



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

May 3, 2016
5:30 P.M.
Board Room
125 Worth Street, Room 532

JOINT MEETING WITH COUNCIL OF COMMUNITY ADVISORY BOARDS

AGENDA

- | | |
|--|--------------------------------|
| I. Call to Order | Josephine Bolus, NP, BC |
| II. Adoption of February 9, 2016 & March 15, 2016
Community Relations Committee Meeting Minutes | Josephine Bolus, NP, BC |
| III. Chairperson's Report | Josephine Bolus, NP, BC |
| IV. President's Report | Ram Raju, MD |
| V. Information Items (Annual CAB Reports): | |
| a. NYC Health + Hospitals/Harlem | Bette White |
| b. NYC Health + Hospitals/Renaissance | Jackie Rowe-Adams |
| c. NYC Health + Hospitals/Lincoln | George Rodriguez |
| d. NYC Health + Hospitals/Morrisania | George Robinson |
| e. NYC Health + Hospitals/Belvis | Gabriel DeJesus |
| VI. Old Business | |
| VII. New Business | |
| VIII. Adjournment | |

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

February 9, 2016
5:30 P.M.
HHC Board Room
125 Worth Street, Room 532

MINUTES

ATTENDEES

COMMITTEE MEMBERS

Josephine Bolus, NP-BC, Committee Chair
Robert F. Nolan, Board Member
Antonio Martin, Representing Ram Raju, President, NYC Health + Hospitals

COUNCIL OF THE COMMUNITY ADVISORY BOARDS

Jeromane Berger-Gaskin (representing Kenneth Campbell, Chairperson) NYC Health + Hospitals/Kings
Rosanne DeGennaro, Chairperson, NYC Health + Hospitals/Coney Island
Virginia Granato, Chairperson, NYC Health + Hospitals/Carter
Antoine Jean-Pierre, Chairperson, NYC Health + Hospitals/McKinney
Ludwig Jones, Chairperson, East New York/A Gotham Health Center
Jacqueline Narine, Chairperson, NYC Health + Hospitals/Cumberland/A Gotham Health Center
Talib Nichiren, Chairperson, NYC Health + Hospitals/Woodhull
Gladys Dixon, Chairperson, NYC Health + Hospitals/Coler
Lois Rakoff, Chairperson, NYC Health + Hospitals/Bellevue
Donald Young, NYC Health + Hospitals/Gouverneur/A Gotham Health Center
J. Edward Shaw, Chairperson, NYC Health + Hospitals/Metropolitan
Bette White, Chairperson, NYC Health + Hospitals/Harlem
Jackie Rowe-Adams, Chairperson NYC Health + Hospitals/ Renaissance/A Gotham Health Center

FACILITY COMMUNITY ADVISORY BOARD MEMBERS

Hiawatha Campbell, NYC Health + Hospitals/Cumberland/A Gotham Health Center
Gary Delamothe, NYC Health + Hospitals/Coler
Priscilla Douglas, NYC Health + Hospitals/Cumberland/A Gotham Health Center
Wilbur Johnson, NYC Health + Hospitals/McKinney
Oneida Lewis, NYC Health + Hospitals/Cumberland/A Gotham Health Center
James Mapp, NYC Health + Hospitals/McKinney
Louis Velez, NYC Health + Hospitals/Bellevue
John Roane, Health + Hospitals/Bellevue
Erma Campbell, NYC Health + Hospitals/ Bellevue
Gloria C. Thomas, NYC Health + Hospitals/ Kings
Claudette Browne, NYC Health + Hospitals/McKinney
Bobby Lee, NYC Health + Hospitals/Bellevue
Kent Mark, NYC Health + Hospitals/Bellevue
Myrna LePree, NYC Health + Hospitals/Bellevue
Veronica Obie, NYC Health + Hospitals/ Cumberland/A Gotham Health Center
Marty Bromberger, NYC Health + Hospitals/ Coney Island
Zorona Hamn, NYC Health + Hospitals/Harlem
Benita Stembridge, NYC Health + Hospitals/Harlem
Carmen Vasquez, NYC Health + Hospitals/ Metropolitan
Lydia Kensenhuis/ NYC Health + Hospitals/ Carter

NYC HEALTH + HOSPITALS CENTRAL OFFICE STAFF

John Jurenko, Interim, Senior Vice President/Intergovernmental Relations
Kathleen Whyte, Senior Director, Community Affairs
Colicia Hercules, Office of Board Affairs
Patricia Lockhart, Office of Board Affairs
Valerie Phillips, Office of Legal Affairs
Renee Rowell, Office of Community Affairs
Alvin Young, Office of Community Affairs
Manelle Belizaire, Office of Community Affairs
Mary C. Cooper, Office of Community Affairs

NYC HEALTH + HOSPITALS FACILITY STAFF

Martha Sullivan, DSW, Executive Director, NYC Health + Hospitals/Gouverneur/A Gotham Health Center
Anthony Rajkumar, Executive Director, NYC Health + Hospitals/ Metropolitan
William Hicks, Interim Executive Director/ NYC Health + Hospitals/ Bellevue
Floyd Long, Interim Executive Director/ NYC Health + Hospitals/ Coler/Carter
Sanford Operowsky, Associate Executive Director, NYC Health + Hospitals/ Gouverneur/ A Gotham Health Center
Freda Fried, CAB Liaison, NYC Health + Hospitals/Gouverneur/A Gotham Health Center
Angela Cooper, CAB Liaison, NYC Health + Hospitals/McKinney
Noel Alicea, Associate Director, NYC Health + Hospitals/Metropolitan
Nancy Cuevas, Assistant Director, NYC Health + Hospitals/ Metropolitan
LisaMarie Izquierdo, CAB Liaison, NYC Health + Hospitals/Bellevue
William Jones, Associate Director, NYC Health + Hospitals/Henry J. Carter
Ronald Law, Director of Community Affairs, MetroPlus

GUESTS

Sandra Stevens, Consumer
Anthony Feliciano, Commission on the Public's Health System
Nancy Velasquez, New York State Nursing Association

CALL TO ORDER

The Chairperson, Mrs. Josephine Bolus, NP-BC, called the meeting of the Community Relations Committee (CRC) to order at 5:43 PM. Mrs. Bolus announced that a quorum had been established. She requested a motion for the adoption of the minutes of September 16, 2015 CRC meeting. A motion was made and seconded. The minutes were adopted.

CHAIRPERSON'S REPORT

Mrs. Bolus welcomed Committee Members and highlighted key HHC events that had occurred since the September 16, 2015 meeting. She reported the following:

- The third open enrollment period for health insurance coverage under the Affordable Care Act started on November 1, 2015. In New York, the NY State of Health (NYSOH) is the state's health exchange or marketplace where New Yorkers can go to learn about and purchase affordable health insurance coverage. A new option this year is the Essential Plan, which is available only through the NY State of Health. This new plan will lower premiums to \$20 or less per month and provide comprehensive benefits for lower income New Yorkers. The enrollment period opened on November 1st and will run through January 31, 2016. Children and New Yorkers who are eligible for Medicaid and the Essential Plan can sign up for coverage through the NY State of Health at any time during the year.
- Mrs. Bolus reported that last month, HHC held a Nursing Excellence Awards event, with more than 180 nurses being nominated by their colleagues. Nurse Marie Alverio of Coney Island was recognized for exemplary work on wound care. Central Office Nurse Eileen Achacoso was recognized for using informatics to better connect the caregiving needs of nurses. Nurse Susan Gullo of North Central Bronx was recognized for promoting reduced length of stay and health outcomes. Nurse Bindu Rai of Elmhurst was recognized for promoting international medical missions. Nurse Robert Smeltz of Bellevue was recognized for launching a palliative care program; and Nurse Tiffany Reid of Harlem Hospital was recognized for her work with first-time mothers. All were all were recognized for their unique efforts.
- Mrs. Bolus brought to the Committee's attention that Metropolitan's Breast Health Center had launched a new program to ensure that eligible patients receive genetic testing in a timely, streamlined, stress-free way that would help them make informed clinical decisions during their treatment. The Breast Health Center received an internal grant from the Fund for HHC for program expansion. Mrs. Bolus acknowledged Metropolitan Hospital for working with their Community Advisory Board to develop a pamphlet on the dangers of synthetic marijuana. The pamphlet is titled, "What's This?" and it provides information on the recent wave of synthetic marijuana usage across the city. Many hospitals in New York City are unfortunately seeing patients arriving in their Emergency Departments after taking synthetic marijuana. Mrs. Bolus noted that, last month HHC participated in a forum that was sponsored by State Senator Jeff Klein, along with city, state and federal health and law enforcement officials, at Jacobi Medical Center on the dangers of synthetic marijuana.
- Mrs. Bolus shared that in this year's Harlem Day Parade, HHC's longtime supporter Henry J. "Hank" Carter served as the Grand Marshall. HHC staff attended the parade, and there was a float that promoted the Henry J. Carter and Coler long-term care facilities.

- Mrs. Bolus sadly announced that, Sherlene James, Ph.D. passed away on September 20th. Mrs. Bolus stated that Dr. James served as the CABs Council Chairperson and, for many years, as Chair of the Renaissance Network CAB. Mrs. Bolus added that Dr. James was not only a major leader for HHC but contributed a vast amount of her time and energy to the Harlem community.

Before concluding her remarks, Mrs. Bolus thanked Mr. Julius Wool, who recently retired as Executive Director of Queens Hospital Center, for his longtime, exemplary service to HHC.

Mrs. Bolus turned the meeting over to Dr. Raju for his remarks.

PRESIDENT'S REMARKS

Dr. Raju thanked Mrs. Bolus, the Committee members and invited guests. Dr. Raju introduced Lilliam Barrios-Paoli, the newly appointed Chairman of HHC's Board of Directors. He informed the Committee that his presentation would cover the following two important points, branding and HHC's restructuring.

1. Branding

Dr. Raju reported that there had been a tremendous amount of energy and enthusiasm amongst the staff focused on HHC's branding. Dr. Raju informed the Committee that several branding rollout events had been scheduled across the system to ensure that all the employees are informed of the meaning of the new name. Dr. Raju highlighted two significant changes in the new name:

- a) The word "corporation" has been omitted to emphasize that we are a health care system.
- b) The word "hospitals" is no longer part of the facilities' name. For example, Bellevue Hospital is renamed NYC Health + Hospitals/Bellevue.

