

SUNY Downstate Interim Community Engagement Report



PREPARED FOR

State University of New York

PREPARED BY

Public Works Partners

Executive Summary

With the support of Public Works Partners, SUNY Downstate led a robust community engagement process focused on shaping a proposed \$300 million capital investment in a stronger SUNY Downstate. The goal of the community-driven visioning process was to better understand the perspectives of diverse stakeholders that include Downstate patients, Central Brooklyn residents, leaders of local nonprofits and faith-based organizations, and Downstate students, faculty, staff, and hospital employees, among others. Through in-person convenings and a public survey distributed to over 36,000 individuals, more than 1,000 stakeholders shared their questions, concerns, and visions for the future of Downstate. This report is a summary of those engagements. The full findings were provided to SUNY. Main findings from the engagement process are summarized as follows:

- Preserving and expanding specialty care, while continuing to provide high-quality services to a diverse population, is a top priority for stakeholders.
- Stakeholders identified Maternal-Child Health and Primary Care as priorities for expanded service options, noting the immediate community need.
- · Students and faculty in particular prioritize better access to educational resources and training opportunities, such as clerkships, residencies, and rotations.
- The academic community requested more research opportunities for students, including health equity research, noting that capital investments should be paired with investments in human capital.
- · While stakeholders place tremendous value on Downstate's community-driven mission, they identified improved facilities and services as a top priority for the Stronger Downstate plan.
- Strengthening Downstate means having a highly-accessible anchor for the campus paired with investments in community health.

Acknowledgements

We would like to express our gratitude for the time and energy that stakeholders have dedicated to the visioning process.

Throughout the engagement process, stakeholders emphasized Downstate's importance as a safetynet health provider and as a training institution for community-driven practitioners. They envisioned a Downstate that not only preserves this unique role, but also one that expands it. We recognize stakeholders' concerns about how changes to Downstate, including the hospital, could alter access to healthcare in Central Brooklyn. Stakeholders feel that additional investment in health and wellness is necessary to promote equity and justice. We also heard that many participants would have liked to have been involved earlier in the process and seek additional information about the state of Downstate. Most importantly, stakeholders shared that they want to be more involved as the process moves forward, which mirrors SUNY's commitment to an ongoing stakeholder engagement process.

A Stronger **Downstate**

As New York City's only public academic medical center, SUNY Downstate has served the community for the last 160 years and is dedicated to training a diverse, world-class healthcare workforce, advancing biomedical science through cutting-edge research, and providing high-quality care to Brooklyn residents. While SUNY Downstate continues to tackle systemic health disparities in Brooklyn and beyond, years of financial instability and a hospital facility in disrepair have put the short-term viability and long-term success of the hospital in jeopardy. Beyond the urgent facility needs, healthcare providers across the country are seeing more care being delivered outside of the hospital, and Downstate is no exception with low bed utilization rates and massive funding shortfalls.

Addressing these urgent, ongoing challenges requires an ambitious, clear-eved plan that will lay the foundation for a sustainable and healthy future for generations to come-with a vibrant, thriving health sciences university at its core.

With this plan, SUNY Downstate aims to accomplish the following goals:

- Advance Downstate's unique role preparing excellent, diverse healthcare professionals who will go on to serve the local community upon graduating
- Preserve the current levels of inpatient care the community receives from the hospital through stronger partnerships
- Expand access to primary care and urgent care resources
- Build a cutting-edge Brooklyn Institute of Health Equity to tackle the significant, systemic health disparities the communities we serve face on a daily basis

It is essential that robust and continuous community input shape Downstate's future. To that end, SUNY Downstate held an initial series of engagement activities and community visioning to ensure the Stronger Downstate plan properly acknowledges and meaningfully addresses community needs.

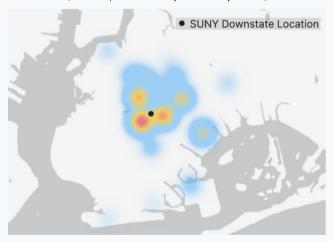
Community Engagement

This engagement process aimed to develop a deep understanding of the perspectives of diverse stakeholders that make up the Downstate community: Downstate patients, Central Brooklyn residents, leaders of local nonprofits and faithbased organizations, and Downstate students, faculty, staff, and hospital employees. Through in-person convenings and a widely-distributed public survey, more than 1,000 stakeholders shared their questions, concerns, and visions for the future of Downstate. This initial report summarizes their input and will help inform a sustainable blueprint for SUNY Downstate.

