

Minutes
SUNY Downstate Medical Center
Council Meeting
President's Board Room
November 10, 2017

Council Members Present

Rev. Kirkpatrick Cohall, Chair
Michael Connors, Esq.
Andrew Hasenzahl
Marlene Dietrich Heath
Dr. Constance Shames
Dr. Mirian Zavala

Downstate Administration Present

President Wayne J. Riley
Dr. Keydron Guinn
Dr. Jeffrey Putman
Thomas Gray
Dr. Carla Boutin-Foster
Dr. Anika Daniels-Ossaze
Dorothy Fyfe
Ellen Watson
Sheemaka Bowman
Johnson Ho

Council Chairman Reverend Dr. Kirkpatrick Cohall called the meeting to order, and the minutes from the July 13, 2017, meeting were approved by consensus.

Reverend Cohall briefed members on the recent ACT Conference in Albany, which he and Andrew Hasenzahl attended. The conference agenda included addresses by SUNY Board of Trustees Chairman H. Carl McCall and SUNY Chancellor Kristina M. Johnson, as well as presentations by senior members of the Chancellor's staff. A major topic of discussion involved vacancies at Councils across SUNY's 64 campuses. Reverend Cohall asked that the minutes of today's meeting include a formal declaration that Downstate's Council will continue to hold quarterly meetings and carry out its responsibilities despite lacking a full quorum.

REPORT FROM THE PRESIDENT

President Riley briefed the Council on several issues of concern. On the federal level, a critical issue is the uncertainty regarding Disproportionate Share Hospital (DSH) payments, a feature of the Affordable Care Act. Currently, federal law mandates that state Medicaid programs provide additional funding to hospitals treating high numbers of uninsured and Medicaid patients. President Riley noted that if the current administration in Washington were to cancel DSH

payments, it could result in a \$70 million loss to Downstate. President Riley has been working closely with elected officials and the American Hospital Association to advocate for continuation of these payments.

On campus, a key focus is enhancing the student experience through improving the teaching and learning environment. From a facilities perspective, this includes renovating major teaching auditoria and improving lighting, sound systems, and audiovisual equipment.

President Riley is also building out his leadership team, with the recent hire of Heidi J. Aronin as Senior Vice President and Chief Administrative Officer, and new appointments in the pipeline for Communications and Marketing, Government Relations, Facilities Management and Development, Library/Academic Technology/Simulation, and Philanthropy.

Parking facilities continue to be a campus challenge. The garage on East 34th Street is significantly degraded and almost at the end of its useful life. While the ultimate goal is to build a new garage, temporary options include increasing parking capacity on land Downstate already owns and accessing excess parking capacity at Kings County Hospital Center. A consultant is advising on the vision for a new garage and add-ons it could encompass, such as a new student center or conference facility. Funding sources are being explored.

REPORT FROM THE CHIEF FINANCIAL OFFICER

Thomas Gray, Vice President for Finance and Chief Financial Officer, reported on Downstate's academic and hospital budgets. He anticipates that Downstate will end the year in good fiscal condition and he has begun to plan for next year's budget process.

In its academic budget, Downstate knows how many students are matriculating and can project tuition revenue for the coming year. For the 17/18 fiscal year, enrollment has increased in three of Downstate's five colleges and schools. It decreased in the College of Nursing, reflecting elimination of a program, but should rise again when the College launches new programs. The School of Public Health experienced a drop not in enrollment but in credit hours, reflecting the part-time status of many of the School's students.

Mr. Gray reported that results are in for University Hospital of Brooklyn's first quarter, and that they were positive. Revenue exceeded budget projections by approximately \$700,000, with expenses below budget by \$1 million. This means a \$1.7 million funding availability that can be applied to campus priorities. The overall hospital budget is about \$500 million, roughly \$20 million less than in prior years, in part due to flat revenue growth. The hospital budget is complicated and constantly monitored for variances. It reflects factors such as length of stay, seasonal illnesses, complexity of illness, and payor reimbursements. Mr. Gray described Downstate's cash position as good; however, he said, it is still necessary to plan for uncertainty and what could happen next year if DSH payments were to be frozen or additional funding programs cut.

President Riley has been meeting every Thursday with a group that is strategically assessing plans to increase revenue, identify opportunities, cut costs, and be more efficient and effective

across the organization. This includes reaching out to the community, as well as working collaboratively with other hospitals in Brooklyn.

In very positive news, Downstate received a \$10 million grant from the National Institutes of Health (NIH). The grant is unique in that it is actually an endowment and significantly larger than most NIH grants, which range from \$250,000 to \$400,000. The funds will be invested in an endowment portfolio managed by the SUNY Research Foundation; earnings will help fund programs aimed at minority/underrepresented students and faculty members. The NIH awards only five of these special grants a year. Downstate's proposal was selected from a field of seventy.

