1	BOARD OF CHOSEN FREEHOLDERS HACKENSACK, NEW JERSEY
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3	WORK SESSION WEDNESDAY, SEPTEMBER 12, 2018
4	COMMENCING AT 4:48 P.M.
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7	FREEHOLDERS PRESENT:
8	THOMAS J. SULLIVAN, CHAIRMAN
9	MARY J. AMOROSO, CHAIRWOMAN PRO TEMPORE
10	TRACY SILNA ZUR
11	DAVID L. GANZ
12	DR. JOAN M. VOSS
13	
14	
15	FREEHOLDERS ABSENT:
16	GERMAINE M. ORTIZ, VICE CHAIRWOMAN
17	STEVEN A. TANELLI
18	
19	
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24	KIM O. FURBACHER, C.C.R., R.M.R. P.O. BOX 213
25	ROCHELLE PARK, NEW JERSEY 07662-0213 201-336-6200

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2	
3	ALSO PRESENT:
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5	JAMES J. TEDESCO III BERGEN COUNTY EXECUTIVE
6	
7	LARA RODRIGUEZ CLERK TO THE BOARD
8	LAURIE BIANCHI DEPUTY CLERK TO THE BOARD
9	
10	JULIEN X. NEALS, ESQUIRE ACTING COUNTY ADMINISTRATOR
11	EDWARD J. FLORIO, ESQUIRE COUNSEL TO THE BOARD
12	JARED LAUTZ
13	COUNTY EXECUTIVE'S OFFICE
14	MICHAEL SHEINFIELD DIRECTOR OF COMMUNICATIONS & POLICY
15	DIRECTOR OF COMMONICATIONS & FOLICE
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24	KIM O. FURBACHER, C.C.R., R.M.R.
25	P.O. BOX 213 ROCHELLE PARK, NEW JERSEY 07662-0213 201-336-6200

1 2 I N D E X 3 PAGE NO. 4 ROLL CALL 4 5 5 PLEDGE OF ALLEGIANCE 6 MOMENT OF SILENCE 5 7 PRESENTATION OF COMMENDATION TO PROJECT LITERACY IN RECOGNITION OF RESOLUTION 8 #884-18 5 9 Chris Stout, Executive Director Project Literacy 10 11 PRESENTATION MADE BY THE NEW JERSEY ASSOCIATION OF COUNTIES 11 12 John G. Donnadio, Executive Director 13 New Jersey Association of Counties 14 Mary Melfi, President New Jersey Association of Counties 15 16 21 MINUTES 17 22 PUBLIC COMMENT 18 23 Councilman Jeff Voigt 19 27 Sheila Brogan 20 Paul Nickels 32 21 3 4 RESOLUTIONS 22 UPDATE ON NEW BRIDGE MEDICAL CENTER 35 23 PROGRESS Deborah D. Visconi, CEO and President New Bridge Medical Center 24 25 Michael Paolello, Chief Clinical Officer New Bridge Medical Center

CHAIRMAN SULLIVAN: The meeting is

2 called to order at 4:48.

Before we begin our meeting, I ask that everyone please take a moment to silence their cellphones.

Thank you.

Will the Clerk please read the Sen.

Byron Baer Open Public Meetings Act.

MS. RODRIGUEZ: In accordance with
Section 5 of the Sen. Byron Baer Open Public Meetings
Act, adequate notice of this meeting has been
provided in the Annual Notice Schedule, which
contained the time, date, and location of this
meeting, copies of which Notices were forwarded to
the official County newspapers, to wit: The Herald
News and The Record, and a copy of which was posted
on the bulletin board in the Bergen County Justice
Center and Administration Building, One Bergen County
Plaza, Hackensack, New Jersey, and filed with the
Office of the Bergen County Clerk.

ROLL CALL

22 CHAIRMAN SULLIVAN: Will the Clerk
23 please call the roll.

24 (At this point in the proceeding roll call is taken with Freeholders Amoroso, Ganz, Voss,

1 Silna Zur, and Chairman Sullivan present, with Vice-Chairwoman Ortiz and Freeholder Tanelli absent.) 2 CHAIRMAN SULLIVAN: Evidence of a 3 4 quorum is present. 5 PLEDGE OF ALLEGIANCE CHAIRMAN SULLIVAN: Will you all please 6 7 rise for the Pledge of Allegiance. 8 (At this point in the proceeding all 9 rise for a recitation of the Pledge of Allegiance.) 10 MOMENT OF SILENCE 11 CHAIRMAN SULLIVAN: Would you kindly 12 remain standing. 13 Before we begin, I'd ask for a Moment 14 of Silence as we remember Gwenn Feldman, who passed away this morning. 15 16 Gwenn is the loving mother of United States Congressman Josh Gottheimer. 17 18 Please keep Congressman Gottheimer and 19 his family in your thoughts and prayers, and I ask for a Moment of Silence. 20 (Whereupon a Moment of Silence is 21 22 observed.) 23 CHAIRMAN SULLIVAN: Thank you. 24 PRESENTATION OF COMMENDATION TO PROJECT LITERACY IN 25 RECOGNITION OF RESOLUTION #884-18

CHAIRMAN SULLIVAN: Before we begin tonight's meeting, we have three presentations.

First we have with us tonight, Chris
Stout from Project Literacy in recognition of
Resolution #884-18, which the Freeholder Board will
be voting on this evening.

I'd ask Freeholder Voss to say a few words, and, afterwards, invite Chris up for some photos and comments from the Freeholders.

Executive Director of Project Literacy, which it is very near and dear to my heart, because, as you know, there are millions of people in this country who cannot read, and that's adults. Here in Bergen County, we probably have over 140,000 adults who cannot read or can only read at the most basic level.

Literacy Day. UNESCO is, of course, trying to encourage literacy all over the world. At the present moment, 782 million people that are members of the nations that belong to the United Nations cannot read. Unfortunately, the majority of them are women. This is a major concern, and so I'm just going to do a little campaigning for us.

Project Literacy is having its gala,

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which is the main vehicle we use to raise money,
because all of our tutors are unpaid. The students
don't pay anything, and the only thing that we need
are materials to help them.
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The thing about Project Literacy that is so wonderful is that it's one-on-one. There is no stigma. There is no embarrassment. We have a 93-year-old lady who is now learning how to read --

FREEHOLDER AMOROSO: Wow!

FREEHOLDER VOSS: -- at Project

Literacy. It's never too late to learn.

(Applause.)

CHAIRMAN SULLIVAN: That's awesome.

FREEHOLDER VOSS: Isn't that awesome?

And this year's theme for international literacy is literacy by strengthening the ability to have trade and a skill.

And this is something that we have to do in our own country, because we're graduating kids, some of whom cannot read well and most of whom do not have any job skills, and so we have to encourage them.

I talked to several superintendents in the course of yesterday's events, and I said to them, you really need to reinstate vocational education in

- 1 the schools.
- 2 And they said, "Can you come and talk
- 3 | to us?"
- And I said, "Is the Pope Catholic? Of
- 5 | course I can come and talk about that."
- And so this is really important. We
- 7 | have a citation for Chris honoring National Literacy
- 8 | Month. I'm just going to read a couple of things,
- 9 because I love statistics.
- In the United States, 44 million
- 11 adults, who are 23 percent of the population,
- 12 | struggle at the lowest level of literacy, including
- 13 | 50 percent of the chronically unemployed.
- 14 Literacy skills are a prerequisite for
- 15 the learning of the broadest sense of knowledge,
- 16 | skills, attitude, and values. And literacy is the
- 17 key driver for employment, economic, and academic
- 18 success, and sustainable development. And there's a
- 19 | whole bunch of more, but you get the drift of what
- 20 I'm saying.
- 21 Chris, I present this to you.
- MR. STOUT: Thank you.
- 23 FREEHOLDER VOSS: Our gala is the 12th.
- 24 | MR. STOUT: Our gala is the 12th of
- 25 October, and we are honoring this lady right there.

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Debbie Visconi is our honoree at our gala at the

Stony Hill on the 12th of October. Please come, if

you'd like to. County Executive Tedesco will be

making the presentation of her award.
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FREEHOLDER VOSS: Tom Eastwick will be the master of ceremonies. He has been very supportive of Project Literacy.

MR. STOUT: We're also honoring Bergen Community College that evening, and who is it that's going to be introducing them?

11 FREEHOLDER VOSS: Who?

MR. STOUT: You.

FREEHOLDER VOSS: I'll introduce anybody who needs to be introduced.

MR. STOUT: Two things.

Speaking a little bit of what you've said, of the approximately 200 students who we've had over the past year, most of them are immigrants, but the one change we've seen among that crowd is a different sub category, which I call "refugees."

We're kind of a barometer of what is going on in the world and in this country. We've picked up a lot of refugees, mainly from Syria and Turkey, and the Turks are all highly educated professionals, college professors, physicians, who cross swords with the

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1
    government, I suppose, and are here. They don't
    speak English, so they come to us to reinforce their
2
    English studies. In the meantime, they're flipping
4
    burgers and packing groceries at Stop & Shop.
5
                   FREEHOLDER VOSS: Many of the Turkish
6
    immigrants have started schools, particularly in some
    of the poorer areas, and they are very successful.
    And, as Chris said, many of them are from very
9
    prestigious jobs in Turkey, but they need to hone
10
    their English skills, and so that's what we do, and
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    it makes life better for everybody.
12
                   MR. STOUT: The last thing I want to
13
    say, the largest percentage of total nationality, the
14
    nationality that is the largest percent of total of
15
    our students is American born, which is a sad
16
    commentary.
                   CHAIRMAN SULLIVAN: Well, thank you.
17
18
    We'll take a photo with you. We'll put it up on the
    county website.
19
20
                   (Whereupon, the presentation is made.)
                   CHAIRMAN SULLIVAN: Thank you very
21
22
    much.
23
                   (Applause.)
24
                   MR. STOUT: I gave you some homework,
25
    by the way, a little handout.
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                   FREEHOLDER AMOROSO: It's all great
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    stuff. Thank you.
3
                   CHAIRMAN SULLIVAN: Does anybody want
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    to say anything to them before they leave?
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                   FREEHOLDER AMOROSO: Joan said so many
6
    good things.
7
                   FREEHOLDER VOSS: Please come to our
8
    gala.
9
                   FREEHOLDER AMOROSO: Yes.
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                   FREEHOLDER GANZ: Mr. Chairman?
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                   CHAIRMAN SULLIVAN: Yes.
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                   FREEHOLDER GANZ: I would ask that the
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    record be kept open for five days for anybody that
    wants to submit written comments.
14
15
                   CHAIRMAN SULLIVAN: Anyone have an
16
    objection to that?
17
                   FREEHOLDER AMOROSO: No.
18
                   CHAIRMAN SULLIVAN: Okay.
19
    PRESENTATION MADE BY NEW JERSEY ASSOCIATION OF
20
    COUNTIES
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                   CHAIRMAN SULLIVAN: Next we have Mr.
22
    John Donnadio, the Executive Director of the New
23
    Jersey Association of Counties, along with Mary
24
    Melfi, President of New Jersey Association of
    Counties.
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1 Would you please join us at the table 2 for your presentation.

Thank you.

MR. DONNADIO: I appreciate the time today. I know I was here a couple of weeks ago to talk about the NJAC Foundation, and I just wanted to take a couple of minutes to talk about the New Jersey Association of Counties.

But before I do that, I really want to thank Bergen County, not only the Executive, but the Freeholder Board for their support of the association over the years, and I want to particularly thank your professional staff.

I don't think that this Board realizes how much I rely on your folks to be an advocate in Trenton. Julien Neals, your County Administrator.

