MEETING AGENDA

March 13, 2014

11:00 a.m.

125 Worth Street, Room 532 5th Floor Board Room

<u>CALL TO ORDER</u> Emily A. Youssouf

ADOPTION OF MINUTES February 13, 2014

Emily A. Youssouf

SENIOR ASSISTANT VICE PRESIDENT'S REPORT

Roslyn Weinstein

ACTION ITEMS

Resolution
 Ernest Baptiste

Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to execute a 99-year sublease with CAMBA Housing Ventures, Inc. ("CHV") or a not-for profit housing development fund corporation in which CHV is the sole member, or a limited partnership or limited liability company in which the general partner or managing member, as applicable, is an affiliate of CHV for the development of low-income housing, and housing for the formerly homeless on at the site of the "G Building," a parcel of land on the campus of Kings County Hospital Center (the "Facility") of approximately 97,000 square-feet at a fair market value rent established by appraisal which is currently anticipated to be not more than \$2.5 Million in total.

VENDEX: Pending.

INFORMATION ITEMS

Update: Energy Projects
 Cyril Toussaint

Project Status Reports

Central/North Brooklyn Health Network

Daniel Gadioma/Lisa Scott-McKenzie

- Kings County Hospital: Elevator Upgrade "ABC" Buildings Delayed
- Kings County Hospital: Elevator Upgrade "T" Building Complete
- Woodhull Medical Center: Obstetric Unit Expansion Delayed

Generations+/Northern Manhattan Health Network

- Harlem Hospital: Kountz Pavilion Renovation Complete
- Lincoln Medical and Mental Health Center: Emergency Room Renovation Complete

Queens Health Network

Dean Mihaltses

- Elmhurst Hospital: Women's Health Center – Delayed

OLD BUSINESS NEW BUSINESS ADJOURNMENT

CAPITAL COMMITTEE MEETING MINUTES FEBURARY 13, 2014

MINUTES

Capital Committee

Meeting Date:February 13, 2014Time:10:00 A.M.Location:Board Room

Board of Directors:

Members of the Capital Committee Emily A. Youssouf, Chair Josephine Bolus, RN Alan D. Aviles, President

HHC Staff:

Paul Albertson – Senior Assistant Vice President, Materials Management George Asadoorian – Supervising Confidential Examiner, Office of Internal Audits Jeremy Berman – Deputy General Counsel, Office of Legal Affairs Tammy Carlisle – Associate Executive Director, Corporate Planning Deborah Cates - Chief of Staff, Office of the Chairman Jonathan Goldstein – Senior Consultant, Corporate Planning Anthony Gounaris – Senior Project Manager, Office of Facilities Development Lauren Haynes – Office of the President Nelson Laverde – Assistant Director, Bellevue Hospital Center Patricia Lockhart – Secretary to the Corporation, Office of the Chairman Ana Marengo – Senior Assistant Vice President, Communications and Marketing Antonio Martin – Executive Vice President Cynthia McIntosh – Supervising Confidential Examiner, Office of Internal Audits Dean Moskos - Director, Office of Facilities Development Dean Pearce - Senior Director, Office of Facilities Development Armel Sejour – Supervising Confidential Examiner, Office of Internal Audits Rosemarie Thomas – Supervising Confidential Examiner, Office of Internal Audits Roslyn Weinstein - Senior Assistant Vice President, President's Office Dion Wilson – Assistant Director, Office of Facilities Development Elizabeth Youngbar – Assistant Director, Office of Facilities Development

Other Attendees:

Julie Brandfield – New York Legal Assistance Group (NYLAG) Randy Retkin – New York Legal Assistance Group (NYLAG)

CALL TO ORDER

The meeting was called to order by Emily A. Youssouf, Chair of the Capital Committee, at 10:04 A.M.

On motion, the Committee voted to adopt the minutes of the January 9, 2014, Capital Committee meeting.

SENIOR ASSISTANT VICE PRESIDENT'S REPORT

Roslyn Weinstein, Senior Assistant Vice President, Office of the President, advised of an upcoming Public Hearing and provided an overview of the meeting agenda. Ms. Weinstein announced that a Public Hearing would be held to discuss a proposal by CAMBA Housing Ventures, for development of affordable and supportive housing to be located on Kings County Hospital campus, where the "G" Building is currently located. The development would feature 293 units of housing for homeless and special needs households; including patients from Brooklyn Hospitals and Nursing Homes. She noted that current CAMBA housing, on the Kings County campus, had been going well. This development would be a continuation of CAMBA Gardens Phase I, completed in October 2013, which features 209 units of affordable housing, located on site of the former "J" and "N" buildings. She noted that the Public Hearing would take place on March 6, 2014 and would be held on the Kings County campus, further details would be provided as they were finalized.

Ms. Youssouf asked if HHC had received a plan from CAMBA, including financing. Ms. Weinstein said that there was a preliminary plan but she had not seen financing information. Ms. Youssouf asked that the information be shared with Committee members.

Josephine Bolus, RN, expressed concern that affordable housing projects often leave needy individuals out. Individuals that fall in between income levels need help as well. Ms. Youssouf agreed and asked how flexible the City will be in creating the income bands. She noted that a new administration was in place in the City and so discussions may be productive. Jeremy Berman, Deputy General Counsel, said he believed that there was already discussion about expanding the bands, which would include more HHC patients and staff. Ms. Youssouf again stated that she would like to be kept fully informed.

Mrs. Bolus said that there were previous HHC employees that were in fact living in shelters because they fell outside of the income levels and that was a problem that needed to be addressed. Ms. Youssouf asked that a meeting or call be scheduled for further discussion of the project and to form a strong argument for dealing with these issues.

In conclusion, Ms. Weinstein advised that action items on the agenda included a license agreement with the New York Legal Assistance Group, and a resolution concerning improvement of the Corporate Wide IT infrastructure.

That concluded her report.

ACTION ITEMS

• Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to execute a five year revocable license agreement with the New York Legal Assistance Group (the "Licensee") for part-time, non-exclusive use and occupancy of space at Bellevue Hospital Center, Coler Nursing Facility, Coney Island Hospital, Elmhurst Hospital Center, Harlem Hospital Center, Henry J. Carter Specialty Hospital & Nursing Facility, Jacobi Medical Center, North Central Bronx, Kings County Hospital Center, Lincoln Medical & Mental Health Center, Metropolitan Hospital Center, Queens Hospital Center and Woodhull Medical & Mental Health Center (the "Facilities") to provide legal services to patients and training to Corporation staff at an annual fee of \$55,000 per clinic, per facility year one and two and \$60,000 per clinic per facility year, three, four and five payable by the Corporation to the Licensee and without any payment by the Licensee for the use of the space.

Dion Wilson, Assistant Director, Office of Facilities Development, read the resolution into the record. Mr. Wilson was joined by Randy Retkin and Julie Brandfield, New York Legal Assistance Group (NYLAG).

Ms. Youssouf noted that the relationship with NYLAG had been very positive for HHC and expressed excitement in the expansion of services being discussed.

Ms. Retkin thanked HHC for having been such a great partner over the years, and proceeded to review a power point presentation documenting accomplishments made over the course of the previous agreements.

Ms. Retkin explained that LegalHealth had become an integral member of HHC's healthcare team providing patients with free legal services that assist with safe discharge, access to treatment and improved quality of life. Over the past three (3) years LegalHealth handled 7,064 legal matters for 4,781 patients of eight (8) HHC hospitals. Expansion to three (3) additional HHC facilities and an increase in legal clinics at existing facilities would allow LegalHealth in partnership with HHC to continue to combat the social determinants of health.

Ms. Retkin noted that LegalHealth held weekly half day free legal clinics onsite at five (5) partnering HHC Hospitals; Coler-Goldwater Specialty Hospital and Nursing Facility (new clinic as of July 2012), Harlem Hospital Center, Jacobi Medical Center & North Central Bronx Hospital, Kings County Hospital Center, and Lincoln Medical Center; and twice weekly half day free legal clinics onsite at three (3) partnering HHC Hospitals; Bellevue Hospital Center, Elmhurst Hospital, and Woodhull Medical Center. On average, six (6) patients per clinic with 1.5 legal matters were dealt with. She explained that each legal clinic had 50% of an attorney's time dedicated to the clinic and to the legal work arising from these referrals, including court appearances, legal research, legal drafting, and/or preparation of immigration fillings.

Ms. Retkin noted that 520 matters were intaked and screened for eligibility for immigration relief that could lead to Medicaid, 89 for USCIS Freedom of Information Act requests to determine if patient has an immigration history that may make them Medicaid eligible, or that would rule out filing any further immigration applications, and 24 matters for visa extensions to allow for continuation of vital medical care, or for a family member to extend their stay in the U.S. to care for a seriously ill patient. In total, LegalHealth worked to increase or maintain health insurance for 773 HHC patients.

Prior data exchanges completed in 2011 show the direct financial impact of LegalHealth's work, such as when a client becomes eligible for or maintains Medicaid. Examples were as follows; \$409,133 in insurance reimbursements to Bellevue over three years, \$263,368 in reimbursements to Jacobi over three years, and \$217,131 in reimbursements to Elmhurst over three (3) years.

Ms. Retkin advised that as a result of legal intervention, Alternative Level of Care patients had been moved to nursing homes, assisted living, or other places in the community with home care. In the past year, LegalHealth had worked closely with Bellevue, Kings, Jacobi and most recently Elmhurst to evaluate patients, including ALOC patients, for capacity to pursue legal remedies where appropriate. Patients without capacity were flagged for possible Article 81 Guardianship.

Ms. Retkin advised that the proposed expansion would take LegalHealth's presence from eight (8) hospitals with 11 clinics to 11 hospitals with 16 clinics, representing a 45% increase in services offered. She stated that hospitals have expressed a willingness to spread NYLAG fundraising dollars and increase costs to hospitals to allow expansion, and as a result of spreading foundation dollars among a larger number of legal clinics, hospital contribution was increasing to \$55,000 per clinic for years one (1) and two (2) and \$60,000 per clinic for years three (3) through five (5).

Ms. Youssouf reiterated that the relationship was of great benefit to the Corporation and thanked Ms. Retkin for coming.

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

• Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to initiate the planning for a construction program of improvements throughout the Corporation to support an information technology equipment modernization and replacement plan with upgrades to heating, ventilation and air conditioning ("HVAC") and electrical equipment at a total approximate cost of \$15 Million over the next two years subject to further authorization by the Capital Committee of the components of such construction program.

Peter Lynch, Senior Director, Office of Facilities Development, read the resolution into the record. Mr. Lynch was joined by Bert Robles, Senior Vice President/Chief Information Officer, and Sal Guido, Assistant Vice President, Enterprise Information Technology Services (EITS).

Mr. Guido narrated a power point presentation. He advised that in order to support new technologies, initiatives and increasing network infrastructure the Enterprise Information Technology Services (EITS) Group developed a Network Refresh Program, for which in February 2011, the Board of Directors approved a capital spend of \$25.3 million for the 1st Wave of the ON-GOING Network Infrastructure Refresh Program. The goal of the program was aligning with industry standards to refresh network infrastructure equipment between 3 to 5 years.

Mr. Guido explained that this program was needed in order to support new initiatives and technologies such as: a new clinical EMR/Meaningful Use, Financial Enterprise Resource Planning (ERP) System Replacement/ Upgrade, Sorian (Siemens Registration System), Business Intelligence, IP

Telephony, Picture Archiving and Communication System (PACS). These systems and several others require a robust data communication system in order to operate efficiently.

EITS Completed Wave 1 in the 4th Quarter of 2013. Sites completed: LAN at Queens, Elmhurst, Lincoln, Harlem, Woodhull, Cumberland and Belvis, and Wireless at Queens, Elmhurst, Lincoln, Woodhull and Cumberland.

Ms. Youssouf asked if the wireless mentioned was free wireless. Mr. Guido explained that it was guest wireless for patients and resources within the hospitals. Ms. Youssouf asked if users would enter a code to log on. Mr. Guido said users would register with their personal email address and would then have access to certain aspects of the internet, excluding questionable content.

Mrs. Bolus asked if users would be able to watch television shows utilizing the network. Mr. Guido said yes, they would be allowed to access all available content, but HHC had to be aware of how the back end intranet infrastructure could handle the bandwidth utilization. Mr. Robles explained that guest traffic would be separate from regular hospital traffic so as to not interfere with critical facility utilization.

Ms. Bolus asked if this was throughout the facilities. Mr. Guido said yes.

Mr. Guido explained that Wave 2 of the program would encompass LAN at Jacobi Medical Center and North Central Bronx Hospital. The \$15 million that Capital Committee was being asked to approve in this resolution would be the next line item, and it would be mostly for environmentals at Queens, Elmhurst, Jacobi, and NCB.

Ms. Youssouf asked for an explanation of Voice Over Internet Protocol (VOIP). Mr. Guido explained that it would allow for telephone systems to be upgraded for higher technology with more flexibility, such as patient care services and video on demand for remote patients. Mr. Robles explained that productivity could be improved on a local level by retiring old exchanges and utilizing newer technologies such as combined voice/data lines. It was anticipated that in the next five (5) to seven (7) years all old exchanges would be retired.

Ms. Youssouf asked if the upgrade would allow for money saving. Mr. Guido said yes, combining the services into a single wire will reduce the cost considerably. Instead of running three (3) independent networks, they would be run as one (1).

Ms. Youssouf asked if capacity would be affected with the addition of guest wireless and what impact on utilization that would have. Mr. Guido said it will be monitored but the amount of streaming that takes place is far greater than simple data transfers.

Mrs. Bolus asked if wires had already been replaced. Mr. Guido explained that fiber-optic upgrades had been completed, and noted that systems allowing for temporary housing of streams can be done internally to eliminate or minimize outgoing traffic.

Mrs. Bolus asked if HHC could direct users to HHC preferred sites or information. She also asked if there were concerns about protecting HHC sites and information. Mr. Robles explained that security had been upgraded immensely in the past few months, monitoring traffic and data, and intrusion prevention is in place. However, he noted, there were always new ways of hacking so HHC was constantly on guard. Mr.

Robles explained that the segmented networks should also prevent problems. Utilizing the guest network does not allow access to the main HHC site so a hacker would have to exit the guest site and come back around. The Corporation is constantly reviewing and discussing cyper-protections, he said.

Ms. Youssouf asked if the \$43 million was included in the overall budget. Mr. Guido said yes. Ms. Youssouf asked if that money completed just the environmentals. Mr. Robles said it covers environmentals, upgraded LAN at Jacobi and NCB, wireless at NCB and Jacobi and VOIP at Coney, Queens, Elmhurst, Jacobi and NCB.

Ms. Youssouf asked about the IT closets and how that process was going. Mr. Lynch explained that this authorization would allow for an architectural/engineering firm to be engaged, which would advance designs to the point of bid/solicitation.

Ms. Youssouf asked that all work be completed above flood levels. The gentlemen said it would be.

Mr. Guido explained that multiple solicitations would be conducted via NYS OGS and GSA contracts to procure networking equipment and professional services. A minimum of three resellers will be solicited for each purchase. A purchase order will be issued to the lowest responsive and responsible bidder for each purchase.

Ms. Youssouf asked about project contingencies. Mr. Guido said that there was a 10% contingency.

Mrs. Bolus asked if small business would be participating in any of the work. Mr. Lynch explained that the construction component would operate within Equal Employment Opportunity (EEO) guidelines, as usual.

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

INFORMATION ITEMS

Project Status Report

South Brooklyn/Staten Island Health Network

Peter Lynch, Senior Director, Office of Facilities Development, provided a delay report on the Boiler project at Coney Island Hospital.

Mr. Lynch explained that the Boiler Replacement project, after initial delays as a result of newly implemented flood level mandates, was moving along nicely, with one new boiler on site, and the other in place. Ms. Youssouf asked whether the boilers will be above flood levels. Mr. Lynch said that they met the 100 year flood plan but not the 500 year flood plan.

Mrs. Bolus asked about a New York State Law that she understood negatively impacted the hiring of minorities. Mr. Berman explained that the law might negatively impact small business because insurance rates are increased. Mrs. Bolus said thank you.

Ms. Youssouf asked if the Sea View project was complete. Mr. Lynch said the project was not significantly delayed, and there for not due for a report, but he would provide status information to Ms. Youssouf.

There being no further business, the meeting was adjourned at 10:41 A.M.

SUBLEASE AGREEMENT CAMBA, INC. KINGS COUNTY HOSPITAL CENTER

RESOLUTION

Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to execute a 99-year sublease with CAMBA Housing Ventures, Inc. ("CHV") or a not-for profit housing development fund corporation in which CHV is the sole member, or a limited partnership or limited liability company in which the general partner or managing member, as applicable, is an affiliate of CHV for the development of low-income housing, and housing for the formerly homeless on the site of the "G Building," a parcel of land on the campus of Kings County Hospital Center (the "Facility") of approximately 97,000 square-feet at a fair market value rent established by appraisal which is currently anticipated to be not more than \$2.5 Million in total.

WHEREAS, since 1977, CAMBA, a non-profit organization based in Brooklyn, New York, has been providing services in New York City which include homelessness prevention, housing relocation, emergency and transitional housing, and permanent affordable and supportive housing; and

WHEREAS, CHV, is a not-for-profit corporation affiliated with CAMBA and incorporated in 2005 for the purposes of undertaking supportive and low-income housing development; and

WHEREAS, CHV will develop and operate on the Facility's campus at the site of the "G Building" a new building, named CAMBA Gardens Phase II ("CGII") containing low-income housing, and housing for the formerly homeless subject to review and approval by the New York City Department of Housing Preservation and Development ("NYCHPD") and such other lenders, investors, or government agencies as may be required by the financing and structure of the project;

WHEREAS, an affiliate of CHV recently completed the development of a similar project at the Facility at the site of the former "J" and "N Buildings," named CAMBA Gardens; and

WHEREAS, a Public Hearing was held on March 6, 2014, in accordance with the requirements of the Corporation's Enabling Act, and prior to execution, the sublease is subject to approval of the City Council and the Office of the Mayor.

NOW, THEREFORE, be it

RESOLVED, that the President of the New York City Health and Hospitals Corporation be, and he hereby is, authorized to execute a 99-year sublease with CAMBA Housing Ventures, Inc. or with a not-for profit housing development fund corporation in which CHV is the sole member, or with a limited partnership or limited liability company in which the general partner or managing member, as applicable, is an affiliate of CAMBA Housing Ventures, Inc. for the development of low-income housing, and housing for the formerly homeless on the site of the "G Building," a parcel of land on the campus of Kings County Hospital Center of approximately 97,000 square-feet at a fair market value rent established by appraisal prior to entry into the lease, which is currently anticipated to be not more than \$2.5 Million in total.

EXECUTIVE SUMMARY

SUBLEASE AGREEMENT KINGS COUNTY HOSPITAL CENTER CAMBA, INC. OR AFFILIATE

OVERVIEW:

The President seeks authorization from the Board of Directors to execute a sublease with CAMBA Housing Ventures, Inc. ("CHV") or a not-for profit housing development fund corporation in which CHV is the sole member, or a limited partnership or limited liability company in which the general partner or managing member, as applicable, is an affiliate of CAMBA Housing Ventures, Inc. ("CHV") for the development of low-income housing, and housing for the formerly homeless named CAMBA Gardens Phase II (CGII), on the campus of Kings County Hospital Center.

NEED/ PROGRAM:

CAMBA is one of Brooklyn's largest community based social service organizations with a budget of approximately \$73 million and a diverse staff of more than 1,300 employees. CAMBA's mission is to provide services which connect individuals and families with opportunities to enhance their quality of life. CAMBA serves more than 35,000 individuals and families a year in six core areas: Economic Development; Education and Youth Development; Family Support Services; HIV/AIDS and Health Related Services; Legal Services; and Housing Services and Development.

Since 1991, CAMBA has played a significant role in working with the City to address its housing crisis. Today this portfolio includes homelessness prevention, housing relocation, emergency and transitional housing, affordable permanent housing and supportive housing. CHV, an affiliate of CAMBA, was formed in 2005 for the express purpose of undertaking supportive and low-income housing development.

An affiliate of CHV recently completed its development of two new buildings, totaling approximately 180,000 square feet on the site of the former "J" and "N Buildings," at the Facility to provide 209 units of supportive and affordable permanent housing.

CGII will create affordable and sustainable housing, connect patients being discharged from inpatient care to stable housing and critical social services, provide tenants with access to healthcare, and generate revenue for area businesses. The aim will be to reduce homelessness among those adults and families who have the most chronic issues and are difficult to serve and house individuals who are in HHC facilities. By providing safe and permanent housing for homeless adults and families with severe mental illness, CGII will not only ease the costly demand on Medicaid, public shelter use and psychiatric treatment services, it also will help our most vulnerable residents live independently and interdependently in the community.

The project is expected to participate in the NYS Energy, Research and Development Authority (NYSERDA) Multi-Family Performance Program to be sustainable and transit-oriented and is designed to achieve a Leadership in Energy & Environmental Design (LEED) Gold rating and meet the Enterprise Green Communities/HPD criteria, the first comprehensive green building framework for

affordable housing. CGII will provide healthy indoor air quality that is critical for tenants with chronic illnesses and lower electricity bills for tenants and building operations. A roof-top solar panel system is expected to provide at least 50% of common areas' electricity needs.

The subtenant shall indemnify the Corporation and the City of New York and shall provide adequate insurance against all liability arising from its use and occupancy of the premises, naming the Corporation and the City of New York as additional insured parties.

SITE: 560 Winthrop Street

Borough of Brooklyn

PARCEL

SIZE: Approximately 97,000 square feet

CONSTRUCTION The proposed project will produce a building of 256,330 square feet with 293

housing units. The development budget will be approximately \$95 Million. The projected construction start date is July 2014 and the estimated completion date will be late fall 2016. The construction will proceed based on with plans and specifications prepared by the subtenant, subject to approval by the Corporation, such approval not to be unreasonably withheld. The subtenant shall be responsible for all costs associated with the development and operation of its

housing program.

INITIAL TERM: Ninety-nine (99) years

RENT: Subtenant shall pay rent at the appraised fair market value determined prior to

entry into to the lease which is currently anticipated to be not more than \$2.5 Million in total. The appraisal shall be an as is appraisal undertaken prior to the making of

any improvements by subtenant.

UTILITIES: The cost for all utilities required for the premises will be the responsibility of the

subtenant.

MAINTENANCE/ REPAIRS:

Subtenant will be responsible for all structural and non-structural maintenance and repairs, as it pertains to the development of the proposed new construction of CGII

within the G parcel boundaries, excluding Kings County Hospital utilities and infrastructure, which shall remain the sole obligation of Kings County Hospital Center, and which shall be reserved to KCHC pursuant to easements contained in

the sublease.

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Executive Summary – Sublease w/CAMBA, Inc. (CGII)

New York City Health and Hospitals Corporation Capital Committee

CAMBA Gardens Phase II CAMBA Housing Ventures, Inc.

March 13, 2014



About CAMBA, Inc.

- CAMBA's mission is to provide services which connect people with opportunities to enhance their quality of life.
- Founded in 1977 as a merchants' block association, CAMBA now serves over 45,000 individuals and families each year with a budget of approximately \$100 million and a diverse and dedicated staff of more than 1,400 employees and over 60 locations throughout NYC.
- CAMBA provides services through an integrated set of six program areas: Economic Development; Education and Youth Development; Family Support; Health; Housing; and Legal Services.
- CAMBA serves people with low incomes; people moving from welfare to work; persons who are homeless, at risk of homelessness or transitioning out of homelessness; persons living with or at risk of HIV/AIDS; immigrants and refugees; children and young adults; entrepreneurs and other groups working to become self-sufficient.
- In response to a pressing need for permanent, stable and affordable housing for Brooklyn residents, CAMBA, Inc. created an affiliated, non-profit affordable housing development corporation in 2005 named CAMBA Housing Ventures, Inc.



About CAMBA Housing Ventures, Inc.

- CAMBA Housing Ventures' (CHV) mission is to develop sustainable and energy efficient buildings that provide safe and affordable housing for low-income and formerly homeless families and individuals.
- CHV envisions vital neighborhoods where affordable housing and design excellence play a critical role in the long-term economic and social success of lower-income individuals and families.
- CHV developments provide sustainable and transit-oriented housing with services for formerly homeless individuals and families with special needs or low-income individuals and families from the community.

Production Summary:

- Completed: 605 units in Brooklyn, representing \$174 million in public/private investment.
- In construction: 175 units in Brooklyn representing \$60.5MM in public/private investment.
- In predevelopment: Approx. 746 units representing over \$255M in public/private investment.
- <u>In total:</u> CHV is 1,526 units (\$490MM) towards the goal of 1,000 units by 2015.



HHC Partnership for Supportive Housing

Within any given year, there are hundreds of patients who experience extended stays in HHC hospitals or nursing homes due to lack of access to affordable and supportive housing

 HHC/KCHC is a key partner in the creation of much needed supportive, affordable housing on underutilized hospital property

Need for supportive, affordable housing:

- As of February 25, 2014, there are over 52,200 people living in NYC shelters:
 22,514 children and 29,747 adults
- DOHMH recent report released on cost effectiveness of supportive housing:
 - In two year study (2007-9), tenants in NY/NY III funded supportive housing had significant net savings in jail, shelter, State psychiatric facilities and Medicaid utilization; as compared to those not placed in NY/NY III housing.

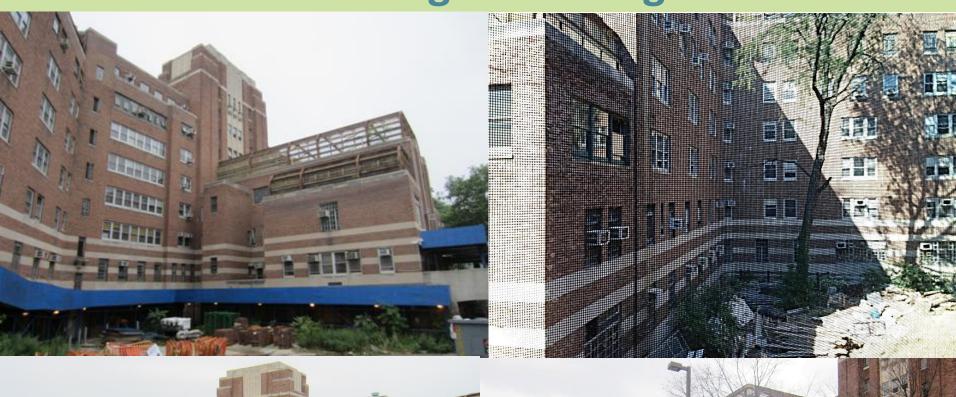
Housing Ventures

\$10,100 savings of tax dollars per tenant; nearly 3,900 tenants placed during the study period

CAMBA Gardens Phase I and II Project Goals

- Continue successful partnership with HHC and KCHC
- Continue successful model of CAMBA Gardens, co-locating housing and healthcare
- Maximize units to provide more affordable housing and units for HHC patients in the most efficient manner
- Build an attractive community asset and relate to Hospital,
 Residential areas & CAMBA Gardens Phase I
- Provide a variety of active and passive spaces for tenants of all ages
- Build sustainably to reduce energy bills and provide healthy indoor air quality for tenants

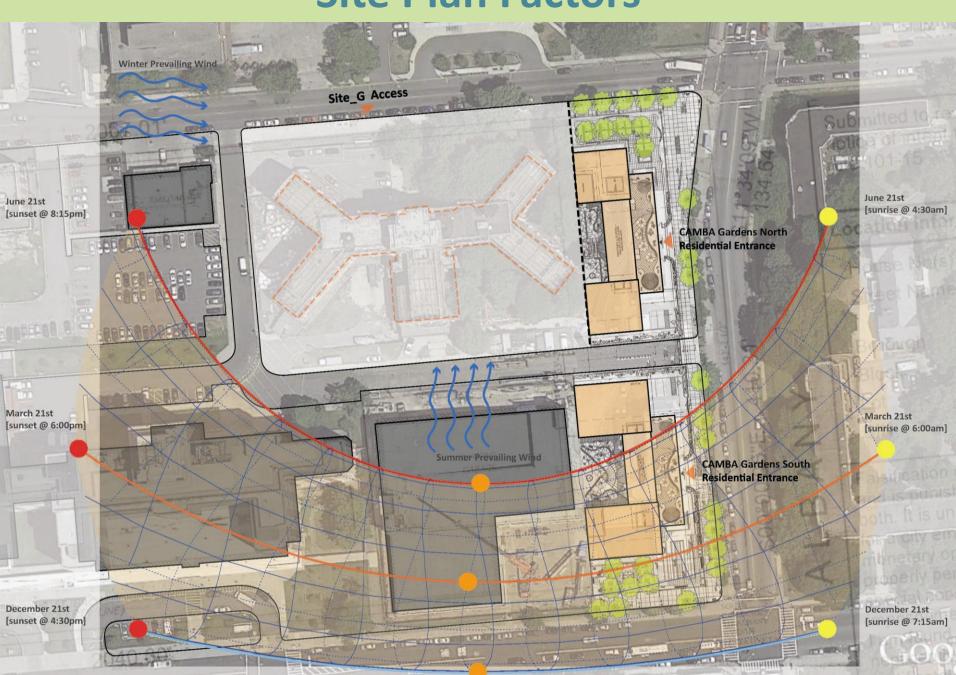
Existing G Building







Site Plan Factors



CAMBA Gardens Phase II Features

293 rental units: mix of studios, 1, 2 and 3 bedroom units

- Over 256,000 total square feet
- Amenities & services

- Landscape and green features
- Sustainable design



CAMBA Gardens Phase II Units

	Studio:	1 bedroom:	2 bedroom:	3 bedroom	Total by
Population	320 ave. SF	550 ave. SF	780 ave. SF	1,010 ave. SF	Pop. Type
Community					
Units (60% AMI)	17	23	48	22	110
	158 (incl.				
Formerly	anticipated 50				
homeless/	KCHC/DSSM				
Special needs	patients)	5	14	5	182
Super's unit				1	1
TOTAL UNITS					
BY SIZE	175	28	62	28	293

- 182 or 62% Special needs units (includes anticipated 50 KCHC/DSSM units) with anticipated rental subsidy
- 110 or 38% Low-income, earning less than 60% AMI



Community/Low-Income Units Lease-up

- CAMBA Gardens Phase II will provide 110 units for low-income community households earning up to 60% of Area Median Income
 - 17 studios, 23 one-beds, 48 two-beds and 22 three-beds
- HPD supervised and required lottery
- Current HUD/HPD guidelines allowed for the following preferences as used on CAMBA Gardens Phase I:
 - Current and eligible residents of Community Board 9: 50%
 - Eligible households that include persons with mobility impairments: 5%
 - Eligible households that include persons with visual and/or hearing impairments: 2%
 - Eligible King's County Hospital Center employees: 15%
 - Applicants who can document displacement by Hurricane Sandy and/or its related storms: 10%
 - Eligible City of New York Municipal Employees: 5%
 - Non preference units: 5%
- The current HUD/HPD preferences above are anticipated for CAMBA Gardens Phase II.



2014 HUD Income & Rent Limits for Community Units

60% of Area Median Income (AMI)*

Apt. size	Maximum rent (tenant pays electric in addition)	Ave. Household size	Maximum income
Studio	\$833	1	\$35,280
1 bedroom	\$895	1.5	\$37,800
2 bedroom	\$1,082	3	\$45,360
3 bedroom	\$1,247	4.5	\$52,380

Please note:

- 1. The above rents and incomes are provided as reference, not the actual rents for CGII
- 2. *Area Median Income: Area refers NY/Northern NJ/Long Island Metropolitan Statistical Area a. Includes all 5 boroughs and following counties: Westchester, Rockland, Putnam,
 - Nassau, Suffolk
- 3. Rents and income limits are determined by HUD each year and change annually
- 4. Rents will be determined by actual income & household size



HUD 2014 Maximum Incomes by Household Size

Household size	Maximum income- 60% AMI
1	\$35,280
2	\$40,320
3	\$45,360
4	\$50,340
5	\$54,420
6	\$58,440

- 1. Income limits are determined by HUD each year and change annually
- 2. Rents will be determined by actual income & household size



CAMBA Gardens Phase I



Rendering:



Completed:

Photo: Vanni Archive

CAMBA Gardens Phase II Draft Design



Former Site G, Kings County Hospital Center

Draft Design: Dattner Architects



CAMBA Gardens Phase II Draft Design



Former Site G, Kings County Hospital Center

Draft Design: Dattner Architects



CAMBA Gardens Phase II Draft Design



Former Site G, Kings County Hospital Center

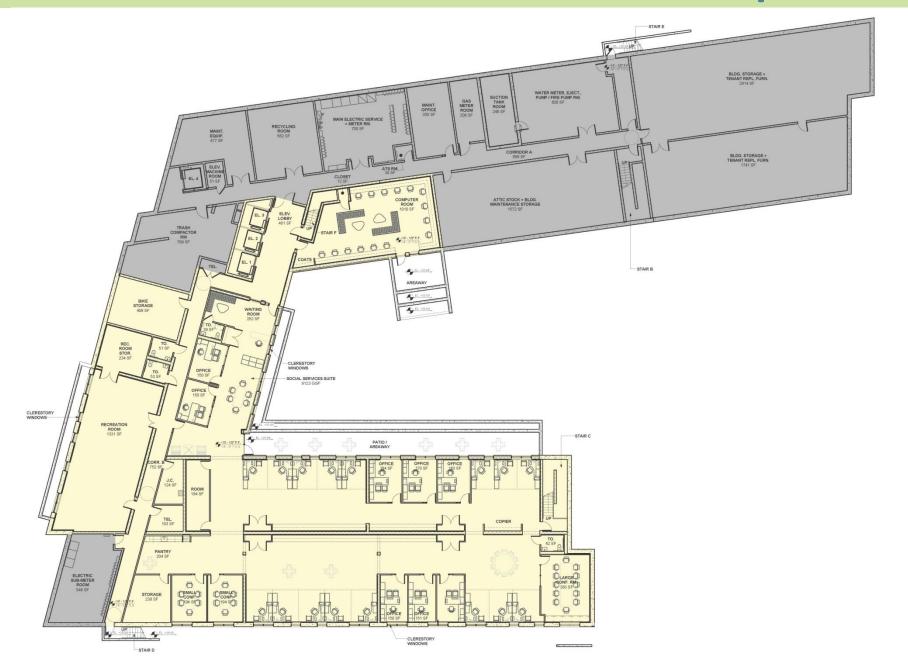
Draft Design: Dattner Architects



CAMBA Gardens Phase II: First floor and Landscape plan



CAMBA Gardens Phase II – Cellar plan



CAMBA Gardens Phase II Financing Model

Construction Financing:

- New York State Housing Finance Agency (HFA) tax exempt bonds
 - Credit enhancement provided by TD Bank
- Medicaid Redesign Team capital funds through HFA
- Low-Income Housing Tax Credits (LIHTC), syndicated by Enterprise Community Investment
- New York City Dept. of Housing Preservation and Development: Supportive Housing Loan Program (HPD)
- FY14 City Capital
- New York State Homeless Housing Assistance Program (HHAP)
- NYSERDA
- Supported by Council Member Mathieu Eugene & Brooklyn Borough President Marty Markowitz

Social Service Funding:

- New York City Department of Health and Mental Hygiene NY/NY III
- New York State Office of Mental Health NY/NY III



CAMBA Gardens Phase II

Next steps



ENERGY PROJECTS UPDATE



energyefficiency

UPDATE: Energy Projects







energyefficiency







CONEY ISLAND HOSPITAL Energy Related Capital Projects

Windows Replacement - Main Building (Completed): Project Cost \$10.9 million; Board Approved 07/21/2011

- Windows Replacement
- Air Conditioner Replacement

Boilers Replacement (In Construction): Project Cost \$9.9 million; Board Approved dates 05/24/2012 & 06/27/2013

- High Pressure Boiler Replacement
- □ Fuel Conversion
- New Gas Service
- Boiler House Structural Repair
- □ Storm Resiliency Work







Comprehensive Energy Efficiency Upgrade (Construction in progress): Project Cost - \$34.3 million;
Board Approved 06/27/2013

- □ High Efficiency Lighting Upgrade
- High Pressure Boiler Replacement
- □ Fuel Conversion
- HVAC Upgrade

Elmhurst Hospital Center

Comprehensive Energy Efficiency Upgrade (Construction in progress): Project Cost - \$28,5 million;
Board Approved 06/27/2013

- □ High Efficiency Lighting Upgrade
- High Pressure Boiler Replacement
- □ Fuel Conversion
- Central Chiller Plant Optimization
- HVAC Upgrade













□Number of Projects - 4

□Total Project Cost - \$83,683,956

□Energy Savings - \$4,548,593 / Yr

□CO₂ Avoided - 19,641 ton / Yr

□Equiv. Cars Removed - 4,100

□Equiv. BBL of Oil Saved - 45,762 / Yr

□Equiv. US Forests - 16,128 acres











Coney Island Hospital Windows Replacement – MAIN Bldg.







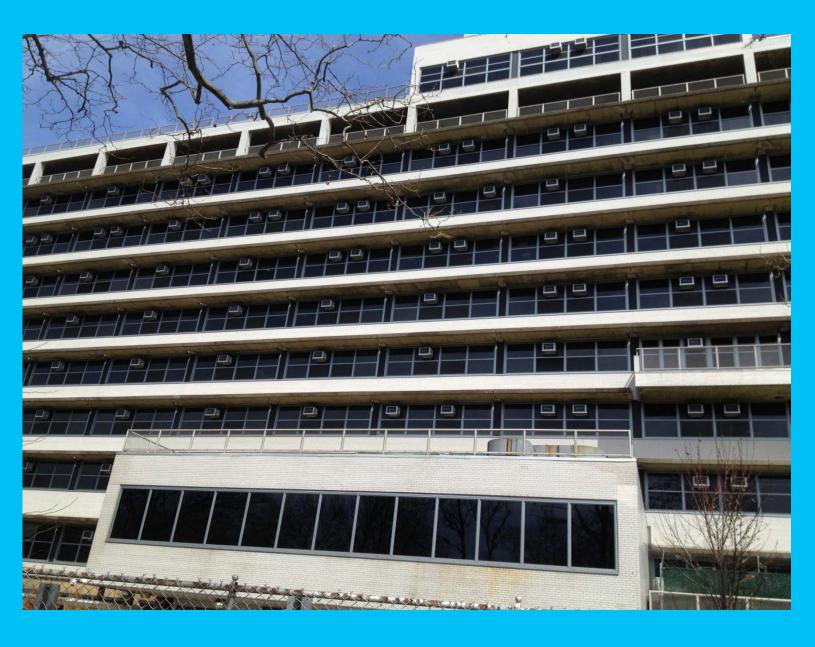
Window replacement work was staged with minimal disturbance to operation





Coney Island Hospital Windows Replacement – MAIN Bldg.







Newly installed insulated windows with energy efficient air conditioners



Coney Island Hospital Boiler Replacement Project





Post Sandy demolition of boilers installed in 1930's and 1950's







Coney Island Hospital Boiler Replacement Project





Structural repairs incorporating resiliency design of boiler room floor after damage from Hurricane Sandy .







Coney Island Hospital Boiler Replacement Project

energyefficiency













Coney Island Hospital Boiler Replacement Project









New boiler being delivered on site.





Coney Island Hospital
Boiler Replacement Project









New boiler being rigged unto new support.





nyc.gov/hhc

Coney Island Hospital Boiler Replacement Project









Three new 500 HP boilers on new supports.





Accelerated Conservation & Efficiency (ACE) Program NYC Citywide Administrative Services (DCAS) Grant Funded - Projects Under Design

Woodhull Medical & Mental Health Center - \$7.9 m

- Lighting & Vacancy Sensor Upgrades
- Boiler Burner Replacement
- Energy Management System (EMS) Upgrade
- Steam Trap Upgrades

Kings County Hospital Center - \$12.7 m

- □ Window Replacement "ABC" Bldgs.
- Window Air Conditioner Replacement
- Lighting & Lighting Controls Upgrade "ABC" & "T" Bldgs.
- Campus High Efficiency Lighting

Harlem Hospital Center - \$10.6 m

- High Efficiency Lighting Upgrade MLK, Ron Brown and Kountz Bldgs.
- □ Steam Trap Remediation
- □ Modernization of AHU System MLK and Kountz Bldgs.
- □ Backpressure Steam Turbine Generator
- Boiler Replacement (Central Heating Plant)









PROJECT STATUS REPORTS

Central/North Brooklyn Health Network Generations+/Northern Manhattan Health Network Queens Health Network Project Status Report (As of February, 2014)

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
29201101	Upgrade Ten (10) Elevators "ABC" Buildings	5,148	4,837	94.00%	Mar-12	May-13	May-14	(12)	Phase I (Freight elevators in the ABC Buildings): Completed and approved for operation by the NYC DOB. Phase II (one passenger elevator in each of the ABC Building plus the hydraulic elevator): All passenger elevators completed and approved for operation. For B Building hydraulic elevator: DOB appointment scheduled for March 12, 2014. Phase III (remaining passenger elevator in each of the ABC Buildings): scheduled for completion in May 2014.
29201102	Upgrade Four (4) Elevators "T" Building	1,998	1,892	95.00%	Mar-12	Dec-12	Dec-13		Phase I (North) and Phase II (South): Completed and approved for operation. Project will be removed after this reporting cycle.

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
48200803	Obstetric Unit Expansion	3,251	2,439	75.00%	Jun-13	Feb-14	Oct-14	(8)	Start of construction was delayed because of the need to relocate the Overflow Postpartum Nursing Unit and several offices from the site to other areas throughout the building. Demolition is being scheduled for the end of January 2014.

Project Status Report (As of February, 2014)

Network: GENERATIONS+/NORTHERN MANHATTAN HEALTHCARE NETWORK

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
13201240	Construct and Outfit Dental Clinic - Kountz Pavilion	5,659	5,617	99.00%	May-13	Dec-13	Dec-13		DOH inspection scheduled for January, 2014. Due to surveyor availability inspection was moved to March. Heal funding was invoiced in December of 2013. Project will be removed after this reporting cycle

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	25,666	91.00%	Apr-07	Jun-10	Dec-13	(42)	DOH inspection completed on Dec. 30, 2013. Phased move will begin on March 18th. ED relocation will be completed in in May 2014. Project will be removed after this reporting cycle.

Project Status Report (As of February, 2014)

Network: QUEENS HEALTH NETWORK
Facility: ELMHURST HOSPITAL CENTER

Project Numb	er PROJECT TITLE	Project Budget (\$000s)	Paid to Date (\$ 000s)	% Paid to Date	Construction Start	Completion	Forecast/ Actual Completion	Delay (if any)	Comments
33200801	Women's Health Center	13,352	11,717	88.00%	Sep-11	Dec-12	Mar-14	(15)	Installing framing for exterior pannels. All pannels have been delivered.

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
34201201	"T" Building Relocation	8,400	695	0.80%					Finalizing bid documents for Pavilion shell space and CPEP 1 training center.