Dr. Raju stated that these changes were consistent with changes that other health care systems such as Montefiore and NYU Langone had made. He explained that change is that health care is no longer delivered at hospitals but rather through enormous penetration into the communities through various components. NYC Health + Hospitals is a large health care delivery system, which includes many hospitals, primary care clinics, community-based clinics, long term care facilities, home care, care coordination, and OneCity Health DSRIP PPS.

Dr. Raju added that the new logo, branding and messaging were developed internally by a team of NYC Health + Hospitals employees and reflects who our employees are. This new brand, NYC Health + Hospitals guarantees all New Yorkers, regardless of race, color and ethnicity that they will get good quality, safe and competent care which will exceed their expectations. He pointed out that NYC Health + Hospitals is the only organization in the country that is able to definitively state that we look like our patients and the patients look like us.

2. NYC Health + Hospitals Restructuring

Dr. Raju announced the creation of three service lines:

- a) Inpatient Service Line
- b) Ambulatory Service Line
- c) Post-Acute Care Service Line (including long term care, rehab care, care coordination, home care, tele-medicine)

Dr. Raju explained that some senior leaders who had served the organization for many years would be retiring from the organization after doing a phenomenal job. He informed the Committee that hospitals have two groups of employees: one group that provides direct care to patients and another, like himself, who helps the first group to provide direct care to the patients. The Chief Executive Officers (CEOs) of the various hospitals will only concentrate on four things: ensuring that good quality safe patient care is provided; ensuring that patient experience is optimized; staffing their facilities with a workforce empowered to get what need to be done; and increasing market share so that more patients will come to their facilities. Central Office will be their back up and will provide them with what they need to meet their goals. With the new structure, the CEO of the different hospitals will be more on the floor, talking to patients and employees.

Dr. Raju reassured the Committee that these changes will happen in a phased manner and that employees will neither lose their jobs or be moved to another site. Changes will be at the senior level in terms of how they report. The organizational structure will not be based on titles, but on functions with the patient being at the center. The question becomes, "What is my function with respect to the patient?"

Dr. Raju emphasized that the changes would be gradual and that nothing is going to happen dramatically as the search is on for new leaders for the organization. He also added that the process would be very open and transparent and that there will be CAB representation on the committees for selecting the new leaders. He reassured the Committee that the process would be smooth and transparent.

Dr. Raju stated that these are positive changes that will move the system from an inpatient care focused system to an outpatient community-based care system. For the first time, we are moving from a sick care system to a health care system. He noted that the tag line reflects what is promised to New Yorkers: "Live Your Healthiest Life". As such, NYC Health + Hospitals will do everything possible to make it happen. Our job is to keep New Yorkers healthy so that they can live their healthiest life possible. Dr. Raju stated that obviously a diabetic will remain a diabetic until he dies; however, NYC Health + Hospitals can make him live the healthiest possible life with diabetes.

Dr. Raju concluded his remarks by thanking the Community Advisory Board members. He invited them to attend multiple branding rollout events and reminded them that they are the eyes and ears of the organization and to be the ambassadors for spreading the word about these changes. He explained that, while it is a journey and the changes will not happen in a short period of time, NYC Health + Hospitals is ready to take the first step in January 2016.

Mr. Ludwig Jones, East New York Diagnostic and Treatment Center CAB Chairperson thanked Dr. Raju for his remarks. He reported that, at the last joint KCHC and ENYD&TC meeting, he had brought to the Administration's attention that the CAB needs to be at the table when discussions are being made about changes and proposals so that the CABs can be more informed and equipped to be able to go out to inform the community about the changes. Mr. Jones remarked that it was not enough to hear about the changes at CAB meetings after the decisions have already been made by the Administration. CABs should be able to sit with the Administration at the very inception of these changes so that the CAB's input can be included. Mr. Jones reemphasized that the CABs are not only the eyes and ears of the community, but also of the organization. He added that if CABs are more involved, they could have had some input that would benefit them and the facilities as the organization is implementing these changes.

HHC'S NEW BRANDING

Ms. Ana Marengo, Senior Vice President, Marketing and Communication reiterated Dr. Raju remarks on NYC Health + Hospitals branding concept. Ms. Marengo invited the Committee, members of the CABs and guests to view the new logo via power point presentation. Ms. Marengo explained that all of NYC Health + Hospitals' facilities will have identical logo. Ms. Marengo noted that the facility name would be added to the logo.

Ms. Marengo announced that brand launching festivities would be kicked off at Bellevue, Coler, Coney Island and Renaissance on Monday, November 9th. Ms. Marengo stated that at each facility event there would be fun activities, photo opportunities and refreshments. Ms. Marengo concluded her presentation by encouraging members of the CABs and invited guests to attend their respective facilities' rollout celebration and to bring a smartphone to download and post pictures.

CAB ANNUAL REPORTS

Elmhurst Hospital Center (Elmhurst) Community Advisory Board

Mrs. Bolus introduced Eartha Washington, Chairperson of Elmhurst Hospital Center and invited her to present the CAB's annual report.

Ms. Washington began her presentation by thanking Mr. Carlos Cortes, former Chairman of Elmhurst CAB and NYC Health + Hospitals' Council of CABs for his leadership, dedication and commitment.

Ms. Washington reported that the Elmhurst CAB's major focus was the expansion of the hospital's Emergency Department. Ms. Washington explained that, because the hospital had experienced increased visits in the ED, securing appropriate space was a critical concern. Ms. Washington noted that the Elmhurst CAB's collaboration with the hospital administration and elected officials was important in securing funds from both HHC and the City to proceed with the plans to expand.

Ms. Washington highlighted key topics that were discussed at the Elmhurst CAB's monthly meetings:

- Hospital administrator reported on the progress of the Journey to Excellence and the hospitals' commitment to having the best patient experience.
- HHC Guiding Principles
- Regular reports on DSRIP
- Updates on the progress of EPIC

Ms. Washington announced that the Elmhurst CAB was invited to activities at the hospital to launch the new brand for HHC – NYC Health + Hospitals. Ms. Washington noted that it was a fun filled event and well attended.

Ms. Washington acknowledged Mr. Chris Constantino, Senior Vice President, Queens Health Network for his more than 30 years of service. Ms. Washington thanked Mr. Constantino for his extraordinary leadership in meeting and overcoming the challenges of providing quality health care to Elmhurst's uniquely diverse community. Ms. Washington noted that she was looking forward to participating in the selection process for the new Executive Director, as outlined in NYC Health + Hospitals' Policy and Guidelines for CABs.

Ms. Washington concluded the Elmhurst CAB report by announcing Elmhurst Hospital Center's calendar of events for 2016. Ms. Washington announced that the EPIC implementation is scheduled for April 2016 and that the Joint Commission would visit later that year. Ms. Washington added that the CAB had been receiving updates on the progress of EPIC. She explained that there are a lot of moving parts to launching the new wave of electronic medical records. Ms. Washington added the hospital has the complete support of NYC Health + Hospitals and that there is a countdown clock to track progress.

Queens Hospital Center (Queens) Community Advisory Board

Mrs. Bolus introduced Jacqueline Boyce, Chairperson of Queens Hospital Center and invited her to present the CAB's annual report.

Ms. Boyce reported that the Queens CAB was working together with the administration to resolve specific issues that are currently hindering the hospital's progress in meeting the patients' need. Ms. Boyce explained that CAB members had participated in various focus groups, which allowed CAB members to be at the front-and-center of developing positive change. Ms. Boyce reported that the CAB planned to collaborate with QHC's Department of Patient Experience on their rounds where they talk to both inpatients and outpatients about their experience in the hospital. Ms. Boyce noted that many of the Queens CAB members are consumers and are interested in ensuring positive outcomes for the patients.

Ms. Boyce acknowledged Alvin Young, Director of Community Affairs, Intergovernmental Relations for his presentation to the CAB regarding members' responsibilities and the importance of advocacy. Ms. Boyce added that members now have a greater appreciation and understanding of their role.

Ms. Boyce reported that the Office of External Affairs worked with the CAB to conduct an election for a non-managerial employee to represent the hospital on the CAB. Ms. Boyce noted that over 300 excited employees participated by casting a vote. Ms. Boyce introduced the newly elected non-managerial employee representative to the Committee. Ms. Boyce added that the CAB had received five new members, all of whom are consumers ready and willing to roll up their sleeves to advocate for the hospital.

Ms. Boyce concluded her report by informing Committee members that the Queens CAB was anxiously waiting the appointment of an Executive Director. Ms. Boyce noted that she was looking forward to being included in the selection process. Ms. Boyce acknowledged that Ms. Dona Green, Chief Operating Officer, is an exceptional leader and her support to the CAB is beyond reproach.

ADJOURNMENT

The meeting was adjourned at 6:27 PM.