Mike, Michele. I was just talking to Joe Femia, Joe Luppino. Gerald won a county service award for his work on purchasing issues. So you just have a tremendous, a tremendous -- and if I missed somebody, I apologize, I didn't mean to, but, honestly, just a tremendous staff that, again, I rely on a great deal to be an advocate for county government across the state and in Trenton. Thank you for that. I appreciate that a great deal.

Before I give you a legislative update,

I just want to point out two events that we have

coming up that are very important.

The first is the county administrator certificate program that we started two years ago and partnered with the Rutgers Center for Local Government Services, because there's no specific training for county administrators. It's a comprehensive two-day program that's open to all county professionals. It covers fiscal affairs, procurement, labor relations, and runs the gambit, and, again, just a terrific two-day program that is in November this year, and you can visit our website. I'll leave these packets behind, so if you have a hard time falling asleep tonight, you can go all through them and read them all.

Second is our year-end summit that we host a different topic every year. This year is, we think, an important and timely one on active shooter preparedness and 911 telecommunications, which leads me into my legislative update, because for well over now, a year or two --

FREEHOLDER SILNA ZUR: When is that conference?

25 MR. DONNADIO: Oh, I'm sorry. It's

December 14th at the Trenton Country Club in Trenton.

And because of the seriousness of the topic, it is

free for public officials. So, if you're a

municipal, school district or county official, it is

free of charge for you to come there. If you're a

business, unfortunately we got to pay for some of the

stuff, we're feeding you.

But the 911 fees have been an issue that we have been advocating for for well over 2 or 3 years now. As you know, the State of New Jersey, this has been well documented in the press, has diverted close to \$1.3 billion in 911 fees that are supposed to go back to county municipal 911 centers. And governors on both sides of the aisle and the legislature have diverted these fees for over a decade.

I'm optimistic that in fiscal year 2020's budget, we're going to see some type of funding that is going to come back to the counties so it can help them with their infrastructure for their 911 centers. So we thought it was important. It's an important issue in and of itself at a year-end conference, but we thought we had to keep the 911 issue out in the forefront so we can secure some of that funding to come back to counties on a regional

scale. The counties will get the monies first, and then it will trickle down to the municipalities.

So, if you have an opportunity to speak to your legislative delegation, and I think this is where we're very effective as an advocacy group, please let them know that this is one of our top legislative priorities to secure some of our 911 funding for our county 911 centers.

We are also going to continue to aggressively pursue, now reinstating, the two percent cap on binding interest arbitration awards.

I know our County Administrator and County Counsel know how important this is in terms of how it leveled the playing field in negotiations and saved valuable taxpayer dollars over the near decade that it was in effect.

The law's sunset expired in December of 2017. The legislature did not take it up. The governor wasn't moving forward until he reviewed the report from the arbitration task force. We are going to use the recently published Path To Progress report as an opportunity at public hearings in Trenton to continue to talk about how important extending the two percent cap on binding interest arbitration is.

We are also hoping to, and we're in

conversations with two colleges and universities in the state to have them do an independent study of the data and make recommendations to the legislature accordingly. So we're not giving up on that. That's a critical tool, I think, for county governments to maintain property taxpayer dollars moving forward.

We're also looking to streamline, and I know this county did a fantastic job with its court facility, looking to streamline the court facility's operation costs.

Counties across the state, between the capital and operational expenses, spend over \$600 million a year on county court facilities, and there has to be some additional. We have some recommendations that we're going to come out with next week or the week after on what we think the legislature needs to move to help counties control some of those costs moving forward.

Two other issues that we're being proactive on.

I know I'm rambling on, but there's a lot that we've been working on.

This is the kind of stuff that I really enjoy working on, because we reach out to our members and say, "What can we do to help you in your

day-to-day operations?"

Because the things I just spoke about, they're big things, they're big ticket items, and they're things that we've been working on for 2 or 3 years, and even longer on the court facility piece. But I think we're at the point we're going to see some success on those three issues I just mentioned.

But two of our initiatives, one has to do with counties providing notice to municipalities of bond ordinances by email as opposed to having to send those notices by regular mail. It would be permissive, but under current law you have to send them by registered mail. It's costly. It's expensive. It's time-consuming. I don't know if registered mail, it can be regular mail, correct?

MR. FLORIO: Right.

MR. DONNADIO: But still in a county like Bergen County, where you have 70 municipalities, it's costly and it's time-consuming. And, again, it would be permissive on behalf of the counties. This came from our County Clerk's Association as something they want to see us advocate for. So we have reached out to legislators. We think we're going to see a bill very shortly, and it's something we think we're going to be able to get done rather quickly.

The other piece of legislation that we're taking a proactive approach on is a bill that would allow a county that has a homelessness trust fund to use trust fund dollars. Not every county has them. I think it's 15 or 16 counties in the state that have. I think Bergen County has one. But you can use homelessness trust fund dollars to help offset some of the costs with implementing a Code Blue plan.

As you may recall, last year a bill was signed into law that requires counties to notify municipalities of when weather conditions reached a certain point. And it's proven difficult and costly for some counties to administer, so we thought that this was a way for the counties to help offset some of those costs.

Right now, the fee that a county may collect is \$3 on certain documents that are recorded in the County Clerk's Office. We're looking to increase that to \$5, just increase it by \$2, and, again, dedicate those monies to helping pay in implementing the Code Blue alert.

The other thing we're going to talk about, we have a board meeting on Friday, is the recently enacted vote-by-mail law that I think has

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    given some of our County Clerks fits to implement.
    So we're going to talk about potentially the
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    association filing a complaint with the Council on
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    Local Mandates, again because of some of the costs
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    that the clerks have incurred in terms of ramping up
    the staff that they needed just to implement the Blue
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    Law, because they have to go back to 2016. And if
    you voted by mail in 2016, then you automatically
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    need to receive a vote-by-mail ballot, unless you
10
    actively decide to opt out of it.
                   So it's been difficult for the clerks
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    to implement, and we're going to see about a way to
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13
    firm it down moving forward.
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                   So I thank you for your time and
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    patience.
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                   CHAIRMAN SULLIVAN: Go over again.
                                                        Ιf
    you voted by mail, you automatically get another one?
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                   FREEHOLDER AMOROSO: The next time.
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                   MR. DONNADIO: Correct, the next time.
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                   FREEHOLDER AMOROSO: Every election
21
    after that.
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                   MR. DONNADIO: Yes.
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                   CHAIRMAN SULLIVAN: Even if you don't
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    request it, if you vote-by-mail once, you're going to
25
    continue to get it?
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1 MR. DONNADIO: Right. You have the opportunity to opt out of 2 it. I think the Clerk's Association adopted a sample 4 form that you a can use to opt out of it. You don't 5 have to use that form, but you have to actively say I no longer want to receive --6 7 FREEHOLDER VOSS: And most people won't 8 do that. 9 MR. DONNADIO: And most people won't do 10 that. FREEHOLDER AMOROSO: So that's 11 legislation from last year? 12 13 MR. DONNADIO: It was signed into law 14 about two weeks or so ago. 15 FREEHOLDER AMOROSO: Okay, because we got notes from Hogan saying you're automatically 16 17 re-opted on this thing. 18 MR. DONNADIO: Right, and that went out 19 across-the-board from the County Clerks, because 20 what's going to happen, if you show up, you've going 21 to have to vote as a provisional ballot. 22 FREEHOLDER VOSS: Oh, that's awful! 23 MR. DONNADIO: Yes, it's an awful Again, the Clerk's are scrambling with 24 situation. 25 that right now.

1 CHAIRMAN SULLIVAN: Okay. Anyone have any questions? Thanks for your time. I appreciate it. 3 4 MR. DONNADIO: Thank you. You got it. 5 Thanks. CHAIRMAN SULLIVAN: Our final 6 7 presentation is from Deborah Visconi, president and 8 CEO of New Bridge Medical Center. 9 Deb, would you please join us to the 10 table for your presentation, along with our County 11 Executive, James J. Tedesco III. 12 Julien has asked that we do the resos 13 first, because we have people waiting, and we can 14 come back to your presentation then. Is that okay? 15 COUNTY EXECUTIVE TEDESCO: Yes. Thank 16 you for thinking of that. 17 MINUTES 18 CHAIRMAN SULLIVAN: Will the Clerk 19 please read the minutes to be accepted. 20 MS. RODRIGUEZ: August 1st - Public 21 Session; Freeholder Voss and Freeholder Zur absent. 22 August 8th - Work Session; Freeholder Tanelli and Freeholder Zur absent. 23 24 August 15th - Work Session; Freeholder Ganz absent. 25

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                   CHAIRMAN SULLIVAN: May I have a motion
    to accept the minutes?
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                   FREEHOLDER GANZ: Move the minutes.
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                   FREEHOLDER AMOROSO: Second.
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                   CHAIRMAN SULLIVAN: All in favor?
                   (All present Freeholders respond in the
6
7
    affirmative.)
                   CHAIRMAN SULLIVAN: Opposed?
9
                   (No response.)
10
                   CHAIRMAN SULLIVAN: Carried.
11
    PUBLIC COMMENT
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                   CHAIRMAN SULLIVAN: May I have a motion
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    to open the meeting to the public?
                   FREEHOLDER SILNA ZUR: So moved.
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                   FREEHOLDER GANZ: So moved.
                   CHAIRMAN SULLIVAN: Second?
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17
                   FREEHOLDER AMOROSO: Second.
                   CHAIRMAN SULLIVAN: All in favor?
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19
                   (All present Freeholders respond in the
    affirmative.)
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21
                   CHAIRMAN SULLIVAN: Opposed?
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                   (No response.)
                   CHAIRMAN SULLIVAN: We will now have
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24
    the Hearing of the General Public, with a
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    three-minute time limit in effect, in accordance with
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1 the Bergen County Freeholder bylaws. The Board Attorney will keep the time. When the time of the speaker expires, the Board 4 Attorney will announce that the time has expired. 5 Is there anyone from the public who would like to speak? 6 7 FREEHOLDER VOSS: This gentleman. 8 CHAIRMAN SULLIVAN: Please approach the 9 mic, state your name, spell it for our stenographer. 10 COUNCILMAN VOIGT: Good afternoon, 11 Freeholders and Administrators of Bergen County. 12 My name is Jeff Voigt. 13 councilman in the Village of Ridgewood. I'm going to pass out comments I'm 14 15 going to make. 16 CHAIRMAN SULLIVAN: Thank you. 17 COUNCILMAN VOIGT: I'm here today to talk about an issue in our village related to traffic 18 19 on Franklin Avenue, which is a county road. It runs in an east/west fashion. 20 This east/west corridor is 21 approximately a half a mile in length. It's one of 22 23 the main thoroughfares in the surrounding area. road has four traffic lights on it, which were 24 25 originally installed in the 1960s.

Additionally, I'm here to speak about the intersections at these traffic lights.

All of the lights are timed lights.

Currently, two of these intersections are at the level of service designated as level E, which is the worst level you can get at a traffic light. It can take a car anywhere from up to 10 minutes to travel the half hour thoroughfare from east/west on the county road.

This isn't the main issue, however; the main issue is the safety of our residents who use this corridor to walk along it or across it. Most especially, we have older adults and people with disabilities who live in this corridor who use it for food shopping and going to locations in the Central Business District.

Unfortunately, last night we had an accident on this road where a woman was hit. She was sent to Valley Hospital. She has a hip injury. I think she broke her hip. She's 73-years-old. She had a neck injury, and she also had abrasions to her hip.

The corridor is only going to get worst over the next several years, with four large multifamily developments that are going to be put on

1 it or around it. This will add significantly to foot
2 traffic in our downtown and along this corridor.

Over the past 10 years, Ridgewood has contributed approximately \$190 million to Bergen County in taxes. During this time, we received approximately \$3.8 million in Open Space grants, which amounts to two percent of what Ridgewood has paid to the county over these years. In other words, we've not asked for much over this time and we have given much.