Community Survey

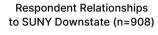
To ensure that this phase of the engagement process was inclusive and wide-reaching. workshops were paired with a robust online survey, which was launched on February 22nd, 2024 and will remain open through March 26th, 2024. The survey was distributed through print and digital channels, among them university mailing lists and social media, to reach SUNY affiliates, patients, and community members. The survey was mailed to 36,000 residents in the SUNY Downstate Hospital service area. As of March 20th, 2024, the survey has received 1,049 responses.

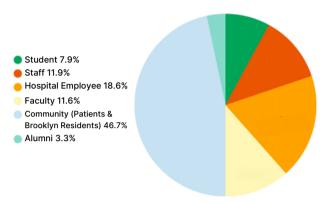
> Where community respondents live (n = 245, based on zip code responses)



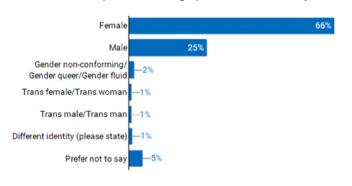
Nearly half of survey respondents were Central Brooklyn residents and Downstate patients, and the majority reside within Downstate's service

area. While respondents skewed femaleidentifying, there was a relatively even age distribution that shaded older, key to including the perspectives of residents with greater medical needs. Most respondents identified Black/African American and other ethnoracial minorities.

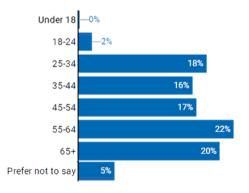




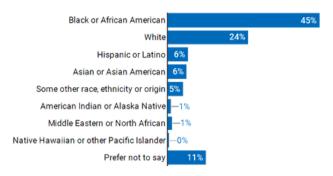
Respondent Demographics: Gender Identity



Respondent Demographics: Age



Respondent Demographics: Race/Ethnicity



Stakeholder Convenings

The first three in-person convenings were held between February 27th and 29th, 2024, with representatives of local nonprofits, communitybased organizations, faith-based organizations, and central Brooklyn residents; faculty, staff, and hospital employees; and students.

Held at SUNY Downstate, the convenings' primary objective was to serve as spaces in which stakeholders could share their auestions. concerns, and priorities for Downstate's future and provide input on how to use the historic \$300 million capital investment proposed by the State in this year's budget. Sessions were kept small between 15 and 35 participants - to ensure participants had ample opportunities to share their and perspective those of the various constituencies they represented.

There will be two more stakeholder convenings in the upcoming weeks. The next convening will be a Maternal-Child Health forum with practitioners, medical advocates, and community representatives. This will be followed by a final convening that includes community representatives that were unable to attend earlier phase of events and will conclude this engagement.

Convening #1

The first community convening, held on February 27, 2024, focused on better understanding the perspectives of the Central Brooklyn community. Over 30 representatives of local nonprofits, community-based organizations, faith-based organizations, and neighborhood groups attended the convening. The event began with introductory remarks by a Downstate representative, followed by a video in which SUNY Chancellor John B. King, Jr. introduced the challenges that Downstate has been facing and the historic investment in

Central Brooklyn that is proposed in this year's State budget, setting the stage for discussions about how to best use the available resources.

After dividing into three breakout groups, participants shared their questions, concerns, and visions for Downstate. Participants voiced concerns about the state of healthcare in Central Brooklyn and how changing the location where Downstate personnel provide inpatient services could impact access to health care. They requested more information about the state of affairs at Downstate, including the data leading to the initial set of decisions, which have been posted on the AStrongerDownstate.org website. They also shared ideas about how the allocated funding could be best used to support the community, namely around the preservation and expansion of specialty, primary, and maternal care. Participants noted that many key community representatives were missing from conversation. To ensure inclusivity, there will be another upcoming engagement session for those that were unable to attend the first community convening.

