

HEALTH+	AGE	AGENDA		
HOSPITALS	Meeting	Date: <u>April 3, 2023</u>		
HOSHIALS	Time:	12:00 PM Location:		
	50 Wate	r St 17th Fl		
INFORMATION TECHNOLOGY COMMITTEE				
BOARD OF DIRECTORS				
CALL TO ORDER				
ADOPTION OF MINUTES November 1, 2022			MR. PEÑA-MORA	
CHIEF INFORMATION OFFICER REPOR	кт		DR. MENDEZ	
OLD BUSINESS				
NEW BUSINESS				
ADJOURNMENT				
NEW YORK CITY HEALTH + HOSPITAL	LS			

MINUTES

Meeting Date: November 1, 2022

INFORMATION TECHNOLOGY COMMITTEE

ATTENDEES

COMMITTEE MEMBERS

Feniosky Peña-Mora, Chair Jose Pagan, BOD IT Committee Member Dr. Machelle Allen representing Dr. Mitchell Katz Barbara Lowe Dr. Vincent Calamia

NYC HEALTH + HOSPITALS CENTRAL OFFICE STAFF:

Dr. Kim Mendez, SVP/Corporate CIO
Dr. Michael Bouton, Corporate CMIO
Jeff Lutz, SAVP, Chief Technology Officer
Apoorva Karia, AVP, EITS Business Operations
Soma Bhudari, Chief Information Security Officer Lisa

INFORMATION TECHNOLOGY COMMITTEE - November 1, 2022 - 50 Water St AS REPORTED BY: Feniosky Peña-Mora

COMMITTEE MEMBERS PRESENT: Feniosky Peña-Mora, Dr. Machelle Allen representing Dr. Mitchell Katz, José A. Pagán - left at 11:50, Dr. Vincent Calamia, Barbara Lowe

Mr. Feniosky Peña-Mora, Chair of the Committee, called the November 1, meeting of the Information Technology (IT) Committee to order at 11:02 A.M.

Mr. Peña-Mora noted for the record that Dr. Machelle Allen is representing Dr. Mitchell Katz in a voting capacity.

Mr. Peña-Mora proposed a motion to adopt the minutes of the IT Committee meeting held on September 12, 2022.

Upon motion made and duly seconded the minutes of September 12, 2022 IT Committee meeting was unanimously approved.

Mr. Peña-Mora turned the meeting over to Dr. Kim Mendez, Senior Vice President and Corporate Chief Information Officer to carry on the agenda, she was joined by Dr. Michael Bouton, Chief Medical Informatics Officer, Jeff Lutz, Chief Technology Officer, Apoorva Karia, AVP EITS Finance & Administration and Soma Bhaduri, Chief Information Security Officer.

Dr. Mendez provided an update on the data center migration project that will be completed in May 2023. The first phase has been completed to the new QTS data center in Piscataway, New Jersey. The Sungard contract ended on October 31, 2022 which was on target and on budget. Preparation has begun for the second phase to the second new data center, Cyrus One, which is expected to be completed by end of May 2023. Mr. Peña-Mora asked if there were any equipment from NYC Health + Hospitals at the Sungard facility, if so how were they decommissioned and how was the data being discarded. Mr. Lutz responded that the equipment was Health + Hospitals' equipment, Sungard provided a locked storage area where, only Health + Hospitals had access. The equipment that was not moved to the new location is going to be repurposed across the enterprise. The remaining equipment will follow the relinquishment process, which consists of the vendors coming in to decommission and also assure that any data that is on the disk drives is completely wiped and appropriate certifications and documentation are then received to confirm this.

Mr. Peña-Mora followed up by asking if there is any resale value for the equipment, Mr. Lutz replied that Dell does provide some resale value.

Mr. Peña-Mora then asked does the hospital have a similar grade of deletion of data as the military, Ms. Bhaduri responded that Health + Hospitals follows NYS guidelines, which has a clear mechanism for wiping and removing the data from the systems that are no longer in possession. However, the data centers as part of the HIPAA security rule and there has to be an encryption on all systems to ensure that the data residing is encrypted and data being transmitted within the data centers are also being encrypted in transit.

Mr. Peña-Mora asked what is going to be done with space at Jacobi where the second data center was occupying. Mr. Lutz explained that the space is not only an EITS data center but also a main data frame (MDF), which is a central hub that supports the network and access to Epic, the internet, email, etc. So, the space will continue to be maintained in that capacity.