Tonight, we are asking the county to upgrade these traffic lights on this road. The traffic lights are close to 60-years-old. It would help the surrounding towns and our village residents that use the Franklin Avenue east/west cut-through immensely if new traffic lights and intersections could be installed in order to improve traffic flow.

Our village would be more than happy to work with the county in accomplishing these very important objectives.

Thank you.

CHAIRMAN SULLIVAN: Do you want to

comment?

FREEHOLDER GANZ: I have a question.

CHAIRMAN SULLIVAN: Sure.

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                   FREEHOLDER GANZ: Has the mayor and
    council endorsed this?
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                   COUNCILMAN VOIGT: We've endorsed it
3
4
    over the past several years, the four traffic lights,
    so this is kind of a reiteration.
5
                   FREEHOLDER GANZ: Has the current
6
    council?
                   COUNCILMAN VOIGT: Not yet, but they
9
    will tonight.
                   CHAIRMAN SULLIVAN: I assume that your
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11
    community is the one who approved these four large
12
    multifamily developments, right?
                   COUNCILMAN VOIGT: Yes.
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14
                   CHAIRMAN SULLIVAN: So it wasn't the
15
    county?
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                   COUNCILMAN VOIGT: Oh, no, no, I'm not
17
    saying it was the county.
18
                   CHAIRMAN SULLIVAN: And then I just
19
    have a little problem with your math.
20
                   Over the past 10 years, you contributed
21
    $190 million to Bergen County in taxes and only
    received $3.8 million in Open Space, that amounts to
22
23
    two percent of what Ridgewood has paid the county.
                   You get services from the county every
24
25
    year that you didn't include there. I'm not being
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1
    nitpicky here, but we plow every county road, we salt
    every county road, we police. We do everything.
2
3
                   So just in the future, I think that
4
    your math is a little misleading, just in my opinion
5
    to you.
                   COUNCILMAN VOIGT: Understood.
6
7
                   Thank you.
                   CHAIRMAN SULLIVAN: Thank you.
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9
                   Anybody else who would like to speak
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    from the public?
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                   Sure.
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                   MS. BROGAN: It's really on the same
13
    subject.
14
                   Good afternoon or evening. My name is
15
    Sheila Brogan. I co-chair Age Friendly Ridgewood.
    I'm from Ridgewood.
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                   We have a project to make Ridgewood a
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    community of all ages, in fact, our tag line is
     "Ridgewood: A good place to grow up and to grow
19
    old."
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21
                   Our funding for this three-year pilot
    project is through the Henry and Marilyn Taub
22
23
    Foundation. We are 1 of 5 towns in Bergen County
24
    that participate in the Taub funded Age Friendly
25
    Initiative.
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Age Friendly Ridgewood endorses

Councilman Voigt's request to partner with Bergen

County in making improvements to the Franklin Avenue

corridor that is adjacent to the Ridgewood Central

Business District.

Twenty-five percent of Ridgewood's population is 55 and over. Our total population is slightly over 25,000 people.

A block west of Franklin Avenue is a 129-unit low income apartment building housing disabled and older adults.

Many of these adults no longer have cars and walk on Franklin Avenue to the grocery store or nearby banks.

Other older adults living close to the Central Business District also walk Franklin Avenue as their main thoroughfare to shop, bank, and enjoy the restaurants, and you know we have a lot in Ridgewood. I think it's 104 restaurants.

Within the next two years, we'll see tremendous growth in Ridgewood's downtown area, with the addition of 241 new apartments that developers believe will attract millennials and empty-nesters eager to downsize and lessen the economic housing burden brought on by high property taxes in our

1 | village.

Age Friendly Ridgewood, through the
Taub Foundation grant, engaged consultants last year
to do a walkability study and a land use study
looking at Ridgewood's age-friendliness.

Both studies found deficiencies in the walkability of the Franklin Avenue corridor and Central Business District.

Our own sidewalk audit noted the need for more curb cuts to accommodate wheelchairs and walkers, improved crosswalk markings, and identify the significant need to improve and modernize the traffic signals and crosswalk countdown signs on Franklin Avenue.

Over the last seven years, we have averaged about seven serious pedestrian accidents in that area per year.

We want this to be reduced to zero, as

I'm sure all of you would like to see reductions

across Bergen County of pedestrian accidents, and for
our older adults to feel safe and secure as

pedestrians.

We want to encourage more of our older adults to walk to the Central Business District for shopping and errands.

With your assistance and collaboration,

we can improve safety for our older adults, as well

as for all pedestrians walking along Franklin Avenue.

And I thank you for your consideration

And I thank you for your consideration of this request.

CHAIRMAN SULLIVAN: Thank you.

Thank you for your comments. I thank everyone for their comments.

We have our engineer. We will definitely look into it. I do want to say, though, I think you need to do a lot more work with the borough officials. We're not the ones making those areas so dense, it seems to be the way your zoning is going in Ridgewood, and it seems like the problem is a Ridgewood problem that you're trying to make a county problem.

But, anytime there is safety involved, we will certainly take a look at it and see if there is anything we can do.

So I would suggest that you go to the Ridgewood Council meetings and tell the council members to talk to the people on their planning board that are the ones that are approving these high density housing in such an area where it is very concerning for you all that there is going to be a

- 1 lot of pedestrian foot traffic. So, we will do our part, but Ridgewood 2 needs to do their part as well. We will definitely 4 send this to the county to look at. However, again, 5 Ridgewood can't make a problem and expect the county to fix it, but we will look into it for public safety 6 reasons. Thank you. COUNCILMAN VOIGT: 9 MS. BROGAN: Great. 10 CHAIRMAN SULLIVAN: Dave. 11 FREEHOLDER GANZ: It seems to me that we're putting this ahead and handling it a different 12 13 way than every other traffic case that we've had in 14 the 16 years that I've served on the board. 15 Always there's a requirement --16 CHAIRMAN SULLIVAN: Thank you for 17 bringing that up. 18 FREEHOLDER VOSS: There should be a request from the town. 19 20 FREEHOLDER GANZ: Exactly. CHAIRMAN SULLIVAN: Thank you for 21
- So, we have a Ridgewood councilman 24 here. I mean, it should be a request from the town 25 to look at it. The town should be doing some kind of

bringing that up. Correct.

22

23

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1
    studies. If you need some guidance, you can
    definitely call our engineering office, but you have
2
    a town engineer who should know the procedures and
4
    what to do.
5
                   Anyone else?
                   Anybody else in the public would wishes
6
7
    to speak?
8
                   Yes, Paul. Come on up, buddy.
9
                   MR. NICKELS: Good evening.
10
                   Paul Nickels.
11
                   I'm getting my voice back after being
12
    sick.
                   I haven't had a chance, because I was
13
14
    sick, so I'm glad you're here, County Executive.
15
                   COUNTY EXECUTIVE TEDESCO: Thank you.
16
                   MR. NICKELS: Because I'm very excited
17
    to see how this young adult task force grows and see
18
    what's happening. So I'm hoping we'll get some
    updates on that, when it gets pulled together.
19
20
                   So that's a great thing.
21
                   I heard that gentleman speak about
    funding for Code Blue. Before I came here and even
22
23
    throughout the week I'm like, I really don't want to
24
    talk about Code Blue yet. I'm ready for cool
25
    weather, but not freezing cold weather, I'm really
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1
    not, but that's good to know. That will be
2
    interesting to see.
                   So, I just really hope to see what goes
4
    on with this young adult -- I don't know, I forgot
    what the exact name is, young adult --
5
                   ACTING COUNTY ADMINISTRATOR NEALS:
6
7
    Youth Homelessness Task Force.
                   MR. NICKELS: All right. Because I
8
9
    know it's 18 to 24 that's doing it.
10
                   Okay. Thank you.
11
                   And thank you, County Executive.
12
                   COUNTY EXECUTIVE TEDESCO: Thank you,
13
    sir.
                   MR. NICKELS: All right. Thanks a lot
14
15
    for listening.
16
                   CHAIRMAN SULLIVAN: You got it, buddy.
17
                   Is there anyone else from the public
18
    who like to speak?
19
                   Seeing none, can I have a motion to
20
    close the meeting to the public?
                   FREEHOLDER GANZ: So moved.
21
22
                   FREEHOLDER SILNA ZUR: Second.
                   CHAIRMAN SULLIVAN: All in favor?
23
24
                   (All present Freeholders respond in the
25
    affirmative.)
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1
                   CHAIRMAN SULLIVAN: Opposed?
2
                   (No response.)
3
                   CHAIRMAN SULLIVAN: The meeting is now
4
    closed to the public.
5
    RESOLUTIONS
                   CHAIRMAN SULLIVAN: We will now review
6
7
    the Resolutions to be voted on tonight.
                   MS. RODRIGUEZ: The Resolutions to be
8
9
    voted on tonight are: Resolutions #880-18 through
10
    #886-18.
                   CHAIRMAN SULLIVAN: Okay. Page 1.
11
12
                   Page 2. I'm sorry.
                   FREEHOLDER AMOROSO: Chairman, #880 is
13
14
    a grant. Perhaps we can do that as a Body of the
15
    Whole?
                   CHAIRMAN SULLIVAN: Sure.
16
17
                   Any objection?
18
                   (No response.)
19
                   CHAIRMAN SULLIVAN: So ordered.
20
                   Anything else on that page?
21
                   Next page is Page 3.
22
                   FREEHOLDER SILNA ZUR: Mr. Chairman,
    might I suggest we do \#884, \#885, and \#886 as a Body
23
    of the Whole?
24
25
                   CHAIRMAN SULLIVAN: Without objection?
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1
                   (No response.)
2
                   CHAIRMAN SULLIVAN: Okay. Thank you,
    Freeholder.
3
                   Is that it?
4
5
                   FREEHOLDER AMOROSO: Yes.
6
                   CHAIRMAN SULLIVAN: Okay. May I have a
7
    motion to accept the Resolutions on the Consent
    Agenda as read by the Clerk?
9
                   FREEHOLDER VOSS: So moved.
10
                   FREEHOLDER SILNA ZUR: Second.
11
                   CHAIRMAN SULLIVAN: All in favor?
12
                   (All present Freeholders respond in the
    affirmative.)
13
14
                   CHAIRMAN SULLIVAN: Roll call.
15
                   (At this point in the proceeding roll
    call is taken and the Resolutions of Unanimous
16
17
    Consent are passed by a vote of five in favor, with
    Freeholder Tanelli and Vice-Chairwoman Ortiz absent.)
18
19
                   CHAIRMAN SULLIVAN: Are there any
20
    Resolutions of Nonconsent, pulled, postponed or
    tabled?
21
22
                   MS. RODRIGUEZ: There are none.
23
                   CHAIRMAN SULLIVAN: Okay. Thank you.
    UPDATE OF NEW BRIDGE MEDICAL CENTER PROGRESS
24
25
                   CHAIRMAN SULLIVAN: So we're now going
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- 1 | to have a presentation from Bergen -- New Bridge
- 2 | Medical Center.
- 3 | COUNTY EXECUTIVE TEDESCO: Interesting
- 4 you say that.
- 5 CHAIRMAN SULLIVAN: New Bridge Medical
- 6 Center.
- 7 | COUNTY EXECUTIVE TEDESCO: Interesting
- 8 you say that.
- 9 CHAIRMAN SULLIVAN: And our County
- 10 | Executive.
- 11 Thank you.
- 12 COUNTY EXECUTIVE TEDESCO: Thank you,
- 13 Mr. Chairman.
- I thank the Freeholders -- just on the
- 15 | note of this paperwork that was handed out. I have a
- 16 | meeting with the mayor tomorrow of Ridgewood, so this
- 17 | will be something that I ask him about.
- 18 | I think, Mr. Chairman, in light of the
- 19 request and what David said, the process is the
- 20 process.
- 21 CHAIRMAN SULLIVAN: It is.
- 22 COUNTY EXECUTIVE TEDESCO: And I would
- 23 | hope that the council member would know the
- 24 | process --
- 25 CHAIRMAN SULLIVAN: I would hope so.

