



**COMMUNITY RELATIONS COMMITTEE
OF THE BOARD OF DIRECTORS**

September 12, 2017
5:30 P.M.
Board Room
125 Worth Street, Room 532

JOINT MEETING WITH COUNCIL OF COMMUNITY ADVISORY BOARDS

AGENDA

- | | |
|--|-------------------------|
| I. Call to Order | Josephine Bolus, NP, BC |
| II. Adoption of May 2, 2017
Community Relations Committee Meeting Minutes | Josephine Bolus, NP, BC |
| III. Chairperson's Report | Josephine Bolus, NP, BC |
| IV. Interim CEO President's Report | Stanley Brezenoff |
| V. Information Items (Annual CAB Reports): | |
| a. NYC Health + Hospitals/Coney Island | Rosanne Degenarro |
| b. NYC Health + Hospitals/Jacobi | Sylvio Mazella |
| c. NYC Health + Hospitals/North Central Bronx | Esme Sattaur-Low |
| d. NYC Health + Hospitals/Sea View | Joseph Tornello |
| VI. Old Business | |
| VII. New Business | |
| VIII. Adjournment | |

**COMMUNITY RELATIONS COMMITTEE
OF THE BOARD OF DIRECTORS**

May 2, 2017

5:30 P.M.

NYC Health + Hospitals Board Room
125 Worth Street, Room 532

MINUTES

ATTENDEES

COMMITTEE MEMBERS

Josephine Bolus, NP-BC, Committee Chair
Robert Nolan, Board Member
Helen Arteaga-Landaverde, Board Member
Stanley Brezenoff, Interim President, NYC Health + Hospitals

COUNCIL OF THE COMMUNITY ADVISORY BOARDS

Talib Nichiren, Chairperson, Council of CABs, NYC Health + Hospitals/Woodhull
Rosanne DeGennaro, Chairperson, NYC Health + Hospitals/Coney Island
Carmen Benitez, representing (Chairperson, George Rodriguez) NYC Health + Hospitals/Lincoln
Ludwig Jones, Chairperson, East New York/A Gotham Health Center
Jacqueline Narine, Chairperson, NYC Health + Hospitals/Cumberland/A Gotham Health Center
Gary Delamothe (representing Gladys Dixon, Chairperson, NYC Health + Hospitals/Coler)
Jacqueline Boyce, Chairperson, NYC Health + Hospitals/Queens
Alicia Zanelli, (representing Louise Dankberg, Chairperson), NYC Health + Hospitals/Bellevue
Eartha Washington, NYC Health + Hospitals/Elmhurst
J. Edward Shaw, Chairperson, NYC Health + Hospitals/Metropolitan
Benita Stemberge, Chairperson, NYC Health + Hospitals/Harlem
Antoine Jean-Pierre, Chairperson, NYC Health + Hospitals/McKinney
Gloria C. Thomas (representing Kenneth Campbell, Chairperson, NYC Health + Hospitals/Kings)

FACILITY COMMUNITY ADVISORY BOARD MEMBERS

Eunice Sabro, NYC Health + Hospitals/ McKinney
Judy Wessler, NYC Health + Hospitals/Gouverneur/A Gotham Health Center
Bernice E. Diaz, NYC Health + Hospitals/ McKinney
May Thomas, NYC Health + Hospitals/McKinney
Claudette Brown, NYC Health + Hospitals/McKinney
Jeromane Berger Gaskin, NYC Health + Hospitals/Kings
Janet B. Larghi, NYC Health + Hospitals/McKinney
Reverend Harry Jean, NYC Health + Hospitals/Queens
Marty Bromberger, NYC Health + Hospitals/Coney Island
Jennifer Dublin, NYC Health + Hospitals/Coney Island
Hiawatha Campbell, NYC Health + Hospitals/Cumberland/A Gotham Health Center
Fred Monderson, Ph.D., NYC Health + Hospitals/McKinney
Bobby Lee, NYC Health + Hospitals/Bellevue

NYC HEALTH + HOSPITALS CENTRAL OFFICE STAFF

Machelle Allen, M.D., Chief Medical Officer, NYC Health + Hospitals
Salvatore Russo, Chief Counsel, NYC Health + Hospitals
John Jurenko, Government Relations
Colicia Hercules, Office of Board Affairs

Patricia Lockhart, Office of Board Affairs
Steven Newmark, Office of Legal Affairs
Alvin Young, Office of Community Relations
Manelle Belizaire, Office of Community Relations
Robb Burlage, Office of Community Relations
Renee Rowell, Office of Government Relations

NYC HEALTH + HOSPITALS FACILITY STAFF

Ebone Carrington, Chief Executive Officer, NYC Health + Hospitals/Harlem
Milton Nunez, Chief Executive Officer, NYC Health + Hospitals/Lincoln
David Weinstein, Chief Executive Officer, NYC Health + Hospitals/McKinney
Philip Cooke, Sr. Associate Director, NYC Health + Hospitals/Harlem
C. Jill Brooker, CAB Liaison, NYC Health + Hospitals/Bellevue
Xiomara Wallace, CAB Liaison, NYC Health + Hospitals/Kings
Angela Cooper, CAB Liaison, NYC Health + Hospitals/McKinney
William Jones, CAB Liaison, NYC Health + Hospitals/Carter
Ron Law, Director Intergovernmental Relations, NYC Health + Hospitals/MetroPlus

GUESTS:

Jewel Jones, Resident

CALL TO ORDER

The Chairperson, Mrs. Josephine Bolus, NP-BC, called the meeting of the Community Relations Committee (CRC) to order at 5:35 PM. Mrs. Bolus announced that a quorum had been established. She requested a motion for the adoption of the minutes of March 7, 2017. A motion was made and seconded. The minutes were adopted.

Mr. Salvatore Russo, Senior Vice President, General Counsel introduced Mr. Steven Newmark, Legal Affairs. Mr. Russo added that Mr. Newmark will represent legal affairs during the Community Relations Committee meetings. Mr. Russo noted that Ms. Valarie Phillips former representative had retired.

