

**WESTCHESTER COUNTY HEALTH CARE CORPORATION**

**BOARD OF DIRECTORS MEETING**

**January 8, 2025**

**6:00 P.M.**

**EXECUTIVE BOARD ROOM**

**VOTING MEMBERS PRESENT:** William Frishman, M.D., Renee Garrick, M.D., Susan Gevertz, Mitchell Hochberg, Patrick McCoy, Tracey Mitchell, Michael Rosenblut, Zubeen Shroff, Mark Tulis, Richard Wishnie

**VOTING MEMBERS EXCUSED:** Herman Geist, John Heimerdinger, Alfredo Quintero, Sharla St. Rose, Judith Watson

**NON-VOTING MEMBERS PRESENT:** Tamer El-Rayess, Michael Israel, Martin Rogowsky

**STAFF PRESENT:** Chris Librandi, SVP, Deputy General Counsel  
Anthony Costello, EVP, COO  
Michael Gewitz, SVP, Clinical Operations, WMC  
Josh Ratner, EVP, Chief Strategy Officer  
William Pryor, SVP, Chief HR Officer  
Phyllis Yezzo, EVP, CNO  
Ann Marie Soares, Executive Corporate Secretary

**CALL TO ORDER**

The January 8, 2025, meeting of the Westchester County Health Care Corporation (“WCHCC”) Board of Directors was called to order at 6:00 p.m., by Mr. Shroff, Chair. A quorum was present.

**VOTING MEMBERS PRESENT**

|                        |                   |
|------------------------|-------------------|
| William Frishman, M.D. | Michael Rosenblut |
| Renee Garrick, M.D.    | Zubeen Shroff     |
| Susan Gevertz          | Mark Tulis        |
| Mitchell Hochberg      | Richard Wishnie   |
| Patrick McCoy          |                   |
| Tracey Mitchell        |                   |

**VOTING MEMBERS EXCUSED**

Herman Geist  
John Heimerdinger  
Alfredo Quintero  
Sharla St. Rose  
Judith Watson

**NON-VOTING MEMBERS PRESENT**

Tamer El-Rayess  
Michael Israel  
Martin Rogowsky

**REPORT OF THE CHAIR/ADDITIONS TO THE AGENDA**

Mr. Shroff welcomed Tamer El-Rayess to the Board, and advised that he is now a non-voting Board member. He stated that Mr. El-Rayess is the Treasurer on the Bon Secours Charity Health System (“Charity”) Board.

Mr. El-Rayess thanked the Board for the opportunity, and in addition, expressed his gratitude to WMCHHealth for its partnership with Charity, and support over the past ten years. He provided a brief [synapsis-synopsis](#) of his professional background, including his time on Wall Street.

MR. SHROFF ASKED FOR A MOTION TO APPROVE THE MINUTES FROM THE DECEMBER 4, 2024, MEETING OF THE BOARD. A MOTION WAS MADE BY MR. TULIS, SECONDED BY MR. ROSENBLUT, TO APPROVE THE DECEMBER 4, 2024, 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 8, 2025 and attached to these minutes), containing information on Credentialing Appointments, Reappointments, Additional Privileges, FPPEs, and updates to the OB/GYN, Neurology, and Surgery Privilege forms.

**Motion to Approve Recommendations for Credentialing Appointments, Reappointments, Additional Privileges, FPPEs, and Updates to the OB/GYN, Neurology, and Surgery Privilege forms.**

MR. SHROFF ASKED FOR A MOTION TO APPROVE THE RECOMMENDATIONS FOR CREDENTIALING APPOINTMENTS, REAPPOINTMENTS, ADDITIONAL PRIVILEGES, FPPEs, AND UPDATES TO THE OB/GYN, NEUROLOGY, AND SURGERY PRIVILEGE FORMS. MS. GEVERTZ MOTIONED, SECONDED BY MR. MCCOY. THE MOTION CARRIED UNANIMOUSLY.

