

VIII. Adjournment

## COMMUNITY RELATIONS COMMITTEE OF THE BOARD OF DIRECTORS

March 12, 2019

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

### JOINT MEETING WITH COUNCIL OF COMMUNITY ADVISORY BOARDS

### **AGENDA**

I.	Call to Order	Josephine Bolus, NP, BC
II.	Adoption of November 13, 2018 Community Relations Committee Meeting Minutes	Josephine Bolus, NP, BC
III.	Chairperson's Report	Josephine Bolus, NP, BC
IV.	CEO President's Report	Mitchell Katz, M.D.,
V.	Information Items (Annual CAB Reports):  a. NYC Health + Hospitals/Metropolitan  b. NYC Health + Hospitals/Bellevue  c. NYC Health + Hospitals/Elmhurst	J. Edward Shaw John Roane Eartha Washington
VI.	Old Business	
VII.	New Business	

## COMMUNITY RELATIONS COMMITTEE OF THE BOARD OF DIRECTORS

November 13, 2018 5:30 P.M. NYC Health + Hospitals Board Room 125 Worth Street, Room 532

#### **MINUTES**

#### ATTENDEES

#### COMMITTEE MEMBERS

Gordon Campbell, Board Chairperson (A) Robert Nolan, Board Member Matthew Siegler, Representing Dr. Katz, President in a voting capacity

#### COUNCIL OF THE COMMUNITY ADVISORY BOARDS

Rosanne DeGennaro, Chairperson, NYC Health + Hospitals/Coney Island Gladys Dixon, Chairperson, NYC Health + Hospitals/Coler Anthony Andrews, Ph.D., Chairperson, NYC Health + Hospitals/Queens Everett Person, Chairperson, NYC Health + Hospitals/Sydenham/A Gotham Health Center John Roane, Chairperson, NYC Health + Hospitals/Bellevue J. Edward Shaw, Chairperson, NYC Health + Hospitals/Metropolitan Enrique Cruz, Chairperson NYC Health + Hospitals/Gouverneur Warren Berke, Chairperson, NYC Health + Hospitals/Kings Cheryl Alleyne, (representing, Esme Sattaur-Low Chairperson, NYC Health + Hospitals/NCB Eartha Washington, Chairperson, NYC Health + Hospitals/Elmhurst

#### FACILITY COMMUNITY ADVISORY BOARD MEMBERS

Gary Delamothe, NYC Health + Hospitals/Coler
Joyce Rivers, NYC Health + Hospitals/Sydenham/A Gotham Health Center
Cindy Cain, NYC Health + Hospitals/Harlem
Judy Wessler, NYC Health + Hospitals/Gouverneur/A Gotham Health Center
Hiawatha Campbell, NYC Health + Hospitals/Cumberland/A Gotham Health Center
Mabel Everett, NYC Health + Hospitals/Queens

#### NYC HEALTH + HOSPITALS CENTRAL OFFICE STAFF

Colicia Hercules, Office of Board Affairs
Lisette Saravia, Office of Board Affairs
Kathleen Whyte, Office of Government Relations
Manelle Belizaire, Office of Government Relations
Renee Rowell, Office of Government Relations
Xiomara Wallace, The Fund for NYC Health + Hospitals

#### NYC HEALTH + HOSPITALS FACILITY STAFF

Susan Sales, Chief Executive Officer, NYC Health + Hospitals/Gouverneur Sanford Operowsky, Chief Executive Officer, NYC Health + Hospitals/Gouverneur Balavenkatesh Kanna, M.D., Associate Medical Director, NYC Health + Hospitals/Lincoln Jacqueline Dawson, Executive Director, NYC Health + Hospitals/Sydenham Sandra Springer, CAB Liaison, NYC Health + Hospitals/Queens Antonio Montalvo, CAB Liaison, NYC Health + Hospitals/Lincoln Jovemay Mantos, CAB Liaison, NYC Health + Hospitals/Cole

### GUESTS:

Kashina Knowles, City Tech Stacy Wallace, Napo Pharmaceuticals, Inc. Nydia Vasquez, NYSNA

#### CALL TO ORDER:

The meeting of the Community Relations Committee (CRC) was called to order by Mr. Gordon Campbell, Acting Chairperson, NYC Health + Hospitals Board of Directors at 5:40 p.m.

Mr. Campbell noted that a quorum had been established. He requested a motion for the adoption of the minutes of September 12, 2018. A motion was made and seconded. The minutes were adopted.

#### CHAIRPERSON'S REMARKS:

Mr. Campbell welcomed everyone and introduced himself as the, Acting Chairman of the Board of Directors for NYC Health + Hospitals. Mr. Campbell continued and explained that regrettably, Mrs. Bolus was not able to attend this evening. Mr. Campbell noted that NYC Health + Hospitals/Morrisania and Gouverneur would present their annual activity report and unfortunately, both Lincoln and Belvis representatives are out sick.

