

CAPITAL COMMITTEE

November 6, 2014

MEETING AGENDA

11:00 A.M.

125 Worth Street, Room 532  
5<sup>th</sup> Floor Board Room

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CALL TO ORDER

Emily A. Youssouf

- ADOPTION OF MINUTES October 2, 2014 Emily A. Youssouf
- SENIOR ASSISTANT VICE PRESIDENT'S REPORT Roslyn Weinstein

ACTION ITEMS

- **Resolution** Chris Constantino  
Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to execute a revocable five-year license agreement with the Interboro Regional Health Information Organization (the "RHIO") for its continued use and occupancy of approximately 575 square feet of space on the third and fifth floors of the Annex "G" Building at Elmhurst Hospital Center (the "Facility") to provide technical and administrative services to the RHIO in which most of the Corporation's hospitals are participants with the occupancy fee waived as an in-kind contribution to the RHIO.
- **Resolution** Louis Iglhaut  
Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to execute one year extensions of existing agreements with six of the seven construction management services firms: Gilbane Building Company; HAKS; Hunter Roberts Construction Group; Jacobs Engineering; LiRo Program and Construction Management; and, TDx Construction Corporation (the "CMS"), to provide professional construction management services on an as-needed basis at various facilities throughout the Corporation at an additional aggregate not-to-exceed limit of \$2.5 Million.

INFORMATION ITEMS

- Gouverneur Healthcare Service Major Modernization Status Report Martha Sullivan
- Project Status Reports  
*Central/North Brooklyn Health Network* Daniel Gadioma/Lisa Scott-McKenzie
  - Kings County Hospital: Elevator Upgrade "ABC" Buildings
  - Woodhull Medical Center: Obstetric Unit Expansion*Queens Health Network* Dean Mihaltses
  - Elmhurst Hospital: Women's Health Center
- PLA Agreement Jeremy Berman

OLD BUSINESS  
NEW BUSINESS  
ADJOURNMENT

# **CAPITAL COMMITTEE MEETING MINUTES**

**OCTOBER 2, 2014**

## MINUTES

### Capital Committee

Meeting Date: October 2, 2014

Time: 10:00 A.M.

Location: Board Room

#### Board of Directors:

##### Members of the Capital Committee

Emily A. Youssouf, Chair

Josephine Bolus, RN

Antonio Martin – Executive Vice President (representing Ramanathan Raju, MD, President, in a voting capacity)

#### HHC Staff:

Paul Albertson – Senior Assistant Vice President, Operations

Jeremy Berman – Deputy General Counsel, Office of Legal Affairs

Michael Buchholz – Coler Rehabilitation and Nursing Care Center

Deborah Cates – Chief of Staff, Office of the Chairman

Manding Darboe – Assistant Director, Office of Facilities Development

Luis Enchantegui – Contract Manager, Lincoln Medical and Mental Health Center

Rebecca Fischer – Associate Executive Director, Bellevue Hospital Center

Chris Gowrie – Associate Executive Director, North Bronx Health Network

Tracy Green – Chief Financial Officer, Metropolitan Hospital

David Guzman – Associate Director, Metropolitan Hospital

William Hicks – Chief Operating Officer, Bellevue Hospital Center

Louis Iglhaut – Senior Director, Office of Facilities Development

Liny Liu – Senior Associate Director, Lincoln Medical and Mental Health Center

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

Peter Lynch – Assistant Vice President, Office of Facilities Development

Randall Mark – Chief of Staff, Office of the President

Dean Moskos – Director, Office of Facilities Development

Michael Rawlings – Senior Associate Director, Bellevue Hospital Center

Christopher Roberson – Director, Bellevue Hospital Center

Lynnette Sainbert – Assistant Director, Chairman's Office

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

Frank Zanghi – Audit Manager, Office of Internal Audits

#### Other Attendees:

Michael Fox – New York City Police Department

Stephen Harkevych – Mental Health Legal Services

Jennifer Ives – Mental Health Legal Services

Vadim Raskin – Dormitory Authority of the State of New York (DASNY)  
Nichole Yezzo – New York City Department of Education

## **CALL TO ORDER**

The meeting was called to order by Emily A. Youssef, Chair of the Capital Committee, at 10:15 A.M.

On motion, the Committee voted to adopt the minutes of the September 11, 2014, Capital Committee meeting.

## **SENIOR ASSISTANT VICE PRESIDENT'S REPORT**

Roslyn Weinstein, Senior Assistant Vice President, Office of the President, advised that the agenda would include three (3) no fee license agreements for City spaces. She noted that these are the types of agreements for which discussion has been initiated to review HHC payment to other City agencies and HHC providing space at no cost to other agencies. Ms. Weinstein advised that Bellevue would be presenting their Cardiac Catheterization Unit request, and Coler would be requesting dollars for ongoing work related to their sprinkler project; not incremental dollars, but dollars that were brought over from other projects to maintain budget neutrality on the way to completion. She said she expected that the November meeting would include a presentation on New York Power Authority (NYPA) financing and current energy projects. She noted that work in that area had been quite successful and she looked forward to sharing information.

That concluded Ms. Weinstein's report.

## **ACTION ITEMS**

- **Authorizing the President of the New York City Health and Hospital Corporation (the "Corporation") to execute a five year revocable license agreement with the Mental Hygiene Legal Services of the New York State Supreme Court (the "Mental Hygiene Legal Services") for use and occupancy of approximately 1,850 square feet of space to provide legal services at Bellevue Hospital Center (the "Facility") with the occupancy fee waived.**

Steven Alexander, Executive Director, Bellevue Hospital Center, read the resolution into the record. Mr. Alexander was joined by Christopher Roberson, Director, Bellevue Hospital Center, and Stephen Harkev and Jennifer Ives, Mental Health Legal Services.