**ANNUAL MISSION STATEMENT AND PERFORMANCE GOAL REVIEW**

Mr. Ratner reviewed WMC's Mission Statement for 2025, noting that there were no changes from the 2024 Mission Statement. He then reviewed the Performance Goals for 2024, as well as the Draft Performance Goals for 2025. Mr. Ratner outlined the five proposed goals as followed: Position WMCHHealth as an "Employer of Choice"; Achieve Sustainable Growth Across WMCHHealth; Ensure Top-of-Mind Consumer Awareness and Selection of WMCHHealth Services; Ensure Exceptional Patient Experience from "Door to Discharge" to Become a Destination of Choice for Patient and Their Families; and Provide a fiscally sound network.

MR. SHROFF ASKED FOR A MOTION TO APPROVE THE 2025 ANNUAL MISSION STATEMENT, AND THE ADOPTION OF THE 2025 PERFORMANCE GOALS. MS. GEVERTZ MOTIONED, SECONDED BY MR. TULIS. THE MOTION CARRIED UNANIMOUSLY.

**REPORT OF THE COMMITTEES**

**AUDIT AND CORPORATE COMPLIANCE COMMITTEE**

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

Mr. McCoy informed the Board that Ms. Ariel and Mr. Palovick presented the 2025 Corporate Compliance Risk Assessment Summary Guide as well as the 2025 Corporate Compliance and Internal Audit Work Plans. He stated that the Committee voted and approved the 2025 Work Plans.

Mr. McCoy advised the Board that Ms. Ariel discussed the following two audits in progress: DRG 064, 065, 066 Intracranial Hemorrhage or Cerebral Infarction with/without CC/MCC or TPA in 24 hours – Valhalla and MHRH, and EMTALA – Valhalla and MHRH.

Mr. McCoy informed the Board that Mr. Palovick discussed the following four internal audits in progress: Third Party Access Controls, Infusion Center Revenue Cycle – MHRH, Biomedical Engineering Contract Administration, and the ICU Tower Construction Project. In addition, Mr. Palovick discussed the recommendations for the following two completed internal audits: Lab Services Contract Administration – MHRH, and Physician Compensation.

Lastly, Mr. McCoy informed the Board that the Committee reviewed the updated Audit and Corporate Compliance Committee Charter. He stated that the Committee voted and approved the updated Charter.

**FINANCE COMMITTEE**

Mr. Tulis, Chair, Finance Committee, stated that the Committee met this afternoon, during the first portion of the Board meeting.

Mr. Tulis advised that Mr. Morgan presented the 2025 Capital budget to the Committee. A discussion ensued, and the Committee voted to recommend approval of the 2025 Capital Budget to the Board.

MR. SHROFF ASKED FOR A MOTION TO APPROVE THE 2025 CAPITAL BUDGET. MR. ROSENBLUT MOTIONED, SECONDED BY MR. MCCOY. THE MOTION CARRIED UNANIMOUSLY.

Mr. Tulis informed the Board that the Committee voted to recommend Resolution 1 to the Board for its approval.

MR. SHROFF ASKED FOR A MOTION TO APPROVE RESOLUTION 1. MR. WISHNIE MOTIONED, SECONDED BY MS. MITCHELL. THE MOTION CARRIED UNANIMOUSLY.

Mr. Tulis stated that Mr. Morgan presented a Capital Lease with Dell Finance for a virtual Infrastructure refresh for WMC and MHRH. He advised that the lease has a principal of \$1.6 million for a term of 60 months, at an interest rate of 4.15%.

MR. SHROFF ASKED FOR A MOTION TO APPROVE THE DELL FINANCE CAPITAL LEASE. MR. ROSENBLUT MOTIONED, SECONDED BY DR. FRISHMAN. THE MOTION CARRIED UNANIMOUSLY.

## QUALITY COMMITTEE

Ms. Gevertz, Chair, Quality Committee, reported that the Committee met on December 6, 2024.

Ms. Gevertz advised the Board that Dr. Garrick summarized the following departmental presentations from the October 10, 2024 meeting of the Quality and Safety Council:

- Cardiovascular Council: Quality Program Structure, CCU Performance Improvement – Ventilator Orders, Quality Improvement Initiatives Clinical Cardiology, AMI EDAC Action Plan; Heart Failure EDAC Action Plan, Door to Balloon Under 90 minutes percentage, TAVR Data, and Transcatheter Valve Program Quality Initiatives;
- Social Work Services/care Management: Areas of Focus for Improvement, Focus on decrease of Adult Length of Stay, Analysis, Unplanned Readmission Rate, Average Length of Stay, P2P Overturn Rates, and a Regulatory Report; and
- Home Health Agency: Focus Areas for Improvement, Infection Control, Analysis, Action Plan, Hospitalizations, and Regulatory.

