NYC HEALTH+ HOSPITALS

COMMUNITY RELATIONS COMMITTEE

OF THE BOARD OF DIRECTORS

November 10, 2026

5:00 P.M.

50 Water Street

AGENDA

I.	Call to Order	Jackie Rowe-Adams
II.	Adoption of September 1, 2026 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/Harlem	Ms. Michelle Booker
	b. NYC Health + Hospitals/Metropolitan	Mr. James Ratti
	c. NYC Health + Hospitals/ Gotham Health, Sydenham	Ms. Joyce M. Rivers-Clark
	d. NYC Health + Hospitals/Woodhull	Rev. Ivette Luperena-Delgado
VI.	Old Business	
VII.	New Business	
VIII.	Adjournment	

COMMUNITY RELATIONS COMMITTEE

OF THE BOARD OF DIRECTORS

September 1, 2026

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. José Pagán
Ms. Vanessa Rodriguez

NYC HEALTH + HOSPITALS CENTRAL OFFICE STAFF

Deborah Brown, Senior Vice President, Chief External Affairs Officer
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
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—
NYC Health + Hospitals/Coler— Verna Fitzpatrick
NYC Health + Hospitals/South Brooklyn Health— Theresa Scavo
NYC Health + Hospitals/Gotham/Cumberland— Jacqueline Narine
NYC Health + Hospitals/Gotham/East New York— Evelyn Pugh
NYC Health + Hospitals/Elmhurst— Karla Leon
NYC Health + Hospitals/Gotham/Gouverneur— Grauven Olivares
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- Marva Dudley
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 5:05 p.m.

Quorum was established. The minutes of the Community Relations Committee meeting held on May 5, 2026, 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:

- Newsweek named NYC Health + Hospitals/Bellevue among the best physical rehabilitation facilities in 2026.
- H+H launched a new program to connect veterans throughout New York City to benefits and services they are entitled to receive. Dr. Katz noted the importance of the program as some veterans may lose Medicaid coverage.
- H+H continues to support the Mayor's doula programs, which aim to improve delivery experiences and outcomes for women.
- NYC Health + Hospitals/Kings County was named a Center of Excellence for surgical services.
- NYC Health + Hospitals/Lincoln, in collaboration with Stony Brook, performed a lifesaving and complex oral procedure on a pediatric patient who had previously been unable to eat solid foods. Following the procedure, the patient was able to eat solid food for the first time.
- H+H performed its first stereotactic tactile radio surgery, providing a safer treatment option for patients.
- NYC Health + Hospitals/Lincoln received the full transparency patch from Leapfrog and was recently recertified as a thrombectomy-capable center.
- NYC Health + Hospitals/North Central Bronx received $600,000 for a microscope.
- H+H received approximately $24 million to provide legal assistance to patients. H+H provides access to lawyers within hospitals who assist patients with issues including evictions and immigration cases.
- NYC Health + Hospitals/Bellevue received new surgical tables to support orthopedic surgeries.
- The Governor provided $21 million to expand programs for people experiencing a mental health crisis.
- NYC Health + Hospitals/Lincoln received new cardiac catheterization equipment.
- NYC Health + Hospitals/North Central Bronx received its Baby-Friendly Organization re-designation.
- MetroPlusHealth received four-star Medicare ratings.
- Dr. Katz reminded attendees that flu vaccines would soon become available and encouraged vaccination.

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

1. NYC Health + Hospitals/Coler
2. NYC Health + Hospitals/Jacobi
3. NYC Health + Hospitals/McKinney
4. NYC Health + Hospitals/North Central Bronx

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/Coler

Ms. Verna Fitzpatrick, Chairperson of the NYC Health + Hospitals/Coler CAB, presented the report to the CRC. Ms. Fitzpatrick introduced Coler's new CEO, Natalie Yakovleva, and shared progress and initiatives focused on improving residents' quality of life, facility infrastructure, and integration with the Roosevelt Island community.

Infrastructure improvements included lowering the nurses' station desk height to improve accessibility and communication, particularly for residents who use wheelchairs. Mobile television monitors were placed throughout the facility to provide residents, staff, and visitors with information about initiatives and upcoming events. A commercial oven was also installed for baking and cooking.

A new post-acute care simulation center is being developed at Coler and is expected to be fully operational by the end of 2026. Ms. Fitzpatrick stated that, to her understanding, it will be the first simulation center at a subacute facility. Coler also continues to work with the Office of Facility Development and Central Office on construction of a berm to protect the facility from potential flooding.

The public announcement system was upgraded, and additional signage was installed at the building entrance and along the road leading to the facility.

Coler continues to strengthen its person-centered care culture by prioritizing residents' goals, values, and choices while promoting staff wellness. The facility is preparing for Planetree Certification and expanded its Care Partner Program to include 20 family members.

Coler has also partnered with the Roosevelt Island community on several projects, including planting flowers around the perimeter of the building. Staff wellness programming continues to expand, with 11 new wellness champions added to support employees.

Resident satisfaction survey data showed increases across all eight survey categories, with Coler ranking highly among other facilities in New York

State. Coler also graduated a class of Certified Nursing Assistants in May 2026 and enhanced mental health programming for behavioral residents.

Coler received a five-star overall CMS rating, including five stars in staffing and three stars in quality. Coler was identified among the Top 10 Nursing Facilities in New York State by Newsweek and ranked among the Best Nursing Homes in 2026 by U.S. News & World Report. The facility was also designated a leader in long-term care equality for LGBTQ+ elders.

Issues impacting the facility include its aging infrastructure, as the building was constructed in 1952, creating significant financial and operational challenges. Staffing also remains difficult, particularly recruitment for positions that have already been approved.

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

Dr. Pagán congratulated Coler on its five-star CMS rating and stated that he looks forward to seeing the simulation center when it is completed.

Ms. Vanessa Rodriguez congratulated Coler on its work and welcomed the new CEO.

Dr. Katz stated that Coler is special because its island environment provides residents with a greater level of freedom and independence.

Ms. Kawatra congratulated Coler on its recognitions and welcomed the new CEO. She also commended the facility for its work on climate resiliency.

NYC Health + Hospitals/Jacobi

Ms. Charmaine Graham, Chairperson of the NYC Health + Hospitals/Jacobi CAB, presented the report to the CRC. Ms. Graham highlighted Jacobi’s accomplishments, community engagement efforts, infrastructure improvements, and investments in modern technology.