CHAIRPERSON'S REPORT

Before presenting her report Mrs. Bolus asked that special recognition be given for Ms. Virginia Granato who passed away on Sunday, April 30th. Mrs. Bolus added that we all knew Virginia as the founding Chairperson of the Carter CAB and as a most thoughtful member of the CABs Council. She went on to say that Ms. Granato lived practically her whole lifetime in her respirator-equipped, motorized wheelchair, yet with omnipresent, never-deterred, mobility. She was an early resident of Roosevelt Island, where she declared her "life was saved" from "infantile paralysis" at the old Goldwater City Hospital. Mrs. Bolus noted that Ms. Granato was a truly inspirational leader and spokesperson for the disabled on the Island and across the City. She will forever be remembered as someone who fully dedicated her life to the health and health care of all of the people of our City. Mrs. Bolus asked for a moment of silence in memory of Virginia Granato."

Mrs. Bolus began her report by reminding all of the upcoming NYC Health + Hospitals' Annual Public meetings. Mrs. Bolus added that the Bronx meeting was held on April 19th at Jacobi and was well attended. She continued and noted that at that meeting, President Brezenoff discussed some of the national recognitions that NYC Health + Hospitals Bronx facilities had received including Jacobi's designation as a Level 1 Trauma Center. He also shared that Jacobi, Lincoln and NCB had exceeded national standards established by the American Heart Association and the American Stroke Association. The schedule for the remaining meetings are as follows:

- **For Staten Island:** Wednesday, May 10th at 6pm at Sea View
- **For Brooklyn:** Wednesday, May 17th at 6pm at Coney Island
- **For Manhattan:** Wednesday, June 7, 2017 at 6pm at Harlem
- **For Queens:** Wednesday, June 14th at 6pm at Elmhurst

Mrs. Bolus continued by highlighting key NYC Health + Hospitals' events that occurred since the March 7, 2017 meeting . She reported the following:

- MetroPlus had announced its opening of new community locations in Brooklyn, Queens, and Staten Island. Mrs. Bolus noted that the three sites would serve as resource centers for New Yorkers to get answers to health insurance program questions and receive assistance to enroll in plans such as Child Health Plus, Medicaid, Qualified Health Plans and the Essential Plan. Health care specialists who speak English, Chinese, Spanish, and a number of other languages are available at most MetroPlus community locations. The new community sites are the following:
 - MetroPlus at Flushing's Skyview Mall in Queens

Open Monday through Saturday: 9:30 a.m. to 9 p.m.

Sunday: 11 a.m. to 7 p.m.

- MetroPlus at Staten Island Mall on Staten Island

Open Monday through Saturday: 10:00 a.m. to 9 p.m.

Sunday: 11 a.m. to 6:00 p.m.

- MetroPlus in Sunset Park in Brooklyn

807 48th Street, 2nd Floor

Open Monday through Saturday: 9 a.m. to 5 p.m.

Sunday: Closed

- NYC Health + Hospitals hosted five Immigrant Health Care Rights panel discussions across the City to help educate immigrant communities and provide access to information and resources. The panel included representatives from NYC Health + Hospitals, Mayor's Office of Immigrant Affairs, New York Immigration Coalition, and New York Legal Assistance Group. Forums addressed a variety of important health care topics affecting immigrants, such as health care rights, access to care, services and programs for immigrants, and privacy concerns regarding immigration status. Forums were held at Elmhurst, Kings Harlem and Lincoln.
- Announced that the Jacobi Community Advisory Board in conjunction with the Auxiliary would host its Annual Mental Health Conference on Thursday, May 18, 2017 at 6pm at Jacobi's Conference Center. Mrs. Bolus continued and stated that "this conference will be dedicated to the memory of Blanche Comras-Rifkin who was a longstanding CAB member and community activist." The theme of the conference is "Living with Stability and Dignity," which would highlight the need for safe and supportive housing for individuals with mental illness.
- Announced planning had begun on this year's annual Marjorie Matthews Recognition event, which will be held in July. The date and location of this event would be finalized shortly and shared with CAB and Auxiliaries. Mrs. Bolus noted that the Marjorie Matthews event will be held in lieu of a July Community Relations Committee meeting. As such, the next Community Relations Committee meeting will be held on September 12th.
- Invited CAB members and facility staff to participate in the Canarsie Memorial Day Walk to honor Veterans. The walk will be held from 10:30am – 2:00pm.

Mrs. Bolus concluded her report by acknowledging the leadership staff in attendance. They were:

- David Weinstein, Chief Executive Officer, NYC Health + Hospitals/ McKinney
- Milton Nunez, Chief Executive Officer, NYC Health + Hospitals Lincoln
- Ebone Carrington, Chief Executive Officer, NYC Health + Hospitals Harlem

INTERIM PRESIDENT'S REMARKS:

Stanley Brezenoff

Mr. Brezenoff greeted Committee members, CAB Chairs and invited guests. The following overview was presented:

- Washington continues to roil the nation's health care landscape with reports of a revived attempt to repeal and replace the Affordable Care Act (ACA). Mr. Brezenoff continued and noted that the latest version would be a grave disservice to the Nation. He added that the House of Representatives are expected to pass the bill on Thursday, May 4th.

- In the event that the House pass the bill, as a result of their action hundreds of thousands New Yorkers are a step closer to being stripped of their health insurance coverage. Mr. Brezenoff noted that repealing the Affordable Care Act would cut billions from the Medicaid program resulting in huge setbacks to work that had been done to make New Yorkers healthier.

Mr. Brezenoff concluded his remarks by reiterating NYC Health + Hospitals' commitment to its immigrant community. He noted that NYC Health + Hospitals joined with the Office of Immigrant Affairs to restate to our immigration population that NYC Health + Hospitals will continue to honor their right to privacy. He continued and reported that the Mayor opposes any harm to NYC safety net hospitals and is very active in making it clear to the immigrant communities that NYC Health + Hospitals remains committed to serving all, regardless of immigration status and without fear of federal authority.

COMMUNITY ADVISORY BOARD (CAB) ANNUAL REPORTS

NYC Health + Hospitals/Dr. Susan Smith McKinney

Mrs. Bolus introduced Mr. Antoine Jean-Pierre, Chairperson of NYC Health + Hospitals/McKinney and invited him to present the CAB's annual report.