Ms. Bhaduri presented an overview of the cybersecurity strategy. The framework aligns with the HIPAA security rule, which ensures electronic personal health information (EPHI) is being stored and transmitted securely. Ms. Bhaduri highlighted in the last year, EITS has acquired a biomedical device risk management technology, Asimily, that has the ability to assess the risk level of all BioMed equipment enterprise wide. This has supported the remediation of high risk devices for the entire system. She also shared a diagram on how frequently Health + Hospitals is impacted with threats on a daily, weekly, and monthly bases. The numbers included continuous blocking of viruses, malicious websites, phishing emails, and prevention of EPHI from leaving the Health + Hospitals network.

Mr. Peña-Mora asked Health + Hospitals tracks their cybersecurity level and if so what level, he also wanted to know does Health + Hospitals look at cybersecurity capability and maturity models to understand how our System compares to other hospital systems. Dr. Mendez confirmed that Health + Hospitals does track and compare to other hospital systems, she offered to have an educational session for the BOD to review our journey and current state. Mr. Peña-Mora accepted and requested a future follow-up.

Ms. Bhaduri added that in 2020 an assessment was done by an external party to assess where Health + Hospitals is compared to other healthcare systems across the board, the external party reviews the entire security program which also ties into the yearly risk assessment that is used to create EITS' risk management plan. After the results of the next assessment EITS will provide an informational session to explain what are the processes. Mr. Pagán asked is there is a certification or quality process that can be followed so it can be embedded in the System. Ms. Bhaduri explained the assessment gives the quideline of the process being followed which is the CSF guideline.

Dr. Bouton presented an overview of clinical informatics and applications with a presentation of the current MyChart activation rate for primary care ambulatory patients and system-wide patients (inclusive of ED and inpatients).

The System-wide data reflects that Health + Hospitals is in the top 25 percent in that range. The Epic average for safety net hospitals is 48 percent and NYC Health + Hospitals is at 66 percent. One of the recent MyChart features added is Fast Pass, which is a waitlist and if an appointment becomes available an email will is sent to the patient with a scheduling ticket. The patient will not have to call anyone, they will just have to accept online within 24 hours of receiving the alert. This feature is currently available for a number of subspecialties with anticipation to expand across the System. Dr. Bouton also highlighted on the BOD Strategic Dashboard has added MyChart message handling responsiveness as a metric. This metric focuses on how long it takes Health + Hospitals to get back to the patient. This feature will show how both the patient and provider are using it.

A Committee member asked what is the backup to make sure the patient is being reached out to if the provider has not responded to the patient within the established 72 hours threshold. Dr. Bouton that the Ambulatory Care Leadership Council, ACLC, is currently tracking this. Mr. Peña-Mora suggested a reward for the providers that do engage with their patients within the time frame. Dr. Allen asked for clarification on the table, Dr. Bouton responded in order to be considered active in MyChart the patient needs to have been logged in once in the past 12 months. Dr. Allen asked why Lincoln is so successful in the MyChart patient activation, Dr. Bouton informed her that Mr. Chris Roker, CEO of Lincoln, is a member of the MyChart Steering Committee and also locally their team was very engaged to adopt features such as Fast Pass, etc.

Dr. Bouton presented on Center X, which assist when a patient's insurance does not cover the medication or the patient will have a high copayment. The provider will be able to see the cost/coverage in advance including what the copayment will be, so the provider can select an appropriate medication that is covered by patient's insurance and/or has a lower copayment. This implementation supports equity and assisting patients to get the medications they need in a way that is conducive for them. The other piece of this is the electronic prior authorization, which will give the provider the form to fill out within Epic and obtain approval right away. This is a benefit for both the patient and the provider.

Mr. Peña-Mora, reading through the presentation slides on IV Pumps, asked why is Elmhurst Hospital not implementing pumps. Dr. Bouton answered that Elmhurst purchased a separate pump recently and that the

end of life would not be for a number of years. The plan is to have Elmhurst move to the new pump at the end of their current usage.

