

Health & Education Committee

November 28, 2017

Meeting called to order at 6:35 pm by Chair Ahsia Badi.

In attendance: Ahsia Badi,

Guests:

Agenda Discussed:

1. Updates about Bellevue child Psychiatry:

Dr. Jennifer Havens, Chief of Child Psychiatry Service at Bellevue Hospital provided updates about funding staffing and the impact on the Hospital services.

Health + Hospitals is under budget decrease which is impacting Bellevue. Strict limitation on hiring staff new staff even to replace staff that leave have been implemented. Which then decreases their capacity to staff inpatient units. Bellevue Child psychiatry has 3 in patient units, however due to these staffing shortages they have only 2 of their 3 units open- 1 for younger child unit staffed and one adolescent unit -which means that their 45 bed capacity is lowered by 10-15 beds for the last two years.

They were able to gain capital funding for renovations as well as the capacity to provide tele-psychiatry which is planned to start with sister H + H hospitals like Jacobi hospitals since they can not transfer those children to Bellevue.

Other update: They have seen success and recognition of the quality of care they provide and now they see 30% Commercial Insurance patients in their department.

2. Updates about healthcare innovation from Mount Sinai Beth Israel:

Beth Israel Hospital completed a community health needs assessment with the use of primary and secondary data. The primary data was conducted in form of online survey, interviews, and focus group. They asked CB6 for organizations and individuals to include in these surveys and groups. The secondary data will be coming from the Federal, State, and City statistics on health indicators, housing, finance, etc. The purpose of the needs assessment is to identify community health needs. They plan to now implement a strategy to address the outcomes of the community needs assessment.

Themes that have been identified:

- a. Robust health care service
- b. Insurance issues
- c. Health care disparities

- d. Isolation
- e. Senior and Gay men
- f. Obstacle to health behavior

Preliminary Priorities:

- a. Aging population
- b. Access to mental care
- c. Access to primary care
- d. Chronic Diseases
- e. Environmental determinants of health
- f. Homelessness
- g. Navigation of healthcare system
- h. Poverty
- i. Financial hardship
- j. Affordable housing
- k. Sociocultural issues
- l. Substance abuse

The top 3-4 priorities will be addressed depending upon the result of the community needs assessment.

The report will combine the needs of the Manhattan Beth Israel and the Brooklyn division.

3. Chair's Report: None

4. Old/New Business: No December meeting

Meeting Adjourned at 7:30