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1
                   COUNTY EXECUTIVE TEDESCO: -- by which
    that action needs to take place.
2
                   FREEHOLDER AMOROSO: Can I ask one
3
4
    question about this?
5
                   When you have housing coming online,
6
    they talked about --
7
                   CHAIRMAN SULLIVAN: We'll pass on that.
8
    We'll get back to that.
9
                   FREEHOLDER AMOROSO: Okay.
10
                   CHAIRMAN SULLIVAN: Thanks.
11
                   FREEHOLDER AMOROSO: Thank you.
12
                   COUNTY EXECUTIVE TEDESCO:
                                               Tonight I'm
13
    here very happily to have you get an update from the
    CEO and President of New Bridge Medical Center.
14
15
                   It's nine months?
16
                   MS. VISCONI: Eleven, but who's
17
    counting?
                   COUNTY EXECUTIVE TEDESCO: Yes.
18
                                                     Gees,
19
    I'm sorry. We're in September.
20
                   MS. VISCONI: That's right.
21
                   COUNTY EXECUTIVE TEDESCO: It's an
    11-month update as to when CarePlus Bergen took over
22
23
    the management and operation of New Bridge Medical
    Center.
24
25
                   I thought it was appropriate at this
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time for the Freeholders to get a picture of what's
taken place over the last 11 months.

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When Deb came onboard, she was immediately someone that lit the hospital up and has changed the face of the hospital, not only to the employees but to the residents and to the community. And you'll hear some very outstanding results, both from an operational standpoint and a financial standpoint. And I say this because there's a lot of people out in the community that ask you about, "Well, what's going on at New Bridge?" And I wanted you to have the information so you could tell them the things that are going on in New Bridge, because in the past, we didn't know what was going on. had to fight to find out and to get information. today, we're in a new era, and Deb's here to give you that information and tell you the things that are happening there.

I'm just very pleased that the

Freeholder Board has continued to support New Bridge

Medical and let Deb and her team do the good things

that they're doing and continue to do the good things

that they're doing.

Julien has a lot more knowledge than I do about what's happening, because he works with Deb

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on a constant basis and talks back and forth with Deb
on a constant basis. And that's just one of the
changes is that the dialogue that's taking place
never took place before.

FREEHOLDER VOSS: That's right.

COUNTY EXECUTIVE TEDESCO: And now it's
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COUNTY EXECUTIVE TEDESCO: And now it's taking place with the administration on a regular basis.

So, I'm happy to be able to introduce

Deb Visconi again and have her tell you the good

things that are going on at New Bridge Medical

Center.

13 Deb.

14 MS. VISCONI: Thank you.

Thank you for inviting me and having me here and the support over the last 11 months.

So, this is a journey that I'm going to take you through, and hopefully you will find it as exciting as I do, as I work at the New Bridge Medical Center every day.

I'm just going to stand up. David, I hope you can still see the screen.

So, our goal is to be a destination hospital in the State of New Jersey. And everything that we do is around what I call our "Pillars of

Care, "our "Pillars of Excellence." So, they are arranged: Access, Engagement, Growth, Integration of Care, Patient Experience and Quality. And they are just listed there in alphabetical order, but these are our pillars of what I call "Excellence, Strength, and Care at New Bridge Medical Center."

So let's start with access.

Several of the things that we did when I first arrived at New Bridge was, you know, our hospital would go on diversion for acute care admissions on a regular basis, and that was one of the things that I would get called about even before I took over, "Why are we going on diversion?"

So it takes leadership, and everything starts at the top, but yet the bottom helps to support what we're doing.

So, some of the things we put in place immediately was that we were not going to go on acute care diversion at the hospital anymore, and that's been in effect since October 1st and we have not had any diversions.

The other thing that we found, as we emerged through our journey, was that we were actually transferring behavioral health patients out of New Bridge to the tune of about 15 patients a

month, and that was something we didn't even know was occurring until we started going through the transfers, but that has been stopped immediately.

Then other things that were occurring at the hospital was that doctors would just cancel clinic appointments, ambulatory because they were on vacation, they forgot, whatever the reasons were, but they were just cancelling things, and, again, we put a stop to that. We minimize, I say "minimize" because sometimes there are things that are unavoidable, if a provider has a death in the family or a piece of equipment does down, so we're minimizing cancellations. And then whenever there needs to be a cancellation, we get involved and we have to approve that. So that's been in place since October, and we've seen some great results, again, part of access.

The other thing that is part of our access strategy is our insurance and our payer mix.

One of our commitments was that we were going to open our doors to everybody in Bergen County regardless of payer. Obviously, we embrace our safety status, and you can see that by the big slice of this pie that is in blue, but we are also working to expand our payer coverage so we can actually be on par with other

commercial insurances so anybody in Bergen County can use our services.

Over the last 10 months, we've been actively negotiating with several managed care providers. We have a clover agreement that we signed at the end of last year. Aetna, which, as you know, is a very large payer in the county. We now have a commercial agreement with them effective August.

CIGNA we just signed effective October 15th. And then United Healthcare, we're very, very close to finalizing that, and if all goes well, we should have United Healthcare on par by November 1st.

So we will have gotten four new managed companies that are par at New Bridge Medical Center, again, providing significant access, and those are just the logos. We do a press release with each one that we sign, and those are just some of our images that you'll see.

is our work with our veterans, and you know that was one of our major initiatives and commitments to our communities is to be able to provide health care for our veterans in our hospital. So, one of the things that we did at the beginning of the year was that we are now a VA provider of choice, and that just means

that we have a direct relationship with the New
Bridge Medical Center and the VA of New Jersey.

Basically, veterans can get any care that they need
at New Bridge Medical Center. They do still have to
go through their primary care provider at the

Veterans, but they can get all ancillary tests,
diagnostic tests at New Bridge Medical Center. The
primary physician does have to provide us with a
referral.

We had a big event celebrating this new privilege back in January. We had a lot of great speakers and it brought a lot of great support, but when I step back and I say, "This is great, we're now a provider of choice, but are we really making a difference?"

So, in the beginning of the relationship, veterans are confused sometimes about their insurance, what can we do, where can we go. So we opened up a hotline for them. So there's now a hotline that's been staffed by our team Monday through Friday, basic business hours, but they can get information, they can ask questions, they can ask about insurance, they can get appointments through this hotline. It is really all about giving them access, and, again, how do we measure that?

1 We're really looking at the volume. And just in the first, although it says August, this 2 is really about six months' worth of data, we are 4 seeing our patients, 17 inpatients veterans, 10 5 outpatient veterans have come through our behavioral health; 16 regular ambulatory, and then they are 6 using our emergency department 24 treat and release in the first 26 months. 9 The other thing that's not on the slide 10 because it just started is the Veterans Home across 11 the street, you all know this, they put their patients that need care in vans and ambulances and 12 13 they send them to all over the state to get care, 14 when we're right across the street. 15 So, as of September 1st, our doctors are now going to the Veterans Home across the street 16 17 and they are making rounds. One of our providers, 18 Dr. --19 CHAIRMAN SULLIVAN: That's great. 20 (Applause.) 21 FREEHOLDER AMOROSO: That's excellent. 22 MS. VISCONI: Thank you. 23 September 1st. And behavioral health 24 is a big need of this population, obviously with dementia, so Dr. Arapecian (phonetic) is now on 25

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1
    staff, she goes once a week, she's actually covering
    four of the behavioral units right on-site. They no
    longer have to go to Valley, who sends them to Ramapo
4
           They can have their care directly.
5
                   So that's brand new, Jim. That just
    happened like literally --
6
7
                   COUNTY EXECUTIVE TEDESCO:
                                              The other
8
    thing is this is also for active duty men and women.
9
                   MS. VISCONI: Yes, yes. So it's really
10
    been a great journey with the veterans, and they're
11
    very, very grateful.
12
                   COUNTY EXECUTIVE TEDESCO: Veterans and
13
    active duty.
                   MS. VISCONI: Veterans and active duty.
14
15
                   CHAIRMAN SULLIVAN: On two slides back,
    you said that they still had to go to their primary
16
17
    care doctor. Is this like where you can get the
18
    medicine for cheaper, this is kind of like?
19
                   MS. VISCONI: Well, they can get their
20
    prescriptions at New Bridge, but there's a little bit
                  They can get it for free at the
21
    of a co-pay.
    veterans. But we can provide it to them, it's just
22
23
    that they have a co-pay.
24
                   And that's one of the questions that we
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get asked a lot, so that's why we educated our

25

- 1 hotline staff to be able to understand and speak to 2 that.
- COUNTY EXECUTIVE TEDESCO: The future
 that we're looking towards, Tom, would be to get the
 designation from the VA of our pharmacy to allow for
 filling the prescriptions the way the VA does.
- 7 CHAIRMAN SULLIVAN: Okay.

15

16

17

18

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- 8 COUNTY EXECUTIVE TEDESCO: That's
 9 another whole step that we have to take and a process
 10 that we have to take.
- 11 CHAIRMAN SULLIVAN: That would be 12 fantastic.
- FREEHOLDER SILNA ZUR: But you're working on already?
 - COUNTY EXECUTIVE TEDESCO: Right, that is something that we want to work on and get, yes.
 - anyone that's on maintenance drugs, there's a federal facility they could go to, and then they have to take their prescription from their primary and then there's some kind of federal plan, there's no co-pay. It sounds like that's where you're starting to go with that, which is phenomenal.
- MS. VISCONI: Yes, they're very happy.

 I mean, a veteran came in one day and just walked in

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1
    and just wanted to thank us. He said, "Listen, this
    is terrific and we're really excited about the fact
    you can do this for us."
                   COUNTY EXECUTIVE TEDESCO: When they
4
5
    come, they actually get valet care.
                   FREEHOLDER VOSS: Wow!
6
7
                   CHAIRMAN SULLIVAN: Sorry for
8
    interrupting.
9
                   ACTING COUNTY ADMINISTRATOR NEALS: Some
10
    of the feedback was for the cost of the co-pay for
11
    what some of them used to have to go through to get
    to East Orange and back, they haven't been
12
13
    complaining about it, from what we've heard, but we
14
    are still working towards getting that.
15
                   FREEHOLDER GANZ: What would it cost
    and is there a demand for weekend service?
16
17
                   MS. VISCONI: For the access phone
18
    number?
19
                   FREEHOLDER GANZ: Yes.
20
                   MS. VISCONI: We could look at that.
21
    It's an issue of training.
                   COUNTY EXECUTIVE TEDESCO: But, David,
22
23
    you would like us to look at that?
24
                   FREEHOLDER GANZ: Yes.
25
                   COUNTY EXECUTIVE TEDESCO: You got it.
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MS. VISCONI: There are people entering the access lines, it's just a matter of us training them so they can have the right information.

So the other part of the veterans work that we're doing, we recognize there's high levels of unemployment and they're looking for jobs, so rather than have our veterans apply and end up in the black box of HR, we had dedicated recruitment fairs for our veterans where we actually had a room with our Human Resources professionals and hiring managers right on-site. People were able to apply for jobs on the computers right then and there. If they qualified for a particular job, they were screened by Human Resources, and then we actually had hiring managers right on-site.

hiring -- A.J. was part of it -- our hiring manager is on the left and that young man on the right there shaking my hand, he's the first veteran we hired as part of this. We had two of these recruitment fairs. We hired well over a dozen veterans. And the great part of it is we're not just hiring for lower level jobs, like this young man happens to be an environmental services supervisor, so he's management. And our compliance manager, Christian

1 | Burroughs, was hired through this recruitment.