President Riley is also working to reduce campus energy costs. He has signed a contract with an entity that is doing business with the state and ConEd to deliver electricity through gas-powered fuel cells. Currently, the campus is paying 11.8 cents per kilowatt used; through this contract, costs will come down to six cents—a considerable savings. The contract will also yield \$1.3 million in incentives for reducing the drain on Brooklyn's electrical grid. These in turn will fund "green" activities on campus such as installing new light fixtures to save on kilowatt wattage. Downstate is the first SUNY campus to install and take advantage of this technology.

SPECIAL REPORT FROM THE ASSOCIATE DEAN FOR DIVERSITY EDUCATION AND RESEARCH

Dr. Carla Boutin-Foster, Associate Dean for Diversity Education, and Research (DEAR), provided a review of activities spearheaded by her office, which is part of the College of Medicine. She oversees pipeline programs for high school and undergraduate students aspiring to attend medical school, as well as activities aimed at supporting minority and underrepresented students at Downstate. At its most basic, she said, the mission of her office is to provide a nurturing and supportive environment that will cultivate the next generation of diverse leaders in medicine, research, and public health.

DEAR's strategic initiatives focus on four areas: 1) building comprehensive pipelines; 2) supporting students, faculty, and staff; 3) facilitating career development and research training; and 4) sponsoring networking initiatives, including programs on health disparities and social determinants. The department's work, while primarily focused on medical students, is inclusive of all five colleges and schools at Downstate.

Dr. Anika Daniels-Osaze, DEAR Director, reviewed pipeline programs available at Downstate. Some have been in existence for years, while others are new.

HPREP (Health Professions Research Education Program) is conducted in conjunction with the Student National Medical Association, which at Downstate is called the Daniel Hale Williams Society in honor of an African American physician who was one of the first in the United States to perform open-heart surgery. HPREP brings to campus high school students from across New York City for six weeks of exposure to the health professions. A key feature of the program is peer mentoring by Downstate medical students in both didactic lessons and lab work.

The Undergraduate Summer Research Program, in existence for over twenty years, provides one-to-one mentoring by Downstate faculty members to underrepresented college students interested in careers in the biomedical sciences or public health. Over an eight-week period, students learn what it means to be a researcher, how to write grants and papers, create a hypothesis, and develop questions that are critical to the community Downstate serves.

DEAR also sponsors linkage programs that guarantee admission into Downstate's College of Medicine. The Early Medical Education Program, for example, is an initiative to increase the competitiveness of undergraduate premedical students early in their college career. Students enroll in this program across three summers. In the first two summers, students follow a didactic curriculum that features case-based learning and physician shadowing. In the third year, they take anatomy dissection. Seventy-six students, or 90 percent of enrollees, have been admitted to and successfully graduated from Downstate.

Downstate is part of a consortium of New York State medical schools that sponsors a post-baccalaureate program designed to offer students denied admission to medical school a second chance to attend. Located in Buffalo, the program is designed to expand the pool of underrepresented, economically, and educationally disadvantaged students in medical school. Under this option, Downstate sponsors students for a full-year of coursework and guarantees acceptance at Downstate if all program requirements are met. Downstate has a 98 percent success rate with students admitted to this program.

A new Downstate pipeline program, sponsored by President Riley, is for students requiring in-depth academic support. Students spend a year on the Downstate campus mirroring the medical school experience and shadowing matriculated medical students. They undertake the same activities as admitted students, from attending classes to taking exams but also receive individual mentoring and tutoring from Downstate's Academic Development Department. To enhance accessibility, the program is offered tuition free and enrollees receive a stipend for room and board. In this, its first year, six of seven participants are underrepresented minority men. While the program currently does not currently carry a degree, the ultimate plan is to develop it into a formal Master's program.

Dr. Boutin-Foster followed this presentation with a review of additional department initiatives, among them the Disparities Research Task Force. This is comprised of faculty who are passionate about health disparities and health equity, and who want to make a difference in the lives of their patients by motivating the next generation of physicians and students. It is a multidisciplinary group, with representatives from all five Colleges and Schools. When you are at Downstate, she said, you learn how to take care of patients from underrepresented minority backgrounds and diverse cultural backgrounds, and how to look at medicine through a lens of social justice.

A unique aspect of the office is its focus on research. Dr. Boutin-Foster and Marilyn Fraser, MD, Chief Executive Officer of the Arthur Ashe Institute for Urban Health, are recipients of a \$600,000 ECRIP (Empire Clinical Research Investigative Program) grant from the New York State Department of Health to train junior faculty members in translational research, with a focus on underrepresented minority and women faculty.

DEAR has also helped create a pathway in the College of Medicine that integrates social determinants of health into problem-based learning. The pathway, called HEAL (for Health Equity Advocacy and Leadership), helps students develop the skills and tools they need to effectively provide care to patients who are economically or otherwise disadvantaged.

“We don’t want to do research where you helicopter in, do the research, take the data, and leave,” said Dr. Boutin-Foster in concluding her presentation. “We want to apply community-based participatory research, in which we’re developing sustainable research solutions with community partners. This means going to faith-based organization and doing health interventions that are truly faith-based and not just faith-placed. And it is possible to do this at Downstate, because of its diversity.”

There being no further business, the Council meeting was formally adjourned.