

WESTCHESTER COUNTY HEALTH CARE CORPORATION

BOARD OF DIRECTORS MEETING

December 1, 2021

6:00 P.M.

EXECUTIVE BOARD ROOM

VOTING MEMBERS PRESENT: Orlando Adamson, M.D., William Frishman, M.D., Renee Garrick, M.D., Herman Geist, Susan Gevertz – via Webex, John Heimerdinger, Mitchell Hochberg, Patrick McCoy, Tracey Mitchell, Alfredo Quintero, Zubeen Shroff, Mark Tulis, Richard Wishnie

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

STAFF PRESENT: Julie Switzer, EVP, Chief Legal Officer
Gary Brudnicki, Senior Executive Vice President
Kara Bennorth, EVP
Valerie Campbell – VP, Chief Compliance Officer
Marc Chasin, M.D., CHIO
Anthony Costello, EVP, Chief Operating Officer
Michael Doyle, M.D., Executive Director and CMO, HealthAlliance
Mark Fersko, Revenue and Finance Advisor
Michael Gewitz, M.D., Executive Director, MFCH
Mary Leahy, M.D., CEO, Bon Secours Charity Health System
Josh Ratner, EVP, Chief Strategy Officer
Phyllis Yezzo – CNO
Daniel Zelazny, M.D. – President of the Medical Staff

CALL TO ORDER

The December 1, 2021, meeting of the Westchester County Health Care Corporation ("WCHCC") Board of Directors was called to order at 6:00 p.m., by Mr. Hochberg, Chair. A quorum was present.

VOTING MEMBERS PRESENT

Orlando Adamson, M.D.	Mitchell Hochberg
William Frishman, M.D.	Patrick McCoy
Renee Garrick, M.D.	Tracey Mitchell
Herman Geist	Alfredo Quintero
Susan Gevertz – via Webex	Zubeen Shroff
John Heimerdinger	Mark Tulis
	Richard Wishnie

NON-VOTING MEMBERS PRESENT

Michael Israel
John Flannery
Martin Rogowsky
Michael Rosenblut

EXECUTIVE SESSION

The Board moved into Executive Session for the purpose of discussing strategic planning matters.

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

REPORT OF THE CHAIR/ADDITIONS TO THE AGENDA

MR. HOCHBERG ASKED FOR A MOTION TO APPROVE THE MINUTES FROM THE NOVEMBER 3, 2021, MEETING OF THE BOARD. A MOTION WAS MADE BY MR. QUINTERO, SECONDED BY DR. ADAMSON, TO APPROVE THE NOVEMBER 3, 2021, WESTCHESTER COUNTY HEALTH CARE CORPORATION BOARD OF DIRECTORS MEETING MINUTES. THE MOTION WAS APPROVED UNANIMOUSLY.

REPORT OF THE PRESIDENT OF THE MEDICAL STAFF

Dr. Zelazny provided the report of the President of the Medical Staff. He presented a credentialing packet (dated December 1, 2021, and attached to these minutes) containing information on Credentialing Appointments, Reappointments, FPPEs, Additional Privileges, and updates to two Delineation of Privilege forms.

Motion to Approve Recommendations for Appointments, Reappointments, FPPEs, Additional Privileges, and Updates to two Delineation of Privilege Forms.

MR. HOCHBERG ASKED FOR A MOTION TO APPROVE THE RECOMMENDATIONS FOR APPOINTMENTS, REAPPOINTMENTS, FPPEs, ADDITIONAL PRIVILEGES, AND UPDATES TO TWO DELINEATION OF PRIVILEGE FORMS. MS. GEVERTZ MOTIONED, SECONDED BY DR. ADAMSON. THE MOTION CARRIED UNANIMOUSLY.

REPORT OF THE PRESIDENT

Mr. Ratner presented the following 2022 Board Strategic Priorities based on the recent Board Retreat:

- Enhance awareness of WMC's investments in physicians, services, facilities and technology;
- Continue investments that improve patient and visitor experience; and
- Advance clinical capabilities across the Network.

Mr. Ratner provided a Government Relations update to the Board. He stated that conversations continue with Governor Hochul's office, DOH, and OMH regarding the Northern Region's Behavioral Health Plan and HealthAlliance's ("HA") inpatient beds. He stated that the Network participated in the Governor's launch of the "Vaccine, Educate, Graduate" Vaccine Incentive Program for children 5 to 11 years olds at MVNHC. Mr. Ratner advised that WMC had a briefing with the Westchester County Executive, George Latimer, and the Legislative Chairman, Mr. Boykin. He stated that there was also a briefing with Assemblyman Tom Abinanti.

Mr. Ratner informed the Board of current media campaigns for awareness and reputation building.

