

WESTCHESTER COUNTY HEALTH CARE CORPORATION

BOARD OF DIRECTORS MEETING

June 7, 2023

6:30 P.M.

EXECUTIVE BOARD ROOM

VOTING MEMBERS PRESENT: William Frishman, M.D., Renee Garrick, M.D., Herman Geist, Susan Gevertz, Mitchell Hochberg, Patrick McCoy, Tracey Mitchell, Alfredo Quintero, Zubeen Shroff, Mark Tulis, Judith Watson, Richard Wishnie

VOTONG MEMBERS EXCUSED: John Heimerdinger

NON-VOTING MEMBERS PRESENT: John Flannery, Michael Israel, Michael Rosenblut

NON-VOTING MEMBERS EXCUSED: Martin Rogowsky

**STAFF PRESENT: Julie Switzer, EVP and Chief Legal Officer
Gary Brudnicki, Senior Executive Vice President
Marc Chasin, M.D., CHIO
Anthony Costello, EVP, COO
Mark Fersko, Revenue and Finance Advisor – via WebEx
Michael Gewitz, M.D., Executive Director, MFCH
Josh Ratner, EVP, Chief Strategy Officer
Phyllis Yezzo, EVP, CNO
Inder Sandhu-Gay, SVP, Network Strategy and Development
Ann Marie Soares, Executive Secretary**

CALL TO ORDER

The June 7, 2023, meeting of the Westchester County Health Care Corporation ("WCHCC") Board of Directors was called to order at 6:30 p.m., by Mr. Shroff, Chair. A quorum was present.

VOTING MEMBERS PRESENT

William Frishman, M.D.	Tracey Mitchell
Renee Garrick, M.D.	Alfredo Quintero
Herman Geist	Zubeen Shroff
Susan Gevertz	Mark Tulis
Mitchell Hochberg	Judith Watson
Patrick McCoy	Richard Wishnie

VOTING MEMBERS EXCUSED

John Heimerdinger

NON-VOTING MEMBERS PRESENT

John Flannery
Michael Israel
Michael Rosenblut

NON-VOTING MEMBERS EXCUSED

Martin Rogowsky

EXECUTIVE SESSION

The Board moved into Executive Session for the purpose of discussing personnel, strategic planning and quality matters.

MR. SHROFF ASKED FOR A MOTION TO MOVE OUT OF EXECUTIVE SESSION. MR. QUINTERO MOTIONED, SECONDED BY MR. WISHNIE. THE MOTION CARRIED UNANIMOUSLY.

REPORT OF THE CHAIR/ADDITIONS TO THE AGENDA

MR. SHROFF ASKED FOR A MOTION TO APPROVE THE MINUTES FROM THE MAY 3, 2023, MEETING OF THE BOARD. A MOTION WAS MADE BY DR. FRISHMAN, AND SECONDED BY MS. MITCHELL, TO APPROVE THE MAY 3, 2023, WESTCHESTER COUNTY HEALTH CARE CORPORATION BOARD OF DIRECTORS MEETING MINUTES. THE MOTION WAS APPROVED UNANIMOUSLY.

REPORT OF THE PRESIDENT OF THE MEDICAL STAFF

Dr. Garrick provided the report of the President of the Medical Staff. She presented a credentialing packet (dated June 6, 2023 and attached to these minutes), containing information on Credentialing Appointments, Reappointments, Additional Privileges, FPPEs, and updates to the Psychiatry and Rehabilitation Medicine DOPs.

Motion to Approve Recommendations for Appointments, Reappointments, Additional Privileges, FPPEs, and updates to the Psychiatry and Rehabilitation Medicine DOPs.

MR. SHROFF ASKED FOR A MOTION TO APPROVE THE RECOMMENDATIONS FOR APPOINTMENTS, REAPPOINTMENTS, ADDITIONAL PRIVILEGES, FPPEs, AND UPDATES TO THE PSYCHIATRY AND REHABILITATION MEDICINE DOPs. DR. FRISHMAN MOTIONED, SECONDED BY MS. WATSON. THE MOTION CARRIED UNANIMOUSLY.

REPORT OF THE PRESIDENT

Mr. Ratner informed the Board that Board members Michael Rosenblut and Judith Watson were selected as Notable 2023 Leaders in Health Care by Crain's New York.

Mr. Ratner advised the Board of the New York State ("NYS") Priority Budget outcomes.

