



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

March 1, 2022

5:00 P.M.  
50 Water Street, Via WebEx

**AGENDA**

- |                                                                                           |                             |
|-------------------------------------------------------------------------------------------|-----------------------------|
| <b>I. Call to Order</b>                                                                   | <b>Robert Nolan</b>         |
| <b>II. Adoption of January 11, 2022<br/>Community Relations Committee Meeting Minutes</b> | <b>Robert Nolan</b>         |
| <b>III. Chairperson's Report</b>                                                          | <b>Robert Nolan</b>         |
| <b>IV. CEO President's Report</b>                                                         | <b>Mitchell Katz, M. D.</b> |
| <b>V. Information Items (Annual CAB Reports):</b>                                         |                             |
| a. NYC Health + Hospitals/Sea View                                                        | Mr. George Marino           |
| b. NYC Health + Hospitals/Coney Island                                                    | Ms. Theresa Scavo           |
| c. NYC Health+ Hospitals/Belvis                                                           | Ms. Iliana Almanzar         |
| d. NYC Health+ Hospitals/Morrisania                                                       | Ms. Beverly Johnson         |
| <b>VI. Old Business</b>                                                                   |                             |
| <b>VII. New Business</b>                                                                  |                             |
| <b>VIII. Adjournment</b>                                                                  |                             |

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

January 11, 2022

5:00 P.M.

Via WebEx

NYC Health + Hospitals Board Room

Virtual Meeting

**MINUTES**

**Community Relations Committee – January 11, 2022 – VIRTUAL MEETING**

**As Reported by: Robert Nolan**

**Committee Members Present:** Robert Nolan, Mitchell Katz, M.D., Jose Pagan & Anita Kawatra, Sally Hernandez-Piñero

**NYC HEALTH + HOSPITALS' CENTRAL OFFICE STAFF**

Deborah Brown, Senior Vice President, External and Regulatory Affairs

Colicia Hercules, Chief of Staff to and Corporate Sec. Board Affairs

Okenfe Lebarty, Senior Director, Community Relations

Amir Abbady, Director, Community Affairs

Manelle Jacques Belizaire, Government & Community Relations

**COUNCIL OF THE COMMUNITY ADVISORY BOARDS**

NYC Health + Hospitals/Bellevue— Ronnie White

NYC Health + Hospitals/Gotham/Belvis— Iliana Almanzar

NYC Health + Hospitals/Carter—LaShawn Henry

NYC Health + Hospitals/Coler—Gary Delamothe

NYC Health + Hospitals/Coney Island—Theresa Scavo

NYC Health + Hospitals/Gotham/Cumberland—Corey Evans

NYC Health + Hospitals/Gotham/East New York—Vere Gibbs

NYC Health + Hospitals/Elmhurst—Carlos Cortes

NYC Health + Hospitals/Gotham/Gouverneur— Isabel Ching

NYC Health + Hospitals/Harlem—Karen Dixon

NYC Health + Hospitals/Jacobi— Joseph Menta

NYC Health + Hospitals/Kings County—Warren Berke

NYC Health + Hospitals/Lincoln— Ngande Ambroise

NYC Health + Hospitals/McKinney—Antoine Jean-Pierre

NYC Health + Hospitals/Metropolitan—William Smith

NYC Health + Hospitals/Gotham/Morrisania— Beverly Johnson

NYC Health + Hospitals/North Central Bronx – Esme Sattaur- Lowe

NYC Health + Hospitals/Queens— Carolyn Brown

NYC Health + Hospitals/Gotham/Sydenham—Everett Person

NYC Health + Hospitals/Sea View—George Marino  
NYC Health + Hospitals/Woodhull— Jose Rolando Guzman

**CALL TO ORDER:**

Mr. Nolan call the meeting to order at 5:04 p.m.

With the establishment of quorum, Mr. Nolan introduced a motion to unanimously approve the minutes from the November 9, 2021.

**CHAIRPERSON REMARKS:**

Mr. Nolan welcomed everyone and congratulated Dr. Katz for receiving the 2021 Preston Robert Tisch Award in Civic Leadership from the Aspen Institute.

