



**COMMUNITY RELATIONS COMMITTEE
OF THE BOARD OF DIRECTORS**

November 13, 2018

5:30 P.M.
Board Room
125 Worth Street, Room 532

JOINT MEETING WITH COUNCIL OF COMMUNITY ADVISORY BOARDS

AGENDA

- | | |
|---|------------------------|
| I. Call to Order | Gordon Campbell |
| II. Adoption of September 12, 2018
Community Relations Committee Meeting Minutes | Gordon Campbell |
| III. Chairperson's Report | Gordon Campbell |
| IV. President's Report | Matthew Siegler |
| V. Information Items (Annual CAB Reports): | |
| a. NYC Health + Hospitals/Lincoln | George Rodriguez |
| b. NYC Health + Hospitals/Gouverneur | Enrique Cruz |
| c. NYC Health + Hospitals/Belvis | Gabriel DeJesus |
| d. NYC Health + Hospitals/Morrisania | Louisia Watkins |
| VI. Old Business | |
| VII. New Business | |
| VIII. Adjournment | |

COMMUNITY RELATIONS COMMITTEE OF THE BOARD OF DIRECTORS

September 12, 2018

5:30 P.M.

NYC Health + Hospitals Board Room

125 Worth Street, Room 532

MINUTES

ATTENDEES

COMMITTEE MEMBERS

Josephine Bolus, NP-BC, Committee Chair

Robert Nolan, Board Member

Machelle Allen, M.D., for Mitchell Katz, M.D., President, NYC Health + Hospitals

COUNCIL OF THE COMMUNITY ADVISORY BOARDS

Rosanne DeGennaro, Chairperson, NYC Health + Hospitals/Coney Island

Sharon Oliver-Henderson, Chairperson, NYC Health + Hospitals/Cumberland

Gladys Dixon, Chairperson, NYC Health + Hospitals/Coler (excused)

James Boneparte, representing Anthony Andrews, Ph.D., Chairperson, NYC Health + Hospitals/Queens

Everett Person, representing, Ruth Clark, Chairperson, NYC Health + Hospitals/Sydenham

Oliva Taylor, representing, Vere Gibbs, Chairperson, NYC Health + Hospitals/East New York

Esme Sattura-Low, Chairperson, NYC Health + Hospitals/North Central Bronx

Eartha Washington, Chairperson, NYC Health + Hospitals/Elmhurst

Judith Febbraro, Chairperson (A), NYC Health + Hospitals/Carter (excused)

John Roane, Chairperson NYC Health + Hospitals/Bellevue

J. Edward Shaw, Chairperson, NYC Health + Hospitals/Metropolitan

Judy Wessler (representing, Enrique Cruz, Chairperson) NYC Health + Hospitals/Gouverneur

William Hamer, Chairperson, NYC Health + Hospitals/Harlem

Warren Berke, Chairperson, NYC Health + Hospitals/Kings

Jessica Arocho, Chairperson, NYC Health + Hospitals/Woodhull

Antoine Jean-Pierre, Chairperson, NYC Health + Hospitals/McKinney

FACILITY COMMUNITY ADVISORY BOARD MEMBERS

Cheryl Alleyne, NYC Health + Hospitals/North Central Bronx

Trina Jones, NYC Health + Hospitals/East New York

Lillie Taylor, NYC Health + Hospitals/East New York

Lenngston Wright, NYC Health + Hospitals/East New York

NYC HEALTH + HOSPITALS CENTRAL OFFICE STAFF

Matthew Siegler, Vice President, Managed Care and Patient Growth

Colicia Hercules, Office of the Board

Lisette Sararia, Office of the Board

Lucia Caltagirone, Office of Legal Affairs

Bridgette Ingraham-Roberts, Office of Government Relations

Kathleen Whyte, Office of Government Relations

Xiomara Wallace, Funds NYC Health + Hospitals

Manelle Belizaire, Office of Government Relations

Robb Burlage, Ph.D., Office of Government Relations

Renee Rowell, Office of Government Relations

NYC HEALTH + HOSPITALS FACILITY STAFF

Sheldon McLeod, Chief Executive Officer, NYC Health + Hospitals/Kings County

Cristina Contreras, Executive Director, NYC Health + Hospitals/NCB

Sandra Springer, CAB Liaison, NYC Health + Hospitals/Queens

GUESTS:

Nuria Velasquez, New York State Nurses Association

Patrick O'Rourke, Office of Manhattan Borough President

John Civitello, Paramount Specialty Pharmacy

Janet Escalante, Paramount Specialty Pharmacy

Yvette Areizaga, Paramount Specialty Pharmacy

CALL TO ORDER:

The Chairperson, Mrs. Josephine Bolus, NP-BC, called the meeting of the Community Relations Committee (CRC) to order at 5:40 p.m. Mrs. Bolus, announced that a quorum had been established. She requested a motion for the adoption of the minutes of May 8, 2018. A motion was made and seconded. The minutes were adopted.

