared that the Creative Healthcare Management we do pay for and we have completed two phases and we are in discussion with the group if we want to continue with phase 3. He continued that phase 3 gets a little expensive because it involves travel so we are trying to figure out it that. Trustee Collins asked if the Home is responsible for that or does the state reimbursed for that. Mr. Lazo replied that is correct. Trustee Collins asked if that for the licensed staff. Mr. Lazo replied that this is a trauma informed care subject matter where phase 1 was with leadership and phase 2 is with a larger subsection of our staff population and it is for the staff as a whole not necessarily just licenses. Trustee Collins asked is it the issue with the cost that is giving you pause or was it the feedback that you think you got what you needed. Mr. Lazo shared for him it is a little bit of both cost if definitely a factor but he wants to make sure felt the value it phase 2. He continued that Ms. Jones has used before and finds great value in them and we are trying to find middle ground. Trustee Collins asked Mr. Lazo based on his experience that if we kind of raised the question that we could get any support from the State, I know how hard we had to fight to get to someone to a conference, do you think it is worth elevating to full board or not worth it. Mr. Lazo replied that it is hard to say because the issue we will have is travel, we do fight very hard to have one person to go

to a conference and if we need to send multiple it would be, this is a train the trainer type seminar that they will come back and teach the rest of the staff. Trustee Collins stated that in order to move onto phase 2 you would have to extend contract. Mr. Lazo replied correct. Ms. Jones shared that she thinks there is value in having the discussion, the program is a trauma informed focus, but it is relationship based care is a program that really seeks to sit in front of each individual staff member and talk about culture and culture and as an organization talk about culture change. She continued that it is really difficult to put people in a classroom and have culture change, we have to start somewhere so more discussions to come with the group, are there components of it that we can license and adapt without going through hoops and steps that they specifically prescribe, she feels there may be alternate routes to the same goal.

Trustee Collins reported that the one coming up in October is the Footcare by Nurses and it looks like the cost varies, it stat base on how many veterans they see. Ms. Jones stated that is a fee for service contract so the less complicated visits are one fee and more in depth more care is a higher cost visit and they bill us per veteran so depending on how many they see in a given month and complexity of those visits that is how that bill is generated so there is really two different rates.

Trustee Collins shared that he does not want to go through the entire list he just wants to go one quarter out just to see what contracts are coming to expire. He continued with the SEG Consulting under December is ongoing recovery and are we renewing. Mr. Lazo stated at this point no, he thinks the staff has had a year of the service and the staff now have the skill set to make necessary changes or to continue the work that is already been started. He continued that Sara Gaer is working on the final recommendations and she is aware that the agreement will terminate in December.

Trustee Collins asked regarding the other one in March, which will give us a quarter look out is the chiller system and the your preventative maintenance for that and you are going to need that.

Trustee Collins stated that this is a look at what is current and take a quarter look out and see if there is anything. He continued this is us having communication with the full board and if you need support or if something has fallen behind.

Trustee Bigda asked on one of the parts in June at the bottom you had a biomedical inspection services, what is that. Mr. Lazo replied that it is a cross over look at all of our medical equipment, our vital signs monitors, bladder scanners, and things of that nature. He continued that they will do a preventative maintenance on them to make sure everything is working properly.

### **Standard Agenda Items (Updates) / Dashboards**

#### **KPI Updates**

Trustee Collins stated that our staffing hours pretty much staying the same with agency down a hair, it is looking stable, my question is how are we doing on staff recruitment in general to see how we can impact agency hours. Ms. Jones shared that Ms. Lariviere will be taking most of the questions regarding this dashboard as our new Quality manager. Ms. Jones reported that in November and December the agency will pop up a little bit because we have a few of the agency