Infrastructure and equipment investments include new TMS 2000 equipment, hardware and software for speech and swallowing services, a new radiology ultrasound, replacement urology ultrasound, Fibro machine, three Emergency Department ultrasound machines, mini C-arm and O-arm imaging systems, and a Mozart IQ system for the Operating Room.

Additional projects include a new wave ablation system, MRI suite renovations, a second MRI, a new emergency generator, Emergency Department X-ray renovations, and two phases of Stand Up to Violence renovations.

Person-centered care remains a priority through the Patient and Family Partnership Council, Care Partner Program, Three Wishes Project, enhanced language access, Dog and Call, iCARE with Kindness training, and staff wellness and recognition initiatives.

Communication remains the most frequent patient complaint. Jacobi continues to address this through iCARE with Kindness, physician communication education, leadership rounding, patient relations, and its multidisciplinary grievance committee.

Community issues include chronic diseases, behavioral health, substance use, language and immigration barriers, transportation challenges, gun violence, and social determinants of health affecting Bronx residents.

The Jacobi CAB expanded its community outreach through health fairs, educational events, community partnerships, departmental tours, Heart Health Day, HIV/AIDS awareness, barbershop events, Chalk the Bleed/Stop the Bleed, seasonal coat and toy drives, and other initiatives.

Jacobi also partnered with Central Office to host the 22nd Annual Marjorie Matthews Awards Ceremony. Following an unexpected venue change due to poor air quality from Canadian wildfires, Jacobi leadership, Community Affairs staff, and the Jacobi team relocated the event on short notice and welcomed more than 200 CAB and Auxiliary volunteers from across the system.

Ms. Graham thanked H+H leadership, elected officials, and funding partners for investments supporting advanced medical equipment, imaging, technology, facility renovations, emergency infrastructure, and programs that strengthen patient care and community safety.

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

Ms. Rowe-Adams commended Jacobi for successfully hosting the Marjorie Matthews Awards Ceremony despite the unexpected venue change.

Dr. Katz highlighted for the Committee the valuable service provided to the community of the Hyperbaric chamber which is in use six days per week.

NYC Health + Hospitals/McKinney

Ms. Debra Tyndall, Chairperson of the NYC Health + Hospitals/McKinney CAB, presented the report to the CRC. Ms. Tyndall highlighted McKinney's infrastructure improvements, resident experience initiatives, staff engagement, community activities, and accomplishments.

McKinney completed several energy-efficient improvements, including new LED lighting throughout the facility and upgrades to the cooling system and kitchen cooling facility. In addition, 132 resident rooms were painted and wall guards were installed.

New medical equipment includes a mobility trainer for rehabilitation, central smart beds, a vein finder, and a bladder scanner.

McKinney's likelihood-to-recommend top box score increased from 61 percent to 79 percent at the end of the previous year. More than 200 residents were surveyed for the Press Ganey semiannual survey.

The facility is implementing additional safeguards for residents' property, including lanyards to secure cellphones. A Lost Clothing Committee is also reviewing ways to reduce clothing loss.

Person-centered care initiatives include a resident welcome committee, enhancements to the dining experience, multiple social outings and events, and partnerships with local elementary and middle schools to coordinate student visits.

McKinney's H3 program continues to promote staff wellness through monthly interventions. Programs include quarterly recognition through the All Stars Program, a Community Pride Walk, International Day, and National Ice Cream Day.

McKinney hosted its first annual legislative session with New York State Assembly Member Brian Cunningham and other community partners and also hosted a Haitian/Jamaican hurricane relief initiative in collaboration with Council Members Mercedes Narcisse and Rita Joseph.

Facility experience concerns include intermittent television disruptions due to satellite connectivity. A cable conversion is underway. Residents have also requested more culturally representative meals, and the enhanced dining program offered Wednesday through Friday has received positive feedback.

Active recruitment is underway to strengthen staffing and reduce the impact of nursing shortages. A No Standing Zone was also installed in June 2026 to address increased vehicle traffic in the parking area, improving access for emergency vehicles and patient transportation.

The Neponset ADHC Program closed in October 2025, and registrants were successfully transitioned to alternative programs with appropriate follow-up support.

McKinney is the only long-term care facility in New York City with five-star CMS ratings in all domains. McKinney was ranked number 11 out of more than 600 nursing homes in New York for 2026 by Newsweek and was also recognized by U.S. News & World Report as a Best Nursing Home for 2026, with high performance in long-term care and short-term rehabilitation. McKinney is also designated a leader in long-term care equality for LGBTQ+ elders.

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

Dr. Pagán commended the extensive resident engagement activities.

Dr. Katz congratulated McKinney on its five-star ratings and commended improvements to television access for residents.

Ms. Kawatra congratulated McKinney on receiving five stars in all CMS categories and its other recognitions.

Ms. Rodriguez commended the facility and its staff for their continued work.

NYC Health + Hospitals/North Central Bronx

Ms. Esme Sattaur-Lowe, First Vice Chair of the NYC Health + Hospitals/North Central Bronx CAB, presented the report to the CRC on behalf of CAB Chair Robert Seitz.

North Central Bronx continues to invest in modernizing the facility to improve patient care. Infrastructure and equipment improvements include new IMS-2000 hardware and software for speech and swallowing services, replacement of the bone density scanner, renovations to the X-ray suite and replacement of outdated X-ray equipment, renovation and upgrades to the MRI suite, upgrades to the seventh-floor nurses call system, and replacement of outdated Medivators equipment.

North Central Bronx's patient experience strategy focuses on listening to patients and families while continuously improving care. Patient Relations works with patients, families, and staff to resolve concerns, provide real-time support, coordinate language access for patients with limited English proficiency, certify bilingual staff as medical interpreters, coordinate spiritual care when requested, and communicate staff attitude and quality-of-care concerns.

Communication and staff attitude remain the most common patient concerns. In response, North Central Bronx continues to expand iCARE with Kindness training, bedside shift reporting, and leadership rounding. Quality concerns are reviewed by clinical and administrative leadership and monitored through the Quality Improvement and Medical Executive Committees.

The Care Experience Team continues to strengthen service excellence through patient-centered initiatives, employee engagement, and staff recognition. During the reporting period, 24 employees were recognized through the IQ recognition program and 1,434 peer recognitions were shared through the All Star Platform.

