

**Minutes**  
**SUNY Downstate Medical Center**  
**Council Meeting**  
**President's Board Room**  
**January 16, 2014**

**Council Members Present**

Dr. Monica Sweeney, Chair  
Dr. Randall Bloomfield (by phone)  
Jacob Carl  
Michael Connors, Esq.  
Robert Hermann  
Dr. Constance Shames  
Rev. Elgin Watkins (by phone)  
Dr. Mirian Zavala

**Council Members Absent**

Dr. Phillip Abramowitz

**Downstate Administration in Attendance**

President Dr. John F. Williams  
Astra Bain-Dowell  
Dr. JoAnn Bradley  
Alan Dzija  
Dorothy Fyfe  
Michael Harrell  
William Holman  
Dr. Jeffrey Putman  
Thomas Reitinger  
Dr. Moro Salifu  
Dr. Ian Taylor  
Ellen Watson

Minutes from the last meeting were accepted and approved.

***Report from Council Chair:***

Council Chair Dr. Monica Sweeney presided over the meeting, which began with a moment of silence in memory of former Council Chair MaryAnn Yancey. Dr. Sweeney acknowledged several guests from the community who were attending the meeting. The minutes from the September meeting were approved without amendment. Two new Council members, Dr. Marian Zavala and Michael Connors, Esq., were introduced.

Dr. Sweeney provided a brief overview of the ACT conference, held in Saratoga Springs, which highlighted several key facts about SUNY: first that 80 percent of the population of New York

State lives within a half hour of a SUNY Campus, underscoring the importance of the system to the State. Second, SUNY is an economic driver throughout the state – both in terms of jobs directly created, and in preparing a trained workforce that matches New York State’s employment, entrepreneurial, and business needs. She noted that Downstate’s biotechnology projects would be part of a new program called Start Up New York, which provides tax breaks to companies creating jobs in designated zones adjacent to SUNY campuses.

Dr. Sweeney advised that a revised Orientation manual had been prepared for new members, and that additional copies were available for any Council member who might wish to have one.

### **President’s Report**

President Williams introduced two new staff members, William Holman, Interim Chief Executive Officer of University Hospital, and Thomas Reitingger, the new Chief Restructuring Officer. Dr. Williams announced that despite a projected loss for 2013, finalized data for the first quarter of the year showed an \$800,000 positive margin for the East Flatbush and Bay Ridge campuses – demonstrating positive yield on the work that has been done to bring campus expenses into alignment with income. Over the coming year, Mr. Holman and Mr. Reitingger will continue to refine campus improvements as part of Phase 2 of the Sustainability Plan.

Dr. Williams also noted that Downstate’s academic mission remains strong, and that all of the colleges have yielded strong entering classes, despite the press surrounding Long Island College Hospital. Downstate has gotten positive feedback from its accrediting bodies, and preparations have begun for the next Site Visit by the Middle States Commission on Higher Education (abbreviated as Middle States), which will occur in 2016. That effort is being led by Dr. JoAnn Bradley, Downstate’s senior vice president for philanthropy and chief academic officer.

Dr. Williams concluded his report by announcing a \$2 million dollar donation from Dr. Garry Sklar.

### **Hospital Report**

Thomas Reitingger provided a summary of accomplishments under Phase 1 of the Restructuring Plan. The initial goal of Phase 1 was to develop a break-even plan for the clinical enterprise within a 24-month period, identified as spanning from December 1, 2012 through November 30, 2014. Plan Development, which called for improvements of \$134 million annually, was also part of Phase 1. The plan included five areas of concentration: revenue cycle; labor productivity; supply chain improvements; care management and indirect expenses; and volume growth. At the request of the New York State Department of Health and the NYS Department of Budget, a sustainability plan was developed, and integral to the sustainability plan is the Restructuring Action Plan.

Phase 2 focuses on implementation of the plan. There are several goals intended for simultaneous achievement: implement the sustainability plan using the specifications described in the restructuring plan; execute a work plan; implement a draft restructuring plan; and assist SUNY DMC employees with relearning processes, to facilitate productively sustaining improvements once achieved.