Mr. Campbell began his remarks on a solemn note by announcing the passing of Marty Bromberger which occurred on October 22<sup>nd</sup>. Mr. Campbell stated that "Marty Bromberger was a former CAB Chair, a lifelong advocate, passionate sports fan, and a dedicated member of Coney Island CAB." Mr. Campbell continued and highlighted notable community related initiatives and accomplishments from across the system as follows:

Mr. Campbell also reported that NYC Health + Hospitals is expanding access to buprenorphine, a prescription drug to manage opioid addiction, at adult medical clinics in eighteen (18) community and hospital-based ambulatory care centers. Mr. Campbell added that the eighteen (18) clinics will integrate the clinical management of buprenorphine into primary care, making availability easier and treatment more holistic.

Mr. Campbell announced that NYC Health + Hospitals has successfully launched its advanced electronic medical record H<sub>2</sub>0 system at NYC Health +Hospitals/Woodhull and ten (10) community health centers and neighborhood clinics in Brooklyn. Mr. Campbell reported that this marks the first implementation of the system that integrates both clinical and revenue cycle modules of the customized Epic medical record system. Mr. Campbell acknowledged Mr. Kevin Lynch, Senior Vice President, Information Technology for a very thoughtful and strategic roll-out. He added that the public health system has also retrofitted the already installed electronic medical record systems at three other hospitals—NYC Health + Hospitals/Coney Island, /Elmhurst, and /Queens—and another fifteen (15) health centers and neighborhood clinics in Queens and Brooklyn with the new revenue cycle module. Mr. Campbell noted that combined, the four (4) hospitals and twenty-five (25) community-based ambulatory care sites mean that 14,000 active users will now be working with the newly enhanced electronic medical record/revenue cycle system.

Mr. Campbell reported that in mid-October, First Lady Chirlane McCray and NYC Health + Hospitals announced a new initiative aimed at increasing access to birth control in the City's public hospitals, doubling down on the City's commitment to be a national leader in reproductive rights.

Mr. Campbell informed Committee members, CAB Chairs and invited guests that two (2) of NYC Health + Hospitals' skilled nursing facilities had received the highest rating from U.S. News & World Report and are included on its list of Best Nursing Home Short-Stay Rehabilitation Centers. Mr. Campbell noted that the two (2) facilities were: NYC Health + Hospitals/SeaView in Staten Island and NYC Health + Hospitals/Gouverneur in Lower Manhattan that received the highest ranking among the nearly 16,000 nursing homes.

Mr. Campbell concluded his remarks by thanking the Community Advisory Boards (CAB) for preparing letters to the NYS Indigent Care Pool Workgroup (ICP) to share NYC Health + Hospitals' priorities. Mr. Campbell continued and also thanked those CAB members who took time from their busy schedule to attend and testify at the ICP Workgroup meeting that was held in Manhattan. Mr. Campbell acknowledged that there were a few CAB members who were turned away due to space constraints, but thanked all for their unwavering support of our public health care system.

#### PRESIDENTS REMARKS:

#### **Matthew Siegler**

Matthew Siegler, Sr. Vice President, for Managed Care and Patient Growth, presented the President's remarks on behalf of Dr. Katz, he welcomed Committee Members, CAB Chairs and invited guests and informed all of the Community stakeholder's meeting that was held on October 22<sup>nd</sup>. Mr. Siegler added that over seventy (70) attendees from communities based organizations all over the city were in attendance. Mr. Siegler continued and noted that he would focus tonight's remarks on issues raised in the CAB's activity reports.

Mr. Siegler reported that all of the CAB's annual reports highlighted provider staffing and wait times as issues of concern. Mr. Siegler noted that one (1) key issue that was highlighted in the CAB's report was access to care; specifically, due to provider hiring and provider staffing, with emphasis on the nurses side. He added the Administration had been addressing the financial issues of the system noting that it's a steep hill to climb but patient safety is a strategic priority.

Mr. Siegler continued and reported that since Dr. Katz's, leadership of, NYC Health + Hospitals, 330 new nurses were recruited system wide. Mr. Siegler noted that the key next steps are to make sure that staff is allocated correctly across all units.

Mr. Siegler announced that since the May 1<sup>st</sup>, Docs4NYC campaign, thirty (30) new Primary Care Clinicians have been hired. Mr. Siegler noted that there is a Primary Care shortage around the city and country. Mr. Siegler added that the goal is to hire seventy-five (75) new physicians.

Mr. Siegler reported that e-consult is in nearly eighty (80) specialty clinics, and will be at one clinic in every hospital by the end of the year. Mr. Siegler explained that e-consult allows you to get a specialist's opinion in 2-3 days and a fast tracked appointment if needed.

Mr. Siegler reported that the third next available appointment is down from eighteen (18) days to eleven (11) days for new adult medicine visit and down from fourteen (14) days to eight (8) days for a repeat visit. Mr. Siegler added that as next step the Administration will continue to expand e-consult, hiring 40 more Primary Care Physicians and change how we schedule appointments in primary care. Mr. Siegler explained that 30% of appointment slots will be made available for walk-ins, next day visits and primary care. Mr. Siegler noted that in addition to more control, this new scheduling arrangement gives the Primary Care doctors more flexibility to fill in their time when someone needs something more urgently. Mr. Siegler added that there are already early signs of improvement.

