

WESTCHESTER COUNTY HEALTH CARE CORPORATION

BOARD OF DIRECTORS MEETING

JANUARY 4, 2023

6:30 P.M.

EXECUTIVE BOARD ROOM

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

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

STAFF PRESENT: Julie Switzer, EVP and Chief Legal Officer
Gary Brudnicki, Senior Executive Vice President
Kara Bennorth, EVP
Marc Chasin, M.D., CHIO, WMCHHealth
Anthony Costello, EVP, COO
Michael Doyle, M.D., Executive Director and CMO, HealthAlliance
Mark Fersko, Revenue and Finance Advisor – via WebEx
Michael Gewitz, M.D., Executive Director, MFCH
Mary Leahy, M.D., CEO, Bon Secours Charity Health System
Josh Ratner, EVP, Chief Strategy Officer
Inder Sandhu-Gay, SVP Strategy and Development
Phyllis Yezzo, CNO, WMCHHealth Network

CALL TO ORDER

The January 4, 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.	Patrick McCoy
Renee Garrick, M.D.	Tracey Mitchell
Herman Geist	Alfredo Quintero
Susan Gevertz	Mark Tulis
John Heimerdinger	Zubeen Shroff
Mitchell Hochberg	Judith Watson
	Richard Wishnie

NON-VOTING MEMBERS PRESENT

John Flannery
Michael Israel
Martin Rogowsky
Michael Rosenblut

EXECUTIVE SESSION

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

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

REPORT OF THE CHAIR/ADDITIONS TO THE AGENDA

MR. SHROFF ASKED FOR A MOTION TO APPROVE THE MINUTES FROM THE DECEMBER 7, 2022, MEETING OF THE BOARD. A MOTION WAS MADE BY MR. QUINTERO, SECONDED BY DR. FRISHMAN, TO APPROVE THE DECEMBER 7, 2022, WESTCHESTER COUNTY HEALTH CARE CORPORATION BOARD OF DIRECTORS MEETING MINUTES. THE MOTION WAS APPROVED UNANIMOUSLY.

REPORT OF THE PRESIDENT OF THE MEDICAL STAFF

Dr. Altman provided the report of the President of the Medical Staff. She presented a credentialing packet (dated January 4, 2023 and attached to these minutes) containing information on Credentialing Appointments, Reappointments, FPPes, and Updates to the Surgery DOP.

Motion to Approve Recommendations for Appointments, Reappointments, FPPes, and Updates to the Surgery DOP.

MR. SHROFF ASKED FOR A MOTION TO APPROVE THE RECOMMENDATIONS FOR APPOINTMENTS, REAPPOINTMENTS, FPPES AND UPDATES TO THE SURGERY DOP. MR. MCCOY MOTIONED, SECONDED BY MS. MITCHELL. THE MOTION CARRIED UNANIMOUSLY.

REPORT OF THE PRESIDENT

Mr. Ratner presented WMCHHealth's 2023 Mission Statement to the Board for its approval. He stated that it remains the same as the 2022 Mission Statement.

Mr. Ratner reviewed the 2022 Mission Statement's Performance Goals and the proposed 2023 Mission Statement's Performance Goals for the Board.

MR. SHROFF ASKED FOR A MOTION TO APPROVE WMCHEALTH'S 2023 MISSION STATEMENT AND THE 2023 MISSION STATEMENT PERFORMANCE GOALS. MR. HOCHBERG MOTIONED, SECONDED BY MR. HEIMERDINGER. THE MOTION CARRIED UNANIMOUSLY.

Mr. Ratner provided a [Research and Grants Administration Update for the year ending 2022 to the Board](#). He stated that for 2022, WMCHHealth received \$20.8 million in grants.

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

- Northern Region Earned Media;
- Western Region Campaigns; and
- HealthAlliance Ribbon Cutting Transfer Day

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

- Pediatric Emergency Department waiting room renovation project completed;
- Nuclear Medicine Camera equipment upgrade and room renovation project completed;
- Radiation Medicine waiting room renovation project Phase 2 completed;
- NICU expansion project Phase 2 opening in January;
- Cath lab 6 construction project opening in January; and
- 5 North Unit renovation project in Main Hospital in progress

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

- Dr. Haythum Tayeb (APS – Neurology);
- Dr. Muhammad Mustafa (APS – Transplant);
- Dr. Jonathan Potack (APS – Gastroenterology); and
- Dr. Pablo Loarte-Campos (APS – Internal Medicine)

Mr. Costello reviewed the December, 2022, volumes for the Valhalla campus compared to the December, 2021, volumes. He stated that for December, 2022, all areas were higher than December, 2021.

Mr. Costello provided a construction update on various projects.