Mr. Reitinger shared slides demonstrating where the campus stood to date. There are 21 separate initiatives that are included in the revenue cycle improvement process. Planned improvements for the period July 13 through November 2013 were projected out at \$14.4 million; the period ended slightly under that target goal at \$14.2 million. Labor productivity, which had been projected for \$3.7 million, has been exceeded, with a current total amount of \$7.7 million. Mr. Reitinger then turned the discussion over to Mr. Holman, who continued to elaborate on results to date of the Sustainability Plan.

Mr. Holman noted that the Sustainability Plan outlines a monthly revenue goal of \$26.4 million. The workforce reduction goal, excluding physicians and residents, has brought the workforce down from over 3,000 to under 2,500 employees. Mr. Holman noted that, like hospitals across the country, Downstate was experiencing a drop in inpatient discharges, under the paradigm shift called for under the Accountable Care Act. Downstate's length of stay has decreased from 5.86 days to 5.36 days. Decreasing throughput can translate to positive additions to the bottom line. The LOS decrease achieved by Downstate could translate, roughly, to a \$1.1 million positive addition. The Emergency Department remains extremely busy. While this is positive, it does entail challenges: we need to increase ER volume, but we also want to ensure that patients needing only primary care are seen in an appropriate environment, not in the ER. And we need to ensure the right payer mix. Inpatient surgery has had a positive trend – 1,050 cases, compared to a projection of about 900. Mr. Holman noted that there was a great opportunity to drive more outpatient volume in ambulatory surgery, both at Bay Ridge and at the East Flatbush campus. Mr. Holman concluded his presentation by noting that “this isn't a horse race – it's a journey,” but that Downstate is demonstrating positive progress.

### **Special Report: Dr. JoAnn Bradley – Middle States Accreditation**

Dr. Bradley briefed the Council on the Middle States Commission on Higher Education, its accrediting processes, and the comprehensive site visit that the campus will undergo in 2016. Middle States accreditation has campus-wide importance: in order for students in all of our colleges to be eligible for federal financial aid, the campus must be accredited by Middle States. Even if a college is accredited by its own specialty accrediting body, without the overarching accreditation conferred by Middle States, students would not be eligible for aid.

Middle States uses 14 Standards of Excellence to assess college quality. Downstate will establish six committees to assess how Downstate performs in each of these standards, and then generate a final report to submit to Middle States.

On April 9, 2014, a representative from Middle States will be visiting the campus and will meet with members of the Council as part of that visit.

### **Finance Report**

Mr. Alan Dzija, chief financial officer, gave a brief report, noting that his comments would echo some of the material discussed earlier in the meeting. He emphasized that the finances associated with routine academic and central support services are currently in line with Downstate's budget. Downstate receives approximately \$92 million from New York State through the SUNY Central Administration budget process, which is contingent on Downstate collecting fees and tuition payments of roughly \$35 million. He noted that the Middle States survey team will likely want to

understand the financial implications of the full enterprise (e.g., hospital and clinical) on the academic mission. He said that the Finance Department is well prepared to discuss the data and that the institution did well with LCME accreditation for the College of Medicine.

Mr. Dzija noted that Downstate is in the initial stages of a multiple-year implementation of an extensive investment in our information systems. The investment will likely exceed \$30 million, and includes continued implementation of the electronic medical records system, which is mandated by the federal government. The mandate includes transition to a new diagnostic clinical classification system called ICD-10, which must be implemented by October 1, 2014, that is intended to bring the United States into alignment with global coding describing hospital activities.

Dr. Sweeney asked Mr. Dzija if Downstate expected to see an influx of patients as a result of expanded insurance available under the Accountable Care Act. Mr. Dzija responded that we are, and that Downstate is boosting its ambulatory capacity as a result.