Convening #2

On February 28th, over 30 Faculty, Staff, and Employees attended the Hospital second stakeholder convening. Following introductory remarks, faculty, staff, and hospital employees began discussions in two breakout groups. One notable concern voiced was about how changing the location where Downstate personnel provide inpatient services would impact the medical school and student training (while noting twothirds of Downstate students already complete their residencies and clerkships at other area hospitals). The workforce representatives also cited the importance of Downstate's specialty care services to the community and to students, Downstate's role in treating complex cases with advanced progression, and the integral role of their social workers in promoting value-based care. The event ended with conversations about how the Stronger Downstate plan can uphold the hospital's unique mission: to provide care to Central Brooklyn residents - including those that are uninsured, underinsured, and that are unable to access other hospitals - while also serving the community as a medical training institution. Stakeholders want to ensure that Downstate's future not only preserves, but also builds on, its mission.

Convening #3

16 students participated in a roundtable discussion on February 29th. As leaders of the University and Medical Councils, as well as other key student organizations, participants came prepared with questions about publicly available data, concerns about how changes in Downstate's structure and hospital would impact student training and competitiveness for future generations, and with ideas about how investment could improve their educational experiences. Students emphasized the for more student-facing opportunities at Downstate, particularly in health disparities research, as well as academic support centers equipped with tutors, mentorship, and content assistance. Participants chose to extend the convening, which lasted nearly three hours, to the student body's ensure that perspectives were heard and recorded. The night ended with a reflection on Downstate's dual importance - as a safety-net health provider and as training institution for community-driven practitioners.

What We Heard

Key lessons learned from the engagement process are summarized below. Drawing from the convenings and surveys, the insights present stakeholders' visions for a stronger Downstate. They are organized into three categories that emerged during the engagement process: Medical Services; Academics and Training; and Facilities Improvements.

Medical Services

- 1. Preserving and expanding specialty care, while continuing to provide high-quality services to a diverse population, is a top priority for stakeholders.
- 2. Stakeholders identified Maternal-Child Health and Primary Care as priorities for expanded service options, noting the immediate community need.

Academics and Training

- 3. Students and faculty prioritize better access to educational resources and training opportunities, such as clerkships, residencies, and rotations.
- 4. The academic community requested more research opportunities, including health equity research, noting that capital investments should be paired with investments in human capital.

Facilities Improvements

- 5. While stakeholders place tremendous value on Downstate's community-driven mission, they identified improved facilities and services as a top priority for the Stronger Downstate plan.
- 6. Strengthening Downstate means having a highly-accessible anchor for the campus paired with investments in community health.

Medical Services

1. Preserving and expanding specialty care, while continuing to provide high-quality services to a diverse population, is a top priority for stakeholders.

Specialty care refers to treatment of specific physical, mental, or behavioral health conditions from doctors with specialized training in specific areas of medicine. Downstate offers a wide variety of specialty care both on an inpatient and outpatient basis and unique services like its kidney transplant program and those related to its status as one of only two regional perinatal centers in Brooklyn. Community members noted the importance of access to specialty care that Downstate provides, which they want to preserve.

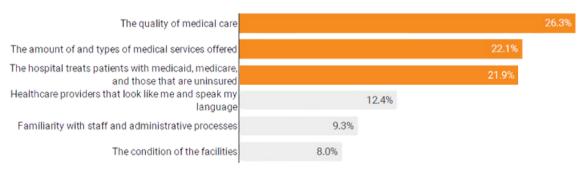
Several specialty services were cited as important to ensure ongoing access to during the engagement process and survey. These include:

- · Cancer services
- · Alzheimer's Disease center
- · Behavioral health services
- · Stroke center
- Interventional cardiology
- Kidney transplants
- · Dialysis center
- · Pediatric in and out-patient services
- Lupus treatment
- Dermatology
- Diabetes treatment
- · Orthopedics

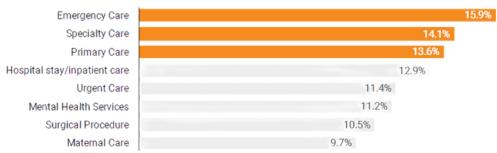
Faculty, staff, and students explained that specialty services have helped to create SUNY Downstate's service niche and competitive training programs, leading to medical excellence in these areas. When asked what stakeholders value most about the hospital that they want to see preserved, survey respondents selected 'the quality of medical care' and 'the amounts and types of medical services offered' as their top choices, demonstrating the importance of preserving and expanding Downstate's quality medical services, among them specialty care.