Ms. Bennorth reviewed the October 2021 Development Dashboard for the Board. She stated that for the month of October, \$367,766 was received, bringing the total year to date October to \$4.3 million.

Ms. Bennorth compared the revenue activity summary for year to date October 31, 2020 to October 30, 2021.

Ms. Bennorth advised the Board of major gifts, ongoing hospital campaigns, and corporate sponsorships.

Ms. Bennorth informed the Board that the WHUD Radiothon raised \$225,000 and counting.

Ms. Bennorth reminded the Board of the virtual toy drives benefiting the Maria Fareri Children's Hospital ("MFCH") and Maria Fareri Children's Hospital Healthcare Services at MHRH.

Mr. Costello updated the Board on several in-house construction projects, such as the Main Tower basement and the Main Tower/ACP Corridor, 4 North, and Taylor Pavilion Medicine Offices.

Mr. Costello informed the Board that the in-house construction crew is in the process of building physician on-call rooms in the hallway of the Behavioral Health Center.

Mr. Costello presented a few slides on HA's single campus construction project at Mary's Avenue.

Mr. Costello informed the Board of the following clinical updates at MHRH:

- 3 Spellman Pediatric Unit – ongoing construction of five additional beds;
- Diagnostic Cardiac Cath Lab – go live projected Q4 2021; and
- Pediatric ED expansion – design in process.

Dr. Doyle, Executive Director of HealthAlliance, informed the Board of the following:

Clinical updates:

- Cath Lab fully operational:
 - 39 cases in October; and
 - 207 cases to date.
- Women's Health new clinicians:
 - Cara Grimes, M.D.;
 - Dominique Pape, M.D.; and

- Matthew Popiel, M.D.
- Behavioral Health:
 - 60% of Psychiatry patients are treated and released, and of those admitted, 91% of them are within the WMCHealth Network;
 - 73% of Substance Abuse patients are treated and released, and 43% of admitted are at Broadway; and
 - Medication Assisted Treatment (MAT) at Margaretville.
- COVID-19
 - Volume increasing; county rate increasing;
 - Test site averaging 40 tests daily, open M-F; and
 - Vaccination services ongoing.
- Surveys and Accreditation:
 - DNV survey prep; and
 - MRCC DOH survey.
- Staffing:
 - 31 new hires in December;
 - 34 new hires in November; and
 - 16 new hires currently pending for January.
- Community Engagement:
 - Ulster County Regional Chamber of Commerce;
 - HA sponsored breakfast;
 - Masks and vaccination card holders; and
 - Donation to Soldier On, Inc./Patriot House in honor of Veteran's Day

Dr. Leahy advised the Board that to date, Charity has had 2,058 discharges related to COVID, and has administered over 150,000 vaccines. She stated that today there are 7 COVID inpatients at GSH, none at St. Anthony's Community Hospital ("SACH") and 7 at Bon Secours Community Hospital ("BSCH"). Dr. Leahy advised that most of the COVID patients are unvaccinated; however, more breakthrough cases are occurring. She stated that Governor Hochul issued a state of emergency on November 29, 2021, in response to the new omicron variant. Dr. Leahy advised that the goal of the state of emergency is to boost hospital capacity and solve staffing shortages ahead of an expected spike in COVID-19 cases. She stated that the Department of Health can limit non-urgent procedures in hospitals with limited capacity, defined as less than 10% staffed bed capacity.

Dr. Leahy informed the Board that there was a recent, complimentary article in the Journal news on Nursing during the pandemic, which featured two nurses from GSH. Dr. Leahy advised that there was another article featuring Dr. Richard Evans, VP of Surgical Services at Charity, who is inspiring students at three local high schools with a hands-on approach to the medical field in his mini-medical school program. In addition, a local radio station WRCR, held a lung cancer awareness program which featured an employee of the medical group.

Dr. Leahy advised the Board that The American Hospital Association presented SACH with an award for its 75-year membership in this national organization. She stated that GSH received the 2021 New York Community College Trustee award for its business partnership work with Rockland Community College.

Dr. Leahy informed the Board that GSH's Environmental Services Department received the 2021 Rockland Healthcare Platinum Plus Award for its outstanding quality in patient experience for the second year in a row.

Dr. Leahy advised the Board that Charity continues its community engagement efforts, and recently met with Dr. Nadler, Dean of the New York Medical College, and agreed to increase the number of medical students rotating to GSH.

Dr. Leahy informed the Board that Dr. Fischer, Medical Director of the Diabetic Foot Care Program at SACH, presented recently at the Warwick library.

Dr. Leahy stated that GSH held its Menorah lighting last night, and it was well attended by the community. She advised that each hospital will hold its tree lighting ceremony next week.