CHAIRPERSON'S REMARKS:

Mrs. Bolus began her remarks by encouraging Members, CAB Chairs and invited guests to vote in the Primary Elections on Thursday, September 13th. She continued and highlighted notable community related initiatives and accomplishments from across the system as follows:

- Congratulated J. Edward Shaw on being elected as chair of the Council of CABs and extended a warm welcome to NYC Health + Hospitals newly elected CAB Chairs, John Roane, Chair of the Bellevue CAB; William Hamer, Chair of the Harlem CAB and Jessica Arocho, Chair of the Woodhull CAB.
-
- Thanked all for attending the annual Marjorie Matthews Community Advocate Recognition Barbecue that was held on July 19th held on the lawn of the Coler campus. Mrs. Bolus noted that more than 200 CAB and Auxiliary members, leadership and facility staff were in attendance.
- Reported that a ribbon cutting for the new Gotham Health Vanderbilt Health Center was held on July 26th. Mrs. Bolus added that this new health center will expand access to primary care for children and adults, mental health counseling and referrals for opioid treatment on Staten Island. She noted that the center is expected to serve 15,000 patients annually.
- Announced that Roberto Clemente Health Center, located on Manhattan's Lower East Side, was reopened on July 16th after the completion of a \$1 million renovation. Mrs. Bolus noted that the project was funded by the City Council and the Manhattan Borough President, Gale Brewer.
- Informed Members, CAB Chairs and invited guests that the new Gotham Health/Bedford-Stuyvesant Community Health Center in Brooklyn opened in August. Mrs. Bolus added that this new health center was funded by a \$3.1 million capital investment through Mayor de Blasio's Caring Neighborhoods Initiative.
- Announced that on August 22nd, Coney Island unveiled its new Outpatient Diagnostic/Women's Health Imaging Suite, which has some of the most advanced imaging technologies.
- Reported that on September 10th, Assemblywoman Carmen Arroyo announced an appropriation of \$2.4 million from the New York State Assembly for state-of-the-art 3T MRI equipment for Lincoln. This equipment will be installed in 2020, and is expected to improve both diagnosis and patient experience.

- Reported that the public health care system is working to reduce the disproportionate number of maternal deaths and life threatening complications of childbirth among women of color. Mrs. Bolus added that a new program had been launched to provide simulation training in all hospitals' obstetric units focusing on the identification and response to the top causes of pregnancy related deaths for women of color.
- Announced that NYC Health + Hospitals' farmers markets will be available at the facilities until November 2018. Mrs. Bolus added that the farmer's markets helps to promote good nutrition and healthy eating habits. Mrs. Bolus asked all to help spread the word about these markets in their respective communities. She noted that a flyer with a listing of the locations can be found in tonight's packet.

Mrs. Bolus concluded her remarks by announcing that NYC Health + Hospitals would be partnering again with the Centers for Medicare and Medicaid Services to provide Health Insurance 101 Workshops at four of our facilities, just in time for open enrollment. Mrs. Bolus added that the workshops would cover Medicare Parts A, B, C, and D; Medicaid basics; preventive services and what's new for 2019 and beyond.

- Thursday, October 25, 2018, 1:30pm – 5:00pm at Woodhull
- Thursday, November 8, 2018, 1:30pm – 5:00pm at Jacobi
- Tuesday, November 13, 2018, 8:30am – 12:30pm at Coney Island
- Thursday, November 15, 2018, 3:00pm – 6:00pm at Metropolitan

Mrs. Bolus continued with the agenda and welcomed Matthew Siegler, Senior Vice President for Managed Care and Patient Growth. Mrs. Bolus added that Mr. Siegler is overseeing the Office of Government and Community Relations, and would be providing remarks on behalf of Dr. Katz, who was attending the New York State Indigent Care Workgroup meeting in Albany.

PRESIDENTS REMARKS:

Matthew Siegler

Matthew Siegler, Sr. Vice President, welcomed Committee Members, CAB Chairs and invited guests and informed members of the Committee and CAB Chairs how excited he was to meet them. Mr. Siegler, noted that his remarks would be brief because he looked forward to hearing the CABs' annual reports. Mr. Siegler continued and highlighted the following:

- Reported that he had read past minutes of the Community Relations committee and had concluded that CRC is the most important committee of NYC Board of Directors because of its uniqueness to having patients on the committee. Mr. Siegler continued and note the community is the voices of our patients and they help to get the word out to the community about our services. Mr. Siegler stated "the more in touch with our community the better job we do."
- Reiterated Dr. Katz's goal of more primary care access and specialty services. Mr. Siegler continued and noted "Dr. Katz's goal is to make it easier for patients to get a specialty appointment and get our financial structure organized so that the system can be around to service people."

Mr. Siegler concluded the President's remarks by encouraging CAB members to continue to share information with the community.

Ms. Eartha Washington, Chair, NYC Health + Hospitals/Elmhurst asked about NYC Health + Hospitals inability to accept a variety of commercial insurance?

Mr. Siegler responded that by accepting variety of insurance is a great way for NYC Health + Hospitals to grow. He noted that he is in negotiations with multiple plans. Mr. Siegler noted that NYC Health + Hospitals want to expand the number of plans but want to make sure that they are treating us fairly.

Mr. Siegler noted that a list of accepted insurance plans can be found on NYC Health + Hospitals website.

COMMUNITY ADVISORY BOARD (CAB) ANNUAL REPORTS

NYC Health + Hospitals/Kings

Mrs. Bolus introduced Mr. Warren Berke, Chairperson of NYC Health + Hospitals/ Kings County CAB and invited him to present the CAB's annual report.

Mr. Berke began his presentation by greeting members of the Committee, CAB Chairs and invited guests. Mr. Berke highlighted the following key points and accomplishments:

- Reported that the most significant health care service needs and concerns for the Central Brooklyn community are: Hypertension, Diabetes, Heart Disease, Obesity, Asthma, Mental illness and HIV/AIDS.
- Reported that the most frequent complaints raised by patients includes excessive wait time for appointments, Pharmacy and Emergency Department customer service and a lack of communication. Mr. Berke noted that in the recent months there had been a new head of Emergency Department and the pharmacy department had improved.
- Reported the most frequent compliments provided by patients and the community included: professionalism and the quality of care. Mr. Berke added that one of the challenges of York New City is stability and affordable housing. Mr. Berke announced that on the grounds of Kings County there are now three (3) new CAMBA buildings (residential housing).

Mr. Berke concluded his presentation by informing members of the Committee, CAB Chairs and invited guests that the Kings County CAB provides input into the development of the facility's strategic priorities. Mr. Berke continued and explained that the CAB engages with

all levels of staff at the facility for the purpose of transparency. Mr. Berke added that the CAB is fortunate that the leadership of NYC Health + Hospitals/Kings respects the input which the CAB offers. Mr. Berke thanked NYC Health + Hospitals/Kings County leadership for their dedication and commitment to the community.

NYC Health + Hospitals/Coney Island

Mrs. Bolus introduced Ms. Rosanne DeGennaro, Chairperson of NYC Health + Hospitals/Coney Island CAB and invited her to present the CAB's annual report.

Ms. DeGennaro began his presentation by thanking members of the Community Relations Committee for the opportunity to present Coney Island's CAB annual report and acknowledging William Brown, CEO, NYC Health + Hospitals/Coney Island for his leadership and support.

Ms. DeGennaro continued and highlighted the following key points and accomplishments:

- Informed members of the Committee, CAB Chairs and invited guests that the CAB participated in last year's Breast Cancer Walk. Ms. Degennaro added that this year the CAB will participate in Pink Wednesday. Ms. DeGennaro explained that Pink Wednesday, raises money for the fight against Breast Cancer and the Walk in October.
- Reported that the Coney Island CAB has had a voter registration drive in October, 2017 and looked forward to participating in National Voters' Registration Drive on Tuesday, September 25th.
- Reported that in March the CAB held its Annual Legislative Breakfast. She noted that it was very successful.
- Reported that on August 22nd the CAB joined Mr. Brown and staff at the Women's Health Imaging Suite.

Ms. DeGennaro concluded her presentation by thanking Lakeisha Weston, CAB Liaison for her dedication and commitment to the CAB.

NYC Health + Hospitals/North Central Bronx

Mrs. Bolus introduced Ms. Esme Sattaur-Low, Chair of NYC Health + Hospitals/ North Central Bronx (NCB) CAB and invited her to present the CAB's annual report.

Ms Sattaur-Low began her presentation by thanking members of the Committee for the opportunity to present the NCB CAB's annual report. Ms. Sattaur-Low highlighted key points and accomplishments:

- Informed members of the Committee that the NCB CAB received periodic updates throughout the year on Women's Health Service /Labor and Delivery. Ms. Sattaur-Low

continued and announced that since the reopening approximately 2,853 babies were delivered.

- Reported that the NCB CAB had expanded its advocacy role by having a representative on the Patient Experience Committee. Ms. Sattaur-Low explained that the committee is comprised of executive leadership, administrative staff and nursing officers who listen intently to patients talk about their experience. Ms. Sattaur-Low noted that the committee hears both good and bad experiences.
- Reported the community most significant health issues include; obesity, diabetes, and hypertension. Ms. Sattaur-Low added that these health issues are addressed by the distribution of health education materials, free screenings and health fairs.
- Announced that during the month of August, the NCB CAB participated in the Back to School Health Fair. She noted that the event was well attended and very successful.

Ms. Sattaur-Low concluded her presentation by informing members of the Committee, CAB Chairs and invited guests that NYC Health + Hospitals/NCB, is a hospital that has provided quality health care to generations of families. She noted that the CAB is proud of the hospital and will continue to make the hospital and community stronger. Ms. Sattaur-Low continued and congratulated Cristina Contreras, on her newly appointed role as the Executive Director.

Mr. Robert Nolan, Board member, congratulated Ms. Cristina Contreras, as the newly appointed Executive Director of NYC Health + Hospitals/NCB.

OLD BUSINESS:

None.

NEW BUSINESS:

None.

ADJOURNMENT

The meeting was adjourned at 6:25 PM.

**REPORT TO THE COMMUNITY RELATIONS COMMITTEE
OF THE HEALTH + HOSPITALS BOARD OF DIRECTORS**

(Lincoln Medical and Mental Health Center)

I. COMMUNITY NEEDS

1. What are the most significant health care service needs or concerns of your community/communities?

The main concern is the huge shortage of nurses that the hospital is experiencing. Hospital is desperately trying to recruit and it's been very difficult. How can the board assist in helping to recruit? What strategic plans are in the works? This issue has been going on for months.

2. How were these needs/concerns identified? (Please check all that apply).

- ☒ Community Board(s) meetings ☒ Other Public Meetings
☐ Needs Assessments ☐ Surveys ☐ Community Health Profile Data
☐ Reports from Community Organizations ☐ Other Activities (please list)

3. Is your facility leadership addressing these needs/concerns?

- ☒ yes ☐ no

- a. If yes, please give examples of what the facility leadership is doing.

Ongoing recruitment. The Community Advisory Board members bring out the word to the community and the community Leaders of the need for nursing staffing.

II. FACILITY'S PRIORITIES

1. What are the facility's strategic priorities?

To continue providing the best possible health care to our community and improving patient flow , decreasing the total amount of time it takes a patient to be discharged from the clinic.

2. Describe how the CAB provides input into the development of the facility's strategic priorities?

The Administration gives the CAB members the opportunity to give feedback and make suggestion on the reports presented at the monthly full board meetings.

3. Have CAB members been informed of and provided input into the facility's plans for new programs and modernization projects, prior to their implementation?

☒ yes

☐ no

III. PATIENTS'/RESIDENTS' EXPERIENCES

1. Patient safety and patient satisfaction are a priority of the facility. Are reports on these subjects provided on a regular basis to the Community Advisory Board?

☒ Yes

☐ No

2. What are the most frequent complaints raised by patients/residents?

Wait time in the clinics and the pharmacy are still an issue.

3. What are the most frequent compliments provided by patients/residents?

Good Doctor and Patient Relationships. Staff attitude still needs improvement.

4. (For hospitals and D&TCs only). Are periodic reports or updates on the facility's access indicators such as appointment availability and cycle times/wait time(s) provided by facility leadership at CAB meetings?

☒ Yes

☐ No

5. From the CAB's perspective, rate the facility in the following areas:

	Poor	Satisfactory	Very good
Cleanliness	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Condition	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Appearance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

6. Is signage about HHC's Options Program posted in areas that have high traffic?

☒ Yes

☐ No

IV. CAB ORGANIZATION, STRUCTURE AND RESPONSIBILITIES

1. According to the CAB's By-laws, what is the CAB's total allowable membership? 24

2. What are current numbers of members? 12 What are current numbers of vacancies? 12

3. What were the membership recruitment activities conducted by CAB this year?

Currently working on a recruiting from community organizations, committees, tenant associations, school PTA's and churches. Recruitment will continue to ensure we move in the right direction which is full membership with individuals that are willing to be the eyes and ears of the community and strong advocates for the hospital.

4. Do the CAB's recruitment efforts include outreach to new population groups in the community?

☒ Yes

☐ No

5. Does the CAB have an active working committee structure? Please list committees and briefly describe their responsibilities.

We have an active Intergovernmental committee in charge of putting together the Annual Legislative Event along with Belvis and Morrisania. Each year event has been very well attended with Community based organizations, community leaders and residents.

6. Do Community (planning) Board representatives on the CAB communicate the facility's needs or concerns with local Community Board(s)?

☒ Yes ☐ No

a. If yes, please describe actions taken.

Members that belong to the Community planning boards take back information received at the CAB meetings to inform about what's going on in the hospital in regards to advanced health care, new programs available and new medical treatment being offered in the near future.

7. Do Community Planning Board designees provide information at CAB meetings concerning the Community Board's(s') priorities or healthcare related issues brought to Community Board meetings?

☒ Yes ☐ No

8. Did the CAB convene an Annual Public/"Community Health meeting" with the general public this year?

☐ yes ☒ no

9. Did the CAB host or participate with the facility's leadership in a legislative forum this year?

☒ yes ☐ no

Hosted an Annual Legislative Event along with Belvis and Morrisania. Each year event has been very well attended with Community based organizations, community leaders and residents.

10. Did a representative of the CAB provide testimony at HHC's Board of Directors' Annual Public Meeting?

☒ yes ☐ no

a. If so, were the issues subsequently addressed?

No issues.

11. Describe the CAB's involvement in its facility's outreach activities?

CAB members speak and advocate on behalf of the facility at: Planning Boards, Health Fairs, Public Hearings, Albany Advocacy Day and events hosted by the facility.

12. Does your CAB's Chairperson or alternate designee attend the Council of Community Advisory Boards meetings?

☒ yes ☐ no

13. Did your CAB participate in last year's Council of CABs Annual Conference?

☒ yes ☐ no

14. How would you describe the current level of technical and strategic assistance provided to the CAB by the Office of Intergovernmental Relations?

☐ not enough ☒ just right

If not enough, what assistance would you need?

V. ADDITIONAL TOPICS FOR DISCUSSION (OPTIONAL)

Are there additional topics that the CAB would like to discuss with the Board of Directors' Community Relations Committee? Please list the topics.

- 1.
- 2.
- 3.
- 4.
- 5.

NOTE: The comments in this report represent the consensus of the entire membership and have been shared with the facility administration.

Signatures:

CAB

Chairperson:

Date:

Executive
Director:

Date:


10/24/18



10/26/18

**REPORT TO THE COMMUNITY RELATIONS COMMITTEE
OF THE HEALTH + HOSPITALS BOARD OF DIRECTORS**

(GOUVERNEUR COMMUNITY ADVISORY BOARD)

I. COMMUNITY NEEDS

1. What are the most significant health care service needs or concerns of your community/communities?

The Community Advisory Board is aware of the good work that is taking place at Gouverneur Health. We recognize everyone's effort and dedication, from the maintenance staff to the administration. We are also very much in tune with the community's health needs, both those that are being met and those that are not. Therefore, we would want to focus on the following needs:

- An Urgent Care Facility / Walk In
- Better Access on a Timely Basis (Wait Times are excessive)
- A more comprehensive outreach plan for schools in the neighborhood.
- Develop a more comprehensive relationship with local CBO's.
- Develop more senior programs.

2. How were these needs/concerns identified? (Please check all that apply).

☒ Community Board(s) meetings ☒ Other Public Meetings
☐ Needs Assessments ☐ Surveys ☒ Community Health Profile Data
☒ Reports from Community Organizations ☐ Other Activities (please list)

3. Is your facility leadership addressing these needs/concerns?

☐ yes ☐ no

- a. If yes, please give examples of what the facility leadership is doing.

There is an effort to reduce wait times for appointments. The work to develop an urgent care center has stalled and may be complicated by the identified priority for space for the 9/11 clinic. There was a joint committee that has been suspended.

II. FACILITY'S PRIORITIES

1. What are the facility's strategic priorities?
 - Decreasing wait times.
 - Urgent Care / Walk In
 - More staff engagement to improve service outcomes.
 - Study to see the need and viability of a Dialysis Center.

2. Describe how the CAB provides input into the development of the facility's strategic priorities?

In the past the CAB typically had been informed about strategic priorities after they were underway and not during development. We voiced our frustration on this matter and have found the new administration to be more forthcoming and engaging.

3. Have CAB members been informed of and provided input into the facility's plans for new programs and modernization projects, prior to their implementation?

☐ yes

☐ no

We have had a better line of communication and cooperation between the administration and the CAB and for the most part it is good. However, over the summer, the CAB learned of a plan to close the outpatient rehab services because inpatient services had lost some staff. A CAB member's appointment was canceled and that is how we learned of the plan. The CAB member sent an email which got the plan changed to outpatient rehab being open only two days a week. The full services have just been restored. We hope that changes of this magnitude are shared with the CAB prior to final decisions.

III. PATIENTS'/RESIDENTS' EXPERIENCES

1. Patient safety and patient satisfaction are a priority of the facility. Are reports on these subjects provided on a regular basis to the Community Advisory Board?

X ☒ Yes

☐ No

The Executive Director of the SNF and the Head of Nursing report at the CAB meetings, but discussions primarily occur during the five committee meetings.

2. What are the most frequent complaints raised by patients/residents?

Long wait for appointments in ambulatory care. Local residents are also upset that they seem not to be able to get their loved ones admitted to the skilled nursing facility. This information is not formally shared with the CAB.

3. What are the most frequent compliments provided by patients/residents?

Good care. Cultural competence – language availability. This information is not formally shared with the CAB

4. (For hospitals and D&TCs only). Are periodic reports or updates on the facility's access indicators such as appointment availability and cycle times/wait time(s) provided by facility leadership at CAB meetings?

☒ Yes ☐ No

Discussion of this data occurs during the ambulatory care committee meetings. Copies are not distributed, but the information is shared.

5. From the CAB's perspective, rate the facility in the following areas:

	Poor	Satisfactory	Very good
Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

6. Is signage about HHC's Options Program posted in areas that have high traffic?

☐ Yes ☐ No

There are the large signs posted in some places but they are not necessarily readable by patients. There is information in the finance area, but not necessarily in other areas.

IV. CAB ORGANIZATION, STRUCTURE AND RESPONSIBILITIES

1. According to the CAB's By-laws, what is the CAB's total allowable membership? 25 _____
2. What are current numbers of members? 18 What are current numbers of vacancies? 7

3. What were the membership recruitment activities conducted by CAB this year?

CAB members were asked to do outreach and recommend people. The Membership Committee has interviewed 5 applicants in the last week. We will be submitting recommendations to the administration and HHC this week.

4. Do the CAB's recruitment efforts include outreach to new population groups in the community?

☒ Yes

☐ No

Outreach was done to get members using satellite facilities, Judson and Clemente.

5. Does the CAB have an active working committee structure? Please list committees and briefly describe their responsibilities.

Ambulatory Committee - which meets every other month with the Outpatient Administration to go over issues and plans of concern.

Skilled Nursing Facility Committee - which meets every other month with the SNF Administration to go over issues and plans of concern.

Finance Committee - which meets every other month with the Controller to go over issues and plans of concern.

Mental Health Committee - which meets every other month with the Mental Health administrators to go over issues and plans of concern.

6. Do Community (planning) Board representatives on the CAB communicate the facility's needs or concerns with local Community Board(s)?

☒ Yes ☐ No

a. If yes, please describe actions taken.

The CB3 rep will provide feedback to the Health committee of the Board.

7. Do Community Planning Board designees provide information at CAB meetings concerning the Community Board's priorities or healthcare related issues brought to Community Board meetings?

☐ Yes ☒ No

8. Did the CAB convene an Annual Public/"Community Health meeting" with the general public this year?

☐ yes ☒ no

We are currently planning the Public Meeting for March.

9. Did the CAB host or participate with the facility's leadership in a legislative forum this year?

☒ yes ☐ no

10. Did a representative of the CAB provide testimony at HHC's Board of Directors' Annual Public Meeting?

☐ yes ☒ no

a. If so, were the issues subsequently addressed?

11. Describe the CAB's involvement in its facility's outreach activities?

Local outreach is an area where our facility needs to improve including working with local CBO's.

12. Does your CAB's Chairperson or alternate designee attend the Council of Community Advisory Boards meetings?

☒ yes ☐ no

13. Did your CAB participate in last year's Council of CABs Annual Conference?

☒ yes

☐ no

14. How would you describe the current level of technical and strategic assistance provided to the CAB by the Office of Intergovernmental Relations?

☐ not enough

☒ just right

If not enough, what assistance would you need?

Renee and her office has always been available to us and provides our CAB with invaluable assistance.

V. ADDITIONAL TOPICS FOR DISCUSSION (OPTIONAL)

Are there additional topics that the CAB would like to discuss with the Board of Directors' Community Relations Committee? Please list the topics.

1. Getting a staff person to assist the CAB in its work.
2. Opening an Urgent Care Center / Walk In.
3. Resources to be able to organize, plan, and execute the work of the CAB.

NOTE: The comments in this report represent the consensus of the entire membership and have been shared with the facility administration.

Signatures:

CAB

Chairperson:

Date:

November 5th, 2018

Executive

Director:

11/7/2018

CMO SNI

Date:

11/7/18



REPORT TO THE COMMUNITY RELATIONS COMMITTEE OF THE HEALTH + HOSPITALS BOARD OF DIRECTORS

(Gotham|Belvis)

I. COMMUNITY NEEDS

1. What are the most significant health care service needs or concerns of your community/communities?

Shortage of nurses and the difficulty in recruiting them. How can the board assist in helping to recruit? Is there a plan in the works? This issue has been going on for months.

2. How were these needs/concerns identified? (Please check all that apply).

- ☒ Community Board(s) meetings ☒ Other Public Meetings
☐ Needs Assessments ☐ Surveys ☐ Community Health Profile Data
☐ Reports from Community Organizations ☐ Other Activities (please list)

3. Is your facility leadership addressing these needs/concerns?

☒ yes ☐ no

- a. If yes, please give examples of what the facility leadership is doing.

Ongoing recruitment. The Community Advisory Board members bring out the word to the community and the community Leaders of the need for nursing staffing.

II. FACILITY'S PRIORITIES

1. What are the facility's strategic priorities?

To improve patient flow, decreasing the total amount of time it takes a patient to be discharged from the clinic.

2. Describe how the CAB provides input into the development of the facility's strategic priorities?

The Administration gives the CAB members the opportunity to give feedback and make suggestion on the reports presented at the monthly full board meetings.

3. Have CAB members been informed of and provided input into the facility's plans for new programs and modernization projects, prior to their implementation?

☒ yes

☐ no

III. PATIENTS'/RESIDENTS' EXPERIENCES

1. Patient safety and patient satisfaction are a priority of the facility. Are reports on these subjects provided on a regular basis to the Community Advisory Board?

☒ Yes

☐ No

2. What are the most frequent complaints raised by patients/residents?

Wait time in the clinics and the pharmacy are still an issue. Making appointments are difficult, need to wait for 6 months to a year for a follow up appointment.

3. What are the most frequent compliments provided by patients/residents?

Good Doctor and Patient Relationships. Staff attitude still needs improvement.

4. (For hospitals and D&TCs only). Are periodic reports or updates on the facility's access indicators such as appointment availability and cycle times/wait time(s) provided by facility leadership at CAB meetings?

☒ Yes

☐ No

5. From the CAB's perspective, rate the facility in the following areas:

	Poor	Satisfactory	Very good
Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Appearance	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

6. Is signage about HHC's Options Program posted in areas that have high traffic?

☒ Yes

☐ No

IV. CAB ORGANIZATION, STRUCTURE AND RESPONSIBILITIES

1. According to the CAB's By-laws, what is the CAB's total allowable membership? 15

2. What are current numbers of members? 12 What are current numbers of vacancies? 3

3. What were the membership recruitment activities conducted by CAB this year?

Currently working on a recruiting from community organizations, committees, tenant associations, school PTA's and churches.

4. Do the CAB's recruitment efforts include outreach to new population groups in the community?

☒ Yes

☐ No

5. Does the CAB have an active working committee structure? Please list committees and briefly describe their responsibilities.

We have an active Intergovernmental committee in charge of putting together the Annual Legislative Event along with Lincoln and

Morrisania. Each year event has been very well attended with Community based organizations, community leaders and residents.

6. Do Community (planning) Board representatives on the CAB communicate the facility's needs or concerns with local Community Board(s)?

☒ Yes

☐ No

a. If yes, please describe actions taken.

Members that belong to the Community planning boards take back information received at the CAB meetings to inform about what's going on in the hospital in regards to advanced health care, new programs available and new medical treatment being offered in the near future.

7. Do Community Planning Board designees provide information at CAB meetings concerning the Community Board's(s') priorities or healthcare related issues brought to Community Board meetings?

☒ Yes

☐ No

8. Did the CAB convene an Annual Public/"Community Health meeting" with the general public this year?

☐ yes

☒ no

9. Did the CAB host or participate with the facility's leadership in a legislative forum this year?

☒ yes

☐ no

Hosted an Annual Legislative Event along with Lincoln and Morrisania. Each year event has been very well attended with Community based organizations, community leaders and residents.

10. Did a representative of the CAB provide testimony at HHC's Board of Directors' Annual Public Meeting?

☒ yes

☐ no

a. If so, were the issues subsequently addressed?

No issues.

11. Describe the CAB's involvement in its facility's outreach activities?

CAB members speak and advocate on behalf of the facility at:
Planning Boards, Health Fairs, Public Hearings, Albany Advocacy
Day and events hosted by the facility.

12. Does your CAB's Chairperson or alternate designee attend the
Council of Community Advisory Boards meetings?

☒ yes

☐ no

13. Did your CAB participate in last year's Council of CABs Annual
Conference?

☒ yes

☐ no

14. How would you describe the current level of technical and strategic
assistance provided to the CAB by the Office of Intergovernmental
Relations?

☐ not enough

☒ just right

If not enough, what assistance would you need?

V. ADDITIONAL TOPICS FOR DISCUSSION (OPTIONAL)

Are there additional topics that the CAB would like to discuss with the Board of Directors' Community Relations Committee? Please list the topics.

- 1.
- 2.
- 3.
- 4.
- 5.


NOTE: The comments in this report represent the consensus of the entire membership and have been shared with the facility administration.