Survey responses corroborated the importance of specialty care. When asked which medical services community members wanted better access to, specialty care was a top choice, second only to emergency care. During the convenings, stakeholders shared that pairing inpatient services with outpatient specialty services is key to providing high-quality community medical services and student training, emphasizing this as a priority to be addressed with the transition of inpatient services to be provided by Downstate staff at Kings County Hospital and other nearby hospitals.

What do you most value about the hospital that you want to see preserved with the continuation of Downstate inpatient services provided by Downstate staff at Kings County and other nearby hospitals?



What medical services do you want better access to in Brooklyn?

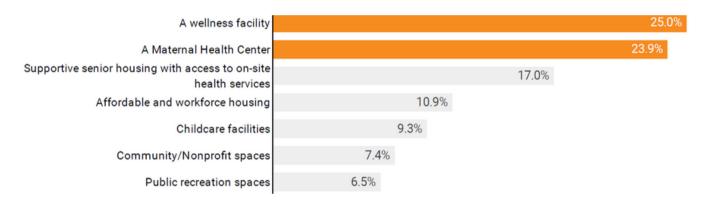


2. During the convenings, stakeholders identified Maternal-Child Health and Primary Care as priorities for expanded service options, noting the immediate community need.

the convenings, stakeholders During saw Maternal-Child health as a key community need, citing midwife and other evidence-based services that can help to address inequities in maternal mortality and morbidity that exist along racial, class, and geographic lines. When asked which new community uses and services stakeholders would most like to see in the neighborhood, a maternal health center was among the top survey choices, second only to a wellness facility.

At the convenings, stakeholders also identified Primary Care as a key medical need for the community, a finding which was was reflected in survey responses as well. While participants did not want to lose access to inpatient services and shared concerns about Emergency Department wait times, they also recognized how more Primary Care may help to alleviate some of those challenges.

Downstate is exploring the possibility of including new community uses and services in the stronger Downstate proposal. Which of these would you most like to see in your neighborhood?



Academics and Training

3. Students and faculty prioritize better access to educational resources and training opportunities, such as clerkships, residencies, and rotations.

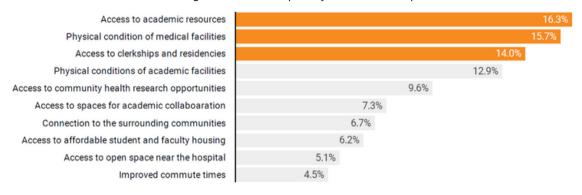
Students shared that services and spaces to support their educational needs are a priority and at times unmet, among them updated library resources, academic and tutoring support, and access to gold-standard electronic medical recordkeeping. They noted, however, that capital are contingent on investments recruiting and retaining talented faculty and administrative staff that can support academics and research.

When asked which changes would most improve students' academic experience at Downstate, survey respondents selected "access to academic resources" as the top choice. The campus community also feels that it is important to maintain increase opportunities for rotations, residencies, and clerkships, two-thirds of which already occur at partner hospitals and not at Dow-

nstate's own hospital. Improved access to clerkships and residencies was also a top survey response when asked what would most improve students' academic experience at Downstate.

During engagement sessions, students, faculty, and staff shared concerns about how to preserve and expand student training opportunities. While training opportunities are already at times scarce, participants were concerned that not having a home institution in which Downstate affiliates are the top priority could be a challenge. Ancillary medical training and administrative resources are necessary for students to remain competitive in the clinical labor markets. These resources will also enable the institution to recruit and retain its best asset - its talent - which includes diverse Brooklyn residents.

Which of these changes would most improve your academic experience at Downstate?



