

# HDMC Planning Team\_ Supporting Staff Subcommittee Meeting-20250129\_090021-Meeting Recording- Transcript Generated By Microsoft Teams

January 29, 2025, 2:00PM

49m 51s

● **Cunningham, Lauren (DBHDS)** started transcription



**Cunningham, Lauren (DBHDS)** 0:11

Alright, we're officially recording and transcribing, so with that I'm gonna turn things over.

Cassie Sobolko would you like to go ahead and get us started?



**Cibulka, Kassandra (DBHDS)** 0:19

Sure. Good morning, everyone.

Just wanted to introduce myself and I think we'll just go real quick around and introduce ourselves.

But my name is Cassie Sebolka.

I'm the chief human resource officer at Dbhds and will be part of this presentation today, so I'll be leading it, but go ahead.

Lauren, do you want to go?

Let's just go across.



**Cunningham, Lauren (DBHDS)** 0:40

Sure. Lauren Cunningham, communications director at Dbhds.

I'll throw it to Stacy.



**Pendleton, Stacy (DHRM)** 0:46

Good morning, Stacey Pendleton, deputy director of the Department of Human Resource Management.



**Salisbury, Tracy (DBHDS)** 0:54

Tracy Salisbury, deputy Chief Human resource officer at the DBDHS.



**Cibulka, Cassandra (DBHDS)** 1:02

Honey, wait.



**Wade, Connie (DBHDS)** 1:08

Good morning.

This is Connie Wade.

I'm the social work manager here at Hiram Davis.



**Cibulka, Cassandra (DBHDS)** 1:12

OK, Sheila.

OK. We'll go next Capell.



**Patel, Kapil (DBHDS)** 1:25

Hey, my name is Kapoor Patel.

I'm a pharmacist at Hiram Davis.



**Cibulka, Cassandra (DBHDS)** 1:29

Jill.



**Sorbie, Jill (DBHDS)** 1:31

Good morning, Jill Sorby, director of Health Information Management, Hiram Davis.



**Cibulka, Cassandra (DBHDS)** 1:39

I have this.

He can't hear you, so we'll go to the next one, Samantha.



**Rosenberg, Samantha (DBHDS)** 1:52

Samantha Rosenberg, executive assistant to Angela Harvell in the facility Services division.



**Brickey, Mark (VIRGINIA WORKS)** 2:01

Hi, I'm Mark briggy.

I'm the rapid response coordinator with the Virginia Department for Workforce Development advancements, also known as Virginia Works.



**Cibulka, Cassandra (DBHDS)** 2:09

Thank you, Susan.



**MS Moon, Susan (DBHDS)** 2:13

Yeah. Hi, good morning. I apologize.

I don't have access to my camera at this time.

My my name's Susan moon.

I'm the director for the Office of Integrated Health in Developmental Services at DBHDS and I'm here to listen in this morning.

I'm a Co chair for the Community Access subcommittee.



**Cibulka, Cassandra (DBHDS)** 2:33

And Tanya?



**JT Jones, Tanya (DBHDS)** 2:37

Come on.

I'm Tanya Jones.

I'm a social worker with Heron Davis.



**Cibulka, Cassandra (DBHDS)** 2:40

We will open up the the call for public comment and we'll allow two minutes per person if anyone has any public comment, you can raise your hand and then we'll go through that.

Seeing OK.

Well, then we'll jump right into kind of what we're here to talk about.

So this is the supporting staff subcommittee. And So what we've been tasked with is really to look at the staff at Harm Davis and if we were to move with ahead with closure, how that would impact staff and what our plans would be to support the staff through.

That.

As we go through that, I will share a couple things.

One of the things I did want to just start off with is a snapshot and I'm going to share my screen real quick.

Of current staff numbers, can you all see that OK or do I need to make it bigger?  
Put it in view mode.



**Cunningham, Lauren (DBHDS)** 3:38

Yeah, you may need to make it a little bit bigger.



**Patel, Kapil (DBHDS)** 3:40

Yeah. Thank you.



**Cibulka, Kassandra (DBHDS)** 3:41

It's no problem.

Switch my screen here.

Make it bigger in this one.



**Cunningham, Lauren (DBHDS)** 3:58

That's better.



**Cibulka, Kassandra (DBHDS)** 3:59

Can't go man.

Put it back.

There we go.

Well, there's my screen alright, so I pulled numbers last night to to. Kinda just, you know, give us a a real life picture of what we look like for classified staff.



**Cunningham, Lauren (DBHDS)** 4:02

There we go.



**Cibulka, Kassandra (DBHDS)** 4:11

We have 151 current staff.

And I just kind of listed it out by like admin staff.

HRIT.

And then I did program admin training.

You know how many trainers, counsellors, dentist, lab, pharmacy, physician, their therapy compliance?

DSALPN in nursing and just got to the 151. I also wanted to.

And I'm pulling central office too.

I didn't get it in time, but I will share it on the next one as well.

We'll kind of look at this every single time just to kind of give a picture of what we look like, but we will be adding center office and I just didn't have time to, I didn't think to do that last night, but I will add that one for.

Next time, but kind of just say OK.

Let's look at within 50 miles.

Because that's kind of like their guidance is when we're trying to do just placements.

We will look within 50 miles and so we kinda pulled up central stating and and and gave those same categories PGHVCBR Eastern state and then we again I'll add central office just to kind of show that those numbers as well but I.