Mr. Siegler announced the opening of two new Express Care Clinics at NYC Health + Hospitals/Elmhurst and /Lincoln. Mr. Siegler explained that express care allows patients with non-life threatening issues to be seen within one hour. He added that an important key to this model is the ability to connect the patient to a primary care physician. Mr. Siegler noted that NYC Health + Hospitals is looking to expand to other outpatient settings like Gouverner or other community health centers. Mr. Siegler continued and stated "that we (NYC Health + Hospitals) want to get the model in right in the hospital setting and build it out properly, but it is something we care about."

Ms. Eartha Washington, Chairperson, NYC Health + Hospitals/Queens shared a positive experience regarding her encounter with taking a neighbor to Elmhurst's Express Care Clinic.

Mr. Siegler reported the recent Election brought on changes in the State's Senate and change of control in the House in Washington, D.C. Mr. Siegler noted that both would have meaningful and positive impact on NYC Health + Hospitals. He added that Disproportionate Share Hospitals (DSH) payments that are slated to expire in October 2019. Mr. Siegler continued and noted that the proposed cuts would be devastating to NYC Health + Hospitals. Mr. Siegler thanked members of the CABs for their continued support.

Mr. Siegler announced that NYS Affordable Care (ACA) open enrollment period has begun now through December 15<sup>th</sup>.

Mr. Siegler concluded the President's remarks by encouraging all in attendance to get the Flu shots. He added that the Flu shots are available at all NYC Health + Hospitals facilities.

### NYC Health + Hospitals/Gouverneur/A Gotham Health Center

Mr. Campbell introduced Mr. Enrique Cruz, Chairperson of NYC Health + Hospitals/ Gouverneur/A Gotham Health Center and invited him to present the CAB's annual report.

Mr. Cruz began his presentation by thanking members of the Community Relations Committee for the opportunity to present the Gouverneur CAB's annual report. He continued and acknowledged Susan Sales, CEO, Gouverneur, Skilled Nursing facility, for her leadership role in Gouverneur Skilled Nursing facility receiving the five (5) Star Award, from U.S. News and World Report.

Mr. Cruz informed members of the Committee, CAB Chairs and invited guests that the Roberto Clemente, a satellite clinic of Gouverneur, recently underwent substantial renovations. Mr. Cruz thanked members of the Committee and local elected officials including Rosie Mendez, former City Councilmember, for their support. Mr. Cruz added that the community is very happy with the completed renovations.

Mr. Cruz reported that the most frequent complaints raised includes excessive wait time for patients to see a provider. Mr. Cruz continued and stressed the need for Gouverneur Health Center to open an Urgent Care Center/Walk in Clinic. Mr. Cruz continued and noted that Dr. Morris Gagliardi, CEO Gouverneur Health Center, had convened a workgroup that consisted of staff and CAB members to explore the need for an Urgent Care Center.

Mr. Cruz concluded his presentation by informing the Committee that the Gouveneur CAB needs assistance with getting a dedicated staff person to assist the CAB in its work. Mr. Cruz added the CAB members need resources to be able to organize, plan and execute the work of the CAB. Mr. Cruz thanked the office of Government and Community Relations for their continued support.

#### NYC Health + Hospitals/Morrisania

Mr. Campbell introduced Ms. Jacqueline Dawson, Associate Director, NYC Health + Hospitals/Morrisania/ A Gotham Health Center and invited her to present on behalf of the Morrisania CAB.

Ms. Dawson, thanked members of the Committee for inviting her to speak on behalf of the Morrisania CAB. Ms. Dawson, reported that since the Morrisania CAB's last report, she was happy to announce that the membership on the CAB went from five (5) members to now a membership of fifteen (15). Ms. Dawson

concluded her remarks by thanking Government and Community Relations for their continued support. Ms. Dawson added that Morrisania Health Center is a wonderful and exciting place to work and she looked forward to working with the CAB.

#### **OLD BUSINESS:**

None.

#### **NEW BUSINESS:**

Ms. Dixon, Coler CAB Chair, informed members of the Committee that there's need to be more follow up after a patient has been discharged. Ms. Dixon also noted that patients should be given an adequate supply of medication at the time of hospital discharge.

#### ADJOURNMENT

Mr. Campbell wished all a Happy and safe Thanksgiving. The meeting was adjourned at 6:20 PM.



# REPORT TO THE COMMUNITY RELATIONS COMMITTEE OF THE NYC HEALTH + HOSPITALS BOARD OF DIRECTORS NYC Health + Hospitals/Metropolitan Community Advisory Board

#### I. COMMUNITY NEEDS

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

- Among the most significant health care concerns in ranking order are (1) Diabetes, (2) High Blood Pressure/Hypertension, (3) Obesity, (4) Asthma, and (5) Heart Disease, High Cholesterol, Stroke. In addition, Behavioral Health Substance Use Disorder are key drivers in our catchment area.
- Access to medical care is a major health care concern.
- Residents of East Harlem are more likely to lack medical insurance and a regular doctor than residents of NYC overall.
- The most common social concerns facing community residents are Crime/Violence, Drug Activity, Unemployment, Health care access, Housing, Poverty and Education.