Mr. Ratner informed the Board of the following topics that were discussed at the NYS Post Budget Advocacy meeting that was held on May 16, 2023:

- Enacted Budget Impacts;
- Opposition to Wrongful Death Legislation;
- WMCHHealth Updates;
- Statewide Health Care Facility Transformation Program;
- Public Benefit Corporation Support; and
- Center for Women's Health Equity Funding - \$750,000 budget appropriation from NYS Assembly Chair Amy Paulin.

Mr. Ratner provided the following Marketing and Communications updates to the Board:

- National Nurse Week Recognition; and
- Western Region campaigns launching this month.

Mr. Costello provided the following Clinical Operations Updates for the Valhalla Campus:

- Successful DNV Comprehensive Stroke Center Reaccreditation Certification Survey;
- ED Trauma Bay #1 Renovation Project completed;
- Third and final ED Trauma Bay Renovation Project initiated;
- Milk Prep Room Renovation Project completed;
- Urolab Construction Project nearing completion; and
- Finalized design for ACP ORs 9 and 10.

Mr. Costello updated the Board on physician recruitment for the Valhalla Campus:

- Dr. Abby Richards (APS – OBGYN);
- Dr. Rajan Dewar (APS – Pathology);
- Dr. Anish Thomas (APS – Medicine); and
- Dr. Stuart Greenstein (APS – Transplant)

Mr. Costello reviewed the May, 2023, volumes for the Valhalla campus compared to the May, 2022, volumes. He stated that for May, 2023, volume was higher than May, 2022.

Mr. Costello provided a construction update on various projects.

Mr. Costello provided the following Clinical Operations Updates for MHRH:

- Center for Wound Healing and Hyperbaric Medicine reaccruited by Undersea Hyperbaric Medical Society;
- Familyfirst launched for the OR;
- New chemistry/immunoassay analyzer validation process underway for Clinical Lab;
- Atrium 1st Floor Renovation Project completed;
- MAP Suite 302 Renovation Project in progress; and
- MRI Relocation Feasibility Study completed; design underway.

Mr. Costello reviewed the May, 2023, volumes for MHRH compared to the May, 2022, volumes. He stated that for May, 2023, volume was higher than May, 2022.

Dr. Gewitz reviewed the Quarterly Transfer Volume for the Board, and noted that volume is at an all-time high. He stated that year to date 2023, WMC has received 12,767 transfers. Dr. Gewitz reviewed the transfers by origin, and in vs. out of network by service.

Dr. Gewitz discussed the length of stay for the CCU and CTICU.

Dr. Gewitz informed the Board of the first CAR-T patient at the Maria Fareri Children's Hospital ("MFCH"). He stated that Dr. Cairo was awarded the Department of Defense Grant:

- \$4 million Research Award; and
- MFCH/NYMC PI's, CHOP and UCSF co-investigators for new Rx for Childhood Leukemia and Lymphoma.

Dr. Garrick provided the following Medical Leadership and Quality update for the Board:

- NYMC Medical School Graduates honor WMCHHealth faculty;
- WMCHHealth Adult Level I Trauma volume;
- Recent and upcoming major trauma symposiums; and
- Update on Mpox.

REPORT OF THE COMMITTEES

FINANCE COMMITTEE

Mr. Tulis, Chair, Finance Committee, stated that the Committee met this afternoon prior to the Board meeting, and reviewed the financial statements for the period ended April 30, 2023.

QUALITY COMMITTEE

Ms. Gevertz, Chair, Quality Committee, reported that the Committee met on May 5, 2023.

Ms. Gevertz stated that Dr. Garrick summarized the following departmental presentations from the March 23, 2023, meeting of the Quality and Safety Council:

- Hyperbaric Medicine – The 2022 Hyperbaric Dashboard was presented for Valhalla and MHRH campuses, as well as their Inter-Campus Performance Improvement for Hyperbaric and Wound Care. Program accomplishments and challenges were also presented.
- Emergency Department – Key performance indicators for Sepsis, as well as the action plan were shared. Quality of Care Concern IPRO, analysis and action plan were presented. MHRH left Without Being Seen

Rate was discussed, as well as the action plan. Regulatory: ED Psych Evaluation/Documentation analysis and action plan was presented, as well as process improvements.