Dr. Bouton closed with speaking about Wisdom, which is the new Epic dental module. Wisdom in now live throughout all of New York City Health + Hospitals, this will give the primary care doctor better insight on if the patient needs to be seen by a dentist. Dr. Allen asked if the dental imaging and the dental billing were both in Wisdom. Dr. Bouton responded that images go to a separate PACS system which has not changed. The change is there is an enterprise version of the PACS system which means if the patient goes to a different facility the dental images can be seen across the System, which was not the case a year ago.

Dr. Mendez closed in speaking on the Epic Rovers, which is a handheld device which has been upgraded to a new iPhone model. These phones have been deployed across the System and are a role-based device. It could be used by someone from transport, a nurse, or a radiology tech, it allows more flexibility. For example, a nurse is able to complete clinical documentation and medication administration on the Rover phone which interfaces with Epic. Dr. Allen asked who is allowed to use the Rover. Dr. Bouton responded they are role based and includes roles such as Nurse, PCAs, transporters, and other ancillary roles. Dr. Mendez explained the importance of role based is that the staff can go into the same device but based on their role is what component/fields come up on the device.

Mr. Peña-Mora asked if there are any old business or new business to bring to the committee, hearing none, Mr. Peña-Mora then adjourned the meeting at 12:02 pm.



Enterprise Information Technology Services April 3, 2023 Update

Kim Keziah Mendez, Senior Vice President- Corporate Chief Information Officer

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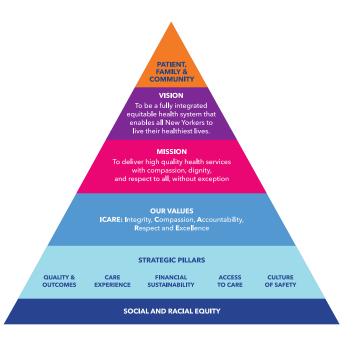
EITS Update Agenda

- Introductions
- EITS Targeted April 2023 Updates
 - EITS FY 2024 Goals
 - Data Center Migration Initiative
 - Epic Migration to Hyperdrive
 - Clinical Informatics/ Applications
 - DOHMH/ NYC H + H Epic Community Connect
 - Business Continuity Web Data Entry
 - Q4 2022 Upgrades/ Go-Lives
 - Bio Medical Device Database Management
 - EITS Awards & Accomplishments
 - Q + A



NYC H + H Information Technology FY 2024 Goals

- EITS Infrastructure Enhancement (Financial Sustainability/ Quality & Outcomes)
 - Go Live of Cyrus One Data Center
 - Facility & Data Center Network Refresh
 - Transition from Epic Hyperspace to Epic Hyperdrive
 - Enhanced telecommunication experience & device tracking
 - Enhanced Downtime & Business Continuity Access (BCA)
- EITS Clinical Information Services Enhancement(Quality & Outcomes/ Access to Care)
 - CQI of Clinical Applications & Integration
 - Enhanced Bio- Medical Device Management
 - Accelerated Digital Transformation (Quality & Outcomes/ Access to Care)
 - Telehealth Expansion & Enhancement
 - CQI & Optimization of Patient Portal
- Epic EHR Effective Use (Care Experience/ Quality & Outcomes / Social & Racial Equity)
 - DOHMH Epic Community Connect Go Live
 - Expansion & enhanced utilization of Epic EHR
- EITS CQI (Quality & Outcomes)
 - Implement Service Now Platform Enhanced Management & Roadmap
 - Security & Risk Assessment / Management
 - EITS Governance (ERP, HIT, COEI)
 - Application Learning Team Optimization
 - EITS Operational Enhancements: Position Management, On-Off Boarding, Budget Control
 - Enhanced EITS Customer Experience



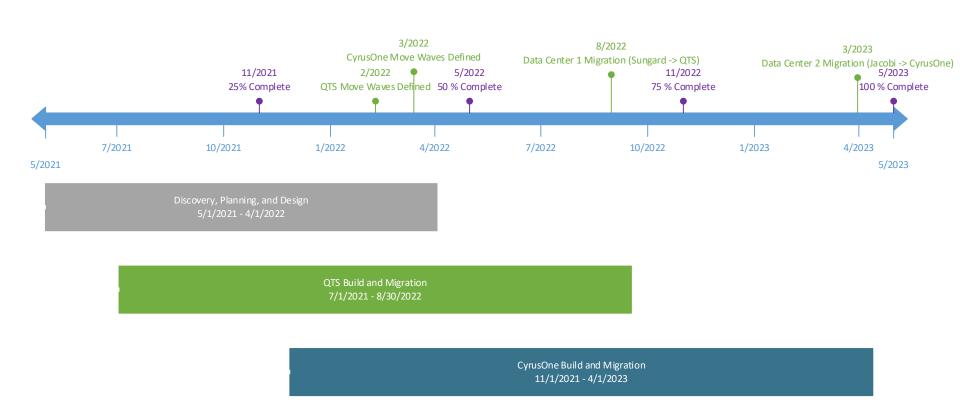


Data Center Migration April 2023 (Financial Sustainability & Quality)

