



SANTA BARBARA COUNTY  
DEPARTMENT OF  
**Behavioral Wellness**  
A System of Care and Recovery

Psychiatric Health Facility (PHF) Governing Board Special Meeting  
Wednesday January 3, 2018  
3:00 PM – 4:00 PM  
PHD Auditorium  
300 N San Antonio Rd, Santa Barbara  
**Minutes**

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**Staff:** **Alice Gleghorn**, PHF CEO; **Marianne Barrinuevo**, PHF Director of Nursing; **Morgan Peterson**, Pharmacist In-Charge; **Jamie Huthsing**, Quality Care Management Interim Manager; **Alesha Silva**, PHF Interim Nurse Supervisor; **Yaneris Muñiz**, Policy Coordinator; **Suzanne Grimesey**, Chief Quality Care and Strategy Officer; and **County Counsel**; **Dalila Brown** AOP II

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**Facilitator:** **Vincent Wasilewski**, Chief Deputy for Custody Operations

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**Roll Call – Supervisor Wolf**, Santa Barbara County Board of Supervisors, Second District (alternate); **Terri Maus-Nisich**, Assistant CEO, Health and Human Services; **Janette Pell**, Director of General Services; **Vincent Wasilewski**, Chief Deputy for Custody Operations, Sheriff’s Department; **Van Do-Reynoso**, Director of Public Health (excused); **Polly Baldwin**, Public Health Medical Director; **Arlene Diaz**, Manager, Public Administrator – Guardian; **Supervisor Lavagnino**, Santa Barbara County Board of Supervisors, Fifth District (excused).

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**General Public Comment:** none at this meeting.

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**1. Welcome and Overview**

- **Introduction of New Staff**

- Morgan Peterson was reintroduced as the PHF Pharmacist in Charge.
- Jamie Huthsing was introduced in her new role of Interim QCM Manager.

**Action:** No action.

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## 2. Review and Approve Minutes

- November 29, 2017 Special Meeting (Exhibit 2a)

**Action:** Ms. Pell made a motion to approve the November 29, 2017 PHF Governing Board Meeting minutes as presented. Ms. Baldwin seconded. Supervisor Wolf abstained. Motion carried.

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## 3. Medical Staff Bylaws

- Ms. Bilir goes over the highlighted amendments on the PHF Governing Board Bylaws (Exhibit 3a).
- She explains that the two changes made are under the organizational chart describing PHF medical director and program manager.

**Action:** Ms. Pell made motion to approve the revised PHF Governing Board Bylaws as presented. Supervisor Wolf seconded. No abstentions. Motion carried.

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## 4. Staff will report on the following Quality Assessment and Performance Plan and Indicators (QAPI) (Exhibit 4a):

### QAPI December Update

#### Complaints and Grievances

- Ms. Huthsing provided the report for the month.

#### Infection Prevention and Control

- No report for the quarter.

#### Patient Services, Care and Safety

- Report – no report for the quarter.
- Patient Injuries – Ms. Huthsing provided the report for the month.
- Adverse Outcomes in Patient Care - Ms. Huthsing provided the report for the month.
- Suicide Management, Treatment Planning, Consents, Nursing Services (Quarterly Feb, May, Aug, Nov)

#### Social Work Services

- Ms. Huthsing provided the report for the quarter.

#### Restraint/Seclusion

- Ms. Huthsing provided the report for the quarter.

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### **Medication Use/Pharmacy Services**

- No report for the quarter.
- Medication Error Rates/Unavailability – Ms. Huthsing provided the report for the month.

### **Significant Adverse Outcomes**

- Ms. Huthsing provided the report for the month.

### **Food and Nutritional Services**

- Ms. Huthsing provided the report for the quarter.

### **Physician and Allied Health Professionals Related Services**

- No report for the quarter.

### **Environmental Services (EVS)**

- No report for the quarter.

### **Environment of Care (Facilities)**

- No report this quarter.

### **Laboratory Services:**

- Ms. Huthsing provided the report for the quarter.

