CALL TO ORDER

- ADOPTION OF MINUTES – April 4, 2017
  Mark Page

- VICE PRESIDENT’S REPORT
  Roslyn Weinstein

ACTION ITEMS

- Resolution
  Ernest Baptiste
  Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to approve a Capital Project for an amount not to exceed $5,783,618 for planning, pre-construction, design, construction and construction management services necessary for the Upgrade of Fire Alarm Systems in the “ABC” and “T” Buildings (the “Project”) at NYC Health + Hospitals / Kings County (the “Facility”).

- Resolution
  Jonathan Weiner
  Authorizing the New York City Health and Hospitals Corporation (the “NYC Health + Hospitals”) to execute a lease agreement with RXR 32 Old Slip Owner LLC for a ten year term for approximately 20,567 square feet of space on the 5th floor at 32 Old Slip Borough of Manhattan, to house the NYC Health + Hospitals’ Office of the Inspector General (“H+H OIG”) at a base rent of $52 per square foot for the first five years of the term, $35 per square foot or $712,988 for the first year of the term after factoring four months of free rent, $39 per square foot or $802,112 per year for each of the second and third years of the term after factoring three months of free rent for each year and a base rent of $57 per square foot or $1,172,319 per year for years six through ten for a total base rent of $10,317,775 over the ten year term.

- Resolution
  Ebene Carrington
  Authorizing the NYC Health + Hospitals (the “Health Care System”) to execute a revocable five year license agreement with the New York City Department of Health and Mental Hygiene (the “Licensee”) for use and occupancy of approximately 2,480 square feet of space on the 6th floor of the Kountz Pavilion for the operation of the New York City Nurse-Family Partnership program at Harlem Hospital Center (the “Facility”) for an annual occupancy fee of $124,000.

- Resolution
  Martha Sullivan, MD
  Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to designate the auditorium at NYC Health + Hospitals/Gouverneur (“Gouverneur”) as the Dr. Emily D. Barringer Community Hall in honor of Dr. Emily Dunning Barringer.
Capital Committee

Meeting Date: April 4, 2017
Time: 2:00 P.M.
Location: Board Room

Board of Directors:
Members of the Capital Committee
Mark Page, Committee Chair
Gordon Campbell, Vice Chair, Acting Chairman of the Board
Josephine Bolus, RN, NP, BC
Emily Youssouf
Stanley Brezenoff, Interim President, Chief Executive Officer

HHC Staff:
Anantharam, PV – Senior Vice President, Finance
Jeremy Berman – Deputy General Counsel, Office of Legal Affairs
Steven Bussey – Chief, Ambulatory Care Services
Robert de Luna – Senior Director, Communications and Marketing
Daniel Gadioma – Associate Director, Kings County Hospital Center
Colicia Hercules – Chief of Staff, Office of the Chairman
Mahendranath Indar – Senior Director, Office of Facilities Development
Patricia Lockhart – Secretary to the Corporation, Office of the Chairman
Dean Moskos – Director, Office of Facilities Development
Salvatore Russo – Senior Vice President & General Counsel, Legal Affairs
Brenda Schultz – Senior Assistant Vice President, Financial Administration
Cyril Toussaint – Director, Office of Facilities Development
L. Rickie Tulloch – Senior Director, Office of Facilities Development
Roslyn Weinstein – Vice President, President’s Office
Dion Wilson – Director of Real Estate, Office of Legal Affairs
Elizabeth Youngbar – Assistant Director, Office of Facilities Development
Frank Zanghi – Manager, Internal Audits
CALL TO ORDER

The meeting was called to order by Mark Page, Committee Chair, at 2:03 P.M.

On motion, the Committee voted to adopt the minutes of the March 16, 2017, Capital Committee meeting.

VICE PRESIDENT’S REPORT

Ms. Weinstein noted that the Capital Committee would be discussing authorization of $5.7 million for Construction Management Services related to the upgrading of the Fire Alarm System at Kings County Hospital.

Prior to discussing the action item, Ms. Weinstein announced that NYC Health + Hospitals had presented the Elmhurst Emergency Department Expansion, to the City, as a possible Design-to-Build project.

Mr. Page asked Ms. Weinstein to explain Design-to-Build, and how it would differ from normal procedure. Ms. Weinstein explained that for a typical construction project the first step would be to hire an architect, and then three prime contractors (unless under the Project Labor Agreement), and then a construction manager (CM). Meaning multiple contracts being managed. If a project is done as design-to-build then the Architect (designer) would hold all the subsequent contracts and had a risk point to ensure work was completed on time and within budget, with minimum change orders.

Emily Youssouf, said it was similar to CM-at-risk and was the most efficient way to work; it sped up the process dramatically.

Josephine Bolus, asked if there would be a penalty for not completing projects on schedule. Ms. Weinstein said yes, those terms would be written into the request for proposals or bid documents, outlining expectations.