- Infection Prevention and Control – Hospital Associated Infection Measures were presented. The following data was presented: Central Line Associated Bloodstream Infection (CLABSI), Catheter Associated Urinary Tract Infections (CAUTI), Colon and Abdominal Hysterectomy SSI, Clostridium Difficile Infection, MRSA Bloodstream Infection. Disparities in Hospital Associated Infections were discussed, in addition to CAUTI and CLABSI rates by race. A regulatory report was provided to the Committee.
- Information Systems – Key performance indicators were presented, as well as analysis, action plan, and successes. A regulatory report was provided.

QA/PI reports were submitted by Pain Management, Radiology, Health Information Management, and Behavioral Health.

Ms. Gevertz advised the Board that the Committee received a presentation on the Anesthesia Department by Dr. Panzica. He highlighted the following:

- Pre-procedure testing – same day cancelation rate is better than the National Benchmark of <5%;
- OR Block System and Governance;
- OR Efficiency;
- Pre-op and Post-op Documentation;
- Endoscopy % First Case On-Time Starts;
- Accomplishments:
 - Increase in resident complement from 10 to 13 per year;
 - Increase in cardiac anesthesia fellowships from 2 to 3;
 - New Chronic Pain fellowship;
 - Partnering with Physiatry (PM&R) to build a multidisciplinary Interventional Pain Program;
 - About to launch with Psychiatry Inpatient Electroconvulsive Therapy (ECT) Program; and
 - Accreta program is running successfully.
- Diversity and Inclusion – ASA Mentoring Grant Program
 - Mission; and
 - 2022 Recipients
- Diversity, Equity and Inclusion Committee consists of staff members, trainees and CRNAs;
- Partnership with Dr. Forman to highlight the specialty to Ossining High School students; and
- Analyze data to look for disparities.

Ms. Gevertz informed the Board that the Committee received a presentation on the Department of Surgery by Dr. Prabhakaran and Dr. Kirsch. They presented the following:

- CMS Patient Safety Indicators Rate per 1000 Medicare ACA for 2019 through the first quarter of 2023;
- Interventions:
 - Review of all PSIs to evaluate for appropriate diagnosis, inclusion, and exclusion criteria:
 - Hemorrhage and hematoma decreased by excluding bleeds secondary to blood thinners
 - Colon infections:
 - Importance of establishing infection not contamination at time of surgery;
 - PATOS (present at time of surgery) are excluded
 - Next step is increasing the denominator by improving process for documentation of cases in the OR

- Transformation of the combined SICU, TICU, CTICU and 6N for infection rates for 2022 compared to 2023 year to date.

Dr. Kirsch advised the Committee that the Department of Surgery is in the process of enhancing current Dashboards to ensure actionable data.

Dr. Prabhakaran reviewed the National Healthcare Safety Network (NHSN) stats for the period 2015-2022. He also discussed rates for readmissions and mortality.

Key Performance Indicators were presented for PE and DVT, and noted that there is an opportunity for ongoing improvement.

Department of Surgery - Diversity, Equity and Inclusion (DEI):

- Section of DEI: Chief – Heena Rajdeo;
- Quarterly: Grand Rounds Lecture;
- Quarterly: Newsletter;

Equity based initiatives in the Department of Surgery:

- Transplant Surgery – Impact of race and ethnicity on evaluation/listing for kidney transplants; and
- Trauma Surgery – impact of race and ethnicity on injury patterns/severity, and patient outcomes.

Ms. Gevertz informed the Board that Ms. McFarlane provided a regulatory report for the Committee.

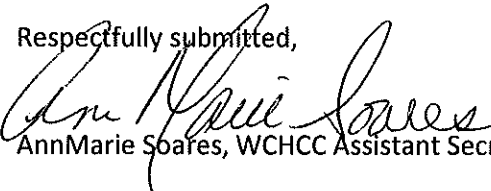
NEW BUSINESS

MR. SHROFF ASKED FOR A MOTION TO APPOINT STEVEN LANSMAN, M.D., AS A TRUSTEE TO THE WESTCHESTER MEDICAL CENTER FOUNDATION BOARD FOR A THREE YEAR TERM. MR TULIS MOTIONED, SECONDED BY MS MITCHELL. THE MOTION CARRIED UNANIMOUSLY.

ADJOURNMENT

MR. SHROFF ASKED FOR A MOTION TO ADJOURN THE JUNE 7, 2023, MEETING OF THE WESTCHESTER COUNTY HEALTH CARE CORPORATION BOARD OF DIRECTORS. MR. HOCHBERG MOTIONED, SECONDED BY MR. GEIST. THE MOTION CARRIED UNANIMOUSLY.

Respectfully submitted,


AnnMarie Soares, WCHCC Assistant Secretary