The Patient and Family Partnership Council recruitment process began, and the Workforce Wellness Team completed 395 debriefs, hosted 353 wellness events, and conducted 1,035 wellness rounds to support employee well-being.

The Bronx continues to face significant health challenges including cardiovascular disease, hypertension, diabetes, obesity, asthma,

behavioral health conditions, substance abuse, language and immigration barriers, transportation challenges, gun violence, and ongoing health disparities.

The North Central Bronx CAB expanded community outreach through health fairs, CAB informational tables, educational events, hospital operational tours, Heart Health Day, HIV/AIDS awareness, barbershop events, Stop the Bleed activities, matching recognition, coat drives, toy distributions, and other community initiatives.

North Central Bronx also partnered with Central Office to successfully relocate and host the 22nd Annual Marjorie Matthews Award Ceremony at Jacobi, welcoming more than 200 volunteers from across the health system.

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

Dr. Pagán commended North Central Bronx for connecting communication and patient engagement activities to quality improvement.

Dr. Katz stated that North Central Bronx has been extremely valuable in supporting Jacobi's Emergency Department. He noted that Jacobi frequently experiences high patient volume and North Central Bronx allows patients who otherwise might wait hours for a bed to immediately receive care.

Ms. Kawatra commended North Central Bronx's theme of celebrating years of healing, compassion, community, and service.

Ms. Rodriguez congratulated North Central Bronx on approaching its 50th year and commended the facility for listening to patients, conducting surveys, and using feedback to guide improvements.

Ms. Rowe-Adams asked if there was any old or new business. Hearing none, she congratulated Ms. Joyce Rivers as the new Chair of the Council of CABs and thanked the CABs, staff, and H+H team for their continued work.

ADJOURNMENT:
Hearing no other old or new business from members to bring before the committee the meeting was adjourned at 5:47 P.M

NYC HEALTH+ HOSPITALS | Harlem



COMMUNITY ADVISORY BOARD

Community Relations Report

November 10, 2026

NYC HEALTH+ HOSPITALS | Harlem

EQUIPMENT & INFRASTRUCTURE

Ongoing Projects

- Martin Luther King Pavilion 5th Fl. CT Procedure Room: Installation of New GE CT Scanner in addition to a new procedure room and Reading Room for technicians.

- Martin Luther King Pavilion Roof Replacement/Enhancement: Replacement of the Roofs on both the 18th and 7th Floors.

- Boom Lights Enhancement: Replacement of end of life Boom lights in the Operating Room, Labor & Delivery, and Endoscopy/Minor procedure Rooms. The lights are the latest Stryker Booms/Lights for Surgeries and Procedures.

NYC HEALTH+ HOSPITALS | Harlem

PATIENT SAFETY & SATISFACTION

Our **Patient Safety Program** is committed to fostering a culture of safety, reducing preventable harm, and continuously improving the quality of patient care. Over the past year, the department has supported numerous culture of safety initiatives, educational activities, Root Cause Analyses (RCAs), proactive risk assessments, and performance improvement projects. Through initiatives such as the Good Catch Program, Team STEPPS training, weekly Patient Safety Rounds, staff and resident education, and ongoing collaboration with the Harlem Patient Safety Committee, the department works to identify risks, prevent errors, and strengthen safety practices throughout the hospital.

- The patient safety department was involved in many culture of safety, educational, RCA investigations, proactive risk assessments and performance improvement activities over the last year.
- The Harlem Patient Safety Committee met monthly to review topics including the good catches, national performance goals, Leapfrog survey, hospital wide data (blood transfusion, medication reconciliation, falls etc.) and patient safety performance improvement initiatives.
- The good catch program continued to thrive with 87 good catches with 131 recipients in Q1-3 2026.
- Harlem Hospital maintained a Leapfrog Safety Grade of C in Spring 2026.
- Patient Safety led weekly patient safety rounds that taught a different safety topic to the Harlem staff each week. There have been 36 educational safety sessions to date in 2026.
- Patient safety conducted safety topic didactics for multiple residency programs and hosts pediatric residents for their 2-week patient safety elective.





NYC HEALTH+ HOSPITALS | Harlem

FREQUENT COMPLAINTS BY PATIENTS



- **Communication, Care and Attitude** concerns continue to be among the most frequently identified grievances received by Patient Relations. Concerns may involve communication regarding the plan of care, responsiveness to patient needs, discharge instructions, and patients feeling that their questions or concerns were not adequately addressed.
  - Complaints and grievances requiring further review are referred to the appropriate Department or Chief of Service for investigation, follow-up, and identification of corrective actions or recommendations.
  - Patient Relations works collaboratively with clinical and operational departments to identify opportunities for improvement and address patient concerns as early as possible.
  - Patient Relations conducts daily education rounds with newly admitted patients to educate them on their rights, introduce the role and availability of Patient Relations, and identify concerns that may be addressed in real time.
  - Patient Relations collaborates closely with the Care Experience team to address and resolve concerns at the point of care whenever possible, helping to prevent issues from escalating into formal grievances.
  - Grievance trends are reviewed monthly through the multidisciplinary Grievance Committee to identify recurring concerns, promote departmental accountability, and identify opportunities for system-wide improvement.
  - Patient Relations continues to support staff education and initiatives focused on effective communication, responsiveness, language access, patient rights, and patient-centered care.

