

CAPITAL COMMITTEE

June 7, 2012

MEETING AGENDA

2:00 p.m.

125 Worth Street,
Room 532
5th Floor Board Room

CALL TO ORDER

Emily A. Youssouf

- ADOPTION OF MINUTES May 10, 2012 Emily A. Youssouf
- ASSISTANT VICE PRESIDENT'S REPORT Alfonso C. Pistone

ACTION ITEMS

- **Resolution** Iris Jimenez-Hernandez
Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to rename the Department of Dentistry and Oral Surgery at Harlem Hospital Center (the "facility") the "Dr. James E. McIntosh Department of Dentistry and Oral Surgery.

- **Resolution** Lynda Curtis
Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation" or "Licensor") to execute a license agreement with the New York Legal Assistance Group (the "Licensee" or "NYLAG") for use and occupancy of space at Coler-Goldwater Specialty Hospital and Nursing Facility (the "Facility") to provide *pro bono* legal services to patients and training to Corporation staff.

Vendex: Approved.

- **Resolution** Lynda Curtis
Authorizing the President of the New York City Health and Hospitals Corporation ("the Corporation" or "Licensor") to execute a revocable license agreement with the New York City Department of Education (the "Licensee") for its continued use and occupancy of space to operate a Licensed Practical Nurse ("LPN") training program at Coler-Goldwater Specialty Hospital and Nursing Facility, Goldwater campus (the "Facility").

- **Resolution** William Walsh
Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation" or "Licensor") to execute a revocable license agreement with General Vision Services/Cohen Fashion Optical (the "Licensee") for use and occupancy of space to operate an optical store on the campus of Jacobi Medical Center (the "Facility").

Vendex: Pending.

- **Construction Change Approval Request** **William Walsh**
Request for approval from the Capital Committee for changes exceeding the \$200,000 threshold for construction changes, in order to accomplish work needed to complete the following; Campus Site Improvements, Transportation Intermodal Facility at Jacobi Medical Center.

INFORMATION ITEMS

- **Gouverneur Healthcare Services – Major Modernization – Status Report** **Mendel Hagler**
- **Project Status Reports**
Central/North Brooklyn Health Network
Generations+/Northern Manhattan Health Network*
Queens Health Network*
* Network contains project(s) that require a delay report

OLD BUSINESS

NEW BUSINESS

ADJOURNMENT

CAPITAL COMMITTEE MEETING MINUTES

MAY 14, 2012

MINUTES

Capital Committee

Meeting Date: May 14, 2012

Time: 10:00 A.M.

Location: Board Room

Board of Directors:

Members of the Capital Committee

Emily A. Youssouf, Chair

Josephine Bolus, RN

Michael A. Stocker, MD, Chairman of the Board

Alan D. Aviles, President

HHC Staff:

Jeremy Berman – Deputy Counsel, Legal Affairs

LaRay Brown – Senior Vice President, Corporate Planning and Community Health

Deborah Cates – Chief of Staff, Office of the Chairman

Daniel Collins – Director, Coney Island Hospital

Manding Darboe – Assistant Director, Office of Facilities Development

Martin Everette – Director, Affirmative Action/Equal Opportunity Employment

Rebecca Fischer – Associate Executive Director, Bellevue Hospital Center

Jonathan Goldstein – Senior Consultant, Corporate Planning

Anthony Gounaris – Senior Project Manager, Office of Facilities Development

Karl Gray – Associate Director, Elmhurst Hospital Center

Lisa Lee – Deputy Inspector General, Office of the Inspector General

Patricia Lockhart – Secretary to the Corporation, Office of the Chairman

Nini Mar – Director, Corporate Reimbursement

Kathleen McGrath – Senior Director, Communications and Marketing

Dean Moskos – Director, Office of Facilities Development

Irina Munarova – Assistant Director, Corporate Planning

Seth Narine – Coordinating Manager, Bellevue Hospital Center

Dean Pearce – Senior Director, Office of Facilities Development

Alfonso Pistone – Assistant Vice President, Office of Facilities Development

Marsha Powell – Director, Facilities Development

Michael Rawlings – Associate Executive Director, Bellevue Hospital Center

Salvatore Russo – Senior Vice President & General Counsel, Legal Affairs

David Tannenholz – Associate Executive Director, Coney Island Hospital

Cyril Toussaint – Director, Office of Facilities Development

Manasses Williams – Director, Affirmative Action/Equal Opportunity Employment

Dion Wilson – Assistant Director, Office of Facilities Development

Elizabeth Youngbar – Assistant Director, Office of Facilities Development

Frank Zanghi – Supervising Confidential Examiner, Internal Audits

Other Attendees:

Edgardo Caban – New York Power Authority

Ke He – New York Power Authority

Megan Meagher – New York City Office of Management and Budget

John Pasicznyk – Managing Director, Construction and Metro New York Operations, Dormitory
Authority of the State of New York

Vadim Sarkysants – New York City Police Department

CALL TO ORDER

The meeting was called to order by Emily A. Youssouf, Capital Committee Chairman, at 10:06 A.M.

On a motion by Ms. Youssouf, which was duly seconded, the Capital Committee adopted the minutes of March 1, 2012.

ASSISTANT VICE PRESIDENT'S REPORT

Alfonso Pistone, Assistant Vice President, Office of Facilities Development, advised that there would be four (4) action items on the meeting agenda, the first two involving the disposition of a parcel of property, currently used as a parking lot, on the northern side of 99th Street and 2nd Avenue on the campus of Metropolitan Hospital Center. A development is planned to support the reasonable discharge of residents in shelled nursing facilities into community based non-institutional settings, by HHC, and the Department of Health. The two resolutions presented for consideration are for the sublease of the parking lot to a developer, Metro 99 Housing Development Fund, and a license agreement that will allow for the short term loan of the property to the developer so that they can expeditiously proceed with preliminary construction tasks such as on site preparation, soil preparation, etc., while it continues to engage permanent lending institutions for the remaining project funds. The Corporation will then receive its initial loan made to the developer.

The Corporation caused to have a public hearing on the disposition of the parcel, in accordance with its enabling legislation on May 9, 2012, and members of the public were given an opportunity to voice their opinion on the project at that time. It is anticipated that the project will be completed by the end of 2013. The building is anticipated to be a ten story structure having approximately 150,000 square-feet suitable for approximately 176 units of housing. Further details of the project will be provided during presentation of the action items.

The third item for consideration is a new license agreement with the New York City Police Department to operate communications equipment from the rooftop of Elmhurst Hospital Center.

The fourth agenda item is to authorize a turn-key project for the replacement of existing boilers for new energy efficient units at Coney Island Hospital, a project that will be managed by the New York Power Authority. The existing boilers are well beyond their useful life, are operating inefficiently and will not comply with strict new air emission standards that will become effective in 2014. The new units are expected to reduce operating costs by at least \$1.2 million annually, and reduce carbon emissions by 11.1 tons, or the equivalent elimination or approximately 1,830 cars from operation.

The project has been publicly bid and the lowest responsible bid has been received at \$7 million. The project's engineering estimate was \$8 million, and the \$1 million difference is largely attributed as a result of the soft construction costs, a noted trend that is being seen generally in bid results that have been coming in far below estimates, approximately 10-20%.

In old business there will be a brief update on the status of the Greenpoint Clinic, the EEO presentation by Michael Clay of DASNY, and a status of the physician parking around the perimeter of the North General Hospital.

There is also a 2012 Air Conditioning Readiness Report included in the package, which lists nine (9) locations as "conditional" and zero (0) as "poor". In most of the "conditional" cases remedial work is being performed to address the conditions and there are no issues anticipated throughout the upcoming cooling season.

This concluded the Assistant Vice President's Report.

ACTION ITEMS

- **Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to execute a license agreement with MetroHealth Homes Housing Development Fund Corporation (the "HDFC") for the early stages of construction of housing for low income elderly and/or disabled persons on the campus of Metropolitan Hospital Center (the "Facility") using funds advanced by the Corporation subject to reimbursement upon execution of a long term lease with the HDFC.**
- **Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to execute a sublease with MetroHealth Homes Housing Development Fund Corporation (the "HDFC") as nominee for Metro East 99 Street LLC (the "LLC" in such capacities being referred to together with the HDFC, as the "Tenant") for the development of housing for low income elderly and/or disabled persons on the campus of Metropolitan Hospital Center (the "Facility").**

LaRay Brown, Senior Vice President, Corporate Planning, Community Health and Intergovernmental Relations, read both items into the record.

Ms. Brown advised that the sublease agreement would grant the developer the right to develop 176 apartments on a parcel of land on Metropolitan Hospital's campus. She noted that 175 of those units would provide housing for current Coler-Goldwater skilled nursing facility (SNF) residents who no longer require SNF level of care and who can reside in the community. The second resolution, a license agreement, allows for expeditious studies and pre-construction work to be done on East 99th Street parcel, prior to the execution of the sublease agreement, while financing for the project is finalized. This is necessary because the project must be completed by the end of 2013. Ms. Brown noted that closing on the sublease agreement would occur by September 2012. However, the extra months for remediation and early construction work provided by the license agreement are necessary for the project to meet required deadlines for completion and tenancy.