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

X Community Board(s) meetings X Other Public Meetings

X Needs Assessments X Surveys

X Community Health Profile Data X Reports from Community Organizations

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

X Yes □ No

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

- The facility's leadership continues to ensure that NYC Health + Hospitals/Metropolitan provides residents of East Harlem and neighboring areas with the most comprehensive medical and behavioral health services available at little or no cost.
- Metropolitan has implemented care teams in Adult Primary Care and embraced the Patient Centered Medical Home model.
- The Community Outreach Department provides free screenings, patient education and links patients to primary care services.
- Onsite WIC program and onsite Managed Care office.
- The Volunteer Services Department helps community residents prepare applications for Medicaid, Medicare, Social Security and food stamps.

#### II. FACILITY'S PRIORITIES

#### 1. What are the facility's strategic priorities?

- Become the recognized provider of choice for comprehensive health care and supportive services for East Harlem and the surrounding communities.
- Be a leader in offering state-of-art primary care services with particular attention to the LGBTQ community and other underserved populations.
- Excel at services that support our mission, respond to the particular needs of the community, and build upon existing unique capabilities at Metropolitan.
- Achieve financial viability and long-term stability by increasing our market share in the communities
  we serve.

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- Maintain status as a high-quality educational site for community-based, culturally-sensitive health care.
- Develop an organization with the infrastructure and culture to realize its picture of the future.

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

- CAB members emphasize the importance of preventive medicine in their respective work and community environments.
- The CAB initiated the Harvest Home Metropolitan Hospital Farmers Market several years ago, which provides the community, staff and patients with healthy eating choices. Screenings, education and nutrition literature are provided at the Market.
- CAB members participate in facility events and provide recommendations as needed.
- The Mental Health & Patient Care Committees work collaboratively with hospital staff to remain abreast of the needs of the community and ensure the programs and services provided by the Hospital address those needs. They too provide quarterly Lunch and learn series on trendy issues.
- The Program & Planning/Legislative Committee strives to enlist input and assistance from our local elected officials in line with the facilities strategic priorities.
- CAB members obtain care and services at the facility and provide the Hospital's leadership with their observations and perspectives on their patient experiences.

э.	Have CAB members	s been informed of and j	provided input into the facility's plans for new
	programs and mode	rnization projects, prio	r to their implementation?
	X Yes	□ No	_
	The CAB is kept abre	ast of the Hospital's capi	tal needs and works to assist the facility. Summary reports
	are provided at month	nly meetings of the full C	AB

#### III. PATIENTS'/RESIDENTS' EXPERIENCES

I.	Patient safety and p	patient satisfaction are a	priority of the facility.	Are reports on these subject
	provided on a regul	lar basis to the Commu	ity Advisory Board?	_
	X Yes	□ No		
	The Chief Executive	Officer provides the CA	B with reports on patient	safety and patient satisfaction

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

Patient Representatives regularly meet with and assist patients in the acute care inpatient units, Emergency Department, Ambulatory Care clinics and Guest Relations Department. A small percentage of the patient encounters are complaints. The most frequent complaints are (1) care (nursing care and physician care); (2) attitude/behavior; and (3) communication. All complaints are reviewed at the individual unit level as well as by leadership staff.

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

Patients often provide compliments to our staff, including nurses, physicians, social workers, clerical and administrative staff. The most frequent compliments are about patient experience, excellent quality of care, courtesy and caring/compassionate staff. Compliment are shared with departments and occasionally included in the employee newsletter.

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?

X Yes

5.	From the CAB's pers	spective, rate the fac	cility in the following s	ress:	
	riom one or in pers	Poor	Satisfactory	Very good	
	Cleanliness			X	
	Condition	_		X	
	Appearance*		X		
	* While CAB members exterior appearance of			nterior of the hospital as very g	ood, the
6.	Is signage about HHC X Yes	C's Options Progran □ No	m posted in areas that	have high traffic?	
*** 6	A D OD CANY ZA ZVON	CONT. CONT. D. L. N.	D DECENORAL SERVICES		
IV. C	AB ORGANIZATION,	STRUCTURE ANI	D RESPONSIBILITII	ES	
1.	According to the CAI 25 Total Members: 22		the CAB's total allow 3 Ex-Officio Non-Voti		
2.	What are current nur What are current nur				
3.	<ul><li>CAB Committees I</li><li>Membership condu</li></ul>	s created and is being Recruitment Sign in acts outreach at healt	gutilized as a recruitme	nt tool. unity events.	
4.	Do the CAB's recruit X Yes	ment efforts include □ No	e outreach to new pop	ulation groups in the commu	nity?
5.	Does the CAB have an describe their respons		mmittee structure? P	lease list committees and brie	fly
	<i>Executive</i> : The Committee has the authority to act on behalf of all Metropolitan CAB members when an opportunity for all members to act on a matter does not exist. Submits written reports to the full CAB on any action that may have been taken by the committee; with consensus during a recent meeting the idea of having joint committees meetings was approved.			AB on	
	<u>Program and Planning/Legislative</u> : The Committee plans, organizes, and coordinates all CAB related advocacy activities, including, but not limited to, the Legislative Forum and Annual Public Meeting. The committee also strives to communicate with, and collaborate with, our local elected officials, in supporting the Hospital's mission. Members work towards actively engaging the elected officials as part of their advocacy.				ng. The
	care. Monitor delivery			ity and advocate for quality pat. Maintain communication with	