Dr. Leahy advised that the Bon Secours Child Development Fund, which was created by the sale of the Schervier properties in 2014, had housing funds that were held in escrow since the 2014 sale. She stated that the Attorney General has allocated \$1.4 million of those funds to be used to develop low income housing in Kingston, NY. Dr. Leahy advised that there will be a flag on the housing site to honor Bon Secours for its contribution.

Dr. Leahy informed the Board that Charity's Cerner implementation work continues.

Dr. Leahy provided a Charity facility update for the Board.

Dr. Gewitz presented the MFCH year over year discharges for 2019 through 2021. He stated that there has been a surge in pediatric discharges over the past three months.

Dr. Gewitz updated the Board on the Clinical Research Center.

Dr. Gewitz updated the Board on the Children's COVID-19 vaccination program.

Dr. Gewitz informed the Board that WMC is working on developing a faculty Wellness Program in cooperation with Human Resources in 2022.

Dr. Garrick provided the following CMO update:

New Section Chiefs:

- Anesthesia:
 - Sangeeta Kumaraswami, M.D., Obstetric Anesthesia; and
 - Toni Manougian, M.D., Critical Care Anesthesia
- Medicine:
 - Daniel Cho, M.D., Hematology and Oncology
- Neurology:
 - Ji Chong, M.D., Cerebrovascular Diseases
- Neurosurgery:
 - Vishad Sukul, M.D., Functional and Epilepsy Surgery
- Obstetrics and Gynecology:
 - Timothy Ryntz, M.D., Minimally Invasive Gyn Surgery and Complex;
 - Angela Silber, MD, Maternal Fetal Medicine
- Ophthalmology:
 - Michael Jansen, M.D., Retina and Vitreous
- Pathology:
 - Sadiqa Karim, M.D., Blood Transfusion; and
 - Neeru Chopra, M.D., Clinical Pathology
- Radiology:
 - Milana Flusberg, M.D., Body Imaging and General Diagnostics

- Surgery:
 - Edward Ritter, M.D., Reconstructive and Plastic Surgery; and
 - Gregory Veillette, M.D., Surgical Oncology
- Urology:
 - Sin Drangsholt, M.D., NeuroUrology and Voiding Dysfunction; and
 - Paul Zeilkovic, M.D., Pediatric Urology

New Directors:

- Neurology – Tracey Milligan; and
- Radiation Oncology – Mark Hurwitz

Dr. Garrick discussed the NRMP Main Residency Match results from 2013 through 2021.

Dr. Garrick advised the Board of the following new GME fellowship programs: Neurological Critical Care, Vascular Surgery, and Renal Critical Care.

Dr. Garrick provided a COVID-19 update to the Board, as well as the current trends.

REPORT OF THE COMMITTEES

FINANCE COMMITTEE

Mr. Tulis, Chair, Finance Committee, informed the Board that the Finance Committee met prior to the Board meeting. He stated that the Committee approved the minutes from the November 3, 2021 meeting.

QUALITY COMMITTEE

Ms. Gevertz informed the Board that she would be reporting on the Quality Committee meetings of October 8, 2021, and November 5, 2021.

October 8, 2021, Meeting:

Ms. Gevertz informed the Board that Dr. Garrick presented the report of the Quality and Safety Council meeting of July 8, 2021. Dr. Garrick advised that the following departments presented: Emergency Medicine Valhalla and MHRH; MFCH Quality Council, Oncology Quality Council and Social Services. She stated that QA/PI reports were submitted by the AIDS Care Center, Anesthesia, the Nursing Quality Council, Pharmacy, Risk Management and the Transfer Center.

Ms. Gevertz advised the Board that the Committee received a presentation on Pharmacy Quality, which was presented by Ms. Simmons, AVP of Pharmacy Services. She highlighted the following:

- Operational Accomplishments – the number of COVID vaccines administered, renovation of the Valhalla main pharmacy sterile compounding site, hiring of an Assistant Director of Pharmacy, hiring of a dedicated Infusion Center Pharmacist at MHRH, and video surveillance installed in all medication rooms and Pyxis locations at MHRH;
- Clinical Accomplishments – expansion of the clinical pharmacy specialist team, participation in Medicine and interdisciplinary rounds, and the addition of structured clinical activities;
- Goals and Initiatives – implementation of TraySafe for crash carts, Medication Waste Reduction Project, pharmacy and Therapeutics goals, include optimizing the use of biosimilars, and MHRH goals;
- myCare Pharmacy Update – accomplishments and continuous improvement projects and activities.