Mr. Jean-Pierre began his presentation by thanking members of the Committee for the opportunity to present the McKinney CAB's annual report. He presented the following summary:

- Informed members of the Committee and invited guests that under the leadership of David Weinstein, Chief Executive Officer and Charmaine Lewis, Deputy Executive Director McKinney remains the Waldorf of Post-Acute Care. He went on to explain the reason for great achievements supports the principles and transformational goals of keeping the focus on the residents, ensuring their greatest experiences and expectations of quality care is met.
- Highlighted several in-house activities that occurred over the past year. They were: GO Red Event, Black History Month, Father's Day Event Resident's Art Expo and the Annual Summer Youth Employment Program. Mr. Jean-Pierre noted that The CAB's annual resident satisfaction survey was completed with excellent outcomes.
- Reported that the senior staff of McKinney along with the joint labor team continued to recognize staff during monthly ceremony. He note that Angela Cooper, CAB Liaison had been honored by the Trinidad and Tobago Nurses Association for her outstanding community stewardship services.
- Pharmacy improvement project would allow McKinney pharmacy to align themselves with services of Central Admixture Pharmacy Services (CAPS) to provide IV nutrition (food) for critically ill residents. This team approach will enable McKinney to be in the lead in serving the complex nutritional needs of special residents.

Mr. Jean-Pierre concluded his report by congratulating NYC Health + Hospitals/McKinney's leadership and staff on receiving a five star rating from the Centers of Medicare and Medicaid Services. Mr. Jean-Pierre added the CAB will continue to support McKinney in all its endeavors to ensure quality care and

premier quality health care at NYC Health + Hospitals/ McKinney. A report of NYC Health + Hospitals/ McKinney's year in review was distributed.

NYC Health + Hospitals/Woodhull

Mrs. Bolus introduced Mr. Talib Nichiren, Chairperson, NYC Health + Hospitals/Woodhull and invited him to present the CAB's annual report.

Mr. Nichiren began his presentation with a warm welcome to the Committee members, CAB Chairpersons and invited guests.

Mr. Nichiren informed members of the Committee that in lieu of giving the NYC Health + Hospitals/Woodhull CAB's annual report he would address health care concerns of the North Brooklyn community.

Mr. Nichiren reported that the community is in a "crossroad" in light of a recent NY Post article that implied the City municipal hospitals will lay off as many as 600 employees in coming months to help close a deficit estimated at \$1.1billion FY 2018. Mr. Nichiren continued and asked members of the Committee and current administration to be very mindful of the patients served. He went on to say that the north Brooklyn community dependent upon NYC Health + Hospitals/ Woodhull.

Mr. Nichirin concluded the Woodhull CAB report by asking for transparency and community input. He added that transformation plans should be shared with the community so that Woodhull patients can continue to get the great services they deserve.

NYC Health + Hospitals/Lincoln

In the excused absence of Lincoln's CAB Chairperson, George Rodriguez, Mrs. Bolus introduced Carmen Benitez, and invited her to present the CAB's annual report.

Ms. Benitez began the NYC Health + Hospitals/Lincoln CAB Report by thanking members of the Committee for the opportunity to present. Ms. Benitez continued and acknowledged Mr. Milton Nunez, CEO of Lincoln and Antonio Montalvo, CAB Liaison for their outstanding leadership and support.

The following overview was presented:

- Reported that the most significant health care concerns for the facility's catchment area is the budget deficit and how it would affect NYC Health + Hospitals/Lincoln patients
- Reported that on Tuesday, April 11th Immigrant Health Care Rights forum was held. Ms. Benitez noted that the event was informative and well attended.
- Announced NYC Health + Hospitals/Lincoln had been recognized for outstanding patient care with a Leap Frog award.

Ms. Benitez concluded the Lincoln CAB report by thanking Cheryl Oliver, Senior Associate Director, Public Affairs for her support of the CAB's postcard campaign to Senator Charles Schumer supporting the Affordable Care Act. Mr. Robert Nolan, Board members extended well wishes to George Rodriguez, Lincoln CAB Chair.

NYC Health + Hospitals/ Harlem

Mrs. Bolus introduced Benita Stenbridge, Chairperson NYC Health + Hospitals/Harlem and invited her to present the CAB's annual report.

Ms. Benita began the Harlem CAB report by thanking members of the Committee for the opportunity to present and acknowledging Ms. Ebone Carrington, Chief Executive Officer and Philip Cooke, Associate Director, Public Affairs for always doing an excellent job and making the patient's experience a top priority. Ms. Stenbridge shared the following highlights:

- Harlem's infectious Disease Division received an unexpected notice of award from Public Health Solutions, Master Contractor for the New York City Department of Health and Mental Hygiene from City Council as designated funding to provide prevention, education, outreach and support services that support a statewide plan to decrease new HIV infections.
- NYC Health + Hospitals/Harlem was also selected to participate in the Historic National Institute of Health's Precision Medicine Initiative. This study will help to improve health outcomes nationally.
- Announced the Cooper Hewitt Smithsonian Design Museum selected the Vertis Hayes Mural entitled "The Pursuit of Happiness" which graces the facade of The Mural Pavilion at NYC Health + Hospitals/Harlem to be featured in their Exhibit "By The People: Designing A Better America."
- Noted the facility's strategic priority is to improve the Patient Experience, increase access, increase market share and outreach.
- Reported that the patient care committee of the CAB works closely with the hospital's Patient Experience Officer and Director of Guest Relations to serve as secret shoppers. Continued and noted that members of the CAB give real time reports on the Patient Experience.
- Reported that the CAB actively attends monthly hospital committee meetings such as: Patient Advocacy Committee, Patient Safety Committee, Patient Experience Committee Emergency Preparedness, Medical/Dental Executive Committee

Ms. Stenbridge concluded her report by stating that "2016 was a great year, filled with obtaining knowledge, growth and accomplishments." Ms. Stenbridge added that the Harlem CAB's Annual Public Meeting focused on understanding the "Roadmap to Mental Health." She closed by asking members of the Harlem CAB to stand.

OLD BUSINESS**NEW BUSINESS****ADJOURNMENT**

The meeting was adjourned at 6:10 PM.