Mr. Alexander explained that the services had been provided at the hospital for approximately 30 years. The organization provides legal services for inpatients in psychiatry and operates an onsite court that readies patients for issues such as medication over objection, or deals with issues of commitment.

Mrs. Bolus asked how many patients are serviced annually. Ms. Ives said approximately 1,100 are seen in the court throughout the year.

Mr. Alexander explained that if the court were not present at the facility then legal services would have to be sought on a case by case basis. Patients would require transport to off-site locations in order to address issues, and that alone could present difficulties to the facilities operations and the patients themselves.

Jeremy Berman, Deputy General Counsel, explained that the legal services being provided were directly related to treatment; medication, commitment, etc. They are not just general legal services. He noted that the law required that these legal services be provided and there were time considerations with cases that needed to be resolved very quickly and therefore it was a convenience and efficiency to the hospital that the services be readily available and on site.

Antonio Martin said he was familiar with the program and their services and appreciative of their work.

Mrs. Bolus asked for a more detailed explanation of the services and process. Ms. Ives explained that being onsite allowed for court determinations to be acted upon in a timely manner; final orders were received the day of court. Another benefit was that they negate the need to transport the approximately 1,100 patients being represented, and the staff that would need to be present as well; including doctors that could alternately have to spend entire days sitting in an outside courtroom.

Ms. Youssouf asked if the program provided full time services. Ms. Ives explained that the court operated one day a week but the legal services were provided daily, and that staff was on site daily, therefore services were available to be provided immediately instead of having to wait perhaps a week. Administrative benefits were seen daily.

Mr. Martin said that Kings County could benefit from these services. Ms. Weinstein said that space had been offered but collaboration was still under discussion.

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 resolution for the full Board's consideration.

- **Authorizing the President of the New York City Health and Hospital Corporation (the "Corporation") to execute a five year revocable license agreement with the New York City Department of Education's McSweeney Occupational Training Center (the "Department of Education") for its use and occupancy of approximately 504 square-feet for space to provide vocational training at Jacobi Medical Center (the "Facility") with the occupancy fee waived.**

Christopher Gowrie, Associate Executive Director, North Bronx Health Network, read the resolution into the record on behalf of William Walsh, Senior Vice President, North Bronx Health Network. Mr. Gowrie was joined by Nichole Yezzo, Job Developer, McSweeney Occupational Training Center.

Ms. Yezzo explained that the program served individuals 14-21 years of age in need of vocational training before they graduated the high school program. At Jacobi there were 12 students, one (1) teacher and one (1) paraprofessional that worked throughout the campus in food service, grounds, maintenance, the Emergency Department, and other locations. She stated that it was a benefit for the students to get the hands on vocational training and the facility benefited from the extra services being provided.

Ms. Youssouf asked how many students end up accepting jobs at the facility. Ms. Yezzo said that one student had been hired in a full time capacity at the facility. She explained that some of the students

graduate and then enter additional vocational programs that are tailored to individuals that have emotional or mental disabilities. Students receive approximately one hour of classroom education in functional literacy and functional math and the rest of the time they are on site working.

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 five year revocable license agreement with the New York City Police Department ("NYPD") for its use and occupancy of an approximately 11,000 square foot parcel of land to operate a parking lot at Jacobi Medical Center (the "Facility") with the occupancy fee waived.**

Christopher Gowrie, Associate Executive Director, North Bronx Health Network, read the resolution into the record on behalf of William Walsh, Senior Vice President, North Bronx Health Network. Mr. Gowrie was joined by Sergeant Michael Fox, New York City Police Department (NYPD).

Mr. Gowrie advised that the NYPD's 49 precinct is located adjacent to the facility and they had been a great neighbor, working hand in hand with the facility. He explained that they lease approximately 11,000 square feet of space, which they have fenced off, to provide parking.

Ms. Youssouf asked how many space are provided. Mr. Fox said approximately 35 spaces are available.

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 to execute a Dormitory Authority of the State of New York (DASNY) Work Order in the amount of \$2.5 million, for the design, construction, and construction management services necessary for the installation of an automatic sprinkler system at Coler Rehabilitation and Nursing Care Center, as required by the amendment of Federal regulation by the Centers for Medicare and Medicaid Services (CMS). This work order specifically authorizes DASNY to install additional sprinklers and repair existing sprinklers in areas flooded by hurricane Sandy; install a new suppression system in the elevator rooms; and to perform extensive an amount of life-safety work. This scope of work increases the previous work order authorization by \$2.5 million, to \$30.6 million.**

Robert Hughes, Executive Director, Coler Rehabilitation and Nursing Care Center, read the resolution into the record. Mr. Hughes was joined by Michael Buchholz, Associate Executive Director, Coler Rehabilitation and Nursing Care Center, and Vadim Raskin, Dormitory Authority of the State of New York (DASNY).

Ms. Youssouf asked how the project was originally funded. Mr. Buchholz said, with Capital money.

Mr. Buchholz explained that when Center for Medicaid and Medicare Services (CMS) instituted a new rule, that Nursing Homes should be fully sprinkled, New York City had a code that elevator machine rooms should have water systems. At the time of that determination the State was not allowing that and so between the State, the Fire Department of the City of New York, and the Department of Buildings it was determined that foam systems would be installed.