Ms. Youssouf said that the practice used to be common practice.

Mr. Page asked if having a design firm spearheading construction would allow for less design upfront and would result in more on-going design. Jeremy Berman, Deputy Counsel, Legal Affairs, said it would allow for more flexibility with design and that was thought to increase efficiency. Ms. Weinstein noted that there would obviously be a level of design that needed to be completed and signed off on to enter into contract for the construction work. Mr. Berman said yes, the architect is a sort of check on the other firms.

Ms. Weinstein said if approval was granted by the City then she would be happy to come to the Committee with an explanation of the type of agreement/services for design-build and the Project Labor Agreement (PLA).

Stanley Brezenoff, Interim President, Chief Executive Officer, said that he believed New York was one of the few states that has this limitation with contracting.

Mr. Page said he was absolutely open to new methods and discussion.
Ms. Youssouf asked if any other agencies were submitting projects to the City. Ms. Weinstein said she believed so. It was currently a pilot, and we had a project ready to go that we were able to present as an option.

Mr. Page asked if there was a timing estimate for approval, and was this anticipated for approval in the current legislative session. Ms. Weinstein said she would have to follow-up on that.

That concluded her report.

**ACTION ITEMS**

- **Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to approve a Capital Project for an amount not to exceed $5,783,618 for planning, pre-construction, design, construction and construction management services necessary for the Upgrade of Fire Alarm Systems in the “ABC” and “T” Buildings (the “Project”) at NYC Health + Hospitals / Kings County (the “Facility”).**

  Daniel Gadioma, Associate Director, Kings County Hospital Center, read the resolution into the record on behalf of Ernest Baptiste, Executive Director, Kings County Hospital Center.

  Mr. Gadioma explained that the current system was functioning but the Fire Department of the City of New York (FDNY) requirements stipulated that Health + Hospitals upgrade the system to meet 1968 code.

  Mr. Page asked if there was a more current code that we should be meeting.

  Mr. Gadioma explained that NYC Health + Hospitals had been approved to upgrade to that 1968 code and not the more recent code. He noted that the project had been bid and the construction notice had been submitted to the Department of Health.

  Mrs. Bolus asked why we would only want to meet the 1968 code and not a more recent one. Mr. Gadioma said there was a more current code but work would be more extensive and expensive. He noted that the FDNY had approved the design being presented.

  Ms. Youssouf asked what the monetary difference would be. Mrs. Bolus said she would like to know as well.

  Mr. Brezenoff asked how much work had been completed already, for this project. Ms. Weinstein said the project had been designed, and approved by the FDNY (within the last few months).

  Mr. Brezenoff asked if this was the minimum requirement to meet code. Ms. Weinstein said there were minimum and maximum requirements to meet and we have approval to meet the minimal needs. She noted that some of the more extensive and more current requirements were for new construction.

  Mr. Brezenoff asked for an explanation of what money had been expended to date, what the difference was between the different codes, and what the cost difference would be for those varied options. He asked if there was a timeframe that needed to be met. Ms. Weinstein said yes, but not so tight that we couldn’t review this. Ms. Youssouf said she would feel more comfortable with that information as well.
Mr. Page asked what the business norm would be. If we were NYU, what standard would they apply, with the understanding that this isn’t new construction.

Ms. Weinstein said she would work on gathering the requested information. She noted that Health + Hospitals did not select which code they subscribe to, but were told by regulatory bodies.

Mrs. Bolus said she would expect that the difference would be great but she looked forward to seeing what it was. Ms. Weinstein explained that other facilities had to update and implement new systems as well and it was dependent upon building systems, age of the building, etc. The main concern is safety of patients and staff.

Mr. Page asked that this come back before the Committee for the May meeting.

There being no further questions or comments, the Committee Chair tabled the resolution.

NEW BUSINESS

Mrs. Bolus recommended that Health + Hospitals upgrade the portable oxygen tanks that are utilized in the facilities. She said that she currently used one that worked with a lithium battery, that turn on and off when she chooses but she recently noticed the very old green tanks that could be dangerous if dropped and require more hands on attention to use. She recommended we look into purchasing new ones, and what the cost would be.

Mr. Brezenoff said that recommendation was noted and would be investigated.

There being no further business, the meeting was adjourned at 2:23 P.M.
PROJECT APPROVAL

FIRE ALARM UPGRADE

NYC HEALTH + HOSPITALS / KINGS COUNTY
RESOLUTION

Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to approve a Capital Project for an amount not to exceed $5,783,618 for planning, pre-construction, design, construction and construction management services necessary for the Upgrade of Fire Alarm Systems in the “ABC” and “T” Buildings (the “Project”) at NYC Health + Hospitals / Kings County (the “Facility”).

WHEREAS, the existing fire alarm systems for “ABC” and “T” buildings are in working condition but are obsolete and need to be replaced;

WHEREAS, it was determined that replacing the existing fire alarm systems will comply with requirements outlined by Fire Department of New York (FDNY) 2015 revised Technology Management Bulletin # 03-2/2012 (see Attachment 1); and

WHEREAS, the legalization of the existing fire alarm systems will be permitted to maintain the 1968 Building Code functionality; and

WHEREAS, the revision of Operating Procedure 100-5 requires that construction projects with budgets of $3 million or more shall receive approval of the Board of Directors through Capital Committee; and

WHEREAS, the proposed total project budget, inclusive of all contingencies, is estimated to be $5,783,618 million; and

WHEREAS, the overall management of the construction contract will be under the direction of the Vice President - Facilities Development.

NOW THEREFORE, be it

RESOLVED, the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to approve a Capital Project for an amount not to exceed $5,783,618 for planning, pre-construction, design, construction and construction management services necessary for the Upgrade of Fire Alarm Systems in the “ABC” and “T” Buildings (the “Project”) at NYC Health + Hospitals / Kings County (the "Facility").
EXECUTIVE SUMMARY

UPGRADE OF FIRE ALARM SYSTEMS IN THE “ABC” AND “T” BUILDINGS AT NYC HEALTH + HOSPITALS / KINGS COUNTY

OVERVIEW: NYC Health + Hospitals is seeking to upgrade the fire alarm systems in the “ABC” and “T” Buildings at NYC Health + Hospitals / Kings County. The project was designed, estimated and bid in accordance with the NYC Health + Hospitals Operating Procedure 100-5. The project cost is not-to-exceed $5,783,618.

NEED: The existing fire alarm systems in the “ABC” and “T” buildings were installed in 1991. The fire alarm systems for these buildings are obsolete. Therefore, replacing these systems with a modernize and efficient system will comply with Fire Department of New York (FDNY) 2015 revised Technology Management Bulletin #03-2/2012 (see Attachment 1). The new fire alarm system will provide a much safer environment with the upgrade of various fire alarm devices such as circuit cables, strobes, smoke detectors, control boards, and pull stations. In addition, this legalization work will ensure ease of approval of future projects in the “ABC” and “T” Buildings by the FDNY.

SCOPE: The scope of work for this project includes the following:

- Upgrade existing individually coded addressable multiprocessing interior fire alarm systems inside “ABC” and “T” buildings with manual and automatic smoke /heat detection, sprinkler alarm and central office connection in accordance with 1968 NYC Building code reference standard. Devices will be individually annunciated on the fire alarm control panel.

- Remove all existing fire alarm combination gongs/strobes and warden stations throughout the “ABC” and “T” buildings, after the new fire alarm systems devices are installed, tested and approved by FDNY.

- Provide fire watch at the “ABC” and “T” buildings throughout the duration of construction.

CONSTRUCTION: The project architectural firm of record is MJCL Architects, LLP. It is anticipated that the services of a construction manager will be engaged to coordinate and supervise contract work.

COSTS: $5,783,618

FINANCING: General Obligation Bonds = $5,362,925
HHC-2010 Bonds = $420,693

SCHEDULE: This project is schedule for completion by September 2018.
NYC Health + Hospitals / Kings County
Upgrade Fire Alarm System - "ABC" & "T" Buildings
Table 1: Total Project Summary

<table>
<thead>
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<th>Line #</th>
<th>Item</th>
<th>Percentage Rates</th>
<th>Costs</th>
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<td>Architect/Engineering Fees (2)</td>
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<td>3</td>
<td>Construction Management Fees (3)</td>
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<td>4</td>
<td>Contingency</td>
<td>15.0%</td>
<td>$626,979</td>
</tr>
<tr>
<td>5</td>
<td>Total Project Cost</td>
<td></td>
<td>$5,783,618</td>
</tr>
</tbody>
</table>

Notes:
(1) Construction cost estimates from MJCL Architects, LLP.
(2) Architect/Engineering fees is 7.3% of project cost estimate.
(3) Construction Management fees based on proposal received from TDX Construction Corporation.
TECHNOLOGY MANAGEMENT BULLETIN # 03/2012R
Revised March 9, 2015

REFERENCE: Guidelines for Legalization of Existing Building Fire Alarm Systems

EFFECTIVE DATE: March 15, 2012

EXPIRATION DATE: March 15, 2018 unless revoked earlier for cause

The procedures set forth in this bulletin are the minimum requirements necessary to obtain the Letter of Approval for any existing building fire alarm systems installed pursuant to the 1968 Building Code or prior codes.

1. Existing Building Fire Alarm Systems
   1.1. For simplicity and convenience, the Office of Technology Management has outlined the following four key directions to be followed in order to expedite the plan review and approval.
   
   (A) Where the existing Fire Alarm System has been filed with the Department of Buildings but the plans have not been approved, follow the instructions below:
   - Reinstate the original Plan/Work Application with the Department of Buildings;
   - Submit the fire alarm design and installation documents for review and approval.
   
   (B) Where the Building Information System does not reveal an applicable filing of the existing fire alarm system, but the current Certificate of Occupancy bear a record “Fire Alarm and Signal System,” follow the instructions below:
   - File Plan/Work Application (Form PW-1) as Alteration Type 2 with the Department of Buildings;
   - Submit the fire alarm design and installation documents for review and approval.

   (C) Where the Building Information System does not reveal an applicable filing of the existing fire alarm system and the current Building Certificate of Occupancy does not bear a record “Fire Alarm and Signal System,” follow the instructions below:
   - Obtain permission to legalize the existing fire alarm system by filing Form TM-4 with the Office of Technology Management. The supporting documents, signed and sealed by the Engineer of Record, shall include a narrative of the system functionality and conditions (equipment, wiring, initiating/notification devices & appliances, etc.) and a copy of the Certificate of Occupancy;
   - After the above permission has been granted, file Plan/Work Application (Form PW-1) as Alteration Type 2 with the Department of Buildings;
   - Submit the fire alarm design and installation documents for review and approval.
Where the Building Information System does not reveal an applicable filing of the existing fire alarm system and the Building does not have a valid Certificate of Occupancy, follow the instructions below:

- Obtain a Letter of No Objection from the Department of Buildings;
- Obtain permission to legalize the existing fire alarm system by filing Form TM-4 with the Office of Technology Management. The supporting documents, signed and sealed by the Engineer of Record, shall include a narrative of the system functionality and conditions (equipment, wiring, initiating/notification devices & appliances, etc.) and a copy of the Letter of No Objection;
- After the above permission has been granted, file Plan/Work Application (Form PW-1) as Alteration Type 2 with the Department of Buildings;
- Submit the fire alarm design and installation documents for review and approval. The Engineer on Record shall identify the height and construction classification of the building, number of floors, use and occupancy load on the drawings.

1.2. Follow the Technology Management Bulletin No.: 10/2009 for submission of the fire alarm design and installation documents.

1.3. Follow the Fire Alarm Inspection Unit Bulletin No.: 06-01-11 procedures for scheduling inspection/test.

1.4. Recognizing the importance of maintaining a uniform alarm notification tone of a "three-pulse" temporal pattern in buildings throughout the City, the Office of Technology Management recommends phasing in the conversion of alarm signal with legalization of the existing fire alarm systems. For detailed instructions follow the Fire Alarm Inspection Unit Bulletin No.: 01-02-12.

1.5. All fire alarm systems legalized under this bulletin shall be connected for central station monitoring for issuance of a Letter of Approval by the Fire Alarm Inspection Unit.

1.6. A maximum period of one year from the date of legalization variance approval shall be permitted for the filing and inspection of the subject fire alarm system. The variance shall be expired and without effect afterwards.

2. Existing Sprinkler Monitoring Systems

2.1. Follow the Fire Alarm Inspection Unit Bulletin No.: 03-15-15 procedures for legalizing existing Sprinkler Monitoring Systems.

3. Any applications for legalization of an existing fire alarm or sprinkler monitoring system expired and/or filed on or after March 15, 2018, must comply with provisions of the current building code in effect.
LEASE AGREEMENT

RXR 32 OLD SLIP OWNER, LLC

NYC HEALTH + HOSPITALS / OFFICE OF THE INSPECTOR GENERAL
RESOLUTION

Authorizing the New York City Health and Hospitals Corporation (the “NYC Health + Hospitals”) to execute a lease agreement with RXR 32 Old Slip Owner LLC for a ten year term for approximately 20,567 square feet of space on the 5th floor at 32 Old Slip Borough of Manhattan, to house the NYC Health + Hospitals’ Office of the Inspector General (“H+H OIG”) at a base rent of $52 per square foot for the first five years of the term, $35 per square foot or $712,988 for the first year of the term after factoring four months of free rent, $39 per square foot or $802,112 per year for each of the second and third years of the term after factoring three months of free rent for each year and a base rent of $57 per square foot or $1,172,319 per year for years six through ten for a total base rent of $10,317,775 over the ten year term.

WHEREAS, in October 2015, the NYC Heath + Hospitals’ Board of Directors adopted a resolution authorizing its President to enter into a Memorandum of Understanding (the “MOU”) with the New York City Department of Investigation (“NYC DOI”) to create an Office of the Inspector General for NYC Health + Hospitals under the authority and control of NYC DOI to replace the existing office within NYC Health + Hospitals; and

WHEREAS, pursuant to a letter agreement executed by NYC DOI and NYC Health + Hospitals, the entire expenses of the H+H OIG, including but not limited to salaries and other benefits for the staff and the cost of office space shall be the responsibility of NYC Health + Hospitals; and

WHEREAS, the H+H OIG currently occupies approximately 16,500 square feet on the 17th floor at 160 Water Street and, as a result of staffing increases made pursuant to the MOU, the 160 Water Street space no longer accommodates the H+H OIG’s staff which has increased to seventy-five; and

WHEREAS, the space at 32 Old Slip provides adequate space to meet the H+H OIG’s needs; and

WHEREAS, the responsibility for the administering the proposed lease shall rest with the NYC Health + Hospital’s Inspector General.

NOW, THEREFORE, be it

RESOLVED, that the New York City Health and Hospitals Corporation (the “NYC Health + Hospitals”) be and hereby is authorized to execute a lease agreement with RXR 32 Old Slip Owner LLC for a ten term for approximately 20,567 square feet of space on the 5th floor at 32 Old Slip, Borough of Manhattan, to house the NYC Health + Hospitals’ Office of the Inspector General at a base rent of $52 per square foot for the first five years of the term, $35 per square foot or $712,988 for the first year of the term after factoring four months of free rent, $39 per square foot or $802,112 per year for each of the second and third years of the term after factoring three months of free rent for each year and a base rent of $57 per square foot or $1,172,319 per year for years six through ten for a total base rent of $10,317,775 over the ten year term.
EXECUTIVE SUMMARY

OFFICE OF THE INSPECTOR GENERAL
32 Old Slip
BOROUGH OF MANHATTAN

OVERVIEW: The New York City Health and Hospitals Corporation (“NYC Health + Hospitals) seeks authorization from its Board of Directors to execute a ten year lease agreement with RXR 32 Old Slip Owner LLC for approximately 20,567 square feet of space on the 5th floor of 32 Old Slip, Borough of Manhattan.

NEED/PROGRAM: In October 2015, the NYC Health + Hospitals’ Board of Directors adopted a resolution authorizing its President to enter into a Memorandum of Understanding (the “MOU”) with the New York City Department of Investigation (“NYC DOI”) to create an Office of the Inspector General for NYC Health + Hospitals under the authority and control of NYC DOI to replace the existing office within NYC Health + Hospitals (the H+H OIG”). Pursuant to a letter agreement executed by NYC DOI and NYC Health + Hospitals, the entire expenses of the H+H OIG, including but not limited to, salaries and other benefits for the staff and the cost of office space shall be the responsibility of NYC Health + Hospitals. The H+H OIG currently occupies approximately 16,500 square feet on the 17th floor at 160 Water Street. As a result of staffing increases made pursuant to the MOU, the 160 Water Street space no longer accommodates the H+H OIG’s staff of seventy-five. The 32 Old Slip location will accommodate the IG’s space needs.

TERMS: The lease provides for a ten year term for the rental of approximately 20,567 square feet of space on the 5th floor of the building. The base rent will be $52 per square foot for the first five years of the term, $35 per square foot or $712,988 for the first year of the term after factoring four months of free rent, $39 per square foot or $802,112 per year for each of the second and third years of the term after factoring three months of free rent for each year and a base rent of $57 per square foot or $1,172,319 per year for years six through ten for a total base rent of $10,317,775 over the ten year term. The space will be delivered with the existing furniture in place. Electricity will be sub-metered. NYC Health + Hospitals will pay its proportionate share of real estate tax increases above the 2017/2018 base year and its proportionate share of operating expenses over the 2017/2018 base year. The landlord will provide a tenant improvement allowance of $65 per square foot, or $1,336,855.
## SUMMARY OF ECONOMIC TERMS

**SITE:**
5th Floor  
32 Old Slip  
New York, New York

**LANDLORD:**
RXR 32 Old Slip Owner LLC

**TENANT:**
H+H OIG

**TERM:**
10 years

**FLOOR AREA:**
Approximately 20,587 square feet

**RENEWAL OPTIONS:**
None

**BASE RENT:**
Years 1-5: $52 per square foot; years 6-10: $57 per square foot (net effective rent of $35 per square foot for year 1, net effective rent of $39 per square foot for years 2 and 3).

**FREE RENT:**
Ten months

**UTILITIES:**
Tenant will pay for sub-metered electricity.

**OPERATING EXPENSES:**
Tenant will pay its proportionate share of increases over the 2017/2018 base year.

**REAL ESTATE TAXES:**
Tenant will pay its proportionate share of increases over the 2017/2018 base year.

**CONSTRUCTION:**
The landlord will provide a tenant improvement allowance of $65 per square foot, or $1,336,885.
32 Old Slip - Projected Rent Schedule

<table>
<thead>
<tr>
<th>Lease Year</th>
<th>Annual Rent</th>
<th>Per Sq. Foot</th>
<th>Free Rent</th>
<th>Rent (Adjusted)</th>
<th>Per Sq. Ft. for Adjusted Rent</th>
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$11,209,015  $891,240  $10,317,775

Notes:
Square Footage at 32 Old Slip is 20,567 sq. ft.
Term: 10 Years
Base Rent is $52/ sq. ft. for first 5 years; and $57/ sq. ft. for years 6 - 10.
Year 1 includes four months of free rent
Years 2 and 3 includes three months of free rent

Revised: 5/3/17
### 77 Water St. Rent Schedule

<table>
<thead>
<tr>
<th>Year</th>
<th>Annual Rent</th>
<th>Per Sq. Foot</th>
<th>Free Rent</th>
<th>Rent (Adjusted)</th>
<th>Per Sq. Ft. for Adjusted Rent</th>
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<td>$190,113</td>
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<td>$33.75</td>
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Total (3 months free rent included) | $3,683,057               | $3,492,944

**Notes:**
- Square Footage at 77 Water St. was 16,899 sq. ft.
- Term: 4 yrs and 8 months
- Escalation: 2% per year
- Year 1 includes three months of free rent
LICENSE AGREEMENT

NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE

NYC HEALTH + HOSPITALS / HARLEM
RESOLUTION

Authorizing the NYC Health + Hospitals (the “Health Care System”) to execute a revocable five year license agreement with the New York City Department of Health and Mental Hygiene (the “Licensee”) for use and occupancy of approximately 2,480 square feet of space on the 6th floor of the Kountz Pavilion for the operation of the New York City Nurse-Family Partnership program at Harlem Hospital Center (the “Facility”) for an annual occupancy fee of $124,000.

WHEREAS, Harlem Hospital Center’s Nurse-Family Partnership program for calendar year 2016 served 2,534 clients and provided 27,990 completed visits; and

WHEREAS, the program is an evidenced-based community healthcare program that seeks to improve the health, well-being and self-sufficiency of low-income first-time mothers and their children by partnering them with nurses who provide home visits; and

WHEREAS, the program has been staffed, funded and operated by Harlem Hospital since 2003; and

WHEREAS, the operation of the program will be transferred to the New York City Department of Health and Mental Hygiene and will funded and staffed by its employees while the location of the program and scope of services provided will remain unchanged.

NOW THEREFORE, be it

RESOLVED, that the NYC Health + Hospitals (the “Health Care System”) be and hereby is authorized to execute revocable five year license agreement with the New York City Department of Health and Mental Hygiene (the “Licensee”) for use and occupancy of approximately 2,480 square feet of space on the 6th floor of the Kountz for the operation of the New York City Nurse-Family Partnership program at Harlem Hospital Center (the “Facility”) for an annual occupancy fee of $124,000.
EXECUTIVE SUMMARY

LICENSE AGREEMENT
NEW YORK CITY DEPARTMENT OF HEALTH AND MENTAL HYGIENE
HARLEM HOSPITAL CENTER

The NYC Health + Hospitals (the “Health Care System”) seeks authorization of the Board of Directors to execute a revocable license agreement with the New York City Department of Health and Mental Hygiene (“DOHMH”) for use and occupancy of space in the Kountz Pavilion at Harlem Hospital Center (“Harlem”).

The Nurse-Family Partnership is administered by the DOHMH and the program provides services to approximately 1,700 clients in all five boroughs of the City of New York. The program is an evidenced-based community healthcare program that seeks to improve the health, well-being and self-sufficiency of low-income first-time mothers and their children by partnering them with nurses who provide home visits. The majority of the program’s clients are visited in their homes. The program has been staffed, funded and operated by Harlem Hospital since 2003. The program is voluntary and there is no cost to the client. The operation of the program will be transferred to the New York City Department of Health and Mental Hygiene and will be funded and staffed by its employees while the location of the program and scope of services provided will remain unchanged. During calendar year 2016, the program served approximately 2,534 clients and provided 27,990 completed visits.

The program will continue to occupy approximately 2,480 square feet of space on the 6th floor of the Kountz Pavilion. Harlem will provide utilities and housekeeping services to the licensed space. The occupancy fee will be waived.

The New York City Department of Health and Mental Hygiene will be required to indemnify and hold harmless the Corporation and the City of New York from any and all claims arising out of its use of the licensed space, and shall provide appropriate insurance naming the Corporation and the City of New York as additional insureds.

The licensee agreement shall be revocable by either party on sixty (60) days prior notice, and shall not exceed a term of five (5) years without further authorization by the Board of Directors of the NYC Health + Hospitals. DOHMH shall pay an occupancy of $124,000 per year calculated at $50/sq. ft.
AUDITORIUM NAMING

DR. EMILY D. BARRINGER COMMUNITY HALL

NYC HEALTH + HOSPITALS / GOUVERNEUR
RESOLUTION

Authorizing the New York City Health and Hospitals Corporation (“NYC Health + Hospitals”) to designate the auditorium at NYC Health + Hospitals/Gouverneur (“Gouverneur”) as the Dr. Emily D. Barringer Community Hall in honor of Dr. Emily Dunning Barringer.

WHEREAS, NYC Health + Hospitals Operating Procedure 100-8 (“OP 100-8”) authorizes the naming of a NYC Health + Hospitals health care facility or portion thereof to honor an individual who has made a significant contribution to public health including to NYC Health + Hospitals or any of its facilities; and

WHEREAS, Dr. Barringer was an early advocate for women’s rights in the medical field, was the first female ambulance surgeon and was the first to secure a surgical residency while at Gouverneur; and

WHEREAS, Dr. Barringer was President of the American Medical Women’s Association in 1942 and, as Co-Chair of its War Service Committee, organized the American Women’s Hospital in Europe which provided medical and surgical care during and after the War; and

WHEREAS, Dr. Barringer successfully lobbied Congress to allow women doctors to serve as commissioned officers in the Army Medical Reserve Corps and advocated for better treatment of women in prisons; and

WHEREAS, in accordance with OP 100-8, the proposed naming of the auditorium at Gouverneur has been recommended by the Gouverneur Community Advisory Board and is supported by the family of Dr. Barringer;

NOW THEREFORE, IT IS RESOLVED THAT New York City Health and Hospitals Corporation be and it hereby is authorized to designate the auditorium at NYC Health + Hospitals/Gouverneur as the Dr. Emily D. Barringer Community Hall in honor of Dr. Emily Dunning Barringer.
MEMORANDUM

To: Gordon J. Campbell  
Vice Chair & Acting Chair of the Board

Mark N. Page  
Chair, Capital Committee

Copy: Dr. Martha Sullivan  
Executive Director, NYC Health + Hospitals/Gouverneur

From: Stanley Brezenoff  
Interim President

Date: April 12, 2017

Subject: Proposed naming of NYC Health + Hospitals/Gouverneur First Floor Auditorium the "Dr. Emily Barringer Community Hall"

This is to confirm my support for the proposed naming of the First Floor Auditorium at NYC Health + Hospitals/Gouverneur the "Dr. Emily Barringer Community Hall."

I note that such a naming is governed by NYC Health + Hospitals Operating Procedure 100-8 which requires that such naming be supported by the Facility's Community Advisory Board, its Medical Board and its Executive Director and that, if the facility or portion thereof is to be named in honor of a deceased individual, that the family of such individual have consented to the proposed naming. All of such requirements have been satisfied in the case of the proposed naming.

With the requirements of the Operating Procedure satisfied, I can enthusiastically recommend to the Board of Directors approval of the proposing naming. Dr. Emily Dunning Barringer, was a pioneer who broke new ground for women in the field of medicine at the start of the previous century. She achieved
many "firsts" as a female physician and worked effectively to open professional opportunities for women and to improve conditions for women in World War II. We are honored that Dr. Barringer was associated with NYC Health + Hospitals/Gouverneur where she was the very first women to secure a surgical residency. Dr. Barringer stands as an inspiring example of public service and of the importance of opening opportunities for all while serving the broadest possible community.
January 13, 2017

Dear Mr. Brezenoff:

Pursuant to NYC Health + Hospitals Operating Procedure No. 100-8, I am writing to you to request that NYC Health + Hospitals | Gouverneur first floor auditorium be named the Dr. Emily Barringer Community Hall. This recommendation, which the Gouverneur Community Advisory Board and Medical Board support in the attached letters, is based upon the significant contribution to public health Dr. Barringer made during her life and to her historic link to Gouverneur.

Emily Dunning Barringer, MD remains a well-known figure at NYC Health + Hospitals | Gouverneur today even though it’s been more than one hundred and ten years since her history-making residency at Gouverneur. Her achievements in public service, clinical excellence and as an advocate for women’s rights exemplify characteristics we hope to exhibit while we work together to pursue our public mission. In fact, for many years Gouverneur held an Emily Barringer Dinner that included an award to a doctor who achieved the highest standards in clinical excellence and public service.

It is important that Dr. Barringer’s legacy remain strong at Gouverneur and employees and community continue to gain an appreciation of this special person. Dr. Barringer was a trailblazer who successfully advocated for women’s rights in the field of medicine. During her residency at Gouverneur Hospital she became the world’s first ambulance surgeon and the first woman to secure a surgical residency.

The Gouverneur Auditorium naming provides a golden opportunity to formally recognize Dr. Barringer’s place in Gouverneur’s history and to continue to enlighten staff and the public of her public service. The auditorium is quickly becoming a popular venue for Gouverneur, NYC Health + Hospitals, and community events and it’s appropriate that those who attend events there gain an understanding of why Dr. Barringer’s life remains relevant today.

I feel we have an obligation to honor those who preceded us and made possible the civil rights that we enjoy. It is important that these rights are not taken for granted. Accordingly, I look forward to working with you to name the Gouverneur auditorium after Dr. Emily Dunning Barringer.

Sincerely,

[Signature]

Martha A. Sullivan, DSW
Chief Executive Officer
February 1, 2017

Dear Dr. Sullivan:

I am writing to you regarding our interest in naming the NYC Health + Hospitals | Gouverneur auditorium after Dr. Emily Dunning Barringer. Dr. Barringer is one of the most renowned clinicians who worked at Gouverneur and became the world's first female ambulance surgeon and the first woman to secure a surgical residency while at Gouverneur Hospital. In addition to her accomplishments at Gouverneur, Dr. Barringer’s lifework and career makes her an ideal candidate to name the auditorium after.

Dr. Barringer was an advocate of women's suffrage and worked to improve medical education for women, public health, and reforms for the treatment of imprisoned women. She was President of the American Medical Women’s Association in 1942. As Co-chair of the association’s War Service Committee, she organized the American Women’s Hospital in Europe, which provided medical and surgical care during and after the war.

During World War II, Barringer lobbied Congress to allow women doctors to serve as commissioned officers in the Army Medical Reserve Corps. Congress passed the Sparkman Act in 1943, which granted women the right to receive commissions in the Army, Navy, and Public Health Service.

Women’s rights has made great progress during the last century. Today women’s equality is a core civil and human rights principle in the United States and around the world. Across America, women are contributing to our economy and our Nation in innovative and exciting ways. However, establishing true women’s equality is not just a matter of empowering one community, it’s about empowering all, regardless of their race, religion, sexual orientation, gender identity, or economic status. It’s a matter of ensuring everyone has the rights – on paper and in practice – to lead healthy, just, and self-directed lives.

By naming the Auditorium after Emily Barringer, we celebrate her commitment to public service and the progress that’s been made in women’s rights. It also acknowledges Gouverneur’s long history and importance to our community.

As Gouverneur CAB Chairman, I offer my full support to naming the Gouverneur auditorium after this extraordinary person who continues to inspire us.

Sincerely,

[Signature]

Donald Young
Chairman, Gouverneur CAB
January 13, 2017

Stanley Brezenoff  
Interim President and CEO  
NYC Health + Hospitals  
125 Worth Street  
New York, New York, 10013

Dear Mr. Brezenoff,

On behalf of the Gouverneur Medical Staff, it is my pleasure to submit this letter of support for the naming of the Emily Dunning Barringer Community Hall.

Dr. Barringer’s groundbreaking career paved the way for generations of women in the medical profession. When she earned her medical degree in 1901, the options available to female physicians were limited to the few hospitals that served exclusively women and children. Her application for an internship position at Gouverneur was denied despite receiving the second highest grade for the qualifying exam because of her gender. She gathered support by lobbying political and religious figures and was accepted, becoming the first woman physician to receive post-graduate surgical training in hospital service. She was the first female ambulance surgeon.

Dr. Barringer later successfully lobbied Congress to allow woman physicians to serve as commissioned officers in the medical corps of the Army and Navy. She was also an advocate for women’s suffrage and improved access to health care, especially in women’s prisons.

Dr. Barringer embodied the spirit of NYC Health + Hospitals/Gouverneur. She kept patients first and in her perseverance, earned the respect of colleagues and her patients who lived in the tenements of the community we serve today. It would be an honor to remember her in this way.

Sincerely,

[Signature]

Morris Gagliardi, MD MBA 
Chief Medical Officer, Ambulatory Care
Dear Karla (if I may),

Thank you for email and its exciting news. I would consider it a great honor for my grandmother's work to be commemorated in such a way. I am one of five living grandchildren and am sure they would welcome such an honor. As it turns out, I will be seeing three of them this weekend in Virginia so I will let them know what you propose. I will also speak with my brother in eastern Connecticut. You may be interested to know that one of her great grandchildren, Dr John Steever, is at Mount Sinai in NYC where he carries on her work in public health issues.

I will try contacting you on Monday. I will be driving back from Virginia with one of my cousins.

Looking forward to speaking with you,

Sanford B Steever

Sent from my iPhone

On Nov 10, 2016, at 3:25 PM, Marco, Karla <marcpk@nychhc.org> wrote:

Good afternoon,
I received your contact information from the Connecticut Women’s Hall of Fame, where your grandmother, Emily Dunning Barringer is an inductee. I work at NYC Health + Hospitals | Gouverneur, where—as I’m sure you know—Dr. Barringer was the first female physician to hold a surgical residency! I am eager to speak with you, as we are hoping to name our newly renovated auditorium after Dr. Barringer. We would love to invite you to join us at the opening ceremony, once a date is selected. Also, as has been requested by the Gouverneur Board of Directors, we would like approval from a member of Dr. Barringer’s family that we are able to dedicate our auditorium in her name. If possible, this approval is needed by Monday November 14th.

Please let me know if you are available on Monday to speak on the phone with our CEO, Dr. Martha Sullivan and myself. If not, a written approval by Monday via email is fine too. We look forward to speaking with you, and hopefully meeting you soon!

Best wishes,

Karla W. Marco
Director of Development
Auxiliary of NYC Health + Hospitals Gouverneur
T: 212.238.7011