REPORT TO THE COMMUNITY RELATIONS COMMITTEE OF THE HEALTH + HOSPITALS BOARD OF DIRECTORS

NYC HEALTH + HOSPITALS/CONEY ISLAND COMMUNITY ADVISORY BOARD

I. COMMUNITY NEEDS

1. What are the most significant health care service needs or concerns of your community/communities?

- A. *NYC Health + Hospitals/Coney Island to become a Level one Trauma Center.*
- B. *Continue to improve the level of community satisfaction and patient satisfaction.*
- C. *Expand access to specialty geriatric medical care services for Southern Brooklyn.*
- D. *Continued improvement to ensure the community's medical needs are addressed which includes heart disease, diabetes, obesity, cancer, smoking and high blood pressure.*
- E. *Partnerships with local authorities and community groups to deal with the gun violence in the community.*
- F. *Continue to provide disease management and health education classes in the community to ensure highest level of care.*
- G. *Preventative drug program to educate the community on the dangers of addiction to opioids.*

2. How were these needs/concerns identified? (Please check all that apply).

- Community Board(s) meetings
- Needs Assessments
- Reports from Community Organizations
- Surveys
- Other Public Meetings
- Community Health Profile Data
- Other Activities (please list)

3. Is your facility leadership addressing these needs/concerns?

yes no

➤ If yes, please give examples of what the facility leadership is doing.

A. *The Emergency department continues to make enhancements to operations and academics including a state-of-the-art Emergency Room.*

New initiatives currently in place:

Operational:

- *Fully operational Resuscitation Suite*
- *Creation of a Critical Care Zone within the ED footprint*
- *Creation of a Trauma-Resuscitation Electronic Medical Record Documentation Note*
- *Massive transfusion protocol in place*
- *Increased trauma use of trauma activations based on Mechanism of Injury identified at triage or EMS notification*
- *Creation of a Resuscitation Team Leader RN and Critical Care RN Team*
- *Tracking response times for trauma activations*
- *Partnership with FDNY EMS leadership and new initiatives to decrease ambulance TAT*

Academic:

- *Newly hired Physician Director of Ultrasound for faculty and resident credentialing in Trauma FAST examinations and all aspects of point of care ultrasound*
- *Newly hired Physician Director of the Pediatric Emergency Services responsible for Pediatric Trauma-Resuscitation and all aspects of Pediatric ED Care*
- *Chairman of Emergency Services is an American College of Surgeons ATLS instructor and serves as faculty liaison to Trauma Surgery*
- *Expansion of ED residency program to 16 residents currently with expansion planned pending ACGME certification August 2017*
- *RN Education, Training, and Competency for Invasive Hemodynamic Monitoring (CVP, Arterial)*
- *New Emergency Medicine Addiction Fellowship Program*

New initiatives in progress:

Operational:

- *Developing I-Stat Point of Care lab testing to improve care during Trauma-Resuscitations*
- *Creating a Trauma Consultation Service to improve patient care with special attention to Geriatric Trauma*
- *New Needs Request for FY 2018: 2 Trauma Stretchers*
- *Developing a Trauma Registry to capture all traumatic injuries*
- *FEMA Grant new building- design reflective of a state of the art Emergency Department*

Academic:

- *Creating a Research Program focused on Trauma with the National Alliance of Research Associates Programs (NARAP)*

B. *Hospital leadership continues to work on enhancing the patients' experience by developing an environment where they feel safe, welcomed and cared for. The following programs are ongoing or have been put in place to enhance the patients experience:*

- *HCAHPS Reporting – monthly meetings held with leaders, managers and staff*
- *White Board Pilot – provides improved communication to patients in regards to their care and their care givers*
- *Patient Experience Committee – monthly meetings held to share best practices*
- *Pulse Survey – provides real-time feedback from patients to Nursing*
- *Ongoing care checklist – developed a discharge checklist for patients*
- *Birthday cards – delivered to patients*
- *Thank you cards – provided to all patients at discharge*
- *Patient Experience Board – feedback provided from patients about staff and services*
- *Patient Experience Scripts - developed during crucial patient touchpoints with Environmental Services and Dietary staff*
- *Teambuilding – to identify gaps, best practices and define/improve Role Clarity with Hospital Police and Nursing*
- *Empathy Training – developed and facilitated pilot version of Empathy Training Program – will be scaled down to Emergency department staff.*
- *Physician Engagement – focus groups conducted with Residents and results will be used to build improvement plans*
- *ED Post Discharge Survey Calls – how to enhance service provided*

- *Patient involvement survey provided to admitted patients by Patient Relations Department and feedback are provided to the interdisciplinary team*
- *Volunteer Program – provide comfort services to patients e.g. reading, hair care, music, activities and games*
- *Monthly Community Board meetings attended by Senior leadership*
- *Executive walk rounds on different units*

Additional Programs, Grants, Awards, Accreditations, Services, and Recognitions Implemented or Received:

- *EPIC – electronic medical record*
 - *MyChart – increased access to medical information including two way communication with medical team*
 - *NICU Grant to purchase mamaRoos swings*
 - *Gold Plus Quality Achievement Award received by Stroke Team*
 - *Leaders in LGBTQ designation*
 - *Lactation lounge on-site*
 - *Insurance options: MetroPlus and HHC options*
 - *Immigration Privacy status*
 - *Active Shooter trainings for staff*
 - *Participation in community meetings hosted by local elected officials, police department, etc.*
 - *A three (3) year accreditation for Internal Medicine and an initial accreditation for OB/GYN Residency Programs from Accreditation Council for Graduate Medical Education (ACGME)*
 - *A full accreditation for Emergency Medicine, Pediatrics and OB/GYN Residency Programs from American Osteopathic Association*
 - *First hospital in NYC to receive the “Gold” Safe Sleep Certification*
 - *Recognized as high performing hospital for Heart Failure care and COPD care by U.S. News & World Report*
- C. *The Ambulatory Care department created a new Geriatric Psychiatric service to address the behavioral health needs of the geriatric population. The program is available every other Wednesday. Ambulatory Care continues to operate seven days a week with extended hours Monday through Friday. A geriatric specialist is also available in the clinic.*
- D. *Senior leadership continues to improve the quality of care by recruiting new leaders to the NYC Health + Hospitals/Coney Island Team. As a result, a new Chief of Podiatry, board certified in Podiatric Surgery*

and a new Chief of Cardiology, board certified in Internal Medicine, Cardiovascular Disease and Nuclear Cardiology were hired.