Just want to give a real picture that you know we we feel pretty comfortable that you know our plan is to place everyone within one of these facilities but just to kind of give everyone a picture of what that looks like so that we know that.

You know, there are opportunities and and and we feel.

Comfortable and helping people move through that as we get closer to, you know, decisions being made.

So I just want to give that snapshot so that we can continue to have those conversations.

We're monitoring this, you know, and and making sure that we're communicating as as we go through this process, right.

And so any questions about that, that, that information, I just want to you know, be transparent of what that looks like?

OK, a couple things that Yep, that's OK.



**Sorbie, Jill (DBHDS)** 6:05

Oh, I do have a question.

I'm sorry, I should have put my hand up, so I just thank you.



**Cibulka, Kassandra (DBHDS)** 6:09

It's OK.



**Sorbie, Jill (DBHDS)** 6:11

This is Jill.

And so I'm looking at your classified roles.



**Cibulka, Cassandra (DBHDS)** 6:13

OK.

Mm hmm.



**Sorbie, Jill (DBHDS)** 6:18

You know, I I look at the administrative staff.

It's showing 9 filled 9 vacant for Hiram and.

OK.

And then there's compliance four and one. So who?

What roles are are those administrative staff?

That are who falls under that.



**Cibulka, Cassandra (DBHDS)** 6:39

Let me give you that.

Hold on one second.

I think it's gonna be. I think that's the HR, the IT in these program admin and then training.



**Sorbie, Jill (DBHDS)** 6:46

Mm hmm.



**Cibulka, Cassandra (DBHDS)** 6:47

So if you that that first one is is those nine, so that's that's what that is.



**Sorbie, Jill (DBHDS)** 6:52

OK.



**Cibulka, Cassandra (DBHDS)** 6:53

I actually was gonna do it differently, but I that's what that is.



**Sorbie, Jill (DBHDS)** 6:57

OK.

Could you tell me where health information management falls under?



**Cibulka, Cassandra (DBHDS)** 7:04

That is gonna be an admin staff.



**Sorbie, Jill (DBHDS)** 7:06

OK, OK.



**Cibulka, Cassandra (DBHDS)** 7:07

Yeah.



**Sorbie, Jill (DBHDS)** 7:09

Alright, that's that clears that up.

Thank you so much.



**Cibulka, Cassandra (DBHDS)** 7:12

Mm hmm. Yep.

OK.

Any other questions or comments about that that we need to talk through?

The next slide I'm going to show is kind of with the building of Central State Hospital.

There has been plans to move some people. Let me make that a little smaller.

Some of these groups were slotted to to reside out of that build new building, and so we're just kind of talking through what that might look like.

So the dental, the pharmacy, the laboratory, radiology, physical therapy and other therapies.

And so we listed the people that are on there scheduled, you know, to become part of the new Central State Building.

2026 during that construction, depending on what that looks like, you know there may that there is potential for those to be physical movement earlier than that.

There's talks about that, but there's nothing definite will definitely be communicating it. But these positions were already kind of SL.

To be part of Central State as they move into the new building. So just wanted to kind of put that out there and and kind of talk through that or just let you guys know that these were.

Already slotted kind of to be going to that new building, 'cause the space was kind of allocated already there so.

Just know that that is still on track.

Any questions about that?

Is Jarvis on today?

Is he not?

Is he here?



**Griffin, Jarvis (DBHDS)** 8:42

I'm here.

I'm here.



**Cibulka, Kassandra (DBHDS)** 8:43

OK. Just wanted to make sure I didn't wanna get too far ahead and I didn't see you earlier.



**Griffin, Jarvis (DBHDS)** 8:45

Hey, Cassie.



**Cibulka, Kassandra (DBHDS)** 8:47

So thank you.

I kind of wanted to give you an opportunity, Jarvis, if you don't mind, to just kind of go over where we are in our senses.



**Griffin, Jarvis (DBHDS)** 8:49

Yeah. Yes.



**Cibulka, Kassandra (DBHDS)** 8:57

So that we can kind of just kind of talk through that.



**Griffin, Jarvis (DBHDS)** 9:07

But today we are currently at.

37 patients, I believe.

Correct me if I'm wrong team. I wasn't able to make it to the morning report, but our senses had changed all week.

We had 38.





**Wade, Connie (DBHDS)** 9:21

We have 38.



**Sorbie, Jill (DBHDS)** 9:23

Yet Yep.



**Griffin, Jarvis (DBHDS)** 9:23

We had a gym admission.



**Wade, Connie (DBHDS)** 9:24

Yes.



**Griffin, Jarvis (DBHDS)** 9:25

That's correct from vcpr.



**Cibulka, Kassandra (DBHDS)** 9:26

OK.



**Sorbie, Jill (DBHDS)** 9:26

You want me to break it down, Doctor Griffin.



**Griffin, Jarvis (DBHDS)** 9:29

That is great, Jill. Thank you.



**Sorbie, Jill (DBHDS)** 9:31

OK, so for our skilled nursing facility, we have 20 patients in our acute care GM beds. We have three and for our ICF beds we have 15 and that was as of 1/27.



**Griffin, Jarvis (DBHDS)** 9:50

Thank you.



**Sorbie, Jill (DBHDS)** 9:51

Hmm.



**Cibulka, Cassandra (DBHDS)** 9:52

Do you mind repeating that one more time?