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

March 15, 2016
5:30 P.M.
HHC Board Room
125 Worth Street, Room 532

MINUTES

ATTENDEES

COMMITTEE MEMBERS

Josephine Bolus, NP-BC, Committee Chair
Ross Wilson, M.D, Chief Medical Officer, Representing Ram Raju, President, NYC Health + Hospitals

COUNCIL OF THE COMMUNITY ADVISORY BOARDS

Kenneth Campbell, Chairperson, NYC Health + Hospitals/Kings
Rosanne DeGennaro, Chairperson, NYC Health + Hospitals/Coney Island
Antoine Jean-Pierre, Chairperson, NYC Health + Hospitals/McKinney
Ludwig Jones, Chairperson, East New York/A Gotham Health Center
Jacqueline Narine, Chairperson, NYC Health + Hospitals/Cumberland/A Gotham Health Center
Talib Nichiren, Chairperson, NYC Health + Hospitals/Woodhull
Gladys Dixon, Chairperson, NYC Health + Hospitals/Coler
Lois Rakoff, Chairperson, NYC Health + Hospitals/Bellevue
J. Edward Shaw, Chairperson, NYC Health + Hospitals/Metropolitan
Bette White, Chairperson, NYC Health + Hospitals/Harlem
Jackie Rowe-Adams, Chairperson NYC Health + Hospitals/ Renaissance/A Gotham Health Center
Jacqueline Boyce, Chairperson NYC Health + Hospitals/ Queens

FACILITY COMMUNITY ADVISORY BOARD MEMBERS

Allan P. Wallace, NYC Health + Hospitals/Kings
Dawn Willius Burton, NYC Health + Hospitals/McKinney
Margaret Burke, NYC Health + Hospitals/Kings
James Mapp, NYC Health + Hospitals/McKinney
Wilbur Johnson, NYC Health + Hospitals/McKinney
Claudette Browne, NYC Health + Hospitals/McKinney
Jeromane Berger-Gaskin, NYC Health + Hospitals/McKinney
Gary Delamothe, NYC Health + Hospitals/Coler
Priscilla Douglas, NYC Health + Hospitals/Cumberland/A Gotham Health Center
Wilbur Johnson, NYC Health + Hospitals/McKinney
Oneida Lewis, NYC Health + Hospitals/Cumberland/A Gotham Health Center
Kent Mark, NYC Health + Hospitals/Bellevue
Queenie Huling, NYC Health + Hospitals/Coney Island
Mary Maynard, NYC Health + Hospitals/Queens
Zorona Hamm, NYC Health + Hospitals/Harlem
Marty Bromberger, NYC Health + Hospitals/Coney Island
Benita Foy-Stembridge, NYC Health + Hospitals/Harlem
Cindy Cain, NYC Health + Hospitals/Harlem
Cora Robinson, NYC Health + Hospitals/Queens
Gloria Thomas, NYC Health + Hospitals/Kings
Yvonne Davion, NYC Health + Hospitals/Queens
Louis Velez, NYC Health + Hospitals/Bellevue

Erma Campbell, NYC Health + Hospitals/ Bellevue
Bobby Lee, NYC Health + Hospitals/Bellevue
Myrna LePree, NYC Health + Hospitals/Bellevue
Lorraine Sims, NYC Health + Hospitals/Queens
Annabel Rodriguez, NYC Health + Hospitals/Woodhull
Benita Rodriguez, NYC Health + Hospitals/Woodhull
Otis Freeman, NYC Health + Hospitals/Kings
Fred Monderson, Ph.D., NYC Health + Hospitals/McKinney
Rick Echevarria, NYC Health + Hospitals/Woodhull
Janet E. Larghi, NYC Health + Hospitals/McKinney

NYC HEALTH + HOSPITALS CENTRAL OFFICE STAFF

John Jurenko, Interim, Senior Vice President/Intergovernmental Relations
Kathleen Whyte, Senior Director, Community Affairs
Colicia Hercules, Office of Board Affairs
Patricia Lockhart, Office of Board Affairs
Valerie Phillips, Office of Legal Affairs
Renee Rowell, Office of Community Affairs
Alvin Young, Office of Community Affairs
Robb Burlage, Ph.D., Office of Community Affairs

NYC HEALTH + HOSPITALS FACILITY STAFF

Ernest Baptist, Chief Executive Officer, NYC Health + Hospitals/Kings/Coney Island
Michael Tartaglia, Chief Executive Officer, NYC Health + Hospitals/McKinney
Edward Fishkin, M.D., Interim Chief Executive Officer, NYC Health + Hospitals/Woodhull
Lynn Schulman, Associate Executive Director, NYC Health + Hospitals/Woodhull
Evelyn Hernandez, Associate Executive Director, NYC Health + Hospitals/Bellevue
Maria Hernandez, Chief of Staff, NYC Health + Hospitals/Woodhull
Michelle Lewis, Interim Administrator, NYC Health + Hospitals/Cumberland/A Gotham Health Center
Nancy Ramos, CAB Liaison NYC Health + Hospitals/Cumberland/A Gotham Health Center
Sandra Springer, CAB Liaison, NYC Health + Hospitals/Queens
Angela Cooper, CAB Liaison, NYC Health + Hospitals/McKinney
William Jones, Associate Director, NYC Health + Hospitals/Henry J. Carter
Ronald Law, Director of Community Affairs, MetroPlus

GUESTS

Rachel Robin, United Federation of Teachers/Retired Social Services
Anthony Feliciano, Commission on the Public's Health System

CALL TO ORDER

The Chairperson, Mrs. Josephine Bolus, NP-BC, called the meeting of the Community Relations Committee (CRC) to order at 5:40 PM. Mrs. Bolus announced that a quorum could not be established and she requested to table the adoption of the minutes of the February 9, 2016 CRC meeting.

CHAIRPERSON'S REPORT

Mrs. Bolus welcomed Committee Members and highlighted key NYC Health + Hospitals events that occurred since the February 9, 2016 meeting. She informed members of the Committee, CAB Chairs and invited guests that following her remarks, Dr. Ross Wilson, NYC Health + Hospitals' Chief Medical Officer, would be providing remarks on Dr. Raju's behalf.

Ms. Bolus began her remarks by first thanking all of the Community Advisory Boards and staff who have helped to organize many Legislative forums across the health system throughout the months of January through the present. Mrs. Bolus reported that successful legislative forums were held on Friday, March 11th at NYC Health + Hospitals/ Coney Island, Lincoln, and Cumberland; and on Saturday, March 12th at NYC Health + Hospitals/Harlem. Mrs. Bolus added that at the NYC Health + Hospitals/Harlem event, special recognition awards were presented to the Honorable Congressman, Charles B. Rangel for his unwavering support of Harlem Hospital and the community over his many years of service in Congress; Ms. Sylvia White, Chief of Staff at Harlem; Mr. Joe Schick, Executive Director of the Fund for NYC Health + Hospitals; and Central Office very own, Ms. Renee Rowell, Director of Community Affairs/ Central Office liaison for the Harlem Hospital/Renaissance CABs. Mrs. Bolus announced that on March 18th, Henry J. Carter will host its legislative event, which would be hosted jointly by the CAB and Mr. Hank Carter.

Mrs. Bolus informed Committee members and invited guests that many of NYC Health + Hospitals Community Advisory Boards, with the support of staff and their communities, held major events to commemorate Black History Month during the month of February. She highlighted a few of these events:

- NYC Health + Hospitals/ Queens held an educational forum for staff with Mr. Dennis Walcott, former Deputy Mayor and Chancellor of the Department of Education serving as the keynote speaker and now head of the Queens Library system.
- NYC Health + Hospitals/ Jacobi & North Central Bronx featured jazz legend Sarah McLawler at two separate events
- NYC Health + Hospitals/ Lincoln held three different celebrations including a talent show, gospel night and also displayed art work of Michael Kelly Williams
- NYC Health + Hospitals/ Bellevue honored "The Tuskegee Airmen" in the Atrium
- NYC Health + Hospitals/ Metropolitan featured former Mayor, Hon. David Dinkins as keynote speaker for an education event; held its third annual "Tea Party: Commemorating Civil Rights in America;" and also held a "Food for Soul Cooking Competition," which featured healthy dishes that were created by hospital employees.

Ms. Bolus presented several notable initiatives and recognitions from across the system:

- NYC Health + Hospitals/Harlem was the only hospital in New York State to be named by The Leapfrog Group to its list of the nation's "Top Hospitals" for 2015. She noted that only 62 urban hospitals across the nation have received this recognition.
- Dr. Bernard Dreyer of Bellevue, who for more than three decades led the pediatric primary care program, had been elected President-elect of the 64,000-member American Academy of Pediatrics.
- Seventeen (17) students from diverse communities across the City had been awarded NYC Health + Hospitals' City Doctors scholarships. The students will receive scholarships to attend St. George's University School of Medicine. In return, the students are committed to give back to their communities by practicing primary care medicine in NYC's public health system after completing their medical education.
- First Lady Chirlane McCray has launched a series of NYC Baby Showers for expectant parents, new parents and caregivers. The NYC Baby Showers provide information about the wide range of services and resources that are available for babies and parents in NYC. On Saturday, March 12th, NYC Health + Hospitals/Harlem and MetroPlus staff attended the second NYC Baby Shower for Dads at the Harlem Children's Zone. Over 500 NYC residents registered to attend this event. The next NYC Baby Shower will be held on April 2nd in Staten Island (location to be determined). Other dates and locations include:
 - April 23rd at Brownsville Recreation Center in Brooklyn
 - May 7th at Rockaway YMCA in Far Rockaway, Queens
 - May 21st at the Children's Aid Society in the Bronx
 - June 25th at El Museo Del Barrio, in Manhattan, for Spanish Speakers
- NYC Health + Hospitals is partnering with the NYC Campaign Finance Board and the New York Organ Donor Network Live on New York initiative to host voter education/registration drives at NYC Health + Hospitals facilities throughout this election year. Mrs. Bolus noted that the deadlines to register for these important elections are the following:
 - March 25th for the Presidential Primary
 - June 3rd for the Congressional Primary
 - August 19th for Statewide Primary
 - October 14th for the General Election

Mrs. Bolus encouraged all CAB Chairs and CAB members to mark their calendars for the upcoming Annual Public Meetings of the NYC Health + Hospitals Board of Directors, which have been scheduled for each borough throughout the month of April through mid-May:

- Staten Island's Annual Public Meeting will be held on April 4th at Sea View
- Manhattan's Annual Public Meeting will be held on April 11th at Henry J. Carter
- The Bronx' Annual Public Meeting will be held on April 19th at Lincoln
- Queens' Annual Public Meeting will be held on May 11th at Queens Hospital
- Brooklyn's Annual Public Meeting will be held on May 18th at Woodhull Hospital

Mrs. Bolus concluded her remarks by encouraging all to support the NYC Health + Hospitals' Queens Auxiliary's upcoming Gala Fundraiser, which will be held at Terrace on the Park on Friday, April 15th.

Mrs. Bolus turned the meeting over to Dr. Ross Wilson who provided remarks on behalf of Dr. Raju.

PRESIDENT'S REMARKS

ROSS WILSON, M.D.