NYC HEALTH+ HOSPITALS | Harlem

ISSUES IMPACTING THE COMMUNITY

HIGHLIGHTS

+ 100 Percent of Our Internal Medicine Residents passed their boards this year.
+ Harlem Hospital's new Adult Sickle Cell Clinic now offers extended hours.
+ Harlem Hospital has been ranked among the top 160 hospitals in the U.S. for COPD, stroke, kidney & heart failure in the 2025-2026 U.S. News Best Hospitals list
+ Harlem Hospital designated as an American College of Radiology (**ACR) Lung Cancer Screening Center**.
+ Earlier this year, NYC Health + Hospitals/Harlem opened a state-of-the-art Orthopedic and Podiatry Clinic to meet the complex needs of orthopedic and podiatry patients, expanding access to coordinated, high-quality musculoskeletal care in the Harlem community.
+ AHA GOLD PLUS Target: TYPE 2 Diabetes Honor Roll (Heart Failure)
+ AHA SILVER+ Target: BP

CHALLENGES

+ Hypertension and Diabetes
+ Obesity
+ Mental Health Issues
+ Maternal Health Issues





NYC HEALTH+ HOSPITALS | Harlem

ACKNOWLEDGEMENTS

Thank you to the NYC Health + Hospitals Board of Directors and the Chair of the CRC- Mrs. Jackie Rowe- Adams

Very special thanks to:

- Dr. Mitch Katz, CEO
- Mr. Georges Leconte, CEO of Harlem Hospital
- Mr. Philip Cooke, AED, Public Affairs
- The Harlem Hospital Community Advisory Board
- Governor Kathy Hochul
- Mayor Zohran Mamdani
- Borough President Brad Hoylman-Sigal
- Council Member Dr. Yusef Salaam
- Senator Cordell Cleare
- Assemblyman Al Taylor
- Assemblyman Jordan Wright

SIGNATURES:



Michelle P. Booker
CAB Chairperson



Georges H. Leconte
Chief Executive Officer

NYC HEALTH + HOSPITALS | Metropolitan

Community Advisory Board

NYC Health + Hospitals Community Relations Report

November 10, 2026

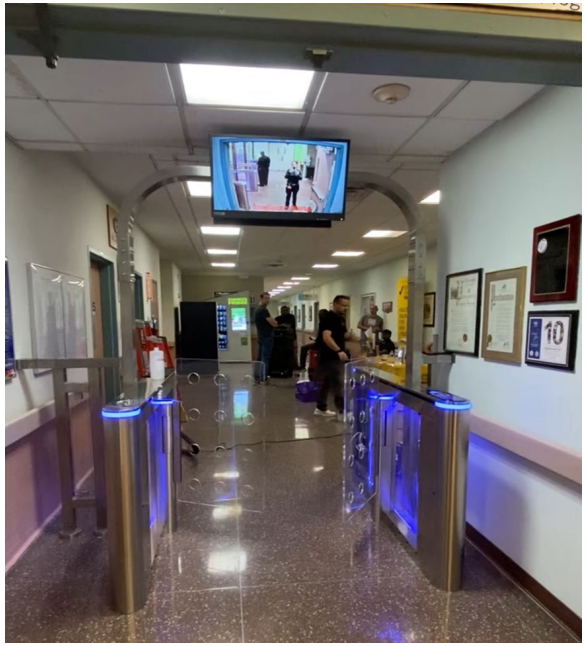
NYC HEALTH+ HOSPITALS | Metropolitan

EQUIPMENT & INFRASTRUCTURE



Achievements:

- Beautification of Metropolitan: landscaping, painting, renovation
- $2 million of essential medical equipment purchased: including vital sign monitors, thermometers etc.
- Patient Family Room completed - “Serenity Room”
- In Patient furniture replaced/ upgraded
- First fully secured facility in H + H: Magnetometers, cameras etc.
- Lab is no longer on technical watch



Ongoing projects/initiatives:

- Upgrade of furniture in patient spaces
- Wayfinding Assessment and Implementation
- Staff furniture replacement/upgrade
- New Infusion Suite 90% complete
- Lab Upgrades
- Funding for a new Emergency Department

NYC HEALTH+ HOSPITALS | Metropolitan

PATIENT SAFETY & SATISFACTION

Achievements 2026:

- Passed Joint Commission Survey – **no clinical citations**
- *U.S. News and World Report* **Best Hospital *American Heart Association Achievement Awards:***
  - Target: BP – **Gold +**
  - Check. Change. Control. Cholesterol – **Gold**
  - Target: Type 2 Diabetes – **Gold**
- **Baby Friendly Hospital** - National designation
- NCQA Patient Centered Medical Home designation – **Level 3** (Top)
- Get With the Guideline Stroke **Gold** Award
- Only Hospital in Manhattan with Safe Sleep - **Gold** designation
- Breast Cancer Center Nationally Accredited
- Patient fall **alarm-systems** have been installed in **all inpatient rooms** and **bathrooms** to enhance patient safety
- Metropolitan's Environmental Services Team was celebrated and ranked **#1 system-wide** for Cleanliness
- **Completed replacement** of all privacy curtains and inpatient furniture as well as upgrades to some specialty clinics

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PATIENT SAFETY & SATISFACTION

Ongoing projects/initiatives:

- MyChart Utilization: communication, appointments, prescriptions
- After visit surveys
- Inpatient Adolescent Psychiatric Unit in final stages
- Adolescent Behavioral and Mental Health Services
- Development of fresh air initiative for behavioral health inpatients

NYC HEALTH+ HOSPITALS | Metropolitan

FREQUENT COMPLAINTS BY PATIENTS

Concerns:

Patient feedback from Q1 – Q3 of 2025 highlights key areas of concern:

- Concern: Communication
  - Response: Active rounding to identify concerns early and address barriers proactively.

- Concern: Care and Response
  - Response: H3 / Care Experience Partnership: Coordinate staff training to strengthen communication and response.

- Appointment availability
  - Response: Extended hours - Pediatrics, Behavioral Health to accommodate families' schedules, and create efficiencies

- Concern: Ease of Contact
  - Response: Service Excellence Training: Strengthen patient-centered communication, empathy, and service recovery skills.

NYC HEALTH+ HOSPITALS | Metropolitan

ISSUES IMPACTING THE COMMUNITY

Challenges:

- Mental and behavioral health issues
- Neurodivergence and neurodevelopmental needs
- Impact of HR1 on access to healthcare



Highlights:

- Recognized as a US News & World Report Best Hospital
- Childhood Development Center
- Maintained the #1 Financial Counseling rate in the system at 98%
- 90% patient conversation rate, ranking second system-wide
- Community engagement at an all time high:
  - Consulates of Trinidad and Tobago, Dominican Republic
  - Expanded Partnership with the Mexican Consulate – Resulting in direct referrals
  - Met Summit – Consul Generals and representatives of 8 Latin American Nations discuss services, patient needs and rights and culturally competent care
  - Taiwanese Delegation – Exchange of best practices

Ongoing Projects/Initiatives:

- Engaging community stakeholders that work with seniors, children, and adolescents
- Expansion of behavioral health, substance dependence services

NYC HEALTH+ HOSPITALS | Metropolitan

PATIENT AND STAFF ENGAGEMENT



Accomplishments:

- Middle Manager Training – 95 Managers trained and receiving follow up coaching and engagement to further build skills
- Staff Satisfaction Survey – Metropolitan scored **3.95 out of 5**. This increase of nearly 20% since 2023 reflects the **highest gains system-wide**
- Lown Institute – designated NYC Health + Hospitals/Metropolitan **#1** in the **nation** for Inclusivity and Racial Inclusivity; one of the **top 10** hospital in the **nation** and **#1 in New York** State for Health Equity and Community Benefit.