Signatures:

CAB

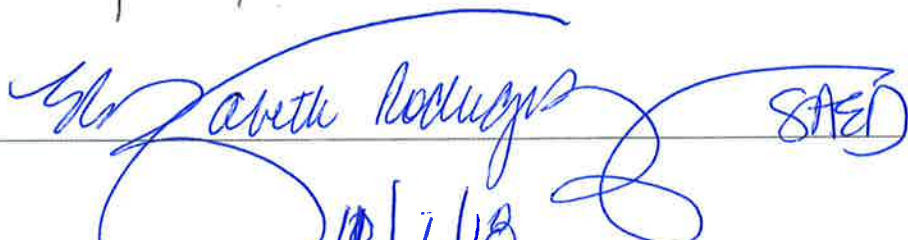
Chairperson:

Date:


10/25/18

Executive
Director:

Date:


10/1/18

**REPORT TO THE COMMUNITY RELATIONS COMMITTEE
OF THE HEALTH + HOSPITALS BOARD OF DIRECTORS**

(Gotham|Morrisania)

I. COMMUNITY NEEDS

1. What are the most significant health care service needs or concerns of your community/communities?

Shortage of nurses and the difficulty in recruiting them. This issue has been going on for months. There are also Physician vacancies as well that need to be filled.

2. How were these needs/concerns identified? (Please check all that apply).

- ☒ Community Board(s) meetings ☒ Other Public Meetings
☐ Needs Assessments ☐ Surveys ☐ Community Health Profile Data
☐ Reports from Community Organizations ☐ Other Activities (please list)

3. Is your facility leadership addressing these needs/concerns?

☒ yes ☐ no

- a. If yes, please give examples of what the facility leadership is doing.

The Community Advisory Board members help the facility recruit by bringing out the word to the community and the community Leaders of the need for nursing staffing.

II. FACILITY'S PRIORITIES

1. What are the facility's strategic priorities?

To improve patient flow, decreasing the total amount of time it takes a patient to be discharged from the clinic and provide the best possible health care to our community.

2. Describe how the CAB provides input into the development of the facility's strategic priorities?

The Administration gives the CAB members the opportunity to give feedback and make suggestion on the reports presented at the monthly full board meetings.

3. Have CAB members been informed of and provided input into the facility's plans for new programs and modernization projects, prior to their implementation?

☒ yes

☐ no

III. PATIENTS'/RESIDENTS' EXPERIENCES

1. Patient safety and patient satisfaction are a priority of the facility. Are reports on these subjects provided on a regular basis to the Community Advisory Board?

☒ Yes

☐ No

2. What are the most frequent complaints raised by patients/residents?

Making appointments are difficult, need to wait for 6 months to a year for a follow up appointment.

3. What are the most frequent compliments provided by patients/residents?

Good Doctor and Patient Relationships. Staff attitude still needs improvement.

4. (For hospitals and D&TCs only). Are periodic reports or updates on the facility's access indicators such as appointment availability and cycle times/wait time(s) provided by facility leadership at CAB meetings?

☒ Yes

☐ No

5. From the CAB's perspective, rate the facility in the following areas:

	Poor	Satisfactory	Very good
Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

6. Is signage about HHC's Options Program posted in areas that have high traffic?

☒ Yes

☐ No

IV. CAB ORGANIZATION, STRUCTURE AND RESPONSIBILITIES

1. According to the CAB's By-laws, what is the CAB's total allowable membership? 15

2. What are current numbers of members? 14 What are current numbers of vacancies? 1

3. What were the membership recruitment activities conducted by CAB this year?

Currently working on a recruiting from community organizations, committees, tenant associations, school PTA's and churches.

4. Do the CAB's recruitment efforts include outreach to new population groups in the community?

☒ Yes

☐ No

5. Does the CAB have an active working committee structure? Please list committees and briefly describe their responsibilities.

☒ yes

☐ no

a. If so, were the issues subsequently addressed?

No issues.

11. Describe the CAB's involvement in its facility's outreach activities?

CAB members speak and advocate on behalf of the facility at:
Planning Boards, Health Fairs, Public Hearings, Albany Advocacy
Day and events hosted by the facility.

12. Does your CAB's Chairperson or alternate designee attend the
Council of Community Advisory Boards meetings?

☒ yes

☐ no

13. Did your CAB participate in last year's Council of CABs Annual
Conference?

☒ yes

☐ no

14. How would you describe the current level of technical and strategic
assistance provided to the CAB by the Office of Intergovernmental
Relations?

☐ not enough

☒ just right

If not enough, what assistance would you need?

V. ADDITIONAL TOPICS FOR DISCUSSION (OPTIONAL)

Are there additional topics that the CAB would like to discuss with the Board of Directors' Community Relations Committee? Please list the topics.

- 1.
- 2.
- 3.
- 4.
- 5.

NOTE: The comments in this report represent the consensus of the entire membership and have been shared with the facility administration.

Signatures:

CAB

Chairperson:

George T. Robinson

Date:

10/29/18

Executive
Director:

Jaqueline Dawson

Date:

11/1/2018