A.J. very closely to make sure he supports us through all of this, but it's been a great thing for us.

So the other pillar that we focus on is patient experience. It's something that really had not been a priority in the past, but, you know, we want to make sure that anybody that walks through our doors and even those that don't are treated with respect and kindness and have the same level of experience throughout.

This is just a factoid for you. We have to measure patient experience through what we call "age caps," the hospital consumer assessment of health care providers, I won't get into all of that gory detail, but this is required by CMS for us to report. There are surveys that get sent out to patients that use our service.

COUNTY EXECUTIVE TEDESCO: I got one.

MS. VISCONI: I hope you rated us well.

21 Don't tell me.

This is just really super exciting for me, because having been in health care for so many years and knowing what it takes to make any kind of a movement in a patient experience score is herculean.

1 | It really literally takes a village.

So when I look at when we first took over, the first quarter of 2017 versus first quarter of 2018, the green arrows pointing up means we're trending upward in those particular pillars.

What's great is that "rate the hospital" and "recommend the hospital." Those both moved from the fourth quarter from 29 percent to over 40 percent. The numbers aren't -- like we want to get to like 85 percent, but just that movement alone from quarter to quarter, recommend the hospital went from 38 percent to 52 percent.

There's quite a few that are going up, but another one that's really important and super hard to change is the hospital environment, cleanliness and quietness. Any hospital administrator would tell you to move that one point is huge. To move it from 37 percent to 57 percent in one quarter is outstanding.

FREEHOLDER VOSS: Wow!

MS. VISCONI: And then the quietness from 50.9 to 63 percent, that's a question on the survey, how quiet is your environment.

We're still doing a lot of work on this. We're rolling out formal education, we're

training our staff, but the spirit here is everybody
is in this for the same reason, and everybody, our
housekeepers are all part of the process to improve.
So that's a great story.

And the other part of the pillar is quality and patient and resident safety, which is something again that's our commitment.

This is something that you've all heard about, workplace violence incidents in the organization.

And to see a decrease from 2017-2018 of that magnitude, these are events, 99 to 88, but it's an 11 percent change from last year to this year when we took over.

And the other part of it is that that little bottom line there in red, lost days at work due to workplace violence. So we've actually reduced our employees getting hurt on the job and having to lose time at work by 10 percent year-to-year.

Still a lot of work going on. We're training our staff. We have deescalation training, and there's a lot of work around workplace violence, but you can start to see that we're already making a difference.

The other thing that we measure is our

falls, how often does our patient, you know, fall to the ground. So we've made some headway there as well, 27 percent improvement from last year to this year. And this is all about staff education, what we call "huddles," which is the clinical team getting together at the beginning of their shift and talking about patients and their potential risks.

We've noticed in our detox unit that we had several patients that were falling down, so we're working with them, specifically with the clinical team, to really understand what's happening there, what things we can put in place to help minimize that.

Our long-term care division, I'm going to talk more about them, but they continue to be a shining star.

The green bar is the national benchmark of falls in a long-term care facility, and we are consistently below that benchmark.

Hand hygiene, this is something that hospital administrators always measure, because you have to have clean hands so that you don't spread infections, and that is the No. 1 way of stopping to spread infection. So, you know, this is really good, our compliance rate from 81 percent, first quarter to

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1
    first quarter, to 90 percent, and second quarter from
    75 percent to 91 percent. We measure this on a
2
    regular basis, very important, but we are making
4
    tremendous headway in our hand washing. I know this
    is not very exciting, but does very much excite me.
5
                   COUNTY EXECUTIVE TEDESCO: Deb, will
6
7
    you tell them about the vaccination?
                   MS. VISCONI: That's coming.
9
                   COUNTY EXECUTIVE TEDESCO: Oh, sorry.
10
                   MS. VISCONI: See, you're such a good
11
    -- sorry, this is a journey.
                   I know hand washing excites me.
12
13
                   But look, look at the zeros because
14
    hand hygiene, right?
                   I come from some really great systems,
15
    and we could not get our doctors to wash their hands,
16
17
    but we're working on all this. But acute, O surgical
18
    site infections, 0 CAUTIS, 0 CLABSIS, below national
    benchmark, I mean, all of that ties together.
19
20
                   And here's our flu. So this is really,
21
    I mean, I would say this was a shocking, embarrassing
    moment as a CEO. So, when I first took over in
22
23
    October, 40 percent of our employees were getting the
24
    flu vaccine. As a health care provider, you want
    100 percent of our employees to get the flu vaccine.
25
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It is the one way to protect against the flu. And so when I asked, you know, "Why?"

Well, you know, it was never a priority. No one ever held anybody accountable. They didn't have any system in place.

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They're at 40 percent.

Unfortunately, we started in October, so we were a little late in the game to really mount a full flu vaccine campaign. But my approach was I wouldn't going to bring out the stick, I brought out the carrot, so we did leadership getting the flu shot. I engaged union leadership. We all took pictures getting our flu shots. We had prizes. had raffles. We got to 60 percent. Statistically, a 20 percent increase is good but it's nowhere near where I want it to be, so this year we are rolling out a mandatory flu vaccine program for our employees. This is not uncommon. This is not unusual. This is pretty standard stuff. But first I spoke to Jim, I said make sure he knew this was going to happen. I'm working with Hansel and with his division to help us educate our staff, because part of it is education, like when I'm trying to find out why don't people want to get their flu shots.

"Well, it makes you sick."

"Our big brother is trying to insert me with something that they're going to be able to track me."

"I've never gotten the flu before, so why should I start doing it now?"

So, a lot of it is education. So working with Hansel and his team, we're going to start rolling out education for the staff, but it is going to be mandatory. If you don't have your flu vaccine, they are going to have to wear masks, and that has proven to be an incentive to get your flu vaccine. So that's going to roll out soon. Jim, be on the lookout. But I did meet with the union leadership. HPAE is onboard.

COUNTY EXECUTIVE TEDESCO: I wanted you all to know that.

"Before we do this, we want to talk to them, we want them to understand why we're doing this." And this isn't just New Bridge, this is what the administration has asked Hansel to do. As the Chief Health Officer for the entire county, Hansel's responsible for the overall health and wellbeing of every resident, of every visitor, of every single business in this county. And one of the things we

- 1 asked them to do is look at this in a global perspective, and that it's not just New Bridge, but 2 what is Hackensack, what is Valley, what is 4 Englewood, what is Teaneck, what is Holy Name, what 5 are the health care centers doing, what is the entire county doing to work on combating the flu and 6 transmitting the flu? 8 So, we're going to be leading this 9 effort through New Bridge, but I just wanted you to 10 understand and know that this isn't just a specific 11 New Bridge issue, this is a county health issue. 12 MS. VISCONI: Yes. Absolutely. 13 FREEHOLDER AMOROSO: Right. 14 MS. VISCONI: So that's going to be 15 exciting. 16 But, you know, the union leadership was 17 onboard. 18 COUNTY EXECUTIVE TEDESCO: Yes. 19 MS. VISCONI: The other thing is, we're 20 going to be rolling out, actually we just opened up 21 the survey, a culture safety survey. So we want to get our employees to tell us how they feel about the 22 23 culture of safety at the organization. 24 And usually when you do these surveys,
- you know, you're going to get great feedback,

hopefully, and then from there we will try to figure out things to implement to make the organization safer, just by using employee feedback. So that survey just opened.

The other pillar we talk about is growth. This is a very exciting pillar. So there's our trajectory of growth over the next four years in our ambulatory enterprise at New Bridge.

As you know, we are working with our colleagues at Rutgers, and so this is a list of all the doctors that have already started at New Bridge Medical Center over the last several months. And I'm going to talk a little bit about some, and then these are some that are on their way, and this slide is dated because some of our surgeons have already started. We're actually starting to see our OR come alive. Like surgeons are booking cases and we're seeing really more than just endoscopies happening in our ORs.

COUNTY EXECUTIVE TEDESCO: They're actually going into the OR.

MS. VISCONI: They're going into the OR!

COUNTY EXECUTIVE TEDESCO: It's actually being used.

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1
                   MS. VISCONI: It's being used.
                   FREEHOLDER SILNA ZUR: So how many new
2
    doctors so far?
4
                   MS. VISCONI: So, this is about a dozen
    or more. We got a couple of primary care, primary
5
    sports medicine.
6
7
                   FREEHOLDER SILNA ZUR:
                                          15?
8
                   MS. VISCONI: Yes, 15.
9
                   Now, they're not all full-time, so we
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    counted in FTEs, but there's 15 new bodies doing work
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    at New Bridge, and then a few more along the way.
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                   What I think is important for you all
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    to understand is that in addition to having more
    providers, we're actually offering new service lines,
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    things that have never been offered at the Medical
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16
    Center before, hepatology, sports medicine.
                   She took off. I mean, this Dr. Kodery
17
18
    has just taken off with business.
19
                   Vascular surgeons; expanded
20
    musculoskeletals, and that's your orthopedic service
21
    line.
22
                   And then on the surgical side, we
23
    actually have the PAs that are helping support the
24
    surgeons, so that makes them more productive and able
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to do work with our preadmission testing department.

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I won't tell you the horror stories of what used to go on by preadmission testing, but suffice it to say that we needed some support in that. The people who come for surgery need the preadmission testing done.

So, watch us grow. You know, we love to measure things. So here's our growth in physiatry, which is the sports medicine that I mentioned before. So, you can see in 2017, we had 31 visits, and year-to-date, and she only started a couple of months ago, she's already seen 232 patients. Which by the way -- these are visits -- also leads to X-rays, labs, surgeries, more referrals, so it just grows.

And gynecology, and, Jim, you got to meet Dr. Riss (phonetic), our new gynecologist. She just did her first major surgical case yesterday at New Bridge. It was an overnight case and everything. She is so happy and so pleased with everything, and she's such a great woman. She really is a terrific woman.

So, anyway, you can see she's already doubled her volume in the month that she's been here. There was such a need in our community for this service.

1 COUNTY EXECUTIVE TEDESCO: The other thing about this is, while this shows that there's an 2 increase in activity, the quality of the patient care 4 from not having to be removed from their home, 5 because, remember, if they're long-term residents, this is their home, right, and, so, in the past they 6 would have to go to another hospital, and depending on what happened, to stay there, their loved ones 9 would have to go to that hospital to see them and be 10 out of the house, their home. And in this case, we 11 can keep them in their home. And to me, while this is all great, the ability to have a resident be able 12 13 to stay in their home and feel good about it and 14 comfortable that they're not going to have to leave 15 and they're not going to have to pack a bag to go 16 somewhere, to me is huge. And, so, you don't see 17 that here. 18 MS. VISCONI: That's true. 19 COUNTY EXECUTIVE TEDESCO: But for me 20 it's bigger and better than all of this stuff 21 (indicating). MS. VISCONI: Thanks. 22 23 So, other service lines, primary care, you know, that's the base of everything, and we've 24

seen that grow already with the three providers that

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- we brought onboard, as well as nephrology, smaller numbers but still an impact in terms of growth.
- 3 | Again, things we didn't offer before.
- So, thanks to the county, we are able to support our increasing growth and service lines by buying new equipment.
 - This is one of those stories I love to tell, because this is one of our new providers from Rutgers. When I first got there, one of the doctors came, she said, "Oh, we need a new EMG machine."
- "Well, what's going on?"
 - The EMG machine, the data -- well, it wasn't really recording the data, but it could record the data, it was those floppy disks, the five-inch floppy disks. That was like when I was in high school, maybe grammar school, but that's the kind of -- that's how --
 - CHAIRMAN SULLIVAN: It's only a couple of years ago.
- MS. VISCONI: That's true. Thank you.
- 21 Yes. A five-incher.

