

COMMUNITY RELATIONS COMMITTEE
OF THE BOARD OF DIRECTORS

January 6, 2026

5:00 P.M.

50 Water Street

AGENDA

- | | |
|---|----------------------|
| I. Call to Order | Jackie Rowe-Adams |
| II. Adoption of November 5, 2025 Community Relations Committee Meeting Minutes | Jackie Rowe-Adams |
| III. Chairperson's Report | Jackie Rowe-Adams |
| IV. CEO President's Report | Mitchell Katz, M.D. |
| V. Information Items (Annual CAB Reports): | |
| a. NYC Health + Hospitals/Carter | Ms. LaShawn Henry |
| b. NYC Health + Hospitals/East New York | Ms. Crystal Matthews |
| c. NYC Health + Hospitals/Kings County | Ms. Lorna Chin |
| d. NYC Health + Hospitals/Queen | Ms. Robin Hogans |
| VI. Old Business | |
| VII. New Business | |
| VIII. Adjournment | |

COMMUNITY RELATIONS COMMITTEE

OF THE BOARD OF DIRECTORS

November 5, 2025

5:00 P.M.

NYC Health + Hospitals Board Room

MINUTES

ATTENDEES

COMMITTEE MEMBERS PRESENT

Ms. Jackie Rowe Adams, Chairperson
Dr. Mitchell Katz, President, NYC Health + Hospitals
Ms. Anita Kawatra
Dr. Patricia Marthone
Dr. José Pagán

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
Janny Jose, Associate Director, Board Affairs
Okenfe Lebarty, Assistant Vice President, Government and Community Affairs
Emaan Moosani, Director, Community Affairs
Manelle Belizaire, Director Community Affairs
Emmanuella Chevalier, Assistant Director, Community Affairs

COUNCIL OF THE COMMUNITY ADVISORY BOARDS

NYC Health + Hospitals/Bellevue- Karen Moore
NYC Health + Hospitals/Gotham/Belvis- Josephine Byrne
NYC Health + Hospitals/Carter- LaShawn Henry
NYC Health + Hospitals/Coler- Verna Fitzpatrick
NYC Health + Hospitals/South Brooklyn Health- Rosanne DeGennaro
NYC Health + Hospitals/Gotham/Cumberland- Jaqueline Narine
NYC Health + Hospitals/Gotham/East New York- Crystal Matthews
NYC Health + Hospitals/Elmhurst- Raj Punjabi
NYC Health + Hospitals/Gotham/Gouverneur- Pauline Lock
NYC Health + Hospitals/Harlem- Michelle Booker
NYC Health + Hospitals/Jacobi- Charmaine Graham
NYC Health + Hospitals/Kings County- Lorna Chin
NYC Health + Hospitals/Lincoln- Richard Izquierdo Arroyo
NYC Health + Hospitals/McKinney- Debera Tyndall
NYC Health + Hospitals/Metropolitan- James Ratti
NYC Health + Hospitals/Gotham/Morrisania- Leslie Harrison
NYC Health + Hospitals/North Central Bronx- Rob Seitz
NYC Health + Hospitals/Queens- Robin Hogans
NYC Health + Hospitals/Gotham/Sydenham- Joyce M. Rivers-Clark
NYC Health + Hospitals/Sea View- George Wonica
NYC Health + Hospitals/Woodhull- Ivette Luperena Delgado

Ms. Jackie Rowe-Adams called the meeting of the Community Relations Committee to order at 5:18 p.m.

Quorum was established. The minutes of the Community Relations Committee meeting held on September 9, 2025, were reviewed. Upon motion made and duly seconded, the minutes were unanimously approved.

Ms. Rowe-Adams established the order of the meeting and welcomed the presentation of the President's report.

Dr. Mitch Katz shared the President's report:

- The Mayor announced \$50 million in emergency funding due to SNAP funding not being refilled during the month of November
- X-ray capability and diagnosis is being expanded through the System for better diagnosis
- A baby named Myracle was successfully discharged from Queens Hospital after being born at 22 weeks
- Natalie Cineas, Chief Nursing Officer celebrated 16 nurses becoming doctoral nurses
- The Mayor announced that his administration has canceled \$135 million in medical debt for 75,000 New Yorkers

Ms. Rowe-Adams noted the Community Advisory Board's annual verbal reports scheduled to be presented at this meeting:

1. NYC Health + Hospitals/Metropolitan
2. NYC Health + Hospital/ Harlem
3. NYC Health + Hospital/ Sydenham
4. NYC Health + Hospitals/Woodhull

PRESENTERS:

Ms. Rowe-Adams moved the agenda to the (4) facilities, presenting their verbal annual reports. Each presentation is allotted 5 minutes.