advocates and the Hospital's Quality Improvement Committee. Investigates health related matters that are

*Mental Health*: Reviews, advises and assists with the planning of the mental health and outreach programs. Educates the community on issues related to mental health and substance abuse.

brought to the attention of the Committee.

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<u>Membership:</u> Reviews member attendance, make recommendations regarding attendance issues, and reviews applications of prospective members.

Environmental Taskforce: N/A

Participatory Budgeting Taskforce: N/A

<u>By-Laws Ad-Hoc Committee</u>: When necessary, the committee will review and make recommendations regarding CAB By-Laws. The CAB recently revised its By-Laws.

Project Development Taskforce: N/A

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

□ Yes X No

a. If yes, please describe actions taken.

The Community Planning Boards do not currently have representatives on the CAB. We are working with the Manhattan Borough President's Office to have representation from CB 11, CB 10 and CB 8.

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

□ Yes X No

The Community Planning Boards do not currently have designees on the CAB.

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

X Yes □ No

The CAB's Annual Public Meeting was held on June 7, 2018, and included members of the community, CAB members, hospital administration and staff, and guests. As was customary, the Meeting included the presentation of awards, and among the awardees on this date were: Mali Trilla, CEO, Settlement Health (Petra Allende Advocacy Award); Jaime Gutierrez, Harlem Health Action Center Coordinator, NYC Department of Health & Mental Hygiene; and J. Edward Shaw, CAB Chairperson, NYC Health + Hospital/Metropolitan (J. Modibo Baker Community Service Award); Barbara Koppel, MD, Chief of Neurology, NYC Health + Hospital/Metropolitan; and Patricia Graham, Senior Assoc. Director of Nursing, NYC Health + Hospital/Metropolitan (John B. Corser, MD Excellence in Community Health Service Award); and Nilsa Orama, Chairperson, Manhattan Community Board 11 (Jose R. Sanchez Community Leadership Award). Special recognition awards were presented to Jacqueline Ludorf, CAB Member; Ronnie Gorman Swift, MD; Robert Berding, Esq.; Samrina Kahlon, MD; and Anitha Srinivasan MD, MPH. The event was very successful in its preparation and execution.

9. Did the CAB host or participate with the facility's leadership in a legislative forum this year? X Yes □ No

The CAB's Legislative Breakfast was held on February 1, 2018. The theme was *Advocate – Engage – Empower*. NYS Assemblyman Robert Rodriguez provided remarks, along with

representatives from the offices of Manhattan Borough President Gale Brewer, and NYC Council Speaker Corey Johnson. The representation from our elected officials was a very positive sign for our community as a whole.

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

	Meeting? X Yes	⊓ No	
	A 1 CS	□ 1 <b>10</b>	
	The CAB Chairperson	sues subsequently addr n provided testimony at no issues requiring follo	NYC Health + Hospital's Board of Directors' Annual Public
11	. Describe the CAB's	involvement in its facil	ity's outreach activities?
	annual Senior Healt Hispanic Heritage I Celebration. The Ca	ch Fair in Thomas Jeffe Day Celebration, Africa AB also organized a co	amunity health fairs and other events including the erson Park, and at events at the hospital including the an American Day Celebration, and Cancer Survivor's emmunity forum on the opioid crisis in East Harlem, on School of Social Work.
12	. Does your CAB's Cl Boards meetings?	ıairperson or alternate	designee attend the Council of Community Advisory
	X Yes	□ No	
13	Did your CAB partic X Yes	cipate in last year's Co	uncil of CABs Annual Conference?
14	by the Office of Interior Not enough The CAB appreciates	rgovernmental Relation  X Just right the assistance and guida	of technical and strategic assistance provided to the CAB ins?  Ince provided by the Office of Intergovernmental Relations. ways available and responsive to our needs.

#### 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.

- We are proud to announce that the hospital has been designated with the following designations/accreditations: Metropolitan was the only hospital in in New York City to score an A in the Leapfrog Hospital Safety Grade Spring and Fall reports; Metropolitan was also the first hospital in Manhattan to be designated a Gold Safe Sleep Champion by Cribs for Kids, in addition to an earlier designation as a Baby-Friendly Hospital.
- 2. The CAB continues its request for funding for capital improvements throughout the hospital comparable to other facilities. We continue in our effort to make it more Patient-centered and patient friendly in collaboration with our Welcome Center.