Dr. Wilson greeted everyone. He informed all that his comments would be brief. He presented the following:

- Flu season has been officially declared. It is now imperative for all to get vaccinated and it's still the best way to avoid succumbing to the flu and potentially transmitting it to others
- All employees and volunteers who have not yet been vaccinated are required to wear surgical masks in their workplace at all times.
- NYC Health + Hospitals' Electronic Medical Record system called EPIC will go live on April 1, 2016.
- Level 1 Trauma surveys are being conducted at Woodhull, Harlem, Kings, Lincoln and Jacobi
- Nearly seven years ago, the Zika Virus was linked to West Nile and was not thought to affect humans. However, the Center for Disease Control (CDC) has issued a health advisory about the Zika virus for people who recently traveled or who intend to travel to Central America.

Dr. Monderson, NYC Health + Hospitals/Kings CAB member inquired about the CDC's projected time frame for a vaccine for the Zika virus. Dr. Ross responded approximately two years.

CAB ANNUAL REPORTS

NYC Health + Hospitals/Woodhull (Woodhull) Community Advisory Board (CAB)

Mrs. Bolus introduced Mr. Talib Nichiren, Chairperson, Woodhull CAB and invited him to present the CAB's annual report.

Mr. Nichiren began the CAB's report by thanking the Committee for the opportunity to present. Mr. Nichiren reported that for the purpose of the Woodhull CAB report, he would only highlight the following major areas of concern:

- Emergency Department and Sodexo Food Services
- Reports in the community that New York University Hospital (NYU) submitted a proposal that their ambulances would be allowed to pick up patients and take them to an NYU facility only.
- Article recently published by NY Post contradicts NYC Health + Hospitals predictions that EPIC would be up and running on April 1, 2016.

Mr. Nichiren concluded the Woodhull CAB report by thanking Edward Fishkin, M.D., Interim Executive Director and the Woodhull CAB for their leadership and support.

NYC Health + Hospitals/Cumberland a Gotham Health Center (Cumberland) Community Advisory Board (CAB)

Mrs. Bolus introduced Jacqueline Narine, Chairperson of Cumberland CAB and invited her to present the CAB's annual report.

Ms. Narine began the Cumberland CAB's report by greeting members of the Committee, CAB Chairs and invited guests. She provided the following report:

- Cumberland is a health care practice that has been caring for the community for over 100 years.
- Presently Cumberland is a Federally Qualified Health Center. Ms. Narine noted that, Cumberland prides itself on responding to local health concerns through many forms of community involvement such as community outreach events and by providing patient centered medical care.
- The CAB has supported numerous projects, such as: the Reach out and Read Program which was attended by Council Member Walter Mosley; Cumberland's kickoff Zumba classes with Councilmember Laurie Cumbo and the CAB's Legislative Forum held on March 11th.
- The Cumberland CAB represents the facility at various community meetings such as Tenant Associations, NYCHA meeting and Community Planning Board meetings.

Ms. Narine concluded the Cumberland CAB's annual report and thanked Walid Michelen, M.D., Mari Millet, Deputy Executive Director, Michelle Lewis, Site Administrator, Cynthia Boakye, M.D., Alvin Young, Director of Community Affairs, Manelle Belizaire, Assistant Director, and Nancy Ramos, CAB Liaison for their leadership and support.

NYC Health + Hospitals/Kings County (Kings County) Community Advisory Board (CAB)

Mrs. Bolus introduced Kenneth Campbell, Chairperson of Kings County CAB and invited him to present the CAB's annual report.

Mr. Campbell began the Kings CAB's report by greeting members of the Committee, and invited guests. Mr. Campbell highlighted the following key points and issues:

- The most significant health care service needs and concerns in Central Brooklyn are asthma, diabetes, obesity, mental health HIV/AIDS, cancer and heart disease. The CAB identified the needs through Community Board (s) meetings, Needs Assessments and Community Health Profile data.
- The CAB also identified social needs such as: affordable housing, access to healthy foods, domestic violence, safety and youth development.

Mr. Campbell reported that the facility had taken the following steps to address the community needs and concerns:

- A Farmer's Market has been set-up at the main entrance of the hospital, providing fruits, vegetables and healthy options to staff and the community every Wednesday in the summer.
- A Staff Wellness Program and a fitness program for staff and the community called Shape Up New York have been developed.
- NYC Health + Hospitals/Kings County's primary care providers are now asking patients if they would like to be screened for HIV/AIDS; screenings are also offered in the Emergency Department.
- Thanks to Councilmember Mathieu Eugene, a second linear accelerator was installed at the facility to better meet the needs of Radiation Therapy patients along with adding a second Oncologist to decrease patient waiting time to see a specialist.
- To address the community's concerns on youth violence, this year's Annual Public meeting will focus on youth and anti-violence; the CAB will team up with the Guns Down Life Up Program and KAVI.

Mr. Campbell concluded the report by stating “going forward the CAB will continue to strategize and develop programs that support Dr. Raju’s 20/20 vision.

Ms. Gloria Thomas, announced that Kings received a \$5M monetary award from Councilmember Mathieu Eugene.

NYC Health + Hospitals/McKinney (McKinney) Community Advisory Board

Mrs. Bolus introduced Antoine Jean-Pierre, Chairperson of McKinney CAB and invited him to present the CAB’s annual report.

Mr. Jean-Pierre began the McKinney CAB report by thanking members of the Committee for the opportunity to present. Mr. Jean-Pierre continued and shared the following highlights:

- NYC Health and Hospitals/McKinney is better known as the Hilton Hotel of Long-Term Care and continues to be a Center of Excellence in Central Brooklyn.
- Under the leadership of Mr. Michael Tartaglia, Executive Director, McKinney has gone full steam ahead, aligning itself with Dr. Raju’s 20/20 Vision. McKinney focus is on the quality of care, ensuring the safety of everyone and the pursuit of excellence.

Mr. Jean-Pierre continued and outlined the CAB’s activities for the past year:

- Participated in the facilities’ Black History Month celebration
- Held a Resident’s Super Bowl party
- For the first time, the CAB partnered with the West Indian Day Carnival Association and brought Eastern Parkway to McKinney. Mr. Jean-Pierre reported that the residents had costumes made for them by bandleaders and State Senator Jessie Hamilton was on hand to witness' this festivity which was covered by Brooklyn News 12.
- Assisted the residents when they planted for their own vegetable garden for the first time.
- Attended a Memorial Service for families of residents who passed during the previous year.
- Participated in the Annual Tree Lighting ceremony

Mr. Jean-Pierre concluded DSSM’s CAB report by pledging the CAB’s continued support of the facility. He provided the following updates on key projects and initiatives:

- Enhanced Dental Suite is moving towards completion in early 2016.
- New sitting/lounge chairs, which are more comfortable for visitors to use on the units and in the family room, were purchased in September 2015.
- "Polling Site" is maintained by residents, and community members.
- The Summer Youth Program had a very successful year, which benefitted community youths as well as DSSM’s residents.
- Renovations of the lobby area completed
- Ongoing participation in Art Show through the Leading Age Association
- Several pieces of resident art were selected for awards.

NYC Health + Hospitals/East New York a Gotham Health Center (East New York) Community Advisory Board

Mrs. Bolus introduced Ludwig Jones, Chairperson of East New York (ENY) CAB and invited him to present the CAB's annual report. Mr. Jones began the ENY CAB report by greeting members of the Committee, CAB Chairs and invited guests. Mr. Jones reported that the facility's leadership are addressing the needs of the community through various programs and initiatives. He described some of the key programs and initiatives as the following:

- Touro College is currently on site at the facility implementing a PharmD program. He explained that the program will ensure that patients adhere to their medication regime. Mr. Jones noted that compliance will improve health outcomes of the patients.
- The Food as Medicine Program helps to improve access to healthy foods to patients by providing on site farmer's market for patients.
- East New York's Art Program provides art therapy for children. Mr. Jones explained that art therapy has been proven to decrease depression, social anxiety and engages children in safe indoor fun.

Mr. Jones concluded the CAB's report by announcing that this year's Legislative breakfast that was held on Friday, March 4th was informational to the community and well attended. Mr. Jones announced that the facility's leadership and the CAB are discussing a "Doo-Wop Night for Men" in the community.

Mr. Lee, Bellevue CAB Member asked about the status of the "Banana Program." Mr. Jones responded that the banana project was ongoing. Mr. Jones explained that bananas are provided to patients in the waiting areas.

Mrs. Bolus informed all that during East New York's (ENY) Black History Month celebration, Ms. Irmatue Grant, R.N. and a Head Nurse with over 50 years of service to ENY was recognized. Mrs. Bolus added that Ms. Grant was the first African American Nurse who had been acknowledged by the American Red Cross.

OLD BUSINESS

NEW BUSINESS

ADJOURNMENT

The meeting was adjourned at 6:25 PM.

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

NYC Health + Hospitals / Harlem - Community Advisory Board

I. COMMUNITY NEEDS

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

The most significant health care service needs or concerns of the community/communities served by NYC Health + Hospitals / Harlem include: Cardiovascular Disease, Diabetes, Asthma, High Blood Pressure, High Cholesterol, Mental and Behavioral Health and Access to Care; Sexually Transmitted Diseases including HIV/AIDS; Cancer, Alcohol and Substance Abuse, poor nutrition, Obesity, Geriatrics, Depression, Domestic Violence, lack of health insurance, Insufficient Delivery System Coordination, Integration, Navigation, Health Literacy and Knowledge of the Health Care System, Language and Cultural Barriers to Care.

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

Community Board(s) meetings Other Public Meetings
 Needs Assessments Surveys Community Health Profile Data
 Reports from Community Organizations Other Activities (please list)

- *Community Needs Assessment for New York State DSRIP Project Plan Application 2014*
- *2013 Community Health Needs Assessment and Implementation Strategy*
- *New York City Food Policy Center Needs Assessment in East Harlem 2013*
- *Focus groups*
- *Key Informant interviews & Community/Providers surveys*
- *Community Stakeholders' Group*

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

yes no

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

As outlined in the 2013 needs assessment, the Hospital has taken a proactive approach to prevention and treatment. This strategy is evidenced by how the

leadership has developed a series of initiatives to address the identified needs. To that end, please find below some examples of initiatives:

- ***Diabetes***

Patients are enrolled in the Diabetes Registry which helps the patient and provider to monitor the management of disease and ensure patients have received appropriate screenings including HbA1c (a blood test that monitors long term blood glucose levels), ophthalmology/vision testing, podiatry/foot examinations, blood pressure and cholesterol monitoring, etc. The hospital implemented follow-up with Non-Compliant Patients through Diabetes Registry. Certified Diabetic Educators (CDE) educate patients on Diabetes self-management. The Hospital increased outreach by using a Chronic Disease coordinator. CDEs see DM patients in primary care and call between visits. Since 2013, the hospital implemented the NYS Medical Home Demonstration Project and focused on increasing number of patients who received HbA1c test by 10%. The Hospital continues to access early detection, diagnostic and treatment services, and support groups to provide effective management strategies for Diabetes. Preventive and early detection interventions are offered through nutritional counseling, diabetes support groups, and cholesterol screenings.