NYC Health + Hospitals/Metropolitan

Mr. James Ratti, Chair of the NYC Health + Hospitals/Metropolitan CAB, presented the report to the CRC. Mr. Ratti stated that the facility is continuously working to improve infrastructure and equipment. They have installed a new MRI Trailer and have completed phase 1 of renovation of the Hospital Lab. They have also installed a new security system.

Some achievements include a designation for LeapFrog "A" grade for Patient Safety, U.S. News and World Report Best Hospital, and nursing excellence designation such as a Lantern Award from the Emergency Nurses Association for leadership, innovation, and improving patient care. Ongoing projects include focusing on MyChart utilization and focusing on patient safety and satisfaction through after visit surveys and staff wellness.

The facility is addressing concerns with the care experience steering committee, senior leadership, and the patient family advisory council,

meeting regularly to discuss patient issues and potential solutions. The facility is also increasing engagement with stakeholders in the community that work with seniors, children, and adolescents.

Ms. Rowe-Adams polled Committee members for their comments or questions.

Dr. Katz stated that the appointment of Dr. Anita Surinavasan is significant and there are now four women Chief Medical Officers in the System, with three being women of color. This is a sign of how much diversity is valued at NYC Health + Hospitals at every level.

NYC Health + Hospitals/Sydenham

Ms. Danielle Lewis-McLaurin, member of NYC Health + Hospitals/Sydenham CAB, presented the report to the CRC on behalf of Ms. Joyce Rivers, Chair of the NYC Health + Hospitals/Sydenham CAB. The facility is updating the dental room chairs and will continue to advocate for needed equipment and infrastructure. The roof needs repairs and the HVAC system frequently fails.

The Press Ganey Q2 "Rate Provider" score was at 82% and the "Recommend this provider's office" was at 86%. The surveys show the best areas relate to staff performance, and complaints have been minimal relating to longer wait-times and delays with visits. To address these issues the facility has implemented communication with physicians regarding delays and will run lab or vaccines in between wait-times to expedite the visit. Sydenham was certified gold for diabetes, cholesterol, and gold plus for hypertension by the American Heart Association.

Ms. Rowe-Adams polled Committee members for their comments or questions.

NYC Health + Hospitals/Woodhull

Ms. Ivette Luperena Delgado, Chair of the NYC Health + Hospitals/Woodhull CAB, presented the report to the CRC. Generators are being designed and replaced to be more efficient and resilient during weather events, as well as designing and renovating the critical care and trauma care in the emergency department. Existing boilers will be upgraded and pharmacy equipment will be upgraded to install automated dispensing technology in patient care areas.

Woodhull's Patient Safety Program continues to focus on the accurate identification of patients, ensuring "right care for the right patient". For staff engagement the facility continues to advance the culture of compassion through ICARE training and ICARE staff pledge. The Helping Healers Heal Workforce Wellness program provides comprehensive wellness support designed to meet the emotional and psychological needs of all hospital staff.

Frequent complaints for 2024 were related to Care, Coordination of Care, Attitude and Behavior, and Property. Continuous efforts going into 2025

include: reinforcing the importance of "Compact of Professional Behavior" training, which directly impacts and addresses this trend, Communication Matters training, and Compact of Professional Behaviors training.

Improvements also include the windows being cleaned which have made a big difference.

Ms. Rowe-Adams polled Committee members for their comments or questions.

Dr. Patricia Marthone stated that is nice to hear that the outside of the building is being improved to reflect the inside because the layout is magnificent and more could be done with the outside to make it more inviting.

NYC Health + Hospitals/Harlem

Ms. Michelle Booker, chair of the NYC Health + Hospitals/Harlem CAB, presented the report to the CRC. This year the facility is actively upgrading the boiler plant and renovating the post-partum unit and 5th floor CT procedure room to meet the needs of the community. Active expense projects include installing feeders for MRI UPS, and demolishing and rebuilding 2 bathrooms in the MLK building. New equipment has been acquired including a GE CT scanner, an ablation system, a nuclear camera, ultrasound machines, bariatric equipment, and smart beds.

The Harlem Patient Safety Committee met monthly to review topics including the good catches of which there were 178 in the first 3 quarters of 2025. There were also 19 educational safety sessions taught to Harlem staff so far this year. Top complaints include poor attitude, care, and communication. Customer Service training has been implemented to enhance patient interactions and improve the overall patient experience. Highlights include: Center of Excellence in Surgical Safety, LGBTQ+ Designation, and Type 2 Diabetes Honor Roll. Challenges that the facility face include: reducing costs by converting temporary workers to permanent lines and the Legionnaires' Disease Outbreak to which the facility partnered with the CAB to allay concerns and disseminate information to the community.