- Enterprise Data Center Migration : Project Timeline 5/2021-5/2023
- As of March 31,2023, overall project progress remains on target at 92% completion
- Enterprise Data Center Migration remains on target. Key accomplishments include:
 - Racks installed
 - Fiber cabling from H+H Racks to the Wide-Area-Network and Internet Providers connection room installed
 - Networking gear is starting to arrive in March through April
 - Circuits to provide connectivity for Wide Area Network and Internet Connectivity are being completed.
 - EMC Storage for both Epic and Non-Epic systems is installed and will be configured in April.
 - New blade servers installed and to be configured April.
 - Final application discovery completed with initial move waves to be finalized in April.
 - Identified Epic swing date September 20,2023. This is the date that Epic will first run primary out of NDC, the environment will be in place prior to this date.



Data Center Migration Update





Epic Hyperdrive Migration Project (Quality & Outcomes)

Hyperdrive is Epic's browser, the new place where users will access their Hyperspace workflows.

- Transition NYC H+H Epic/H2O users from Hyperspace client application to Epic's new Hyperdrive browser
- All end users of Epic's Hyperspace client application(possibly with isolated exceptions) will be transitioned to using the new Hyperdrive browser
- Hyperdrive Migration Rollout:
 - Wave 1: Integration Super Users Go-Live 02/28/2023
 - Wave 2: Pilot Site- Kings County Go-Live 03/21/2023
 - Wave 3: Enterprise Go-Live 04/18/2023



Clinical Informatics & Applications Updates

(Care Experience/ Quality & Outcomes / Social & Racial Equity)

- Clinical Informatics/ Applications
 - ■DOHMH/ NYC H + H Epic Community Connect
 - Epic Business Continuity Web Data Entry
 - Q4 2022 Epic Upgrades/ Go-Lives



NYC H + H Epic Community Connect

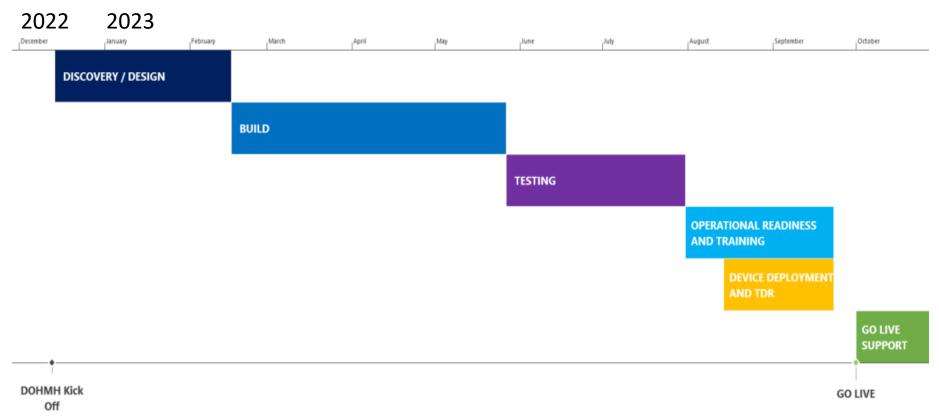
BACKGROUND: NYC Department of Health and Mental Hygiene (DOHMH) is the department of the government of New York City responsible for public health. DOHMH manages three specific types of clinics over four boroughs: Sexual Health, Tuberculosis (TB), and Immunization

SCOPE:

- Extending the NYC H+H Instance of Epic to NYC DOHMH
- Create Interfaces to External Systems
- Provide Regulatory Reporting to Outside Agencies (City, State, Federal)
- DOHMH Dependencies
 - Cerner Lab
 - OTI Hardware & Networking (DOHMH purchases via OTI)