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- I wanted to put in my historical.
- Anyway, now we gave her a new EMG, look
 how happy she is.
- We have new chemistry analyzers.

Again, it's not just saying that it's a new chemistry analyzer, it was old and broken and needed to be replaced, but this will now allow us to do tests that we were sending out to Reference Labs. So we would have to pay for Reference Lab to do these tests.

Now we can bring in more tests in-house, and in addition to that, from a quality point of view, we can turn these results around because they are done in-house. We don't have to send it out and wait for the results. So, again, quality elevated, plus happy lab people.

New medication carts. This is all part of, which we're going to talk more about when we get to the IS pillar, but this is part of our new and improved EMR. So medication carts were part of that. And, again, this is a safety tool.

So, our old medication carts, you couldn't reconcile the medications that the nurses were giving. So here and again, this is a team. So we have IS professionals, nurses and pharmacists all part of this medication. We rolled out about 200 of those.

Here's your OR with happy OR people and new laparoscopic towers.

So, see, Jim, they are in the OR. I

mean, really, everyone is so excited. The energy around this is really contagious at the organization.

And there's our head and neck surgeon,

Mr. Lin. She's terrific. If you haven't seen the

video on our new commercial, she's on the commercial.

She loves to be part of everything vibrant. She's a

new head and neck surgeon, and she's been doing

terrific work for us.

Just quickly, this is kind of dry, but I think you should also know. When I inherited this, six of the seven union contracts had expired. So I had the opportunity to negotiate, and we're still in the middle of negotiation. So we've completed four doctors' councils, pending ratification, and I had lunch with our medical staff leadership today and they're so excited. They said, "Debbie, we can't believe how smooth and professional the negotiations have been with your team."

They are happy, we're happy, pending ratification, and there's a couple, JNESO and Local 74, are in progress, and next year we have HPAE coming.

Again, with Human Resources, you know, your value is your people, right, the staff who does the work for you and your unit.

So, we didn't have any innovative ways to recruit people before at New Bridge. And in addition to that, not many people wanted to work at the former Bergen Regional.

Now we're doing all kinds of things, like open houses and job fairs. These are two, just to give you a sample of stuff that is going on that we had for support services and for CNAs, which is a very hard position to recruit for. We hired a bunch of CNAs and a bunch of support staff. We are doing really good with that.

So, Information Services is an area that you've all heard a lot about. We spent a lot of money, you spent a lot of money on our Information Services. So the first thing is that we did complete our modernization project. We worked on it from October 1st till July, when we went live -- well, we actually went live in May.

That's a snapshot of the journey over the last several months that we took.

Just to give you a sense of the scope of this job, I mean, upgrading a medical records system is not something like you would upgrade your computer at home.

Over 250 resources were utilized, and

this is just a sample of some of the vendors that were involved in helping us upgrade the system, and, you know, we got a lot of benefits out of it. The medication carts you saw. We now have email for everybody.

When I got to New Bridge, about a quarter of the staff had email, and obviously that's a way to communicate. So we actually now have email for all 2,000 employees.

Cyber security, spam, encryption. We can Skype now. We have wireless access points throughout the organization, a new Internet site, and then we deployed over 1,100 work stations as part of this.

so, this is a lot of dry stuff, but I was just trying to give you a sense of, you know, we went from version 12.1 -- again, this may not excite you as much as it does me or impress -- look at the versions. We had to upgrade from 12.1 to 14.1.1, six major versions of electronic accounts records. I mean, that is overwhelming. And we did it all. You know, we took over in October, so we did it all in a record amount of time. Over 400 of our staff was trained on how to use the new system. Information Services, 120 resources. And we have a whole bunch

of new modules that we can implement at the organization, and everybody was really happy.

So, that's our team the day of Go Live. We had lots of excitement. We had these giant buttons that we were here wearing. And that led us to this or the ability to be part of this. So we're the first hospital in New Jersey to join the statewide data sharing network. So this means that we can actually share clinical information with other providers in the community in a secured cloud-based environment and working directly with the Department of Health.

And that's important for lots of reasons. First is, you know, we want to be the first of everything, but in addition to that, it's working directly with the Department of Health. It allows us to work with our veterans now in a much more seamless manner, because our information will be shared in the cloud. And down the road, this is going to be required for district funding, so we're ahead of the game on that.

 $\label{eq:charmon} \mbox{CHAIRMAN SULLIVAN:} \quad \mbox{The Freeholder has}$ a question for you.

FREEHOLDER SILNA ZUR: So, I have a question for you. I'm sorry.

1 A couple slides back, you had put something regarding Skype for business. 2 Is there Skype for patient use as well? 4 MS. VISCONI: There can be. 5 haven't --FREEHOLDER SILNA ZUR: When I have 6 7 constituents who call who can't get in touch with their relatives or don't have the means financially 9 to visit their family as often as they would like to, 10 to be able to have that ability to Skype with them 11 every once in a while would maybe be an added piece of connectivity that could be interesting, as long as 12 13 you're doing all these amazing tech upgrades, to 14 think about, because I will tell you, as one whose 15 husband had surgery yesterday, to be able to have 16 visuals for family is a great thing. MS. VISCONI: That's a great idea. 17 18 FREEHOLDER SILNA ZUR: To be able to have connection might be something great as well. 19 20 MS. VISCONI: That's a great feedback. 21 So, I will definitely put that on our radar. And then, cyber security, I don't want 22 23 to leave without saying cyber security is real, it's 24 out there. I've been hacked. Many people have been

hacked. We do have a big campaign now for cyber

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security and awareness for our staff, we tell them think before you click, because when you click, that's when it blows you up.

I wanted to give you an update on some of the divisions on long-term care. So, this is huge also for New Bridge. This is not something that would have happened under previous management. This is a significant quality award in the world of long-term care and assisted living. This organization, the American Health Care Association, represents over 13,000 facilities across the country. To get this award, this is truly a demonstration of quality and performance. It's not just a checklist, there's actually metrics and measures that are looked at in this extensive application. And the demonstration of this quality and performance is based on the Baldridge Performance of Excellence Program.

So, for us to get a bronze award within the first 10 months of us being part of this journey really was a proud moment. We didn't think -- you know, I remember talking to Katie Richardson, I'm like, "Listen, Katie, put in for it, we'll see what happens." If we don't get it, I'll be sad, but, you know, we got it. There's three steps, you had to get

the bronze first. Of course I wanted to go for the gold, but Katie said no, you can't do that.

But we got the bronze. This is huge, we had a big banner, we celebrated, and, again, a testament to the quality of the work that goes on there. And, of course, I would be remiss if I didn't tell you that our standard survey, our annual survey came by July 30th, we had -- this is a really significant survey -- eight days of 10 surveyors a day in the organization looking purely at long-term care. And this was the best survey in 25 years, as quoted by Katie Richardson.

We had no life/safety tags. No emergency preparedness tags. Chart reviews, closed records, med past zero error rate. That is huge. We have over 500 residents in that facility, and to get a zero percent med rate, I mean, I can tell you, that's incredible. Wound treatment observation and achieving advisory standards, Katie tells me this is big. Anyway, great job on everybody's part. Again, I was terrified, because it was our first time going through it as CarePlus Bergen. We have a new team, we have new senior staff, we have new facilities people, but we excelled.

So, behavioral health, shining star,

one of our key service lines. I don't want to

belabor this, you guys all know, we have a full

continuum of care at New Bridge Medical Center.

Anyway, so we have the full continuum from outpatient

medication assistance treatment programs, dual

diagnosis, short-term care facilities.

what I did want to highlight though -oh, we are the only inpatient behavioral health
provider for children. But what I did want to point
out is our psychiatric residency program. We have a
32 slot psych residency. That is a huge program, and
why that's so important is we're training our future
healthcare providers. And if you read any journal,
anything that's going on in health care, you know
that there's a shortage of providers and specifically
psychiatrists. So the fact that we're graduating
eight of these residents a year and the fact that we
didn't capitalize on that, well, we are now.

So, here's a picture of our graduates this year. We're very proud. We did a lot of celebrating. We tried to recruit them all. But this is terrific, the fact that seven of our eight residents have -- look at the universities that they're continuing their education at. I mean, Harvard, Cornell, Columbia. I mean, really topnotch.

1 So the beauty here is that seven out of eight are going to fellowships, and they're going to 2 get trained in geriatrics and pediatrics. And so 4 they're coming back to us when they finish their fellowships. We have that commitment. And one 5 6 resident decided to actually start working, so he's an attending at Newark Beth Israel. But this is the future. This is when 8 9 you read about the shortage of psychiatrists. 10 have them, we train them, and we've been letting them 11 go. 12 So, this is again something that I'm 13 very focused on in terms of retention of our young --COUNTY EXECUTIVE TEDESCO: And she's 14 15 not passionate about it at all. FREEHOLDER SILNA ZUR: Not at all. 16 MS. VISCONI: Okay. 17 So am I 18 supposed -- was that the hook? Am I done? 19 COUNTY EXECUTIVE TEDESCO: No. 20 MS. VISCONI: Is that the gong? 21 Okay. So, again, we measure everything. This is our restraint and seclusion 22 23 scores in behavioral health, some things that are 24 very important to us. So you can see from '17 to the 25 first quarter, we reduced our physical restraints

1 rate at New Bridge, which, again, is a really good
2 thing, we want to keep that rate going down.

Look at that change in seclusion. Look at that change in seclusion. And that all goes to what you said, respect, quality, the way that we treat people.

I mean, again, some of the horror stories I had heard about our staff, you know, the former staff. So all of this is really impressive for me.

So this is a little bit of a busy slide, but, again, we watch our falls. Falls is a very important thing in any organization, so we watch it by service line. The key thing here is the slide on the right, which is 12A, 12A and C, G, those are our more difficult units. So you can see, 2018 is the blue bar, you can see that going down over the last few months compared to the same time last year. So our behavorial health falls are going down.

All this is about staff, reeducation, awareness, monitoring the things that are going on across-the-board.

Substance abuse, another key service line.

So, you know, you guys all know this,

we're safety net, barrier fee. Unique to New Bridge is we can provide the complete continuum of care in substance abuse. And, of course, our Integrity House collaboration makes this a very special program.

Many people ask me what is Integrity House doing with and for you?

So, I can tell you that Integrity
House, in addition to being our collaborating
partner, they do have dedicated staff working at New
Bridge Medical Center every day. And this helps to
transition our clients from the inpatient setting,
long-term rehab, into community after-care services.
So, Integrity House has been a good resource in
assuring those transitions.

Again, we measure everything, so this is where our patients and substance abuse are coming from: 50 percent from Bergen, Essex, and Passaic, 30 from central New Jersey, 20 from south Jersey on the inpatient side, and then on the outpatient side, this would stand to reason most of them are coming from Bergen County.

COUNTY EXECUTIVE TEDESCO: But it goes to the point where we've talked about this being a hospital that impacts the entire State of New Jersey. You could see how that's proved out.

MS. VISCONI: Yes.

COUNTY EXECUTIVE TEDESCO: Because if they weren't coming here, where would they be going; to places that don't want them, right? I mean, let's be honest about it.

MS. VISCONI: Or dying.

COUNTY EXECUTIVE TEDESCO: Or dying.

MS. VISCONI: So, community

partnerships, this is just some of the work we're doing with our community. Again, our commitment to work and understand our community needs. So teaming up to support teens is a program that we put together, multi series, where we educate about teen substance abuse.