Ms. Rowe-Adams polled Committee members for their comments or questions.

Ms. Rowe-Adams commended the facility on how they handled the Legionnaire's outbreak and the criticism within the community by getting out to the community and giving out information.

ADJOURNMENT:

Meeting adjourned at 5:59 P.M



COMMUNITY ADVISORY BOARD

Community Relations Committee Report 2025

January 6, 2026

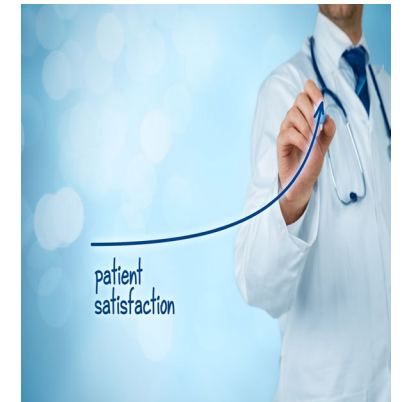
EQUIPMENT & INFRASTRUCTURE

- Nursing Facility Ventilator Expansion Project:
 - Carter received a NYS legislative grant (\$730K) to expand the nursing facility vent capacity. Approval from the NYS DOH was granted to temporarily relocate residents to the LTACH during the expansion. The continuity of staffing, services and activities will remain with the residents.
- During this past year, we acquired new feeding and IV pumps
- Based on employee feedback surveys and suggestions, the facility installed a gym for all staff to enjoy.
- Eliminated Pxyxis and replaced it with Omincell Medication Management Systems for 1st dose pharmaceuticals.



Patient Safety & Satisfaction

- Patient safety and satisfaction remains a top priority for Leadership, CAB, and staff as evident by recent Press Ganey Patient and Resident surveys. Staff engagement and wellness remains the foundation to maintaining overall increased satisfaction.
- Carter is honored to be listed as one of the “Best Nursing Homes” by “U.S. News and World Report” for Short-Term Rehabilitation, and elated to have received acknowledgment for our Long-Term Care in 2026. This recognition validates Carter’s ongoing commitment to delivering compassionate care and an overall positive person-centered experience. This accolade continues to affirm our pledge to exemplify the ICARE with Kindness model during each and every interaction.
- In the Nursing Home, Carter was named to Newsweek Magazine’s Best Nursing Homes List, Ranking #4 out of over 600 Nursing Homes in New York State.
- In October 2025, Carter NF completed a successful NYS DOH Article 28 NF Survey. The 6-day clinical survey and the 1-day environmental produced no deficiencies!
- Carter submitted and received the American Nurses Credentialing Center (ANCC) “Clinical Pathway to Excellence with Distinction. The designation was awarded in 2025, however it was a 24-month organizational journey to achieve. Carter became the first post-acute care organization in the country and the second Health + Hospitals facility to receive the coveted “With Distinction.”



FREQUENT COMPLAINTS BY PATIENTS & RESIDENTS

➤ Overall, patient/resident complaints remained low during the past year; an analysis identified the most common issues:

➤ Attitude/Courtesy

➤ Action Plan - To address staff attitude/courtesy, ICARE with Kindness trainings and pledges are ongoing as well as an increase in staff engagement and wellness activities.

➤ Delay of Care

➤ Action Plan - To address the delay of care, care plans will continue to be re-modified based on patient/resident preference in care



Carter's Community Impact

Highlights:

- We continue to fulfill the Health + Hospitals mission by providing uncompensated care to those who are not eligible for public benefits
- Carter's Nursing Aide Training Program continues to go well. Since the program's inception in January 2022, to date, there have been ninety-two (92) candidates. Of the ninety-two (92) candidates, forty-two (42) are currently working on the units. The program received state recertification until 2027 and remains open to the community.
- In 2026, we will continue moving forward with plans to open outpatient Radiology and Rehab Service, blood transfusion and expansion of ventilator services in the nursing facility
- During 2025, the CAB officially welcomed two (2) new members.
- Partnered with NYS Senator Edward Gibbs in donating school supplies and book bags to local schools
- Participated in Senior Day and Afro Latino events sponsored by NYS Senator Cordell Cleare
- Other community related events included:
 - Voter registration
 - Blood pressure screenings, education and a Toy Drive were held for the Boriken Neighborhood Health Center
 - Ongoing partnership with the Uptown Grand Central Farmstand
 - Participated in local job fairs and continued affiliations with nursing programs
 - Ongoing partnership with WorkWell NYC



Challenges:

- Staying Healthy – Diabetes and High Blood Pressure continues to maintain a high prevalence in the East Harlem Community. We are committed to continuous outreach through health screenings to address these issues.