- E. The hospital partnered with local high schools to work with students between the ages of 14 and 18 years to provide a positive influence. The students volunteered their time and received mentorship from staff and attended workshops on and off-site.*
- F. Monthly community outreach events are held at the hospital and at various off-site locations. The hospital provides blood pressure screenings, heart health lectures, healthy eating tips, stroke education and presentations. Monthly diabetic workshops are also conducted through the Diabetes Support Group and the hospital has partnered with Moving for Life to improve the quality of life, speed up recovery and reduce the recurrence of cancer through dance and exercise. Community outreach is provided at various locations:*
- o Local senior centers*
 - o Community Health Fairs*
 - o Kingsborough Community College*
 - o Borough President's Office*
 - o Councilman Treyger's community Events*
 - o Senator Golden's community Events*
 - o Chinese American Social Service Center*
 - o Marlboro Community*
 - o Homecrest Community*
 - o Gravesend Community - Hope Day*
 - o Jewish Association Serving the Aging (JASA) Community*
 - o Public Schools*
- G. NYC Health + Hospitals/Coney Island Chemical Dependency (CD) programs have distributed 742 naloxone overdose prevention kits and overdose prevention training. Overdose prevention education and training is now fully integrated into both the CD Outpatient and Inpatient detox programs. Twenty-three (23) patients reported back that they have used the kits to reverse an overdose and saved a life. For the last quarter April – June 2017, 185 kits were distributed from the Outpatient program. During that period 8 reported overdoses which is the highest number reported to date. Recent community outreach included:*
- o Kingsborough Community College Health Fair*
 - o Marine Park Community Health Forum*
 - o Brooklyn Borough Hall*

II. FACILITY'S PRIORITIES

1. What are the facility's strategic priorities?

- A. *Diabetes – Registry and Support Group*
- B. *Cardiovascular Disease, Hypertension & Cholesterol – management & care transition and a cardiovascular registry*
- C. *Cancer – Palliative Care and Screenings*
- D. *In collaboration with Northwell, while restoring our Blood Bank status, we are also enhancing our laboratory services*
- E. *Improve patient flow*
- F. *In Primary Care, creating a patient friendly environment to increase access and membership*
- G. *Geriatric center of excellence – taking care of our elderly and frail population*
- H. *Conversion of self-pay to enrollment in an insurance plan offered*
- I. *Continue to work on development of the new clinical services structure*

2. Describe how the CAB provides input into the development of the facility's strategic priorities?

The CAB members represent the views of the community in the health care facility's decision making process to ensure access to the best possible medical care in their communities. They provide vital insight on the development of facility plans and programs, as well as keep the community informed of NYC Health + Hospitals' goals and objectives.

- *A CHNA survey was administered anonymously and confidentially to each CAB member. They were asked to indicate the relative importance of each of the 13 identified community health needs in their community.*
- *Selected CAB members participated in a Focus Group hosted by NYC Health + Hospitals Office of Diversity and Inclusion in collaboration with The Fenway Institute/National LGBT Health Education Center. It is part of an ongoing effort to create a more welcoming and inclusive environment.*
- *Selected CAB members attended a community forum at the NY Aquarium sponsored by NYC Health + Hospitals. Community members were asked about health care needs and concerns of the community.*
- *The CAB has a representative on the hospital's Patient Safety Committee.*
- *The CAB members participated in Advocacy Day in Albany.*
- *The CAB members attended the Annual Public Hearing for Brooklyn. Testimony was given by the CAB Chairperson.*

3. Have CAB members been informed of and provided input into the facility's plans for new programs and modernization projects, prior to their implementation?

yes

no

III. PATIENTS'/RESIDENTS' EXPERIENCES

1. Patient safety and patient satisfaction are a priority of the facility. Are reports on these subjects provided on a regular basis to the Community Advisory Board?

Yes

No

2. What are the most frequent complaints raised by patients/residents?

The most frequent complaints raised by patients/residents are:

A. *The length of time it takes for an appointment at the clinic.*

B. *The length of time it takes to be seen by a doctor when at the clinic.*

3. What are the most frequent compliments provided by patients/residents?

The most frequent compliment provided by patients/residents are:

A. *The improvement in the operations in the Emergency department.*

B. *The extended evening hours in the clinic.*

4. (For hospitals and D&TCs only). Are periodic reports or updates on the facility's access indicators such as appointment availability and cycle times/wait time(s) provided by facility leadership at CAB meetings?

Yes

No

5. From the CAB's perspective, rate the facility in the following areas:

	Poor	Satisfactory	Very good
Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Condition	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

6. Is signage about HHC's Options Program posted in areas that have high traffic?

Yes

No

IV. CAB ORGANIZATION, STRUCTURE AND RESPONSIBILITIES

1. According to the CAB's By-laws, what is the CAB's total allowable membership? 21

The count above includes the total allowable voting members only. (Six Ex-officio members are not included).

2. What are current numbers of members? 20 What are current numbers of vacancies? 1

3. What were the membership recruitment activities conducted by CAB this year?

The CAB members canvassed community based meetings and events. Community outreach was made to individuals who represent the demographics of the greater Coney Island community. Some areas include but are not limited to Sheepshead Bay, Brighton Beach, Gravesend and Manhattan Beach.

4. Do the CAB's recruitment efforts include outreach to new population groups in the community?

Yes

No

5. Does the CAB have an active working committee structure? Please list committees and briefly describe their responsibilities.

The CAB has the following active committees:

- a. Executive Committee - that acts on behalf of the CAB between meetings, and keeps the CAB abreast of any proceedings.
- b. Legislative Committee - discusses Hospital legislative priorities and develops strategies to support those priorities.
- c. Membership Committee - reviews new membership applications and makes recommendations to the BOARD. Also, reviews status of all members to ensure they are in good standing.
- d. Community Relations Committee - advise Board on issues that pertain to the community outreach activities. In addition, the Committee maintains a positive relationship between the hospital and the community.
- e. Patient Care/Relation Committee has been established to monitor patient services.

f. Nominating Committee – nominates voting members of the Board for each office.

6. Do Community (planning) Board representatives on the CAB communicate the facility's needs or concerns with local Community Board(s)?

Yes No

a. If yes, please describe actions taken.

All needs and/or concerns are shared with the local elected officials and community leaders and are relayed to the appropriate and responsible parties within local community based organizations.

7. Do Community Planning Board designees provide information at CAB meetings concerning the Community Board's(s') priorities or healthcare related issues brought to Community Board meetings?