staff onboarding and the permanent staff recruiting the going is tough. She continued that this is not unique to us, she and Mr. Lazo have been having conversations with HR and EHS regarding wages to make sure that we are constantly evaluating that and staying competitive and what other things could be helpful in that arena. Ms. Jones stated that any director of nursing will say they need staff and it is tough because agencies pay more and get the flexibility they want. She continued that we are working hard to look at wages and to give our staff as much flexibility as we humanly can in an effort to retain the people we have and to continue the recruitment efforts. Trustee Collins asked for a reminder that the RN's are part of a collective bargaining unit and he assumes all nurses across the state of Massachusetts are part of MNA, they are all brought on a particular classification and they are paid the same, for example there is not a pay difference between the Home and Western Mass. Hospital. Ms. Jones replied that they may grade their positions differently, so if you look at the MNA contract it does give facilities the ability to decide what grade or what level each role is and then within those levels it is a prescribed about. She continued to clarify further our RN salary is very competitive and if you look at how many RN's we employ vs LPN's we are much higher than the average long term care facility and that is one of the reasons it is our biggest struggle is LPN's and CNA's.

Trustee Collins asked regarding the safety report he did not see the sub report in regard to veteran falls and how that really went up and wandering, he is not sure if those two are correlated and if there is a trend. Ms. Lariviere reported that veteran falls the bump up happened on our on secure memory impaired unit and there was a change of staff on 3-11 shift and it seems to have contributed to some of the incidents over there were the supervision of the day room after meals seems to be an issue. She continued that was a prime time of around 18:00 where there was increase in falls and they do have some staff over now with one person back from leave and they do have some regular staff so that seems to have trended downwards. Ms. Lariviere reported that the wandering did not affect it that was a veteran on care center 2 who was transferred to the secure unit after his wandering event. Trustee Collins stated that it would be helpful if you could send out to the subcommittee members your detailed report on the falls that breaks it down by shifts and unit to the committee please will be helpful. Ms. Jones replied that she will send out before the end of the evening.

Trustee Collins discussed that the behavioral events have been in red for a bit and part of that as we know is we have accepted some new veterans and there has been some movement on the units, I don't know if that is still a valid discussion point as those events till remain well above target and just need a little bit more clarification if we can see if it is related or what we had been talking about just that the staff are getting better at documentation, if there is a tracking form that we have somehow stratify what these issues are as we go further into the red, I think we need to have a little bit more discussion to make sure that we are not missing something. Ms. Lariviere reported that there are a couple of veterans who contributed significantly to the numbers and the staff is reporting more and are not accepting the behaviors. She continued that there is one in particular who does not want us to be called a nursing home and wants to change how we do business and he is in constant contact with the superintendent to have discussions on how we can rearrange the care and he does escalate at times, and he is verbally abusive to staff. Ms. Lariviere reported that we have had geriatric psychiatry look at him and Ms. Menard's team look at him, and he does not want to take medication, so it is redirection and developing care plans. Trustee Collins stated that if we have some sort of reporting tool or a metric we can see where those events are happening

and on what unit and it is helpful if there are multiple events with an individual veteran driving up those numbers. Trustee Collins stated that based on our earlier discussion in the year, in that article that had come out in the MNA about those issues that nurses have to deal working with patients, even if they have a psychiatric issue there has to be boundaries. He continued that you may have a tool already in development but that may be helpful as we move forward. Mr. Lazo emphasized that the veteran has been living at the Home for about 5-6 years now and has not exhibited such behavior until this year. Ms. Lariviere added that our CQI team is looking at reevaluating our benchmarks we may have overshoot what we should be looking at, so we will be reevaluating our benchmarks and looking to see if there is some national benchmarks that we can find. Trustee Collins stated that it is good to have the dialog, it is making sure that the staff feel comfortable in that the staff are educated and can handle those kinds of encounters. He continued that it is a win win highlight it because before it was happening and not being highlighted and then people weren't being educated.

Trustee Collins reported that in services we are all green.

Trustee Collins stated that the quality we are going to talk about the infection issues when we get to antibiotic stewardship. He continued that the lower respiratory tract infection has popped a little bit but getting better than where it was back in July and the skin injuries again are down but I see a lot of work and when I read the medical staff minutes for the medical staff meeting and knowing that everybody is addressing skin which is wonderful, everyone pulling together on all aspects in regard to veteran care. Trustee Collins appreciates that we are taking entire team approach to veteran skin care and the pressure ulcers are down to zero, always a challenge and he appreciates that.

Trustee Collins reported that Overtime is the same and we will address that in staffing.