I didn't get my pen out in time, sorry.

OK.



**Sorbie, Jill (DBHDS)** 10:03

For our acute care beds, which are our GM beds, we have 3.

And for our ICF, we have 15.



**Cibulka, Cassandra (DBHDS)** 10:13

It's.



**Griffin, Jarvis (DBHDS)** 10:14

In the ICU for the nursing facility beds, the long term care homes that we have.

So we're still at around 38.

We have a few discharges pending this month, I think 2:00.

That's upcoming within the next two weeks.

That was first start out as trial visits and then transition to permanent placements for those trial visits being festival.

Submitted a a plan as far as the Census Bureau census based staffing model. We've been working through.

That input knows from those apartments kinda really boil it up into a a comprehensive staffing plan that's gonna be reflective of the census.

Once the proposed go ahead.



**Cibulka, Cassandra (DBHDS)** 11:06

No, but I was just.

Maybe next time we can put that on our plan to kind of discuss that and just get feedback on that. I I it was one of my to Do's as of what I was going to ask for the next meeting that we could do, so I'll just.



**Griffin, Jarvis (DBHDS)** 11:12

OK.



**Cibulka, Cassandra (DBHDS)** 11:19

Ask that we will be able to kind of share preliminaries on that to get feedback from the group as we for for the next call that we have. Would that be OK with everyone?

Cut. I will add that.

Hedgehog is sorry.



**Griffin, Jarvis (DBHDS)** 11:39

Alright, we've tossed around a lot of different initiatives.

Between Tracy and our internal team and looking at how best to support staff.

Talked about some leadership training.

And touch points around recognition and kind of preparing folks for.

Transitions should they need it.

We are working to implement a.

Your mentorship program and we started kinda talking about that.

Let's rest alone in the car with us this morning.

Kind of have it presentation. Probably the next time we meet.



**Cibulka, Cassandra (DBHDS)** 12:31

OK.



**Griffin, Jarvis (DBHDS)** 12:32

I think the kind of couple that with.

Supporting the staff and the homegoing.

Meeting for week. You know, we kind of have cohorts of individuals.

Again, we are working to support staff, you know, with up skilling and credentialing as well.

I'm looking at offering.

Support.

Where additional certifications like with our pharmacy.

Pharmacies pursuant geriatric or psychiatric certification.

Kind of tossed it around and working kind of with that would impact would be and what that would cost would.

You know.



**Cibulka, Cassandra (DBHDS)** 13:24

Yeah.

I'd like to hear from you know, we have a lot of staff on the staff.

What challenges are you guys?

What challenges or concerns are facing you all?

What things can we talk about so that take input on so that we can consider as we continue to build our plan that we should make sure that we're considering.



**Patel, Kapil (DBHDS)** 13:53

Hey, this is Kapil.



**Griffin, Jarvis (DBHDS)** 13:54

Of go ahead capillary.



**Patel, Kapil (DBHDS)** 13:55

Sorry, go ahead, Doctor Griffin.

No, no, go ahead.

Doctor Griffin, I'll follow up.



**Griffin, Jarvis (DBHDS)** 13:58

Would you say experienced a lot of turnover again, nursing you know is always the most fragile volatile.

Apartment. But we're seeing the most turnover right now in our administrative staff.

You know in those key positions that support compliance and those major programs, affection control, Emergency Management, equipment management, those things are absolutely critical here.

When you talk about people with IDD diagnosis adaptive acutement.

So yes, we're experiencing that at the at the forefront.

The pill? You're part of our Staff engagement committee. Our Co chair there. And you get a a big temperature from the facility.



**Patel, Kapil (DBHDS)** 14:46

So hey, Cassie, So what?



**Cibulka, Cassandra (DBHDS)** 14:48

Hey.



**Patel, Kapil (DBHDS)** 14:49

What we see is basically.

Employees wanna get set amount of skills by which we are certifications. Some of the employees are talking that they also wanna explore other fields like, you know, merging nursing with it informatics.

So what they want, what they feel like they want is, you know, let's say they might want like, AWS skill clouds or anything like informatic skills. And they wanna further that that would help them be.

Get more opportunities to add other facilities.



**Cibulka, Cassandra (DBHDS)** 15:23

OK.



**Patel, Kapil (DBHDS)** 15:25

That's the majority thing that I hear and I like, Doctor Griffin said that I'm also working with the pharmacist to see what do they need, you know, just for preparing for themselves a future like certifications.

Overall, so overall it's just, you know, they want to be prepared for either management role or something that could be hybrid.

At other facilities, so providing like certification classes and skills.



**Griffin, Jarvis (DBHDS)** 15:57

You know, we're not gonna be able to meet everybody. You know, we're not gonna be able to certify and upskill everyone, but our our, our intention is to grow as many as we can.



**Cibulka, Cassandra (DBHDS)** 16:00

No.



**Griffin, Jarvis (DBHDS)** 16:07

So we're really putting a big emphasis on having more.  
In a cohorts.



**Cibulka, Cassandra (DBHDS)** 16:14

OK.



**Griffin, Jarvis (DBHDS)** 16:15

Participate starting another cohort in February with our particular staff and looking at expanding that to possibly support upskilling the system as well.

With PGH and possibly the training center as well.

Just, you know, just working through a lot of a lot of ideas.

As far as you know, interviewing skill, trying to find avenues where folks can get exposure to.

