

**WESTCHESTER COUNTY HEALTH CARE CORPORATION**

**BOARD OF DIRECTORS MEETING**

**MAY 3, 2023**

**6:30 P.M.**

**EXECUTIVE BOARD ROOM**

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

**VOTONG MEMBERS EXCUSED:** Herman Geist, Mitchell Hochberg

**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  
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  
John Brand, SVP, Marketing and Communications  
Phyllis Yezzo, EVP, CNO  
Ann Marie Soares, Executive Secretary

## CALL TO ORDER

The May 3, 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
Susan Gevertz	Zubeen Shroff
John Heimerdinger	Mark Tulis
Patrick McCoy	Judith Watson
	Richard Wishnie

### VOTING MEMBERS EXCUSED

Herman Geist  
Mitchell Hochberg

### 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. MCCOY 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 APRIL 12, 2023, MEETING OF THE BOARD. A MOTION WAS MADE BY DR. FRISHMAN, AND SECONDED BY MS. WATSON, TO APPROVE THE APRIL 12, 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. Altman provided the report of the President of the Medical Staff. She presented a credentialing packet (dated May 2, 2023 and attached to these minutes), containing information on Credentialing Appointments, Reappointments, Additional Privileges, and FPPEs.

**Motion to Approve Recommendations for Appointments, Reappointments, Additional Privileges, and FPPEs**

MR. SHROFF ASKED FOR A MOTION TO APPROVE THE RECOMMENDATIONS FOR APPOINTMENTS, REAPPOINTMENTS, ADDITIONAL PRIVILEGES, AND FPPES. DR. GARRICK MOTIONED, SECONDED BY MS. GEVERTZ. THE MOTION CARRIED UNANIMOUSLY.

## REPORT OF THE PRESIDENT

Mr. Ratner provided an Office of Research and Grants Administration update:

- \$374,000 award from OASAS to HealthAlliance:
  - Consolidate OTP and BridgeBack programs into single outpatient MAT and recovery program; and
  - Expand enrollment from 375 to 600 patients
- ResearchMatch – a not-for-profit program funded by the National Institute of Health, to help connect people interested in research studies with researchers from top medical centers across the U.S.; and
- The Westchester County Office of Economic Development convened leaders from the New York City and Westchester County life sciences economies for an exclusive networking reception in April, 2023.

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

- Web and Digital Metrics were reviewed for Q4 2022 and Q1 2023;
- WMC Same Day Cardiac Appointments Program was launched in March, 2023, and, to date, there were 30+ appointments; and
- Earned Media Coverage:
  - CBS News – Dr. Moscatello’s medical relief trip to Ukraine;
  - Mid Hudson News – HealthAlliance Hospital recognizes first 100 days of care at new facility; and
  - Spectrum News 1 – Good Samaritan Hospital honors Hatzoloh EMS of Rockland County at its 36<sup>th</sup> Annual Spring Ball; and

Mr. Ratner provided the following Community Relations update:

- Town of Rye F.I.T. 5k Walk;
- Hudson Valley Renegades – Season Kick-off of “We Care Wednesdays” featured WMC’s Transplant team. The first pitch was thrown out by a WMC pediatric transplant patient;
- AHA Dutchess/Ulster County Heartwalk was held on April 29, 2023, with over 600 attendees; and
- Parkinson’s Foundation “Moving Day” Walk Westchester was held on April 29, 2023 and featured WMC’s Neurology team

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

- 5 North Unit Renovation Project in Main Hospital has completed, go-live is set for May;
- Urolab Construction Project in progress; and
- ED Trauma Bay #1 Renovation Project initiated

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

- Dr. Juan Sanchez (APS – OBGYN); and
- Dr. Adam Zayac (APS – Hematology/Oncology)

Mr. Costello reviewed the April, 2023, volumes for the Valhalla campus compared to the April, 2022, volumes. He stated that for April, 2023, all areas were higher than April, 2022.

Mr. Costello provided a construction update on various projects.