Yes No

8. Did the CAB convene an Annual Public/"Community Health meeting" with the general public this year?

yes no

9. Did the CAB host or participate with the facility's leadership in a legislative forum this year?

yes no

10. Did a representative of the CAB provide testimony at HHC's Board of Directors' Annual Public Meeting?

yes no

a. If so, were the issues subsequently addressed? Yes

11. Describe the CAB's involvement in its facility's outreach activities?

Through their contacts at community based organizations, CAB members assist in identifying locations where health screenings and health education can be provided. They help with the coordination of some events as well as participate.

12. Does your CAB's Chairperson or alternate designee attend the Council of Community Advisory Boards meetings?

yes no

13. Did your CAB participate in last year's Council of CABs Annual Conference?

yes no

14. How would you describe the current level of technical and strategic assistance provided to the CAB by the Office of Intergovernmental Relations?

not enough just right

If not enough, what assistance would you need?

v. ADDITIONAL TOPICS FOR DISCUSSION (OPTIONAL)

Are there additional topics that the CAB would like to discuss with the Board of Directors' Community Relations Committee? Please list the topics.

1. *The need for an Interventional Cardiology Cath Lab and Electrophysiology lab*
2. *Increase oncology services*

NOTE: The comments in this report represent the consensus of the entire membership and have been shared with the facility administration.

Signatures:

Rosanne DeGennaro, *Rosanne DeGennaro*

CAB Chairperson
Date: *August 24, 2018*

Anthony Rajkumar, *Anthony Rajkumar*

Chief Executive Officer
Date: *8/25/17*



**2017 REPORT TO THE COMMUNITY RELATIONS COMMITTEE
OF THE HEALTH + HOSPITALS BOARD OF DIRECTORS**

**NYC HEALTH + HOSPITALS/JACOBI
COMMUNITY ADVISORY BOARD**

I. COMMUNITY NEEDS

1. What are the most significant health care service needs or concerns of your community/communities?

Obesity, diabetes, asthma, mental health/behavioral issues, gun violence and opioid abuse continue to be the most significant health concern affecting our community.

2. How were these needs/concerns identified? (Please check all that apply).

- Community Board(s) meetings Other Public Meetings
 Needs Assessments* Surveys Community Health Profile Data
 Reports from Community Organizations

Other Activities (please list)

- Health Awareness Events
- CAB sponsored Annual Mental Health Conference, this year with expert guest speakers addressing approximately 100 people (staff, patients and community members) on the issue of safe and supportive housing for the mentally ill. Ann Sullivan, MD, Commissioner, NYC Office of Mental Health, provided opening remarks.

3. Is your facility leadership addressing these needs/concerns?

- yes no

a. If yes, please give examples of what the facility leadership is doing.

Facility leadership addresses these concerns by health awareness events, Stop the Bleed workshops, partnership with Senator Klein to establish the first hospital-based cure violence program in NYS, and opioid abuse awareness and prevention programs. In addition, health messages are communicated in public areas of the facility via its flatscreen system, health education materials (and free screenings) are available at the facility's Farmer's Market. Also, this is the eighth year that Jacobi has sponsored a Community Garden on the Jacobi campus with over 130 individuals growing their own vegetables, fruits and herbs. Those involved in the Community Garden include community members, patients and staff. Garden beds have been allocated to patient/staff partnerships, providing an opportunity for quality recreation and patient education. Participating patient areas include: Breast Cancer Survivors Support Group, Behavioral Health Services, Family Weight Management and Comprehensive Alcohol Treatment Center. The Family Weight Management Group meets at the Community Garden weekly to discuss nutrition and engage patients in exercise.

II. FACILITY'S PRIORITIES

1. What are the facility's strategic priorities?

Jacobi is committed to the health and well-being of all New Yorkers and offers a wide range of high quality and affordable health care services to keep patients healthy and to address the needs of the diverse populations of the Bronx. The facility's strategic priorities include improving the patient experience; high standards for patient safety; developing a diversified payor mix essential for fiscal responsibility; and the continued improvement of the quality, safety and efficiency of our services.

2. Describe how the CAB provides input into the development of the facility's strategic priorities?

The CAB is provided presentations directly from leadership, including ongoing updates and information from the Chief Executive Officer, and whenever appropriate from the Medical Director, Chief Nursing Officer, Senior Leadership, Chief Financial Officer, Department Chairs, Physicians, and Administrators. These sessions keep CAB members

informed and provide opportunities for them to raise questions and have issues to be addressed.

3. Have CAB members been informed of and provided input into the facility's plans for new programs and modernization projects, prior to their implementation?

yes

no

III. PATIENTS'/RESIDENTS' EXPERIENCES

1. Patient safety and patient satisfaction are a priority of the facility. Are reports on these subjects provided on a regular basis to the Community Advisory Board?

Yes

No

2. What are the most frequent complaints raised by patients/residents?

Most frequent complaints raised include wait time in the ER for relatively minor complaints and patient access to care.

3. What are the most frequent compliments provided by patients/residents?

Patients frequently compliment the medical staff on the medical attention they receive, the comprehensiveness of the care, and the kindness of staff. Patients also compliment the facility on its unique services. Patients and visitors frequently comment on how attractive the facility is, from the renovated buildings to the exterior grounds that has new lighting, security systems, pathways, plantings, and benches.

4. (For hospitals and D&TCs only). Are periodic reports or updates on the facility's access indicators such as appointment availability and cycle times/wait time(s) provided by facility leadership at CAB meetings?

Yes

No

5. From the CAB's perspective, rate the facility in the following areas:

	Poor	Satisfactory	Very good
Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	X
Condition	<input type="checkbox"/>	<input type="checkbox"/>	X
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	X

6. Is signage about HHC's Options Program posted in areas that have high traffic?

X Yes No

IV. CAB ORGANIZATION, STRUCTURE AND RESPONSIBILITIES

1. According to the CAB's By-laws, what is the CAB's total allowable membership? 20

2. What are current numbers of members? 16 What are current numbers of vacancies? 4

Please note, 2 of the 4 openings have individuals currently under review to join the CAB.