We are excited about our strategic plans for 2026 and the positive impact it will have on the East Harlem Community. We look forward to furthering the Health + Hospitals mission and ensure Carter remains a premiere post-acute care facility.

ACKNOWLEDGEMENTS

We would like to extend our gratitude to Carter’s Clinical and Operational Leadership for their tireless commitment to serving the health care needs of our neighborhoods as well as our strategic partners who help to amplify the impact of our work, just to name a few:

- + U.S. Congress – Hon. Andriano Espaillat
- + Manhattan Borough President – Hon. Mark Levine
- + NYS Senator – Cordell Cleare
- + NYS Assembly – Jordan Wright
- + NYS Assembly – Edward Gibbs
- + NYC Dist. 8 Councilmember – Diana Ayala
- + Wheelchair Charities – Henry “Hank” Carter, CEO

- + Henry J Carter Auxiliary
- + Community Board 11
- + Uptown Grand Central – Karey King
- + NYPD
- + FDNY
- + Jeannette Rosario, Associate Executive Director, HJC
- + Nyron McLeish, CAB Liaison

LaShawn Henry

LaShawn Henry
CAB Chairperson

Floyd R. Long

Floyd R. Long
Chief Executive Officer



COMMUNITY ADVISORY BOARD
NYC Health + Hospitals Community Relations Report
January 6, 2026



NYC
HEALTH+
HOSPITALS

Gotham Health
East New York



INFRASTRUCTURE Projects

- ❖ Certificate to Proceed submitted and approved for:
 - ADA bathroom;
 - Vestibule;
 - DEXA (bone density equipment for Radiology Department);
 - IDF/IT closets
- ❖ Kick-off the facility-wide Comprehensive Energy Project
- ❖ Scope defined for the Women's Health / Pediatric renovation
- ❖ Design walk-through for the Optometry upgrade
- ❖ Integration of Primary Care into Behavioral Health completed in April 2025.



Gotham Health
East New York



FREQUENT COMPLAINTS RAISED BY PATIENTS

Staff Challenges:

- Due to loss of primary care providers this has presented a challenge with TNAA (Third Next Available Appointment)
- Continuity of care
- Uptick in patient walk-in (seasonal impact due to Covid-19, and Flu)
- Site leadership continues to work with the executive team to approve vacant lines in a timely fashion. Once vacant lines are approved site leadership will work with HR to interview qualified candidates

Unanswered Phone:

- **Call Center Option:** Allowing patients to contact a centralized call center
- **Voicemail Follow-up:** Having staff check voicemail AM & PM to retrieve messages and direct accordingly to be addressed.

Communication:

- **Communication Training:** Providing staff with regular communication training ensures they are equipped to engage with patients effectively, handle difficult situations, and provide clear instructions.
- Offering standardized communication materials (like checklists, discharge instructions, or follow-up steps) can reduce confusion and make things easier for patients.
- Clerical staff have been enrolled in monthly continuing education classes over the span of the calendar year to assist with professional development.





**NYC
HEALTH+
HOSPITALS**

Gotham Health
East New York



PATIENT SAFETY & SATISFACTION

- ❖ We continue to use the ICARE with Kindness as a strategic priority that aims to infuse our health system's culture with more kindness. We aim to ensure that all employees take the "Pledge" to ensure that all staff uphold the ICARE values
- ❖ We aim to have each of our patients have a positive experience.
- ❖ Engage in weekly rounding to ensure clinic safety and patient satisfaction to address issues in real time. Real time service recovery is our goal in our to mitigate any potential issues as well obtain real time feedback





ISSUES IMPACTING THE COMMUNITIES SERVED BY THE FACILITY

Gotham Health East New York seeks to understand and treat the patients they serve. ENY holistically assists patients in navigating their health journey, despite social determinants of health and cultural differences in the community.