- ***Cardiovascular Disease***

The hospital has increased the number of Care Managers who oversee Care of Patients with Congestive Heart failure to address cardiovascular disease. Disease management strategies have been enhanced through the Harlem Healthy Hearts Initiative. Also, hypertension targets are provided to treat pathway programs to improve clinical outcomes. The NYS Medical Home Demonstration Project was implemented and the initiative has resulted in positive reduction in readmissions and has helped with access. The Hospital continues to target early detection and diagnostic and treatment services to provide effective management strategies for this disease. Social workers assess a patient's eligibility for home care support upon discharge. Post-discharge, each patient receives an appointment for follow-up in the cardiology clinic within one week. Patients also receive a post-discharge call to ensure they are compliant with medications, dietary restrictions, appointments and not exhibiting any signs or symptoms of heart failure. The system in effect provides a safety net, helping patients stay healthy in their community and prevents readmission to the hospital. Staff members also enroll eligible patients in Cardiovascular Risk Registry.

Project RED: An initiative that focuses on reducing hospital readmission with enhanced patient education. The interdisciplinary team ensures that patients with

COPD, CHF, pneumonia and heart attack receive home care services, follow up with their medications and clinic appointments.

- **Obesity**

***Bariatric Surgery Service** provides a comprehensive continuum of services including medical, surgical, nutritional, educational, and psychological services required to support patients through their Bariatric procedures and post-operative recuperation and transition.*

***Hip Hop Healthy Eating and Living in Schools** is an innovative program that focuses on the need to increase children's and parents' understanding and knowledge of calorie intake and weight management as it relates to chronic medical conditions. Targeting pre-adolescent children in communities with a disproportionate burden of obesity and its related illnesses, this program delivers an interactive multi-media, educational interventions, using music and animation, to children and their parents. The program seeks to help them develop the skills required to make behavioral changes to maintain or initiate a healthy lifestyle.*

***San Bao Tai Chi and Qigong Workshops for Seniors pilot program** offered workshops to Seniors. Participants in the workshops reported improvements in mood, cardiovascular and respiratory function, and balance, as well as reductions in stress and pain associated with arthritis, carpal tunnel syndrome, and other conditions.*

***Alvin Ailey Dance Workshops for Seniors in collaboration with The Friends of Harlem Hospital Center, Inc.** provide Dance Workshops for Seniors. Body Conditioning, Jazz and West African Dance classes are taught by Alvin Ailey dance instructors. Participants in the Alvin Ailey Dance Workshops for Seniors reported improvements in a variety of health indicators including weight, blood pressure, cardiovascular and respiratory function, gait, flexibility and muscle integrity and mood.*

***Harlem Healthy Living** is collaboration between NYC Health +Hospitals/Harlem, The Greater Harlem Chamber of Commerce, community leaders, businesses, healthcare organizations, media partners, governmental agencies, educational institutions and professional organizations to motivate community residents to adopt healthier lifestyles. Through this initiative, partners developed and convened community health forums and conferences, media partners reinforced these healthy eating and living messages in publications and through broadcasts and structured walk/run events.*

***Harlem Walk It Out!** is a comprehensive physical activity program for Harlem's senior citizens. The program was funded by the Healthy Heart Program of the New York State Department of Health in response to the rising rates of heart disease, stroke, obesity, and diabetes-related morbidity and mortality in the Harlem community. The purpose of Walk It Out! is to enhance access to neighborhood spaces for physical activity and to develop informational outreach activities to promote holistic health and prevent disease and illness.*

Shape Up NYC is a free family fitness program that is offered throughout the five boroughs via collaboration between the New York City Department of Health and Mental Hygiene, New York City Department of Parks and Recreation, and Equinox Fitness Clubs. NYC Health + Hospitals / Harlem currently offers two weekly Shape Up NYC classes, Kickboxing and Zumba. Over 200 community members and hospital staff have participated in the Harlem Hospital Shape Up NYC program since its inception. Many of the participants have reported decreases in weight and blood pressure, diminished stress levels, and improvements in mood and productivity as a result of their participation in the program.

- **HIV/AIDS**

NYC Health + Hospitals / Harlem has developed a seamless continuum of comprehensive programs for People Living with HIV/AIDS. Patients have access to HIV counseling and prevention education, primary care, testing, special services for women and children, nutrition care services and support groups. Existing programs include:

- *Adherence Programs, including the Harlem Adherence to Treatment Program, provide support services needed by people living with HIV/AIDS to assist them in complying with their medication regimen. The program continues to actively engage patients. Currently servicing 107 clients/*
- *Family Care Center provides comprehensive medical, and support services for children, adolescents and adults with HIV/AIDS and their families. Services include medical care by infectious diseases specialist, pediatricians, dermatologist and gynecology. Other critical services provided include counseling and testing, health education, peer support, mental health services, nutrition assessments, anti-retroviral related adherence counseling, substance abuse counseling and social support services.*
- *Family Centered Program provides comprehensive medical specialty and case management services to individuals who are HIV+/AIDS and their infected and affected family members.*
- *HIV Rapid Testing Program provides HIV testing on all emergency, inpatient and outpatient units.*
- *Harm Reduction Recovery Readiness Program uses a harm reduction model to engage HIV-infected individuals with past or current substance use issues so they may modify personal behavior patterns, improving quality of life and preventing transmission of HIV.*
- *HIV Nutrition Care Services Program provides comprehensive nutrition assessments and counseling for treatment and prevention of HIV-associated nutrition problems. It also addresses fat redistribution and metabolic problems caused by the use of potent antiretroviral therapies.*

- *Medical Care Management Program is a comprehensive HIV/AIDS model of care designed to ensure the navigation of healthcare and social services systems, the coordination of transportation and childcare services, linkage to eligible entitlements, and adherence to treatment support for individuals living with HIV and AIDS.*
- *Ryan White Part C & Part D Programs provides comprehensive primary care services to People Living with HIV/AIDS. Special program components address nutritional care and rapid testing. The program address needs of Women, infants and children. The program continues to actively engage this population and is currently servicing 80 clients.*

- **Cancer**

NYC Health + Hospitals / Harlem implemented aggressive early intervention and screening programs for breast, cervical, prostate and colorectal cancers. In addition, bilingual patient navigators are being utilized to assist patients in negotiating the Hospital system. NYC Health + Hospitals / Harlem has state-of-the-art equipment technology that provides precision and images needed to detect cancer in its earliest stages. This equipment includes a 64-slice CT scan, new ultrasound equipment is used to diagnose breast abnormalities detected by a physician during a clinical exam and to characterize potential abnormalities seen on mam-mography, and fluoroscopy equipment to detect gastroenterology related cancers.

- *The Breast Imaging Center of Excellence provides all aspects of women's imaging--mammography and associated procedures, as well as Bone Densitometry.*
- *During the months of May and October, Breast Cancer awareness tabling was arranged throughout the hospital to disseminate cancer information. Hospital staff also developed special screening initiatives for community residents and patients.*
- *In October 2015 the hospital partnered with the American Cancer Society for the Making Strides against Breast Cancer Walk.*
- *Outreach efforts provide cancer education information and early intervention services to patients and residents of the Harlem community.*

- **Trauma Related to Violence**

The system allows organization to oversee: Hospital-based violence interruption program such as "Guns Down Life Up", "Wrap around", community-based preventive services, school-based conflict mediation and anti-violence programs,

anti-violence program training academy, community messaging and educational materials.

NYC Health + Hospitals / Harlem provides health and support services to victims of gun shots, stabbing and assaults through the Guns Down Life Up! Initiative. Youth between the ages of 13 to 24 who are admitted to the Hospital as a result of penetrating wound trauma are visited by staff who work with them and their families to help quell any retaliatory actions as well as counsel patients on the importance of changing their lives. Patients and their families are also shown the short documentary 'Triggering Wounds', an internally produced project that highlights the pitfalls of gun violence and shares the effects from the viewpoint of families, friends, law enforcement and the community. The Hospital regularly partner with community based organizations in what we have named our 'Circle of Safety' to collaborate, discuss and focus efforts on combating gun violence. These meetings serve as a way to inform like-minded organizations on the efforts being put forth and also serve as a launching pad for collaborative efforts to make an impact in the community. These meeting also allow us to share out the data and statistics that we track as a hospital with regard to trauma related injuries and also hear the qualitative data gathered by those who perform different functions at the community level.

The Six Winners Mentoring Program is a life skills enrichment program designed for young men. The program meets regularly and works with approximately 15-20 students and delivers modules covering a wide variety of topics. The baseline mantra for the program is "Occupy a young person's time with enriching and creative activities, so that they don't have the time to hurt themselves or hurt others"

The hospital continues to partner with the Young Men's Initiative, Manhattan District Attorney Cyrus Vance, New York Mission Society Operation SNUG, the New York Police Department's 32nd Precinct and Harlem Mothers SAVE, Stop Another Violent End, to develop a Circle of Safety, an evidence-based violence reduction program which provides a continuum of health and support care services to the victims of gun shots, stabbings and assaults, and to their families. Hospital staff members work with Violence Interrupters (SNUG) within the community to prevent violence from occurring. The Hospital utilizes a combination of best practice models designed to provide adolescents and young adults and their families who are the victims of violence with medical, social support and educational skills and conflict resolution resources to interrupt the cycle of violence.

NYC Health + Hospitals / Harlem also continues to host community forums to discuss strategies for preventing gun violence in our communities.