3. What were the membership recruitment activities conducted by CAB this year?

In general, CAB members promote the CAB in the community and interested individuals are invited to attend meetings as guests. Posters, flatscreen shown throughout hospital lobbies and ads in local newspapers promote the CAB and CAB sponsored events. These events, open to the public, bring attention to the role of the CAB – for example, the annual September 11th Memorial Procession, the Legislative Forum, and the annual Mental Health Conference.

4. Do the CAB's recruitment efforts include outreach to new population groups in the community?

X Yes No

9. Did the CAB host or participate with the facility's leadership in a legislative forum this year?

yes no

10. Did a representative of the CAB provide testimony at HHC's Board of Directors' Annual Public Meeting?

yes no

CAB members did not provide testimony but were present.

a. If so, were the issues subsequently addressed?

11. Describe the CAB's involvement in its facility's outreach activities?

CAB members attend and support facility events, including Ribbon Cuttings, health fairs, health campaigns and hospital conferences, such as the Annual Social Work Disaster Response Conference. They also are involved in outreach activities by sharing information and distributing information about the hospital (new programs, services, events, etc.) in the community.

12. Does your CAB's Chairperson or alternate designee attend the Council of Community Advisory Boards meetings?

yes no

13. Did your CAB participate in last year's Council of CABs Annual Conference?

yes no

14. How would you describe the current level of technical and strategic assistance provided to the CAB by the Office of Intergovernmental Relations?

not enough just right

If not enough, what assistance would you need?

NOTE: The comments in this report represent the consensus of the entire membership and have been shared with the facility administration.

Signatures:

CAB
Chairperson: Silvio Maggella / RB
Date: 8/24/17

Executive
Director: Chris / Mark
Date: Aug 24, 2017



REPORT TO THE COMMUNITY RELATIONS COMMITTEE OF THE HEALTH + HOSPITALS BOARD OF DIRECTORS

NYC Health + Hospitals/North Central Bronx COMMUNITY ADVISORY BOARD

I. COMMUNITY NEEDS

- What are the most significant health care service needs or concerns of your community/communities?

The most significant health concerns affecting the NYC Health + Hospitals/North Central Bronx Community continue to be diabetes, hypertension, heart disease, obesity, mental illness and asthma.

- How were these needs/concerns identified? (Please check all that apply).

X Community Board(s) meetings

Other Public Meetings

X Needs Assessments

X Surveys

Community Health Profile Data

Reports from Community Organizations

X Other Activities (please list): health

awareness events that include blood pressure screening, nutrition education for obesity, diabetes and heart disease, family planning outreach for preconception education and STIs.

- Is your facility leadership addressing these needs/concerns?

X yes

no

- a. If yes, please give examples of what the facility leadership is doing.

Leadership addresses these concerns by advocating and supporting departmental engagement in community outreach activities. This includes sponsoring health fairs at the facility, in the community, and at school and faith-based events. Clinical and administrative staff work together to disseminate education material, provide information on services and offer free screenings and referrals. Health and nutrition education are provide during the annual Farmer’s events.

II. FACILITY'S PRIORITIES

- What are the facility's strategic priorities?

The facility's strategic priorities include patient safety, service excellence, increasing access to care and financial sustainability. NYC Health + Hospitals/North Central Bronx strives to become one of the safest hospitals in the nation and conducts daily facility huddles to improve patient safety. In August 2017, we reached a milestone 365 days without catheter-associated urinary tract infections

- Describe how the CAB provides input into the development of the facility's strategic priorities?

CAB members, consisting of Bronx residents, patients and community workers, provide vital insight on the development of facility plans and programs, as well as keep the community informed of NYC Health + Hospitals' goals and objectives. At each CAB meeting, Executive Leadership, Chief Medical Officer, Chief Financial Officer, Chief Nursing Officer and other Administrative leaders provide CAB members with information on relevant healthcare issues, services and events. CAB members are given the opportunity to raise questions and issues or concerns they want to be addressed.

- Have CAB members been informed of and provided input into the facility's plans for new programs and modernization projects, prior to their implementation?

Yes

No

III. PATIENTS'/RESIDENTS' EXPERIENCES

- Patient safety and patient satisfaction are a priority of the facility. Are reports on these subjects provided on a regular basis to the Community Advisory Board?

Yes

No

- What are the most frequent complaints raised by patients/residents?

The most frequent complaints raised by patients are related to communication issues.

- What are the most frequent compliments provided by patients/residents?

The most frequent compliments provided by patients are related to the expertise of clinical staff and the quality of care received. Patients often remark that they feel like family and that North Central Bronx has served generations of their families.

- (For hospitals and D&TCs only). Are periodic reports or updates on the facility's access indicators such as appointment availability and cycle times/wait time(s) provided by facility leadership at CAB meetings?

X Yes No

- From the CAB's perspective, rate the facility in the following areas:

	Poor	Satisfactory	Very good
Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	X
Condition	<input type="checkbox"/>	X	<input type="checkbox"/>
Appearance	<input type="checkbox"/>	X	<input type="checkbox"/>

- Is signage about HHC's Options Program posted in areas that have high traffic?

X Yes No

IV. CAB ORGANIZATION, STRUCTURE AND RESPONSIBILITIES

- According to the CAB's By-laws, what is the CAB's total allowable membership?
15 to 25
- What are current numbers of members? 8. What are current numbers of vacancies? 7.

- What were the membership recruitment activities conducted by CAB this year?

In the past year North Central Bronx and Jacobi CABs have worked together to attract new members of the community during health fairs and other community outreach events. NYC Health + Hospitals/North Central Bronx CAB has brought in one new member during the last year and will intensify its efforts to attract new members in the coming year.

- Do the CAB's recruitment efforts include outreach to new population groups in the community?

Yes

No

- Does the CAB have an active working committee structure? Please list committees and briefly describe their responsibilities.

During the last year, NYC Health + Hospitals/North Central Bronx CAB has spent time focusing on separating from Jacobi and becoming an independent CAB. In the coming year the CAB will continue to work with NYC Health + Hospitals' Office of Intergovernmental Affairs to establish an effective committee structure with well-defined responsibilities.

The NYC Health + Hospitals/North Central Bronx CAB has an annual calendar of regularly scheduled meetings and/or special events.

- Do Community (planning) Board representatives on the CAB communicate the facility's needs or concerns with local Community Board(s)?

Yes

No

- a. If yes, please describe actions taken.