❖ Chronic Diseases such as Diabetes and Hypertension

- *Treat 2 Target Program
- *American Medical Association/AHA: Gold +: Blood Pressure, Gold: Type 2 Diabetes, Gold: Cholesterol Tx.
- * 5 star rating in Health First Eye exam
- * 5 star rating in Health First Breast Cancer Screening
- * 5 star rating in Health First Chlamydia Screening

❖ Obesity

- * Collaborative/holistic treatment options
- * Cultural and SDOH sensitive treatment options/education
- * Health Bucks (Farmer's Market)



ACKNOWLEDGEMENTS

We would like to thank, East New York's Clinical and Operational Leadership for their tireless commitment to serving the health care needs of our neighborhoods in East Brooklyn as well as our strategic partners who help to amplify the impact of our work:

- ❖ **Brooklyn Borough President- Hon. Antonio Reynoso**
- ❖ **NYS Senator – Hon. Roxanne Persaud**
- ❖ **Assembly Member – Hon. Erik Dilan**
- ❖ **NYC Council Member- Hon. Chris Banks**
- ❖ **NYC Council Member – Hon. Sandy Nurse**
- ❖ **NYC Council Member -Hon. Darlene Mealy**

Signatures:



CAB Chairperson, Crystal Matthews



Regional Director of Ambulatory Care Services, Charmaine Roach-Valentine



COMMUNITY ADVISORY BOARD

Community Relations Report

January 6, 2026

ABOUT US

At NYC Health + Hospitals/Kings County, we are committed to delivering high-quality care that meets the evolving needs of the Brooklyn community. We continuously enhance and implement programs and services to promote optimal health and support a thriving community. Guided by our ICARE values, we focus on five strategic pillars, financial sustainability, access to care, culture and safety, quality of care, and patient experience, to drive excellence in everything we do.

Lorna Chin
CAB Chair
NYC Health + Hospitals/Kings County



INFRASTRUCTURE AND EQUIPMENT

Infrastructure

- Completed P Building Exterior Renovation
- E Building elevator renovation (in progress)
- Ambulatory Surgery Center – C2 (in progress)
- Cardiac Cath and Interventional Radiology Suite (in progress)
- ED Observation Unit Expansion (in progress)
- Completed D Building Pharmacy Omnicell Renovation
- Completed S Building Sterile Pharmacy Renovation
- Completed Institute for Joint Restoration – E1 Renovation

Major Medical Equipment

- 3rd Surgical Robot
- CT Scanner – ED (in progress)
- 3 new x-ray machines (S2)
- Nuclear Medicine renovation (in progress)
- LINAC renovation (in progress)
- Lab Analyzer upgrade
- Replacement of 350 inpatient beds
- Replacement of ~1,800 infusion pumps

Patient Safety

SUCSESSES: What are you most proud of?

Financial Sustainability & Resource Optimization

- **60%** reduction in **non-emergency medical transport** (bill-to-hospital) costs. Monthly expenditures decreased from **\$140K to \$54K**, generating **\$513,620** in savings (2024).

Quality Outcomes & Clinical Excellence

- **87%** reduction in **CLABSI events** (15 in 2024) to (2 in April 2025) with **168 consecutive days** of zero infections.
- **94%** reduction in **CAUTI events**, from (17 in 2024) to (1 in April 2025) with **168 consecutive days** of zero infections.

GOALS: What are you most focused on as a goal for the upcoming year?

Culture of Safety Enhancement

- Reduction in fall injury rates from 0.49 to < 0.2 through targeted prevention strategies.

Care Experience & Patient Engagement

- Improvement in HCAHPS scores to meet and exceed New York State performance.

QUALITY HIGHLIGHTS

2025 Get With the Guidelines

- Stroke Gold Plus
- Resuscitation Gold
- Heart Failure Gold Plus
- AHA Commitment to Quality Award

Hospital Program Accreditations

- Advanced Thrombectomy-Capable Stroke Center re-certification.
- Level 1 Trauma Center reverification.

Quality Improvement Initiatives

- New e-prescription pathway for durable medical equipment.
- Registration accuracy initiative for reducing errors and denials.
- Quality Academy program welcoming 33 new trainees to the 2025-2026 cohort.

Patient Satisfaction

■ Patient Guest Relations

- 24-hour patient advocacy is available through the office of Patient Guest Relations on a daily basis
- **Complaints and Grievances**
 - Top categories of complaints and grievances: care; communication; patient safety; attitude; wait times; lost property; other
 - Complaints Q1 – Q3 2025 = 1,075. This is a reflection of the 24-hour process, and helps to reduce the number of grievances
 - Grievances Q1 – Q3 2025 = 111. Our number of grievances has declined steadily since Patient Guest Relations has taken a more proactive role in the hospital through a robust daily rounding practice on all tours.
- **Compliments**
 - Q1 – Q3 2025 = 1,576 compliments received on behalf of staff who provided exceptional care.