QA/PI reports were submitted by Surgery, Medicine, Risk Management, and Neurology.

Ms. Gevertz informed the Board that the Committee received a presentation on Emergency Services by Dr. Ivan Miller. He presented the following highlights and data:

- Turnaround Times for Discharge and ED Length of Stay;
- ED Length of Stay for Admitted Patients;
- ED LOS WMC Decision-to-Admit to Admit Order:
  - Problem: Delays in admission orders (“PSO”):
    - Challenges:
      - ED is the staging area for inbound transfer patients;
      - Complex patients in a teaching hospital;
      - Tradition of extensive medical evaluations in the ED;
      - ED decision time (ED DTA) is when the patient is ready for admission
    - Interventions:
      - New custom time stamp “ED DTA” went live October 2024; and
      - Pilot with Internal Medicine and Neurology
  - PI Project: ED LOS MHRH Decision-to-Admit to Admit Order:
    - Challenges:
      - Hospital-based Psychiatrists in Dutchess county are difficult to recruit;

- During off hours, Tele-psychiatrists makes the decision to admit in the ED; and
    - Admission order (PSO) is placed after face-to-face encounter by a psychiatry provider (often the next day) adding hours to the ED LOS
  - Interventions:
    - Collaboration between ED physicians, Adult Hospitalists and BH Team
      - ❖ Hospitalist consulted when tele-psychiatrist makes the decision to admit;
      - ❖ For ED Holds:
        - ✓ Medicine consultation;
        - ✓ Medication reconciliation; and
        - ✓ Psychopharmacological treatment initiated
      - ❖ Once BH bed is available, Hospitalist places admission orders and patient can be transported to the inpatient psychiatric unit immediately – Started September 2024
- PI Project: ED LOS WMC Bed Assigned to Bed Occupied:
  - Problem: Delays in patient transport to the inpatient unit after bed assignment
    - Challenges:
      - Effective communication of bed assignment;
      - Confirmation room clean and ready;
      - ED nurse to inpatient nurse handoff; and
      - Courier turnaround times
    - Interventions:
      - Multidisciplinary Workgroup formed:
        - ❖ Nursing, Housekeeping, Patient Placement, Courier, Infection Control, BioMed, OpEx;
      - Re-roll out of Tele Tracking – Charge Nurse communication via TigerConnect:
        - ❖ Clean bed assignment auto-text to sending and receiving nurse leaders;
      - Escalation Pathway @ 60 Min, @90 Min, @ 120 Min, if patient is not occupying bed;
      - Throughput NCC Role 15:00 – 23:00;
      - Front line staff feedback survey; and
      - Unit specific performance data
- CMS STAR Rating Metrics;
- Turnaround Time for Discharge;
- Left Without Being Seen;
- Medication Barcode Scanning;
- Sepsis CMS Sep1 Bundle 2024;
- Stroke Measure: Arrival to Brain Image Read: Target is less than or equal to 45 Minutes
  - WMC is 21.5 minutes; and
  - MHRH is 36 minutes
- PI Project: Violent Restraint – 1 hour Face-to-Face Evaluation:
  - A one hour face-to-face evaluation is required by federal regulations when restraint is used to manage violent/self-destructive behavior that jeopardizes immediate physical safety of patient, staff or others; and
  - Face-to-Face documentation includes:
    - Description of behavior and intervention;
    - Alternatives attempted;
    - Patient’s symptom(s) warranting use of restraint;
    - Assessment for possible medical causes of the behavior; and
    - Patient’s response to intervention
- ED Patient Satisfaction – Press Ganey Survey Results;
- ED Usage (Social Determinants of Health):