Trustee Collins reviewed the Quality Measure Compare chart and that this one looks like there was some catchup being done in regard to how things were loaded and how they stayed in the system. He continued that it looks like things are falling back into alignment but some numbers need to be talking and one is the individual with catheters and is there any connection to UTI's, if there truly is a higher incidence of foleys over that last several months and is there a trend on that. Mr. Lariviere did a deeper dive into these numbers because they have changed significantly and part of the problem is we are not adequately coding the reason for having the catheter which affects the measure. She continued that we are correcting the database that goes to the VA to determine these measures and the numbers should get back into alignment. Trustee Collins asked if the number of 8.5 is an inflated number and will eventually correct itself. Ms. Lariviere replied yes. Trustee Collins asked if this is the same thing with the ability to independently move because that is in direct correlation with the need ADL's which makes sense but are those numbers inflated as well. Ms. Lariviere stated that they reflect some veterans who had a significant change in status and went on hospice and we have to do an assessment which shows their need for more assistance so those are probably accurate. Trustee Collins shared that those two numbers together make sense if more veterans are on hospice, those two numbers seem to go hand in hand.

Trustee Collins the other one that caught his attention as we go into the change of season and being aware of the impact of depression that seems to have popped up a bit and wanted to know how that is being addressed over time and what drives that number up, if it is medications when people are being treated for that further which further populates the metric. Ms. Lariviere stated that the metric is populated by Ms. Menards team from when they complete a PHQ-9 depression scale on every veteran for the MBS and it depends on the veterans answers, if they notice anything different for the veteran her team is usually on top of that. Ms. Menard shared that this is a difficult time of year with the seasons changing and we do have new people that are swaying that a little bit. She continued that people are in the transitional phase of getting used to being in the Home and not being at home and there is a lot of transitional stuff for that but it is being triggered and we are doing assessments as well as psychotherapy as needed. Trustee Collins appreciates the fact that PHQ-9's are being evaluated and followed up by the team. Ms. Menard stated that this season has an uptick nationally.

Trustee Collins said the Case Mix is rock stable and appropriate balancing throughout the units.

Trustee Collins reported that the information next is the detailed report just overall and the infection prevention control report and antibiotics stewardship, just looking at trends we already talked about the lower respiratory infection and some UTI's and saw the trend even with compare that it popped a little bit He continued that he likes the break down on the units, but some of the unites seem to be and for the record that two units that have infections and the explanation may be those are the units that have heavier care and more chronic issues. Trustee Collins stated on the infection prevention control report the official organism identified and there are 11 infections, but I only see 7 organisms identified as responsible for the infections. He is curious if everything else get captured as a organism because I see you have space for other. Dr. Dietzen stated that she does remember anything being out of the ordinary numbers in the last report, she said that looking at case mix you would not necessarily that those two units are the most they are somewhat higher but not more frai than the other units. Ms. Jones stated we have a couple of newer folks and I do think that there is not really enough to identify a trend sometimes we make things of smaller numbers, no concerning trends but she would say about the organisms is that she knows at least one of them infection prevention tried to track down it was diagnosed outside and were not able to get all of the lab results. Trustee Collins said he likes the dashboard it has tremendous information and demonstrates you are tracking all this, my questions may seem unfair because don't know the whole context.

Trustee Collins is super excited about the SBARS getting over 67% making progress.

Trustee Collins stated that Infection control and Antibiotic report card he had no questions, all made sense and applauds that all this is being tracked and digested and summarized and the importance of all this is the ability to track identify and take action.

### **Medical Staff Update / Review of Minutes**

Trustee Collins stated that it is good to see Dr. Yen is getting aback engaged and doing the dental evaluations. He is curious about the that the anti-coagulation communication to me it begs the question that we are all struggling with the lack of electronic health record and from an institutional