### **Academic Report**

Dr. Ian Taylor, Senior Vice President for Biomedical Education and Research and Dean of the College of Medicine, reported that the ACGME, the accrediting umbrella for all of Downstate's residency programs, sent a letter this month advising that Downstate continues to enjoy full institutional accreditation. The LCME, which accredits the College of Medicine, has asked that a report be submitted by December 1, 2013 on the current financial environment and its impact on the educational program. The Board also required a follow-up on the new curriculum, to ensure the new Integrated Pathways Curriculum addresses all curricular issues. Dr. Taylor anticipated a limited, focused site visit as follow-up approximately six months after the Board reviews our follow-up report. Dr. Taylor noted that the new academic building, now under construction on Clarkson Avenue, was well regarded by the LCME during its site visit earlier in the year. The new building will offer new teaching facilities, a standardized patient testing center, a simulation center, and two floors of laboratories built for multi-investigative research, in addition to housing the School of Public Health.

Dr. Taylor also reported on the research enterprise. From 2009 to 2012 (latest data available), Downstate demonstrated a 690 percent greater increase in NIH funding over the past 10 years compared to all other state schools, a distinct testimony to the outstanding efforts of Downstate's faculty. Downstate is above the mean in grant funding by investigator and the percentage of salary covered by grant funding. Currently, Downstate's direct funding for research is holding steady, despite decreases in the national NIH budget. Indirect funding has slightly decreased somewhat.

In the College of Medicine, the incoming student class continues to reflect Downstate's diversity. The class speaks 54 different languages, and over 50 percent of students are either first or second generation Americans. Along with diversity, factors contributing to Downstate's popularity include its location, cost, and the desire to practice in New York State following graduation. There has been a significant increase in entering student MCAT scores, and a 73 percent increase in applications over the last 10 years. Downstate ranks fourth out of 141 schools in terms of graduates with active licenses to practice medicine – meaning that we are the fourth

largest producer of physicians in the nation. We also rank in the 96<sup>th</sup> percentile in terms of African American graduates, and in the 93<sup>rd</sup> percentile in terms of underrepresented minority faculty. One in three physicians in Brooklyn graduated from Downstate; and we are in the 93<sup>rd</sup> percentile in terms of graduates entering academics and taking a faculty position.

### **Special Report: Dr. Jeffrey Putman – The Division of Student Affairs**

Dr. Jeffrey Putman was appointed vice president for student affairs and dean of students in February, although he had previously served the division in the capacity of assistant dean. The Division of Student Affairs at Downstate is one of the critical components of services provided to students. Dr. Putman's division provides much of the direct access for students, as well as assistance on a range of issues. The Division, along with faculty, is also involved in engaging students in active learning and in adhering to values and ethical standards. The principles that guide his office also include: setting and communicating high expectations for student learning, using systematic inquiry to improve student and institutional performance, using resources effectively to achieve institutional missions and goals, forging educational partnerships that advance student learning, and building supportive and inclusive communities.

The Division comprises four main offices. It supports the student Admissions functions for all five Downstate colleges; Financial Aid; Registrar; and the Office of Student Affairs itself. There are additional student service offices that are not coordinated through his division, although they work in concert with each other: the Division of Student Life, the Student Center, the Office of the Bursar; the Student and Employee Health and Counseling Service; and the Office of Academic Development. The College of Medicine maintains the Office of Minority Affairs and the newly created Office of Career Advisement.

Dr. Putman briefly reviewed the responsibilities of each office, as well as some recent innovations. The Division's Office of Student Admissions provides support for the admissions processes of all five colleges, but does not actually make admissions decisions – those are made by faculty committees in each of the colleges. Financial Aid assists students in applying for financial aid; but a newer goal has become helping students with debt management, from finding jobs that will help with loan repayment to dealing with credit cards and general financial literacy. The Division has recently implemented electronic verification of full-time student status and online degree verification. His office functions as the international student office and helps students with F1 student-visa issues and it ensures compliance with the Americans with Disabilities Act.