4. The academic community requested more research opportunities, including health equity research, noting that capital investments should be paired with investments in human capital to best support research.

Students want to do research, particularly around health equity, but told us that they often cannot find sponsoring faculty with the capacity to support them. Faculty shared that they want to be better positioned to support student research, but at times do not have the bandwidth to do so. Faculty and students both explained that as a result, existing research facilities on campus such as laboratories can go underutilized and doctoral students are frequently asked to fill teaching roles beyond program requirements. Stakeholders noted that investment in faculty and staff to provide

administrative support could be more robust and would make a new health equity research institute best positioned to create opportunities for the academic community. More intentional investments in staffing, for example, could lower administrative burdens on students and create more research and clinical opportunities. Students and faculty also felt that in order for a health equity institute to produce high-quality research, it should have a connection to inpatient clinical settings, permitting researchers to conduct the widest possible range of studies.

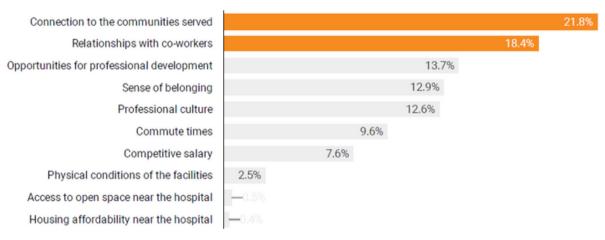
Facilities Improvements

5. Stakeholders value Downstate's community-driven mission. To continue providing excellent community-based care, the campus community identified improved facilities and services as a top priority for the Stronger Downstate plan.

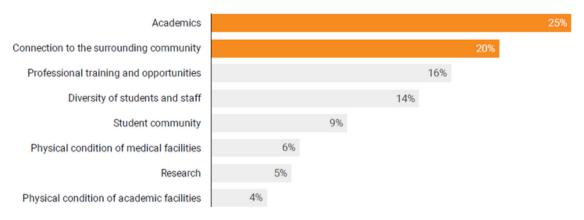
During engagement, the campus community frequently reiterated а kev motivation: Downstate's connection to the surrounding community. When asked what they value most about their job at Downstate, workforce survey respondents selected connection communities they serve as their top choice. Students similarly selected connection to the

community as a top choice for what they value most about their academic experience, second only to the quality of academics. Students and described community academics, and medical services as intertwined and fundamental to producing high-quality, community-based medical training and care.

What do you value most about your job at Downstate?



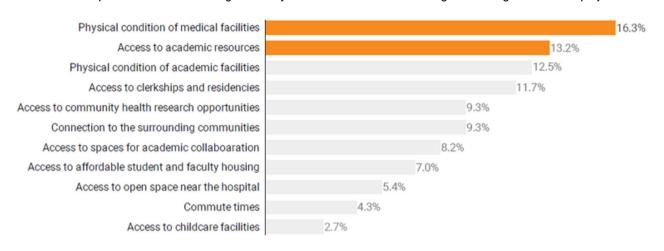
What do you value most about your Downstate academic experience?



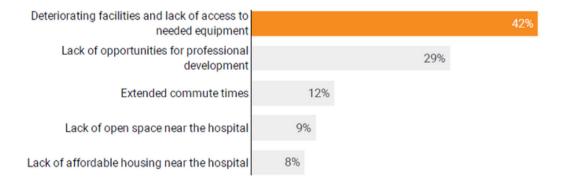
When asked what challenges Downstate employees would most like to see addressed through the stronger Downstate proposal, they overwhelmingly indicated deteriorating facilities and lack of access to needed equipment as the primary area for investment. Likewise, students selected 'physical condition of medical facilities'

as their top priority on the survey. During the convenings, stakeholders noted that outdated facilities were the impact, rather than the cause, of larger institutional funding challenges that also require investment to strengthen Downstate as a community-based training institution and service provider.

Student responses to: "What challenges would you like to see addressed through the stronger Downstate project?"



Faculty and staff responses to: "What challenges would you like to see addressed through the stronger Downstate project?"



6. Strengthening Downstate means having a highly-accessible anchor for the campus paired with investments in community health.