### **Process Improvement Projects**

- No report for the quarter.

### **PHF Status Report**

- Patient Status (UR) Report - Ms. Huthsing provided report on PHF Status (UR) (Exhibit 4b).

### **Contract Monitoring**

- No Report for the quarter.

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- **Significant Areas/Key Events occurring at the Psychiatric Health Facility (PHF) such as patient care (monthly).**
    - Infection Control Program Update – Ms. Barrinuevo reports the infection control program 2017 goals have all been met and to be continued in 2018. The PHF is looking to improve the Infection Program Plan and will continue grid changes with hand hygiene compliance and lice outbreak.
    - Recruiting for new Director of Clinical Services – Dr. Behrendtsen reports there is an open recruitment and interview process to take place. He is currently deemed by the State to oversee the program.
    - Report on Disaster Resulting from Fire and Loss of Aurora Vista Del Mar –Dr. Gleghorn provided a report of Vista Del Mar and the Thomas Fire. Vista had 67 patients that evacuated to the Ventura Fair Grounds. Santa Barbara staff responded with 3 vans to triage patients. Aurora Vista Del Mar discharged patients quickly to accommodate potential new patients. There were 3 brought to the PHF, 5 discharged home-1 adolescent taken to Bakersfield, and 1 went absent without leave that turned themselves into Cottage Hospital. There was a few hotel rooms reserved for staff that could not leave the city and the PHF in unit had emergency food, linens, mattress, and additional staff placed on standby. Ventura has a plan to rebuilt Vista in 2-3 years. The main unit at Vista burned down; however there are three functional outpatient locations that were undamaged. The inpatient facility may be open in April 2018 and they are in the process of hiring staff.
    - Behavioral Wellness Pharmacy Update – Ms. Peterson reports that the pharmacy is open for business and if anyone would like to tour. All of the pharmacy policies and procedures are completed with the medication room policies in draft. The Pyxis machine has been ordered and its arrival is scheduled for June or July.

**Action:** Ms. Pell made motion to acknowledge report was received. Ms. Diaz seconded. No abstentions. Motion carried.

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#### **5. Staff will provide a report on the following Compliance**

- Staff Credentialing /Privileging – Deborah Westgate, RD, presented by Marianne Barrinuevo.

**Action:** Chief Wasilewski made motion to approve staff credentialing/privileging of Deborah Westgate, RD. Ms. Pell seconded. No abstentions. Motion carried.

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## 6. Budget Development

- No report at this meeting.

**Action:** No action.

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**7. New Policies and Procedures-** Ms. Muñiz explains the first two policies that are required by CMS final rule. The goal is to continue decreasing infections and exposures to pathogens at the PHF. Ms. Muñiz provides overview of policies and procedures listed below.

- Emergency Patient Staff and Visitor Tracking (Exhibit 7a)
  - o Attachment A – Emergency Roster
  - o Attachment B – Patient Emergency Tracking Log
  - o Attachment C – Staff and Visitor Emergency Tracking Log
- Emergency Transfer Agreements with other Facilities (Exhibit 7b)
- Fall Risk (Exhibit 7c)
  - o Attachment A - Fall Risk Assessment

**Action:** Ms. Pell made motion to approve new policies and procedures, attachments A, B, and C (Exhibit 7a) (Exhibit 7b) (Exhibit 7c) as presented. Ms. Diaz seconded. No abstentions. Motion carried.

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## 8. PHF Governing Board Administrative Items

- Proposed Registered Dietician Staffing Strategies – Dr. Gleghorn mentions that the Department has had discussions with Public Health regarding their registered dietitians, whom also assist the County Jail. Public Health has offered that level of support to the PHF and there will be further discussion about this service and finalized similar to the Boards process of hiring Deborah Westgate, RD.

**Action:** No action.

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## 9. Review of Future Meeting Agenda Items

- Ms. Maus-Nisich suggested discussing future budget items and The Greeley Company agreement.

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**9. Adjournment** – Next Meeting Date, February 28, 2018