Mr. Nolan also reminded everyone that the Annual Public Meetings will begin in the coming months so please confirm attendees/speakers. He continued on with today's agenda, which included hearing reports from Woodhull, Queens, Kings, East New York, Carter and Bellevue. Mr. Nolan moved the agenda and asked Dr. Mitchell Katz for his report.

**CEO/ PRESIDENT's REMARKS:**

Dr. Katz started by providing an update on the response to the pandemic, explaining that Omicron is significantly more infectious than past variants even with normal protections but the variant is less lethal and debilitating. The major impact of the virus is its disruption of our workforce due to isolations and sick days being used by hospital personnel. H+H has doubled their testing sites to 100 brick and mortar locations and distributed over 1 million home tests. We have the best turnaround times for COVID testing despite the demand on healthcare systems. On the vaccination front, mobile vaccinations have contributed to 25% of all minors vaccinated. Dr. Katz also acknowledged Metropolitan Hospital for conducting its 100<sup>th</sup> gender affirming surgery.

**NYC Health + Hospitals/Bellevue**

Ronnie White of the Bellevue CAB reported that they are planning their virtual legislative breakfast in February 2022. Bellevue updated their pharmacy department which has improved services. Mr. Hicks of Bellevue and the CEO of Metropolitan have been recognized in City & State's 2021 Manhattan Power 100. Gladys from Bellevue's Patient Experience Team mentioned how they handled verbal complaints that do not demonstrate a trend they wish to share.

Mr. Nolan asked Gladys and Ms. Lowe, Chief Experience Officer if there is a particular complaint or concern they would like the Board to be aware of. Ms. Lowe reported issues are being tracked monthly and the staff are responding accordingly. However, most recently the most complaints being raised are timely test results,

which are being handled on a day-to-day basis. Whenever grievances or complaints are received they are addressed immediately or within seven days.

### **NYC Health + Hospitals/Carter**

Annette Rosario of Henry J. Carter reported on behalf of the CAB Chair and provided an update on recent activities at the facility. The main issues impacting patients/residents are the modifications in therapeutic programming and limited access to in-person visitation. As of July 2021, Carter reinstated a limited unit and off unit activities which included; outdoor BBQ's, Ice cream social, Nail Spa, coffee social and the Thanksgiving luncheon.

They are excited to report the announcement, naming H + H / Carter to the prestigious 2022 Newsweek Magazine's Top Nursing Homes. Carter has earned this notable ranking for several years consecutively. This ranking validates Carter's statement to the public that they provide optimal skilled care with the highest quality outcomes and excellent patient/family experiences. They are proud of our accomplishment, improving our ranking out of the 630 nursing homes with NY State.

Carter had the NYSDOH Article 28 survey from October 14th, 2021 through October 20th, 2021. There were no environmental findings and one FTAG that required a plan of correction that was submitted and accepted by the NYSDOH.

### **NYC Health + Hospitals/East New York**

Vere Gibbs, East New York CAB Chair, read her CAB report starting by reporting East NY has tested 18,000 patients and vaccinated 21,000 patients for COVID. East NY is updating its main water valves, television monitors, dental suites, and cracked pipes in the basement and water curtailment projects.

The most common complaint they are fielding is regarding wait-times and experiences with the call center, the facility continues to implement suggestions to reduce wait-time. Customers request OB/GYN services at East New York and they are working to find a provider to accommodate the need.

### **NYC Health + Hospitals/Kings County**

Francisca Leopold, Kings' CAB Chair, discussed the robust COVID testing onsite that has helped teachers and other staff access rapid regular testing for work. Kings County Hospital is working to create a comprehensive breast center, total joint program center, expand their operating room, expand ambulatory care center, create a dedicated neurosurgical ICU, create a dedicated step-down level of care, and a dedicated pediatric care site. They are receiving new equipment including an O-Arm, DaVinci robotic arm, and more. Complaints about the hospital are focused

around difficulties using the call center and phone lines in general, and waiting times in the emergency room.

### **NYC Health + Hospitals/Queens**

Carolyn Brown, Queens' CAB Chair, started by thanking the members of the Board of Directors & H+H before acknowledging the loss of the parents of our predecessor, former CAB Chair Dr. Andrew's parents. Queens Hospital has distributed over 100,000 doses of the COVID vaccine and is seeing significant renovations including window replacements, radiology upgrades, cardio clinic upgrades and more.