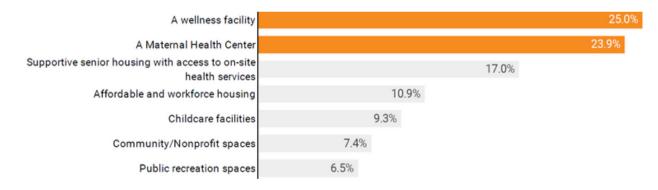
Faculty, staff, and students felt that the Downstate hospital anchors the campus and its community. Given the ways in which inpatient services are slated to be provided in partnership with other hospitals in the community, stakeholders felt that they were losing the space that serves as the primary node for the campus community that includes students, faculty, staff, residents, and fellows. A new building - funded through the \$300 million state capital investment could help to fill this gap.

Stakeholders emphasized that any anchor should accessible to the widest range transportation options for patients, including parking, which they identified as a particular challenge following the closure of the parking garage on Lenox Road. They also emphasized the need for transparency on expected life-cycle costs for a new building to ensure its long-term

community benefit and financial feasibility. This reflects concerns with the hospital's physical condition and lack of maintenance and funding that have led administrators to deem it at risk of failure

When asked about additional community needs for investment. stakeholders overwhelmingly requested that it focus on improving health and wellness in Central Brooklyn, particularly for underserved populations. Survey respondents selected a wellness facility and maternal health center as their top requests for new community investments in the neighborhood. Stakeholders' visions demonstrate the importance of further investment in health equity. They also echo the sentiment throughout the engagement process that more funding is necessary to meet Central Brooklyn's health needs.

Downstate is exploring the possibility of including new community uses and services in the stronger Downstate proposal. Which of these would you most like to see in your neighborhood?



Conclusion

We would like to again express our gratitude for the dedication of the patients, residents, local leaders, students, faculty, staff, and hospital employees that participated in these engagements. This report was prepared by Public Works Partners and commissioned by the Research Foundation for the State University of New York.

Appendix ISurvey Mailer

Let's build a stronger Downstate together.

TOGETHER, WE CAN:

- Expand SUNY Downstate Health Sciences University's role in training Brooklyn's next generation of excellent, diverse health professionals
- Ensure our communities can access the quality, affordable health care they deserve
- Address the significant health disparities facing Brooklynites while making sure Downstate's employees keep their jobs





We can't do this without your voice!

Scan the QR code, or fill out the survey and send it back to us!

PLACE STAMP HERE

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Other_

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SUNY Downstate is not closing. We are committed to a stronger Downstate. But we can't do it without you.

SUNY Downstate's hospital building faces an infrastructure crisis and unsustainable deficits. Doing nothing puts the jobs of our employees and the care of our patients at risk.

We're committed to a future for Downstate that benefits our entire community. It's time for a bold, viable plan to fix Downstate—and we need your help to make it a reality.

Get more information at astrongerdownstate.org

With community input like yours, our Downstate plan will:

- Result in a state-of-the-art medical school capable of training a worldclass, diverse healthcare workforce
- Preserve and improve community access to inpatient care through stronger partnerships with local hospitals
- Expand access to needed primary and urgent care resources with a new \$300 million outpatient facility
- Build a cutting-edge Brooklyn Institute of Health Equity to tackle the systemic health disparities our neighborhoods face on a daily basis



Scan here to complete the survey!

¡Escanee aquí para completar la encuesta!

Eskane isit la pou konplete sondaj la!





Take the survey! ¡Haz la encuesta! Pran sondaj la!

Name:	What do you value most about SUNY Downstate Medical Center?
Email:	
Phone Number:	
Address and/or Zip Code:	Medical care is only one of many factors that influence a community's health and well-being. Which of these would you most like to see in your neighborhood?
What medical services do you want better access to in Brooklyn? □ Emergency Care □ Hospital Stay/Inpatient Care	□ Affordable and workforce housing □ A wellness facility □ Outdoor public recreation spaces □ Community/nonprofit spaces □ Childcare programs □ Other
☐ Maternal Care ☐ Mental Health Services ☐ Primary Care ☐ Specialty Care ☐ Surgical Procedures ☐ Urgent Care	Other



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