Ms. Youssouf asked DASNY representation to confirm that the proposed completion plan and budget would not be exceeded. Mr. Hughes said the project was anticipated for completion in February, 2015. Ms. Youssouf asked about project contingency. Mr. Raskin said there was a 10% contingency on the project.

Ms. Youssouf asked that the Office of Facilities Development monitor the project closely. Mr. Lynch said this was an extension of the existing sprinkler project, for which OFD had been highly involved, and would continue to be. He added that Federal Emergency Management Agency (FEMA) funding had been sought for the small portion of the project that was related to the effects of Hurricane Sandy but FEMA determined that the work was not eligible.

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 capital expenditure by the New York City Health and Hospitals Corporation (the "Corporation") of a total of \$3,620,000 for the replacement of the existing Cardiac Catheterization Imaging System and the existing Hemodynamic Monitoring System at Bellevue Hospital Center (the "Facility").**

Steven Alexander, Executive Director, Bellevue Hospital Center, read the resolution into the record. Mr. Alexander was joined by Michael Rawlings, Senior Associate Director, Bellevue Hospital Center, and William Hicks, Chief Operating Officer, Bellevue Hospital Center.

Mr. Alexander explained that Cardiac Services in general were a strategic priority for Bellevue and HHC. He outlined Bellevue's long history, noting Aortic surgery completed at the facility in 1818, and physicians that went on to do major discoveries; including the doctor that invented the pacemaker, the doctor that preformed the first mitro-valve replacement, a doctor that identified an aortic murmur, and a number of hemodynamic studies that changed the field.

He advised that the facility performed approximately 2,100 interventions a year; installing stents, electrophysiology studies, treatments to fix rhythm problems, pacemaker and defibrillator installations, heart pumps, etc. He said that annually the facility handled 1,100 cardiac related discharges, and over 10,000 patients were seen in the clinics. Bellevue opened the first heart failure clinic, years ago, he added. He said that Bellevue performed 800 procedures a year from other HHC facilities and very few from outside of HHC.

Mr. Alexander explained that there were two labs, functioning side by side with a shared control room. The one being presented was last updated in 2003, and the other lab, in 2007. He advised that the second lab would likely be brought before the Committee for approval in the coming months. He said that work would include refurbishment of the control room that connects the two labs.

Mr. Alexander noted that the imaging equipment would cost approximately \$1.3 million, the hemodynamic system, and its related systems, approximately \$0.9, and, approximately \$1.3 million for construction. He noted that this project would bring emergency power to both the labs, which was not available before, and would include a ramp up of Heating Ventilation and Air Conditioning (HVAC) services to accommodate increased air exchange requirements. New booms would also be installed to support the new equipment.

Mr. Alexander explained that a mobile catheterization lab would be operating on the ground floor, adjacent to the facility, to maintain services during the project.

Mrs. Bolus asked about additional staff. Mr. Alexander said that current Bellevue staff would be redeployed to cover the two (temporarily separate) labs.

Mrs. Bolus asked why the facility was late coming to the Committee if the equipment's useful life was estimated at the end of 2013. Mr. Alexander said that Hurricane Sandy had impacted priorities a bit. Mrs. Bolus asked that this not happen in the future. These are crucial pieces of equipment and they shouldn't be running past their estimated useful life, she said.

Ms. Youssouf asked when end of life was expected for equipment in the second lab. Mr. Alexander said that the dates were just around the corner but that he hoped that work would begin immediately after completion of the first lab.

Ms. Youssouf asked who would handle the construction portion of the project. Mr. Rawlings said an outside architect and engineer had been engaged to develop bid documents. The project would be completed using Job Order Contracts (JOC), and those contractors would be working closely with GE who would be installing the equipment.

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.

### **INFORMATION ITEMS**

- **Project Status Reports**

***South Manhattan Health Network***

*Bellevue Hospital Center – Construction of Day Care Center Playground*

*Bellevue Hospital Center – Elevator Controls Upgrade: "C" & "D" Buildings*

Michael Rawlings, Senior Associate Executive Director, Bellevue Hospital Center, provided status updates on two active projects at the facility. Mr. Rawlings advised that playground construction had been awarded, the project was on track and should be fully functional by the end of the month.

Mr. Rawlings explained that "C" and "D" building elevators were severely damaged during Hurricane Sandy, and although those repairs were made, there were controls and equipment above designated flood elevations that needed to be upgraded. He noted that one car had been completed, the next would be expected in a week or two, and that would complete the "C" building work, then the contractor would move to the "D" bank and work on one area and then the other.

Mrs. Bolus asked if the playground were constructed with handicapped capabilities. Mr. Rawlings said yes, the project was Americans with Disabilities Act (ADA) approved.

### **Real Estate Report**

Mr. Berman distributed a list of spaces at HHC facilities that are occupied by NYC agencies, and a list of spaces that HHC occupied in space owned by other City agencies. He explained that it was part of the effort to approach the City for no charge where HHC paid rent, specifically the Multi-Service Centers operated in space owned by the Human Resources Administration (HRA), and the parking lot spaces that HHC rents from the Department of Citywide Administrative Services (DCAS).

Mr. Berman noted that at the previous Board of Directors meeting, Dr. Raju, President, had commented on an initiative with the Office of the Mayor's Department of Immigrant Services to identify possible space in HHC facilities for undocumented youth coming into the City. Mr. Berman said that Legal Affairs had searched and was unable to find space to be rented. He said there was a possibility that a continuing search may make some space available.

Ms. Youssouf thanked Mr. Berman for the list of City sites and noted that some additional information would be added.