In 2015, the hospital collaborated with the New York State Office to launch campaigns for the Prevention of Domestic Violence. NYC Health + Hospitals / Harlem hosted the Center for Victim Support for the Denim Day, a day to raise awareness of rape and sexual assault.

In September 2015, the Hospital participated in the 14th Annual Gladys Ricart & Victims of Domestic Violence Memorial Walk.

In October 2015, NYC Health + Hospitals / Harlem supported W.A.R.M. (We All Really Matter) to celebrate Annual Domestic Violence Panel Discussion and "Shine the light on Domestic Violence" march.

The Center for Victim Support facilitates Healing Circle groups, Empowerment groups, and Advocacy Forums to victims of domestic violence.

II. FACILITY'S PRIORITIES

1. What are the facility's strategic priorities?

Facility strategic priorities: Improve the Patient Experience; Increase Access (decrease no show rates and time to next available appointment in outpatient clinics and decrease waiting times in the ER and outpatient clinics) Increase Market Share & Outreach; Cost Reduction Strategies; Workforce Development and Modernization projects.

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

Members of the CAB participate in key committees held throughout the hospital. CAB members attend the Hospital Wide Patient Safety Committee, the Patient Advocacy Council, Breakthrough Report Out events and Medical and Dental Executive Committee meetings and collaborate with staff to ensure that access to quality healthcare is at the fore front of all discussion. We align this goal with the need to increase access, market share and outreach.

We work with staff to identify trends as well as share community feedback on patient's experiences in the hospital, ED and clinic.

3. Have CAB members been informed of and provided input into the facility's plans for new programs and modernization projects, prior to their implementation?

yes no

The Community Advisory Board is notified through monthly reports given by the Chief Executive Officer, Medical Director, Chief Nursing Officer, Chief Financial Officer, and Chief Operating Officer.

III. PATIENTS'/RESIDENTS' EXPERIENCES

1. Patient safety and patient satisfaction are a priority of the facility. Are reports on these subjects provided on a regular basis to the Community Advisory Board?

Yes

No

The Chief Nurse Executive provides quarterly reports on patient satisfaction and the patient experience.

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

Complaints:

- *Care*
- *Attitude*
- *Communication*
- *Lost Property*

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

- *Quality of care*
- *Interpersonal relationships between staff and patients.*
- *More flexible clinic hours and weekends clinics.*
- *Cultural diversity of staff complements the cultural diversity of the patient population.*
- *Commitment of the providers and staff to the community.*
- *Hospital provides "One Stop Shopping" through a comprehensive continuum of services providing health insurance, social services, financial and legal assistance, Mental Health, Women Infant Children (WIC) Supplement Food Program, NYSDOH Designated Stroke Center of Excellence, AIDS Center of Excellence, Bariatric Center of Excellence, Patient Centered Medical Home, Quit Smoking Program, and Project RED Congestive Heart Failure Project.*
- *Strong collaborations with community organizations including The Greater Harlem Chamber of Commerce's Harlem Healthy Living Initiative.*
- *Hospital's physicians are experts in their fields.*
- *Hospital has unique sub-specialties including Burn Unit; Plastic Surgery, Interventional and Muscular-Skeletal Radiology and sub-specialties for reconstructive facial surgery.*
- *NYC Health + Hospitals / Harlem is the only acute care facility in Harlem*
- *Ability to secure grant funds for special initiatives to bridge gaps in service.*
- *Patient-centered leadership empowers management staff to rise to their potential.*
- *Progressively enhancing the Information Technology Infrastructure to enhance the quality of care and communications.*

4. (For hospitals and D&TCs only). Are periodic reports or updates on the facility's access indicators such as appointment availability and cycle times/wait time(s) provided by facility leadership at CAB meetings?

Yes

No

1. From the CAB's perspective, rate the facility in the following areas:

	Poor	Satisfactory	Very good
Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

2. Is signage about HHC's Options Program posted in areas that have high traffic?
 Yes No

II. CAB ORGANIZATION, STRUCTURE AND RESPONSIBILITIES

1. According to the CAB's By-laws, what is the CAB's total allowable membership?
35

2. What are current numbers of members? 30 *current members*
What are current numbers of vacancies? 5 *vacancies*

3. What were the membership recruitment activities conducted by CAB this year?

The Membership Committee makes monthly announcements and encourages CAB members to refer applicants to the Board.

4. Do the CAB's recruitment efforts include outreach to new population groups in the community?
 Yes No

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

Membership Committee – this committee reviews applications, nominations, and recommend appointments to the applicable appointing source. The Committee convenes periodically as the need arises for new/replacement members.

Outreach and Public Relations Committee – this committee works with the Community Outreach Department of NYC Health + Hospitals / Harlem in efforts to promote the Hospital.

Patient Care Committee – this committee served by all CAB members serves as liaisons with departments within the hospital to evaluate the medical care and services rendered to patients. The Committee reports its findings and recommendations to the Board.

Joint Annual Public Meeting Committee – this committee is responsible for the planning and executing the CABs Joint Annual Public Meeting.

Joint Legislative Breakfast Committee – this committee is responsible for the planning and executing the CABs Joint Legislative Breakfast.

Newsletter Committee – this committee produces quarterly issues for the community at large.

Sunshine Committee – this committee is responsible for collecting dues from the CAB members and purchasing cards, gifts, for special occasions, and bereavement.

By-Laws Committee – this committee is responsible for reviewing the proposals of the Board for amending the By-Laws and reporting to the membership.

Vacancy Committee – this committee overview the hospital's vacancies reports from PAGNY.

Community Relations Committee – this committee seeks to support and enhance the work of the CAB by expanding our collective efforts throughout the community at large.

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

Yes No

a. If yes, please describe actions taken.

Community Board Members who are members of the CAB share reports and activities during monthly Community Board and Health Committee Meetings. This year, the Community Board and the Hospital leadership met to redefine its relationship and explored opportunities for further collaboration.

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

Yes No

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

yes no

9. Did the CAB host or participate with the facility’s leadership in a legislative forum this year?

yes no

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

yes no

a. If so, were the issues subsequently addressed?

11. Describe the CAB’s involvement in its facility’s outreach activities?

- *Active participants in Harlem Week 2015*
- *Harlem Health Village*
- *Take Care New York*
- *Family Day*
- *Walk it out! Harlem*
- *Dance of the Village Elders*
- *Outreach Programs in the Hospital*
- *Tenant Associations*
- *Local Churches*
- *Community Centers*
- *Senior centers*
- *School Boards*
- *Block Associations*
- *Various walks promoted by the Hospital*
 - *Making Strides Against Breast Cancer*
 - *AIDS Walk New York*
 - *NYC Family Health Walk and The Percy Sutton 5K Run*
 - *Making Strides Against Breast Cancer*
 - *Step Out: A Fight Against Diabetes*
 - *Walk to End Alzheimer’s “Harlem Supporters”*

12. Does your CAB’s Chairperson or alternate designee attend the Council of Community Advisory Boards meetings?

yes no

13. Did your CAB participate in last year’s Council of CABs Annual Conference?

yes no

14. How would you describe the current level of technical and strategic assistance provided to the CAB by the Office of Intergovernmental Relations?

not enough just right

If not enough, what assistance would you need?

V. ADDITIONAL TOPICS FOR DISCUSSION (OPTIONAL)

Are there additional topics that the CAB would like to discuss with the Board of Directors' Community Relations Committee? Please list the topics.

1. *NYC Health + Hospitals / Harlem proudly received a "Grade A" Hospital Safety Score from the Leapfrog Group.*
2. *NYC Health + Hospitals / Harlem received the 2015 "Excellence in Patient Safety" Award from the Northeast Business Group on Health.*
3. *NYC Health + Hospitals / Harlem was the only Hospital in New York State to Earn The Leapfrog Group's "Top Hospital" Award for 2015.*

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

Signatures:

CAB

Chairperson:

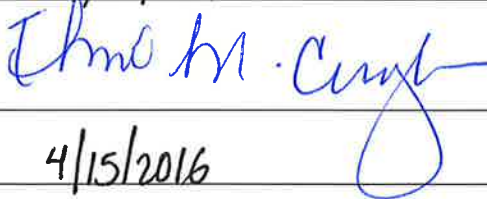
Date:



4/12/2016

Executive
Director:

Date:



4/15/2016

**REPORT TO THE COMMUNITY RELATIONS COMMITTEE
OF THE HHC BOARD OF DIRECTORS**

**RENISSANCE HEALTH CARE NETWORK
COMMUNITY ADVISORY BOARD**

• **COMMUNITY NEEDS**

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

- AIDS and HIV
- Asthma
- Childhood Obesity
- Dental
- Diabetes
- Hypertension
- Nutrition
- Smoking
- Social Services

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

- Community Board(s) meetings Other Public Meetings
 Needs Assessments Surveys Community Health Profile Data
 Reports from Community Organizations Other Activities (please list)

- Two New CAB members
- CAB board retreat with Ram Raju, M.D, and Walid Michelen, M.D. in attendance, June 6, 2015
- Meet and Greet with Community Organizations, Not for Profits, Senior Centers and Leadership, June 25, 2015
- Domestic Violence Workshop , October 16, 2015
- Joint Annual Public Meeting – November 9, 2015
- Joint Legislative Brunch – March 12, 2016
- Coordinate Meetings with Political Leaders and Gregory A. Atwater, M.S.

3.

4.