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

- Pediatric 3 Spellman renovation project completed;
- X-Ray Map Building renovation project completed; and
- Recruited and on-boarded new Chief Medical Officer

Mr. Costello reviewed the December, 2022, volumes for MHRH compared to the December, 2021, volumes. He stated that for December, 2022, all areas were higher than December, 2021.

Dr. Gewitz informed the Board of the pediatric discharge volume at the MFCHS at MHRH for 2022. In addition, he reviewed the primary care referral sources.

Dr. Gewitz provided an ED census update to the Board.

Dr. Gewitz provided a COVID inpatient update to the Board.

Dr. Gewitz provided a pediatric case volume by month to the Board, which showed a sustained high inpatient census month over month.

Dr. Gewitz showed images of the MHRH Farming Neighborhood, which will officially open on January 24, 2023.

Dr. Gewitz informed the Board that Pet Therapy has returned to the Maria Fareri Children's Hospital.

Dr. Garrick informed the Board that medical leadership and Quality had over 1500 publications in 2021 and 2022.

Dr. Garrick discussed the Residency Match results for WMC with the Board, and stated that it was very successful with many qualified applicants applying.

Ms. Bennorth provided a quarterly update on Development activities.

Ms. Bennorth reviewed the Development Dashboard for the period November 2022, compared to November 2021. She stated that year to date, WMC raised \$5.8 million, compared to \$4.5 million for the same period last year.

Ms. Bennorth provided a Critical Care Tower Campaign update to the Board. She outlined the following four phases of the campaign:

- Development Team & Systems Preparation;
- Critical Care Project Messaging, Communications Plan & Website (building community ownership);
- Case/Project Scope, Campaign Plan & Campaign Timeline Finalization; and
- Identify Campaign Cabinet/Physician Council Members

Ms. Bennorth updated the Board on the following:

- Powering the RNICU Expansion - \$2.2 million raised;
- Growing Endowments – 4 positions, \$4.6 million raised;
- Expanding Major Gifts;
- Cultivation and Foundation Board Growth;
- Exciting Partnerships – Trucco and CMN;
- Donor Channels/Access;
- Patient Discharge Letters; and
- Planned Giving “Go Live”

REPORT OF THE COMMITTEES

AUDIT AND CORPORATE COMPLIANCE COMMITTEE

Mr. McCoy, Chair, Audit and Corporate Compliance Committee, stated that the Committee met earlier this afternoon, prior to the Finance Committee.

Mr. McCoy informed the Board that Ms. Ariel, who is serving as an advisor to Corporate Compliance, and Mr. Palovick presented and reviewed the Corporate Compliance Risk Assessment Summary Guide and the 2023 Corporate Compliance and Internal Audit Work Plans. He stated that the Committee approved the 2023 Corporate Compliance and Internal Audit Work Plans.

Mr. McCoy advised the Board that Mr. Palovick reported that the following three internal audits are in progress: Transportation Contract Administration, Payroll – MHRH, and the 2022 Senior Management Expenses.

Mr. McCoy stated the Ms. Ariel advised the Committee of the following three compliance audits in progress: DRG 917 and 918 – Poisoning and Toxic Effects of Drugs with and without MCC – Valhalla and MHRH, Outpatient Wound Care – Valhalla and MHRH, and Hospital Discharge Day Services – CPT 99239 – APS.

Mr. McCoy informed the Board that Mr. Palovick discussed the following completed internal audits: Wound Care Contract Administration and WMC Supply Inventory Verification.

Mr. McCoy advised the Board that Ms. Ariel reported on the following completed compliance audits: DRG 291, 292, and 293 Heart Failure and Shock with/without MCC/CC – Valhalla and MHRH, the Out Patient Infusion Center, and Out Patient Turning Point – MHRH.

FINANCE COMMITTEE

Mr. Tulis, Chair, Finance Committee, stated that the Committee met this afternoon prior to the Board meeting. He stated that the Committee reviewed the financial statements for the period ended November 30, 2022.

QUALITY COMMITTEE

Ms. Gevertz, Chair, Quality Committee, reported that the Committee met on December 7, 2022.

Ms. Gevertz stated that Dr. Garrick summarized the following departmental presentations from the October 14, 2022, meeting of the Quality and Safety Council:

- Antimicrobial Stewardship Council– the CDC Playbook was discussed, along with types of interventions and antimicrobial utilization tracking. The Cerner integration project accomplishments as well as future improvement goals were presented.
- Health Information Management – Medical Record Delinquencies, operating report deficiencies, and medical record requests were discussed.
- Operating Room Committee – OR leadership goals were discussed. OR volume and first case on-time starts were presented.
- Pain Management Council – increasing the utilization of PCA, restricting high dose opioids, and increasing the safety of opioid prescribing for inpatients was discussed. Challenges and Opportunities were presented, as well as future directions.
- Oncology Quality Council – Cancer quality improvements for 2021-2022 were discussed. Major recruitments to the Cancer Center were presented along with the frequency/ type of tumor board conferences.