There being no further business, the meeting was adjourned at 10:47 A.M.

# **LICENSE AGREEMENT**

**INTERBORO REGIONAL HEALTH INFORMATION  
ORGANIZATION (INTERBORO RHIO)**

**ELMHURST HOSPITAL CENTER**

## RESOLUTION

Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to execute a revocable five-year license agreement with the Interboro Regional Health Information Organization (the "RHIO") for its continued use and occupancy of approximately 575 square feet of space on the third and fifth floors of the Annex "G" Building at Elmhurst Hospital Center (the "Facility") to provide technical and administrative services to the RHIO in which most of the Corporation's hospitals are participants with the occupancy fee waived as an in-kind contribution to the RHIO.

**WHEREAS**, in February 2010, the Board of Directors authorized the President to enter into a revocable license agreement with the RHIO, a not-for-profit corporation serving the City of New York, and established to facilitate the sharing of patient information among authorized health care providers at the point of care; and

**WHEREAS**, the RHIO is a continuation of a project initiated at the Facility through a grant via the "Healthcare Efficiency and Affordability Law for New Yorkers" (HEAL NY) and has expanded to include most of the Corporation's facilities; and

**WHEREAS**, the RHIO links community physicians to other participants including most of the Corporation's facilities, to facilitate the exchange of health information to improve health care quality, safety, and reduce costs; and

**WHEREAS**, the RHIO's efforts are aligned with and support the Corporation's goals of improving patient safety and health care quality and reducing costs; and

**WHEREAS**, the Facility continues to have space available to accommodate the RHIO's 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 revocable five year license agreement with the Interboro Regional Health Information Organization (the "RHIO") for its continued use and occupancy of approximately 575 square feet of space on the third and fifth floors of the Annex "G" Building at Elmhurst Hospital Center to provide technical services to the RHIO in which most of the Corporation's facilities are participants with the occupancy fee waived as an in-kind contribution to the RHIO.

## EXECUTIVE SUMMARY

### LICENSE AGREEMENT INTERBORO REGIONAL HEALTH INFORMATION ORGANIZATION

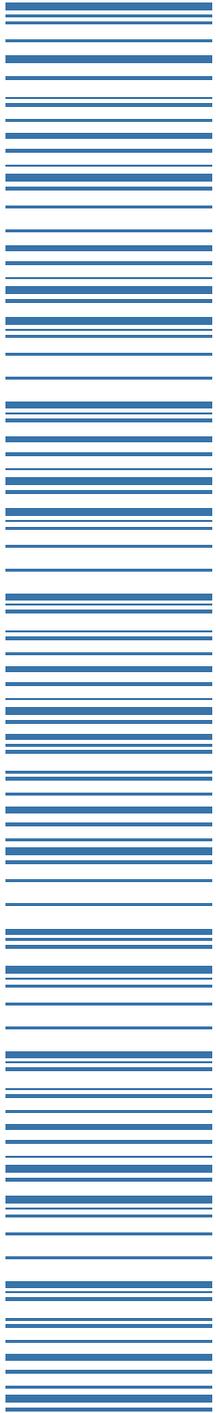
#### QUEENS HEALTH CARE NETWORK

The President of the New York City Health and Hospitals Corporation seeks the Board of Directors' authorization to execute a revocable license agreement with the Interboro Regional Health Information Organization (the "RHIO") for its continued use of space at Elmhurst Hospital Center ("Elmhurst").

The RHIO, a not-for-profit corporation, serves most of the City of New York and was established to facilitate exchanges of health information to improve health care quality, safety, and reduce costs. The RHIO's efforts align the Corporation's goals of improving patient safety and health care quality and reducing costs. Participants in the RHIO include Bellevue Hospital Center, Coney Island Hospital, Cumberland Diagnostic & Treatment Center, East New York Diagnostic & Treatment Center, Elmhurst Hospital Center, Gouverneur Healthcare Services, Harlem Hospital Center, HHC Health and Home Care, Jacobi Medical Center, Kings County Hospital Center, Lincoln Medical Center, MetroPlus, Metropolitan Hospital Center, Morrisania Diagnostic & Treatment Center, North Central Bronx Hospital, Queens Hospital Center, Renaissance Hospital Center, Segundo Ruiz Belvis Diagnostic & Treatment Center, Woodhull Medical Center. The RHIO is funded by a NYSDOH grant. Providing the subject office space at Elmhurst is an in-kind contribution to the RHIO.

Through a "Healthcare Efficiency and Affordability Law for New Yorkers" (HEAL NY) Phase I grant, Elmhurst was designated the lead facility for the implementation of technology that permits sharing of information across providers and health care organizations. The RHIO continues the project initiated at Elmhurst under the HEAL NY grant. The RHIO's object is the development of a data exchange, where medical information from multiple sources, are integrated into a consolidated record and available to authorized patient care providers facilitating care coordination and minimizing or eliminating duplication of laboratory tests, radiological exams, etc.

The RHIO will be granted the continued use and occupancy of approximately 575 square feet of space on the third and fifth floors of the Annex "G" Building. Elmhurst will provide hot and cold water, electricity, heating, security, and routine maintenance to the licensed space. Elmhurst will be responsible for structural repairs, and the RHIO will be responsible for non-structural repairs made to the licensed space. The RHIO will indemnify and hold harmless the Corporation and the City of New York from claims arising out of its use of the licensed space and will provide appropriate insurance naming the Corporation and the City of New York as additional insureds. The license agreement shall not exceed five years without further authorization from the Board of Directors of the Corporation and shall be revocable by either party upon ninety days' prior written notice.