Our adolescence substance abuse program conference. We went to a conference where Lisa

Centeno was a senior director, she actually presented on co-occurring disorders, worked with Bergen County, the opoid overdose recovery program. Our Star program, actually this is new, they're going to be on-site now at New Bridge Medical Center, so, again, true partnership there. And then of course our working with Operation Helping Hand, which you know all about, and, again, not to belabor it, but we have been at the forefront with the Prosecutor's Office

and now with the Attorney General's Office. We were part of the most recent Helping Hand 5, where it was a multi county operation, and that was just simply terrific. And we actually were able to bring about 25 of those clients to New Bridge Medical Center.

So, again, we're very proud of the work that we're doing in that regard.

So, this is some of the benchmarks that we're measuring now in our substance abuse division.

So we're looking at our AMA rate, which means people would leave the organization against medical advice.

So the benchmark is 20 percent. We want it to be less than 20 percent. So we're currently at a 15 percent AMA rate, and we have things in place to continue to lower that.

The re-admission rate, that's your revolving door. They leave and they come back. They leave and they come back. So we're looking to maintain below 20 percent. We're at a 14.5 percent.

And then the discharge disposition, which means that we want to assure, this is a really important measure, we want to assure that we're making those warm handoffs into the community for our clients when we discharge them. So we're looking to maintain 85 percent placement rate. We're at

It was

1 88 percent. So, again, there's some room for 2 improvement there. We teeter. 3,000 of our clients remained with New Bridge Medical Center for aftercare 4 treatment, which is really good, and then about 200 5 of those went to Integrity House as part of the partnership. 6 7 FREEHOLDER SILNA ZUR: When you say 8 went to Integrity House, you mean for their 9 long-term? 10 MS. VISCONI: For the residential. 11 And the ones that stayed at New Bridge either went into an outpatient program or they stayed 12 in our rehab unit. 13 14 FREEHOLDER SILNA ZUR: So it's 3,000 15 clients from what period to what period? 16 MS. VISCONI: That was last year -- you know from October to --17 18 FREEHOLDER SILNA ZUR: The 11-month 19 period? 20 MS. VISCONI: Yes. 21 So, I was asked to be a keynote speaker at this very prominent summit, New Brunswick 22 23 Theological Seminary, which was cosponsored by SAMHSA. This was really exciting. I was second to 24

last speaker. I sat through the whole thing.

- 1 an entire day. And it was an incredible conference, and to be able to speak on the work that we're doing 2 at New Bridge, and this was across the State of New 4 Jersey, people were there from all over the place, 5 and it was really very humbling to be part of that. So we're very excited to be able to be considered 6 experts in that. 8 And then we got, you know, a TV moment. 9 We were on Jersey Matters. Actually, it was right
 - We were on Jersey Matters. Actually, it was right after Operation Helping Hand. So we were called to be part of this, and Mike Paolello and I went to be part of this. I'm not crazy about TV personally, but I have to get more comfortable with this.
 - But, anyway, it was great to be at least out there, and it was a decent interview. It was funny, because Larry Mendte says to me, "How do you know it's working?"
 - Because they don't tell you what they're going to ask you, so I'm like in a panic, "What are they going to ask?"
 - "How do you know it's working? How do you measure success?"
- 23 And it kind of just came out, I said,
 24 "Larry, every life we save is a life we save.
- 25 | There's no other way to measure it."

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                   He said, "Oh, my God, I feel terrible
    for asking you that question."
2
                   I said, "No, but Mike tracks it."
3
                   Right, Mike?
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5
                   It just came out.
                   So, I always say that we're building
6
7
    the plane as we fly it, right, in many ways.
8
                   This is one of my favorite projects,
9
    although it really wasn't, I never thought I'd get
10
    excited with records retention either.
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                   So I inherited the place, and there
    were boxes and piles of records and paper everywhere.
12
13
    I mean, it was unbelievable to me.
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                   So, obviously, that wasn't acceptable;
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    not HIPAA compliant. It's not safe. It's not
    appropriate. Everything is wrong with it.
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17
                   So, we embarked on a records retention
18
    project. So this was a true team effort.
19
                   Barbara Pizscik, our Chief Compliance
20
    Officer, was the project lead for New Bridge; and
21
    Maria Lisa Bazela was the project lead for the County
    of Bergen.
22
23
                   This actually started about four months
24
    ago, when Mike Forman calls me one day and says, "You
25
    guys have storage everywhere. You have files
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everywhere. Can you do an inventory of where your files are?"

That in and of itself was a task, but we did. We wrote everything down. We tracked it all. We had spread sheets of where stuff was.

Long story short, again working with the county, we identified thousands and thousands of records that could be destroyed. We destroyed 1,900, securely shredded, securely destroyed 1,900 boxes of records dating back as far as 1980. And so a picture's worth a thousand words, this is just literally one snapshot and this was the more organized rooms. These are the ones that were actually in boxes, not in piles.

Everywhere -- we would open up like a janitor's closet and there would be like paper. So it was a herculean task, but we did, this is part one, Barbara Pizscik keeps telling me, "We're only just beginning, Debbie, don't get excited."

But there's our shredders we had.

There's Maria Lisa and the gentleman on the right is

Christian Bower, our manager of compliance who's the

vet, and then Oscar is on the left. So we had

actually shredded 1,900 boxes of files.

FREEHOLDER SILNA ZUR: So where's the

after picture?

MS. VISCONI: It's coming. You have to invite me back again.

So, HIPAA again, this falls into the, you know, building the plane as you're flying it.

So, again, not a huge program prior to October 1st, putting it mildly, but HIPAA is all about confidentiality and assuring that we never breach that.

So, through the work of our compliance officer, Barbara Pizscik, we have a whole HIPAA compliance education program. She does a terrific job. She does them all live, so she goes round-the-clock. And actually over 650 staff have attended the classes, so we're actually a quarter of the way in only a couple of months. And people are actually coming and learning, asking questions. You know, it's complicated, privacy and who can see records and how you can talk to people and you can't pick up the phone and leave messages.

So, anyway, again, it's dry stuff but it's real stuff, and it's part of the work that our team has done to build this plane.

So now we're getting down to the fun stuff.

So, engagement, so this is what we're all about: Employees, providers, community.

one of the things that I implemented early on, something called "Dine with Debbie." It's a hokey name, but it stuck. And what that is, I just opened the door. We set them up. I'm doing the monthly now. And anybody can come on their own time and chitchat. I usually get a full room of staff, all levels can come, and, you know, ground rules are you can't come here to complain about your colleague, you can't come here to talk about your union grievances. This is about how do we make New Bridge a better place.

We've gotten such incredible feedback from the employees on the ground, but we track everything that comes up at Dine with Debbie, and we implement things to respond to some of their needs.

I mean, that's how we knew the linen was a disaster and lots of other things. I mean, this is the group that tells us what's going on on the ground.

So we continue Dine with Debbie. We had one this morning. And we get good feedback too. We got today, somebody told us that the housekeepers are doing a great job at night stripping the floors, because they are quiet and respectful.

This was our service awards that we did. Over 600 people attended, totaling over 5,000 years of service. This is Wili "Stretch" Harris.

You know, we're doing things again that were never done before at the organization to engage our staff. So we did for the first time ever "Bring your Child to Work Day," which was a lot of fun, and we're going to continue to do that in a different way next year. This was our first time doing it. The kids loved it. I wrote each child a handwritten thank you note with a picture to their homes at the end of it, so they were all excited when they got mail.

We celebrated our doctors. Again,

Doctors Day was, you know, kind of understated at the organization, so we went all out. We had a wonderful breakfast with custom made omelets. We actually gave them new lab coats. There they are with their names engraved on them with the New Bridge logo. We had a nice party, festivities, and it was really a lot of fun, and, again, engaging our providers.

We celebrated Nurses Week to the extent that we never had before. Nurses had said to me,

"You know, we never got anything really special for

1 Nurses Week."

So we had a week of activities. Jim was there to help us. You gave us a proclamation. We had nurse excellence winners. It was really a terrific week. The nurses were thrilled and they just couldn't get enough of it.

Again, this was stuff that is from the heart, and they know it, and are very excited.

We also had Hospital Week, where we had food trucks celebrating it. Lots and lots of happy people. We love to eat.

This was really cool. Early on in my time there, I got a letter written by a young man named Chris Holland, who wrote this moving letter about how we saved his life and he wanted to give back to us. I immediately got the letter, and I launched my staff, "Does anybody know him? Is he really a patient here? Talk to him."

Turns out, he's a celebrity chef on Chopped. He won Chopped. It was so cool!

So he came, and we did a whole lecture. You know, we tied it to education, we weren't just going to feed them. So we had our residents do a talk on psychology of food. Chris Holland did a food demonstration. We were on TV. I don't know how many

```
1
    people saw that piece. That was a really, really
    terrific piece, interviewing Chris Holland. It was
2
    really a great moment in time. Chris is going to
4
    come back to our Taste of Bergen.
                   FREEHOLDER SILNA ZUR:
                                          When is the
5
    Taste of Bergen?
6
7
                   MS. VISCONI: When?
8
                   November something, 12, 9.
9
                   FREEHOLDER SILNA ZUR: Okay.
10
                   MS. VISCONI: So, anyway, it's a great
11
    story, the Chris Holland story. Our foundation is
              Here they're giving me a giant check for
12
    engaged.
13
    $50,000.
              And with that check, we bought a new van
14
    for our long-term care residents to go on trips.
15
                   Our vans, you know, they would get to
16
    like Route 17 and they would die, and we would have
17
    to bring them back.
18
                   Now we have a new van for all long-term
    care residents, and now it's nicely wrapped in our
19
20
    New Bridge logo.
21
                   This is another thing we did with our
```

community is our EMS, the people who bring our

patients to us. So what we did, it was EMS Week. We

did a whole little celebration for them. We had

dinner. And then we made a little lounge for them in

the emergency room, so when they come, it's a small space, but it's their space. When they come, they can come and have a cup of coffee, a glass of water, they can sit with their feet up, whatever they like to do. We dedicated that room to them during EMS Week back in May, and they were excited about that.

I mentioned this before, this is one of our educational series that we're doing for our community teeming up to support teens. We're doing multiple series of this. This just happened to be the flyer for the one in April, but this is something that's really about educating our communities.

And for the first time, we celebrated Pride Day at New Bridge, and so we raised our flag.

It was a terrific event. We are going to be working towards being a more inclusive environment for our LGBTQ population. We are getting new bathroom signs that are inclusive, and we're doing education for our staff, so we're excited about that.

We had visitors. They're coming internationally to visit us. We had visitors from Taiwan. Forensic nurses from Taiwan wanted to see a hospital, so we hosted them for a little bit.

We did something for the Senior Services of the county. They came over to talk

about -- we explained to them how to access services

at New Bridge Medical Center. We had about 37 people

come and listen to our talk.

This you may have seen, our

Stigma-Free. Again, we're going international here,
bridging the pond. We had Dan Farnsworth come to

spend the day with us. He's a Sir Winston Churchill

Fellow from the United Kingdom. And we had some

roundtables about Stigma-Free, and there's some

pictures of our trustees that were part of the event.

Maryann Uzzi and Tracy were there. It was a cool

event. It was really nice.

And this was yesterday. You know, we had our remembrance service, which was really nice and moving.

And this is the other thing, what our doctors are doing is Lunch and Learns for our community. So, we're getting our providers out teaching our community, so the community now will be connected.

ACTING COUNTY ADMINISTRATOR NEALS: I'm just saying we want to make sure we leave some time, the Freeholders probably have some questions.

MS. VISCONI: Okay. I'll hurry.

So that's that, and then this one is

```
1
    something that's coming soon to New Bridge
    September 26th, Teens Speak Out, because September is
2
    Suicide Prevention Month. So we have our resident,
4
    our Dr. Hall will be speaking.
5
                   And then this is something else we will
    be doing for the community, our Narcan training
6
    education program.
8
                   And this is my plug for social media,
9
    make sure you all follow us. We don't have nearly
10
    enough followers, but we're getting some good hits,
11
    some of our videos are being viewed, some of our
    events are being looked at, so we are getting some
12
13
    views.
14
                   And just, again, if you're not
15
    following us on social media, look at all the great
16
    stuff you're missing.
                   So that's that. I'm done. How is
17
    that?
18
19
                   FREEHOLDER VOSS: Fantastic.
20
                   CHAIRMAN SULLIVAN: Freeholder Ganz.
21
                   FREEHOLDER GANZ: Thank you.
22
                   What efforts are you making to televise
23
    the presentations that you're making?
24
                   MS. VISCONI: The community ones?
```

mean like the Lunch and Learns?

```
1
                   FREEHOLDER GANZ: Yes.
2
                   MS. VISCONI: We're not going on
    television with them.
3
                   FREEHOLDER GANZ: Why not?
4
5
                   MS. VISCONI: I don't know.
                   ACTING COUNTY ADMINISTRATOR NEALS: On
6
7
    some of our social media sites, are they --
8
                   MS. VISCONI: We're not YouTubing the
9
    Lunch and Learns, but we are YouTubing some of other
10
    things whenever we are on TV, the interview.
11
                   FREEHOLDER GANZ: Why aren't you doing
12
    the Lunch and Learns?
                   MS. VISCONI: You know, we just started
13
14
    Lunch and Learns. We can absolutely do that.
15
                   FREEHOLDER GANZ: I think that's a
16
    great idea.
17
                   MS. VISCONI: I think so too.
18
                   FREEHOLDER GANZ: Have you done it yet?
19
                   MS. VISCONI: No, we haven't but we
20
    will. I think that's a great idea. We just started
21
    doing them but --
22
                   FREEHOLDER GANZ: How about now?
23
                   MS. VISCONI: You want me on YouTube?
24
                   FREEHOLDER GANZ: Yes.
25
                   CHAIRMAN SULLIVAN: I think really
```

```
1
    there's no question here is, this is unbelievable
    work you're doing.
2
3
                   MS. VISCONI: Was this helpful?
4
                   FREEHOLDER GANZ: Yes, this is very,
5
    very helpful.
                   FREEHOLDER VOSS: Fantastic.
6
7
                   CHAIRMAN SULLIVAN: Something we never
    had here before at the Freeholder Board.
8
9
                   MS. VISCONI: This is just a snapshot.
10
                   CHAIRMAN SULLIVAN: I think really the
11
    point David is making, what are we doing to let
    people know what we're doing? That's something we
12
13
    need to do.
14
                   Listen, you're 11 months in. Rome
15
    wasn't built in a day. We get it. The programs are
16
    great.
                   FREEHOLDER GANZ: She has one more
17
18
    month.
19
                   COUNTY EXECUTIVE TEDESCO: So, I would
20
    say about a month ago we forwarded all of you the TV
21
    commercial. I hope that you all saw it. I sent it
    to Lara and she sent it out to you. So hopefully
22
23
    you've all seen that, but that's the first start
    time, Mr. Chairman --
24
25
```

CHAIRMAN SULLIVAN: That's fine.

```
1
                   COUNTY EXECUTIVE TEDESCO: -- in
    regards to us taking our message or the message of
2
    New Bridge now to the public in a more aggressive
4
         And, you know, listen, I don't want to mislead
5
    you, there are bumps in the road here that we still
    have to overcome, there's still some issues of
6
    resolving some disputes with payers, you know, that
8
    are not resolved yet that would give us a much more
9
    comforting level from an operating standpoint on the
10
    financial side, and we're working and hopefully we'll
11
    be able to resolve those issues, and there's other
    challenges, but I felt it was important that you see
12
13
    at least where we are today.
14
                   CHAIRMAN SULLIVAN:
                                       That's wonderful.
15
                   COUNTY EXECUTIVE TEDESCO: So that if
    people do say something to you about New Bridge,
16
17
    there's a few things that you can glean from this
    today to be able to say, "Well, let me tell you" --
18
19
                   FREEHOLDER VOSS:
                                     Yes.
                   COUNTY EXECUTIVE TEDESCO: -- "what's
20
21
    going on."
                   And two things before I end.
22
                                                 I watched
23
    Ed's face during this, and he's somebody that I have
24
    tremendous respect for, like Julien, but seeing the
25
    reaction on his face to some of the things, because
```

- he sat here through the bad times.

 MR. FLORIO: That's exactly what I was
- 3 thinking about. If you only had a little energy --
- 4 MS. VISCONI: I know.
- 5 MR. FLORIO: -- but for like 15,
- 6 18 years, all we heard were bad things coming out of that hospital.
- FREEHOLDER VOSS: Right.
- 9 MR. FLORIO: It's so refreshing to hear
- 10 | about the turnaround and that there's good things
- 11 | happening, and it's really just getting started.
- 12 It's pretty exciting.
- 13 | MS. VISCONI: So, I will only say that
- 14 | it's a hospital, and bad things happen in all
- 15 | hospitals, but the good things are outnumbering the
- 16 | bad things.
- 17 FREEHOLDER VOSS: The staff is
- 18 | ecstatically happy with you. I talk to a lot of
- 19 people, and there has been such a turnaround, it's
- 20 | like night and day. It really is. I can't thank you
- 21 | enough.
- 22 FREEHOLDER GANZ: The numbers make a
- 23 | huge amount of difference. When you see numbers
- 24 going down to approach zero, this is unbelievable.
- 25 And, at the risk of repeating it, I think you have a

- story to tell that you need to be telling using social media and using real live television.
- 3 COUNTY EXECUTIVE TEDESCO: Let me just 4 end with this.
- In December, I had a condition that
 developed, and I needed to have medical care, and I
 called Deb. Actually, I was at the hospital. I
 shouldn't say that. And I was in tremendous
 discomfort and pain. And Deb said you need to see a
 doctor -- no, I was actually here.
- MS. VISCONI: Yes, you were not at the hospital.

- COUNTY EXECUTIVE TEDESCO: I was here. We were talking about the hospital.
 - And I called her, and they said you need to see a doctor and you need to do it quickly.

 And I chose to go to New Bridge, and I got taken care of. And then I went to the clinic, and I saw how the clinic would take care of a patient if they walked in off the street like I did.
 - And then fast forward to two months ago, prior to me just leaving for vacation, and I had some severe, severe back pain to the point where I was working and it became debilitating and I needed to get to the emergency room. And I drove myself to

New Bridge, parked outside, couldn't get out of the truck. The staff came out and got me, put me on a gurney, brought me into the New Bridge emergency room, was seen by professional nurses, was seen by a group of doctors, and the recommendation was that I needed some immediate relief and that could only be done by going into the OR.

And I had my daughter with me and Connie. And I met with the doctors. And about an hour later, I was wheeled into the operating room at New Bridge to have Dr. Patel inject three needles into my back, into my spine, under laser guidance, and was able to walk out of there early that next morning.

CHAIRMAN SULLIVAN: With technology that's there that wasn't there before.

COUNTY EXECUTIVE TEDESCO: And doctors.

MS. VISCONI: And doctors who can do

the work.

Say that is because for me it was about, if I believe in the place, then I should show that. And so I did. And so I can tell people, no, you're wrong, I was there, I got the treatment. It was outstanding. It cured me.

```
1
                   And so, you know, that's the story of
    New Bridge Medical Center today, that somebody can
2
    walk in off the street, be seen by a doctor, whether
4
    it's in a clinic or in an emergency room, and be
5
    taken care of just like at any other hospital here in
    Bergen County. And that's really what we all want.
6
7
                   FREEHOLDER VOSS: What a difference!
                   COUNTY EXECUTIVE TEDESCO: So I'm here
8
9
    to tell you the story that it can happen. It did
10
    happen.
11
                   CHAIRMAN SULLIVAN: You practice what
12
    you preach.
13
                   Well, thank you for your wonderful
14
    presentation. I can say on behalf of the Board what
15
    a great decision that the County Executive brought
16
    here. Thank you for everything you do. We couldn't
17
    be happier.
                 Tracy was on the board to help choose.
18
    Everybody had their input, and I believe we hit a
19
    home run. And keep up the great work. And the only
20
    thing we say is let everyone know. We have to scream
21
    it from the rooftops.
22
                   FREEHOLDER AMOROSO: So where does this
23
    commercial play?
24
                   MS. VISCONI: It's on cable.
25
                   Have you seen it live yet?
```

```
1
                   COUNTY EXECUTIVE TEDESCO: Yes.
2
                   FREEHOLDER AMOROSO: Where, on News 12?
                   COUNTY EXECUTIVE TEDESCO: It's not
3
4
    just on News 12, it's on a couple of the cable
    channels.
5
6
                   FREEHOLDER AMOROSO: Well, they sell
7
    you a mix of channels.
8
                   MS. VISCONI:
                                It's a package.
                                                   That was
9
    one. We have more coming.
                                 That was the first with
10
    the Rutgers doctors. Those were all doctors with a
11
    real staff. I thought they did a really nice job in
    a short time span.
12
13
                   CHAIRMAN SULLIVAN: I don't want to
14
    leave out, Julien and Ed were very instrumental.
15
                   Keep up the great work. We love it.
16
    Thank you for the updates.
                   MS. VISCONI: Thank you for your
17
18
    support. It means a lot.
19
                   CHAIRMAN SULLIVAN: I didn't think a
20
    few years ago we would be getting an update from that
21
    area.
22
                   FREEHOLDER SILNA ZUR:
                                          Yes, we get
23
    updates from our legal team.
                   MR. FLORIO: On lawsuits.
24
25
```

ACTING COUNTY ADMINISTRATOR NEALS: Well,

1 that's your investment at work. COUNTY EXECUTIVE TEDESCO: We're 2 tracking those for the first time, that Joe Luppino 4 and Steve Wielkotz now actually are getting the 5 reports on the receivables and the expenditures. And as I said before, David, there are some challenges, 6 I'm not going to mislead any of you. We do have some challenges on the payer side. So some of our 9 vendors, you know, we've had to talk to them, we've 10 had to look at asking them --11 CHAIRMAN SULLIVAN: Jim, we probably want to talk about that in Closed Session. 12 COUNTY EXECUTIVE TEDESCO: Yes. 13 ACTING COUNTY ADMINISTRATOR NEALS: Yes. 14 COUNTY EXECUTIVE TEDESCO: I don't want 15 to go, certainly, any deeper than that, Tom, but, you 16 know, there's definitively some challenges that we 17 18 continue to face. And if we can get some resolution to some of this soon, those receivables and other 19 20 things that we face on a financial side, certainly 21 would be a much better picture. CHAIRMAN SULLIVAN: Thank you for your

24 MS. VISCONI: Thank you for having me.

25 CHAIRMAN SULLIVAN: Thank you.

22

23

time.

```
1
    appreciate it.
2
                   Okay. I need a motion to go into
    Closed Session, please.
                   MR. FLORIO: We have no Closed Session.
4
5
                   CHAIRMAN SULLIVAN: We have no Closed
    Session?
6
7
                   MR. FLORIO: No, nothing for Closed.
                   CHAIRMAN SULLIVAN: Can we adjourn?
8
9
                   MR. FLORIO: That would be next.
10
                   FREEHOLDER SILNA ZUR: Motion to
    adjourn.
11
                   FREEHOLDER AMOROSO: Second.
12
13
                   CHAIRMAN SULLIVAN: All in favor?
                   (All present Freeholders respond in the
14
15
    affirmative.)
16
                   CHAIRMAN SULLIVAN: Opposed?
17
                   (No response.)
                   CHAIRMAN SULLIVAN: Carried.
18
19
                   The motion to adjourn was completed at
20
    6:30.
21
                   (Whereupon, the Work Session is
22
    adjourned at 6:30 p.m.)
2.3
24
25
```

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7/11/19