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

Signatures:		
CAB Chairperson:	J. Edward Shaw, CAB Chairperson	
Date: 12/13/	18	
	4	
Chief Executive Officer	r:/	
	Alina Moran, Chief Executive Officer	
Date: 12/19	1.8	



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

### NYC Health + Hospitals/Bellevue

#### I. COMMUNITY NEEDS

- 1. What are the most significant health care service needs or concerns of your community/communities?
  - Access to healthcare in a timely manner and delivered with respect and using the utmost skill and professionalism in medical care.

2.	How were these needs/concerns ident apply).	ified? (Please check all that
	X Community Board(s) meetings	X Other Public Meetings
	X Needs Assessments X Surveys	☐ Community Health Profile Data
	<b>X</b> Reports from Community Organizations	☐ Other Activities (please list)
3.	Is your facility leadership addressing	these needs/concerns?
	X Yes □ No	)
	a. If yes, please give examples of wh	at the facility leadership is
	doing.	
	<ul> <li>At our monthly Full Board Med</li> </ul>	etings (open to the public) we

#### II. FACILITY'S PRIORITIES

- 1. What are the facility's strategic priorities?
  - To provide the best possible patient experience in regard to timely and thorough professional healthcare. To encourage enrollment in Metroplus Health Plan.

offer 3 minutes (per person) to address the assembly with their

concerns. Our CEO is in attendance along with medical,

operations, and patient experience professionals.

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III.

2.	<ul> <li>facility's strategic priorities?</li> <li>The CAB regularly meets         Board Meeting. Our CEC         and we have the opportunity     </li> </ul>	s input into the development of the s with our CEO at our monthly Full gives his report during the meeting aity to respond, if desired. The CAB elcome to ask questions to clarify if	is
3.		med of and provided input into the as and modernization projects, prior t	Ю
	X Yes	□ No	
PA	ATIENTS'/RESIDENTS' EXP	ERIENCES	
1.	Patient safety and patient satisfareports on these subjects provide Community Advisory Board?  X Yes		re
	A 1 es	□ No	
2.	<ul> <li>Appointment scheduling a by far the most frequent c</li> </ul>	plaints raised by patients/residents? and long waits to see your doctor are complaints. There are also complaints tion and enjoyment of meals.	
3.	<ul> <li>What are the most frequent compatients/residents?</li> <li>Patient satisfaction with the treatment by hospital</li> </ul>	he medical care they've received and	l
4.	` -	). Are periodic reports or updates on uch as appointment availability and ed by facility leadership at CAB	i i
	Y Ves	$\sqcap$ No	

IV.

5. From the CAB's perspective, rate the facility in the following areas:			
	Poor	Satisfactory	Very good
Cleanliness		X	
Condition			X
Appearance			Χ
6. Is signage about HH high traffic?	C's Options	Program posted in are	eas that have
X Yes		l No	
CAB ORGANIZATIO	ON, STRUCT	TURE AND RESPO	NSIBILITIES
1. According to the CA membership? 25	1. According to the CAB's By-laws, what is the CAB's total allowable membership? 25		
2. What are current number of vacancies? <u>5</u>	2. What are current numbers of members? <u>20</u> What are current numbers of vacancies? <u>5</u>		
3. What were the membership recruitment activities conducted by CAB this year?			
<ul> <li>Whenever there is a tabling event the CAB will be there. We approach and engage in discussion as to what the CAB does.</li> <li>We have literature and application forms and invite potential members to attend meetings and certainly attend our monthly Full Board Meetings that are open to the public.</li> </ul>			
4. Do the CAB's recruitment efforts include outreach to new population groups in the community?			
<b>X</b> Yes		No	
<ul> <li>5. Does the CAB have an active working committee structure? Please list committees and briefly describe their responsibilities.</li> <li>Events Committee: Seeks to develop, organize, and assist with Bellevue Hospital healthcare and cultural activities and Community Advisory Board related special events.</li> </ul>			

- Legislative Committee: Works with NYC Health + Hospital/Bellevue, Community Planning Boards, and elected officials to disseminate health and budget information to/for the Bellevue Hospital Community.
- Membership Committee: Monitors membership participation to assure adherence to the Board By-Laws. Seeks to maintain a full roster of eligible and active members as well as a pool of Board candidates who are active on Board Committees. At this time we only seek "consumer". Embers.
- Patient Care and Advocacy Committee: Works to assure that all patients are treated in accordance with the Patient's Bill of Rights, and works toward that end with the Office I'd Patient Advocacy to assure that it is supported and resources to effectively represent patients' interests. The Committee also identifies access problems, makes recommendations for their correction and monitors the results.
- Security and Emergency Preparedness Committee: Monitor security procedures within and surrounding Bellevue to maintain safety and well-being of patients. The Committee seeks to inform CAB members of procedures used to secure the hospital facility.
- Executive Committee: Plans the Community Advisory Board Meetings, establishes committees and coordinates their work. The Chairperson exercises general supervision of the affairs of the CAB and serves as the general spokesperson of the affairs of the CAB and serves as the Board's principal spokesperson to outside groups.

activities.