5. Do your facility leadership addressing these needs/concerns?

yes no

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

- RHCN participated in HARLEM WEEK event, promoting services and outreach screenings
- Hosting Health Outreach screenings throughout RHCN
- Hosting Health Outreach screenings and promoting services through the Harlem Community
- Staff Training and Development
- Joint Annual Public Meeting theme was “Legacy of Harlem Hospital & Sydenham Hospital (RHCN), Babies Born Between 1915 and 1975”, November 9, 2015.
- Joint Legislative Brunch theme was “Shaping the Future, Becoming Agents of Change”, March 12, 2016
-

FACILITY’S PRIORITIES

1. What are the facility’s strategic priorities?

- Improving Patient Flow
- Improving Patient Appointments Availability
- Improving Patient Customer Service
- Educating Patients on Healthy Eating
- Community Outreach
- Improving Patient Safety
- Increasing School Based Partnerships
- Increasing NYCHA Partnership in the developments that RHCN Centers are located
- Improving Staff and Leadership Working relationships

1. Describe how the CAB provides input into the development of the facility’s strategic priorities?

- The CAB Chairperson attend the Medical Director’s Compliance and Grievance Committee Meeting
- The CAB offers input on how to improve the outreach and strategic priorities

- The CAB offers input on staff costumer service
 - The CAB hold public meetings to improve community relations
 - The CAB reacts to information given by the patients in RHCN sites on how to improve health care. Information is brought to the Council of CAB meetings, making Senior Management aware of the concerns of the patients, and potential problems.
2. Have CAB members been informed of and provided input into the facility's plans for new programs and modernization projects, prior to their implementation?
- yes no
- The Senior Management team share information at the CAB full board meetings.

• PATIENTS'/RESIDENTS' EXPERIENCES

1. Patient safety and patient satisfaction are a priority of the facility. Are reports on these subjects provided on a regular basis to the Community Advisory Board?
- Yes No
2. What are the most frequent complaints raised by patients/residents?
- Do not understand Gotham Health and the relationship with New York Health + Hospitals
 - The reduction in services and patients are referred to Harlem and Lincoln Hospitals.
3. (For hospitals and D&TCs only). Are periodic reports or updates on the facility's access indicators such as appointment availability and cycle times/wait time(s) provided by facility leadership at CAB meetings?
- Yes No
- Former Senior Vice President, Gotham Health CEO & COO, Deputy Executive Director, Medical Director and Senior Associate Director updated the CAB at the full board meetings.

1. From the CAB's perspective, rate the facility in the following areas:

	Poor	Satisfactory	Very good	
Cleanliness		<input type="checkbox"/>	<input type="checkbox"/>	X
Condition		<input type="checkbox"/>	<input type="checkbox"/>	X
Appearance		<input type="checkbox"/>	<input type="checkbox"/>	X

2. Is signage about HHC's Options Program posted in areas that have high traffic?

X Yes No

• CAB ORGANIZATION, STRUCTURE AND RESPONSIBILITIES

1. According to the CAB's By-laws, what is the CAB's total allowable membership? 26
2. What are current numbers of members? 15 What are current numbers of vacancies? 11
3. What were the membership recruitment activities conducted by CAB this year?
- Applications were available at all Outreach and Community events.
 - Community Advisory Board Public Events
 - Requests were made to Community Boards.
 - CAB and Senior Management recommendations have been made.

1. Do the CAB's recruitment efforts include outreach to new population groups in the community?

X Yes No

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

Executive Committee –establishes committees to carry out objectives of the Board. The Executive Committee has the authority to act on behalf of the entire Board subject to ratifications at the next regular Board meeting, when an opportunity for the full Board does not exist.

Receiving and acting on reports of committees of the Board. Prepare the agenda for the regular Board Meeting. Sponsor relevant community programs in health.

Membership Committee – solicits, screens and recommends to the Associate Executive Director and/or Manhattan Borough President names of proposed candidates for membership under the proper categories for replacement or categories for replacement or vacancies on the Board

Legislative Committee – is responsible for considering rules and regulations by which the Board will conduct its business. The committee shall keep abreast of New York City, New York State and Federal Legislations, which will affect the health needs of the consumers. The committee will be responsible for the election process.

Patient Care Committee- participate in the planning and/or initiation of programs for the patients, evaluates and monitors the acceptability of services rendered to patients; help to establish priorities within the RHCN.

Public Relations Committee – reaches out to the community to educate, increase health awareness, and promote the growth of a health constituency in concert with Patient Care Committee. Plans and coordinated the Annual Public Meetings.

Finance Committee – advises in the development, preparation and submission of the RHCN capital and expense budge and proposals. Advises the RHCN Executive Director and Corporation on the establishment of priorities within appropriate budgets.

Sunshine Committee – shall be responsible for the hospitality, good, and welfare to the Board members at times of illness and special recognition. The committee shall keep the records of the Board members voluntary contributions and transactions.

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

Yes No

a. If yes, please describe actions taken

- The representative gives a report on RHCN to the Health Committee.

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

Yes No

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

yes no

3. Did the CAB host or participate with the facility's leadership in a legislative forum this year?

yes no

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

yes no

1. If so, were the issues subsequently addressed?

- Yes issues were addressed

5. Describe the CAB's involvement in its facility's outreach activities?

- Hosting and attending screenings
- Harlem Week
- Pediatric Holiday Event
- Meet and Greet event
- Domestic Violence Workshop

1. Does your CAB's Chairperson or alternate designee attend the Council of Community Advisory Boards meetings?

yes no

2. Did your CAB participate in last year's Council of CABs Annual Conference?

yes no

3. How would you describe the current level of technical and strategic assistance provided to the CAB by the Office of Intergovernmental Relations?

not enough just right
If not enough, what assistance would you need?

• **ADDITIONAL TOPICS FOR DISCUSSION (OPTIONAL)**

Are there additional topics that the CAB would like to discuss with the Board of Directors' Community Relations Committee?
Please list the topics.

1. (?)

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

Signatures:

CAB Chairperson: Jackie Rowe Adams

Date: 04-25-2016

Deputy Executive Director: 

Date: 4/25/16



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

**LINCOLN MEDICAL CENTER
Tuesday, May 3, 2016**

I. COMMUNITY NEEDS

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

The most significant concerns that the community at large has is now that NYC Health + Hospitals has a 900,000,000 deficit, what will happen to the delivery of health care to the community? The reality that services and programs provided by the facility are being threatened has become a near reality.

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

- Community Board(s) meetings Other Public Meetings
- Needs Assessments Surveys Community Health Profile Data
- Reports from Community Organizations Other Activities (please list)
Legislative Summit

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

- yes no

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

The Community Advisory Board Members work together with the Administration in reaching out to Community Leaders and Legislators, advocating for them to help us maintain and restore the hospital services and programs. Administration keeps us informed.

II. FACILITY’S PRIORITIES

1. What are the facility's strategic priorities?

Providing the best possible health care to our community and making sure to maintain that quality of care.

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

Administration informs us of the development of the facility's strategic priorities through:

1. Our monthly full Board meetings.
2. Presentations on new initiatives and programs presented to the full Board on a monthly basis.
3. The Executive Director's Report, Medical Director's Report,
4. Financial Reports and Nursing Reports to the CAB.
5. Invitations to special programs such as Research Day, Focus Groups, etc.

3. Have CAB members been informed of and provided input into the facility's plans for new programs and modernization projects, prior to their implementation?

yes

no

III. PATIENTS'/RESIDENTS' EXPERIENCES

1. Patient safety and patient satisfaction are a priority of the facility. Are reports on these subjects provided on a regular basis to the Community Advisory Board?

Yes

No

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

Wait time in the ER and at the clinics.

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

- Excellent improvement of Doctor and Patient Relationships
- Good customer service
- New areas recently renovated and expanded.
- Expanded Times and days in several clinics

4. (For hospitals and D&TCs only). Are periodic reports or updates on the facility's access indicators such as appointment availability and cycle times/wait time(s) provided by facility leadership at CAB meetings?

Yes

No

5. From the CAB's perspective, rate the facility in the following areas:

	Poor	Satisfactory	Very good
Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

6. Is signage about HHC's Options Program posted in areas that have high traffic?

Yes

No

IV. CAB ORGANIZATION, STRUCTURE AND RESPONSIBILITIES

1. According to the CAB's By-laws, what is the CAB's total allowable membership? 24

2. What are current numbers of members? 13 What are current numbers of vacancies? 11

3. What were the membership recruitment activities conducted by CAB this year?

There is ongoing recruitment to ensure full membership. Board is recruiting from Community Events, Planning Boards, Legislators and Health Fairs.

4. Do the CAB's recruitment efforts include outreach to new population groups in the community?

Yes No

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

Patient Care Committee Chair is Alice Simmons. This Committee keeps track of each Division of the Hospital by having the Directors give a presentation on their departments.

Intergovernmental Committee is responsible for putting together the Annual Legislative Summit, as well as advocating to community leaders on behalf of the Facility.

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

Yes No

a. If yes, please describe actions taken.

Members representing Planning Boards 1, 2 and 4 forward information received at the Community Advisory Board full Board meetings such as the Executive Director's Report, Medical Director's Report and Financial Report as well as to any other committee CAB members belong to.

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

Yes No

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

yes no

9. Did the CAB host or participate with the facility's leadership in a legislative forum this year?

yes no

The Bronx CABs (Lincoln, Morrisania and Belvis) hosted our Twelfth Annual Legislative Summit on Friday, March 11, 2016. Event was very well attended. Senator Ruben Diaz Sr., Senator Gustavo Rivera, Assemblywoman Carmen Arroyo, Assemblyman Marcos Crespo, Councilwoman Vanesa Gibson and Councilman Rafael Salamanca attended the Event.

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

yes no

a. If so, were the issues subsequently addressed?

No Issues were reported.

11. Describe the CAB's involvement in its facility's outreach activities?

CAB members represent and speak on behalf of the Facility at:

- Planning Boards and on committees they represent
- Health Fairs
- Community Events
- Public Hearings in the City and in Albany, NY.
- Voters Registration

12. Does your CAB's Chairperson or alternate designee attend the Council of Community Advisory Boards meetings?

yes no

13. Did your CAB participate in last year's Council of CABs Annual Conference?

yes no

14. How would you describe the current level of technical and strategic assistance provided to the CAB by the Office of Intergovernmental

Relations?

not enough just right

If not enough, what assistance would you need?

V. ADDITIONAL TOPICS FOR DISCUSSION (OPTIONAL)

Are there additional topics that the CAB would like to discuss with the Board of Directors' Community Relations Committee? Please list the topics.