Ms. Brown also acknowledged several accolades they received and the new funding they have received for a community-based doula care program to promote birth equity. Queens hospital has received over \$1.5 million to support programs and policies to expand access to healthy and affordable food. Queens Hospital also cut the ribbon for a new total hip and knee replacement center to provide even higher quality care.

Ms. Brown also mentioned Queens' Hospital received a Leapfrog grade of B, the Hospital was one of two HHC facilities to receive that grade.

Mr. Nolan noted the large number of construction projects on the way and noted that Ms. Christine Flaherty and her team is available to address any concerns that may arise.

### **NYC Health + Hospitals/Woodhull**

Jessica Arocho, Woodhull CAB Liaison, presented on behalf of her CAB Chair. Woodhull saw the completion of upgrades to their MRI and expanded their emergency room. Renovations are underway to repair the roof and elevators. There is also a major façade repair project in process and should be completed in 2022. Patients complain about the overcrowded emergency room and long waiting time on the elevators due to construction. The community is also concerned regarding the placement of prison/incarcerated population at Woodhull for safety and security reasons. However, there is close collaboration and planning between Woodhull and Correctional Health Services to address these concerns and ensure no mixing of patient population.

Mr. Nolan requested that the CEO Greg Calliste explain the impact of the high level of retirements and resignations on patient care.

Mr. Calliste responded that this is a trend being experienced across the industry and he is collaborating closely with central office to hire and recruit.

Mr. Nolan also requested an update on the elevator repairs seeing there are so many not working. Mr. Calliste responded that he has been working closely with Ms. Flaherty and has received the funding and the project is moving forward.

Mr. Nolan thanked all of the presenters and introduced a motion to adjourn the meeting.

**ADJOURNMENT:**

Meeting adjourned at 5:52 p.m.

## Community Advisory Board Report – March 1, 2022

### COVID-19:

Since the onset of the COVID-19 pandemic, Sea View has remained completely devoted to the health and safety of our vulnerable, resident population. In compliance with all CMS, CDC and NYSDOH recommendations as well as NYC H+H and Post-Acute Service Line guidance, Sea View has continuously acted to limit exposure and prevent the spread of COVID-19 within the facility. Hence over the last several months, a number of efforts have been initiated as a means of executing and enhancing our infection control and prevention program.

The initial response against COVID-19 was focused on awareness and screening of entrants into Sea View.

- In February, signage was posted at the entrance and lobby areas informing recent travelers to refrain from visiting if feeling ill. Facility-wide in-services were also conducted on the proper utilization of personal protective equipment and staff knowledge and awareness of COVID-19 signs/symptoms and procedures to follow when suspecting resident exposure.
- In the beginning of March, the facility's Emergency Operations Plan was tested via tabletop drills and secret shoppers. Response to COVID-19 was emphasized.
- Procedures were implemented to screen all visitors for recent travel and illness.

Given the critical importance in limiting COVID-19 exposure, additional measures were implemented beginning March 2021 in compliance with CMS Public Health Action for Nursing Homes and NYSDOH guidance:

- Sea View has remains open for visitation to families and friends
- All visitors must produce a negative COVID-19 test results prior to visiting; Rapid-24 hours of visit and PCR-48 hours of visit
- Screening of all staff including temperatures along with face mask requirements continues
- Active screening of all residents for fever and COVID-19 signs/symptoms continues
- Social distancing requirements limited in-person meetings and staff gathering areas
- Increased environment of care cleaning including high touch areas utilizing COVID approved products
- Communal dining and group activities have resumed

Sea View has tracked and reported all suspected and laboratory positive COVID-19 cases. Through the implementation of effective infection control and prevention procedures including cohorting residents and designating a COVID unit, the majority of Sea View residents were not impacted. Cases have been shared with the Department of Health on a daily basis and most recently have been shared weekly with CMS and CDC via the National Healthcare Safety Network.

Cases and overall COVID status have also been shared with the Sea View families. A facility hotline number and weekly town hall conference calls were established for families to access regular updates. Open communication and consistent dialogue with the residents and their families has remained a priority, along with balancing safety measures and quality of life. Alternate visitation methods including virtual visits utilizing I-Pads and scheduled window visits have been very successful (approximately 150 virtual visits and 60 window visits are conducted weekly). Individual family requests have been honored for resident birthdays (short visits through the lobby window where resident remains inside with a mask and masked family members remain outside).