perspective for the medical staff is there a central place for all the veterans on anti-coagulation somewhere or is it unit based. Dr. Dietzen replied that the pharmacy can generate a list and then the information goes down with the individual veterans when they go to the dental clinic. She continued that we have talking to Dr. Yen about that and our new pharmacist is doing a review of all the indications for both anti-coagulation and antibiotics in dental care and then we are going to revise the information form to reflect that. Trustee Collins stated that Dr. Dietzen's notes are a treasure trove of information and he saw there will be nursing students starting clinicals. Dr. Dietzen responded that we have many nursing students, Ms. Jones can tell you specifically how many, I only know because I have to review the OSHA forms for all of the nursing students. Ms. Jones reported that there are 6 different groups from Westfield State College, 2 groups from HCC and 1 group from STCC. Trustee Collins asked how long are the groups here for. Ms. Jones responded that they run a full semester and they started at different times so at the very tail of end of August into September and then the end of semester is either the first or second week of December depending on the program and how much they have to do in classroom before they exit for the semester. Trustee Collins asked if it is the same cohort from the schools coming certain days of the week. Ms. Jones answered that there are 6 different Westfield state groups and there are 4 in the evenings, 2 in the day shift and the HCC and STCC groups are here during the day with one day during the week no nursing. She continued that the evenings are busy with 2 groups on Monday evening and then 2 groups on Wednesday. Trustee Collins commented that he knows you overextended but that is the future. He continued by offering the opportunity to do a class on veteran's health. Ms. Jones said let me see if I can do some coordination and I will get back to you.

Trustee Collins asked Mr. Lazo on the status of flu shots, have you started and do you have a rough estimate of where the Home is at. Mr. Lazo replied we have started with the veterans at 90% and the staff is around 20-25%.

### **Outside Agency Audits / Inspections / Review of Tracker Recent Joint Commission Survey Update**

Trustee Collins shared that he failed to take the Joint Commission off the agenda he asked Mr. Lazo to confirm that they had talked about taking it off. Mr. Lazo confirmed.

### **Supporting Patients / Families / Staff / Community Stakeholders**

Trustee Collins discussed the Pinnacle report trends and there were only two that were down over the last 3 months and that was communication as well as professional therapy trending down a bit. He continued that these were addressed at last meeting and at the board meeting, communication is always on our list to improve. Trustee Collins stated that everything else was trending in a good direction compared to the last 3 months obviously the laundry services was taken a hit in the past.

### **Census Update**

Mr. Lazo reported that we have 109 veterans in house, 1 admission next week and after that we will have 1 available. He continued that there are 78 applications with a fairly strong month with 19 applications received in September. Trustee Collins stated that he knows it was a very long discussion but as a follow up have you heard anything more from our dormitory patients who have transitioned into other locations. Ms. Menard shared that the only outstanding one that I am in contact with over email was staying on at Soldier On a little bit longer to get his finances in order

but he has been able to access the mental health services at Leeds. She continued that everyone else is stable where they are. Trustee Collins heavy lift for the group, board appreciated good conclusion.

### **New building update / Status**

Trustee Collins asked if there is any more follow up discussion on ceremonial groundbreaking and in Dr. Dietzen's note about the chiller building coming down and loss of use of the lobby. Mr. Lazo replied that on November 7 work will start to establish a temporary chiller in our current building and it will take about 2 weeks so while that is being worked on the front circle will close, meaning the front lobby for visitor entrance will also close. He continued that visitors will have to come around into the staff entrance and that will be sent out email and the various newsletters to the families so that everyone is aware of the change. Mr. Lazo shared that this only taking 2 weeks means by Thanksgiving the circle should be opened and we can receive visitors through the main lobby. Mr. Lazo stated regarding the ground breaking that Chairman Keefe taking it off of the agenda because it probably will not happen with the current administration Mr. Lazo reported that the work 2 south continues and no issued have been identified so hopefully that stays on track for January /February. Mr. Lazo shared that we have no update in terms of the waiver for Buy America Build America Act. Trustee Collins reminded the group that we went up on the list because other Homes could not meet the burden, Mr. Lazo added that anyone on the VA list will have trouble if they did their initial packets without this law being effect. He added that the VA has submitted waivers on behalf of everyone on the list and we have not heard any updates on that yet. The feedback from our contact at the VA is that it looks fairly positive but not confirmation and no promises.