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

- Atrium 1st Floor Renovation Project in progress;
- MAP Suite 302 Renovation Project initiated; and
- MRI Relocation Feasibility Study initiated for expansion and growth of MR services

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

- Dr. Elie Elliot Dancour (APS – Neurosurgery)

Mr. Costello reviewed the April, 2023, volumes for MHRH compared to the April, 2022, volumes. He stated that for April, 2023, all areas were higher than April, 2022.

Dr. Gewitz discussed Work Place Violence in children's hospitals. He stated that it is a growing national problem, with 84% of pediatric staff having been impacted by workplace violence. He advised that there will be a WebEx, Preventing Workplace Violence in Children's Hospitals, on May 10, 2023.

Dr. Gewitz reported on workplace violence events at the Maria Fareri Children's Hospital ("MFCH") for 2021 through Q1 2023. He showed images of a Behavioral Health Cart which contains standard safety equipment for staff to use when dealing with a workplace violence incident.

Dr. Gewitz provided the following updates to the Board on the MFCH Healthcare Services at MHRH:

- Regional EMS Conference;
- May 9<sup>th</sup> – 18<sup>th</sup> tours of local pediatric groups;
- Creation of a Pediatric Council; and
- A Pediatric Emergencies Symposium was held in April, 2023

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

- Advances in Neuroscience and Academics – Simon Hanft, M.D., chaired and presented WMC Cutting Edge Therapies at AANS (April 2023);
- Westchester Neurovascular Symposium is May 19, 2023; and
- Departments of Medicine and Anesthesia – Highlight Resident Research and Quality Projects;

Dr. Leahy, CEO of Bon Secours Charity Health System, provided the following quarterly update to the Board:

- Clinical Operations:
  - Mother – Baby Renovation;
  - Senior Leadership; and
  - The Cerner Conversion
- Capital Improvements:
  - EKG Fleet upgrade;
  - Main Lobby Beautification;
  - Nuclear Spect-CT installation;
  - 3D Mammography Unit installation;
  - Nuclear Stress Test and Hot Lab upgrades;
  - Sterilizer upgrade and enhancement is underway; and
  - Negative Pressure Bronchoscopy Suite is underway

- Service Line Development and Physician Recruitment:
  - 2023 Physician Recruitment
    - Primary Care;
    - EP;
    - Ortho;
    - Behavioral Health; and
    - Hematology/Oncology
- Recruitment of physicians tied to service line growth initiatives; and
- Alignment with independent practices

Dr. Tedjarati provided a WMCHHealth physician overview to the Board as follows:

- Total providers – 821;
- Individual suites/practices – 95;
- Main building – 29;
- Operational updates – streamlined processes and performance improvement efforts to address patient collections, supply waste, and physician productivity; and
- Recruitment – improved physician onboarding and education initiatives, 11 new leadership positions fulfilled; and 5 positions are under recruitment

Dr. Tedjarati informed the Board that there were 84,180 out-patient visits in the Q1 2023, compared to 76,177 out-patient visits for Q1 2022; an increase of 10.5%.

Dr. Tedjarati reported on the Call Center Operations. He discussed the average time to answer a call, and the increased patient access and satisfaction rates. Dr. Tedjarati stated that there is centralized scheduling across all practices with one main number, as well as a patient self-schedule through portal option.

Dr. Tedjarati informed the Board of the following WMCHHealth Physician Developments:

- Provider Collaboration
  - New partnership between the Spring Valley Refuah (FQHC) and MFM (former partners Sinai and NYU);
  - Future expected services include: Cardiology and ENT Q2-Q3 2023;
  - The Cardiovascular Health Promotion Disease Prevention Program (CHPDP) went live April 2022;
  - Goal: Advise patients on proactive heart-healthy practices and address the risks related to heart disease;
  - Expanded services to same-day urgent visits for new patients in Feb 2023; and
  - Program has been extended from WMC to MHRH and HA
- Provider Recruitment
  - Successfully recruited 60 physicians and 31 APP's since August, 2022, and additional recruitment ongoing;
  - 15 MDs in last few months (Surgery, Ophtho, Neurosurgery, Neurology, GI, Physiatry, Urology, OBGYN);
  - Streamlined HR recruitment and onboarding process; and
  - Physician liaison has facilitated onboarding and improved physician engagement, throughput, morale, and advocacy

- Clinical Integration CWHE
  - Integration of Cardiology and MFM to reduce the disparity of cardiovascular mortality and morbidity in high risk pregnant populations;
  - First integrated clinic second week of May 2023; and
  - Integration of mental health services with a dedicated social worker/counselor for pregnant patients coming late June, 2023

Dr. Tedjarati informed the Board of WMCH Health Physician Initiatives in Operations/Finance, HR/Education, Quality/Patient Experience, and Leadership.

## **REPORT OF THE COMMITTEES**

### **AUDIT AND CORPORATE COMPLIANCE COMMITTEE**

Mr. McCoy, Chair, Audit and Corporate Compliance Committee, advised that the Committee met on May 1, 2023, in executive session.

### **EQUITY, DIVERSITY AND INCLUSION COMMITTEE**

Ms. Mitchell, Chair, Equity, Diversity and Inclusion Committee, stated that the Committee met earlier this afternoon.

Ms. Mitchell informed the Board of the following topics presented at the meeting:

- Mr. Ratner shared recent and upcoming engagement activities;
- Mr. Costello presented the supplier diversity strategy and goals;
- Dr. Tedjarati shared the network's progress in establishing the Center for Women's Health Equity; and
- Ms. Roman provided updates on:
  - Recent equity, inclusion and diversity activities;
  - Steps taken by the Equity, Inclusion and Diversity Steering Committee to define the scope of activities to advance the work; and
  - A high-level overview of the strategy document that lays out the road map for the integration of equity, inclusion and diversity best practices.

### **FINANCE COMMITTEE**

Mr. Tulis, Chair, Finance Committee, stated that the Committee met this afternoon prior to the Board meeting. He stated that the Finance Committee reviewed the financial statements for the period ended March 31, 2023.

Mr. Tulis informed the Board that management presented the financial statements for the quarter ended March 31, 2023. He stated that total cash and investments increased, primarily as a result of the DSH receipt in March 2023, partially offset by the pension payment on February 1<sup>st</sup> and repayment of the remaining amount of deferred social security.

Mr. Tulis advised that patient service revenue in March 2023, was 12% higher than March 2022. He stated that salaries and benefits increased as a result of continued investment in physician services, health insurance costs and inflationary increases. Mr. Tulis advised that supplies and other expenses increased by 15% over 2022, primarily due to additional volume and inflationary increases. He stated that the net loss before unrealized losses on investments was \$2.9 million compared to \$9.4 million in March 2022, an improvement of \$6.5 million.

Mr. Tulis informed the Board that total acute discharges for Valhalla increased by 12.5% in March 2023, over March 2022, and total Emergency Department visits were 14% higher in March 2023, compared to March 2022.

He stated that total acute discharges for MHRH were 15% higher in March 2023, when compared to March 2022, and total Emergency Department visits were 13% higher in March 2023, when compared to March 2022.

## QUALITY COMMITTEE

Ms. Gevertz, Chair, Quality Committee, reported that the Committee met on April 14, 2023.

Ms. Gevertz stated that Dr. Garrick summarized the following departmental presentations from the February 9, 2023, meeting of the Quality and Safety Council:

- Anesthesia Quality Council – Key performance indicators, as well as an Analysis and Action Plan, were presented. Successes and challenges were also presented.
- Food and Nutrition – There was a 48% overall reduction in 2022 MIDAS Reports as compared to 2021. Key performance indicators were shared for both Valhalla and MHRH. Achieved RD-to-MD Malnutrition Communication Tool, which utilizes a “power form” within Cerner. 2022 Accomplishments were presented.
- Respiratory Services – Key Performance Indicators, along with an Analysis and Action Plan, were presented. Successes and a Regulatory report were also provided.

QA/PI reports were submitted by Environment of Care, Dialysis, and the Glycemic Council.

Ms. Gevertz advised the Board that the Committee received a presentation on the Emergency Department by Dr. Miller. He presented the following:

- ED Performance Improvement Initiatives:
  - Sepsis (SEP1) at Valhalla;
  - Left Without Being Seen (LWBS) rate at MHRH;
  - Barcode scanning for medication administration at Valhalla; and
  - Home medication list project at Valhalla

Dr. Miller stated that all four projects are applicable to both Valhalla and MHRH campuses. Lessons learned will be applied in EDs across the service line. We have data for each indicator for both campuses. He stated that the emphasis here is on the campus with the greatest opportunity for improvement.

- Sepsis CMS Sep1 (Valhalla) –
  - Sepsis is abnormal vital signs (SIRS) plus concern for infection;
  - Severe sepsis is Sepsis plus “end-organ dysfunction” aka abnormal lab tests;
  - Septic shock is persistent and severe end-organ dysfunction/inadequate perfusion;
  - Federal quality and safety initiative for patients  $\geq 18$ ;
    - Sepsis is a major cause of death rivaling cardiovascular;
    - Early aggressive treatment may prevent morbidity and mortality; and
    - Early detection of “occult sepsis”
  - SEP1 is very challenging:
    - Sepsis is a complicated amalgamation of many diseases;
    - Definitions are not consistent; and
    - Treatments are not all evidence-based
- SEP1 Challenges (Valhalla)
  - 200 page data dictionary;
  - No partial credit;
  - “Severe Sepsis” essentially invented by CMS as a surrogate for occult septic shock
    - Many false positives; and
    - Significant risk of overtreatment including unnecessary antibiotics; and

- “Sepsis” overused and may be coded when it was briefly considered
- Sepsis Action Plan (Valhalla)
  - Multidisciplinary approach: physician champions, nursing leadership reviews, quality department reviews;
  - Sepsis score sheet for real time review, translating the 200 page dictionary into one page;
  - “Code Sepsis” huddles in real time
    - Discussion of the plan since one size does not fit all; and
  - ED SEP1 scores went from 50% to 80% in 2022, with goal of 90% in 2023
- MHRH LWBS Baseline Challenges:
  - Patients who register and may get triage but leave without being seen by a provider:
    - Turning Point detox unit draws patients with high potential to walk out;
  - 2022 average 4.5%; and
  - Increases in patient volume including holds in a fixed space post-pandemic staffing challenges
- MHRH LWBS Action Plan:
  - Focus on the Waiting Room as a patient safety/liability risk as opposed to a waiting room:
    - Triage Tech assisting with VS and Rooming (“Halling”);
  - Charge RN calling all walkouts:
    - Service recovery and patient safety; and
    - Nursing leadership and accountability including praise;
  - Direct or Indirect PIT (Provider in Triage) Process when greater than 5 patients waiting – Reduced door to doctor time;
  - February 2023 LWBS Rate: 1.5%; and
  - March 2023 MTD LWBS Rate: 1.9%
- Valhalla Barcode Scanning Action Plan
  - Increased availability of bar code scanners and computers in ED; and
  - Goal is ≥80% in the ED
- Valhalla Home Medication Project
  - Medication reconciliation in the ED; and
  - Surescripts: clearing house for electronic prescriptions – triage nurse to “download” Surescripts home medication list into Cerner chart
- Home Medication Action Plan (Valhalla)
  - Cerner greatly enhances ability to download Surescripts list in the ED;
- Emergency Medicine Equity
  - All patients are seen in order of triage severity – no one is turned away from the ED; and
  - All patients are treated regardless of insurance status
- Honorable Mention Projects
  - Pediatric wristband (“kangaroo bands”) for accurate measured weight;
  - Cerner will flag out of range weights;
  - Improvements in documentation for behavioral health patients in the ED;
  - ESI 2 patients in the waiting room (Valhalla); and
  - Discharge from dental clinic – Cerner enhancement
- Key Statistics – turnaround time for treat and release patients in 2022:
  - Valhalla – 4.4 for 2022 and 2021;
  - MHRH – 3.8 for 2022 and 3.6 for 2021

Ms. Gevertz informed the Board that the Committee received a presentation on the 2022 Annual Summary by Ms. Cuddy, Dr. Garrick, and Ms. McFarlane. They presented the following summary:

Ms. Cuddy discussed the details of the 2022 Annual Summary including:



- Table of Organization - Explained in detail;
- 2022 Quality Department Activities – The Department maintained and continued usual quality improvement activities, as well as COVID 19 reporting responsibilities and participation in related activities including policy revisions, staff training, rounding, and vaccinating;
- 2022 Organization Priorities and Outcomes;
- WMCHHealth COVID Experience 2020–2022 was discussed;
- 2022 Clinical Optimization and Efficiency activities – Including maternal collaborative and other indicators and outcomes; and
- National Hospital Quality Measures – Sustained improvements, particular measures, outcomes and opportunities for improvement were discussed in detail

Ms. McFarlane discussed 2022 Regulatory activities highlighting the following:

- 2022 – 34 surveys; 93 survey days; 188 surveyor days;
- 100% accreditation and certification achieved; One-third surveys resulted in no deficiencies. Where findings identified, corrective actions were implemented and achieved;
- Primary Stroke Certification MHRH was newly added;
- Discussed the organizational ISO Internal Audit Program process and audits conducted;
- NYPORTS –16 events in 2022. Internal Incident Reviews found system level issues and risk reduction strategies were developed and implemented; Discussed event trends identified 2018-2022 and most frequently occurring and related initiatives to address them;
- Contracted Services –1500+ vendor evaluations completed; performed applying indicators and criteria which were discussed in detail including results of review; and
- Discussed results of Culture of Safety Survey including opportunities for improvement and the Board initiative being rolled out to address enhancement of communication between disciplines/departments

Dr. Garrick discussed the following:

- 2022 Culture of Safety Survey;
- 2022 Star Rating Data;
- LEAPFROG 2022 Safety Grade;
- Inpatient Quality Reporting (CMS) was discussed, including the significant upcoming changes for 2023, 2024, and 2025;
- CMS Structural Equity Measure (new for 2022); and
- CMS Social Determinants of Health (SDOH) Measures were reviewed

Ms. Cuddy presented the 2023 Performance Improvement and Patient Safety Plan highlighting the following:

- 2023 Performance Improvement and Safety Plan – Revisions to the plan were outlined; and
- 2023 Organizational Priorities – Goals include ensure accurate and timely submission of required external data reports by continued standardization and optimization of Cerner and other data sources, build and promote a robust safety culture, including designing hospital systems and structures that prioritize and optimize safety, patient safety - focus on improving communication, documentation and reducing hospital acquired conditions, and identify opportunities to address inequities in care

Ms. Gevertz advised that the Committee voted to recommend that the Board of Directors adopt the 2022 Annual Summary, approve the 2023 Organizational Priorities, and approve the 2023 PI and Safety Plan.

MR. SHROFF ASKED FOR A MOTION TO ADOPT THE 2022 ANNUAL SUMMARY, APPROVE THE 2023 ORGANIZATIONAL PRIORITIES, AND APPROVE THE 2023 PI AND SAFETY PLAN. MS. WATSON MOTIONED, SECONDED BY DR. FRISHMAN. THE MOTION CARRIED UNANIMOUSLY.

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

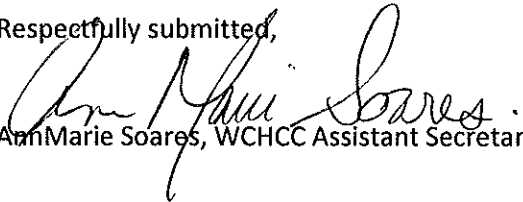
**NEW BUSINESS**

There was no new business.

**ADJOURNMENT**

MR. SHROFF ASKED FOR A MOTION TO ADJOURN THE MAY 3, 2023, MEETING OF THE WESTCHESTER COUNTY HEALTH CARE CORPORATION BOARD OF DIRECTORS. MR. TULIS MOTIONED, SECONDED BY MR. HEIMERDINGER. THE MOTION CARRIED UNANIMOUSLY.

Respectfully submitted,



Ann Marie Soares, WCHCC Assistant Secretary