Ms. Youssouf asked how the developer was selected and by whom. Ms. Brown advised that HHC had selected the developer and explained that in 2008/2009 in response to a Health Care Efficiency and Affordability Law of New York (HEAL NY) Request for Grant Applications, HHC had invited a number of experienced housing developers to submit proposals concerning the

development of several HHC parcels for affordable and accessible housing for HHC's long term care facilities' residents. While none of the proposed projects were funded through the HEAL NY grant, HHC remained in contact with all of the developers that were part of that initiative. The developer selected for this project was among that group, and had expressed an interest in developing this very parcel of land and another on Metropolitan Hospital's campus. This developer is also very well regarded by HPD/HDC - the principle financier of this project, and they have a proven track record from developing senior housing on the Kings County campus. It was determined that without a second solicitation, this developer was appropriate for this important project. Ms. Youssouf asked that the developer be present at the full of the Board meeting, so that all members of the Board may be privy to all of the project details, given the significance of this project to HHC and the City.

Mrs. Bolus asked about the specific wording in the resolution of the license agreement that read, "The Corporation shall advance funding for the construction to the HDPC upon the Corporation's approval of invoices (which approval shall not be unreasonably withheld) describing in detail the work completed and the cost of such work by trade and professional." Ms. Brown noted that this is unique language that was added to protect the Corporation because the license agreement is covering a period of time prior to the real estate closing, which is when all financing will be secured and finalized. She explained that the Board is, in fact, being asked to do something out of the ordinary due to the time constraints related to the project. The Committee is being asked to allow the President to provide what is tantamount to a loan that will be repaid at the closing, and which will allow for remediation, site preparation and other work to begin prior to closing in order for the project's deadlines to be achieved. This project must be completed in order that Coler-Goldwater residents who need housing can be relocated when the current Goldwater operations move to the Goldwater North campus in Harlem.

Ms. Brown directed the Committee members' attention to the Summary of Economic Terms, which outlines funding. She advised that the project has a \$51.8 million budget funded through a combination of mortgages and tax credit funding. There is also \$7.3 million State Medicaid Redesign funding. This is important, because this is the first time the state has put money towards the construction of this type of development. She advised that, given the total amount of funds that will be available at closing, there is more than enough funding to repay the \$2.8 million loan that the Board authorizes.

Ms. Brown noted that Jeremy Berman, Deputy General Counsel, has played an integral role in designing the agreement between HHC and the developer, as well as formulating the role that HDC and HPD will play in overseeing and approving the early construction work, to minimize risk to HHC. Work will be monitored by HPD, HDC, as well as the banks. HPD/HDC will be authorizing that the work is completed so there will be no risk that the expenditure of dollars that HHC lends during the interim period will not be monitored by all of the financing parties and will conform with all requirements for the use of funds from all sources.

Mrs. Bolus asked who would be responsible for the three (3) mortgages listed in the budget section. Ms. Brown explained that HHC does not hold those mortgages, the developer does, and that while it may look complicated, it is a pretty standard financing arrangement for affordable housing in New York City.

Mrs. Bolus asked what NYSEDA, listed as a funding source, stands for, and whether they are providing any funding. Ms. Brown responded that NYSEDA stood for the New York State Energy Research and Development Authority and that NYSEDA has been listed in error, as it is not a funding source.

Mrs. Bolus asked for clarification of a section of the sublease agreement that notes that the cost of utilities will be passed on to the tenants. Ms. Brown confirmed that utilities will be paid for by the tenants; and she explained that all apartments will be subsidized under HUD Section 8 rental assistance. All residents will be provided information that explains how utilities will be paid for and that the apartments will be sub-metered so that tenants are responsible for their own utilities and are aware of how much they spend. Ms. Youssouf noted that this is frequently done in affordable housing to prevent overuse.

Mrs. Bolus asked about the live-in superintendent. Ms. Brown explained that the on-site superintendent will be there to assure that apartments are maintained in good order and to provide assistance if tenants need small repairs. There will also be desk staff on duty for extended hours, but not seven days/24 hours. Unless the tenants choose otherwise, Ms. Brown noted, all health care will be provided by Metropolitan Hospital Center. In addition, HHC's Home Care Agency will also be available to provide such services as needed. The Coler-Goldwater SNF residents who will move into this development are Medicaid beneficiaries. One of the reasons for locating this development on Metropolitan's campus is that it affords the facility with a patient base that will benefit from the hospital's centers of excellence - physical rehabilitation, mental health programs, primary care services, and an array of ambulatory care services.

Mrs. Bolus asked if the equipment at the Coler-Goldwater facility will be moved over to the 99th Street building. Ms. Brown asked whether Mrs. Bolus was referring to Goldwater North, as no equipment from Goldwater was being moved to the housing development. In the case of Goldwater North, she explained, the relocation of existing equipment would probably be minimal, however decommissioning of the Goldwater campus is being discussed. Ms. Brown noted that, in terms of the housing, it had been estimated that each apartment would need approximately \$2,500 for basic furnishings and household supplies. She said that the Human Resources Administration and other social services agencies would be approached to provide funding for these things.

Mrs. Bolus asked if the apartments would have special design features to address the needs of elderly or disabled individuals. Ms. Brown responded that the apartments were being designed for tenants with special needs, including those who require wheelchairs. She provided some examples: windows will be lower so that tenants in wheelchairs had visibility, electrical outlets will be higher on walls for easier access, sinks and counters will be positioned for ease of access, bathrooms will be designed for wheelchairs; and various other special design elements are being explored based on input received from a Coler-Goldwater resident focus group.

Ms. Youssouf asked whether HDC had issued a letter of intent. Mr. Berman said that the parties are awaiting a letter from the State Department of Health.

Ms. Youssouf asked what the interest rate would be on the \$7.3 million in MRT funds. Ms. Brown said that she believed there is no interest rate, the \$7.3 million is a grant that is being

structured as a loan for HPD's purposes. However, Ms. Brown noted that she would confirm this with HPD.

Ms. Youssouf asked that prior to HHC advancing the \$2.8 million loan, it be determined how the reimbursement will be handled. Ms. Brown advised that prior to the full Board meeting, HDC and HHC staff will have determined how that will be handled.

Ms. Youssouf asked that the developer bring the site plans to the Board meeting to share with all members of the Board.

Mrs. Bolus asked if the staff at Coler-Goldwater would be traveling with the patients to the new site. Ms. Brown explained that this is housing and not a nursing facility. She said it is expected that tenants will obtain services outside of their homes, except for the few that may need home care. Therefore, there is not an expectation that the Coler-Goldwater SNF staff will accompany residents once they are discharged. Support services, such as meal assistance, will depend on individual needs. She added that there is space on site that can be made available to social service organizations. However the developer has been told that they are not to have a competitive health care provider on site. It is hoped that the tenants will take advantage of having Metropolitan located nearby for all of their health care needs. Ms. Brown noted that the original tenancy would be comprised of Coler-Goldwater SNF residents who no longer require a long-term care facility and who could benefit from discharge into affordable housing. However over time, new tenants would come from other HHC facilities; patients for whom continued stays in hospitals or nursing homes could be reduced with affordable, accessible housing alternatives.

Ms. Youssouf asked if occupancy of the available on-site space is something HHC would have a say in. Ms. Brown said yes, and advised that because many of the residents are seniors, it is possible that a senior center may eventually have an outpost in that building - an example of a non-competitive, but complimentary program. Ms. Youssouf asked if a center of that sort would also be open to the community. Ms. Brown said yes, and added that this could be an important approach to engaging the community.

Ms. Youssouf asked if HPD had been in discussions regarding the 3rd mortgage. Ms. Brown said she did not want to make a misstatement and couldn't be sure, but advised that the developer should be able to answer that question.

Ms. Youssouf asked about the piles that would need to be driven on the site, and asked what the likely cost would be. Ms. Brown said that HPD has a draft of what work will need to be done and a cost estimate has been completed. She advised that such work will be complicated due to nearby work being completed on the Second Avenue subway by the Metropolitan Transportation Authority (MTA).

Mrs. Bolus asked about environmental challenges in the area. Ms. Brown noted that a report had been completed and was under review by HPD; and that remediation will take place and will thoroughly address issues identified in the report.

Ms. Youssouf asked that the Board get an overview of the environmental issues as well as issues that the community has with the presence of the Sanitation Department in the area. Ms.

Brown advised that there has been an ongoing concern within the community, regarding the garage operated by the Sanitation Department. Ms Brown noted that all Board Members will have the transcript from the public hearing and in it the concerns about the Sanitation garage are articulated by members of the Metropolitan CAB, Community Board 11 and community residents. Ms. Brown stated that as far as the parking of sanitation vehicles in front of the housing being built, the practice would have to stop when the development is complete and tenants are in the building.

Mrs. Bolus noted that when senior housing was opened on the Kings County Hospital Center campus it was not acknowledged that the project had any HHC involvement, and asked for assurance that when this development is complete there will be plenty of acknowledgements that HHC was an integral part of the project. Ms. Brown said she would assure at the opening events that everybody was aware of HHC's role.