Like with DPS LS with the VPS sales, the system leads.



**Cibulka, Cassandra (DBHDS)** 16:57

And Julian has working with you guys on some leadership, right?



**Griffin, Jarvis (DBHDS)** 16:57

I don't know if it's too early.



**Cibulka, Cassandra (DBHDS)** 17:00

Is there?

We're gonna come down to Hiram Davis and Tracy.

Do you know? We do wanna talk a little bit about that or what you guys talked about?



**Salisbury, Tracy (DBHDS)** 17:07

Sure. We're we're building the agenda right now and should have something finalized to present.

Hopefully, even before the next meeting.

It's it's a lot about leadership.

It will be 2 1/2 days.

It's our intent to offer it.

Every quarter. So beginning in April and we also want to reach out there might be a

section that's more of a panel to talk about what the facilities in detail.

The services they provide, their mission, their values, you know, so as people have choices of, you know, within the 50 mile radius where they might want to be placed, they will have a better understanding.

So this panel would have members of each of those facilities for question and answers as well as you know just a brief overview.

So we want to bring people into that, that meet them at their level, so it won't always be only the facility director's presenting.

We also want to, you know, give them some strengths.

In growing internally.

In several different classes that are affiliated with VPSL, but also things that Julianne is really proficient in and and is just so excited to share her knowledge base with the folks at Hiram Davis.

So as I said, it would be approximately from what we just penciled out last week.

It looks like a 2 1/2 day presentation to include a certificate at the end at the end of the graduation, and we would hope as many people as possible would be there to support the attendees.

Not sure how many each class will hold, but we will explore space at Central State Hospital so that we can accommodate as many as we can in order to get all 150 people that are interested.

In.

This course hopefully within 3/4 four quarters at the most.



**Cibulka, Kassandra (DBHDS)** 19:20

Thank you.

Appreciate that.



**Salisbury, Tracy (DBHDS)** 19:23

I'm happy to take questions that I might be able to answer, but this is still a work in progress, but something final to present before the end of February.



**Compton, Michael (DBHDS)** 19:36

One of the questions I hear a lot is based on timeline.

So when the announcement was made, staff were told that they would be meeting with some sort of HR representative or some sort of group to talk about their

individual plans.

Is that still a thing that's gonna happen?

And if so, when can staff start expecting to get some of those type of meetings scheduled?



**Cibulka, Cassandra (DBHDS)** 20:05

So Tracy is on site every Tuesday. And so we you can set up a time anytime with her and if there's additional support needed, she'll reach out to us and and we'll schedule additional people to come down.



**Salisbury, Tracy (DBHDS)** 20:19

We're also Michael.

It's important to know that there's a reason that we are doing these census to staff staffing plans so that we know what is needed at Hiram Davis before we start making any commitments as to where people will be placed.

We are already working.

We have identified everybody who is retiree eligible and we want to try to meet with them first so that they see the picture. As to, you know, if they were thinking that they wanted to retire April first.

What does it look like to stay on until we actually need them?

But more importantly, what might it look like if if there is their role is automatically in a department that is moving to Central State so that they might even want to project out longer. So the central state benefits team is already working on that with several different D.

So that we can, you know, give some some good information so people can make. Decisions. It's our goal.

Place people where they want to be.

And not a force, but at some point there will be, you know, limited space left if we are down to a a true closure at at with the sensing, sorry, with the senses plan Jarvis.

Do you want to add anything to that?



**Compton, Michael (DBHDS)** 21:42

And I wanna follow up on it if I can. Can I follow up on that?



**Griffin, Jarvis (DBHDS)** 21:42



No, I think you captured it well.  
Go ahead, Michael.

**ST** **Salisbury, Tracy (DBHDS)** 21:45

Can't I can't meet with someone and tell them where they're going at this time yet.



**Cibulka, Cassandra (DBHDS)** 21:49

Yeah, correct.



**Compton, Michael (DBHDS)** 21:51

OK.

So that's that's what I wanted to know because they were under the impression that somebody was gonna be reaching out to them to to schedule some kind of meeting. And what you're saying is if they want it now, they need to come and make an appointment with you until you have a better picture, which is gonna be a few months in the future.

Is that my understanding that correctly OK.



**Salisbury, Tracy (DBHDS)** 22:14

Yeah, until the census plan is actually finalized and we know where people where the space is and what we need to do to right size the ship, there will be no paperwork for placement until I have that kind of thing firmed up. All I can do is tell.



**Cibulka, Cassandra (DBHDS)** 22:15

Yeah.

Yeah.



**Salisbury, Tracy (DBHDS)** 22:32

Them what our goals are and and if they are retiree eligible, we can share that kind of information.



**Cibulka, Cassandra (DBHDS)** 22:34

Yeah.

Right.

 **Salisbury, Tracy (DBHDS)** 22:39

I might even be able to if I know where they prefer.

That's the kind of thing that I would get in a meeting.

You know whether they live closer to vcbr or they like the population at PGH.

Or do they want to stay on campus if they're not in a department that was already moving to Central State?

So I would love to speak to people to hear what it is that, that their goals are so I can, you know, start a start a pencil list.

 **Cibulka, Kassandra (DBHDS)** 23:09

Yeah, it's way too early for us to even project because we don't have any final decisions, right.

So we can't meet with someone. Say you're gonna go to PGH next week, because that's not even on the table right now.