6.	Do Community (planning) Board representatives on the CAB communicate the facility's needs or concerns with local Community Board(s)?	
	X Yes	□ No
	a. If yes, please describe act	
	Community Planning     the CAB at our Execumentally. For instance     temporary closing do	Board members share information with ative Committee meetings and during our e, we were informed very early of the wn of the 28th Street subway station that byees and patients use.
7.	CAB meetings concerning t	bard designees provide information at he Community Board's(s') priorities or bught to Community Board meetings?
	<b>X</b> Yes	□ No
8.	Did the CAB convene an Armeeting" with the general p	nnual Public/"Community Health ublic this year?
	A 1 es	
9.	Did the CAB host or participle legislative forum this year?	pate with the facility's leadership in a
	<b>X</b> Yes	□ No
10	.Did a representative of the ODirectors' Annual Public M	CAB provide testimony at HHC's Board of eeting?
	X Yes	□ No
	•	sequently addressed? tance and need for patients to seek out visory Boards and get involved in their

- 11. Describe the CAB's involvement in its facility's outreach activities?
  - The CAB regularly supports outreach activities and represent the CAB at tabling events for the various campaigns throughout the year. Events such as Denim Day, Back to School Fair, Hispanic Heritage month. The CAB always does new CAB recruitment at these events. We have literature and application forms at these events. We take the opportunity to do Voter Registration at all these events including "Night Out On Crime", State Senator Luz Krueger Senior Fair, (2) City Councilman Carlina Rivera Community Events, State Senator Brad Hoylman Senior Fair, Tabling Events at Bellevue and a voter registration drive coordinated by CAB members at their housing development at Haven Plaza.

Council of Community Advisory Boards meetings?		
<b>X</b> Yes	□ No	
13.Did your CAB participate in last Conference?	year's Council of CABs Annual	
☐ Yes  14.How would you describe the cur assistance provided to the CAB to Relations?	X No rent level of technical and strategic by the Office of Intergovernmental	
☐ Not enough If not enough, what assistance woul	X Just right d 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. Workshops on how to improve the effectiveness of the CAB.
- 2. Strategic moves on how to be more effective as a group.
- 3. How to improve CAB member cohesiveness.
- 4. Workshop on how to be a successful committee chair.
- 5. How to make effective presentations.

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

Signatures: CAB		
Chairperson:	John W. Roave	
Doto	O .	
Date:	12/12/18	
Executive Director:	Wille	
Date:	12/18/18	



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

### **NYC HEALTH + HOSPITALS/ELMHURST 201**

### I. COMMUNITY NEEDS

- 1. What are the most significant health care service needs or concerns of your community/communities?
  - 1) Long waiting time in the ED & Clinics
  - 2) Cancer, diabetes, mental Health, substance abuse & Maternity/Pediatrics Services

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

- 3) Doctors & Nurses shortages
- 4) Need of housing for patients after discharge
- 5) Need for quick & effective medical care
- 6) Insurance for uninsured Patients

	apply).		
	√ Community Board(s) me	•	√Other Public Meetings
			√ Community Health Profile Data
	√ Reports from Communit	y Organizations	<ul> <li>√ Other Activities (please list)</li> <li>Conversation with friends, neighbors and general public about time spent waiting in ED &amp; Clinics.</li> <li>News media</li> </ul>
3.	Is your facility leadersh	ip addressing	these needs/concerns?
	$\sqrt{\text{yes}}$	□ no	
	doing.	•	nat the facility leadership is ry Care Department expansion

- -Preventative Care an ongoing program Diabetes care management program.
- -Through the emergency Medicaid programs and other support systems, Elmhurst has made treatment of cancer affordable to the undocumented and uninsured.
- -NYC Health + Hospitals/Elmhurst in the community to promote health literacy. The CAB Chairperson is a member of the Community Engagement Team organized the following events:

1/11/18 - Simulation Center at Maspeth Library

1/27/18 - Adolescent Health at Jackson Heights Library

2/23/18 - Hypertension Discussion at North Forest Park Library

3/19/18 - What is Depression (in Mandarin) at Flushing Library

3/26/18 - Stop the Bleed at Elmhurst Library

3/28/18 - Colon Cancer Awareness at Forest Hills Library

4/04/18 - Stroke Awareness in Middle Village

4/11/18 - Hip and Knee Pain at Forest Hills Library

4/13/18 - Oral Head and Neck Cancer Awareness at Broadway Library

4/14/18 - Importance of Healthcare Proxies at Sunnyside Library

5/02/18 - Sleep Hygiene at Forest Hills Library

5/03/18 - Sleep Apnea at Forest Hills Library

5/24/18 - What is Depression at Elmhurst Library

5/29/18 - Kidney Health at Woodside Library

6/05/18 - World Environment Day at Flushing Library

6/05/18 - Healthy Eating at Maspeth Library

6/14/18 - Child and Infant CPR at Steinway Library

7/30/18 - Healthy Pregnancy at Steinway Library

8/16/18 - Sleep Apnea, Maspeth Library

9/10/18 - Suicide Prevention, Forest Hills Library

9/13/18 - Suicide Prevention, Corona Library

10/11/18-Safe Sleep, Ridgewood Library

11/14/18-Ask a Pediatrician, Court Square

12/10/18-Street Safety, Jackson Heights

12/17/18-Diabetes, Lefrak

#### II. FACILITY'S PRIORITIES

- 1. What are the facility's strategic priorities?
  - Expansion of the Emergency Department
  - Comprehensive Women's Health Services

## Community Advisory Board Report Page 3

- 20/20 Vision
- Safe and clean environment
- EPIC Upgrade
- Cutting edge technology
- Promote community involvement and collaboration
- Improvement of overall budget and an effective work group
- 2. Describe how the CAB provides input into the development of the facility's strategic priorities?
  - The entire Board provides valuable insights into the changing needs of the community and the impact on strategic priorities. The joint efforts to work with the community and our elected representatives is ongoing and involves all aspects of the CAB members and the hospital leaders. The members offer advice and opinions based on their own professional and personal experience.
- 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

Patient safety and patient satisfice reports on these subjects provide	action are a priority of the facility. led on a regular basis to the	Are
Community Advisory Board?		
√ Yes	□ No	

- 2. What are the most frequent complaints raised by patients/residents?
  - Long waiting time in the ED & clinics & for blood drawing

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	<ul> <li>Delay in medical</li> <li>Difficult to reach</li> <li>Front of hospital</li> <li>Long waiting time</li> </ul>	n providers is dark at nig	ht.	
3.	<ul><li>Quality care give</li><li>Overall hospital</li><li>Outstanding care</li><li>by doctors and m</li></ul>	delivery of seen by doctors, cleanliness to patients are urses in ICU ald not get over ago equipment ar	rvices at the MPC ( nurses and technici nd excellent support er improvement to E	Clinic ans given to families Elmhurst Hospital
4.	(For hospitals and D the facility's access cycle times/wait tim meetings?  ☐ Yes	indicators suc	ch as appointment a	vailability and
5.	From the CAB's per	spective, rate	the facility in the fo	ollowing areas:
	Cleanliness Condition Appearance	Poor  □ □	Satisfactory  □  √  √	Very good √ □

6.	Is signage about HHC's Ophigh traffic?	tions Program posted in areas that have	)
	√ Yes	□ No	

### IV. CAB ORGANIZATION, STRUCTURE AND RESPONSIBILITIES

- 1. According to the CAB's By-laws, what is the CAB's total allowable membership? <u>25</u>
- 2. What are current numbers of members? 23 What are current numbers of vacancies? 2
- 3. What were the membership recruitment activities conducted by CAB this year?

We rely on current members to make referrals when there are openings. We recruited three new members referred by our members.

4.	Do the CAB's	recruitment	efforts i	include	outreach	to new	populati	on
	groups in the	community?						
	1	Yes	П	No				

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

Patient Care – Monitors patient services and works to address any issues concerning patients and medical services

Women's Health – working with the hospital's Labor/Management Women's Issues Committee and local community advocacy group, Sharing and Caring, sponsored a successful Women's Health Forum

Finance – Works with Chief Financial Officer if major budget issues arise.

Legislative/Community Relations – Plans Annual Legislative Meeting and other community and legislative outreach.

Membership – Recruits, interviews and mentors new members to the Board.

6.	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.			
	<ul> <li>Leadership of each Community Board in our catchment area were invited to our Annual Legislative Lunch</li> <li>The CAB meeting packets are shared with the Community Board by our members.</li> </ul>			
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			
10	Directors' Annual Public Meeting?			
	$\sqrt{\text{yes}}$ $\square$ no			

11.De	escribe the CAB's in	volvement in its facil	ity's outreach activities?
•	Pediatric Health Fa Women's Health Fa New Year's Day Ba EHC's Green Mark Volunteer Recognit Community Engage Red White & Blue Hispanic Heritage C Community Blood Walks with the CEC	air asket Distribution (Final Action Ceremony ement Committee Event Celebration Drive	rst Baby of the year)
	•	irperson or alternate of Advisory Boards me	_
	$\sqrt{\text{yes}}$	□ no	Ü
	d your CAB particip onference? √yes	oate in last year's Cou  □ no	ncil of CABs Annual
ass	•		f technical and strategic se of Intergovernmental

 $\sqrt{\text{just right}}$ 

If not enough, what assistance would you need?

 $\square$  not enough

## 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.

Signatures

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

CAB Chairperson	. Lartha	L. Was	shingto	<u> </u>
Date:	3/8/19	3	8	
Chief Exec	cutive Director:	1	72	<b></b>
Date:	3/8/19/		2	)