1. None.
- 2.
- 3.
- 4.
- 5.

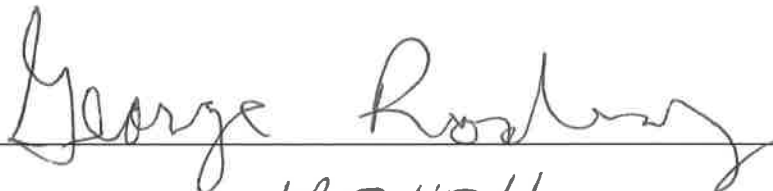
NOTE: The comments in this report represent the consensus of the entire membership and have been shared with the facility administration.

Signatures:

CAB

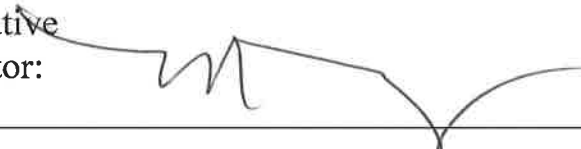
Chairperson:

Date:


4-18-16

Executive

Director:



Date:

4/21/16



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

**MORRISANIA
GOTHAM HEALTH CENTER
Tuesday, May 3, 2016**

I. COMMUNITY NEEDS

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

The most significant concerns that the community at large has is now that NYC Health + Hospitals has a 900,000,000 deficit, what will happen to the delivery of health care to the community? The reality that services and programs provided by the facility are being threatened has become a near reality.

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

- Community Board(s) meetings Other Public Meetings
- Needs Assessments Surveys Community Health Profile Data
- Reports from Community Organizations Other Activities (please list)
Legislative Summit

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

- yes no

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

The Community Advisory Board works together with the administration making sure that ongoing advocacy, visiting local Elected Officials and Community Based Organization’s continues.

II. FACILITY'S PRIORITIES

1. What are the facility's strategic priorities?

To continue providing the best possible health care to our community by making improvements such as improving patient flow and decreasing the total amount of time it takes for a patient to be discharged from the clinic.

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

On a monthly basis the Administration gives the Community Advisory Board status reports giving the Community Advisory Board members an opportunity to give feedback and suggestions at these monthly meetings. These reports are: Administration reports mentions all new initiatives and programs, Medical Director's Report and Financial Report.

3. Have CAB members been informed of and provided input into the facility's plans for new programs and modernization projects, prior to their implementation?

yes

no

III. PATIENTS'/RESIDENTS' EXPERIENCES

1. Patient safety and patient satisfaction are a priority of the facility. Are reports on these subjects provided on a regular basis to the Community Advisory Board?

Yes

No

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

Waiting time to be seen by a doctor is still an issue but progress has been made by the Administration.

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

Major improvements have been made to the facility's appearance. Facility feels more inviting. Improvements in customer service.

4. (For hospitals and D&TCs only). Are periodic reports or updates on the facility's access indicators such as appointment availability and cycle times/wait time(s) provided by facility leadership at CAB meetings?

Yes No

5. From the CAB's perspective, rate the facility in the following areas:

	Poor	Satisfactory	Very good
Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

6. Is signage about HHC's Options Program posted in areas that have high traffic?

Yes No

IV. CAB ORGANIZATION, STRUCTURE AND RESPONSIBILITIES

1. According to the CAB's By-laws, what is the CAB's total allowable membership? 15
2. What are current numbers of members? 7 What are current numbers of vacancies? 6
3. What were the membership recruitment activities conducted by CAB this year?

An ongoing recruitment continues to ensure full membership. Members are helping to recruit from Planning Boards, Community Based Organizations, local Churches and Schools. Public Affairs is

helping us as well. Since the last CRC meeting we have lost three members, it has been hard to find committed individuals.

4. Do the CAB's recruitment efforts include outreach to new population groups in the community?

Yes

No

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

We have an active Intergovernmental committee in charge of putting together Annual Legislative Event along with Lincoln Hospital and Belvis D&TC.

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

Yes

No

a. If yes, please describe actions taken.

Mr. Robinson, representative from Planning Board 4, and other members bring information to the Planning Boards and committees they are a member of.

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

Yes

No

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

yes

no

9. Did the CAB host or participate with the facility's leadership in a legislative forum this year?

yes

no

The Bronx CABs (Lincoln, Morrisania and Belvis) hosted our Twelfth Annual Legislative Summit on Friday, March 11, 2016. Event was very well attended. Senator Ruben Diaz Sr., Senator Gustavo Rivera, Assemblywoman Carmen Arroyo, Assemblyman Marcos Crespo, Councilwoman Vanesa Gibson and Councilman Rafael Salamanca attended the Event.

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

yes no

a. If so, were the issues subsequently addressed?

No Issues were reported.

11. Describe the CAB's involvement in its facility's outreach activities?

CAB members participate in outreach activities sponsored by the Clinic as well as outside entities.
(Health Fairs, Advocacy in the city when necessary, Planning Board's, etc.)

12. Does your CAB's Chairperson or alternate designee attend the Council of Community Advisory Boards meetings?

yes no

13. Did your CAB participate in last year's Council of CABs Annual Conference?

yes no

14. How would you describe the current level of technical and strategic assistance provided to the CAB by the Office of Intergovernmental Relations?

not enough just right

If not enough, what assistance would you need?

V. ADDITIONAL TOPICS FOR DISCUSSION (OPTIONAL)

Are there additional topics that the CAB would like to discuss with the Board of Directors' Community Relations Committee? Please list the topics.

1. None.
- 2.
- 3.
- 4.
- 5.


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

Signatures:

CAB

Chairperson:

Date:

George T. Robinson 

4/22/16

Executive
Director:

[Signature]

Date:

4/22/2016



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

**BELVIS
GOTHAM HEALTH CENTER
Tuesday, May 3, 2016**

I. COMMUNITY NEEDS

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

The most significant concerns that the community at large has is now that NYC Health + Hospitals has a 900,000,000 deficit, what will happen to the delivery of health care to the community?

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

- Community Board(s) meetings Other Public Meetings
 Needs Assessments Surveys Community Health Profile Data
 Reports from Community Organizations Other Activities (please list)
Legislative Summit

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

- yes no

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

The Community Advisory Board works together with the administration making sure that ongoing advocacy, visiting local Elected Officials and Community Based Organization's continues.

II. FACILITY'S PRIORITIES

1. What are the facility's strategic priorities?

To continue providing the best possible health care to our community. Improving patient flow and decreasing the total amount of time it takes for a patient to be discharged from the clinic.

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

The Administration gives us the opportunity to give feed-back and make suggestions on the reports presented.
(Administrative Report, Financial Report and the Medical Director's Report.)

3. Have CAB members been informed of and provided input into the facility's plans for new programs and modernization projects, prior to their implementation?

yes

no

III. PATIENTS'/RESIDENTS' EXPERIENCES

1. Patient safety and patient satisfaction are a priority of the facility. Are reports on these subjects provided on a regular basis to the Community Advisory Board?

Yes

No

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

Waiting time to be seen by a doctor is still an issue but progress has been made by the Administration and work is still be done to improve the issue at large.

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

- Good Doctor and Patient Relationships.
- Residents are happy that the Clinic is in the community.
- Staff attitude has improved overall.

4. (For hospitals and D&TCs only). Are periodic reports or updates on the facility's access indicators such as appointment availability and cycle times/wait time(s) provided by facility leadership at CAB meetings?

Yes No

5. From the CAB's perspective, rate the facility in the following areas:

	Poor	Satisfactory	Very good
Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

6. Is signage about HHC's Options Program posted in areas that have high traffic?

Yes No

IV. CAB ORGANIZATION, STRUCTURE AND RESPONSIBILITIES

1. According to the CAB's By-laws, what is the CAB's total allowable membership? 15
2. What are current numbers of members? 7 What are current numbers of vacancies? 8
3. What were the membership recruitment activities conducted by CAB this year?

The members continue working on an aggressive recruitment program reaching out to all Directors from Community Based Organizations, Community Committees, Churches and Tenant Associations. An ongoing recruitment continues to ensure we move in the right

direction which is to a full membership. Public Affairs is helping us as well.

4. Do the CAB's recruitment efforts include outreach to new population groups in the community?

Yes No

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

We have an active Intergovernmental committee in charge of putting together Annual Legislative Event along with Lincoln Hospital and Morrisania.

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

Yes No

a. If yes, please describe actions taken.

Members representing the Planning Boards and the 40th Precinct Council forward information received at the Community Advisory Board Full Board meetings at their other committee meetings. (Administrative Report, Financial Report and the Medical Director's Report.)

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

Yes No

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

yes no

9. Did the CAB host or participate with the facility's leadership in a legislative forum this year?

yes no

The Bronx CABs (Lincoln, Morrisania and Belvis) hosted our Twelfth Annual Legislative Summit on Friday, March 11, 2016. Event was very well attended. Senator Ruben Diaz Sr., Senator Gustavo Rivera, Assemblywoman Carmen Arroyo, Assemblyman Marcos Crespo, Councilwoman Vanesa Gibson and Councilman Rafael Salamanca attended the Event.

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

yes no

a. If so, were the issues subsequently addressed?

No Issues were reported.

11. Describe the CAB's involvement in its facility's outreach activities?

CAB members speak on behalf of the Facility at: Planning Boards, Health Fairs, and Events throughout the community and hosted by the facility, and at Public Hearings.

12. Does your CAB's Chairperson or alternate designee attend the Council of Community Advisory Boards meetings?

yes no

13. Did your CAB participate in last year's Council of CABs Annual Conference?

yes no

14. How would you describe the current level of technical and strategic assistance provided to the CAB by the Office of Intergovernmental Relations?

not enough just right

If not enough, what assistance would you need?

V. ADDITIONAL TOPICS FOR DISCUSSION (OPTIONAL)

Are there additional topics that the CAB would like to discuss with the Board of Directors' Community Relations Committee? Please list the topics.

1. None.
- 2.
- 3.
- 4.
- 5.

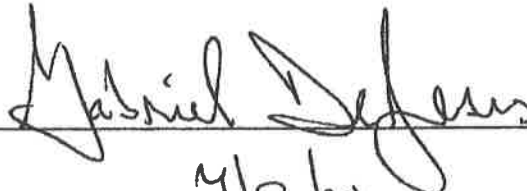
NOTE: The comments in this report represent the consensus of the entire membership and have been shared with the facility administration.

Signatures:

CAB


Chairperson:

Date:


4/2/16

Executive
Director:

Date:


4/2/16