Community Planning Board representatives on the NYC Health + Hospitals/North Central Bronx CAB receive information regarding the facility as well as NYC Health + Hospitals - i.e. services, initiatives, events, news - that they distribute at the community board meetings.

- Do Community Planning Board designees provide information at CAB meetings concerning the Community Board's(s') priorities or healthcare related issues brought to Community Board meetings?
 Yes No

- Did the CAB convene an Annual Public/"Community Health meeting" with the general public this year?
 Yes No

- Did the CAB host or participate with the facility's leadership in a legislative forum this year?
 Yes No

- Did a representative of the CAB provide testimony at HHC's Board of Directors' Annual Public Meeting?
 Yes No

- a. If so, were the issues subsequently addressed?

- Describe the CAB's involvement in its facility's outreach activities?

CAB members support the facility's outreach activities by attending Health Fairs, Flu Shots campaigns, and relevant hospital conferences and events.

- Does your CAB's Chairperson or alternate designee attend the Council of Community Advisory Boards meetings?
 Yes No

- Did your CAB participate in last year's Council of CABs Annual Conference?
 Yes No

- How would you describe the current level of technical and strategic assistance provided to the CAB by the Office of Intergovernmental Relations?

not enough just right

If not enough, what assistance would you need?

V. ADDITIONAL TOPICS FOR DISCUSSION (OPTIONAL)

Are there additional topics that the CAB would like to discuss with the Board of Directors' Community Relations Committee? Please list the topics.

- NO
-
-
-
-

NOTE: The comments in this report represent the consensus of the entire membership and have been shared with the facility administration.

Signatures:

CAB

Chairperson:

Date:



8/30/17

Executive

Director:



Date:

8/30/17



**REPORT TO THE COMMUNITY RELATIONS COMMITTEE
OF THE HEALTH + HOSPITALS BOARD OF DIRECTORS**

SEA VIEW COMMUNITY ADVISORY BOARD

PRESENTED SEPTEMBER 12, 2017

I. COMMUNITY NEEDS

1. What are the most significant health care service needs or concerns of your community/communities?

Memory Care Services and Wellness Programs

2. How were these needs/concerns identified? (Please check all that apply).

- Community Board(s) meetings Other Public Meetings
 Needs Assessments Surveys Community Health Profile Data
 Reports from Community Organizations Other Activities (please list)

3. Is your facility leadership addressing these needs/concerns?

yes no

- a. If yes, please give examples of what the facility leadership is doing.

Leadership is maintaining an “open door” policy for all residents, families, and members of the community. Leadership remains available at all times to address community and facility concerns.

II. FACILITY'S PRIORITIES

1. What are the facility's strategic priorities?

Maintain CMS 5-Star rating

Provide the highest possible level of quality care to our residents.

2. Describe how the CAB provides input into the development of the facility's strategic priorities?

We share information with our CAB on an "as needed" basis, as well as during our monthly meetings. Robust discussion with our CAB is consistently maintained.

3. Have CAB members been informed of and provided input into the facility's plans for new programs and modernization projects, prior to their implementation?

yes

no

III. PATIENTS'/RESIDENTS' EXPERIENCES

1. Patient safety and patient satisfaction are a priority of the facility. Are reports on these subjects provided on a regular basis to the Community Advisory Board?

Yes

No

2. What are the most frequent complaints raised by patients/residents?

Patients do not always agree when they are being discharged from Rehab or to home. The team goes to great efforts to fully explain clinical rationale in an effort to be as reassuring as possible.

3. What are the most frequent compliments provided by patients/residents?

A caring and professional staff continues to be our top positive feedback element. In addition, facility cleanliness and sensitivity to families is very frequently commented upon.

4. (For hospitals and D&TCs only). Are periodic reports or updates on the facility's access indicators such as appointment availability and cycle times/wait time(s) provided by facility leadership at CAB meetings?

Yes N/A No

5. From the CAB's perspective, rate the facility in the following areas:

	Poor	Satisfactory	Very good
Cleanliness	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Condition	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Appearance	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

6. Is signage about HHC's Options Program posted in areas that have high traffic?

Yes N/A No

IV. CAB ORGANIZATION, STRUCTURE AND RESPONSIBILITIES

1. According to the CAB's By-laws, what is the CAB's total allowable membership? 14

2. What are current numbers of members? 14 What are current numbers of vacancies? 0
3. What were the membership recruitment activities conducted by CAB this year?

Keeping community groups informed of our involvement with Sea View, briefing elected officials on CAB activities, and eliciting feedback from residents and families.

4. Do the CAB's recruitment efforts include outreach to new population groups in the community?
 Yes No

5. Does the CAB have an active working committee structure? Please list committees and briefly describe their responsibilities.

No

6. Do Community (planning) Board representatives on the CAB communicate the facility's needs or concerns with local Community Board(s)?
 Yes No

a. If yes, please describe actions taken.

CB members serve on CAB. They provide information to all CAB members.

7. Do Community Planning Board designees provide information at CAB meetings concerning the Community Board's(s') priorities or healthcare related issues brought to Community Board meetings?
 Yes No

8. Did the CAB convene an Annual Public/"Community Health meeting" with the general public this year?

yes

no

9. Did the CAB host or participate with the facility's leadership in a legislative forum this year?

yes

no

10. Did a representative of the CAB provide testimony at HHC's Board of Directors' Annual Public Meeting?

yes

no

a. If so, were the issues subsequently addressed?

N/A

11. Describe the CAB's involvement in its facility's outreach activities?

CAB members are devoted volunteers. If called upon, they respond willingly.

12. Does your CAB's Chairperson or alternate designee attend the Council of Community Advisory Boards meetings?

yes

no

13. Did your CAB participate in last year's Council of CABs Annual Conference?

yes

no

14. How would you describe the current level of technical and strategic assistance provided to the CAB by the Office of Intergovernmental Relations?

not enough

just right

If not enough, what assistance would you need?

V. ADDITIONAL TOPICS FOR DISCUSSION (OPTIONAL)

Are there additional topics that the CAB would like to discuss with the Board of Directors' Community Relations Committee? Please list the topics.

1. NONE
- 2.
- 3.
- 4.
- 5.

NOTE: The comments in this report represent the consensus of the entire membership and have been shared with the facility administration.

Signatures:

CAB

Chairperson:



Date:

8/11/17

Chief Executive

Officer:



Date:

8/21/17