Ms. Gevertz informed the Board that the Committee also received a presentation on the Behavioral Health Quality Council from Dr. Ferrando. He highlighted the following:

- COVID-19 Quality and Safety related actions – designation of quarantine units and related challenges, staff education, surveillance of compliance with safe patient care requirements, mental health hotline support for patients, staff and the community, and the high utilization of telepsychiatry to MHRH and HA;
- Inpatient Mental Health Units – safety events and restraint data;
- Inpatient Substance Use Disorder Program – accomplishments and challenges;
- Medically Managed Withdrawal and Stabilization Services – activities implemented as part of a PI project with the goal of reducing ED wait time for detox patients;
- Ambulatory Behavioral Health Services – all five OMH services have received three year operating certificates and Turning Point had a successful OASAS survey; and
- Assertive Community Treatment – length of stay is an opportunity for improvement and project goal.

Ms. Gevertz stated that Ms. McFarlane provided a regulatory report to the Board. She also stated that Dr. Garrick discussed recent surveys.

November 5, 2021 Meeting:

Ms. Gevertz informed the Board that Dr. Garrick presented the report of the Quality and Safety Council meeting of September 9, 2021. Dr. Garrick advised that the following departments presented: the Behavioral Health Quality Council, Dental Medicine and Occupational Health. She stated that QA/PI reports were submitted by Food and Nutrition, Infection Prevention and Radiology.

Ms. Gevertz informed the Board that the Committee received a presentation on the Antimicrobial Stewardship Council by Dr. Dhand. He highlighted the following:

- Accomplishments;
- Types of interventions;
- Antimicrobial Utilization Tracking and comparison to other institutions;
- Challenges;
- Future improvement goals; and
- Recent publications.

Ms. Gevertz advised the Board that the Committee also received a presentation from the Department of Medicine by Drs. Porrovecchio and Goutis. They highlighted the following:

- Accomplishments - Medical Staff Recruitment, the Post COVID-19 Clinic, and geographic distribution of Department of Medicine patients to three units, and interdisciplinary rounds to promote team-based care;
- Current Data – efficiency and average daily census from December 2019 through October 2021, National trends regarding Hospital Acquired Infections, Sepsis quality, and HCAHPS scores; and
- Future plans – Sepsis taskforce creation, improvement efforts, and the creation of a Patient Experience Committee.

Ms. Gevertz stated that Ms. McFarlane provided the regulatory report to the Committee and discussed recent surveys.

NEW BUSINESS

Ms. Switzer presented Resolution #11 to the Board authorizing the Corporation to conduct a required environmental review of the proposed new bed tower (the “Proposed Project”) on its Valhalla Campus, in compliance with the provisions of the New York State Environmental Quality Review Act (“SEQRA”). She stated

that it is customary for the agency principally responsible for carrying out, funding, or approving an action to serve as lead agency for purposes of coordinated review under SEQRA. Ms. Switzer advised that the Corporation desires to issue a Notice of Lead Agency designating the Corporation as lead agency for SEQRA purposes and circulating an Environmental assessment Form ("EAF") to all involved agencies.

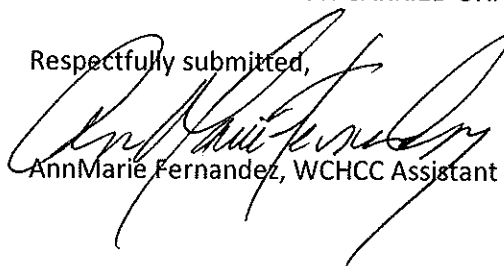
MR. HOCHBERG ASKED FOR A MOTION TO APPROVE RESOLUTION #11, AUTHORIZING THE CORPORATION TO ISSUE A NOTICE OF LEAD AGENCY DESIGNATING THE CORPORATION AS LEAD AGENCY AND TO CIRCULATE THE EAF TO ALL INVOLVED AGENCIES. MR. HEIMERDINGER MOTIONED, SECONDED BY MR. TULIS. THE MOTION CARRIED UNANIMOUSLY.

ADJOURNMENT

Mr. Hochberg congratulated Mr. Shroff as the new WCHCC Board Chair effective January 1, 2022. He thanked Mr. Israel, Mr. Brudnicki and the Board for their support and cooperation over the past six years, and reflected on how proud he was of all that the Corporation has accomplished.

MR. HOCHBERG ASKED FOR A MOTION TO ADJOURN THE DECEMBER 1, 2021, MEETING OF THE WESTCHESTER COUNTY HEALTH CARE CORPORATION BOARD OF DIRECTORS. MR. TULIS MOTIONED, SECONDED BY DR. FRISHMAN. THE MOTION CARRIED UNANIMOUSLY.

Respectfully submitted,



AnnMarie Fernandez, WCHCC Assistant Secretary