LOWN INSTITUTE

Ongoing Projects/Initiatives:

- Clinical and Non-Clinical staff mental health support programs
- Individual department analysis and planning based on Press Ganey Metrics
- Community events including Easter Egg Hunt, Thanksgiving Giveaways, Haunted Hospital



NYC HEALTH+ HOSPITALS | Metropolitan

ACKNOWLEDGEMENTS

We would like to thank our Metropolitan family for its dedication to El Barrio and beyond. We are also grateful to New York Medical College and PAGNY for their partnership and collaboration in advancing medical excellence.

Thank you to the board of NYC Health + Hospitals and the Council of CABs. Our gratitude to Mr. Julian John, CEO; Elsa Cosme, COO; Dr. Anitha Srinivasan, CMO; Dr. Jonathan Green, CNO and the Metropolitan Hospital leadership cabinet for their dedication to health equity, diversity, inclusion and accessibility.



Julian John, CEO, NYC Health + Hospitals/Metropolitan



James Ratti, Chair, Metropolitan Community Advisory Board

NYC Health + Hospitals/Sydenham Community Advisory Board

Community Relations Committee Report

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NYC HEALTH+ HOSPITALS

EQUIPMENT & INFRASTRUCTURE

- Dental Operating Room Chairs - Capital Project
  - Capital Funding is being requested to support the replacement and modernization of the dental operating room chairs
  - Similar to the recent upgrade Dental Panoramic X-Ray equipment, this project will replace existing chairs with modern technology to enhance functionality, support clinical efficiency, and improve patient experience.

- Facility Infrastructure – Physical Space Challenges
  - Roof Conditions: The Sydenham facility experiences frequent roof leaks. Repair estimates vary, with projected cost of approximately $3million
  - HVAC System: The facility's heating, ventilation, and air conditioning (HVAC) system experiences recurring failures, impacting the building's climate control.

NYC HEALTH+ HOSPITALS

PATIENT SAFETY AND SATISFACTION

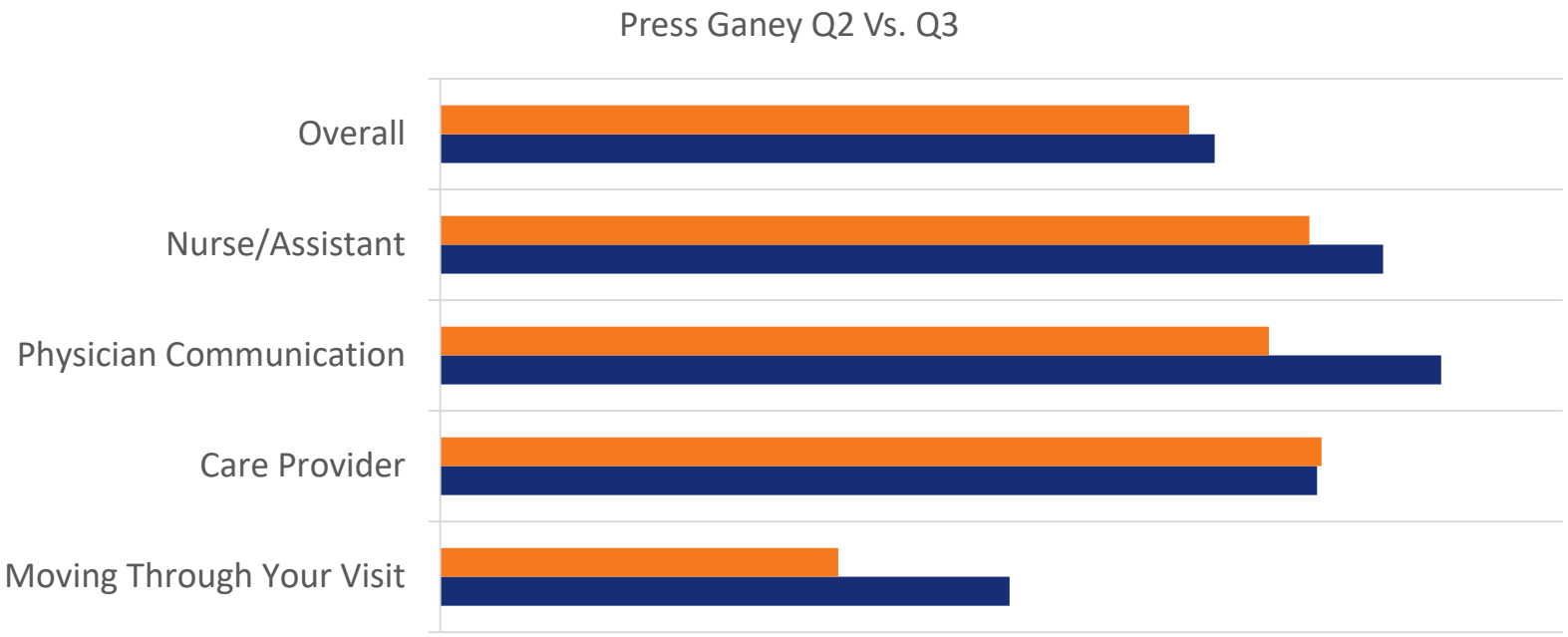
- At Sydenham patient safety is a key part of our commitment to delivering high-quality, community-centered care.
  - The 2026 Q2 Press Ganey “Rate Provider” score was at 83.11%, Q3 82.46%
  - The 2026 Q2 Press Ganey “Recommend this provider’s office” was at 85.27%, Q3 87.08%.