■ Language Access

- Kings County serves one of the most diverse patient populations by language group, in the United States of America
- We have provided over 1,600,000 minutes of interpretation for over 99,700 requests, with a 99.61% fulfillment rate

■ Patient Experience

- Patient Satisfaction scores are the metrics by which we monitor patients' perceptions of our care delivery.
- Across service lines we see improvement in the hospital's overall ratings
- Main areas of focus for improvement work: Nurses Communication; Doctors Communication; Staff Responsiveness to Requests; Communications about Medicines; Discharge Communication

■ Employee Experience

- We completed our biennial Employee Feedback Survey with a 55% response rate, the highest response Kings County has achieved
- Staff perceptions of loyalty, pride, leadership and safety culture improved with statistical significance

Patient Concerns and Issues Impacting the Community

Challenges

- Wait times for appointments in the ambulatory care practice
- Availability of affordable housing
- Community safety concerns in the hospital's catchment areas
- Need for expansion of Emergency Department space to meet increasing patient demand
- Emergency Department wait times being addressed through quality improvement initiatives to reduce patients leaving without being seen
- Concerns about declining access to public benefits, food assistance programs, and healthcare services

Facility Initiatives to Address Patient Concerns

Wait times for Appointments in the Ambulatory Care Practice

- Most issues stem from a single root cause: lack of space. To address this, we are initiating a study to optimize exam room utilization by evaluating how staffing models and workflows align with exam room capacity and clinical demand.

Need for expansion of Emergency Department space to meet increasing patient demand.

- Several Emergency Department expansion projects are planned and awaiting execution, including full reconstruction of the Observation Area and expansion of the Trauma Bay. However, more immediate priorities affecting the Emergency Department must be addressed first, most critically the replacement of the CT unit in the rear of the Emergency Department. The existing unit is beyond repair, with no replacement parts available, making this project extremely urgent. The replacement will take several months and must come first.

Emergency Department wait times being addressed through quality improvement initiatives to reduce patients leaving without being seen.

- The Emergency Department has implemented parallel nurse triaging, allowing nurses and providers to assess patients simultaneously and initiate tests and treatments earlier. This approach reduces wait times, improves patient flow, and expedites care safely. Additionally, the Emergency Department will undergo a major reconstruction expected to increase patient throughput, including a redesign of the Fast Track Unit to improve workflow and accommodate more patients simultaneously.

Concerns about declining access to public benefits, food assistance programs, and healthcare services

- NYC H+H Kings County operates the only Commodity Supplemental Food Program within NYC H+H and has been in operation at Kings County for⁷30 years. This program provides food supplements to patients aged 60 and older who meet eligibility criteria and serves over 10,000 recipients. The CSFP packages and delivers food supplements throughout all five boroughs of New York City, except Staten Island.

Facility Initiatives to Address Patient Concerns Continued...

Lost Property in the Emergency Department

- The Emergency Department team has strengthened patient property management through enhanced bedside reconciliation of clothing, bag labeling, and documentation, as well as significant improvements to backend processes by revamping the patient property room. The room is now organized, alphabetized, consistently maintained, and supported by a diligently tracked outreach process, streamlining property retrieval and ensuring timely notification for patients and families.

Impact

- The sleep apnea program has been enhanced with at-home studies. The at-home program began on August 8, 2025. As of December 12, 2025, a total of 96 studies have been completed.
- Head cooling blankets have been implemented, eliminating the need to transport NICU babies to other facilities.
- NYC Health + Hospitals/Kings County has received the Safe Sleep Gold Designation.
- Kings CARES Practice (Forensic Clinical Practice)
 - A follow-up practice for victims of trauma and abuse has been established to ensure appropriate care after SART (Sexual Assault Response Team) assessment and evaluation. The program currently works with the Mayor's Office and Family Justice Centers and is managed by physicians who have completed the fellowship program. The forensic program has been running successfully, and with the addition of fellowship-trained physicians, the clinic is slated to go-live in January.
- Memorial Fountain – Established for hospitalized COVID patients, with services available to other family members.
- Opened Child Advocacy Center
- The nursing retention rate was 85% from 2024 to 2025, reflecting successful recruitment efforts
- Discharge planning has enhanced team coordination to monitor and improve timely discharges, helping decompress the emergency department and allowing families to prepare for timely pick-up.
- The extension of pediatric behavioral health clinic hours facilitates access for working families.
- NYC Health + Hospitals/Kings County received reverification as an American College of Surgeons (ACS) Verified Level I Trauma Center.
- NYC Health + Hospitals/Kings County was awarded designation as a Center of Excellence in Lung Cancer Screening.
- CTI (Critical Time Intervention) Team: Works in the community following a CPEP or inpatient stay to ensure patients with serious mental illness are connected to ongoing care, reduce readmissions, and support safe transitions.
- CFS (Crisis Follow-Up Service): An extension of CPEP that works with patients for up to 30 days post-discharge, providing on-campus support for up to five weeks to ensure strong connections to outpatient care.
- NYC Health + Hospitals/Kings County will be starting its first sponsored GME residency program in Pediatrics in July 2026. While KCHC has hosted residents in all specialties for a long time, these residents have all been part of SUNY Downstate-sponsored residency programs, with KCHC covering approximately 60% of the resident workforce salaries. Having our own sponsored residency program allows us to create a better learning environment for our residents and protects the hospital from changes in the healthcare landscape in Brooklyn. Interviews for the Pediatric residency are currently underway, and 13 of the 15 positions have been filled to date.