His division directly connects to SUNY Council in that one of the primary responsibilities of Council is to approve changes to the Student Code of Conduct. Mr. Putman handed out copies of the *Student Handbook*, which contains the current code of conduct.

Dr. Sweeney asked Dr. Putnam if his office issued reports on student issues. He responded that, yes, in conjunction with University Police, his division annually publishes the federally-mandated Clery Report, which tracks incidents at colleges across the nation. The division also coordinates the Personal Safety Committee with University Police, and sponsors an independent ombudsperson who confidentially reviews any complaints that may arise involving the clinical side of the house.

In general, Dr. Putman said, Downstate compares well in student satisfaction on the national graduation survey. Downstate students score higher in satisfaction in the way that complaints are handled and in how the institution responds to complaints and takes appropriate action.

**Special Report: Dr. Moro Salifu – Chair, Department of Medicine.**

Dr. Moro Salifu, chair of the renal division, was confirmed as Chairman of Medicine in July 2013. Since then, he has been building the department to meet the institution's strategic goals.

Dr. Salifu provided a brief overview of the Department of Medicine, which he said is the fourth or fifth largest in the country, with 11 divisions and 177 residents and 130 fellows in subspecialty training. In terms of training capabilities, the Cardiology Division is the largest in New York City, and possibly in New York State. The GI program, with 27 fellows, is the largest in the country. There is no hospital in Brooklyn whose Department of Medicine compares to Downstate in training or subspecialty range.

In terms of clinical care, Dr. Salifu said that a different model of care is emerging, and that we cannot continue to do business as it has been done for the past 10 to 15 years. Downstate has always excelled as a tertiary care facility. Now, Downstate needs to respond to the primary care market. Because of this, Dr. Salifu has given priority to building the Department's primary care capacity – which also corresponds to Downstate's overall strategic goals. A short term goal is to grow the number of annual primary care visits from 30,000 a year to 60,000 a year, with a longer term goal of 100,000 visits.

He also discussed a new vision for Faculty Practice, in contrast to Downstate's traditional division of private practice versus clinic practice. Dr. Salifu advised that that delineation needs to change. A strong Faculty Practice, dedicated to the goals of Downstate, he said, will correspond to a strong hospital. Patients today want to have a relationship with a physician, rather than being seen in a clinic without continuity of physician care. In clinics, patients are taken care of by the system, not by the doctors. Because of this, he said, "we have to change the model of care. In a true "Faculty Practice," a physician is responsible for following specific patients, and the patients have a relationship with their physician."

Dr. Salifu also urged a rebranding of Downstate that will actively recruit and respond to the needs of patients who live in the East Flatbush community. "We want the neighborhood to know that if they have a medical problem, that Downstate has the expertise to treat it. That Downstate offers a pleasant experience." One specific area that Dr. Salifu recommends for branding is to develop the concept of "Diabesity" – a blending of diabetes and obesity care, since the two health issues are so closely linked.

**Special Report: Dr. Constance Shames – COM Alumni Association Scholarships**

Dr. Constance Shames, who represents the COM Alumni Association on the Council in an *ex officio* capacity, reported on the Association's support for students through scholarships. She explained that providing support to students is one of the major goals of the Alumni Association.

In academic year 2012 to 2013, the Association provided \$185,000 in scholarships to 50 students. While the funding per student is relatively small, each grant helps a great deal, since many of Downstate's students come from families with minimal income. "We try to help as much as we possibly can," said Dr. Shames. The Alumni Association also funds an annual research scholarship of \$25,000; funds 20 students who participate in Dr. Imperato's Health Care in Developing Countries; the Brooklyn Free Clinic; the White Coat Ceremony; a mentoring program run through the College of Medicine Dean's Office; as well as a variety of other projects. Students can also approach the Alumni Association for assistance with funding special programs, and to the extent it can, the Association will help fund the program.

Dr. Sweeney reminded members that the next Council meeting is scheduled for March 12, 2014, and that they should check the Council website for updates. There being no further business, the meeting concluded.