- We adhere to the guidelines set by Article 28 and work every day to ensure a safe, welcoming environment for everyone we serve

- Our safety priorities include:
  - Verifying patient identity at every visit
  - Promoting clear, consistent communication among care teams
  - Ensuring medications are reviewed, prescribed, and handled safely
  - Preventing infections during outpatient visits and procedures
  - Identifying and addressing potential safety risks early
  - Reducing the chance of errors in clinic-based procedures or referrals
  - To help us improve, we gather patient feedback through Press Ganey surveys, which give valuable insights into your experience.

PATIENT EXPERIENCE

- Best areas relate to staff performance, with Nursing and Care Providers achieving high scores for patient satisfaction.
- Area of opportunity - Moving through your visit
  - Scores improved Q3 Vs. Q2
  - Focusing on workstation reassignments and the utilization of swing rooms to expedite patient visits



	Moving Through Your Visit	Care Provider	Physician Communication	Nurse/Assistant	Overall
Q2	82.38	90.13	89.29	89.94	88.01
Q3	85.13	90.06	92.05	91.12	88.42

NYC HEALTH+ HOSPITALS

FREQUENT COMPLAINTS BY PATIENTS

- Patient complaints remain low in 2026, with only six reported year-to-date.
  - **Communication opportunities:** 4 out of the 6 complaints centered on patients' perceptions of communication gaps, highlighting an opportunity to further strengthen the patient experience.
  - **Staff Development:** Targeting coaching was provided to reinforce ICARE values, promote effective communication.
  - **Digital Engagement:** MyChart enrollment increased by 3%, with patient engagement rising by 10%.
  - **Commitment to Continuous Improvement:** Regardless of investigation outcomes, patient concerns are reviewed at the department level to identify opportunities for improvement and support a consistent, patient-centered approach.

NYC HEALTH+ HOSPITALS

ISSUES IMPACTING OUR COMMUNITIES

- **High Rates of Chronic Conditions**: Hypertension, diabetes, and obesity are prevalent, which may be related to limited access to healthy food, preventive care, and health education.
- **Mental Health Concerns**: Stress, anxiety, and depression are significant but often under-treated, influenced by socioeconomic challenges and limited access to care.
- **Healthcare Access Barriers**: Many residents rely on emergency departments for care due to lack of primary care access, insurance issues, or clinic availability.
- **Environmental & Social Determinants**: Crime, housing quality, and food insecurity contribute to poorer health outcomes and reduced engagement in wellness behaviors.

NYC HEALTH+ HOSPITALS

ACCOMPLISHMENTS



- **AMERICAN HEART ASSOCIATION**
  - Certified Gold for Diabetes, 2025 & 2026
  - Certified Gold for Cholesterol, 2025 & 2026
  - Certified Gold + for Hypertension, 2025 & 2026
- **2026 PCMH Transformation for NYC H+H/Gotham Health, Dyckman**
- **2026 PCMH Re-certification for NYC H+H/Gotham Health, Sydenham**
- **4-star rating (record high) 2025 Care Gaps**
- **#1 HCC Persistency in H+H & Gotham (92.8%)**
- **3D Mammography:** 60 patients away from eclipsing FY25 volume
- **Dentistry (FY26):** $161,807 above projected FY26 revenue target







NYC HEALTH+ HOSPITALS

We would like to extend our Gratitude and Acknowledgements to:

- Leader New York County Democrats Keith L.T. Wright
- Manhattan Borough President Brad Hoylman-Sigal
- Manhattan District Attorney Alvin Bragg
- NYS Senator Cordell Cleare
- NYS Senator Robert Jackson
- NYS Assembly Member Jordan J.G. Wright
- NYS Assembly Member Al Taylor
- NYC Council Member Yusef Salaam
- NYPD
- FDNY
- St. Nicholas Tenant Association
- Dyckman Tenant Association

Joyce M. Rivers-Clark, MA
Chair, Sydenham CAB

Yesenia Pabon, MPA
Deputy Director

Michelle Lewis
Chief Executive Officer
NYC Health + Hospitals/Gotham Health

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NYC HEALTH+ HOSPITALS/WOODHULL COMMUNITY ADVISORY BOARD

November 10, 2026

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INFRASTRUCTURE & EQUIPMENT



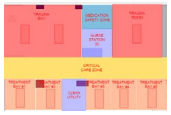
Generator Replacement Project

- Woodhull received $23 million to design and replace the existing obsolete generators.
- With the new 8MW of emergency power, the hospital will be able to have more efficient, reliable power to run critical systems, ensuring sustainability and resiliency during weather events. Woodhull will also be able to participate in utility demand response events.
- Expected completion: Spring 2027



Fire Alarm Upgrade

- Woodhull received $42m for the fire alarm system upgrade. The fire alarm system is original to the building and obsolete.
- The facility will upgrade the fire alarm system, including the primary fire command station, the system components and devices such as alarms and smoke detectors, software operating system. The project will also include a secondary fire command station and an auxiliary radio communication system.
- Expected completion: Fall 2029



Emergency Department Critical Care Upgrade

- Woodhull received a grant from NYS DOH for $5.4m to design and renovate the Critical Care and Trauma area in the Emergency Department.
- The areas will be reconfigured to create more privacy for patients, add a dedicated nurse station and improve workflow and patient care.
- Expected completion: Fall 2029



Solar PV

- $7 million solar installation to generate on-site electricity and reduce reliance on utility power.
- Expected completion: December 2026.

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INFRASTRUCTURE & EQUIPMENT



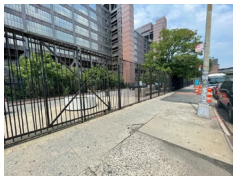
Boiler Upgrade

- Woodhull received $15m to design and upgrade the existing and original boilers and to create a new tie-in for emergency boiler
- Refurbishment will include new boiler tubes and new casing to be tied into the new boiler controls. A new tie-in will be added on exterior of the building for added redundancy.
- Expected completion: Fall 2027



Electric Service Separation

- Woodhull started the design for the project to provide a design for the electrical distribution of Woodhull Hospital that establishes the creation of a Type 1 Essential Electrical System with four (4) branches of power: normal, life safety, critical, and equipment.
- The **multi-phase project will also mitigate risks of electrical hazards**, provide new parallel switchgear and switchgear room.
- Expected completion: Summer 2030



Plaza Renovation & 4th Floor Parking

- Woodhull received $11.28m to renovate the existing exterior plaza to improve overall appearance, safety, and accessibility. Work will include replacement of deteriorated paving, drainage and accessible ramp.
- Expected completion: Spring 2029