Dr. Garrick stated that QA/PI reports were submitted by the Transplant Quality Council, Social Work/Case Management, Certified Home Health Agency, and ISO Education – Internal Audits.

Ms. Gevertz advised the Board that the Committee received a presentation on the Trauma Quality Council by Dr. Prabhakaran. He provided the following highlights:

- Adult Trauma Level I Re-verification for Valhalla;
- Trauma Volume Admission 2020 thru 2022 (Q1-3), steady increase year over year;
- Adult Trauma Performance Improvement Process was discussed;
- Pulmonary Embolus Trends were reviewed;
- Adult Trauma Services New Successful Quality Initiatives for 2022 were reviewed:

- Pressure injuries; and
- Catheter and Line Associated Bloodstream Infections
- Trauma Outcomes Quarters 1-3 compared to national benchmarks;
- Health Equity – WMCH Health Trauma was discussed, including a recent presentation outlining social and racial disparities among victims of physical abuse. Additional outcomes were reviewed by race and age. A PI project was reviewed, which outlined a plan using social equity data and trauma patients to tailor preventative programs and outreach.

Ms. Gevertz informed the Board that Dr. Tedjarati and Dr. Silber provided a presentation on Women’s Health Equity to the Committee and highlighted the following:

- NYS Maternal Mortality data for 2021:
 - Cardiovascular;
 - Sepsis/Infection;
 - Depression/Overdose; and
 - Hemorrhage
- The Organizational Chart for the Regional Perinatal Center Level IV Care was presented for both maternal and neonatal, as well as Maternal-Fetal Medicine and Obstetrics
- Maternal Fetal Medicine (MFM) and Obstetrics enhanced clinical coverage and safety protocols Labor & Delivery and Postpartum were discussed:
 - MFM coverage of Labor & Delivery daily, including weekends;
 - MFM first call for transfers from other hospitals to Valhalla inpatient service;
 - Regional Perinatal Center – combined efforts of NICU and Obstetrics; and
 - Resident teaching and OB Safety rounds (8am/6pm)
- Increasing Access to High-Risk Obstetrical Care:
 - Expansion of Maternal Fetal Medicine services across the region from one to five sites:
 - APS Bradhurst;
 - APS Suffern;
 - APS Middletown;
 - APS Kingston; and
 - Refuah
- Increasing Educational Activities and Conferences was discussed;
- Maternal Fetal Medicine volume for 2021 vs 2022 was presented;
- Maternal Transport Volume for 2022;
- Obstetrics Quality Initiatives were reviewed:
 - Cesarean Section Rate Reduction Program;
 - Safe Vaginal Birth After Cesarean Program;
 - Hemorrhage Prevention and Treatment;
 - Placenta Accreta Spectrum Center of Excellence;
 - Post-Partum Depression and Substance Abuse – Integration Program with Psychiatry and Addiction Medicine; and
 - Obstetrics Cardiology Integration Program (Cardiology)
- Actual Case – Result of teamwork and collaboration Regional Transfer Center 2022 was presented to the Committee;
- Accomplishments in 2022 were presented.

Ms. Gevertz informed the Board that the Committee reviewed the proposed 2023 Quality Reporting Calendar, and voted to recommend its approval to the Board.

MR. SHROFF ASKED FOR A MOTION TO APPROVE THE 2023 QUALITY REPORTING CALENDAR. MS. GEVERTZ MOTIONED, SECONDED BY MS. WATSON. THE MOTION CARRIED UNANIMOUSLY.

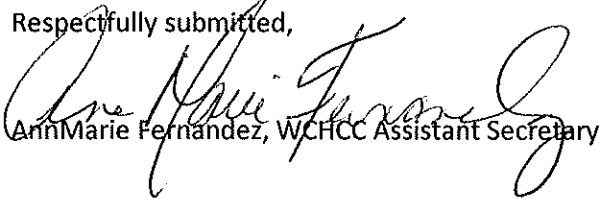
NEW BUSINESS

There was no new business.

ADJOURNMENT

MR. SHROFF ASKED FOR A MOTION TO ADJOURN THE JANUARY 4, 2023, MEETING OF THE WESTCHESTER COUNTY HEALTH CARE CORPORATION BOARD OF DIRECTORS. DR. GARRICK MOTIONED, SECONDED BY MR. MCCOY. THE MOTION CARRIED UNANIMOUSLY.

Respectfully submitted,



AnnMarie Fernandez, WCHCC Assistant Secretary