So you know, but these kinds of conversations are are, are, are going on and and we encourage people to talk to us about that when we're on set that site or even the HR staff that are currently there 'cause, we now have permanent people back on site you.

Know to have those conversations so that we can, you know.

Continue to know what people are interested in as as we go through this process, we're able to better.

Understand and have that picture as we, you know, continue down the road.

 **Griffin, Jarvis (DBHDS)** 23:49

To kind of sum that up, you all, I think it's important that our staff now that's kinda interested start setting up those camps with HR, especially when Tracy is here so that she can kind of least get penciled in on some of your preferences and things that your.

Goals are, as she mentioned, I think we can do a better job messaging that out in the interim. If you, you know, just to have an idea of, you know.

 **Cibulka, Kassandra (DBHDS)** 24:12

True. Thank you.



**Griffin, Jarvis (DBHDS)** 24:17

Your particular role and you know what's your preference would be would be helpful in kinda as we get closer.

Down the down the road, being able to identify, you know those opportunities where we can probably just seamlessly transition you right on into.

What you know, kind of what? Yeah.



**Cibulka, Kassandra (DBHDS)** 24:38

Xy or Z?

Yes.



**ST Salisbury, Tracy (DBHDS)** 24:42

Just to kind of piggyback on and this is just broad.

Thought processes that we're tossing around, but you know as there is going to be a for instance, if someone goes to central state.

In Adsa capacity, even an LPN or an RN, they have a stringent training program that would be necessary for anybody from central, from PGA, from Hiram Davis to actually complete.



**Cibulka, Kassandra (DBHDS)** 25:10

OK.



**ST Salisbury, Tracy (DBHDS)** 25:11

And we're we're talking about how to to keep people at Hiram Davis, but put them through the orientation at Central State in advance of the placement so that we won. Have people still working at Hiram Davis as needed to meet the census, but then have them ready to.

Totally walk in and start working.

So you know we we have those kinds of thought processes that could begin sooner versus later.

For instance, if if the ideal capacity for an orientation is 20 to 25 people, they're only hiring 14.

You know, we might try to work out schedules so that we get people over there for the mandatory training that can be checked off the box.

Same is true for PGH.  
However, I haven't talked to them yet.



**Patel, Kapil (DBHDS)** 26:06

Just to piggyback on that idea, I know I was talking to a couple of CNAS and nurses. I don't know if this is possible or not, but is there a way that they could go to these facilities and like test out?

Their day-to-day routines.

Like, you know, like like shadowing. Exactly. I like shadowing.



**Salisbury, Tracy (DBHDS)** 26:25

Shadow.



**Cibulka, Cassandra (DBHDS)** 26:25

Shadowing like a shadow in here.



**Griffin, Jarvis (DBHDS)** 26:26

I like a shadow.



**Salisbury, Tracy (DBHDS)** 26:28

I think that's a great idea.



**Cibulka, Cassandra (DBHDS)** 26:30

Mm hmm.



**Salisbury, Tracy (DBHDS)** 26:30

We could set something like that up.



**Patel, Kapil (DBHDS)** 26:33

Because this place is unique and those place are totally different.

So they had a concern that if we could get some idea on how their workflow is and what they're dealing with patients.



**Cibulka, Cassandra (DBHDS)** 26:41

Beginning.

Good idea, yeah.



**Patel, Kapil (DBHDS)** 26:45

It would help them better to make decisions sooner than later.



**Cibulka, Cassandra (DBHDS)** 26:48

Sure. Thank you.

That's a good idea.

We'll add that to our list.



**Salisbury, Tracy (DBHDS)** 26:50

Wonderful.



**Compton, Michael (DBHDS)** 26:54

So here's another question that I've been asked a few times.



**Salisbury, Tracy (DBHDS)** 26:54

Let me ask.



**Compton, Michael (DBHDS)** 26:57

If a if somebody from here harm Davis goes to a different facility, do they have to start the the probation period all over again?



**Salisbury, Tracy (DBHDS)** 27:08

No.



**Cibulka, Cassandra (DBHDS)** 27:10

For state employees.

So they classified you, transfer, you keep all your state benefits.

The accrual all of that stays the same.

No new probationary period or anything like that.



**Compton, Michael (DBHDS)** 27:22

OK.

Thank you.



**Cibulka, Cassandra (DBHDS)** 27:27

You're welcome.



**Griffin, Jarvis (DBHDS)** 27:33

Questions still with your thoughts, Jill.



**Sorbie, Jill (DBHDS)** 27:39

Sorry.



**Griffin, Jarvis (DBHDS)** 27:41

What kind of thoughts do you have, Jill?



**Sorbie, Jill (DBHDS)** 27:44

Well, I I really liked talking about.

When we're, like, realigning.

Taking people from other departments and maybe cross training them to build skills like, I was thinking even for our HIM department, as you can see, the administrative numbers are down and maybe someone who might be interested in learning more about health information or as Capill said.

They looking at informatics, that type of thing.

That.

If their job starts, you know downturning and then not enough hours that maybe they could come over into our department and we could teach them some new skills and see if that might be a career path that they're interested in.

So I know as as we start consolidating and the census becomes lower, taking people from other positions and realigning them into other ones to help support.

Help support Hiram.



**Griffin, Jarvis (DBHDS)** 28:49

Yeah.



**Sorbie, Jill (DBHDS)** 28:49

Yeah.