Central Sterile Instrument Washer and Sterilizer

- HRSA-funded replacement of sterilizers and washers, with associated construction, to improve instrument processing reliability and support infection prevention.
- Expected completion: Fall 2026

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INFRASTRUCTURE & EQUIPMENT



Hypothermia Machine Upgrade

- Woodhull received an award to procure four new upgraded state-of-the-art temperature management equipment to control patient temperature in a non-invasive way with continuous monitoring
- Completed Spring 2026



Nuclear Camera Upgrade

- Woodhull received $1.7m to upgrade the Nuclear Camera equipment and room. The renovation will improve workflow for Radiology Department and allow for the installation of the latest imaging technology.
- Expected completion: Summer 2029



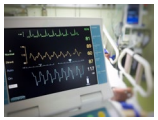
Histology Laboratory Upgrade

- Woodhull received $235,000 to replace laboratory equipment for quicker specimen processing and tie-in to digital systems. Tissue Processor, Slide Stainer, and Cover Slipping Machine are all part of upgrade to enhance the Histology Laboratory unit.
- Expected completion: Fall 2026



Mini C-Arm

- Woodhull received $214,000 to procure two new upgraded surgery imaging equipment for better workflow and patient comfort.
- Completed October 2026



Vital Sign Monitor

- Woodhull received $200,000 to upgrade the vital sign monitor equipment. The upgrade included 46 user-friendly devices, connected to patient data and enhanced productivity.
- Completed Spring 2026



Pharmacy Omnicell Carousel

- Installation of a new Omnicell pharmacy carousel system to improve medication storage, inventory control, dispensing efficiency, and workflow within the Pharmacy department. The project will include space planning, required architectural and MEP modifications, equipment installation, system integration, and testing.
- Expected completion: Winter 2029

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INFRASTRUCTURE & EQUIPMENT

CONSTRUCTION UNDERWAY

Labor and Birthing Suite Renovation & Simulation Room

- $21 million to enlarge operating rooms and reconfigure recovery, nursing and birthing spaces, improving patient safety and comfort. Construction is underway.
- Expected completion: Summer 2028.



Birthing suite



Family lounge



Isolation LDR

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INFRASTRUCTURE & EQUIPMENT

PROJECTS IN INITIATION PHASE

Air Shaft Reconstruction

- $2.4 million air shaft reconstruction to restore structural integrity and support reliable ventilation.
- Design started in October 2026.

Loading Dock Lifts

- $500,000 lift upgrade to improve safe, reliable movement of deliveries.
- Expected completion: Fall 2027

7-300 Nurse Call

- $250,000 partial upgrade to improve patient-to-staff communication in 7-300 Med Surge unit.
- Expected completion: Winter 2026

Breast Specimen Imaging

- $200,000 for enhanced imaging to reduce processing time before surgery.
- Completed September 2026

Fluoroscopy Upgrade

- $800,000 equipment upgrade to improve imaging for Radiology.
- Expected completion: Winter 2028

Dentistry X-Ray and Panorex

- $200,000 for equipment that improves 2D and 3D imaging quality for patients.
- Expected completion: Summer 2027

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PATIENT EXPERIENCE/STAFF ENGAGEMENT

PATIENT SAFETY

- Woodhull has established a vision to become a zero harm hospital and to achieve a leapfrog safety grade of A as part of our Vision 2030 goals.
- What We Are Doing:
  - We have implemented real-time reporting and review of key Patient Safety Events
  - We have identified PSI – 90 as a key indicator of patient safety risk and have decreased annual PSI 90 events by 42% from 2024 to 2025 and by another 52% from 2025 to 2026 (through August).
  - We have reduced Catheter and Central line associated infections
  - We have built an interdisciplinary throughput committee to minimize wait times despite increasing volumes
  - We are building a Safety Learning System, to encourage reporting of near misses and adverse events and ensure that we are learning and improving from each report

- **Person-Centered Care**
  - **Planetree Recertification** planned **Q1 2027**, reinforcing Woodhull's commitment to person-centered care.

- **Patient Experience**
  - **Global Patient Experience**: Overall improvement across key patient experience metrics, reflecting continued progress in care delivery and patient engagement.
  - **ICARE with Kindness:** 2,460+ staff trained, with measurable improvement in kindness-related patient experience metrics.
  - **Care Partner Program**: Pilot launching in 8-ICU and 9-PCU to strengthen family engagement and support caregivers as partners in care.
  - Service Excellence Committee: Provides hospital-wide governance and accountability for patient experience improvement.

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PATIENT EXPERIENCE/STAFF ENGAGEMENT

- **Staff Engagement & Culture**
  - Recognition: **2,885** individuals/teams recognized through **1,574** All-Star submissions, strengthening a culture of appreciation and peer recognition.
  - Patient Experience Orientation: **115** new staff trained through full-day orientation covering ICARE, Communication, Patient Relations, Language Access & Wellness.
  - Leadership Rounding: Relaunched to strengthen leadership visibility, staff engagement, and connection to frontline experience.
  - Employee Engagement: **60%** survey participation with **70+** action plans developed to address identified opportunities.

- **Community Partnership & Innovation**
  - Advance Care Planning: Patient & Family Advisory Council, partnered with Medicine to co-design an **Advance Care Planning** workbook to educate families and community.
  - Service Recovery: Guidebook designed to standardize CAHPS-aligned service recovery practices across care settings.
  - AIDET Communication: Communication initiative underway to strengthen consistent, patient-centered interactions across the patient journey.



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WORKFORCE WELLNESS



The Helping Healers Heal (H3) Workforce Wellness program provides comprehensive wellness support designed to meet the emotional and psychological needs of all hospital staff. Our services include individual and group debriefs, referrals to licensed mental health professionals, trainings to recognize red flags, and events to enhance holistic wellbeing.



Goals:

- Enhance the overall culture of wellbeing
- Reduce symptoms of burnout among staff
- Improve the ability of staff to provide compassionate care to our patients, families, and community.