ACKNOWLEDGEMENTS

The NYC Health + Hospitals/Kings County Community Advisory Board extends its sincere thanks and gratitude to the following teams for their ongoing support in expanding and enhancing patient access to care.

- NYC Health + Hospitals/Kings County CAB Chair Lorna Chin
- NYC Health + Hospitals/Kings County Office of Communications & Public Affairs
- Councilwoman Rita Joseph
- Council Speaker Adrienne Adams
- Brooklyn Borough President Antonio Reynoso
- NYC Health & Hospitals/Kings County Senior Leadership



Sheldon McLeod, CEO



Lorna Chin, CAB Chair



COMMUNITY ADVISORY BOARD

Community Relations Report
January 6, 2026

ACTIVE PROJECTS & OPERATIONAL STATUS

Advancing Surgical Capability, Diagnostics and Patient Care

- **PET CT Replacement** — Construction complete; equipment delivered; patient acceptance testing scheduled 12/22/2025.
- **MRI Suite Renovation** — Construction mobilized (started Aug 2025); active on site.
- **Interventional Radiology renovation** — Project complete; contract closeout underway.
- **Community Retail Pharmacy and Pharmacy Decanting** Final construction documents pending; construction start paused until approvals/funding secured.
- **T Building basement Fit Out and Simulation Center** — Design in progress; \$500,000 award secured from the Office of the Queens Borough President.
- **HUGS Replacement** — Installation in progress; Wi Fi/configuration delaying go live to early 2026.
- **Campus Lighting Upgrade** — Overall progress 59%; Building N near substantial completion.
- **Procurement highlights (equipment ready for commissioning)** — Portable X-ray units, sterilization washers, fetal monitors.

FUNDING, NEXT STEPS & IMPACT

Funding Snapshot, Near Term Actions and Expected Impact

Funding Snapshot

- FY25 capital program - \$38M (bond requests, internal capital, City Council/BP).
- Bond request submitted to OFD - \$26.8M for priority items (PET CT, automated pharmacy carousel, community pharmacy construction, smart beds, nurse call replacement, CT simulators).

Near term approvals & actions required (to avoid schedule delays)

- Approve bond and capital project requests and reallocate funds from closed/defunct projects to cover shortfalls (priority: Dialysis Training Center, Community Pharmacy).
- Complete final construction documents and obtain finance/permit approvals to enable bidding and mobilization (Pharmacy projects, T Building fit out).
- Expedite procurement, commissioning and clinical acceptance testing for major equipment (PET CT PAT, MRI commissioning, portable X rays, sterilization washers).

Impact

- Modern imaging, robotic and operating room investments plus simulation training will shorten hospital stays, lower readmissions and per patient costs, and strengthen Queens Hospital's surgical leadership.

PATIENT SATISFACTION & STAFF WELL-BEING (H3)

Key Results

- Emergency Department overall score up 5.1% (54.4 → 57.2).
- Ambulatory Surgery score up 3.9% (83.6 → 86.9).
- Inpatient Behavioral Health score up 20.7% (58.5 → 70.6).
- Outpatient Behavioral Health score up 6.1% (55.7 → 59.1).

These gains demonstrate measurable improvements in experience and safety across care settings.

Helping Healers Heal (H3) / Wellness Program

- H3 supports eight dimensions of well being (emotional, occupational, physical, social, spiritual, intellectual, financial, environmental) to reduce burnout and strengthen clinical performance.
- September–October 2025 employee feedback survey: 95.4% awareness of H3; strong interest in using program resources.
- New roles supporting wellness: Wellness Program Coordinator (June 2024) and Person Centered Care Director.
- Expanded support individual/group debriefs and proactive outreach to create safe spaces for staff to decompress.
- Strong staff engagement linked to rising patient satisfaction (HCAHPS) trends.

Collaborative Efforts

- Care Experience Department and the Patient Partnership Council are working together to translate staff feedback into service improvements and elevate the overall care experience.