**Griffin, Jarvis (DBHDS)** 28:50

That's a great point, Jill. And I think we're gonna continue to to expand that more and more as we kinda get longer further down the road.

We've already started some of that with.

Medical equipment and we're bringing in some CNAS to Start learning how to do sterile supply and inventory management. And it's gonna I think there's gonna be a lot of opportunity just like you said in Europe in your department for someone with some.

Administrative skills.

So what I foresee as we continue to have turnover and and vacancies, we start looking more internally versus applying outwardly you know really posting those positions like you know we have to navigate that with HR. But I think at some point I would like for us to start.



**Sorbie, Jill (DBHDS)** 29:24

Right.



**Griffin, Jarvis (DBHDS)** 29:43

To start to grow our own within, you know, in finding individuals that.

You know, would traditionally, you know, not have an opportunity to serve, say, such as like in the role of the quality or risk management or a training.

When we have those vacancies, we start to real give real consideration to individuals with potential and you know that.

Meet the you know the minimum qualifications for those and you know, I kind of assigned a note duties and, you know, having those duties evaluated to see, you know, if it really correlates to any more compensation or.

Just the increase in title role.

I just thought I have Casey, huh?

I know it's gonna, you know, take some navigate and kind of looking at the rooms around everything, but that's the thought that I was kinda having.



**Cibulka, Cassandra (DBHDS)** 30:42

OK.



**Sorbie, Jill (DBHDS)** 30:44

Right 'cause. I know I kinda suggested that, but I I do understand that there's some human resources things that you have to navigate through when you're trying to.

I I guess you know is it not realign a position or what not and sometimes it's like Oh well, people have to apply for that or what not. And I just didn't know in this particular unique scenario.

Is there ways of getting around that legally?



**Cibulka, Cassandra (DBHDS)** 31:13

So I think that you know, it depends. Like you know if it's a temporary thing, right?

So we can talk through that again.

You know, we don't have final decisions that you know, we're this is a done deal, right.

So we have to walk through processes and and and part of our you know goals here is to figure out how you know we're going to make our recommendations on what we do for the staff and then that's when all these final decisions are made, right so we.

Still need to go through some processes and if we're going to rotate people like.

Time. I don't think you have to necessarily, you know, recruit, but we may have an internal recruitment process, right.

That's like, who's interested so that we're aware, right?

And we can go through kind of a process and say, OK, we're gonna continue for the next 5 months. You're gonna get a month there because we've got some extra people, right. While we go through this process to determine where we end up.

But still, building skill sets along the way.



**Salisbury, Tracy (DBHDS)** 32:07

Think of it as a stretch assignment too.



**Cibulka, Cassandra (DBHDS)** 32:09



Yeah.

OK.



**Griffin, Jarvis (DBHDS)** 32:15

Jacob, you got any thoughts?

Snead.



**Snead, Sheila (DBHDS)** 32:35

I don't.

I work with Kim King on the provider end and working with.

Serious incidents for people who left our training centers.

And I think all of them have great ideas for both the patients and the employees.

And I am so grateful to work for a company who is.

This interested in their employees.

Thank you all.



**Cibulka, Kassandra (DBHDS)** 33:07

Thank you.



**Griffin, Jarvis (DBHDS)** 33:11

Mr. Rose, that you're fairly newcomer to the organization, transitioning from the military.

You got your thoughts according to kind of what we've been discussing or any ideas or recommendations 'cause. Ultimately our goal here is to put as much on the table and to rough out a plan that we can present to the Commissioner for final approval.

Are we talking about a lot of different components and we wanna as comprehensive of a plan that we can come up with from.

Whose transitioning?

Who's up scaling and what data metrics that you know we can kind of track and keep up with as we move down the Pike.

It's gonna be important that we do that because you know, as you know the the GA meets those questions will come up. And so you know, having that data and having those touch points will be very important to help communicate. You know, how we're gonna progress throughout this.

Process.

Steroids. Any thoughts?

It's OK if you don't.

 **Rose, William (DBHDS)** 34:30

Can you hear me?

 **Griffin, Jarvis (DBHDS)** 34:31

Yes, Sir.

 **Rose, William (DBHDS)** 34:32

OK, sorry I had had it on the wrong audio.

Yeah, I I think the career broadening idea.

Would help make people a little more marketable and probably a little more willing to stay until the end, whenever that may come.

It's something that, you know, at least in the military, of course, I'm going to talk about the experience that I have.

That's something that a lot of people in the military do is career broadening so that it opens up their abilities down the road for their long term career.

So I like the idea of, even though it may not become their full time gig later on or anything, but it gives them a better idea of what other people are doing and may give them an opportunity they may not have even realized that they enjoyed more or.

A different career path.

But I do like that.

And that might help kind of keep our numbers where they are as opposed to losing staff as it goes because we're giving them extra opportunities.

 **Griffin, Jarvis (DBHDS)** 35:37

Alright. And I did did wanna check in with one other person and I'll be quiet. Nathan 'cause. Nathan's probably one of our more seasoned individuals.

She's been around, you know, for quite awhile with the organization, and so I did. I think we would benefit from her insight as well.