2026 Initiatives:

- **Tai Chi** to support physical and mental stress reduction
- **Staff Wellness Fair** to increase awareness of resources
- **Department-Specific Art Activities** to facilitate creative self-expression

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FREQUENT COMPLAINTS



- Patients Frequent Complaints for Q1-Q4 2025 were related to Coordination of Care, Care, Attitude & Behavior and Property. The complaints included, and were not limited to, the patients' perception of the interaction, communication, and processes. As a result the following are continuous efforts at Woodhull during 2025 into 2026:
  - Continuously reinforcing the importance of "Compact of Professional Behavior" training which directly impacts and addresses this trend through Attitude and Behavior.
  - Compact of Professional Behaviors training – during orientation for all newly onboarded staff.
  - Communication Matters training – open for all staff.
  - During first week of orientation for newly hired staff, New Employee Orientation dedicates a day to training focusing on iCare values, Customer Service, Patient Relations and, Complaints and Grievances
  - Staff are continuously Strengthening collaboration with Patient Relations, Patient Experience and Departmental leadership from Outpatient & Inpatient areas.
  - Patient Relations provides monthly data on complaint cases to all departmental leadership, both for Outpatient and Inpatient areas in order to provide the Voice of the Patients through identifying trends for improvement.
  - Patient Relations conducts monthly Grievance Committee meetings to review Grievance cases.





- The Patient Property and Valuable committee has continued to meet consistently throughout 2025 and into 2026 in an effort to identify opportunities for improvement and strategies in reducing property complaints.
- In 2025, the Care Experience team highlighted additional focus on patient google reviews for opportunities of improvement as well as recognition opportunities.
- In 2025 through 2026, the Patient Family Advisory Council began to successfully transition with a greater focus on person centered care.

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ACCOMPLISHMENTS

Highlights:

- Recognized by **U.S. News & World Report as a High Performing Hospital for 2026–2027**, reflecting strong performance ir delivering high-quality care for specific procedures and conditions.
- Recognized by **U.S. News & World Report as High Performing in Maternity Care for 2026**, reflecting high-quality care for mothers and babies.
- Recognized by **U.S. News & World Report as High Performing in Heart Failure for 2025– 2026**, reflecting strong outcomes and quality care for patients treated for heart failure.
- Recognized by **U.S. News & World Report as High Performing in Diabetes for 2025–2026**, reflecting high-quality care for patients managing diabetes.
- Recognized by **U.S. News & World Report as High Performing in Kidney Failure for 2025–2026,** reflecting high-quality care for patients with kidney failure.
- Recognized with the **AACN Beacon Award for Excellence**, honoring exceptional nursing care, positive patient outcomes, and a healthy work environment.
- Recognized with the **2026 Leapfrog Full Transparency badge**, reflecting Woodhull's commitment to openly reporting hospital quality and patient safety information.
- Certified as a **Primary Stroke Center by The Joint Commission and the American Heart Association/American Stroke Association**, recognizing Woodhull's commitment to meeting rigorous standards for high-quality stroke care.
- Recognized with **The Joint Commission's National Quality Approval**, demonstrating that Woodhull meets rigorous standards for quality, safety, and patient care.
- Recognized as a **GO2 for Lung Cancer Center of Excellence**, reflecting Woodhull's commitment to high-quality lung cancer screening, early detection, and coordinated patient care.
- Recognized as a 2026 **LGBTQ+ Healthcare Equality Leader**, reflecting Woodhull's commitment to inclusive, equitable, and respectful care for LGBTQ+ patients, families, and staff.
- Recognized as an **AORN Center of Excellence in Surgical Safety**, reflecting Woodhull's commitment to evidence-based practices that promote safer surgical care and protect patients and staff.
- Recognized with **Planetree Certification for Excellence in Person-Centered Care**, reflecting Woodhull's commitment to compassionate, respectful care that puts patients, families, and staff at the center of the healthcare experience.
- Recognized as an **American College of Surgeons Surgical Quality Partner**, reflecting Woodhull's commitment to high standards in surgical safety, quality, and continuous improvement.
- Recognized with the **American Heart Association's 2026 Gold Plus Get With The Guidelines® Heart Failure award**, reflecting high-quality, evidence-based care for patients with heart failure and type 2 diabetes.
- Recognized as an **Age-Friendly Health System**, reflecting Woodhull's commitment to providing safe, reliable, and person-centered care for older adults.
- Certified as a **Cribs for Kids Safe Sleep Hospital**, recognizing Woodhull's commitment to promoting safe infant sleep practices and reducing sleep-related risks for babies.
- Recognized as an **MBSAQIP Accredited Center**, reflecting Woodhull's commitment to high-quality, safe, and comprehensive metabolic and bariatric surgical care

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IMPACTING THE COMMUNITY

CHALLENGES

- Opening in 1982, Woodhull's aging facility is in constant need of costly repairs and upgrades to the infrastructure (i.e. – generators, boilers, elevators, etc.). This is further exacerbated by climate change and the need for resiliency.
- As patient volumes have increased over the last several years, wait times for admitted patients to secure a bed on the inpatient medicine floors have increased.
- Growth in ambulatory care has been consistent but it often limited by physical space constraints.

OPPORTUNITIES

- Additional resources/partnering with community organizations to support patient care programs to reduce anxiety and re-build trust.
- Increase transparency and communication to engage the community and highlight successful hospital stories.
- Expansion of Service Opportunities:
  - Plastic Surgery
  - Orthopedics surgical services
  - Perinatal Psychiatry Program
  - Vascular
  - Substance Use and Recovery Services
  - Increased inpatient and outpatient capacity
  - Physical Medicine and Rehabilitation | Physical Therapy
  - Pediatric Primary Care
  - Adolescent Health
  - Adult Primary Care
  - Women's Health Services
  - Pediatric Dental

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ACKNOWLEDGEMENTS

For their on-going support for the person-centered care, treatment, and services provided to the residents of Woodhull, our special thanks and gratitude are extended to:

Brooklyn Borough President Antonio Reynoso
Congresswoman Nydia M. Velazquez
Congressman Hakeem Jeffries
Senator Julia Salazar
Senator Jabari Brisport
Senator Kevin Parker
Assemblywoman Stefani Zinerman
Assemblywoman Maritza Davila
Assemblywoman Emily Gallagher
Council Member Chi Osse
Council Member Jennifer Gutierrez
Council Member Lincoln Restler
Council Member Sandy Nurse
Woodhull Community Advisory Board
Woodhull Auxiliary

Signatures:

CAB Chairperson

Chief Executive Officer