# Interboro RHIO



**Regional Health  
Information Organization**

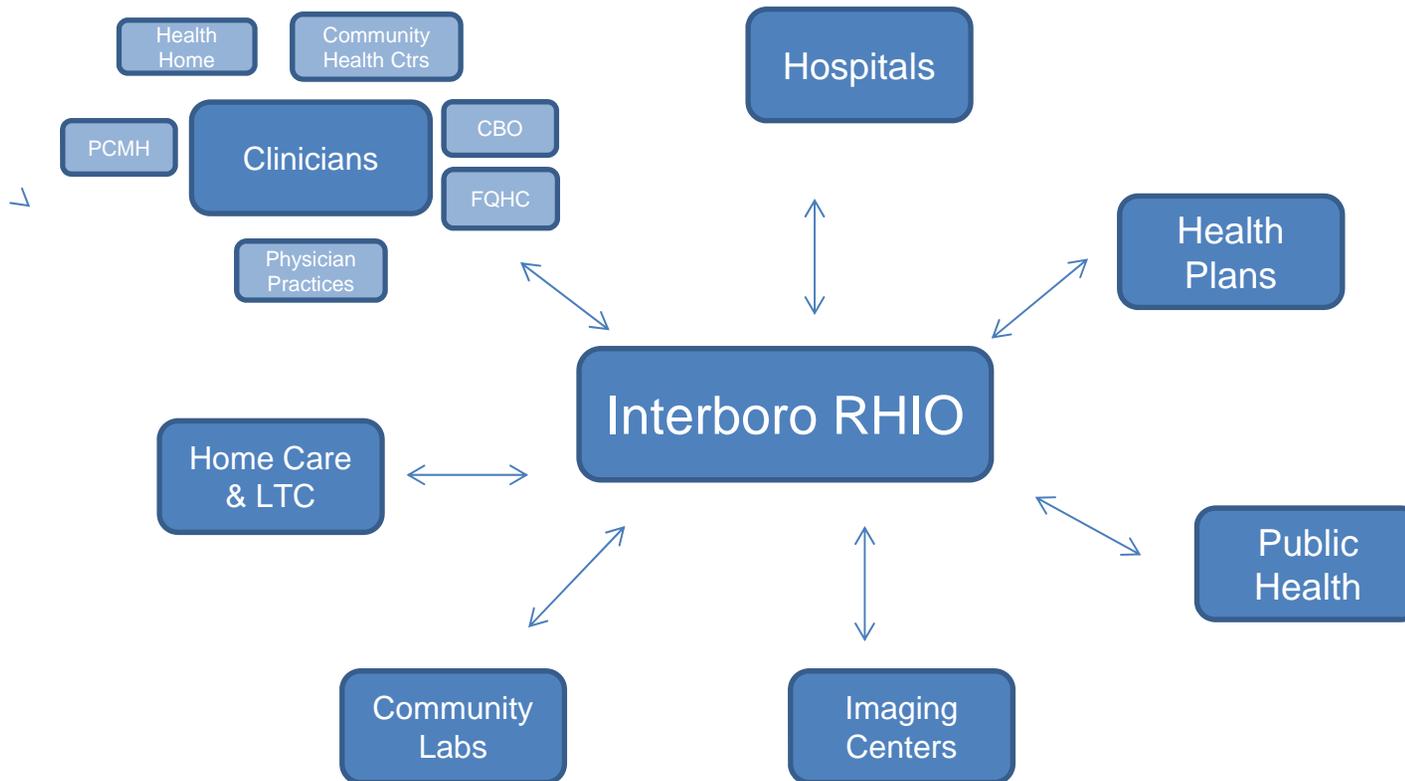
# Interboro RHIO

## Mission



- To improve health care quality and safety and reduce costs.
- To develop a health information infrastructure which facilitates the exchange of patient health information among disparate clinicians.
- To provide access to the information necessary to guide clinical decisions and care coordination.
- To promote a system that follows the health care consumer so they are the center of their care.

# Interboro RHIO Vision



# Interboro RHIO Membership



## **Current Status**

- Over 300 Community Provider Organizations
- 3 FQHCs
- 3 Long-term Care Facilities
- 4 Acute Care Facilities
- 2 Home Care Agencies

## **Current Members include:**

- Elmhurst Hospital Center
- Queens Hospital Center
- Woodhull Medical Center
- Bellevue Hospital Center
- Cumberland D&TC Center
- Gouverneur Healthcare Services
- HHC Health & Home Care
- Metropolitan Hospital Center
- Kings County Hospital
- East New York D&TC
- Coney Island Hospital
- Floating Hospital
- Charles B Wang
- Damian Family Care Centers
- Visiting Nurse Services of NY
- FEGS
- The Bridge
- Doshi Diagnostic Imaging Services
- SUS
- PSCH
- ICL
- Q-Care Affordable Medical Care

# Interboro RHIO Services



## Patient Record LookUp

- Real time access to patients clinical data
- Records from multiple sources
- Providing a more complete picture of a patient's health

## CCD Exchange

- Ability to query and retrieve documents from within a provider's EMR

## Event Alerts

- Real time notification on:
  - ED visits
  - Inpatient Admissions and Discharges
- Alerts to clinicians' e-mail and secure clinical mail box

## Care Coordination

- Information on where patient is receiving care
- Alerts on ED visits and admissions
- ED and Discharge Summaries available
- Ability to communicate with patients' Care Team
- Ability to share patient Care Plan

## Transitions of Care

- Support for sending/receiving "Direct" messages

# Interboro RHIO

## Future Plans



- Integration of all HHC Acute and D&TCs
- Support for DSRIP programs
- Cross RHIO Exchange
- Cross RHIO Event Alerts
- Single Sign On
- Care Plan Interface

**CONTRACT EXTENSIONS**  
**CONSTRUCTION MANAGEMENT SERVICES**  
**CORPORATE WIDE**

## RESOLUTION

Authorizing the President of the New York City Health and Hospitals Corporation (the "Corporation") to execute one year extensions of existing agreements with six of the seven construction management services firms: Gilbane Building Company; HAKS; Hunter Roberts Construction Group; Jacobs Engineering; LiRo Program and Construction Management; and, TDX Construction Corporation (the "CMs"), to provide professional construction management services on an as-needed basis at various facilities throughout the Corporation at an additional aggregate not-to-exceed limit of \$2.5 Million.

**WHEREAS**, the Corporation entered into contracts with the CMs for as-needed construction management services on November 30, 2011 for a not-to-exceed aggregate limit of \$6 Million following a competitive request for proposals process and pursuant to authorization of the Corporation's Board of Directors; and

**WHEREAS**, to date all but approximately \$77,000 of the funding for these contracts has been expended; and

**WHEREAS**, the Corporation is currently in negotiations with the City of New York and the Central Labor Council for the execution of a "Project Labor Agreement" that will impose new work rules on virtually all of the Corporation's construction projects and will free the Corporation from the requirements of the Wicks Law; and

**WHEREAS**, normally, at this point the Corporation would make a new solicitation for construction managers but any such solicitation should, ideally, include the requirements of the proposed Project Labor Agreement but that agreement will likely not be finalized for another three to six months; and

**WHEREAS**, under the circumstances it makes most sense to merely extend six (6) of the seven (7) current contracts for a short period until the Project Labor Agreement is finalized and at that point do a completely new solicitation. A1 Works in Progress Associates' services were not utilized and therefor will not be renewed.

**NOW, THEREFORE, be it**

**RESOLVED**, that the President of the New York City Health and Hospitals Corporation be and hereby is authorized to execute to execute one year extensions of existing agreements with six of the seven construction management services firms: Gilbane Building Company; HAKS; Hunter Roberts Construction Group; Jacobs Engineering; LiRo Program and Construction Management; and, TDX Construction Corporation to provide professional construction management services on an as-needed basis at various facilities throughout the Corporation at an additional aggregate not-to-exceed limit of \$2.5 Million.

**New York City Health and Hospitals Corporation  
CMS Requirement Contracts as of 9/30/2014**

Contract #	Contractor	Notice to Proceed Date	Schedule Expiration Date	Renewal Option(s) In Years	Services Offered	Contract Award	Total Amount Committed
<b>Requirement Contracts</b>							
1	26-1211000	Gilbane Building Corp.,	01/24/12	01/23/15	0	Construction Management Services	\$1,972,993
2	26-1214000	Hunter Roberts Construction Group	02/08/12	02/02/15	0	Construction Management Services	\$1,191,230
3	26-1208000	LiRo Program & Construction Management, PC	12/20/11	12/19/14	0	Construction Management Services	\$233,063
4	26-1213000	TDX Constr. Corp.	02/08/12	02/07/15	0	Construction Management Services	\$2,374,062
5	26-1209000	A1 Work-in-Progress Assoc., LLC	01/09/12	01/08/15	0	Construction Management Services	\$0
6	26-1210000	HAKS Engineers, Architects, and Land Surveyors, PC	01/11/12	01/10/15	0	Construction Management Services	\$125,590
7	26-1212000	Jacobs Engineering New York, Inc.	01/24/12	01/23/15	0	Construction Management Services	\$26,044
		<b>Grand- Total Award</b>	<b>for all</b>			<b>Construction Management Services</b>	<b>\$6,000,000</b>
						<b>\$6,000,000</b>	<b>\$5,922,982</b>

Balance of CMS Pool : \$77,018

**STATUS REPORT**

**GOUVERNEUR HEALTHCARE SERVICES**

**MAJOR MODERNIZATION**

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

**Location:** 227 Madison Street  
New York, New York 10002

**Description:** Provide the planning, pre-construction, architectural and engineering design, construction, construction management, and project management services necessary to expand the complement of nursing facility beds, renovate and fit out the existing nursing facility, including major mechanical infrastructure upgrades, and construct and fit out a new expanded ambulatory care center.

**Budget:** Total Major Modernization \$251.4 million

**Approved DASNY Work Orders to Date:** \$247.1 million

**Approved DASNY Funding to Date:** \$247.1 million

**Managing Agent:** DASNY

**Architect:** Perkins Eastman Architects, PC (Previously RMJM/Hillier Architects)

**Construction Manager:** Hunter Roberts Construction Group

**CON Status:** Approved October 2008

**Schedule:** Substantial Completion - May 2014

**MWBE/EEO:** DASNY will ensure compliance with MWBE and EEO requirements as they relate to New York State Executive Law, Article 15-A.