 **Babb, Anissa (DBHDS)** 35:58

Well, ultimately I think all of us as employees would hope that the decision would be

not to close, Hiram and maybe another option.  
Be given at the end of this, but if the decision is to be made.  
I think it's.  
I think it's great talking about the cross training of employees.  
Giving them more skills.  
I myself am working on my 20 ninth year here at Hiram Davis.  
So the retirement piece is pretty important to me.  
To be able to look at.  
I guess figure out if it's even feasible for me, you know, or whether.  
I need to plan, you know, to transition to somewhere else as well.  
So so that's a.  
That's a big, important piece for people who I think are eligible or potentially eligible for retirement.  
Is is being able to determine which route you're going to be able to go, or you're going to have to go so, but I hope I hope positive things for Hiram.  
Hiram has been, you know, my whole my whole tenure here has been with Hiram Davis so.  
Umm.  
Kind of hate to see Hiram come to an end, but they've given wonderful care here.  
Many, many successful stories through the years.  
But.  
You know, we'll see. We'll see.  
So, but I appreciate y'all working with us to try to come up with some options.  
For our employees, so.



**Cibulka, Kassandra (DBHDS)** 37:50

Thank you.



**Griffin, Jarvis (DBHDS)** 37:51

Lick your \*\*\*\*\* as she pointed out, we do have quite a bit of staff that enjoy a lot of tenure here, but we got an upcoming service awards next week and.  
Within our pdpt department, I know we got collectively probably over 60 years of collective service.  
It's within two positions there.  
So you know those junctures.

I know they're slated to go over automatically to Central State, but you know they're nearing.

You know they're in the height of their careers and so they'll be at, you know, important junctures as well to start making decisions.

So those definitely will have operational impact should they decide to go or not. You know even pre you know pre closure. So a lot of those considerations are important for us to kind of keep our finger on.



**Cibulka, Kassandra (DBHDS)** 38:40

Yeah.

Absolutely.



**Wade, Connie (DBHDS)** 38:54

This is Connie Wade, a social work manager, and I just want to say that I appreciate you all giving us this opportunity to have this conversation.

But there's some concerns just about how people are coping with this information staff, you know, and any additional support for staff, whatever that may look like.

I think that the facilities doing a great job with the employee engagement activities with the, you know, hot chocolate and just different things that kind of build morale here.

The other thing is I think it's a great idea to try to cross train people as much as possible.

So that people are feeling comfortable right now.

I see people are stressed out.

I agree with Miss Babb.

The work that's happened here at Hiram Davis probably could not have happened anywhere else.

The social work department plans funerals for people who pass away here and.

And we repeatedly hear stories about.

Families who say these people were not supposed to live past 6 past 8 past 10, and they're 6065, then they're 70, you know, and it's a testament to the quality care that's been provided to these people here and and the support that the and the love.

These residents and family members receive here, so we talk a lot about what's not right and what doesn't go right. But when we talk to families about people who just weren't supposed to make it.

Live in decades.

It's a testament to what we provide and what we do is so unusual and unique and I am hopeful that there will be an opportunity for Hiram Davis to continue to provide those services. Clearly not in this building but.

That there would be a place for Hiram Davis, even on a smaller scale, that the services that we provide, we continue to provide across the state.

We talk to families frequently. A lot of these parents are elderly.

They are stressed out.

They're concerned about having to travel long distances to see their families, you know their age, and they don't drive as far anymore.

So there, there's just a lot to consider when we look at what happens to us, but also what.

With these residents and their families, so I'm hopeful that in some way we can continue our work, if not in this building somewhere and that family, the staff really feel supported during this journey.



**Griffin, Jarvis (DBHDS)** 41:38

Hence the essence of you know, this subcommittee is, you know, supporting the staff. I think we really have to have attention to the emotional support and recognition of, you know, the the change to grief that, you know, all of those stages.

And so I think part of what our plan needs to include is you know really dedicated.

Programming around, you know those support areas, but Tracy, you know.

Leadership pieces. The touch points for reflective leadership.

Definitely, staff engagement has to be a a critical piece that we're gonna have to make sure that we allocate resources to to ensure that, you know, we have robust support.

Throughout, and not just so infrequent staff recognition and really celebrating, you know, every milestone that we're able to achieve for if it's just apca going to ACNA.

If it's a certification here, it really highlight those aspects of you know, and making those present, you know, the kind of show, you know, the quantifiable impact that we've had, you know, in supporting staff. I think if we kinda keep that present and also celebrate you know our.

Staff transitions along the way, people are getting promoted and going to.

Different positions within the system. It's important that we don't lose that.

As you know, actionable items, because yes.

We have a turnover, but we were maintaining some staff within our system as well. And I think that's important part of the message in that you know, we need to keep. In front of us as well as outwardly focus kind of demonstrate, you know, this transitional period.



**Cibulka, Cassandra (DBHDS)** 43:54

Any other comments or concerns or any things that you think we need to focus on as we continue our talks?



**Patel, Kapil (DBHDS)** 44:03

I just have one more thing.

I just wanna send miss thank you to Miss Tracy for all the work she does here.

And if you need help from employee engagement committee, please feel free to reach out to me.

I could help out with some of the things you need to OK.



**Salisbury, Tracy (DBHDS)** 44:15

Thank you.

I will. And just so you know, Rosalind, who is our new HR person who is there every single day she comes to us with so much background, not just in HR, but employee recognition.



**Patel, Kapil (DBHDS)** 44:22

Yes.



**Salisbury, Tracy (DBHDS)** 44:31

She was throwing all sorts of ideas at Jarvis yesterday, and so we're anxious to, you know, work together on that type of thing.