Implementation Timeline (2022-2023)





Downtime Web Data Entry

Business Continuity Access Web Data Entry (BCA WDE):

- Epic's product to help our organization document admission/discharge/transfer (ADT) events during a downtime
- Speeds up speed up the downtime recovery process by replacing the manual ADT reconciliation process with an electronic one
- Patient census is also kept up to date
- Allows staff to see some real time patient movement data

Business Continuity Access Web Data Entry (BCA) is now live in **Inpatient** and **Emergency** Departments at the following sites:

- Kings County
- Woodhull
- Lincoln
- Metropolitan
- Harlem
- Queens



BCA WDE Future Roll Out Schedule

Remaining sites to go-live: MAY 17, 2023

- Coney Island
- Bellevue
- Elmhurst
- Jacobi
- NCB
- Henry J. Carter
- Labor and Delivery at all 12 sites

Note: the Labor and Delivery (L & D) departments **at all 12 sites** will also go live with BCA Web on May 17, 2023



EPIC Q4 2022/ Q12023 Upgrades/Go Lives

- Q4 2022 Epic /Cerner Lab Upgrade successfully went live on 10/22/22 at 4:00am
- Phase 2 Epic Wisdom (Dental) implementation successfully went live on 10/22/22.
- Epic Willow Ambulatory (Out Patient Pharmacy) February 2023 Go-Live for final 3 sites.



Bio-Medical Device Database : Nuvolo Software (Quality & Outcomes)



Bio-Medical Device Database: Nuvolo Project

Summary

- Using Nuvolo Software we will add all Biomed devices to our existing database
 - Configuration Management Database (CMDB)
- Our Biomed support vendor (Crothall) and H+H staff will use this common inventory
- One common ticketing system will be used and managed by our Enterprise Service Desk



Nuvolo: Benefits

- All constituents will be working with up-to-date information on each device
 - Multiple groups will be working with accurate data thereby allowing the most effective management of these assets
- Security exposures can be mitigated in the most expeditious manner
 - When a vulnerability is identified for a device we will be able to instantly locate these and take immediate action to address
- Will provide a common incident management system and process
 - Biomed problems will be resolved more rapidly
- Complete device product replacement strategy can be implemented
 - This will allow device age, security characteristics and replacement costs to be combined and help us maximum the use of our funds



EITS Awards & Accomplishments



OF THE YEAR

NOMINEE

NYC HEALTH+ HOSPITALS

2023 Best in Resilience Certification

- Recognizes significant strengths in deploying technologies and practices to manage enterprise readiness, responsiveness, and resilience
- Based on Everbridge's CEM Standards Framework comparing their top tier customers (Siemens, Intermountain Healthcare, Johnson Controls, PNC, Philips, Discover) across four main categories
 - Data and Analytics
 - Digital Transformation
 - Smart Process Automation
 - Communication and Collaboration
- NYCH+H was highlighted to be stronger than most organizations in each of the above areas.
- Everbridge and Alertus are leveraged across H+H including: Enterprise notifications, EITS On-Call Scheduling and Jacobi STEMI Activation.



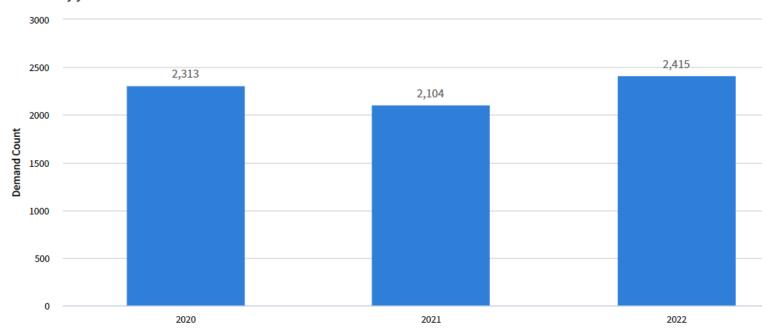
EITS GOVERNANCE & PROJECT MANAGEMENT OFFICE NYC Health + Hospitals | Central Office



2022
EMPLOYEE RESOURCE CENTER
AMAZING
EMPLOYEE
OF THE YEAR
NOMINEE



Demands by year



2022 was a record year for EITS with 2,415 demands submitted







Thank You!