**GOUVERNEUR HEALTHCARE SERVICES  
MAJOR MODERNIZATION PROJECT**

**PROJECT STATUS REPORT – October 2014**

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. Perkins Eastman Architects, PC has assumed responsibility as architect for remaining construction and closeout.
- Construction:** The TCO for the majority of the 1<sup>st</sup> floor was received on April 9. The Public Assembly for the multipurpose room (auditorium) was received in October. The site work Madison and Clinton Streets with new residential entrance plazas has been completed. Various Day 2 projects will be completed during the remainder of 2014. The upgrade of five existing elevators is currently scheduled for completion in July 2015, due to the requirement to phase the work one cab at a time.
- Construction Management:** Hunter-Roberts is the construction manager (CM). The CM is managing construction work and closeout as required.
- Finance:** New York City General Obligation Bonds, Grant funds and donations.
- Original Budget:** The original project budget was \$101.0 million, excluding the costs of financing, DOH fees, and contractor claims.
- Adjusted Budget:** The adjusted DASNY managed project budget is \$247.1 million, excluding CON fees and the costs of financing and contractor claims.

NEW YORK CITY HEALTH AND HOSPITALS CORPORATION  
SOUTH MANHATTAN HEALTH NETWORK  
GOUVERNEUR HOSPITAL CENTER  
MAJOR MODERNIZATION PROJECT  
Project NO. 12200570

BUDGET STATUS REPORT

As of  
October 17, 2014

(IN THOUSANDS OF DOLLARS)

COST CATEGORY	PROJECT CAPITAL BUDGET	DASNY MANAGED:		HHC MANAGED:		Overall Project Invoiced	TOTAL PROJECT FORECAST	VARIANCE (Surplus/Shortfall)
		INVOICED TO DATE	FORECAST	INVOICED TO DATE	FORECAST			
	(a)	(b)	(c)	(d)	(e)	(f) (b) + (d)	(g) (c) + (e)	(h) (a) - (g)
<b>Major Modernization Project</b>								
Construction	182,015	178,422	185,166	0	0	178,422	185,166	(3,151)
Design fees	15,963	15,962	16,632	0	0	15,962	16,632	(669)
Construction management fees	14,594	14,358	15,369	0	0	14,358	15,369	(775)
Planning & other fees	4,066	3,889	4,440	0	0	3,889	4,440	(374)
Moveable equipment, furniture & telecom (see Note 2)	13,270	9,624	10,430	0	0	9,624	10,430	2,840
DASNY fees	8,316	8,316	8,316	0	0	8,316	8,316	0
Construction Contingency (See Note 1)	3,750	0	1,621	0	0	0	1,621	2,129
<b>SUBTOTAL</b>	<b>241,974</b>	<b>230,571</b>	<b>241,974</b>	<b>0</b>	<b>0</b>	<b>230,571</b>	<b>241,974</b>	<b>0</b>
NYS DOH FEES	949	0	0	949	949	949	949	0
Planning & Other Fees	68	0	0	68	68	68	68	0
Value Engineering Services	666	0	0	666	666	666	666	0
IT Work (12-2011-21)	4,400	1,779	1,779	2,327	2,621	4,106	4,400	0
Renovation Kitchen (12-2008-02)	600	339	600	0	0	339	600	0
Soil Remediation (12-2008-70)	2,680	2,680	2,680	0	0	2,680	2,680	0
Medical Gas	100	100	100	0	0	100	100	0
<b>SUBTOTAL (see Note 2)</b>	<b>9,463</b>	<b>4,898</b>	<b>5,159</b>	<b>4,010</b>	<b>4,304</b>	<b>8,908</b>	<b>9,463</b>	<b>0</b>
							0	0
<b>Total Modernization (See Note 3)</b>	<b>251,437</b>	<b>235,469</b>	<b>247,133</b>	<b>4,010</b>	<b>4,304</b>	<b>239,479</b>	<b>251,437</b>	<b>0</b>

Notes:

Total Gouverneur DASNY Project Budget approved by HHC Capital Committee is \$247.400

1.) FF&E forecast decreased by \$1.7M - Construction Contingency forecast increased by this amount.

2.) Per Work Order

Cost Category	Renovation Kitchen/Elevator 12-2008-02	IT Work 12-2011-21	Soil Remediation 12-2008-70	Medical Gas	Total
Construction	\$ 275	\$ 1,743	\$ 2,480	\$ 100	\$ 4,598
Design fees	\$ 100	\$ 36	\$ 150		\$ 286
Construction management fees	\$ 100				\$ 100
Planning & other fees	\$ 70		\$ 30		\$ 100
Moveable equipment, furniture & telecom					\$ -
DASNY fees	\$ 25		\$ 20		\$ 45
Contingency	\$ 30				\$ 30
<b>Total</b>	<b>\$ 600</b>	<b>\$ 1,779</b>	<b>\$ 2,680</b>	<b>\$ 100</b>	<b>\$ 5,159</b>

3.) OMB has yet to approve \$267K.

# NYC Health and Hospitals Corporation Capital Committee Meeting

## Gouverneur Healthcare Services

*November 6, 2014*



# Scope of Work

- Existing facility (316,000 sf):
  - Phased gut renovation of an occupied facility to expand the long-term care capacity from 210 beds to 295; long-term care beds to be located on the 5<sup>th</sup> to 11<sup>th</sup> floors, as well as the 13<sup>th</sup> floor
  - Upgrades to, and expansion of, the Ambulatory Care facility
- New construction (108,000 sf) TCO September 2011:
  - Five stories (85,000 sf) for Ambulatory Care Services
  - Addition of 3,000 sf per floor on the 6<sup>th</sup> through 13<sup>th</sup> floors, primarily for long term care