**Griffin, Jarvis (DBHDS)** 44:44

Alright, team, so we gotta go.

We need to have some deliverables and start to kinda get some of this stuff on paper so that we can.

Bless it out, alright?

As a comprehensive plan.

So I think the Cathy you want us to kind of deliver a summation of our work with the ratio plan that census based plan for the next meeting.



**Cibulka, Kassandra (DBHDS)** 45:09

Yeah, I think that would be a good idea.

I think that would be really helpful.

I mean, if everyone agrees, I think that would be really helpful to kind of just have, you know, 'cause, that's what we're we have to come up with a plan, right of what?

Our recommendations are if we were to close right and so that would be a really strong beginning point and it will help us kind of craft and get feedback 'cause we you know we can't write that plan by ourselves.

We need everyone's input on that so that we can, you know, go through this process the right way and make sure that we we we get it right.

So yeah, I think that's a good idea.

If you all are in granite.



**Griffin, Jarvis (DBHDS)** 45:47

OK.

Gonna kinda qualify what we got, Tracy, as far as.

Staff training and development, type of support.

Plan there that we're kinda fleshing out through Julianne and.

Our.



**Salisbury, Tracy (DBHDS)** 46:07

I'm gonna invite Patricia Bullion to because she can help identify programs that are in play, things that she could actually share on site, but also funding avenues as well.



**Griffin, Jarvis (DBHDS)** 46:23

I think important is to kind of have a piece where we.

And I appreciate her team with providing information for scholarships.

And possible tuition reimbursement.



**Salisbury, Tracy (DBHDS)** 46:43

I think what I'll do, Jarvis, and we'll work it out together and Nisa might need your help as well.

But to establish a a calendar where folks can come in and, you know, set aside 30 minutes, we probably don't need 30 minutes, but just to start having those one to one appointments.

We'll begin that and then I'll have a a schedule of when Patricia will be on site to also either man a table for opened opportunities to come discuss to have a.

A room to do a presentation, but also to have one-on-one.

So we'll start working on a really great calendar for folks to sign up on.



**Patel, Kapil (DBHDS)** 47:27

And one last thing for me. If if employees are looking for any kind of certifications or like further do I send them to HR?

If they're asking questions regarding.



**Salisbury, Tracy (DBHDS)** 47:42

Yeah, that's a good start.

I mean, I hope to actually hear them.



**Patel, Kapil (DBHDS)** 47:44

OK.



**Salisbury, Tracy (DBHDS)** 47:46

You know one-on-one and work through that, but.



**Patel, Kapil (DBHDS)** 47:48

OK. All right.



**Salisbury, Tracy (DBHDS)** 47:51

But I I appreciate any involvement and assistance you can provide us, so I I'm not going to say no.



**Patel, Kapil (DBHDS)** 47:56

OK.

All right, no problem.



**Griffin, Jarvis (DBHDS)** 48:04



And I think as far as the internal upskilling, I will continue to have it, you know. Conversations internally at the facility discussion with HR as we have those vacancies and we'll kinda meet those on a case by case basis. Folks vocalize interest in their touch points. With HR, we'll have that as an intake where we can identify, you know, the potential avenues that they can possibly get that exposure.



**Cibulka, Cassandra (DBHDS)** 48:35

And we'll continue.

I did have that and I didn't share this time, but I will have a slide next time too. That will show us what like hires and separations by month as we as we continue down this road just so we can keep an eye on and are transparent with.

Everyone on that.



**Griffin, Jarvis (DBHDS)** 48:49

Yeah, that'd be helpful.

Alright.



**Cibulka, Cassandra (DBHDS)** 48:57

If no one has anything else, I think we'll wrap it up and and we'll meet again next next month.

Is that doable for everyone OK.



**Cunningham, Lauren (DBHDS)** 49:05

Next month.

Cassie was going to make 22 notes for especially for Hiram Davis staff.



**Cibulka, Cassandra (DBHDS)** 49:09

Yeah, yeah, yeah.



**Cunningham, Lauren (DBHDS)** 49:10

We'll have a recording of this up on the web page, if not by the end of today, certainly by the end of this week and then in terms of contacting the Co leads. I think this group especially knows how to reach everyone between Doctor Griffin and Cassie and.

Tracy. But we also have that Hdmc planning team at DBHDS.

E-mail if you want to send something or you have questions or comments for the Co leads, we can share that with the entire group.  
Group.



**Cibulka, Cassandra (DBHDS)** 49:42

Alright, thank you all.  
You have a great day.



**Salisbury, Tracy (DBHDS)** 49:45

Thank you.



**Griffin, Jarvis (DBHDS)** 49:45

Thank you.



**Cunningham, Lauren (DBHDS)** 49:45

Thank you.



**Patel, Kapil (DBHDS)** 49:46

You too. Bye bye.



**Cunningham, Lauren (DBHDS)** 49:46

Bye.



**Compton, Michael (DBHDS)** 49:47

Thank you. You too.



**Sorbie, Jill (DBHDS)** 49:47

Thank you.



**Wade, Connie (DBHDS)** 49:48

Thanks.



**Snead, Sheila (DBHDS)** 49:49

Thank you.

**RW** **Rose, William (DBHDS)** 49:50

Thank you.

● **Cunningham, Lauren (DBHDS)** stopped transcription