- ED Departments are often used in lieu of primary care;
- Multi-disciplinary meeting monthly for each campus review each Frequent Utilizer;
  - Clinical leadership;
  - Case management;
  - Social work; and
  - Care navigator
- All Treat and Release patients are given written information;
  - “Medicine Home” education;
  - Referral to WMC Primary Care Medical Practices and Clinic System; and
  - Substance abuse and local resources for opioid and other substance abuse treatment
- Next Steps:
  - Increase the cohort of focus;
  - Engage new electronic referral process for select patients; and
  - Connect with resources based on heat map
- HIV Failsafe (Safety):
  - New York State mandates the offer of HIV testing to all adult ED patients:
    - HIV testing is offered in triage;
    - If patient accepts the offer, an order is generated for the blood test;
    - Approximately 4 tests per day across both campuses; and
    - Results after discharge are posted to the Cerner Firstnet “call back” inbox
      - ED provider reviews call backs, takes appropriate action and documents in the medical record
  - HIV Audit on each campus:
    - All positive results reviewed to confirm that action has been taken:
      - Known positive or;
      - Addressed during admission or;
      - Referral for treatment
  - In the past 12 months we have had no newly diagnosed HIV positive patients

Key Statistics for Valhalla and MHRH were shared.

Ms. Gevertz advised the Board that Ms. Cuddy presented the 2025 Draft Reporting Calendar to the Committee. She stated that the Committee recommended approval of the 2025 Draft Reporting Calendar to the Board.

MR. SHROFF ASKED FOR A MOTION TO APPROVE THE 2025 DRAFT REPORTING CALENDAR. MR. ROSENBLUT MOTIONED, SECONDED BY MR. WISHNIE. THE MOTION CARRIED UNANIMOUSLY.

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

## **NEW BUSINESS**

Mr. Shroff informed the Board that the WMCHHealth Network would like to establish a new Distinguished Service Award for individuals/physicians who have made an extraordinary impact on the Network over their careers spanning ten years or more. This Inaugural Award is being presented to Michael H. Gewitz, M.D., Director of Pediatrics, and the Founding William Russell McCurdy Physician-in-Chief and Executive Director of the Maria Fareri Children’s Hospital, while also serving as Professor and Vice Chair of Pediatrics at the New York Medical College.

Dr. Gewitz was also presented with several other awards for his distinguished career and service, including Resolution 3, presented by Mr. Librandi.

- Resolution 3 – Michael H. Gewitz, M.D. – in recognition of his service over the past forty (40) years, the Board of Directors would like to thank Dr. Gewitz for his tremendous contribution to WMCHHealth and the communities it serves.

MR. SHROFF ASKED FOR A MOTION TO APPROVE RESOLUTION 3, MICHAEL H. GEWITZ, M.D. DR. GARRICK MOTIONED, SECONDED BY MR. ROSENBLUT. THE MOTION CARRIED UNANIMOUSLY.

Mr. Librandi presented Resolution 2 to the Board for its' approval:

- Resolution 2 – The Namings – the Foundation has received pledges to donate certain sums to support and enhance WCHCC and the services it provides as further described in Attachment A. It is proposed that WCHCC approve the respective dedication and naming opportunities as set forth on Attachment A, in recognition of the donations which are in accordance with the Naming Rights Policy as previously adopted by WCHCC.

MR. SHROFF ASKED FOR A MOTION TO APPROVE RESOLUTION 2, THE NAMINGS. MS. MITCHELL MOTIONED, SECONDED BY MR. WISHNIE. THE MOTION CARRIED UNANIMOUSLY.

#### **OLD BUSINESS**

There was no old business.

#### **EXECUTIVE SESSION**

MR. SHROFF ASKED FOR A MOTION TO MOVE INTO EXECUTIVE SESSION FOR THE PURPOSE OF DISCUSSING QUALITY AND STRATEGIC PLANNING MATTERS. MR. TULIS MOTIONED, SECONDED BY MR. MCCOY. THE MOTION CARRIED UNANIMOUSLY.

#### **ADJOURNMENT**

MR. SHROFF ASKED FOR A MOTION TO ADJOURN THE JANUARY 8, 2025, MEETING OF THE WESTCHESTER COUNTY HEALTH CARE CORPORATION BOARD OF DIRECTORS. MR. ROSENBLUT MOTIONED, SECONDED BY DR. FRISHMAN. THE MOTION CARRIED UNANIMOUSLY.

Respectfully submitted,

  
Ann Marie Soares, WCHCC Assistant Secretary