There have been a total of seven focused DOH Infection Control/Prevention COVID Surveys conducted at Sea View. DOH Surveyors focused on staff knowledge and awareness, PPE availability, prevalence of infection and resident cohorting. Sea View has been found to be in full compliance with no deficiencies.

## **Infrastructure and Equipment**

- The Generator project is complete. Our generator is now state of the art. We are monitoring it on a weekly basis and running it on a full load once a month.
- The Grace Foundation project is moving along as well. Plans for this project have been approved by DEP, Landmarks and City Planning. There has been additional funding that have been receive through Councilman Matteo's office.
- The Residents room, we are working on a plan. COVID-19 pandemic had an alternate plan. We are behind in manpower either through retirement or disability. We are starting to get back on track. Our painters are working quickly as well as the carpenters on this project.
- Oxygen Storage Rooms – Locker rooms on the nursing units have been re-purposed as oxygen storage for those particular units and is complete.
- A Requisition has been processed to purchase new camera system for the First Dose room and the 8 medication rooms.

## **PATIENT/RESIDENT SAFETY/SATISFACTION:**

NYC Health + Hospitals - Sea View continues to implement its strategy to improve the patient/resident experience. In 2021, the patient/resident satisfaction survey was administered facility-wide in the 4<sup>th</sup> Quarter 2021. Despite the COVID pandemic and suspension of visitation, group activity and dining, as well as a variety of additional limitations, the Sea View patient/resident population remained satisfied with their experience at Sea View evidenced by strong satisfaction scores. The Likelihood to Recommend, Overall Satisfaction and Final Rating scores ranked at or above the 95 percentile rank when compared to other facilities in the Nation. Areas of focus identified on the satisfaction survey were Activities and Finance.

## **FREQUENT COMPLAINTS RAISED BY PATIENTS/RESIDENTS:**


In Accordance with Governor's office, CMS and CDC Guidelines Sea View will be following visitation of residents in nursing home facilities in accordance with CMS and CDC guidelines. The Department of Health recommends that visitors take a rapid test before entry into the facility, and DOH will provide rapid tests to nursing homes at no cost.

Although alternate visitation methods have been successful, patients/residents miss their regular in-person visits with family and friends. Families too express concern of limited visitation during weekly town hall calls however are appreciative of the care and service rendered at Sea View. Although ongoing dialogue with the Sea View community has helped to quell the concerns related to a lack of in-person visitation, we share in the frustration as our reopening is beyond our control. However, despite these challenges, we will continue to make every attempt to ensure that we remain as flexible as possible, so our residents and families can feel some sense of normalcy amid the pandemic.

## **ISSUES IMPACTING THE COMMUNITIES SERVED BY THE FACILITY:**

Sea View has been able to keep the infection rate lower than that of Richmond County. As such, Sea View has been awarded incentive payments from the CARES Act Provider Relief Fund Nursing Home Infection Control Quality Incentive Program (QIP). In addition, COVID Vaccines are limited in the community. Sea View is working to identify additional vaccination locations.

  
Matthew Levy, MHA, LNHA  
Chief Executive Officer

  
George Marino  
Acting Chairperson, CAB



## **COVID-19**

Coney Island Hospital was very hard hit during the most recent wave of the COVID-19 pandemic. At the peak in January 2022, we had an average of 220 COVID + patients in the hospital. This was in considerable contrast to Wave 2 (Nov '20 – July '21) and 3 (July '21 – Nov '21) when we peaked at 95 and 23 average daily patients, respectively. During the peak of Wave 4, we saw approximately 40% positivity rate amongst community members seeking testing through our testing center. As of February 15, the positivity rate has decreased to approximately 6%. The infectiousness of the Omicron variant significantly affected our staff causing high numbers of staff members to be quarantined and leading to staffing shortages. Through the support of the NYC Health + Hospital system we were able to bring in agency staffing to supplement our ranks. We maximized our ability to care for our community by opening a surge unit to accommodate 37 additional patients and worked with our sister facilities to transfer patients to other hospitals when necessary. In January, we also welcomed the U.S. Department of Defense (DoD) medical team, which comprised of nurses, physicians, and respiratory therapists. The DoD medical team provided staffing support in key areas such as the emergency department, intensive care units and the med-surge units to ensure that uninterrupted and timely care continued to be delivered.