Ms. Youssouf asked whether decommissioning of the Goldwater facility and the power plant on site had been discussed. Ms. Brown said that discussions are ongoing and it is understood that the Board wants to be sure that HHC does not bear the brunt of the cost of decommissioning the power plant. Mr. Berman advised that the New York City Law Department and Roosevelt Island Operating Corporation (RIOC) have been told that the power plant would be returned to them and advised that the power plant pre-dates the lease between the City and RIOC, meaning that when RIOC rented the land from the City, the power plant was already on the land.

Ms. Brown advised that the decommissioning discussions would be ongoing and all factors would be discussed to ensure that HHC is not being held responsible for unnecessary items. Ms. Youssouf was pleased to hear that and asked that it remain an important discussion point. Ms. Brown assured her that would be the case.

There being no further questions or comments, the Committee Chair offered the matter for a Committee vote.

On motion by the Chair, the Committee approved the resolutions for the full Board's consideration.

- **Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation" or "Licensor") to execute a revocable license agreement with the New York City Police Department ("NYPD" or "Licensee") for use and occupancy of space to operate radio communications equipment at Elmhurst Hospital Center (the "Facility").**

Karl Gray, Associate Director, Elmhurst Hospital Center, read the resolution into the record on behalf of Ann Sullivan, Senior Vice President, Queens Health Network. Mr. Gray was joined by Dion Wilson, Assistant Director, Office of Facilities Development, and Vadim Sarkysants, New York City Police Department.

There being no questions or comments, the Committee Chair offered the matter for a Committee vote.

On motion by the Chair, the Committee approved the resolution for the full Board's consideration.

- **Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to execute a contract with the New York Power Authority ("NYPA") for an amount not-to-exceed \$7,000,000 for the planning, pre-construction, design services, construction, procurement, construction management and project management services necessary to replace the existing boiler plant at Coney Island Hospital (the "Facility").**

David Tannenholz, Assistant Director, Coney Island Hospital, read the resolution into the record on behalf of Arthur Wagner, Senior Vice President, Southern Brooklyn/Staten Island Health Network. Mr. Tannenholz was joined by Daniel Collins, Coney Island Hospital, and Ke He, and Edgardo Caban, New York Power Authority (NYPA).

Mr. He advised that the Coney Island Hospital boiler plant was constructed in 1936 and is in need of replacement. He explained that over the course of the years the boilers have had refurbishments and upgrades but are currently in poor condition and in need of replacement rather than undergo extensive renovations. The replacement plant will increase efficiency and burn firm gas, which is paid at a lower rate than number six (6) and/or number two (2) fuel oil, which is currently used.

Ms. Youssouf asked for an explanation of financing for the project. Mr. Tannenholz advised that the project would be paid for by HHC bonds.

Ms. Youssouf asked about expected completion for the project. Mr. Tannenholz advised that the project should be completed by the end of February 2013.

Ms. Youssouf asked whether the project would impact the function of the hospital. Mr. Pistone advised that there would be temporary boilers available for back-up, if needed, over the course of the project.

Dr. Stocker asked about allowances in the design based on the fact that the facility is located in a flood zone. Mr. Tannenholz noted that those factors have been considered and there have been discussion about putting a berm around the building. Dr. Stocker asked if the facility is comfortable that will suffice and there will not be issues. Mr. Collins advised that there has not been any substantial flooding in that area. He referenced the recent hurricane, Irene, which resulted in evacuation of the facility, and advised that it caused no damage or concern at all, and that operations were unaffected.

Ms. Youssouf asked for an explanation of the berm. Mr. Tannenholz explained that the berm is a waterproofing that would be installed around the building that features gates that will close-off the site in an emergency, if necessary. Ms. Youssouf asked why that wasn't included in the current project scope. Mr. Tannenholz advised that the berm would be located outside of the building and so it would be a separate project.

Mrs. Bolus asked if there was any asbestos work that needed to be completed. Mr. Collins advised that some removal had taken place approximately 15 years ago but there is a very limited amount that will be dealt with during this project.

Ms. Youssouf asked if NYPA would be performing the work themselves. Mr. Caban advised that NYPA would be managing the project and coordinating with the design and engineering teams.

Mrs. Bolus asked if the new boilers would be smaller and more efficient. Mr. Collins said they would be more efficient but similar in size. He stated that two smaller boilers are being replaced with ones more appropriate for the size of the facility.

Mrs. Bolus asked if there would be any noticeable on-site impact during the project. Mr. Tannenholz said no, but it guarantees that the facility will have heat all season.

Mr. Tannenholz advised the Committee that NYPA is currently doing a window replacement project at the facility and it is one of the smoothest operations he has experienced; it is on time and on budget and generally very well managed. He said they have his complete trust.

Dr. Stocker asked if the Corporation was well informed about the state of the infrastructure at the facilities. Mr. Pistone advised that while the Corporation does currently have a good idea as to the state of the infrastructure, as a result of the contract with Johnson Controls, there would be a very extensive report and even more thorough information made available as a result.

Dr. Stocker asked if there was anything in particular that Mr. Pistone was concerned about. Mr. Pistone advised that at present it is pretty clear where the problem areas are and that there shouldn't be any big surprises. The biggest issues will be determining where to direct funds.

Ms. Youssouf asked if the Committee could receive a brief presentation regarding potential infrastructure issues and expected cost when the report from Johnson Controls is completed.

Ms. Youssouf asked about the temporary boilers that will be on site. Mr. He advised that the temporary boilers are sized to match the ones that are being replaced and noted that there will be two of them, one of which will be acting as a back-up to the back-up.

Mrs. Bolus asked about warranty on the boilers. Mr. He said the warranty will be for a term of one (1) year and that is standard.

Dr. Stocker asked what the life expectancy on the new boilers will be. Mr. He said 30 years.

Ms. Youssouf asked if NYPA would be performing any necessary remediation. Mr. He said yes, it is all included in the project.

There being no further questions or comments, the Committee Chair offered the matter for a Committee vote.

On motion by the Chair, the Committee approved the work order.

INFORMATION ITEMS

- **Project Status Reports**
North Bronx Health Network
South Manhattan Health Network
Southern Brooklyn/Staten Island Health Network
* Network contains project(s) that require a delay report

With no projects in delay by six (6) months or more, there were no reports to be provided. Ms. Youssouf requested that in the future, if a network or facility does not have any active construction projects then it be removed from the report.

- **Annual Air Conditioning Readiness Report**

Mr. Pistone provided an overview of the Air Conditioning Readiness Report in his Assistant Vice President's report. Ms. Youssouf noted that she was pleased that the report included no facilities listed as "in poor condition". Mrs. Bolus agreed.

OLD BUSINESS

- **Greenpoint Clinic**

Mr. Pistone provided a requested update on the status of the Greenpoint Clinic. He advised that work on the elevator has been approved by the Department of Buildings and the stairs and roof have been replaced. The Heating Ventilation and Air Conditioning (HVAC) system has been installed and Furniture, Fixtures and Equipment (FF&E) items are in process of being acquired. He noted that the 3rd floor should be occupied sometime in July, and the 2nd floor will be occupied after the 3rd floor.

Mrs. Bolus noted that the space around the elevator had been increased and she was pleased to see that. Ms. Youssouf was also pleased that the elevators had been addressed.

Mrs. Bolus asked whether an elevator could be installed in the rear of the building or if the buildings' landmark status was preventing that from happening. Mr. Pistone advised that the landlord was not open to that idea.

There being no further business, the meeting was adjourned at 11:08 A.M.

RENAMING

DEPARTMENT OF DENTISTRY & ORAL SURGERY

HARLEM HOSPITAL CENTER

RESOLUTION

Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to rename the Department of Dentistry and Oral Surgery at Harlem Hospital Center (the "Facility") the "Dr. James E. McIntosh Department of Dentistry and Oral Surgery".

WHEREAS, the administration of Harlem Hospital Center has recommended that the Department of Dentistry and Oral Surgery be renamed in honor of Dr. James E. McIntosh, former Chair of the Department of Dentistry and Oral Surgery; and

WHEREAS, Dr. James E. McIntosh started his services to the New York City Health and Hospitals Corporation in 1969 as a dental resident at Sydenham Hospital; and

WHEREAS, he worked his way up through the ranks and in the 1970s he became the Director of Dentistry and served two terms as Medical Board President at Sydenham Hospital; and

WHEREAS, Dr. McIntosh came to Harlem Hospital Center in 1984 when the Department of Dentistry was a division under General Surgery. He brought dentistry to the departmental status. The present dental clinic in the Women's Pavilion opened in 1984 and the first year there were 6,000 dental visits. In the next ten (10) years this would increase to 27,000 dental visits; and

WHEREAS, in 1988, in cooperating with Columbia University School of Dental and Oral Surgery, he started the minority specialty program. This program trained over 30 minority specialists. During his career Dr. McIntosh trained over a hundred minority general dentists who mostly returned to underserved areas of the country to practice; and

WHEREAS, Dr. McIntosh served the community by providing strong compassionate leadership to the Department of Dental and Oral Surgery until his retirement in 2000; and

WHEREAS, the Facility has met the requirements for renaming a portion of a facility as set forth in the Corporation's Operating Procedure 100-8, dated December 15, 2004; and

WHEREAS, the renaming is supported by the Facility's Community Advisory Board, the Medical Board, and the Executive Director of Harlem Hospital Center as required by Operating Procedure 100-8.