COMPLAINTS & GRIEVANCES: VOLUME, TRENDS & CONTEXT

Key Metrics

- **Total complaints:** 71 (down 19.3% from 88).
- **Total grievances:** 83 (up 3.7% from 80).

Top complaint categories (by frequency)

1. Attitude & communication
2. Quality of care
3. Overall patient experience
4. Nursing care
5. Discharge processes
6. Medical care

Top grievance categories (by frequency)

1. Attitude & communication
2. Medical care / allegation of abuse
3. Overall experience
4. Quality of care
5. Property issues
6. Discharge processes
7. HIPAA concerns
8. Nursing care

Bottom line

Complaint volume is falling, signaling early effectiveness of interventions. Grievances remain a priority — we are targeting root causes to convert concerns into improvements and stronger trust.

ACTIONS UNDERWAY: COMMUNICATION, CARE EXPERIENCE & OPERATIONS

Targeted Action to Address Top Concerns

Person-Centered Care Initiatives

- ICARE with Kindness pledges, targeted training, and reinforcement to improve staff-patient interactions and service behaviors.

Communication Improvements

- Standardized scripts and signage to set realistic ED and outpatient wait time expectations.
- Expanded use of interpreters and translated materials to ensure patients receive information in their preferred language.
- Enhanced discharge communication protocols to improve understanding of follow up care and reduce readmissions.

Care Experience & Partnership

- Deeper integration between Care Experience, clinical teams and Patient Partnership Council to co-design solutions and measure impact.

Operational Fixes

- Strengthened processes with Property Office to safeguard patient belongings.
- Procedural reviews and staff coaching in high frequency areas (discharge, nursing handoffs, bedside communication).

By combining staff wellness, strengthened communication, person centered training and focused operational fixes, we are reducing complaints, improving satisfaction scores and building sustained trust with the communities we serve.

HAPPENINGS IMPACTING THE COMMUNITY

HIGHLIGHTS — 2025 Accomplishments and Recognitions

- **Leapfrog Hospital Safety Grade:** A (Spring & Fall 2025)
- **U.S. News & World Report Best Hospital Rankings 2025–2026** — high performance in diabetes care, heart arrhythmia, heart failure and pneumonia
- **American Heart Association awards** — Commitment to Quality; Heart Failure Gold Plus; Resuscitation Silver (adult); Stroke Gold Plus
- **Baby Friendly Hospital re designation** (May 2025)
- **GO2 for Lung Cancer Center of Excellence** (Dec 2025)
- **AORN Center of Excellence in Surgical Safety:** ERAS (Dec 2025) — first facility nationwide

CHALLENGES / FOCUS AREAS — Master Plan & Community Impact

- **Behavioral Health Demand:** Emergency and psychiatric visits are rising in Southeast Queens, straining current emergency behavioral health capacity. To address this, the hospital will relocate and expand the Comprehensive Psychiatric Emergency Program (CPEP) from the main building into the planned Shulman Pavilion, enabled by a \$70 million allocation from the Jamaica Neighborhoods Plan.
- **Chronic Disease Burden:** High rates of hypertension, diabetes and other chronic conditions in the community contribute to preventable admissions and poor outcomes. Consolidating mental health services and reconfiguring ambulatory care space in the main hospital will increase outpatient capacity and enhance programs for chronic condition management.
- **Late Stage Diagnoses and Screening Gaps:** Many community members present with advanced cancers and other late stage diseases due to low screening uptake. We are launching a major public education and outreach campaign focused on early cancer screening and chronic disease detection to increase timely diagnosis, reduce disparities, and improve outcomes.

ACKNOWLEDGMENTS

We would like to extend our gratitude to NYC Health + Hospitals/Queens' Clinical and Operational Leadership for their tireless commitment to serving the healthcare needs of our neighborhoods in southeast as well as our partners in government who help to secure the resources we need to provide our community with excellent and safe health care services.

- + Congresswoman Grace Meng
- + Congressman Gregory Meeks
- + Queens Borough President Donovan Richards
- + NYS Senator Leroy Comrie
- + NYS Senator John Liu
- + NYS Senator James Sanders
- + NYS Assembly Member Nily Rozic
- + NYS Assembly Member Alicia Hyndman
- + NYS Assembly Member David Weprin
- + City Council Speaker Adrienne Adams
- + City Council Member James Gennaro
- + City Council Member Nantasha Williams
- + City Council Member Selvena Brooks-Powers

Signatures:



Robin Hogans, CAB Chairperson
Date: 12/17/2025



Neil J. Moore, MBA, MPA, FACHE, Chief Executive Officer
Date: 12/17/2025