# Scope of Work

- Major mechanical infrastructure upgrades
  - Main Switch Gears - 2011
  - New Emergency Generator, tank, and fuel pumps - 2011
  - Chilled Water System - 2013
  - Secondary water system and heating hot water system – 2013
  - New BMS system - 2013
  - Fire alarm and sprinkler systems - 2014
  - Nurses Call, Security and Wander, Telephone and Data - 2014
  - High Pressure Steam PRV Stations, distribution system – Dec 2014

# Project Progress

- The project is 96% complete, as measured by construction in place as of 9/30/14.
- The new Ambulatory Care facility is occupied.
- In the existing facility:
  - floors 2, 3, 4, 5, 6, 7, 8, 9, 12 and 13 have been completed and are occupied
  - floors 10, and 11 received NYC DOB TCO and on October 17, 2014 the DOH inspection was completed, floors are ready to be occupied
  - floor 1 received a NYC DOB TCO on April 9, 2014
  - Multipurpose Room Public Assembly approval received on October 24, 2014, GHS working on obtaining approved FSP/EAP from FDNY

# Project Progress

## Additional Scope

- Completed after the 1<sup>st</sup> floor TCO:
  - Multi-purpose room – May 2014
  - Exterior vertical granite and parking lot paving – May 2014
  - Henry Street sidewalk replacement – September 2014
  - Courtyard – October 2014
  - Low Roof – October 2014
- In Progress:
  - Linde Gas- March 2015
  - Upgrade of Existing Five Elevators – July 2015 (1<sup>st</sup> elevator complete)
  - Basement code compliance – Design complete and forwarded to Contractors for pricing

# Project Budget

(In thousands of dollars - contract work in place as of 9/30/14)

Current Available Funding	\$247,133	
Total Construction	\$190,014	
Total Soft Costs	45,068	
FF&E	<u>10,430</u>	
	\$245,512	
Project Contingency	\$1,621	
Total Project Budget	\$247,133	\$583/sf

OMB Funded \$267 Less Than \$247,400 Approved by HHC Capital Committee

		<u>% Complete</u>
Construction Billed to Date	\$183,048	96%
Soft Costs/FF&E Billed to Date	<u>52,421</u>	
Total Project Billed to Date	\$235,469	
Construction Remaining	\$ 6,966	
Soft Costs and FF&E Remaining	<u>3,077</u>	
Total Remaining	\$ 10,043	



## Multipurpose Room



# Courtyard



## Henry Street Sidewalk



Clinton Street Entrance



# Clinton Street



## Clinton Street



## Madison Street



# **PROJECT STATUS REPORTS**

Central/North Brooklyn 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
29201240	Purchase Linear Accelerator & Renovate Suite	5,966	438	7.00%	Apr-14	Nov-14	Feb-15	(3)	Project on Schedule for completion in February 2015.
29201101	Upgrade Ten (10) Elevators "ABC" Buildings	5,148	4,366	85.00%	Mar-14	May-14	Jun-14	(13)	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. Phase III (remaining passenger elevator in each of the ABC Buildings): A and C Buildings completed and approved for operation by the DOB. For B Building: we await DOB re-inspection date.

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	802,249	25.00%	Jun-13	Feb-15	Feb-15	(8)	Construction activities on 7-200 and 7-100 progressing according to plan. Project is scheduled for completion on February 2015.



# **PROJECT LABOR AGREEMENT**

## **An Exception to the WICKS LAW**

Presentation to  
the Capital Committee  
New York City Health & Hospitals Corp.

# WICKS LAW

- Part of the NY State General Municipal Law dating from 2012.
- Applies to public construction projects of more than \$3 Million.
- Requires that four separate contracts be bid and let for each job: plumbing, electrical, HVAC and construction.

# WICKS LAW

- Prevents the use of a general contractor from contracting for the entire job and subcontracting with the four trades.
- Makes coordinating construction jobs difficult without a single contractor responsible.
- Fixed price jobs and jobs with fixed deadlines are impossible.

# WORK RULES UNDER WICKS

## Prevailing Wage

- Under NYS State Law, all public projects must pay construction workers “Prevailing Wages.”
- Prevailing Wages substantially = Union Wages.
- All HHC construction Contracts require that Prevailing Wages are paid.
- HHC responsible for ensuring that Prevailing Wages paid resulting in much policing and enforcement.

# PROJECT LABOR AGREEMENT PLA

- Recent changes to the Wicks Law exempts projects subject to a PLA.
- PLAs are made with the construction unions and subject the projects covered to union work rules.
- Non union companies can work on the covered project but must follow the work rules.

# PROJECT LABOR AGREEMENT

## Pros and Cons

- **Neutral** -- Wages under PLA jobs should not be higher than on Non-PLA jobs because Prevailing Wages must be paid regardless.
- **Neutral** – HHC's bigger jobs tend to be Union jobs anyway, so there will be no stricter work rules under a PLA.
- **Con** -- Work rules on Union jobs add cost.

# PROJECT LABOR AGREEMENT

## Pros and Cons

- **Pro** -- Being able to give a single contract to a general contractor or a CM that will be responsible for the entire project may save between 20 – 30% due to greater efficiency and accountability.
- **Pro** – Most contractors will be Union shops who do the Prevailing Wage administration saving HHC cost and ensuring compliance with the law.
- **Pro** – Some contractors without the resources to do HHC work at Prevailing Wage will not bid.
- **Pro** – With a single contract, HHC can negotiate for fixed prices and fixed construction schedules.

# PLANS FOR A PLA

- HHC currently negotiating with Building & Construction Trades Council the terms of PLA.
- Negotiation is coordinated with the City.
- Scope covered will include virtually all of HHC construction including Sandy Mitigation work.
- Finalization hoped for Spring 2015.