All Coney Island Hospital employees are vaccinated and we are working with our staff to make sure that we will be compliant with the booster mandate. In 2021, we provided over 87,000 COVID-19 tests to employees, patients, and community residents and over 67,000 vaccinations to adults and children. Hours of operations for testing and vaccination were expanded to 7 days per week during peak demand times. We also implemented a gratitude cart at the height of Wave 4 to show our appreciation to all staff for their hard work. All staff on all tours are visited, and the program has been well received.

## **Infrastructure/Equipment**

Construction in the soon to be launched Ruth Bader Ginsburg Hospital of the NYC Health + Hospitals/South Brooklyn Health campus is well underway. Approximately 80% of the building is complete. The projected occupancy is October 2022. Coney Island Hospital received \$17 million in FY22 capital funds to renovate 26,000-sq. ft of ambulatory care space, including more than 50 exam rooms for primary care services, and an upgraded ambulatory radiology suite, as well as \$250,000 in capital funding for neurological and cardiac medical equipment. We have submitted FY23 capital funding requests to the Brooklyn Borough President for \$15 million to renovate the 8<sup>th</sup> floor of the hospital's Main Building to create a contiguous and comprehensive women's health service, and to the NYS Legislature for \$9 million to expand outpatient clinical support services on the first floor of the hospital's Main Building.

## **Patient Safety/Satisfaction**

Coney Island Hospital has re-initiated Patient Safety Executive Rounds, where leadership continues to visit all clinical and non-clinical areas to directly interact with staff. Executive leadership is committed to creating a true culture of safety so all staff can engage in the shared priority of patient and staff safety, wellbeing and satisfaction. The rounds allow for the dissemination of important information and immediate interventions/coordination for any concerns that are identified. This includes feedback on COVID-19 surge related concerns such as PPE volume, which leads to adjustments in distribution plans in order to ensure all areas have adequate protection available. The Culture of Safety Survey was delivered from September 13 - November 3, 2021. Work is underway to review the results on a departmental level in order to celebrate successes and create action plans around concerns. Facility wide review of survey findings note an improvement in staff reporting of safety in terms of error prevention, patient safety improvements, and senior management's commitment

toward patient safety. In our Joint Commission guided journey to achieving zero harm through becoming a High Reliability Organization, the Patient Safety Department continues the Good Catch program. This program creates opportunities to understand our vulnerabilities and develop action plans and performance improvement efforts focused on strengthening our workflows. It simultaneously reinforces our commitment to creating a culture of safety by celebrating the staff that reported the occurrence and stressing the achievement of the whole team. The facility also participated in the Leapfrog survey in 2021. One of the items identified by the Leapfrog effort was medication reconciliation within 24 hours of admission which was at 8% in January 2021, efforts among all the inpatient departments has increased the metric to 56% in December 2021. While additional work lies ahead, the improvement noted thus far has shown us how much progress we can make when we involve an interdisciplinary group and utilize the IHI model for performance improvement.

In 2021, a tool called iRound was implemented on the inpatient units. iRound is a web-based application that allows staff to memorialize patient feedback, notify appropriate services of issues in real-time and focus on timely service recovery. To date, over 1,600 rounds have been performed and the tool will soon be expanded to the Emergency Department and Behavioral Health. A Performance Improvement Project focused on optimizing nursing communication was started on Tower 8 East. It included focused rounding with nursing and care experience team members, service recovery where needed as well as follow up calls to discharged patients. Our efforts paid off with an increase in the Communication with Nurses Domain of our HCAHPS Survey from 62.12% (Q321) to 84.72% (Q421). We will be taking lessons learned and best practices from that project and rolling them out to other inpatient units.

**Frequent complaints raised by patients/residents**

The most common complaint is lack of communication, and as a result, patients do not feel that they completely understand their plan of care and prognosis. There are several programs that are in the process of being implemented to address this issue, including: daily rounding; nurse hand-offs; white boards updated daily; and doctor hotline for family/doctor communications (718-616-DOCS).

