

NH Sunday News – May 7, 2017

Emails: State told about staffing

Why surprised?: Exchanges last year with Dartmouth-Hitchcock discussed staffing difficulties at mental hospital.

By DAVE SOLOMON

CONCORD — While Gov. Chris Sununu and Human Services chief Jeffrey Meyers appeared to be shocked by the news of staffing shortages at the state psychiatric hospital, emails suggest that Meyers and the people who reported to him were well aware of the problem long before Wednesday's bombshell announcement and the forced resignation of the hospital's CEO. Officials at Dartmouth-Hitchcock Health Care Systems, which holds a \$36.5 million staffing contract to provide medical personnel at the state-run facility, said they were as surprised as anyone by the state's actions last week.

Josh McElveen, Dartmouth- Hitchcock vice president for communications, says D-H officials have been in regular communication with the state about staffing challenges at New Hampshire Hospital, and were blindsided by the quick departure of hospital CEO Robert MacLeod and the formal notice of "contract non-compliance" sent by Meyers on May 2. (See related article) Sununu has ordered the state attorney general to review the contract and any other compliance issues. The state might also seek some form of reimbursement from Dartmouth-Hitchcock. "We've been paying for a full staff and not getting it," Sununu said.

However, emails among state officials regarding the staffing contract, obtained by the N.H. Republican Party through a Right-to-Know request last year, show that staffing problems were frequently discussed. A Sept. 9, 2016 email from then-Medical Director Dr. David Folks to the state's senior management at the hospital describes attending physicians as "overwhelmed." The memo outlines which doctors are leaving (their names blacked out) and describes the impact. "Additionally, (name redacted) has completed his tour of duty at NHH and we are now operating with two attending physicians on the APC (Anna Philbrook Center, children and adolescent unit.)

"(Names redacted) are frankly overwhelmed and I would recommend that we either bring in someone to assist or reduce the case load to 10 patients per doc," wrote Folks, who retired in January and was replaced by Dr. Alexander de Nesnera In that same email, Folks stated there was no clinician to supervise admissions to NHH and that he would cover the new crisis unit as well as an adult unit at the hospital, even though the contract requires clinicians for each of those three areas. Another email from Folks to hospital administrators on Sept. 9 showed one psychiatrist's position unaccounted for in an adult unit, listed as "TBA." The staffing report that accompanied that email listed administrators as providing clinical coverage on certain units that were supposed to be staffed by clinicians.

Blacked out pages

More than 900 of the roughly 1,500 pages of documents released by DHHS in response to the GOP right to- know request have been redacted. "Who knows what's in all the pages that haven't been released," said Victoria Cronin, a psychiatric nurse practitioner who was among several professionals who left New Hampshire Hospital last summer as Dartmouth-Hitchcock took over the contract from Dartmouth College Medical School. The NHGOP hired prominent attorney Chuck Douglas to challenge all the DHHS redactions in court, but the appeal was withdrawn after Sununu was elected. Cronin said the sudden concern about staffing levels at the hospital came as a surprise to her and her former associates, all of whom have since found employment elsewhere. "This throwing McLeod under the bus is a red herring,"

she said. “Meyers has known they’ve had insufficient staffing since before the state gave them the contract, and he’s known certainly from our group, the New Hampshire Psychiatric Professionals, that the staffing was inadequate.” In an email dated July 10, as the D-H contract was under review, Folks reports to MacLeod and other senior state officials, “We obviously need to recruit physicians, nurse practitioners, social workers and nurses because we have critical shortages with all of these disciplines.”

‘On thin ice’

In a Sept. 23 email, Folks writes “we remain thin on coverage and any suggestions are appreciated” for the Unit Assignments the week of Sept 26-30. The coverage roster shows Dr. Alex de Nesnera covering both positions on C-unit, meaning an administrator was covering two staff positions. In another email that same day to Folks, MacLeod and others, De Nesnera states that Folks will be “assisting with new admissions ... for the entire week which will take some of the pressure off of (unnamed doctor) who is doing double duty.” When asked several questions about the emails and why the state did not take action at that time, DHHS spokesman Jake Leon provided a one-sentence reply: “Commissioner Meyers addressed the noncompliance with staffing levels during the Executive Council meeting on Wednesday. The Department has nothing further to add to the commissioner’s presentation.”

Rotating cast

A NHH administrator who works in a billing unit described the medical staffing at the hospital as a rotating cast of characters as Dartmouth- Hitchcock deploys personnel from its other locations. She asked to remain unnamed for fear of losing her job. “We have a different doctor every week; a different social worker every week; everyone is treated as disposable,” she said. Dartmouth-Hitchcock officials say the emails show staffing problems that existed before they took over the contract and in the early weeks, which have since been resolved.

“During the months before the current contract commenced, Dartmouth-Hitchcock was transparent with the state about staffing needs at NHH and the time required to stabilize staffing levels,” said McElveen. “Since then, and certainly since the start of the current contract, Dartmouth-Hitchcock has continued to keep the state regularly informed and, as predicted, staffing levels stabilized to the satisfaction of the state until we were surprised to receive the HHS Commissioner’s letter this week.”

Meanwhile, the state is dealing with several staff shortages of its own at the management level. The CEO is now serving on an interim basis, while the hospital operates without a chief operating officer and director of nursing — all positions that state is supposed to fill. The director of quality control is stepping down in June. When asked to describe the circumstances leading to the departures and the status of efforts to find replacements, Leon would only say, “The chief operating officer and director of nursing positions are both in recruitment.”

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State hospital children’s unit proposal gets chilly reception

By DAVE SOLOMON

CONCORD — A proposal by Health and Human Services Commissioner Jeffrey Meyers to begin architectural and engineering work on a new children’s wing at the state psychiatric hospital got a cool reception before the Senate Finance Committee on Friday. The panel heard capital budget requests from a variety of departments, including Health and Human Services, which is trying to resolve long waiting lists for admission to New Hampshire Hospital.

Meyers suggested that one of the most practical ways to address the situation would be to build a new facility to accommodate the 24 children who now occupy beds at New Hampshire Hospital, and convert those beds to adult use. “Obviously it’s a way for us to best address the behavioral health needs of children, particularly those who need to be admitted for inpatient treatment,” he said. “There really is no practical way to increase the number of adult beds at New Hampshire Hospital given the current footprint of that facility unless we move out the kids.”

Creating a new 24-bed unit for children would free enough space, once remodeled, to serve 48 adults at the hospital, Meyers said. He requested \$3.5 million for architectural and engineering work on the new children’s wing and conversion of the existing children’s unit to adult use. Meyers said he is exploring options for community agencies to address some of the children’s behavioral health need, but their capacity is limited, especially for those who need to be admitted for inpatient treatment. “If we are going to address some of the gaps that exist for those awaiting patient admission (at NHH), then we need to consider either adding on to New Hampshire Hospital or building a freestanding facility next to it,” he said.

The Senate committee seemed unconvinced that investing millions in a new wing or standalone building on the same grounds is a viable proposition for now, given that the Legislature is on the verge of approving a bill that calls for DHHS to develop a 10-year plan by the end of 2017. “I definitely think it’s premature to spend \$3 million on engineering,” said Senate Majority Leader Jeb Bradley, R-Wolfeboro. “My response is come up with a plan and then we’ll have something to talk about.”

In a later interview, Bradley said there may be other options for relocating the children now being treated at New Hampshire Hospital. “There’s broad agreement that the 24 kids should be moved somewhere, but is there a better way to do it without putting a lot of money into a new building? I think that’s the question,” said Bradley. “It would be one thing if we had more capacity in the capital budget, but once you start spending \$3 million, you can get locked into a certain pathway that I think is premature.”

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Dartmouth-Hitchcock blames state for NH Hospital staffing woes

By DAVE SOLOMON

CONCORD — In its formal reply to allegations of understaffing at the state psychiatric hospital, Dartmouth-Hitchcock points the finger at state officials, claiming that, “Efforts to hire and retain personnel at New Hampshire Hospital have been rendered impossible by the actions of DHHS, the Executive Council and the governor’s office.” The letter from attorney Michael Connolly with the firm Hinkley Allen of Concord was delivered to Department of Health and Human Services Commissioner Jeffrey Meyers on Friday in response to a letter from Meyers last week alleging contract violations and demanding remedies.

In the letter, Dartmouth-Hitchcock admits to “minor deviations from the strict contractual terms,” but claims they were acknowledged and accepted by DHHS, and that Dartmouth-Hitchcock “continued to perform under the agreement without notice or complaint.” By failing to raise the issue on any previous occasion, and by undermining the hospital’s recruitment efforts, the state forfeits any right to enforce the sanctions outlined in Meyers’ notice, according to Connolly. His letter refers to contract

performance by Mary Hitchcock Memorial Hospital (MHMH), the Dartmouth-Hitchcock affiliate that formally holds the contract.

“Even a cursory online search reveals numerous articles in which state officials threatened to rebid the agreement, or made inflammatory statements to the media regarding MHMH’s alleged lack of trustworthiness,” he writes, citing articles published in the New Hampshire Union Leader and other media. “With these serial accusations and threats, the state has knowingly and willfully created a climate that made it impossible for MHMH to fulfill the staffing levels set forth in the agreement. MHMH has successfully attracted and recruited highly skilled physicians from around the world for decades,” the letter continues.

“With respect to NHH however, plainly a medical professional will not accept an appointment at NHH with the state’s officials, including the governor, suggesting that their position is likely to be imminently eliminated.” The letter also disputes allegations made by Meyers regarding the staffing levels. “Since the outset of the agreement, MHMH has been fully transparent regarding the exact level of psychiatric staffing provided to NHH,” Connolly wrote.

He states that MHMH would meet with hospital CEO Robert MacLeod on a weekly basis to discuss the level of psychiatric staffing and on a regular basis provided MacLeod with detailed written reports that identified the level of psychiatric staffing “to the tenth of an FTE (full-time equivalent).” “MHMH is aware that Mr. MacLeod in turn would regularly provide the psychiatric staffing reports to you,” he wrote, alluding to Meyers. “Any allegation that the staffing reports prepared by MHMH were inaccurate or that MHMH did not fully disclose the level of staffing at NHH are categorically false and defamatory.”

Connolly maintains that, by its actions or inaction, the state has waived its right to demand 100 percent adherence to the staffing contract. “Prior to the issuance of the May 2 notice, DHHS never indicated the MHMH level of staffing was insufficient to meet medical needs of NHH patients, or formally noticed MHMH that it was not satisfying the terms of the agreement,” he writes. “DHHS has therefore waived its right to strict performance of certain sections of the contract.”