NOW THEREFORE, be it

RESOLVED, that the President of the New York City Health and Hospitals Corporation (the "Corporation"), be and hereby is authorized to rename the Department of Dentistry and Oral Surgery at Harlem Hospital Center (the "Facility") the "Dr. James E. McIntosh Department of Dentistry and Oral Surgery."

The President of the Corporation is hereby authorized to notify all private and public agencies and organizations involved and interested in the affairs of said department of the said renaming.

EXECUTIVE SUMMARY

RENAMING

“DR. JAMES E. MCINTOSH DEPARTMENT OF DENTISTRY AND ORAL SURGERY”

HARLEM HOSPITAL CENTER

Authorizing the President of the New York City Health and Hospitals Corporation (the “Corporation”) to rename the Department of Dentistry and Oral Surgery at Harlem Hospital Center (the “Facility”) the “Dr. James E. McIntosh Department of Dentistry and Oral Surgery”.

Harlem Hospital Center is a 286-bed hospital, which provides primary, secondary and tertiary acute health care services to patients and residents of Central and Northern Harlem.

We are requesting approval to name the Department of Dentistry and Oral Surgery after the dedicated dentist who served the Harlem Community for over forty years, Dr. James E. McIntosh. The formal of the Department will be the “Dr. James E. McIntosh Department of Dentistry and Oral Surgery.”

Dr. James E. McIntosh started his service to the Health and Hospitals Corporation in 1969 as a dental resident at Sydenham Hospital. In the 1970s he became Director of Dentistry and served two terms as Medical Board President at Sydenham Hospital. He was instrumental in the formation of the Sydenham NFCC where he later became the Director of Dentistry.

Dr. McIntosh came to Harlem Hospital Center in 1984 when the Department of Dentistry was a division under General Surgery. He brought dentistry to the departmental status. The present dental clinic in the Women’s Pavilion opened in 1984 and the first year there were 6,000 dental visits. In the next ten (10) years this would increase to 27,000 visits. In 1988, in cooperation with Columbia University School of Dental and Oral surgery, he started the minority specialty program. This program trained over 30 minority specialists. During his career Dr. McIntosh trained over one hundred minority general dentists who mostly returned to underserved areas of the country to practice.

Under Dr. McIntosh’s leadership, the Thelma C. Davidson Adair Medical and Dental Center in central Harlem was established in 2005. This freestanding primary care facility is a leading example of a university and community joining together to realize a mutual dream: an easy to access, state-of-the-art medical and dental facility for the Harlem community with special emphasis on families and seniors.

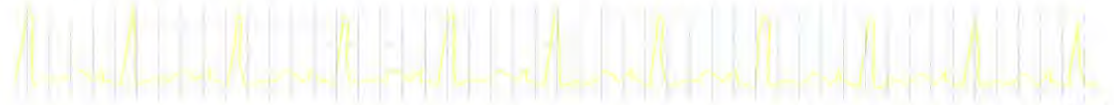
Dr. McIntosh has published numerous professional and peer-reviewed articles and presented at national and international conferences. He is well respected in the dental community and is considered an expert in improving the diversity in the dental profession’s workforce.

This action to honor Dr. James E. McIntosh’s significant contribution of the dental profession is supported by Harlem Hospital Center’s Medical Board, the Community Advisory Board, as well as, the Executive Director (see attached letters).



HARLEM HOSPITAL CENTER

506 Lenox Avenue, New York, NY 10037-1802 Tel (212) 939-1340 Fax (212) 939 8300



Denise C. Soares, RN, MA
Executive Director



- HARLEM HOSPITAL CENTER
- LINCOLN MEDICAL AND MENTAL HEALTH CENTER
- MORRISANIA DIAGNOSTIC AND TREATMENT CENTER
- RENAISSANCE HEALTH CARE NETWORK
- SEGUNDO RUIZ BELVIS DIAGNOSTIC & TREATMENT CENTER

April 11, 2012

TO: Anita O'Brien
Associate Executive Director
Modernization Project

FR: Denise C. Soares, R.N., M.A.

RE: Renaming the Department of Dentistry and Oral Surgery

As we have discussed, Harlem Hospital Center would like to rename the Department of Dentistry and Oral Surgery after Dr. James E. McIntosh.

Attached is a resolution and letters of support to be presented to the New York City Health and Hospitals Corporation Board of Directors Capital Committee. Please let me know when you have scheduled this matter to go before the Capital Committee so that appropriate Staff may attend the meeting.

Thank you in advance for your prompt attention.

DCS:hs

Executive Summary

Harlem Hospital Center is a 286-bed hospital, which provides primary, secondary, and tertiary acute health care services to patients and residents of Central Harlem and Northern Manhattan.

We are requesting approval to name the Department of Dentistry and Oral Surgery after the dedicated dentist who served the Harlem Community for over forty years, Dr. James E. McIntosh. The formal name of the Department will be the "Dr. James E. McIntosh Department of Dentistry and Oral Surgery."

Dr. James E. McIntosh started his service to Health and Hospitals Corporation in 1969 as a dental resident at Sydenham Hospital. In the 1970s he became the Director of Dentistry and served two terms as Medical Board President at Sydenham Hospital. He was instrumental in the formation of the Sydenham NFCC where he later became the Director of Dentistry.

Dr. McIntosh came to Harlem Hospital in 1984 when the Department of Dentistry was a division under General Surgery. He brought dentistry to the departmental status. The present dental clinic in the Women's Pavilion opened in 1984 and the first year there were 6,000 dental visits. In the next 10 years this would increase to 27,000 dental visits. In 1988, in cooperation with Columbia University School of Dental and Oral Surgery, he started the minority specialty program. This program trained over 30 minority specialists. During his career Dr. McIntosh trained over a hundred minority general dentists who mostly returned to underserved areas of the country to practice.

Under Dr. McIntosh's leadership, the Thelma C. Davidson Adair Medical and Dental Center in central Harlem was established in 2005. This freestanding primary care facility is a leading example of a university and community joining together to realize a mutual dream: an easy to access, state-of-the-art medical and dental facility for the Harlem community with special emphasis on families and seniors.

Dr. McIntosh has published numerous professional and peer-reviewed articles and presented at national and international conferences. He is well respected in the dental community and is considered an expert in improving the diversity in the dental profession's workforce.

This action to honor Dr. James E. McIntosh's significant contribution of the dental profession is supported by Harlem Hospital Center's Medical Board, the Community Advisory Board, as well as, the Executive Director (see attached letters.)

Resolution

Authorizing the President and CEO of the New York City Health and Hospitals Corporation to rename the Department of Dentistry and Oral Surgery at Harlem Hospital Center the "Dr. James E. McIntosh Department of Dentistry and Oral Surgery"

WHEREAS, the administration of Harlem Hospital Center has recommended that the Department of Dentistry and Oral Surgery be renamed in honor of Dr. James E. McIntosh, former Chair of the Department of Dentistry and Oral Surgery;

WHEREAS, Dr. James E. McIntosh started his service to the New York City Health and Hospitals Corporation in 1969 as a dental resident at Sydenham Hospital;

WHEREAS, he worked his way up through the ranks and in the 1970s he became the Director of Dentistry and served two terms as Medical Board President at Sydenham Hospital;

WHEREAS, Dr. McIntosh came to Harlem Hospital in 1984 when the Department of Dentistry was a division under General Surgery. He brought dentistry to the departmental status. The present dental clinic in the Women's Pavilion opened in 1984 and the first year there were 6,000 dental visits. In the next 10 years this would increase to 27,000 dental visits;

WHEREAS, In 1988, in cooperation with Columbia University School of Dental and Oral Surgery, he started the minority specialty program. This program trained over 30 minority specialists. During his career Dr. McIntosh trained over a hundred minority general dentists who mostly returned to underserved areas of the country to practice;

WHEREAS, Dr. McIntosh served the Harlem Community by providing strong and compassionate leadership to the Department of Dental and Oral Surgery until his retirement in 2000;

WHEREAS, the administration of Harlem Hospital Center has met all the other requirements set forth in the policy of the Board of Directors of the New York City Health and Hospitals Corporation, dated December 13, 1984, on the renaming of a portion of a facility, including notifying its Medical Board and Community Advisory Board;

NOW, THEREFORE, BE IT

RESOLVED, that the President of the New York City Health and Hospitals Corporation, ("the Corporation"), be and hereby is authorized to rename the Department of Dentistry and Oral Surgery at Harlem Hospital Center the "Dr. James E. McIntosh Department of Dentistry and Oral Surgery."

The President of the Corporation is hereby authorized to notify all private and public agencies and organizations, involved and interested in the affairs of said department of the said renaming.



HARLEM HOSPITAL CENTER

506 Lenox Avenue, New York, NY 10037-1802 Tel (212) 939-1340 Fax (212) 939 8300



Denise C. Soares, RN, MA
Executive Director



March 9, 2012

Alan Aviles, Esq.
President and CEO
New York City Health and Hospitals Corporation
125 Worth Street, Fifth Floor
New York, New York 10013

Dear Mr. Aviles:

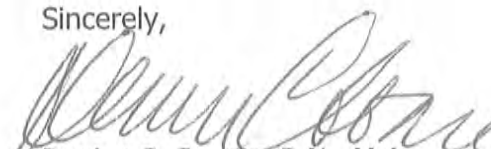
On behalf of Harlem Hospital Center, I wholeheartedly support the resolution to rename the Department of Dentistry and Oral Surgery in honor of Dr. James E. McIntosh, the distinguished clinician.

Dr. McIntosh is well known, and well respected throughout the Harlem Community. He has been a venerable member of the Harlem Community for over forty years as a dentist, humanitarian and tireless community advocate. Dr. McIntosh first came to the Harlem Community in 1969, after graduating from the University of Missouri, where he was the first black student. He began his dental residency at Sydenham Hospital, he remained in the community and continued to provide exemplary and compassionate dental care to Harlem residents through both his public service and private practice.

Perhaps most notable is Dr. McIntosh's philanthropic spirit and devotion to the Harlem Community. He has served on the Board of the Friends of Harlem Hospital Center who has raised nearly \$2 million in charity donations to develop innovative programmatic initiatives at Harlem Hospital Center. The Friends of Harlem Hospital Center has been touted as spearheading many of the nationally recognized Centers of Excellence at Harlem Hospital Center.

Harlem Hospital Center wholeheartedly endorses the renaming of the Department of Dentistry and Oral Surgery in honor of Dr. James E. McIntosh.

Sincerely,



Denise C. Soares, R.N., M.A.



HARLEM HOSPITAL CENTER

506 LENOX AVENUE NEW YORK NY 10037 TEL (212) 939-1000



HARLEM HOSPITAL CENTER

•
LINCOLN MEDICAL AND
MENTAL HEALTH CENTER

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MORRISANIA DIAGNOSTIC
AND TREATMENT CENTER

•
RENAISSANCE
HEALTH CARE NETWORK

•
SEGUNDO RUIZ BELVIS
DIAGNOSTIC &
TREATMENT CENTER

March 09, 2012

Alan Aviles, Esq.
President and CEO
New York City Health and Hospitals Corporation
125 Worth Street, Fifth Floor
New York, New York 10013

Dear Mr. Aviles:

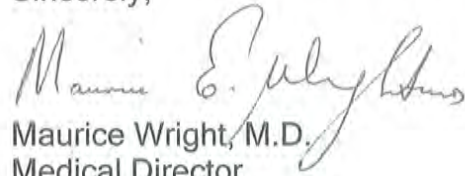
On behalf of the Medical Staff at Harlem Hospital Center, I am writing to express our support for the resolution to rename The Department of Dentistry and Oral Surgery at in honor of Dr. James E. McIntosh, one of the Harlem Community's most revered clinicians and educators.

Dr. McIntosh's exemplary efforts as a practitioner and educator have garnered him a special place in the Harlem community. He has collaborated with administrators, practitioners, and members of our community on many project to support the development of Harlem's programmatic initiatives and purchase of state-of-the-art equipment. has long been committed to improving the dental and oral health of Harlem residents, having started his career in 1969 as a dental resident at Sydenham Hospital. He came to Harlem Hospital Center in 1984 and served this community until 2000. After nearly forty years of providing exemplary dental care to Harlem residents, he returned and continued his civic and humanitarian efforts.

His resolute commitment to educating and training minority dentists is unparalleled. In 1988, in cooperation with Columbia University School of Dental and Oral Surgery, he started the minority specialty program. This program trained over 30 minority specialists. During his career Dr. McIntosh trained over a hundred minority general dentists who returned to underserved areas of the country to practice.

I wholeheartedly support the renaming of the Department of Dentistry and Oral Surgery at Harlem Hospital Center to the "Dr. James E. McIntosh Department of Dentistry and Oral Surgery."

Sincerely,

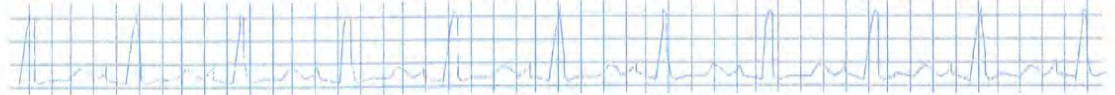
A handwritten signature in cursive script that reads "Maurice E. Wright".

Maurice Wright, M.D.
Medical Director
Harlem Hospital Center



HARLEM HOSPITAL CENTER

506 LENOX AVENUE NEW YORK NY 10037 TEL (212) 939-1000



March 08, 2012

Alan Aviles, Esq.
President and CEO
New York City Health and Hospitals Corporation
125 Worth Street, Fifth Floor
New York, New York 10013

Dear Mr. Aviles:

On behalf of The Department of Dentistry and Oral Surgery at Harlem Hospital Center, I wholeheartedly support the resolution to rename the Department of Dentistry and Oral Surgery in honor of Dr. James E. McIntosh, the distinguished clinician.

Dr. McIntosh is well known, and well respected throughout the Harlem Community. He has been a venerable member of the Harlem Community for over forty years as a dentist, humanitarian and tireless community advocate. Dr. McIntosh first came to the Harlem Community in 1969, after graduating from the University of Missouri, where he was the first black student. He began his dental residency at Sydenham Hospital, he remained in the community and continued to provide exemplary and compassionate dental care to Harlem residents through both his public service and private practice.

Perhaps most notable is Dr. McIntosh's philanthropic spirit and devotion to the Harlem Community. He has served on the Board of the Friends of Harlem Hospital Center who has raised nearly \$2 million in charity donations to develop innovative programmatic initiatives at Harlem Hospital Center. The Friends of Harlem Hospital Center has been touted as spearheading many of the nationally recognized Centers of Excellence at Harlem Hospital Center.

The Department of Dentistry and Oral Surgery wholeheartedly endorses the renaming of the Department of Dentistry and Oral Surgery in honor of Dr. James E. McIntosh.

Sincerely,

James R. King, D.D.S.
Director, Department of Dentistry and Oral Surgery
Harlem Hospital Center



HARLEM HOSPITAL CENTER

506 LENOX AVENUE NEW YORK, NY 10037-1802 TEL (212) 939-1000



Community Advisory Board



March 16, 2012

Alan Aviles, Esq.
President and CEO
New York City Health and Hospitals Corporation
125 Worth Street, Fifth Floor
New York, New York 10013

Dear Mr. Aviles:

On behalf of Harlem Hospital Center's Community Advisory Board, we unreservedly support the resolution to rename the Department of Dentistry and Oral Surgery in honor of Dr. James E. McIntosh.

His exemplary efforts as a practitioner and educator have garnered him a special place in the Harlem community. He has collaborated with administrators, practitioners, and members of our community on many project to support the development of Harlem's programmatic initiatives and purchase of state-of-the-art equipment.

As a member of the Board of the Friends of Harlem Hospital Center, he continues to support the hospital's fundraising efforts to raise monies to ensure that Harlem residents continue to receive accessible, efficient, high quality and compassionate health care services,

We wholeheartedly endorse the renaming of the Department of Dentistry and Oral Surgery to the Dr. James E. McIntosh Department of Dentistry and Oral Surgery.

Sincerely,

Stephane Howze
Chairperson
Harlem Hospital Center Community Advisory Board

LICENSE AGREEMENT

NEW YORK LEGAL ASSISTANCE GROUP (NYLAG)

**COLER-GOLDWATER SPECIALTY HOSPITAL
AND NURSING FACILITY**

RESOLUTION

Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation" or "Licensor") to execute a license agreement with the New York Legal Assistance Group (the "Licensee" or "NYLAG") for use and occupancy of space at Coler-Goldwater Specialty Hospital and Nursing Facility (the "Facility") to provide *pro bono* legal services to nursing home residents and training to Corporation staff.

WHEREAS, in March 2011, the Board of Directors authorized the President of the Corporation to enter into a license agreement to provide training and legal services at Bellevue Hospital Center, Elmhurst Hospital Center, Jacobi Medical Center, Kings County Hospital Center, Lincoln Medical & Mental Health Center, Woodhull Medical & Mental Health Center; and Harlem Hospital Center; and

WHEREAS, the Licensee is a not-for-profit provider of *pro bono* legal services to, among others, patients in need of attorney counseling in various areas of the law, including, but not limited to, immigration, domestic relations, child support and custody, and benefit entitlements; and

WHEREAS, the Licensee's program includes the training of Corporation staff to assist the Licensee in recognizing patients in need of legal services; and

WHEREAS, the Facility desires to utilize the Licensee's services and has adequate space to accommodate its program needs.

NOW, THEREFORE, be it

RESOLVED, that the President of the New York City Health and Hospitals Corporation be and hereby is authorized to execute a license agreement with the New York Legal Assistance Group (the "Licensee" or "NYLAG") for its use and occupancy of space at Coler-Goldwater Specialty Hospital and Nursing Facility (the "Facility") to provide *pro bono* legal services to nursing home residents and training to Corporation staff.

The Licensee shall be granted the part-time use of approximately 150 square feet of office space on the Facility's Goldwater and Coler campuses (the "Licensed Space"). The Licensed Space shall be used by one of the Licensee's attorneys to train Facility staff and provide legal services to Facility nursing home residents. The Facility shall provide utilities, housekeeping, maintenance, and reasonable security to the Licensed Space. The Corporation shall pay the Licensee the sum of \$36,103 for services provided over a six (6) month period.

The Licensee shall indemnify and hold harmless the Corporation and the City of New York from any claims arising by virtue of its use of the Licensed Space and its provision of services in such space. The Licensee shall also provide appropriate insurance, naming both parties to the license agreement and the City of New York as insureds.

The term of the license agreement shall not exceed six (6) months without further authorization of the Board of Directors of the Corporation. The license agreement shall be revocable by either party on fifteen (15) days notice.

EXECUTIVE SUMMARY

LICENSE AGREEMENT

NEW YORK LEGAL ASSISTANCE GROUP

The President seeks authorization of the Board of Directors of the Corporation to execute a revocable license agreement with the New York Legal Assistance Group ("NYLAG") for its use and occupancy of space at Coler-Goldwater Specialty Hospital and Nursing Facility (the "Facility") to provide *pro bono* legal services to patients and training to Corporation staff.

NYLAG is a not-for-profit organization whose purpose includes providing legal services to patients least able to afford private counsel. In June 2002, the Board of Directors authorized the President to enter into a revocable license agreement with NYLAG to provide training and legal services at Elmhurst Hospital Center. The success of this program underscored the need to expand the legal services program to other hospitals. In addition to Elmhurst Hospital, NYLAG currently provides training and legal services at Bellevue Hospital Center, Jacobi Medical Center, Kings County Hospital Center, Lincoln Medical & Mental Health Center, Woodhull Medical & Mental Health Center; and Harlem Hospital.

NYLAG will assign an attorney to conduct periodic training sessions to teach Corporation staff to recognize and identify patients requiring legal services. In addition, a NYLAG attorney will be on-site one half-day per week to counsel nursing home residents in need of legal advice and representation on a *pro bono* basis. NYLAG will be present on the Coler campus and the Goldwater campus each twice per month. The services offered would be in areas of law, including, but not limited to, immigration, domestic relations, child support and custody, and benefit entitlements. This model of patient-focused legal services has been used successfully at safety-net hospitals elsewhere in the country to address legal problems common to low-income patient populations. It is anticipated that NYLAG will assist patients with approximately 60 matters during the half-year period. The Corporation will pay the Licensee the sum of \$36,103 for the services provided over the six month period.

The licensed space, utilities, housekeeping, maintenance, and reasonable security will be provided by the facilities at no charge to NYLAG. NYLAG will indemnify and hold harmless the Corporation and the City of New York from any claims arising by virtue of its use of the licensed space and its provision of services. NYLAG will also provide appropriate insurance, naming both parties to the license agreement and the City of New York as insureds.

The term of the license agreement shall not exceed six (6) months without further authorization of the Board of Directors of the Corporation. The license agreement shall be revocable by either party on fifteen (15) days notice.

Office of Legal Affairs

MEMORANDUM

To: Dona Green
Corporate Planning Services

From: Karen Rosen 
Assistant Director

Date: May 31, 2012

Subject: VENDEX Approval

For your information, on May 31, 2012 VENDEX approval was granted by the Office of Legal Affairs for the following company:

New York Legal Assistance Group

cc: Norman M. Dion, Esq.

LICENSE AGREEMENT

NEW YORK CITY DEPARTMENT OF EDUCATION

**COLER-GOLDWATER SPECIALTY HOSPITAL
AND NURSING FACILITY**

RESOLUTION

Authorizing the President of the New York City Health and Hospitals Corporation ("the Corporation" or "Licensor") to execute a revocable license agreement with the New York City Department of Education (the "Licensee") for its continued use and occupancy of space to operate a Licensed Practical Nurse ("LPN") training program at Coler-Goldwater Specialty Hospital and Nursing Facility (the "Facility").

WHEREAS, in May 2007, the Board of Directors of the Corporation authorized the President to execute a license agreement with the Licensee which by its terms expires August 31, 2012; and

WHEREAS, the Corporation continues to have a need for Licensed Practical Nurses and the Office of the Mayor continues to provide funding for the LPN training program; and

WHEREAS, the Licensee's program provides training to Corporation staff and community residents; and

WHEREAS, the Facility has space available on the 4th floor of Goldwater to accommodate the Licensee's program needs.

NOW, THEREFORE, be it

RESOLVED, that the President of the New York City Health and Hospitals Corporation ("the Corporation" or "Licensor") be and hereby is authorized to execute a revocable license agreement with the New York City Department of Education (the "Licensee") for its continued use and occupancy of space to operate a Licensed Practical Nurse ("LPN") training program at Coler-Goldwater Specialty Hospital and Nursing Facility (the "Facility").

The Licensee shall be granted the continued use and occupancy of approximately 7,100 square feet of space on the 4th floor of Goldwater (the "Licensed Space"). In lieu of an occupancy fee, the Corporation shall receive the benefit of the program's graduates filling LPN positions at its facilities.

The Licensor shall provide hot and cold water, electricity, heating, air conditioning, and security to the Licensed Space. The Licensor shall also be responsible for housekeeping and routine maintenance. The Facility shall be reimbursed up to \$45,000 per year for the expense of providing these services.

The term of the agreement shall not exceed one (1) year without further authorization by the Board of Directors of the Corporation and shall be revocable by either party on thirty (30) days prior notice. The agreement shall contain an option to renew for one (1) year exercisable by the Licensee without further approval of the Board of Directors. The Licensee has been informed that space on the Goldwater campus will no longer be available in the Fall of 2013.

**EXECUTIVE SUMMARY
LICENSE AGREEMENT
NEW YORK CITY DEPARTMENT OF EDUCATION
ADULT AND CONTINUING EDUCATION**

COLER-GOLDWATER SPECIALTY HOSPITAL AND NURSING FACILITY

The President seeks the authorization of the Board of Directors of the Corporation to execute a revocable license agreement with the New York City Department of Education ("DOE") for its continued use and occupancy of space to operate a 10-month Licensed Practical Nurse ("LPN") training program at Coler-Goldwater Specialty Hospital and Nursing Facility ("Coler-Goldwater").

The Center for Economic Opportunity (CEO) was established by Mayor Bloomberg on December 18, 2006 to implement innovative ways to reduce poverty in New York City. In 2007 the CEO agreed to fund an HHC proposal to expand the Department of Education's Licensed Practical Nursing program with an additional site, to be located at Goldwater Hospital. Working in partnership with HHC, the graduates would be hired to work in HHC facilities at completion of the program, serving the dual purpose of assisting qualified members of the community with jobs and providing needed LPN's for positions at HHC. Four classes have been completed, with the fifth class graduating in June 2012. One hundred fifty-seven students have completed the program and 120 have been placed in jobs, 103 throughout HHC.

DOE's Office of Adult and Continuing Education LPN program has been providing training to Corporation employees since 1974. Seats in LPN programs in New York City are limited and there are waiting lists for all existing programs. Under the Mayor's Center for Economic Opportunity ("CEO") initiative, the Corporation will continue to receive funds, which have been used to provide scholarships for LPN training to community residents who meet certain CEO requirements.

DOE will continue to have use and occupancy of approximately 7,100 square feet of space on the 4th floor of Goldwater. In lieu of an occupancy fee, the Corporation will receive the benefit of the program's graduates filling LPN positions at its facilities. Coler-Goldwater will provide hot and cold water, electricity, heating, air conditioning, and security to the licensed space. Coler-Goldwater will also be responsible for housekeeping and routine maintenance. Coler-Goldwater will be reimbursed up to \$45,000 per year for the expense of providing these services.

The term of the agreement shall not exceed one (1) year without further authorization by the Board of Directors of the Corporation and shall be revocable by either party on thirty (30) days prior notice. The agreement shall contain an option to renew for one (1) year exercisable by the Licensee without further approval of the Board of Directors. The Licensee has been informed that space on the Goldwater campus will no longer be available in the Fall of 2013.

LICENSE AGREEMENT

**GENERAL VISION SERVICES/
COHEN FASHION OPTICAL**

JACOBI MEDICAL CENTER

RESOLUTION

Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation" or "Licensor") to execute a revocable license agreement with General Vision Services/Cohen Fashion Optical (the "Licensee") for use and occupancy of space to operate an optical store on the campus of Jacobi Medical Center (the "Facility").

WHEREAS, in April 2010, the Board of Directors authorized the President of the Corporation to enter into a license agreement with the Licensee to operate optical stores at Bellevue Hospital Center, Harlem Hospital Center, Lincoln Medical & Mental Health Center, and Metropolitan Hospital Center; and

WHEREAS, the services and products provided have proved to be beneficial to patients; and

WHEREAS, Jacobi Medical Center desires to have the Licensee operate an optical store on its campus and has adequate space to accommodate the Licensee's needs; and

WHEREAS, the Licensee shall provide optical services, including but not limited to filling new prescription eyeglasses, examining eyes, low vision screening, prescribing and fitting contact lenses, and selling contact lens supplies.

NOW, THEREFORE, be it

RESOLVED, that the President of the New York City Health and Hospitals Corporation (the "Corporation" or "Licensor") be and hereby is authorized to execute a revocable license agreement with General Vision Services/Cohen Fashion Optical (the "Licensee") for use and occupancy of space to operate an optical store on the campus of Jacobi Medical Center (the "Facility").

The Licensee shall be granted the use and occupancy of a total of approximately 675 square feet of space on the ground floor of Building No. 1 (the "Licensed Space"). The Licensee shall pay a total annual occupancy fee of approximately \$40,500, or \$60 per square foot. The occupancy fee shall be escalated by 3% per year. The Facility shall provide hot and cold water, electricity, heating, air conditioning and routine security to the Licensed Space. The Licensee shall be responsible for its own housekeeping, repairs and maintenance.

The Licensee shall indemnify and hold harmless the Corporation and the City of New York from any and all claims arising by virtue of its use of the Licensed Space and shall also provide appropriate insurance naming each of the parties as additional insureds.

The license agreement shall not exceed five (5) years without further authorization from the Board of Directors and shall be revocable by either party upon thirty (90) days notice.

EXECUTIVE SUMMARY

JACOBI MEDICAL

LICENSE AGREEMENT

GENERAL VISION SERVICES/COHEN FASHION OPTICAL

The President of the New York City Health and Hospitals Corporation seeks authorization from Board of Directors to execute a revocable license agreement with General Vision Services/Cohen Fashion Optical ("GVS/Cohen") for use and occupancy of space to operate an optical store on the campus of Jacobi Medical Center ("Jacobi").

GVS/Cohen currently operates optical stores at Bellevue Hospital Center, Harlem Hospital Center, Lincoln Medical & Mental Health Center, and Metropolitan Hospital Center. The services and products provided have proved to be beneficial to patients. Jacobi desires to have an optical store on its campus and has adequate space to accommodate the store. GVS/Cohen will provide optical services, including but not limited to filling new prescription eyeglasses, examining eyes, low vision screening, prescribing and fitting contact lenses, and selling contact lens supplies.

GVS/Cohen will have the use and occupancy of a total of approximately 675 square feet of space on the ground floor of Building No. 1 (the "Licensed Space"). The Licensee shall pay a total annual occupancy fee of approximately \$40,500, or \$60 per square foot. The occupancy fee shall be escalated by 3% per year. The Facility shall provide hot and cold water, electricity, heating, air conditioning and routine security to the Licensed Space. The Licensee shall be responsible for its own housekeeping, repairs and maintenance.

GVS/Cohen will indemnify and hold harmless the Corporation and the City of New York from any and all claims arising by virtue of its use of the licensed space and will also provide appropriate insurance naming each of the parties as additional insureds.

The license agreement shall not exceed five (5) years without further authorization from the Board of Directors and shall be revocable by either party upon thirty (90) days notice.

SAVITT PARTNERS

February 24, 2012

Mr. Dion Wilson
Director
Office of Facilities Development, Real Estate
NYC Health and Hospitals Corporation
346 Broadway, 12 West
New York, NY 10013

Re: Fair Market Value/appraisal of space within Jacobi Medical Center
Building # 6, ground floor for retail use
On behalf of NYC Health & Hospitals Corporation

Dear Dion:

Pursuant to your request, the referenced location within Jacobi Medical Center was inspected in order to assess the respective Fair Market Value (FMV). These assessments are inclusive of the value of the tenant improvements and specified operating expenses such as utilities, housekeeping, security, service contracts, repairs and maintenance, etc. As the owner is designated as a not for profit (501C3) real estate taxes may not be applicable, however this expense will also be considered when evaluating the value of the space in order to provide a comprehensive FMV. This appraisal will assess the estimated value of the base rent inclusive of the tenant improvements and operating expenses. This evaluation is subject to the following:

- The unit is appropriately zoned for the proposed use (retail) within the space.
- The premises are located within the medical center on the ground floor.
- This evaluation is for the purpose of establishing the FMV to lease/license the referenced property and considers numerous factors including but not limited to location, market conditions, market area comparables, lease terms and conditions, as well as tenant improvements.

There are two variables that must be considered in this evaluation which are in fact weighted greater than other variables. These unique factors are location and use.

The location of the space provides the tenant with an immediate and “captured” client base. Eye wear prescriptions generated by affiliated physicians within the hospital will most likely generate a large percentage of the client base for this tenant. The hospital also benefits by providing this amenity to the patients; the convenience of access to a retailer that can fill the prescription immediately. The proposed retail operation compliments the physician practices with an optical modality.

It would be inappropriate and unjustifiable to evaluate the value of the referenced space as retail. Despite the obvious benefit of the readily available retail, client base the space does not have the one most important value to be considered retail, street presence. Therefore the space must be

assessed as commercial property with a retail build out and operation. Our assessment of the value of the tenant improvement for an optical, retail operation within the hospital at this specific location would be that it is dramatically less than the cost for a typical store front optical store. The space is usually open (minimal walls or partitions) with extensive space for display cases.

Another important factor is the value of the space for medical use. It is our experience that space within hospitals is valued at a premium simply due to the fact that it is a finite resource which is in demand. Allocation of hospital space for non-hospital use is a primary cause for concern for hospital administrators. This is the case even when the organization can garner a higher rent for the space. This assessment takes into consideration the value of this space for hospital operations.

It is apparent that proximity within the hospital complex is attractive to this tenant. The provision of tenant services that are uncommon for retail facilities, i.e., 24-7 access and the provision of full time services such as HVAC, repairs and maintenance, security, etc. must also be factored in this evaluation. However, when assessing the value the fact that the client base is limited to foot traffic within the hospital impacts the success of the tenant. The tenant has no opportunity to promote their presence and the average pedestrian walking by the building would not be aware of this retail operation.

The referenced medical space is located on the ground floor near the main entrance of the medical center. When assessing the FMV for this space we took into consideration the referenced factors and used comparables for medical space, hospital space and retail space within the immediate market where available to establish benchmarks for market rents. The proposal offers the licensee a full service building with amenities typically provided only by hospitals and full service medical office buildings not retail properties. Typical retail operations are triple net, with the tenant absorbing all of the related operational expenses. However, this opportunity provides the tenant with comprehensive services which will be reflected in our evaluation.

Market conditions for each use were established for comparison. Medical space, specifically physician, private offices garners rents at \$32 - \$40 per RSF. Hospital/medical office building rents in this market area range from \$38 - \$65 per RSF. Retail rents are \$40 - \$70 per RSF. This market saw a slight increase in asking rents in 2011, but landlord concessions are still negligible. Although these areas have numerous medical sites, the lack of product, i.e., rental opportunities has maintained a stable rental market.

CONCLUSION

The ability to access the space and the provision of services without interruption is an amenity that benefits this retail tenant. The minimal expense for tenant improvements was a variable that was evaluated as well.

All of the locations that were inspected were handicapped accessible. To reiterate 24-7 security is a valuable and an attractive amenity provided by the landlord. All of the lavatories throughout the facility are ADA compliant. The corridors are also wheelchair accessible.

For the purpose of this appraisal, we shall assume that all operating expenses, i.e., security, refuse removal, utilities, repairs and maintenance, service contracts, etc. are provided by the landlord

In conclusion this analysis finds that the FMV for this space is essentially a hybrid due to the location of the space, proposed use and lack of opportunity to promote a true retail operation. However, it also provides the retailer with an immediate client base.

It is our professional opinion that the value of the referenced space is **\$50 - \$60** per RSF. It would be appropriate to provide the tenant with a construction concession of a 4-6 month rent abatement.

It would be appropriate for the tenant to negotiate an escalation provision to the base rent/fee of 2.75% to 3% commencing in the second year of the license agreement. These would be commercially fair and reasonable terms based on the data and information assessed in this report.

In the event I can be of any further assistance to you, please do not hesitate to call me.

Very truly yours,

A handwritten signature in black ink, appearing to read "Michael Dubin", written over a light blue horizontal line.

Michael Dubin
Partner

CONSTRUCTION CHANGE APPROVAL

KELCO CONSTRUCTION, INC.

JACOBI MEDICAL CENTER

CAPITAL COMMITTEE

CONSTRUCTION CHANGE APPROVAL

Respectfully submitted for the approval of the Capital Committee is the Construction Changes described below:

Facility: Jacobi Medical Center

Project: Campus Site Improvements, Transportation Intermodal Facility

Contractor: Kelco Construction, Inc.

Project No.: 21-2007-07

Contract No.: 16-2011-018

Original Contract Amount: \$2,689,100

Previously Approved Change Order Amount: \$145,636

Current Contract Amount: \$2,834,736

Change No. 1 Proposed Amount*: \$475,000

Change No. 2 Proposed Amount*: \$777,000

Revised Contract Amount: \$4,086,736

These changes exceed the \$200,000 threshold and are submitted for approval to accomplish the following scope of work:

Change No. 1

Description: Renovate the North Lobby of Building No. 1, which is to include asbestos abatement, interior and exterior demolition, new finishes, two new bathrooms, sprinkler, new storefront, exterior signage, fire alarm, HVAC, plumbing and electrical systems.

Justification: The main entrance to building No. 1 is currently closed due to the Site Improvement project scope of work, which is in the process of landscaping and paving the area. It is both time and cost effective to accomplish this additional work while the entrance is closed and a competent contractor is on site working in the area.

Category: Additional Scope of Work

* Change orders are funded through a re-allocation of Capital funds (HHC bonds) from surplus funds from a Fire Alarm Upgrade project whose bids were approximately \$1.6 million lower than estimated.

Page Two – Change Order

Change No. 2

Description: These changes are a series of additional lighting and landscaping items.

They are as follows:

- | | |
|---|------------------|
| 1. Parking lot 6 & 9 lighting - | \$207,200 |
| 2. South and east of main road lighting - | \$85,500 |
| 3. Hillside concrete walkway - | \$322,000 |
| 4. Parking lot 4 lighting - | <u>\$162,300</u> |

Total - \$777,000

Justification: These items were originally add alternates in the bid package that were not accepted due to funding constraints. Funding is now available due to savings on other projects and the contactor has agreed to hold the prices presented at the time of bid. It is both time and cost effective to accomplish this additional work while the site is undergoing this improvement with the current contractor.

Category: Additional Scope of Work

STATUS REPORT

GOUVERNEUR HEALTHCARE SERVICES

MAJOR MODERNIZATION

**GOUVERNEUR HEALTHCARE SERVICES
MAJOR MODERNIZATION PROJECT
PROJECT FACT SHEET**

Location: Gouverneur Healthcare Services
227 Madison Street
New York, New York 10002

Description: The project consists of the following components: 1) construction of a new 108,000sf addition for ambulatory care services. It will house a Women's and Children's Center, a new Computer Tomography (CT) scan area and space for a full-spectrum ambulatory surgery center; and 2) renovation of the existing building for long-term care services that increases the nursing home capacity from 210 to 295 beds.

Budget:	June 2012 Revised Cost	Current Budget	Variance
NYC G.O. (1)	\$ 219.4 M	\$ 183.2 M	\$ 36.2 M
City Council/Boro. Pres. (2)	\$ 4.3 M	\$ 4.3 M	\$ 0.0 M
Donations	\$.2 M	\$.2 M	\$ 0.0 M
Grant Funds	<u>\$ 1.9 M</u>	<u>\$ 1.9 M</u>	<u>\$ 0.0 M</u>
Subtotal	\$ 225.8 M	\$ 189.6 M	\$ 36. M
NYC G.O. OMB March 2009 Adjustment	<u>\$ (11.1 M)</u>	<u>\$ (11.1 M)</u>	<u>\$ 0.0 M</u>
Total Adjusted Budget	\$ 214.7 M	\$ 178.5 M	\$ 36. M
Network Capital Funding Reallocation	<u>\$ 15.9 M</u>	<u>\$ 15.9 M</u>	<u>\$ 0.0 M</u>
Total Adjusted Funding	<u>\$ 230.6 M</u>	<u>\$ 194.4 M</u>	<u>\$ 36. M</u>
NYC G.O. OMB January 2011 Adjustment	<u>\$ 12.0 M</u>	<u>\$ 12.0 M</u>	<u>\$ 0.0 M</u>
Total Adjusted Funding	<u>\$ 242.6 M</u>	<u>\$ 206.4 M</u>	<u>\$ 36. M</u>
HHC Bonds, Series 2010	<u>\$ 3.4 M</u>	<u>\$ 3.4 M</u>	<u>\$ 0.0 M</u>
Total Adjusted Funding	<u>\$ 246.0 M</u>	<u>\$ 209.8 M</u>	<u>\$ 36. M</u>

Financing: New York City General Obligation Bonds, HHC Bonds, Series 2010, Grant funds and donations.
(1) Increased current budget by \$.6M available from the Kitchen Renovation
(2) Increased current budget by \$.5M available from new City Council funds for the Auditorium Renovation

Management: DASNY

Architect: RMJM Hillier

**Construction
Manager:** Hunter Roberts (HR)

CON Status: D&TC - Approved July 2008
Long-Term Care - Approved October 2008

Schedule: Construction Start – September 2008
Completion Expected – January 2014
Occupancy Expected – March 2014

AA/EEO: DASNY, on behalf of the Corporation, is fully committed to providing opportunities for M/WBE firms and work force and has required consultants and contractors to comply with NYS Executive Law Article 15-A and NYC Executive Order 50 requirements.

**GOUVERNEUR HEALTHCARE SERVICES
MAJOR MODERNIZATION PROJECT**

PROJECT STATUS REPORT – JUNE 2012

The following are key project activities the Corporation has completed to date:

Design: RMJM (formerly Hillier Architects) completed design of the building extension and renovation of the existing building and all construction packages have been awarded.

Construction: The building addition and renovation of the first resident floor, thirteen are complete and the residents and staff have moved into the new spaces. A ribbon cutting was held on September 21, 2011.

Floors 1 through 4 and part of 5 will be renovated for additional ambulatory care clinics and support functions and part of the 5th floor and floors 6 through 11 will be renovated into new resident skilled nursing care units. The 12th floor which was recently renovated has been left intact as administrative space.

The next phase; renovation of seven floors of the existing building has started. Demolition is complete on the 4th and 6th floor and wall layouts, plumbing and HVAC work have started.

Demolition is in progress on the 5th and 7th and scheduled to start on the 2nd, 3rd and 8th floors by June 2012.

Construction Management: Hunter-Roberts is the construction manager (CM). The CM is managing construction work and construction bids as required.

Finance: New York City General Obligation Bonds, Grant funds and donations.

Original Budget: The original project budget was \$187.6 million, excluding the costs of financing, DOH fees, and contractor claims (none to date).

Adjusted Budget: The adjusted project budget is \$208.7 million, excluding the costs of financing and contractor claims (none to date).

Adjusted 6/12 Budget: The adjusted project budget is \$246 million, including CON fees and excluding the costs of financing and contractor claims (none to date).

Total Project Forecast: The project forecast is \$246 million, excluding the costs of financing, and contractor claims (none to date).

PROJECT STATUS REPORTS

Central/North Brooklyn Health Network
Generations+/Northern Manhattan Health Network
Queens Health Network

Network: CENTRAL / NORTH BROOKLYN HEALTH NETWORK

Facility: KINGS COUNTY HOSPITAL CENTER

Project Number	PROJECT TITLE	Project Budget (\$000s)	Paid to Date (\$ 000s)	% Paid to Date	Construction Start	Projected Completion	Forecast/ Actual Completion	Delay (if any)	Comments
29201104	T Bldg. H2O Tank Replacement	600	0	0.00%		Dec-12	Dec-12		
29201105	Z Bldg. Roof Replacement	825	356	47.00%		Dec-12	Dec-12		

Facility: WOODHULL MEDICAL AND MENTAL HEALTH CENTER

Project Number	PROJECT TITLE	Project Budget (\$000s)	Paid to Date (\$ 000s)	% Paid to Date	Construction Start	Projected Completion	Forecast/ Actual Completion	Delay (if any)	Comments
48201122	Upgrade Overhead Page System	989	158	16.00%	Dec-11	Jul-12	Jul-12		
48201150	Replace Nurse Call System	774	0	0.00%	Dec-11	Sep-12	Sep-12		

Facility: HARLEM HOSPITAL CENTER

Project Number	PROJECT TITLE	Project Budget (\$000s)	Paid to Date (\$ 000s)	% Paid to Date	Construction Start	Projected Completion	Forecast/ Actual Completion	Delay (if any)	Comments
13200702/03	Kountz Pavilion Renovation	13,545	6,967	51.00%	Mar-08	Apr-12	Dec-12	(9)	Remaining project components involving elevator, roof, windows and façade have been funded and are progressing. Expect completion by December 2012.
13201002	Renovation of the Alexander Hamilton Clinic	250	76	30.00%	Jul-10	Dec-12	Dec-12		Nurse Family Partnership component is complete and occupied. Remaining space is to be completed by December 2012.

Facility: LINCOLN MEDICAL AND MENTAL HEALTH CENTER

Project Number	PROJECT TITLE	Project Budget (\$000s)	Paid to Date (\$ 000s)	% Paid to Date	Construction Start	Projected Completion	Forecast/ Actual Completion	Delay (if any)	Comments
25200301	Emergency Room Renovation	28,275	14,813	52.00%	Apr-07	Jun-10	Dec-12	(30)	Contractors are now installing Mechanical, Electrical, and Plumbing systems, and one side of partition walls are progressing. Move into the first section of the Emergency Department is scheduled for Summer 2012.

* Phase I substantially completed in October 2008.

Facility: ELMHURST HOSPITAL CENTER

Project Number	PROJECT TITLE	Project Budget (\$000s)	Paid to Date (\$ 000s)	% Paid to Date	Construction Start	Projected Completion	Forecast/ Actual Completion	Delay (if any)	Comments
33200801	Women's Health Center	13,352	3,157	24.00%	Sep-11	Dec-12	May-13	(5)	

Facility: QUEENS HOSPITAL CENTER

Project Number	PROJECT TITLE	Project Budget (\$000s)	Paid to Date (\$ 000s)	% Paid to Date	Construction Start	Projected Completion	Forecast/ Actual Completion	Delay (if any)	Comments
34200970	Modernization Phase III	21,995	16,165	74.00%	Apr-09	Dec-11	Jul-12	(7)	Completion is on schedule for July 2012.