**Issues impacting the communities served by the facility**

The community has expressed concerns regarding traffic and parking in the hospital's vicinity. Hospital Police (HP) is aware of this issue and has increased visibility outside with a HP patrol car from 7 am – 4 pm (Mon - Fri) to keep traffic flowing in front of the hospital. In the last 30 days HP has started issuing parking summonses, including 11 bus stop violations and 3 no standing violations.



Svetlana Lipyanskaya, CEO




Theresa Scavo, CAB Chairperson

**Executive Summary**

This report reflects the top five priorities that impact patient care at Belvis Gotham Health Center. The information in this report comes from a variety of sources like the health care professionals and patients on site.

1. COVID-19
  - Increase promotional awareness
  - Increase Vaccine Incentives
  - Services aligned to long covid symptoms
  
2. Infrastructure/Equipment
  - 1st Floor Lobby Redesign and Furniture
    - Modernization of the lobby and waiting spaces including reception desk and furnishing.
    - Extended care suite/new patient clinic to include isolation room to accommodate Covid19/ Infectious Disease population
    - Modernization of Laboratory Suite - Laboratory Chairs and sample storage refrigerator
  
  - 2nd Floor Revitalization of Pediatric Asthma Suite
    - Integration of Pediatric Dental into Pediatric Suite - Fluoride Treatment and Education
    - Asthma Pediatric Suite - 16 exam rooms with locked cabinet and waiting area with child friendly furnishing; play area; Medication Prep Room- 1 room
    - Asthma education area
  
  - 3rd Floor Diabetic Center for Excellence
    - Chronic Disease Education Center- Patient health education and self-management classes
    - Modernize Optometry Suite - Expansion of space - General Eye, Visual Field, autorefraction and laser; Modernize Podiatry Suite - Expansion of Podiatry suite (2) exam rooms; Modernize Dental Suite - (8) operatories; Medication Prep Room
  
  - Modernization of Radiology Suite
    - DEXA Scanner with bariatric table
    - Update Mammography Unit to perform 3D
  - Frontline healthcare worker lounge/wellness space
  - Exterior
    - New Roof
    - Point/seal façade to prevent water leaks that come through the window
  - Interior lighting upgrade for energy efficiency and safety throughout entire facility
  
3. Patient Safety/Satisfaction:
  - Renovate the Pharmacy waiting area to become ADA compliant
  - Renovate all bathrooms to be ADA compliant
  - Replacement of elevators
  
4. Frequent complaints raised by patients/residents:
  - Facilitate appointment by providing technology when checking in
  
5. Issues impacting the communities served by the facility
  - Frequent NYPD patrol
  - Access to Healthier food options

  
Iliana Almanzar CAB Chair

  
Lata Singh-Bronx Regional AED Gotham Health

## Gotham Health | Morrisania Executive CAB Report (March 2022)

### Beverly Johnson, Chair, Community Advisory Board

- **COVID-19:** Gotham Health | Morrisania has tested over 44,803 patients and vaccinated 23,741 since the beginning of the pandemic. The Clinical Team provides patients with the most updated information about the pandemic and educates them on the importance of getting tested and vaccinated.
- **Physical Plant/Equipment:** We continue to upgrade equipment as necessary to ensure that staff is equipped to perform their jobs effectively/efficiently.
  - o Partnered with Patients, Staff, and Community members, the Illumination Fund, and Arts in Medicine program to create and paint a mural for our Pediatrics Unit.
  - o The Garden Committee has been upgrading and managing our Courtyard garden to create a healing space for staff and patients during the spring, summer, fall months.
  - o Installed temporary sneeze guards throughout the building to protect both staff and patients
- **Complaints:** Most frequent reasons for patient complaints include waiting time and getting through to call center.
- **Community issues:** Community members request an OB/GYN and Spanish speaking provider in Adult Medicine.
- **Community Outreach:** Community Affairs has distributed over 7,000 flyers to community residents, NYCHA, small businesses, and community partners on the importance of getting COVID-19 test and Covid-19 Vaccine.

X

Joaquim  
Santos

Digitally signed by  
Joaquim Santos  
Date: 2022.02.16  
17:25:24 -05'00'

Joaquim Santos  
Deputy Director of Ambulatory Care

X

*Beverly Johnson*

Beverly Johnson  
CAB Chair