### **New Business / Interest Items**

#### **SMS Mock Survey Results**

Trustee Collins thought this was fantastic, to do a self-assessment by a third-party entity to not gloss over the items that we need to address for certification. He continued that there are some extensive items and I know we briefly discussed at the board meeting and a tracker is being developed because there is a lot of cross referring from the four different reports and if you can come up with a tracker like we did tracker for some of the other open items that we had with the Joint Commission and even going back to the open items from the past administration. Trustee Collins stated we will tracking those with you, some items caught my eye because some of them were issues we just addressed in some policies, so do the policies now need to be updated or were the policies a reflection of some of those comments. He continued it would be interesting to see those items in a matrix and how we are getting after those items. Trustee Collins added that he wanted to read for the record one of the footnotes in one of the assessment and he quoted form the report although the report is focused on work to be done we recognize all the work that has been done" an anecdotal comment from the consultant team includes "this is the nicest team we've ever encountered, and they love their veterans" and a nice testimony to the efforts of the Soldiers' Home "thank you for the important work you do and difference you make every day" the team would also like to thank the Soldiers' Home staff for the help facilitating the overall assessment without exception the team was professional, prompt with requests, open to feedback and eager to learn. We recognize the time commitment and the work burden this placed on the leadership team and appreciate the positive and welcoming demeanor in the midst of an intense review. Trustee Collins shared that this sums it up to me with regard to what the team is doing and I appreciate it. He continued that when we looked at the Joint Commission and we only had few

findings out of the thousands that they looked at we have to focus on the findings to get those corrected but sometimes we forget to pat everyone on the back for the collective good that they are doing. Mr. Lazo shared that he appreciates the comments and reading the statements on the great work the staff doing, it is great that they are recognized with the understanding that there is more to do but the staff is doing a tremendous job with our veterans and the Home. Trustee Collins stated that this is not the first time that he has read those comments from an outside vendor, it is a consistent theme that people take the time to write a positive comment and the positive impact folks on the phone are having on the management of the Soldiers Home today.

### **Fire Drills / Elopement Drills**

Trustee Collins reported that there were drills for the first and second shift but out of curiosity is there one done on the third shift or is that too disruptive. Ms. Jones replied that you have to do one on all three shifts, that is regulation. Trustee Collins added that whoever wrote up the day shift details there was a little bit of confusing on the wander guard, is that real world or was there confusion overall. He continued that the observations were made but he was curious if that was an actual real world event and if it was a fire alarm or a wander guard event. Mr. Lazo replied that there were no real events, it was all drills. Trustee Collins asked regarding elopement and the new policy getting addressed, looking the wander guard or the lights and all that is perfect and I appreciate the summary of an event that took place in August and as you are redoing the policy the one thing I did not see and I don't know if it is necessary but I would that if there is a true elopement form the home that the veteran gets assessed by the physician or a mid-level provider, or a nurse. He continued that he did not see it in the policy and even if they seem to be fine, I think that may be something they that may be part of the policy as it develops. Ms. Jones replied that this is a good suggestion to an addition and I think that one of the things that we are working on with this policy, along with a few other policies, if you read some of the feedback from the consultants is that teasing out what falls into policy and building a strong procedure behind it.

### **Admission Policy – passed by full BOT**

Trustee Collins asked that the new policy was approved by the board and is going back to the administration for final approval. Mr. Walker replied that is an accurate statement and the timeline on when the next echelon will review it and approve it is not yet known to us. He added that it has been approved and it is been up for review by DVS.

### **Wrap up / Adjournment**

Trustee Collins said to Ms. Menard that he did not give her an opportunity to give a verbal report on families and activities. Ms. Menard reported that the veteran meeting is coming up and Dr. Dietzen did a presentation on COVID. She continued that the Family meeting are still trying to get the best attendance depending on the time, so it has been touch and go. Ms. Menard stated that her hope for the future is that we can start doing things maybe a family social where we can have a dinner, right now we are still doing Team and in person but there are different ways to engage the family that hopefully as we open up, we can explore.

Trustee Collins stated that we will be going into executive session pursuant to M.G.L. c. 30A, sec. 21(a)(1) To discuss the reputation, character, physical condition or mental health, rather than professional competence, of an individual.



A motion was made by Trustee Bigda and seconded by Trustee Ostrander to go into executive session at 7:06 pm.

Next meeting will November 22.

Kathleen Denner  
Acting Secretary for the Board of Trustees

Attachments:

