

A low-angle, upward-looking photograph of a massive stone bridge tower. The tower is constructed from large, rectangular stone blocks and features a prominent archway. Numerous steel cables are visible, extending from the top of the tower towards the left side of the frame. The sky is a vibrant blue with scattered white clouds. The lighting is bright, casting a warm, golden glow on the stone surfaces.

STATE UNIVERSITY OF NEW YORK  
DOWNSTATE MEDICAL CENTER

# SELF- STUDY REPORT

For the Middle States Commission on Higher Education

2015-2016

STATE UNIVERSITY OF NEW YORK  
DOWNSTATE MEDICAL CENTER

# SELF- STUDY REPORT

PREPARED FOR THE MIDDLE STATES COMMISSION  
ON HIGHER EDUCATION



# CHE Middle States Commission on Higher Education

3624 Market Street, Philadelphia, PA 19104-2680  
Phone: 267-284-5000 Fax: 215-662-5501 www.msche.org

**Certification Statement:**  
**Compliance with MSCHE Requirements of Affiliation and Related Entities Policy**  
*(For use by SUNY State-Operated Institutions)*  
*Reviewed and Affirmed July 16, 2015*

An institution seeking **initial accreditation** or **reaffirmation of accreditation** must affirm that it meets or continues to meet established MSCHE Requirements of Affiliation and the “Related Entities” policy.

*This signed statement should be attached to the executive summary of the institution's self-study report.*

State University of New York, Downstate Medical Center  
(Name of Institution)

The State University of New York represents that this institution operates within the program of the SUNY System. The undersigned hereby certify that SUNY recognizes the Commission’s compliance requirements for this institution and will uphold State University’s policies pertaining to MSCHE Standards and Requirements of Affiliation.

\_\_\_\_\_  
(Campus President)

12/9/15

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Chair, SUNY Board of Trustees)

12/9/15

\_\_\_\_\_  
(Date)



**Middle States Commission on Higher Education**

3624 Market Street, Philadelphia, PA 19104-2680  
Phone: 267-284-5000 Fax: 215-662-5501 www.msche.org

**Certification Statement:  
Compliance with MSCHE Requirements of Affiliation and  
Federal Title IV Requirements  
Effective October 19, 2012**

SUNY Downstate Medical Center

\_\_\_\_\_  
(Name of Institution)

is seeking (*Check one*):       Initial Accreditation  
    Reaffirmation of Accreditation through Self Study  
    Reaffirmation of Accreditation through Periodic Review

An institution seeking **initial accreditation** or **reaffirmation of accreditation** must affirm that it meets or continues to meet established MSCHE Requirements of Affiliation and federal requirements relating to Title IV program participation, including the following relevant requirements under the Higher Education Opportunity Act of 2008:

- Distance education and correspondence education (student identity verification)
- Transfer of credit
- Assignment of credit hours
- Title IV cohort default rate

*This signed certification statement must be attached to the executive summary of the institution's self-study or periodic review report.*

The undersigned hereby certify that the institution meets all established Requirements of Affiliation of the Middle States Commission on Higher Education and federal requirements relating to Title IV program participation as detailed on this certification statement. If it is not possible to certify compliance with all requirements specified herein, the institution must attach specific details in a separate memorandum.

Exceptions are noted in the attached memorandum (*Check if applicable*)

\_\_\_\_\_  
(Chief Executive Officer)

12/9/15  
(Date)

\_\_\_\_\_  
(Chair, Board of Trustees or Directors)

12/9/15  
(Date)



SUNY Downstate Medical Center is one of four academic medical centers in the State University of New York 64-campus system. Downstate, which was founded in 1860, joined the SUNY system in 1950. Since its founding, Downstate has achieved remarkable success in its mission as a medical university. From its start as a single school of medicine, the institution has grown to encompass five colleges and schools, a teaching hospital, and a growing research and biotechnology complex with a rich history of commitment to educational access, community service, and student and faculty diversity. While Downstate offers both graduate and undergraduate degrees, the majority of students – 82 percent in 2014 – are engaged in graduate-level study.

Since the decennial Middle State Commission on Higher Education accreditation site visit in 2006, Downstate has experienced significant growth. A dynamic and effective new president, John F. Williams, MD, EdD, MPH, FCCM, was appointed in 2012 to lead the institution. The *Self-Study Report* that follows shares Downstate's commitment to its mission, reviews how that mission informs strategic planning and resource allocation, and sets the stage for a new round of strategic planning to guide the future. The *Report* also includes information on the nine specialty accreditation reviews, covering 93 percent of enrolled students, that Downstate participates in and discusses how this process of continuous review contributes to strong student learning outcomes and improvement in curricula and campus operations.

The campus elected to conduct a Comprehensive Self-Study structured on broad-based collaboration. It includes two chairs and a deputy co-chair, as well as an Executive Bridge Committee and a Steering Committee. Six work groups, with membership reflecting Downstate's multi-faceted academic enterprise, examined thirteen of MSCHÉ's Characteristics of Excellence. Standard 12, on General Education, is not applicable to Downstate, and thus was not reviewed. To keep the campus informed, a Town Hall meeting for the entire campus was held in March 2014, with a follow-up Town Hall in September 2015. The Steering Committee met regularly to review progress on the Report. Downstate's senior leadership and campus governance structures were kept fully briefed as the study progressed.

Downstate's *Self-Study Report* begins with an introduction that reviews the components of Downstate's academic enterprise and describes the Self-Study Design, which comprised six work groups. (See Appendix A.)

#### **Mission and Goals; Integrity: Standards 1 and 6**

**Work Group 1** documented compliance with Standards 1 and 6. The work group found that Downstate has a specialized and clearly defined mission. It determined that the mission statement is reviewed, is publicized, and guides strategic planning; that institutional goals, as expressed through

the strategic planning process, are congruent with Downstate's mission; and that Downstate's role as Brooklyn's academic medical center and hub of medical education is well known to both internal and external stakeholders. The work group further found that Downstate has a strong framework of policies and structures that guides and monitors campus integrity, and maintains an inclusive campus environment that embraces diverse perspectives and multi-cultural populations.

**Planning, Resource Allocation, Institutional Renewal; Institutional Resources; Institutional Assessment: Standards 2, 3, and 7**

**Work Group 2** documented compliance with Standards 2, 3, and 7. The work group found that Downstate's strategic planning process is strongly linked to Downstate's mission and campus goals, and that Downstate's financial resources clearly support the academic mission. The annual budget process involves the strategic leadership of every college, school, and administrative unit. The mechanisms of the budget process include rational and consistent policies to determine allocation of resources, as well as a continuous feedback loop from plan development to resource allocation decisions. Institutional controls are in place to provide strong stewardship of institutional resources and assess effectiveness of programs. Institutional and educational effectiveness are achieved through planning, assessment, and review processes.

**Leadership and Governance; Administration: Standards 4 and 5**

**Work Group 3** documented compliance with Standards 4 and 5. The work group found that, as part of the SUNY system, Downstate has a well-defined and effective system of governance with assigned authority and accountability for policy development, decision making, and advisement. The work group also reviewed the leadership transition implemented at Downstate in 2012 with the appointment of President Williams. Dr. Williams has appointed a core group of administrative leaders with appropriate skills, degrees, and training, and who have clearly developed lines of authority and decision making. Since his appointment, Dr. Williams has taken decisive steps to facilitate improvement in operations, structures, services, and productivity.

**Student Admissions and Retention; Student Support Services: Standards 8 and 9**

**Work Group 4** documented compliance with Standards 8 and 9. The work group found that Downstate's admissions policies reflect its standing as a medical university that of-

fers specialized graduate programs and upper-division undergraduate programs. Student support services are appropriate for student strengths and needs. Financial information and admissions policies and criteria are clearly delineated, and the information available to prospective applicants is comprehensive and accurate. Downstate carefully monitors the academic progress of students throughout their programs of study and is aggressive in offering academic and other types of counseling to support student success.

**The majority of Downstate students – 82 percent in 2014 – engage in graduate-level study.**

**Faculty: Standard 10**

**Work Group 5** documented compliance with Standard 10. The work group found that Downstate's faculty are appropriately qualified for the positions they hold, and there are sufficient faculty to fulfill Downstate's education mission and the accreditation requirements of specialty accrediting agencies. A new department for Faculty Affairs and Professional Development was established in 2014 to support faculty success and continued professional growth and to ensure adherence to institutional policies on faculty appointment and promotion. Faculty play a crucial role in mission accomplishment through shared governance and participation in curricula review and development.

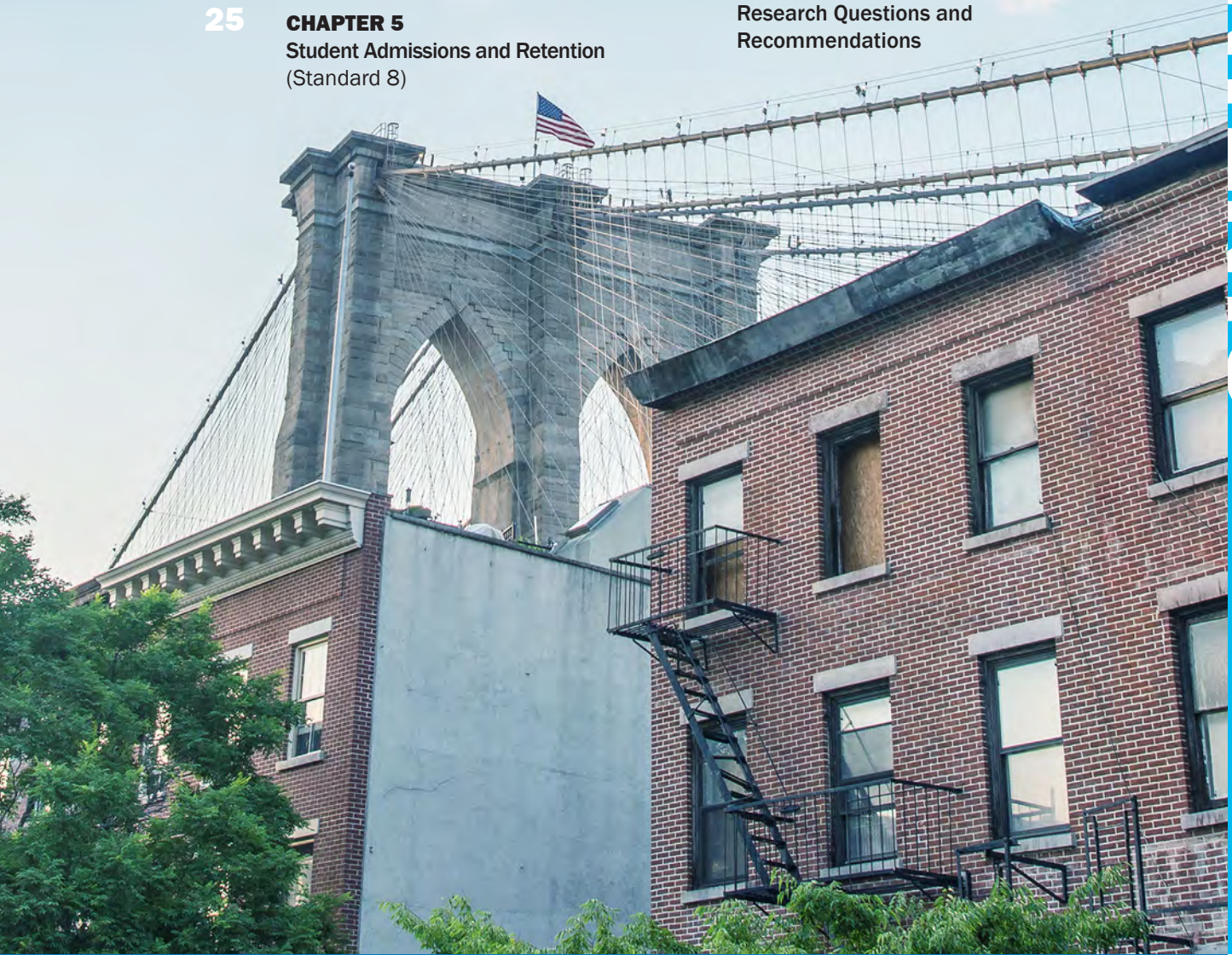
**Educational Offerings; Related Educational Activities; Assessment of Student Learning: Standards 11, 13, and 14**

**Work Group 6** documented compliance with Standards 11, 13, and 14. The work group found that Downstate's educational offerings are congruent with its mission and that program and course content contain rigor and depth appropriate to the degrees offered, with clearly stated learning outcomes. Support resources, including library services, information technology, and other learning resources, are adequate to support educational offerings. Student learning assessment processes are systematic, sustained, and related to Downstate's educational mission and goals, and include direct evidence of student learning.

Downstate has been transformed in many ways since 2006 and is positioned to meet the complex challenges of the future. Downstate's *Self-Study Report* documents our commitment to educational excellence and student success.

# TABLE OF CONTENTS

ii	<b>EXECUTIVE SUMMARY</b>	37	<b>CHAPTER 6</b> Student Support Services (Standard 9)
vi	<b>INTRODUCTION</b>	43	<b>CHAPTER 7</b> Educational Offerings (Standard 11) Related Educational Activities (Standard 13) Assessment of Student Learning (Standard 14)
x	<b>SELF-STUDY DESIGN</b>	59	<b>CHAPTER 8</b> Planning, Resource Allocation, Institutional Renewal (Standard 2) Institutional Resources (Standard 3) Institutional Assessment (Standard 7)
1	<b>CHAPTER 1</b> Mission and Goals (Standard 1)	71	<b>CHAPTER 9</b> Research Questions and Recommendations
6	<b>CHAPTER 2</b> Integrity (Standard 6)		
10	<b>CHAPTER 3</b> Leadership and Governance (Standard 4) Administration (Standard 5)		
18	<b>CHAPTER 4</b> Faculty (Standard 10)		
25	<b>CHAPTER 5</b> Student Admissions and Retention (Standard 8)		



# APPENDICES

<b>A</b>	<b>SELF-STUDY DESIGN</b>	<b>J</b>	<b>FINANCIAL REPORT</b>
<b>B</b>	<b>DIVERSITY REPORT</b>	<b>K</b>	<b>SUSTAINABILITY PLAN</b>
<b>C</b>	<b>SUNY POLICIES OF THE BOARD OF TRUSTEES</b>	<b>L</b>	<b>2 PERFORMANCE IMPROVEMENT PLANS</b>
<b>D</b>	<b>ORGANIZATIONAL CHARTS</b>		<b>STRATEGIC INTENT - THE PATH FORWARD</b> (Under Separate Cover)
<b>E</b>	<b>FACULTY DEVELOPMENT PLAN</b>		<b>DOWNSTATE 2016-2020</b> (Under Separate Cover)
<b>F</b>	<b>LEARNING OBJECTIVES</b>		<b>STUDENT HANDBOOK</b> (Under Separate Cover)
<b>G</b>	<b>COLLEGE ENROLLMENT</b>		
<b>H</b>	<b>COLLEGE PROFILES AND LEARNING OUTCOMES</b>		
<b>I</b>	<b>CAPITAL IMPROVEMENT</b>		



# INTRODUCTION



# BEFORE THERE WAS A BROOKLYN BRIDGE, BEFORE THE DODGERS CAME AND WENT, BEFORE THERE WERE ANTIBIOTICS, ANESTHESIA, AND SEPSIS CONTROL, THE INSTITUTION THAT WOULD EVENTUALLY BECOME KNOWN AS SUNY DOWNSTATE MEDICAL CENTER TAUGHT ITS FIRST CLASS

## INTRODUCTION

### STATE UNIVERSITY OF NEW YORK

Downstate Medical Center is part of the State University of New York (SUNY), the nation's largest comprehensive system of public higher education. SUNY's dynamic learning environment encompasses research universities, academic medical centers, liberal arts colleges, community colleges, agricultural and technical institutes, and an online learning network. The University enrolls more than 460,000 students; offers more than 7,000 degree and certificate programs; employs some 88,000 faculty and staff; and is represented by 2.4 million alumni worldwide.

### DOWNSTATE MEDICAL CENTER

SUNY Downstate is one of 64 campuses in the State University system, and comprises a College of Medicine, School of Graduate Studies, School of Public Health, College of Nursing, and College of Health Related Professions, as well as extensive research and biotechnology facilities and its own teaching hospital, the 376-bed University Hospital of Brooklyn. SUNY Downstate also maintains teaching affiliations with a broad network of local hospitals, clinics, and specialty care facilities, including Kings County Hospital Center, one of the largest public hospitals in New York City. In the 2014/15 academic year, Downstate had a total student body of 1,865, a full- and part-time faculty of 1,029 (845 full-time, 184 part-time), almost 2,600 voluntary faculty, and support staff of approximately 3,000. Downstate is the sole academic medical center serving the three million residents of Brooklyn and Staten Island.

Degrees granted at SUNY Downstate include the MD, PhD, DPT, DPH (also referred to as DrPH), MPH, MS, and BS. (Note: The New York State Education Department uses "DPH" as the abbreviation for the public health doctorate. The Council on Education for Public Health uses the abbreviation "DrPH.") Downstate also offers certificate and advanced certificate programs. In 2014, 82 percent of students were enrolled in graduate-level programs. Students enrolled in BS programs enter at the upper division; all general education coursework is completed prior to acceptance.

SUNY Downstate is located in central Brooklyn, in the heart of the nation's largest, most ethnically diverse, urban community. If it were a separate city onto itself, Brooklyn, would be the fourth-largest city in the country. It contains 66 distinct neighborhoods, many known as home to specific ethnic or cultural groups, with an estimated 90 languages spoken across its borders. The Downstate campus is physically, and culturally tied to and reflective of the community it serves.

## HISTORY

Downstate traces its roots back to 1860, when the medical school was founded. At that time the science of medicine was young, and many of the standards of practice taken for granted today were unknown or in their infancy. When its doors opened, the school revolutionized medical education in the United States. The new school was unique because it rejected the idea that physicians should be trained exclusively in university classrooms and lecture halls, and, for the first time in this country, brought the teaching of medicine to the hospital bedside.

Downstate is first and foremost an institution of higher learning for healthcare professionals. It plays an important role, nationally and regionally, in the physician and health-care-professional supply chain. According to the Federation of State Medical Boards, Downstate's College of Medicine ranks fourth out of the nation's 145 medical schools in the number of graduates who hold an active license to practice medicine. Regionally, this translates into Downstate being the top producer of physicians in New York State and New York City.

Downstate has traditionally served a distinct and diverse population of students. The majority of Downstate's students are from Brooklyn itself and the New York City region, many are from economically and/or educationally disadvantaged backgrounds, and many are immigrants or children of immigrants just getting their start in American society. Reflective of our community and mission, all of our colleges



Downstate is located in the center of Brooklyn.



and schools have a diverse student population. Downstate's College of Medicine, for example, ranks first among all medical schools in New York State in the number of minority students enrolled. Nationally, it ranks seventh among allopathic medical schools in the number of black students graduated between 1980 and 2012 and eighth in the number of Asian students. In the 14/15 academic year, the majority of the members of Downstate's student body were minorities.

Looking at Downstate in 2015, we take pride in our many achievements. We were the first to offer a direct-entry midwifery program in the United States, first to establish a gynecologic oncology department, and first to offer a baccalaureate degree in diagnostic ultrasound. Downstate faculty members were first to produce full-body human images using magnetic resonance imaging (MRI) and the first to successfully perform open-heart surgery in New York State (only the second instance of this procedure to be performed in the nation). Prototype MRI and heart-lung machines developed by Downstate faculty are housed in the Smithsonian Institute. We were the first to establish a federally funded dialysis clinic in the United States, prove that alcoholism has a genetic link, conduct a federal study of perinatal transmission of HIV disease, and identify the important role that nitric oxide plays in cardiovascular health. This last discovery led to awarding the 1998 Nobel Prize to Downstate faculty member Dr. Robert F. Furchgott.

SUNY Downstate has a strong commitment to biomedical research. Its basic scientists, behavioral scientists, clinicians, and public health experts are expanding the scientific body of knowledge in a broad range of healthcare topics. Downstate's colleges and schools recognize that faculty members engaged in research play an important role in providing the latest biomedical information, creating a vigorous learning environment, and instilling the value of scientific exploration among students. Downstate's educational divisions offer

students opportunities to pursue clinical, basic, epidemiological or statistical research. Strong research programs thrive in the areas of neuroscience, memory, the genetics of alcoholism, molecular biology, cardiovascular disease, optical imaging, and the epidemiology of HIV disease.

Downstate has launched two biotechnology initiatives to foster the growth of the biotechnology industry in Brooklyn and in New York City: an Advanced Biotechnology Incubator located adjacent to the campus for new start-ups, and BioBAT, a site on the Brooklyn waterfront for more mature companies that need larger space. Both sites are part of StartUp New York, a tax-free initiative launched by New York State to promote entrepreneurship and encourage companies to work in partnership with New York universities.

### DOWNSTATE'S COLLEGES AND SCHOOLS

#### Accreditation by Specialty Accrediting Bodies

In 2014, 93 percent of Downstate students were enrolled in programs that had undergone review by specialty accrediting bodies in the last five years.

In addition to the Middle States Commission on Higher Education, Downstate's colleges, schools, and academic programs are reviewed by nine accrediting bodies:

- Accreditation Commission for Midwifery Education;
- Accreditation Council for Occupational Therapy Education;
- American Physical Therapy Association;
- Commission on Collegiate Nursing Education;
- Council on Accreditation of Nurse Anesthesia Educational Programs;
- Council on Education for Public Health;
- Liaison Committee on Medical Education;
- Accreditation Review Commission on Education for the Physician Assistant/Commission on Accreditation of Allied Health Education Programs;

- Joint Review Committee on Education in Diagnostic Medical Sonography.

### College of Medicine

The College of Medicine (COM) is one of the oldest medical schools in the country and, in terms of students enrolled, the largest allopathic college of medicine in New York State. It is committed to remaining at the forefront of medical education and is notable both for the access to medical education it provides and for the quality of that education. COM ranks 12th out of 145 accredited allopathic medical schools in the United States in the number of graduates who hold faculty positions at American medical schools and 23rd in the number of graduates who are chairs of medical departments.

The COM provides a comprehensive medical educational experience for all students. Its curriculum recently underwent extensive revision, joining the many schools nationwide that are adjusting their curricula to take into account the new skills required for today's physicians. The new competency-based curriculum integrates the basic sciences with clinical education across all four years of study and provides students a thorough grounding in the core competencies.

### School of Graduate Studies

The School of Graduate Studies (SGS) is dedicated to training future scientists and providing students the tools they will need to contribute to the body of scientific knowledge. The SGS grants the PhD degree, and, with the College of Medicine, sponsors a combined MD/PhD degree. It offers three career tracks: Cellular and Molecular Biology, Neural and Behavioral Science, and Biomedical Engineering. In 2011, two new MD/PhD tracks were added in concert with SUNY Polytechnic Institute's College of Nanoscale Science and Engineering.

A growing percentage of SGS students are pursuing the joint MD/PhD degree. Graduates of this program are especially well prepared to bring basic science research to bear on clinical issues. Recent graduates of SGS have been accepted to research programs at Mount Sinai Medical Center, Duke University, the National Institutes of Health, and New York University.

### School of Public Health

The School of Public Health (SPH) is the first new school established at SUNY Downstate since 1966. It is also the first school of public health at a public university in New York City, and the first school of public health in Brooklyn. Launched in 2001 as a single-track MPH program in the College of Medicine's Department of Preventive Medicine and Community Health, it formally became an independent school in 2008, and was fully accredited by the Council on Education for Public Health (CEPH) in 2010. The school offers five master and three doctoral concentrations.

The SPH is focused on urban and immigrant health and dedicated to addressing health disparities and healthcare

inequities both locally and globally. Recent innovations include the creation of the Center for Global Health, the Global Health Practical Field Experience for MPH and DPH (DrPH) students, the Global Health Pathway for medical students, and the Peace Corps Master's International Program, launched in 2014. The school's motto is "Public Health for a Global Community."

Students in the School of Public Health represent a broad range of both healthcare professionals and non-healthcare professionals. The majority of students come from minority groups, reflecting the rich population diversity of Brooklyn.

### College of Nursing

The College of Nursing (CON), one the largest in New York State, offers baccalaureate degree, master's degree, and postgraduate certificate programs. It is one of only four colleges of nursing in the state to offer degrees in all advanced nursing specialties (clinical nurse specialist, nurse practitioner, nurse midwifery, and nurse anesthetist). Recently, CON revised its curricula to reflect the American Association of Colleges of Nursing's new core competencies. All of the college's programs are accredited by the Commission on Collegiate Nursing Education.

The CON is noted for its innovative programs, including a 15-month accelerated BS program. It recently received a grant from the Robert Wood Johnson Foundation to develop innovative approaches to accelerated nursing education that can be taken to scale and replicated in a variety of educational settings.

The college takes pride in its tradition of educating nurses from under-represented backgrounds and in contributing to the advancement of healthcare and the nursing profession. Many of its students are the first members of their families to attend college, and many pursue their academic goals while working full-time and caring for their families.

### College of Health Related Professions

The College of Health Related Professions (CHRP) educates future healthcare professionals in a variety of fields. Since its inception in 1966, CHRP has graduated nearly 5,000 healthcare professionals. The college offers courses of study leading to bachelor's, master's, and doctoral degrees. It provides a challenging and supportive environment that offers opportunities for structured experiences as well as independent inquiry.

Six disciplines – physical therapy, occupational therapy, midwifery, physician assistant, diagnostic medical imaging, and medical informatics – provide numerous options for interesting, sought-after careers. Through CHRP, Downstate developed the nation's first direct-entry midwifery program and offers the only bachelor's degree in diagnostic medical imaging in the metropolitan region.

Like the College of Nursing, the College of Health Related Professions attracts a diverse student body, representing a

STATE UNIVERSITY OF NEW YORK  
DOWNSSTATE MEDICAL CENTER

# **SELF-STUDY DESIGN**

# SELF STUDY FOSTERS BROAD-BASED CAMPUS DISCUSSION AND ENGAGEMENT

## SELF-STUDY DESIGN

### STEPS TAKEN TO PREPARE FOR THE SELF-STUDY

Preparation for the Middle States 2016 site visit began in 2013 under the leadership of Downstate President John F. Williams, who appointed Senior Vice President for Philanthropy JoAnn Bradley, EdD, to develop the structure and design for the self-study report. Vice President for Student Affairs and Dean of Students Jeffrey Putman, EdD, was appointed co-chair of the Self-Study. Clinical Assistant Professor of Emergency Medicine Teresa Smith, MD, was appointed deputy co-chair.

President Williams invited select campus members, representing a broad spectrum of the Downstate community, to serve on the Middle States Steering Committee (MSSC). An Executive Bridge Committee consisting of senior leadership was also appointed. Several Downstate staff members attended the Self-Study Institute in December 2013. Downstate's College Council, a community advisory group that is part of the campus governance structure, was briefed and invited to participate in the Middle States Commission on Higher Education (MSCHE) campus liaison visit. Based on these discussions, the steering committee finalized a timeline, drafted the Self-Study's basic design framework, and identified key faculty and administrators to serve on the Work Groups. The MSSC, the Executive Bridge Committee, and the Work Groups participated in a Retreat in March 2014 that included an intensive review of the MSCHE's *Characteristics of Excellence in Higher Education*.

Downstate chose to pursue a Comprehensive Self-Study, consistent with MSCHE's *Designs for Excellence: Handbook for Institutional Self-Study*.

### Work Group Structure and Charges

Six Self-Study Work Groups were formed and assigned groupings of the 13 standards to be addressed in the Self-Study. (Standard 12, General Education, is not applicable to Downstate's educational offerings and is therefore not included in the Self-Study.) A preliminary inventory of documents to be reviewed was developed for each Work Group. Members were asked to become familiar with all MSCHE standards, thoroughly review those within their charge, and address research questions. They were briefed on the timetable, processes to be followed, and data gathering.

Work Group assignments and charges were as follows:

#### WORK GROUP 1: STANDARDS 1 AND 6

Work Group 1 was charged with exploring the interdependent relationships between mission, goals, and integrity.

It was asked to examine how effectively Downstate has been guided by its Mission, Vision, and Values Statement and how in turn the mission statement reflects Downstate's core values. The Work Group also explored the role of integrity in an academic medical center and how ethical behavior is intrinsic to the way Downstate defines itself.

#### WORK GROUP 2: STANDARDS 2, 3, AND 7

Work Group 2 was asked to consider Downstate's diverse and evolving institutional needs and priorities relative to strategic planning, program development, resource allocation, outcomes assessment, and institutional renewal. The Work Group explored outcomes related to short- and long-term strategic planning, as well as how resource allocation supports institutional planning. The Work Group was also asked to review how these processes are used to ensure institutional sustainability and effectiveness.

#### WORK GROUP 3: STANDARDS 4 AND 5

Effective leadership, governance, and administrative structures are critical to institutional success, goal setting, and accomplishing mission. Work Group 3 was charged with exploring how these structures at Downstate support effective decision making and how leadership and administration encourage a culture of innovation, teamwork, empowerment, and continuous improvement.

#### WORK GROUP 4: STANDARDS 8 AND 9

Work Group 4 was charged with reviewing student support services and their relationship to student success. It also evaluated how Downstate's admission policies help ensure a strong, diverse student body and how the Division of Student Affairs helps Downstate students achieve their educational goals.

#### WORK GROUP 5: STANDARD 10

Work Group 5 reviewed faculty roles and responsibilities and the linkages among scholarship, teaching, student learning, research, and service.

#### WORK GROUP 6: STANDARDS 11, 13, AND 14

Work Group 6 assessed academic curricula and related educational activities.

## SELF-STUDY PARTICIPANTS

### MIDDLE STATES STEERING COMMITTEE:

#### CO-CHAIRS:

- JoAnn Bradley, EdD, *Senior Vice President for Philanthropy*
- Jeffrey Putman, EdD, *Vice President for Student Affairs and Dean of Students*

#### DEPUTY CO-CHAIR:

- Teresa Smith, MD, *Clinical Assistant Professor of Emergency Medicine*

**STEERING COMMITTEE MEMBERS:**

- Kevin Antoine, JD, *Assistant Vice President, Office of Diversity & Inclusion; Assistant Professor of Health Law and Policy, College of Nursing; U.S. Fulbright Scholars Campus Representative*
- Karen Benker, MD, *Associate Professor of Health Policy and Management and Associate Dean for Community Public Health Affairs, School of Public Health (added)*
- Ruth Browne, ScD, *Chief Executive Officer, Arthur Ashe Institute for Urban Health*
- Joanne Casarella, *Student, School of Public Health*
- Daisy Cruz-Richman, PhD, RN, *Professor and Dean, College of Nursing*
- Anika Daniels-Osaze, MA, *Director, Office of Minority Affairs (added)*
- Dorothy Fyfe, MPA, *Associate Vice President for Policy and Planning*
- Constance Hill, MD, *Clinical Professor of Anesthesiology, College of Medicine; and Dean, Minority Affairs (retired)*
- Johnson Ho, *Student, College of Medicine*
- Margaret Kaplan, PhD, OTR, *Associate Professor, College of Health Related Professions*
- Evan Leung, *Student, College of Health Related Professions*
- Emily Levine, *Student, College of Medicine*
- Allen Lewis, PhD, *Dean, College of Health Related Professions (added)*
- Nicholas J. Penington, PhD, *Associate Professor of Physiology and Pharmacology, College of Medicine*
- Deborah Reede, MD, *Professor and Chair of Radiology (added)*
- Stephan Rinnert, MD, *Professor of Emergency Medicine, College of Medicine*
- Joyce Sabari, PhD, OTR, FAOTA, *Associate Professor and Chair of Occupational Therapy, College of Health Related Professions*
- Moro Salifu, MD, MPH, *Professor and Chair of Medicine, College of Medicine*
- Laila Sedhom, PhD, RN, *Professor and Associate Dean for Graduate Programs, College of Nursing*
- Mark Stewart, MD, PhD, *Dean, School of Graduate Studies*
- Stephen Wadowski, MD, *Clinical Associate Professor of Pediatrics, College of Medicine; and Associate Dean for Graduate Medical Education and Designated Institutional Officer*
- Richard Winant, PhD, *Dean of Academic Information Access and Director of Libraries*

**EXECUTIVE BRIDGE COMMITTEE MEMBERS:**

- Astra Bain-Dowell, MPA, *Executive Vice President and Chief Operating Officer*
- JoAnn Bradley, EdD, *Senior Vice President for Philanthropy*
- Melanie F. Gehen, MHSA, *Interim Vice President for Finance and Chief Financial Officer, and Vice President for Academic Fiscal Affairs*

- Jeffrey S. Putman, EdD, *Vice President for Student Affairs, and Dean of Students*
- Pamela D. Sass, MD, *Chair, Department of Family Medicine and former Acting Dean, College of Medicine*

**DOWNSTATE'S COLLEGE COUNCIL****Community Members:**

- Philip Abramowitz, PhD
- Johnson Ho, *Student Member – College of Medicine*
- Michael Connors, Esq.
- Kimberly Laughton, *Student Member – College of Health Related Professions*
- Constance Shames, MD, *Alumni and Faculty Representative*
- Garry Sklar, MD
- Elgin W. Watkins, MPH, MDiv, DMin
- Marian Zavala, DNS, RN

**WORK GROUP 1****Charge: Examine Standards 1 and 6 (Mission and Goals; Integrity)****Chair:**

Pascal J. Imperato, MD, MPH & TM, MACP  
Dean of the School of Public Health and Distinguished Service Professor

**Co-Chair:**

Pamela D. Sass, MD  
Chair, Division of Family Medicine

**Members:**

Ruth C. Browne, ScD  
Chief Executive Officer  
Arthur Ashe Institute for Urban Health

Felix Nwamaghinna, MSB, RPA-C  
Chairman and Assistant Professor,  
Physician Assistant Program

Veronica Arikian, PhD, RN  
Director of Continuing Education and Associate Professor,  
College of Nursing

Douglas R. Lazzaro, MD, FACS, FAAO  
Professor and Chair of Ophthalmology

Johnson Ho  
Student, College of Medicine

Aditya Traigoppula  
Student, School of Graduate Studies

**Staff Assistant:**

Leslie Schechter

**WORK GROUP 2**

**Charge: Examine Standards 2, 3, and 7 (Planning, Resource Allocation, and Institutional Renewal; Institutional Resources; Institutional Assessment)**

**Chair:**

Dorothy Fyfe, MPA  
Associate Vice President for Policy and Planning

**Co-Chair:**

Audrée Bendo, MD  
Distinguished Service Professor of Anesthesiology

**Members:**

Teresa M. Miller, PT, PhD  
Associate Professor, College of Health Related Professions

Martin J. Deane  
Assistant Vice President, Materials Management

John Zubrovich  
Director, Biomedical Communications

Lisa Merlin, MD, FAAN  
Distinguished Teaching Professor  
Neurology, Physiology, and Pharmacology

Thomas F. Dugan  
Chief of University Police (retired)

**Staff Assistant:**

Wolf Lacossiere

**WORK GROUP 3**

**Charge: Examine Standards 4 and 5 (Leadership and Governance; Administration)**

**Chair:**

Kathleen E. Powderly, CNM, PhD  
Director, John Conley Division of Medical Ethics and Humanities

**Co-Chair:**

Joyce S. Sabari, PhD, OTR, FAOTA  
Associate Professor and Chair of Occupational Therapy

**Members:**

Nancy Giordano, EdD, FNP, RN  
Clinical Associate Professor of Nursing

Katherine Perkins, PhD  
Associate Professor of Physiology and Biophysics

Todd C. Sacktor, MD  
Distinguished Professor  
Physiology, Pharmacology, and Neurology

Isaac Topor, EdD, RHIA  
Chair  
Medical Informatics Program

Margaret Donat, MD  
Professor of Family Medicine

Simone Reynolds, PhD, MPH  
Assistant Professor of Epidemiology and Biostatistics

Stephen Waite, MD  
Assistant Professor of Radiology

Anika Daniels-Osaze  
Director, Minority Affairs

Michael Sangbowale  
Student  
School of Graduate Studies

**Staff Assistant:**

Dionne Davis-Lowe

**WORK GROUP 4**

**Charge: Examine Standard 8 and 9 (Student Admissions and Retention; Student Support Services)**

**Chair:**

Judith H. LaRosa, PhD, RN  
Vice Dean and Professor  
Department of Health Policy and Management

**Co-Chair:**

James P. Newell, JD  
Director of Financial Aid

**Members:**

Nellie Bailey, EdD, RN  
Associate Dean for Undergraduate Programs and  
Clinical Assistant Professor  
College of Nursing

Constance Hill, MD  
Clinical Professor  
Department of Anesthesiology (retired)

Joanne S. Katz, PT, DPT, PhD  
Chair and Associate Professor  
Physical Therapy Program

Rhonda Osborne, MD  
Assistant Professor  
Radiology

Jeffrey Putman, EdD  
Vice President for Student Affairs and Dean of Student Affairs



Julio Avalos  
Student  
College of Health Related Professions

Danielle Glanzberg  
Student  
College of Nursing

**Staff Assistant:**  
Daniel Ilyayev

#### WORK GROUP 5

**Charge: Examine Standard 10 (Faculty)**

**Chair:**

Rauno Joks, MD  
Chief and Program Director for the Division of Allergy and Immunology  
Associate Professor of Clinical Medicine

**Co-Chair:**

Ronnie Lichtman, CNM, LM, PhD, FACNM  
Professor and Chairperson Midwifery Program  
College of Health Related Professions

**Members:**

Ross Clinchy, PhD  
Associate Dean for Administration  
College of Medicine

Laila Sedhom, PhD, RN  
Associate Dean for Graduate Programs and Professor  
College of Nursing

Magda Alliancin, EdD  
Program Coordinator  
Early Medical Education Program

Mafuzur Rahman, MD  
Vice Chair and Clinical Assistant Professor  
Department of Medicine

Deborah L. Reede, MD  
Professor and Chair  
Radiology

Richard Winant, PhD  
Dean for Academic Information and Director of Libraries  
The Medical Research Library of Brooklyn

Margaret Clifton, EdD, RN  
Assistant Professor and Director of Simulation and the Learning Resource Center  
College of Nursing

Daniel Ehlke, PhD, MA  
Assistant Professor  
School of Public Health

Katherine Perkins, PhD  
Associate Professor  
School of Graduate Studies

Diana Weaver, MD  
Assistant Professor  
College of Medicine

Suzanne White, MA, OTR  
Clinical Assistant Professor  
College of Health Related Professions

Sinead Brady  
Student  
College of Medicine

Susan Holman  
Student  
School of Public Health

**Staff Assistant:**  
Guoda Miriam Burr

#### WORK GROUP 6

**Charge: Examine Standards 11, 13, and 14 (Educational Offerings; Related Educational Activities, Assessment of Student Learning)**

**Chair:**

Daisy Cruz-Richman, PhD, RN  
Dean and Professor  
College of Nursing

**Co-Chair:**

Madiha Akhtar, PhD  
Assistant Dean  
Student Affairs

**Members:**

Srinivas Kolla, MD  
Assistant Professor of Radiology

Richard Kollmar, PhD  
Assistant Professor of Otolaryngology

David J. Wlody, MD  
Professor of Clinical Anesthesiology

Edeline Mitton, MEd  
Director of Continuing Medical Education

Suzanne Schechter, CNM, LM, MS, FACNM  
Clinical Assistant Professor  
Midwifery Education Program

Margaret O'Sullivan, MPA  
Assistant Vice President for Student Life

Lorraine Terracina, PhD  
Visiting Associate Professor and former Dean of Student  
Affairs

Carl Rosenberg, PhD, MS  
Clinical Assistant Professor  
College of Medicine

Sarah A. Jones  
Student  
School of Public Health

**Staff Assistant:**  
Judith Ruddock



# CHAPTER ONE

## THE MISSION SETS THE INSTITUTIONAL DIRECTION

### Mission, Vision, and Values Statement

#### MISSION

SUNY Downstate Medical Center  
Brooklyn's Academic Medical Center

- To provide outstanding education of physicians, scientists, nurses, and other healthcare professionals.
- To advance knowledge through cutting-edge research and translate it into practice.
- To care for and improve the lives of our globally diverse communities.
- To foster an environment that embraces cultural diversity.

#### VISION

We will be nationally recognized for improving people's lives by providing excellent education for healthcare professionals, advancing research in biomedical science, health care and public health, and delivering the highest quality patient-centered care.

#### VALUES

**PRIDE** – To take satisfaction in the work we do every day and to value our collective contributions to the Downstate community.

**Professionalism** We commit to the highest standards of ethical behavior and exemplary performance in education, research, and patient care.

**Respect** We value the contributions, ideas, and opinions of our students, coworkers, colleagues, patients, and partnering organizations.

**Innovation** We research and develop new and creative approaches and services for the anticipated changes in healthcare.

**Diversity** We embrace our rich diversity and commit to an inclusive and nurturing environment.

**Excellence** We commit to providing the highest quality of education and service to our students, patients, and community by holding ourselves, our coworkers, and our leaders to high standards of performance.

### STANDARD 1 MISSION AND GOALS

As a medical university, SUNY Downstate Medical Center has a highly focused mission. The Work Group found that the mission is expressed through a statement that is succinct, has well-defined goals, and is reflective of institutional values and aspirations. In addition, all of Downstate's constituent colleges and schools have developed mission statements that reflect their own unique foci and that respond to their own specialty accrediting bodies while embracing Downstate's overarching mission. Because Downstate functions under the umbrella of the State University of New York, its mission is in congruence with the mission of SUNY.

As discussed throughout the *Self-Study Report*, Downstate's statement of mission, vision, and values guides and reflects all of Downstate's educational offerings. It also drives Downstate's scholarly and scientific pursuits, its strategic planning and resource allocation efforts, and the wide-ranging activities and services that provide support for students.

At the time of its founding in 1860 as the collegiate division of Long Island College Hospital, Downstate's mission focused exclusively on educating students for careers as physicians. Over the years, that singular mission has expanded. In the 1960's, Downstate broadened its educational offerings to

include a wider range of healthcare professionals and added colleges of Nursing and Health Related Professions, a School of Graduate Studies, and a teaching hospital to enhance clinical training. The educational focus expanded still further in 2008 with the launch of the School of Public Health.

As part of its ongoing assessment processes, in 2008-2009 Downstate revisited its Mission Statement and amended it to better reflect the campus's multiple facets and integration of health education with research, patient care, and social impact goals. The language was crafted to be more accessible than that of the previous mission statement, while retaining the original's core messages. The revised statement was developed through a collaborative process involving representative campus stakeholders. Led by Downstate's Department of Policy and Planning, discussions focused on essential elements of Downstate's mission, as well the relationships between faculty, students, and staff, and the community served. The document went through multiple revisions, with input at every level, before presentation to the campus president and senior leadership, and then to the broader campus community. The revised statement, which includes sections on "Vision" and "Values," was formally approved by Downstate's Campus Council. In 2012, the Mission Statement was again reviewed and approved by Downstate's new leadership.

## MISSION, VISION, AND VALUES STATEMENT

SUNY Downstate's overarching mission statement incorporates the three components that traditionally define an academic medical center – education of the next generation of health professionals, biomedical research, and patient care. The statement also incorporates additional qualities that define Downstate: commitment to community and social impact, providing access to educational opportunity, and embracing and promoting diversity (See Appendix B, *Diversity Report*). Throughout its history, Downstate has been defined, shaped, and strengthened by the immigrant experience – just as Brooklyn has been – and its guiding principles reflect Downstate's location in the center of the nation's most diverse urban location. They also reflect a commitment to excellence, compassion, service, and integrity.

## MISSION INTEGRATION WITH CAMPUS GOALS AND WITH INTERNAL AND EXTERNAL CONSTITUENCIES

Each strand of the mission statement captures a thematic goal that defines Downstate:

### To provide outstanding education of physicians, scientists, nurses, and other healthcare professionals:

Downstate sponsors 24 health- or science-focused programs across its five colleges and schools, enrolling over 1,800 students. The campus is a significant contributor to the healthcare workforce, both locally, regionally, and nationally. According to the Federation of State Medical Boards, Downstate is fourth among the nation's allopathic colleges of medicine in the number of graduates (8,613) having an active license to practice medicine in the United States. Locally, this translates into Downstate having graduated more physicians practicing in New York City than any other medical school. An estimated one of every nine physicians practicing in New York City and one of every three physicians

practicing in Brooklyn graduated or trained at Downstate. Graduates of Downstate are also leaders in educating the next generation of physicians. For example, Downstate's College of Medicine ranks 12th out of 145 accredited allopathic U.S. medical schools in the number of graduates who hold faculty positions and 23rd in the number of alumni who are department chairs. The College of Nursing and the College of Health Related Professions provide a full range of professional health education that reflects the opportunity for individual choice and the needs of society. In 2015, data released through the U.S. Department of Education's College Scorecard demonstrated that graduates of Downstate's BS programs scored highest in the nation for career earnings 10 years after graduation, based on IRS data (higher than Harvard, Princeton, and Yale.) In recognizing the need to study the impact of health issues worldwide, the School of Public Health includes a focus on global health. The School of Graduate Studies is in the vanguard of preparing students for careers in the emerging field of nanotechnology medicine and science.

### To advance knowledge through cutting-edge research and translate it into practice:

Downstate maintains a significant research enterprise that includes basic and applied research across numerous fields of investigation and has contributed significant advances to scientific understanding and treatment of disease. Downstate is honored to have had a Noble Laureate, Dr. Robert Furchgott, who served on the faculty from 1956 until his death in 2009. Dr. Furchgott's identification of nitric oxide as a signaling molecule important in vascular health revolutionized treatment for heart disease, stroke, impotence, and other disease. The first MRI machine capable of taking full-body human images was built at Downstate; its inventor, Dr. Raymond Damadian, was awarded the National Medal of Technology by President Ronald Reagan.



Dr. Robert F. Furchgott was awarded the Noble Prize in 1998 for research conducted at Downstate.

The ability of MRI technology to aid in disease diagnosis has literally transformed the practice of medicine. More recently, current faculty member Todd Sacktor discovered a molecule in the brain that is vital for memory retention, a finding that the journal *Science* identified in 2006 as one of the top ten scientific discoveries for that year. In 2009, Dr. Sacktor's research was profiled in a page one article in the *New York Times*. Dr. Bernice Porjesz, professor of psychiatry and behavioral science, and director of the Henri Begleiter Neurodynamics Laboratory, was awarded \$35 million in 2008 and an additional \$36 million in 2014 by the National Institutes of Health for her research on the genetics of alcoholism.

To foster the growth of the biotechnology industry in Brooklyn, Downstate created an Advanced Biotechnology Incubator for early-stage companies; and a second, more expansive space on the Brooklyn waterfront for mature companies requiring manufacturing space. Called BioBAT (because it is housed at the Brooklyn Army Terminal), this project launched in 2010 at a ceremony hosted by New York City's then mayor, Michael Bloomberg. In 2014, New York State Governor Andrew Cuomo announced that Downstate's biotechnology initiatives would be among the founding campuses involved in *StartUp New York*, an economic development campaign that creates tax-free areas associated with colleges and universities across the state. Among the businesses approved for participation under Downstate's sponsorship are CMP Scientific Corporation, which is expected to create 22 new jobs while investing \$4.25 million, and Modern Meadow Inc., which will create 15 new jobs and invest \$6.5 million.

**To care for and improve the lives of our globally diverse communities:**

Through its clinical care activities and programs of service learning and community outreach, Downstate has an immediate impact throughout Brooklyn. Downstate's University Hospital of Brooklyn (UHB) is a leader in providing access to quality quaternary care and a safety net teaching hospital that serves some of the most vulnerable populations in New York State. Its immediate service area includes 12 zip codes in four neighborhoods with over one million residents. Minorities comprise nearly 90 percent of the service-area population; nearly half of the residents are foreign born; and almost two-thirds of UHB's inpatient discharges are Medicare or Medicaid patients.

Outreach and community engagement at Downstate are broad based. Downstate has strong involvement with churches, senior citizen centers, local schools, and community groups. Many of Downstate's academic programs offer opportunities for service-learning, and some courses include community engagement as a requirement.

One broad-based service-learning project is the Brooklyn Free Clinic (BFC). Students from Medicine, Nursing, Health Related Professions, and Public Health volunteer at this student-founded and student-run project, which provides care and

health maintenance screening to enrolled patients, most of whom are uninsured. Students also volunteer in a wide array of community activities facilitated by Downstate's Center for Health Promotion and Wellness, which in 2015 reached close to 11,000 individuals through health screenings, community lectures, and support groups. The School of Graduate Studies has teamed up with SUNY Administration and the National Academy of Sciences to mentor children in local middle schools in science and math. The School of Public Health sponsors numerous community outreach programs and the opportunity to pursue a 200-hour field experience project focusing on community issues. It also operates the "Global Health Elective in Developing Countries" for fourth-year medical students, with some 400 medical students having participated in projects in 41 resource-poor countries since the elective's inception. In 2014, Downstate was recognized by President Obama's Higher Education Community Service Honor Roll.

**Downstate understands that as an academic medical center, it has a responsibility to train and mentor future healthcare professionals and scientists who understand and value diversity.**

Downstate also sponsors a number of programs to address health disparities. The NIH-funded Brooklyn Health Disparities Center, for example, is a partnership between Downstate, the Arthur Ashe Institute for Urban Health, and the Brooklyn Borough President's Office. The center's goals are to address health inequities, disseminate evidence-based findings, and increase engagement among academics, community members, and policy makers. In 2014, Downstate established the President's Health Disparities Research Fund, with the goal of challenging faculty to develop innovative projects targeting the medical and social priorities of the communities that Downstate serves.

**To foster an environment that embraces cultural diversity:**

Downstate has a genuine commitment to diversity that is manifested by its mission, as well as by SUNY and Downstate policy and policy implementation. Downstate understands that as an academic medical center, it has a responsibility to train and mentor future healthcare professionals and scientists who understand and value diversity. The campus strives to achieve diversity in several ways: by cultivating a culturally diverse learning community that includes faculty, students, and staff; providing a workforce that serves the local Downstate community and reflects the diversity of the population; and contributing to the national pool of underrepresented minority health professionals.

Downstate's main campus is located in a culturally and racially diverse urban community. The student body, as well as Downstate's faculty, staff, and administration, are

reflective of the community served. In 2014, Downstate received the Higher Education Excellence in Diversity Award from *Insight* magazine; its chief diversity and inclusion officer, Kevin Antoine, Esq., was also recognized by the magazine with its 2014 Visionary Diversity Award.

Downstate contributes significantly to diversity in New York State's health professions labor force. The College of Medicine's 2014 entering class, for example, speaks 36 different languages and over 50 percent of the college's total student body is first- or second-generation American. Downstate is also a gateway to new opportunities for low-income and working-class New Yorkers. Historically, many Downstate students have been the first in their family to attend college, and many come from economically disadvantaged families. Downstate's colleges and schools view training students who will return to their diverse communities to work after graduation as central to their mission.

According to the Association of American Medical Colleges, Downstate's College of Medicine ranks in the 96th percentile in terms of African-American graduates. It is sixth nationally in the number of African-American faculty members holding a position at a medical school. The College of Nursing maintains close to 70 percent student diversity – while nationally, only 12 percent of the nation's 2.9 million nurses are minority group members. Sixty-two percent of faculty in the College of Nursing are ethnically and culturally diverse. The School of Public Health student enrollment is 70 percent minority.

Downstate sponsors outreach programs to encourage high school and college students to pursue careers in medicine or science. Programs range from science enrichment, mentoring, and career-day programs for local high school students to partnerships and formal affiliation agreements with local colleges.

The Office of Minority Affairs, for example, offers an Undergraduate Summer Research Program in conjunction with the School of Graduate Studies. The Arthur Ashe Institute for Urban Health brings students from 13 local high schools to campus for science enrichment classes through its Health Science Academy. Downstate also participates in programs with two neighboring CUNY colleges: A BS to MD program with Brooklyn College, and RISE, a mentoring program for underrepresented students in the biomedical sciences, with Medgar Evers College.

Downstate is also part of Urban Universities and Health (UUH), a project that aims to improve the health of urban communities through workforce development. UUH is funded by the Association of American Medical Colleges, the Coalition of Urban Serving Universities/ Association of Public and Land Grant Universities, and the National Institutes of Health. Downstate is one of only five institutions nationwide selected to participate in this project.

Student clubs are another indicator of Downstate's commitment to diversity. The 2014 roster of active clubs includes the Asian Pacific American Medical Association; Chinese American Medical Society; Daniel Hale Williams Society (Downstate's chapter of the Student National Medical Association for African-American students); Downstate Christian Fellowship; Downstate's Organization of South Asian Students; the Global Health Club; Latino Medical Student Association; Lesbian, Gay and Bisexual People at Downstate; the Maimonides Society; and the Muslim Student Association.

## COMMUNICATION OF MISSION AND GOALS

SUNY Downstate's mission and goals are referenced throughout the institution's written and oral communications in a broad array of venues. This includes the Downstate website, its college bulletins, student and faculty handbooks, and assessment reviews. Downstate's president articulates Downstate's mission at Board of Trustee meetings and College Council meetings, as well as at faculty meetings, college-wide functions such as Commencement, community and Town Hall meetings, conferences and symposia, and in advocacy meetings with elected officials. Downstate's mission is also discussed at divisional and departmental levels and at student and employee orientations. Downstate's deans and academic officers, the Division of Student Affairs, and the Offices of Policy and Planning and Institutional Advancement ensure that changes affecting the center's institutional mission and goals are brought to the attention of the Downstate community.

## MISSION, GOALS, AND STRATEGIC PLANNING

Each college and school, along with Downstate as a whole, engages in a strategic planning process (See *Strategic Intent - The Path Forward*, under separate cover) that is facilitated by the Office of Policy and Planning and updated regularly. Each academic plan begins with a review of the college's or school's mission, determines goals within the context of that mission, and lists planned projects to support those goals. Funding for projects is reviewed and requested as part of Downstate's annual budgeting process, a rigorous exercise that entails extensive inspection of expenses by each college, school, and department within Downstate.

At its heart, Downstate's mission focuses on students and helping them achieve success. Downstate's vision of providing "outstanding education of physicians, scientists, nurses, and other healthcare professionals" is reinforced and supported by each college and school through annual assessment and evaluation processes, as reviewed further in this *Self-Study Report*.

# CHAPTER TWO





## INTEGRITY – AND THE RELENTLESS PURSUIT OF HONESTY AT ALL TIMES – SETS THE TONE

### STANDARD 6 INTEGRITY

In the fulfillment of its mission, SUNY Downstate is guided by humanistic values of compassion and respect, academic values of excellence and creativity, professional values of integrity and responsibility, and by a commitment to academic and intellectual freedom. Moreover, as discussed in the Mission and Goals chapter, the institution is sensitive to the cultural and ethnic diversity of the urban environment in which it is located. SUNY Downstate upholds a special responsibility to address the difficult health-related problems found primarily in urban areas and to serve those who are largely underserved.

#### INTEGRITY AND CAMPUS CULTURE

Integrity – in its policies, its practices, and its relationships with students, faculty, and community constituents – lies at the heart of policy and decision making at SUNY Downstate. It is implemented and enforced through a hierarchy of governance and reporting structures. These include the SUNY Board of Trustees, the Downstate president and senior management for each major operational area, the deans and chairs of each Downstate college and school, faculty and staff governance, and student councils.

The culture of integrity is underscored by fair and impartial policies, guidelines, and expectations set forth for faculty, staff, students, administration, and members of Downstate's governance structures. Ethical obligations are outlined in a number of publications, including the *Student Handbook*, the *Faculty Handbook*, the *ACT Handbook*, and the *SUNY Board of Trustees Handbook*, as well as the *New York State Public Officers Law Sections 73, 73a, and 74*. These documents contain guidance on conflict of interest policies for SUNY and Downstate's governing bodies.

As an institution of higher education and a healthcare facility, Downstate complies with all state and federal laws, including the Family Educational Rights and Privacy Act (FERPA), the Clery Disclosure of Campus Security Policy and Campus Crime Statistics Act, the New York State Human Rights Law, and the Health Insurance Portability and Accountability Act (HIPAA), among others.

Policies regarding all aspects of academic teaching, research, service, and patient care are communicated to students, faculty, and staff during student and new employee orientation sessions, and via the Downstate website. They are periodically reinforced by centerwide e-mails and memos to senior management, deans, directors, and staff, as well as seminars on ethical practices and best practices in adherence to campus, SUNY, and New York State ethics policies. Downstate also adheres to SUNY policies, which can

be found through the *Policy, Procedures, SUNY Regulation and Forms and Appendix Library* on the SUNY website.

Offices and structures charged with safeguarding campus integrity, translating policies into practice, and protecting due process include the Faculty Governance structure; the Office of Labor Relations; the Office of Diversity and Inclusion; the Office of Compliance and Audits; the Institutional Review Board for research projects; and the Office of Student Affairs. Infractions, grievances, and appeals are handled according to existing procedures to swiftly address any concerns that threaten the campus culture of integrity.

**Founded in 1988 and renamed in 2012 to honor a donor, the John Conley Division of Medical Ethics and Humanities is a center for instruction and research that brings the contributions of ethics, philosophy, law, history, religious studies, the social sciences, and literature to bear upon traditional and contemporary problems in health care and the life sciences.**

The Compliance Program, under the direction of Renee Poncet, vice president for corporate compliance and audit services, defines the conduct expected of colleagues and employees, provides guidance on how to resolve questions regarding legal and ethical issues, and oversees the mechanism for reporting possible violations of law or ethical principles within Downstate. The Compliance Program is conducted under the auspices of the Compliance and Audit Oversight Committee. It oversees compliance with the *Code of Ethics and Business Conduct*, which all Downstate employees are expected to read, understand, and comply with.

Downstate maintains a separate division for teaching ethics and the medical humanities. Founded in 1988 and renamed in 2012 to honor a donor, the John Conley Division of Medical Ethics and Humanities is a center for instruction and research that brings the contributions of ethics, philosophy, law, history, religious studies, the social sciences, and literature to bear upon traditional and contemporary problems in health care and the life sciences. It provides course instruction to all of SUNY Downstate; educational services as well as ethical review are also available to all affiliated institutions. The John Conley Division of Medical Ethics and Humanities also sponsors lectures by distinguished visiting scholars, mini-seminars, and campus-wide programs that explore ethical issues.

There are other activities as well that illustrate SUNY Downstate's commitment to ethical behavior. For example, the College of Medicine and the College of Nursing each host a "White Coat Ceremony" for entering students to emphasize the importance of relating to patients in an ethical and caring manner. Each year, the campus participates in the State Employees Federated Appeal, which supports more than 200 local and national charities.

## ACADEMIC INTEGRITY

### Students

All of Downstate's colleges and schools define academic integrity and specify the process for resolution of academic misconduct and grievances and appeals. These are detailed in the *Student Handbook*, which is produced annually and distributed to every student by the Office of Student Affairs. The *Student Handbook* (under separate cover) includes sections on students' rights, responsibilities, evaluations, grading policies, and graduation requirements. Student grievances are addressed promptly, appropriately, and equitably through appeals committees established by each academic unit, with the Office of Student Affairs helping to coordinate and safeguard the process.

The School of Graduate Studies covers academic integrity in its National Institutes of Health-mandated seminar course, "Responsible Conduct in Research," required of first-year students while doing laboratory rotations, prior to the qualifying exam and prior to entering the thesis laboratory. "Responsible Conduct in Research" is an interactive, case-based course that covers plagiarism, authorship, intellectual property, mentorship, and appropriate care and use of animal subjects. Integrity is also ensured through the process of peer review of the initial thesis proposal and its specific aims by a thesis advisory committee. This committee, comprised of School of Graduate Studies faculty, offers instructions to students on ethical as well as scientific issues related to scientific writing at an early stage of thesis development.

Students in the colleges of Nursing and Health Related Professions and in the School of Public Health are advised of their ethical and professional responsibilities through required curricula and the dissemination of profession-specific codes of ethics and professional behaviors.

### Student Evaluation and Promotion; Protection from Abuse

Each college and school maintains a committee that reviews students' academic records and recommends promotion, probation, and disciplinary action for infractions of academic integrity. Each college's and school's committee appeals process ensures that students are given a fair hearing for any disciplinary infraction or academic inadequacy that may arise. If the committee process does not resolve the issue, it will be escalated to the Division of Student Affairs.

All of Downstate's colleges and schools have policies to protect students from mistreatment and inappropriate behavior on the part of faculty, staff, or administration.

Student feedback and concerns are encouraged and enabled in a number of ways. Each college and school has a Student Council that provides students with a forum for feedback and airing concerns. The leadership of the Student Council, in turn, has access to administration and faculty for discussion of major concerns. Students may also discuss issues with their faculty advisor and express their opinions through course evaluations.

### Faculty

Downstate maintains fair and impartial practices in the hiring, evaluation, and dismissal of faculty and employees. Each of Downstate's colleges and schools maintains its own faculty governance structure that encourages faculty feedback and addresses faculty concerns through policies, procedures, and faculty-membered committees. In addition, each faculty member participates in meetings with his or her department chair on an ongoing basis and has access to his/her respective dean for discussion of policy on an as-needed basis.

Faculty rights and responsibilities relative to teaching effectiveness and student relationships are reviewed in the *Faculty Handbook*, as are guidelines for adjudication of disputes or violations. Downstate seeks to maintain an atmosphere sensitive to detection and prompt termination of discrimination by faculty. Faculty and all members of the campus are expected to be alert to discrimination, harassment, or disparagement of students or colleagues based upon gender, race, sexual orientation, or religious affiliation.

Faculty may address grievances and personnel issues through access to Downstate's Office of Faculty Affairs and Professional Development, established in 2014, and union representation through United University Professions. Links to current bargaining unit agreements are maintained by the Governor's Office of Employee Relations.

## ACADEMIC FREEDOM

SUNY Downstate and its constituent schools are dedicated to academic and intellectual freedom, and both faculty and students enjoy autonomy in their academic pursuits. These freedoms are protected under the *Policies of the Board of Trustees* (See Appendix C), as well as through Downstate-specific policies governing academic endeavors, faculty and college governance structures, and union contracts (all members of the Downstate faculty are members of the United University Professions). In addition, the Committee on Academic and Professional Qualifications for each college and school encourages and supports these freedoms.

The SUNY Faculty Senate, which is part of the SUNY governance structure, strongly endorses academic freedom.

## RESEARCH INTEGRITY AND COMPLIANCE

Compliance with campus, state, and federal policies and regulations in the conduct of research is a major responsibility of all investigators and their staff, as well as the

institution itself. Downstate is committed to the values of integrity, accountability, and upholding the highest ethical standards in all aspects of its research programs. Downstate's research compliance program includes formal policies to review allegations of scientific misconduct. Its core areas include steps to review alleged misconduct in accord with Public Health Service regulations (42 CFR Part 50, Subpart A).

The Office of Scientific Affairs and Biotechnology maintains web pages devoted to "Conflicts of Interest" and "Research Integrity and Compliance" with links to well-developed policies. Policy related to patents, inventions, and intellectual property rights are spelled out in the *Policies of the Board of Trustees*.

Downstate works closely with the SUNY Research Foundation's Office of Compliance Services, which provides expertise and guidance across the SUNY system in the areas of ethics, risk management, internal controls, and a wide array of programmatic areas. It helps to coordinate system-wide policy and procedure development, as well as training in such activities as conflict of interest, investigations, effort reporting, cost transfers, and export controls.

#### INTEGRITY AND COMMITMENT TO DIVERSITY

Throughout Downstate, cultural competency, diversity, and inclusivity are values that are held in the highest regard, and these permeate all aspects of the educational enterprise. Diversity is achieved through a variety of mechanisms, including, but not limited to, Admissions Committees' decisions; centerwide policies; cultural competency training; and enforcement by the offices of Human Resources, Labor Relations, and Diversity and Inclusion. The Office of Diversity and Inclusion is tasked with working to promote an atmosphere of civility, collegiality, and respect for diversity and cultural differences. The Work Group found that Downstate is committed to upholding all federal, state, and SUNY laws and regulations pertaining to equality of opportunity for women, members of minority groups, veterans of the Vietnam era, disabled veterans, and people with disabilities. Downstate's commitment to diversity is also illustrated through enrollment data.

#### INTEGRITY IN COMMUNICATIONS

Downstate communicates to its internal and external audiences, key stakeholders, and regulatory bodies through a variety of mechanisms.

Downstate's public relations and advertising announcements provide honest and truthful information about campus programs, and are accessible to students and internal and external stakeholders. Information is readily accessible via Downstate's website, as well as from public-facing departments such as Institutional Advancement, the Division of Student Affairs, and the dean's offices of each college and school. "Student Right to Know

Consumer Information" is maintained on the Financial Aid and Prospective Students pages. Information on institution-wide assessments, including graduation, retention, certification and licensing pass rates, and other outcomes is available to prospective students on request through Student Affairs and the respective colleges and schools. Required and elective courses are offered with sufficient availability to allow students to graduate on time. Student catalogs are available via the web and each catalog contains an index. Access to archived copies of catalogs is available through the Department of Institutional Advancement.

Changes and issues affecting institutional mission, goals, sites, programs, operations, and other material changes that need to be publicized are posted accurately and in a timely manner via Centerwide emails and the news section of Downstate's website. Issue-related information that does not require public posting is accurately communicated to regulatory agencies via the appropriate Downstate compliance office.

#### Communications to and about the Middle States Commission on Higher Education

Downstate communicates to the Middle States Commission on Higher Education and other accrediting bodies by submitting annual profile information, substantive change requests, and other evaluative reports as required and in fulfillment of applicable MSCHE standards.

#### INTEGRITY AND CONTINUOUS POLICY ASSESSMENT

Downstate routinely reviews and updates its policies. These are dated and include a list of reviewers. Policies are posted on the Downstate website by Biomedical Communications, and are accessible to all campus members who log in through a campus server. Policies that affect the Student Conduct Code must be reviewed and approved by Downstate's College Council before formal implementation.



## LEADERSHIP IS PRACTICED NOT SO MUCH IN WORDS AS IN ATTITUDE AND ACTIONS

### STANDARD 4: LEADERSHIP AND GOVERNANCE

### STANDARD 5: ADMINISTRATION

SUNY Downstate operates within a broad framework of policies and structures established by New York State Law and by SUNY. Downstate also maintains its own set of administrative units and governance bodies that have a strong common interest in advancing Downstate's mission and attaining its goals.

#### SUNY GOVERNANCE

The overarching administrative body that governs SUNY Downstate Medical Center – as well as the other 63 campuses that together comprise the SUNY system – is the Board of Trustees. (See Appendix C, *SUNY Policies of the Board of Trustees*.) The Board of Trustees does not oversee the routine affairs of any individual SUNY campus. Rather, it is the policy and practice of the Board to allow each campus to have autonomy, as feasible, with regard to its organizational structure and administrative practices. The Board does, however, set broad policies and future directions for the university. The Board is an advocate for SUNY, and assists in making the case to the New York State legislature for resources to sustain the institution. The SUNY Board is

TABLE 1

#### SUNY BOARD OF TRUSTEES

- |                                  |                     |
|----------------------------------|---------------------|
| • H. Carl McCall<br><i>Chair</i> | • Eunice A. Lewin   |
| • Joseph Belluck                 | • Marshall Lichtman |
| • Byron W. Brown                 | • Stanley S. Litow  |
| • Eric Corngold                  | • Thomas Mastro     |
| • Henrik Dullea                  | • Richard Socarides |
| • Ronald Ehrenberg               | • Carl Spielvogel   |
| • Angelo Fatta                   | • Cary Staller      |
| • Peter Knuepfer                 | • Nina Tamrowski    |
|                                  | • Lawrence Waldman  |

composed of 18 members, 15 of whom are appointed by the governor of New York State and serve staggered seven-year terms, and three of whom serve in their capacity as elected presidents of SUNY's Student Assembly, University Faculty Senate, and Faculty Council of Community Colleges. (See Table 1, *SUNY Board of Trustees*.) The responsibilities of the Board of Trustees are set forth in Article 8 of the New York State Education Law. Section 359 of Article 8 stipulates that the Board must submit an annual report of its activities and recommendations, including a summary of 1) SUNY's operations and accomplishments; and (2) SUNY's revenues and expenditures, to the New York State Board of Regents, the Governor, the State Comptroller, and the Legislature.



President John F. Williams, MD, EdD, MPH, FCCM

Much of the work of the Board occurs in meetings of standing and special committees. Like formal meetings of the Board, meetings of the standing committees are subject to the Open Meetings Law and are held in public session unless an executive session is called. The role of the standing committees is advisory or preparatory only, and subsequent to deliberations, the committees recommend actions for consideration and authorization by the Board. Both Board and committee meetings are available as live webcasts, and archived copies of these are available on the SUNY website. Downstate's president and senior leadership regularly attend and present at the Board's standing committee on Academic Medical Centers and Hospitals, as well as at other committee and Board meetings as appropriate.

While the campuses function independently, they are coordinated through System Administration under the leadership of the chancellor, who is appointed by the Board of Trustees and serves as the chief administrator for the SUNY System. The offices of System Administration provide guidance and advice, as well as overall structure to the University's 64 campuses. For example, the Office of Finance and Budget develops the overall budgets for the individual campuses and maintains an audit system for expenditures. However, the campuses themselves determine how these budgeted resources are apportioned internally, as well as the specific accounting procedures that are used. Similarly, the Office of the Provost reviews requests for new programs and serves as liaison with the New York State Education Department as the approval process progresses, but it is the campuses themselves that decide which programs will be carried and how each will be administered. Additional examples of SUNY Central Administration offices include Diversity, Equity, and Inclusion; Communications; Government Relations; Institutional Research and Data Analytics; and Internal Controls, among others. There is bi-directional communication between these central offices and their counterparts at the local campus level. Additionally, Downstate administrative staff routinely sit on SUNY-wide committees. For example, Downstate's chief diversity officer sits on a SUNY taskforce examining best practices on enhancing diversity across the system.

Dr. Nancy L. Zimpher was appointed the twelfth chancellor of the University in 2009. Through her strategic plan for the University, *The Power of SUNY*, Chancellor Zimpher leads wide-ranging initiatives in key areas, including research and innovation, energy, health care, global affairs, and the education pipeline. She has been a vocal advocate for legislative reforms that ensure SUNY can provide broad access to excellence in higher education and has championed SUNY's impact as an engine of innovation and economic revitalization in every region of the state.

#### DOWNSTATE GOVERNANCE AND ADMINISTRATION

While there is no local governing board of trustees for the Downstate campus, there is an advisory Campus Council consisting of nine citizens who are directly appointed by

TABLE 2

#### DOWNSTATE CAMPUS COUNCIL

- Dr. Philip Abramowitz
- Michael Connors, Esq.
- Johnson Ho  
*Voting Student Member*
- Kimberly Laughton  
*Student Member*
- Dr. Constance Shames
- Dr. Garry Sklar
- Rev. Elgin Watkins
- Dr. Marian Zavala

the Governor for overlapping seven-year terms, plus an annually elected student representative. The members represent a broad spectrum of the Brooklyn community. Though its responsibilities are primarily advisory, the Council meets regularly to review matters that affect the campus. Council members are invited to attend meetings both at Downstate and at SUNY headquarters in Albany. (See Table 2, *Downstate Campus Council*.)

The Campus Council does not have fiduciary or fundraising responsibilities. It has advisory responsibility for review of the budget and all major plans, enhancement and improvement of the faculty, expansion or constriction of academic programs, review of student activities and housing, and naming of buildings and grounds. At each Council meeting, the president and key campus leadership brief the Council on current activities and on the progress of new programs. The responsibilities of the Council are detailed in the *Handbook of the Association of Council Members and College Trustees of the State University of New York*. (Available in the Document Room.)

#### PRESIDENTIAL LEADERSHIP

Like all SUNY presidents, the president of Downstate is formally appointed by the SUNY Board of Trustees and is responsible to the Board and the chancellor. The president serves as the chief administrative officer of the campus, with overall responsibility, authority, and accountability for campus management and in setting campus direction.

John F. Williams, MD, EdD, MPH, FCCM, was appointed the sixteenth president of SUNY Downstate Medical Center in August 2012. He brings a deep-seated commitment to academic medicine and to Downstate's role as Brooklyn's hub of health education, biomedical research, and patient care.

Dr. Williams recently announced his intention to step down as president of SUNY Downstate and Chancellor Nancy Zimpher announced the launch of a formal search for a new president in February 2016. In her announcement, Chancellor Zimpher said, "Over his tenure as president of Downstate Medical Center, Dr. Williams has led our community to overcome major obstacles and ensure that both the academic medical university and hospital can continue to bring excellent medical education to its students, as well as excellent and much needed healthcare to the people of Brooklyn. Downstate is one of the primary sources of medical professionals in New York City and

because of its location, serves a population that would not otherwise have access to medical services. We at SUNY have made it a priority to support and lift up the work that Dr. Williams and Downstate do because we believe in the mission that drives the institution.”

The president is responsible for the administration of the campus, including strategic direction; determination of the basic organizational structure of campus administration; appointment of administrative officers, including deans; appointment of faculty and staff; development of policies and procedures for the conduct of campus affairs; assisting in generating resources needed to sustain and improve the institution; and oversight of the institutional budget. Since his appointment, President Williams has worked to achieve high levels of excellence across Downstate’s multiple enterprises. He has enhanced academic structures, engaged Downstate in long-term planning to develop new models of patient-centered care under health reform, established policies and practices to improve infrastructure and drive sustainability, and launched forward-looking initiatives to ensure responsible stewardship of Downstate’s financial resources.

During Dr. Williams tenure, he focused on developing research centers of excellence, and implementing a campus-wide focus on research examining health equity and the elimination of health disparities, which are prevalent in Downstate’s urban environment. Another priority was cross-disciplinary, translational research and collaboration with other SUNY campuses and institutions. For example, the Downstate campus is co-leader of the SUNY Health Network, one of the six new SUNY Networks of Excellence, which provide funding for multi-campus research projects.

An anesthesiologist by training, President Williams is a fellow of the American College of Critical Care Medicine and a member of numerous professional societies. He holds master’s degrees in science and in public health from the London School of Economics and Yale University, and doctorates of medicine and education from George Washington University (GW). Dr. Williams served at GW from 2003 to 2011 in successive leadership positions that included dean of the school of medicine and senior vice provost and vice president for health affairs.

Dr. Williams’ new senior leadership structure includes the appointment of Astra Bain-Dowell, MPA, as executive vice president and chief operating officer and Melanie F. Gehen, MHSA, as interim vice president for finance and chief financial officer, and vice president for academic fiscal affairs. Joseph P. Merlino, MD, MPA, has been appointed vice president for faculty affairs and professional development. Promotions include Jeffrey S. Putman, EdD, to vice president and dean of students, and Dorothy Fyfe to associate vice president of policy and planning. (See Appendix D, Organizational Charts.)

President Williams works collaboratively with the senior leadership team to set academic and operational objectives and assess programs. The senior leadership team, along with the deans and department chairs, consults with President Williams on a variety of matters and ensures that the interests and concerns of various internal and external stakeholders are taken into account. Decision making is guided by Downstate’s mission and goals, as well as by statutory regulations. Presidential communication is accomplished through face-to-face and committee meetings; internal and external events; scheduled faculty and staff meetings; and print and electronic memos to the campus community on such subjects as policy, appointments, and important initiatives.

### THE COLLEGES: LEADERSHIP, GOVERNANCE, AND ADMINISTRATION

The dean of each college or school serves as the chief administrative officer of his or her respective academic unit. All of the deans are academically and experientially qualified to facilitate the accomplishment of their college or school’s mission, goals, and expected program outcomes. The five deans are appointed by the president of Downstate. They collectively meet as a group with the president once a month, as well as individually, giving them ready access to the president.

Organizationally, the deans of the colleges are of equal rank; therefore, discussion among them is unencumbered and cross-college collaboration is facilitated. Administrative leaders, including deans, associate deans, and program chairmen/directors possess the appropriate knowledge, skills, and experience to effectively fulfill their responsibilities. The administrative structure, services, and management of each of the schools and colleges is evaluated by their respective deans. Communication between the colleges and the departments that provide academic support is frequent and direct.

The deans are aided in the administration of their academic units by a faculty governance structure that directs the academic program, ensures that the curriculum is periodically reviewed in alignment with SUNY assessment policy, prepares for accreditation visits, evaluates faculty for promotion and tenure, and establishes guidelines for admissions, promotion, and graduation. The organizational structure of each college and school also relies on input from associate deans, program chairs/directors, and faculty committees, and provides multiple opportunities for shared leadership and expanded faculty involvement in administration and governance. Faculty are involved in many aspects of academic administration, including resource identification, outcome assessment, mission review, and strategic planning.

#### College of Medicine

The College of Medicine is comprised of 18 departments; three are basic science departments and 15 are clinical departments. The dean of the College of Medicine, Carlos N. Pato, MD, was appointed in July, 2015, following

a national search. Dr. Pato is responsible for the overall direction of the college's academic program and for setting standards of excellence. The dean, supported by a strong team of administrators, supervises and evaluates the faculty, department chairs, and staff of the college; approves all faculty appointments and promotions; manages the college's budget; and oversees the selection, evaluation, and promotion of its students. The staffing and organization of the dean's office is reasonable, effective, and understood by faculty and students.

Dr. Pato, a renowned clinician and researcher into the genetics of neuropsychiatric disorders, came to Downstate from the Keck School of Medicine at the University of Southern California, where he had served as the Franz Alexander Professor of Psychiatry and chair of the Department of Psychiatry and Behavioral Sciences. Prior to that, he had held a number of prestigious academic positions, including vice chair of psychiatry and associate dean for clinical affairs at SUNY Buffalo and associate chief of staff for research at the Washington, DC, Veterans Administration Medical Center.

Dr. Pato's research has focused on genomic psychiatry with an emphasis on population-based genetic studies. At Keck, he and colleagues he recruited received more than \$90 million in funding from the National Institutes of Mental Health.

Dr. Pato oversees graduate medical education as well as strategy and research content for the academic departments. He continues to build on the College of Medicine's accomplishments since the last decennial Middle States site visit, including successful, full accreditation by the Liaison Committee on Medical Education; continued implementation of the college's strategic plan; expanding the depth and breadth of the research effort; and focusing on the student learning experience and supporting student success and diversity.

#### **School of Graduate Studies**

The dean of the School of Graduate Studies (SGS) is Mark Stewart, MD, PhD, who was installed in January 2010 as the fourth dean of the School of Graduate Studies and vice dean for research. As chief administrative officer for the school, Dean Stewart is responsible for its overall direction, academic program, outcomes, and standards. Dean Stewart works in concert with the dean for the College of Medicine: The faculty and professional staff in the School of Graduate Studies are appointed at the department level through the College of Medicine; therefore, all faculty in the SGS also hold appointments in the College of Medicine.

The administrative staff of the School of Graduate studies includes a registrar and an admissions director. There are numerous activities administered through the main office of SGS, including such functions as graduate student admissions, registration, course scheduling and grading,

and thesis review procedures. In addition to the PhD program, the School of Graduate Studies also administers the MD/PhD program.

The interdepartmental organization of the School of Graduate Studies reflects the interdisciplinary nature of modern biomedical research. It also encourages research collaborations and consolidates educational and scientific resources. An atmosphere conducive to scholarship and research is fostered, focusing on understanding the basic biological processes that underlie human health and disease.

The School of Graduate Studies admits students to three PhD-granting programs: Molecular and Cellular Biology, Neural and Behavior Science, and Biomedical Engineering. These fully interdisciplinary programs include faculty from the following College of Medicine Departments: Physiology and Pharmacology, Cell Biology, Pathology, Neurology, Pediatrics, Medicine, Surgery, Ophthalmology, Anesthesiology, and Orthopedic Surgery and Rehabilitation Medicine. Dr. Stewart has encouraged the involvement of clinical faculty on students' thesis committees in order to improve students' understanding of the clinical relevance of their work and to foster research collaborations between basic science and clinical faculty.

Under Dr. Stewart's leadership, the school has emphasized enrolling a higher percentage of American citizens, an essential element of competitiveness for federal training grants. He has restructured the works-in-progress seminars given by students in every graduate program, making it easier to identify and remedy student or mentor deficiencies.

Dr. Stewart has also formalized a number of new programs. The MD/PhD Program in Nanomedicine is a collaborative effort with the College of Nanoscale Science and Engineering (CNSE) of the SUNY Polytechnic Institute in Albany, NY. This is an intensive seven-year program that provides hands-on training in the emerging field of nanomedicine: Students pursue their medical degree at Downstate and conduct their PhD work at CNSE in phased rotations that coordinate with their medical studies. (The MD degree is awarded by Downstate and the PhD by SUNY Polytechnic.)

Dr. Stewart has also led a number of community-facing outreach efforts. These include establishing the Brooklyn chapter of the Society for Neuroscience; teaching science in local middle schools through a collaborative NIH-funded grant with SUNY and the New York Academy of Science; collaborating with CUNY's Medgar Evers College on a five-year and \$2.2-million NIH grant for student research training.

#### **College of Nursing**

The dean of the College of Nursing (CON) is Daisy Cruz-Richman, PhD, RN, who was appointed dean in 2003 and who has served on the faculty and in a succession of administrative positions in the college since 1985.



The college offers upper-division undergraduate and graduate educational programs. Graduate MS programs include Family Nurse Practitioner, Women's Health Nurse Practitioner, Adult-Gerontology Clinical Nurse Specialist, Pediatric Clinical Nurse Specialist, Nurse Anesthesia, and Nurse Midwifery. Advanced Certificate programs include Family Nurse Practitioner and Women's Primary Care Nurse Practitioner. Two undergraduate programs are offered: the Accelerated Bachelor's Degree Program and the Registered Nurse to Bachelor of Science Program.

Dean Cruz-Richman is aided by an administrative structure that includes associate deans for undergraduate programs, graduate programs, research, and administration. The lines of communication between the dean, associate deans, and program directors are facilitated by regular meetings and an effective committee structure.

Since the last decennial MSCHE self-study, Dean Cruz-Richman has expanded program offerings and implemented initiatives that have positively impacted the quality of College of Nursing programs. She led a revision of undergraduate and graduate program curriculums to integrate new, nationwide practice competency standards set by the American Association of Colleges of Nursing for nursing education. Two programs, the NCLEX-RN Success Plan, which is a learning assessment system, and the Pre-Entry Immersion Program (PIP) have been implemented in the Accelerated BS program. Success Action plans have been implemented for the Nurse Practitioner, programs to improve student performance and outcomes on postgraduate licensure examinations.

With faculty assistance, Dr. Cruz-Richman has also enhanced the use of simulation technology as a strategy in teaching and learning throughout the curriculum. The college's Learning Resource Center has undergone major renovation and now features state-of-the-art technology that uses high fidelity, real-time interactive patient simulation.

Additional programs launched by Dean Cruz-Richman include a six-week Summer Enrichment Program designed to introduce students to the nursing profession, scholarships funded by the Robert Wood Johnson Foundation to increase the enrollment of minority students in its accelerated BS nursing program, and a White Coat Ceremony for entering nurses. The College of Nursing was one of the first 100 nursing schools nationwide to be given a grant from the Arnold P. Gold Foundation and the American Association of Colleges of Nursing (AACN) to launch this program, designed to instill a commitment to compassionate care among entering student nurses.

#### **College of Health Related Professions**

Allen Nelson Lewis, Jr., PhD, was appointed dean of the College of Health Related Professions, effective January 6, 2016. Dr. Lewis formerly headed the department

of Health Sciences at James Madison University in Harrisonburg Virginia, where he had dean-level responsibility supervising 47 full-time faculty and staff with responsibility for eight academic programs.

A strategic and critical thinker, Dr. Lewis brings a strong background in program evaluation as well as an in-depth knowledge of how to empirically measure and improve programmatic success. He holds a bachelor's degree in Rhetoric and Communication Studies and African-American and African Studies from the University of Virginia; an MS in Rehabilitation Counseling from the Virginia Commonwealth University; and a PhD in Education (Leadership/Health Services Research) from the Virginia Commonwealth University.

Dr. Lewis plans to develop and expand education programs and related educational opportunities, ranging from certificate programs to doctoral-level degrees; enhance clinical training; maintain and/or expand mechanisms to facilitate diverse student recruitment; foster faculty development, recognition, and support; and expand research, clinical, and educational opportunities, both internally and externally.

Since the last Middle States site visit, the college's Occupational Therapy program has transitioned to the MS degree, and the Physical Therapy program to an innovative combined BS to DPT degree. The college additionally provides upper-division undergraduate and graduate education in Physician Assistant (BS), Diagnostic Medical Imaging (BS), Medical Informatics (MS), and Midwifery (MS and Advanced Certificate).

Each program in the college is managed by a chairperson who is administratively responsible to the dean. The program chairs, in consultation with the program faculty and under the dean's guidance, are responsible for the selection of students, curriculum development and implementation, learning objectives, preparation and administration of budget, development of resources, and program evaluation.

#### **School of Public Health**

The dean of the School of Public Health (SPH) is Distinguished Service Professor Pascal James Imperato, MD, MPH&TM, DSc, MACP. Prior to his appointment to the Downstate faculty, Dr. Imperato held appointments at the Centers for Disease Control and Prevention, and served as a former New York City commissioner of health and as chair of the board of directors for the New York City Health and Hospitals Corporation, one of the largest public hospital systems in the country.

Dr. Imperato led the development of Public Health at Downstate from its standing as a program within the College of Medicine to independent school status in 2008 with subsequent full accreditation by the Council on Education for Public Health (CEPH). CEPH approved the

school for five MPH tracks (Community Health Sciences, Environmental and Occupational Health Sciences, Epidemiology and Biostatistics, Health Policy and Management) and three doctoral tracks (Environment and Occupational Health Sciences, Community Health Sciences, and Epidemiology).

Dean Imperato continues to expand the school's programming. In 2011, the school established a Center for Global Health to enhance local and global partnerships. The Center encompasses all global health activities in SPH, including the Global Health for Developing Countries electives for fourth-year medical students; the Global Health Practical Field Experience, currently offered in South Africa, India, Haiti, and Trinidad; and the Global Health Pathway in the College of Medicine's new curriculum. Dean Imperato has also worked closely with Downstate leadership on development of the new Public Health/Academic Building, expected to open in 2016.

Dean Imperato is supported by a senior staff structure that includes a vice dean; associate deans for research, community public health affairs, and administration; and an assistant dean for enrollment, as well as the chairs for the academic programs.

#### **FACULTY GOVERNANCE**

Faculty participate in governance in several important ways. On the State level there is the University Faculty Senate; on the local level is the Centerwide Faculty and Professional Staff Assembly, which is comprised of the Faculty and Professional Staff Assemblies of each of Downstate's five academic units.

#### **SUNY UNIVERSITY FACULTY SENATE**

At the SUNY system level, the University Faculty Senate is the official entity through which faculty and professional staff engage in the governance of the University. The University Faculty Senate is concerned with effective educational policies and other professional matters broadly affecting SUNY and the faculty. Representation in the Senate occurs through election of senators from SUNY's four university centers, the five health science centers, the 13 colleges of arts and sciences, the six colleges of technology, the three specialized colleges, and the five statutory colleges. Faculty senators participate in the deliberations of the Faculty Senate at all of its plenary meetings and report to constituents at their respective campuses on its activities and actions. Whenever necessary, faculty senators solicit the views and opinions of their constituent faculties on issues that are slated for action on the agenda of the Faculty Senate. The University Faculty Senate is an effective body with considerable access to the Office of the Chancellor and SUNY system administration. Since SUNY is such a diverse system, some of the body's deliberations may not be applicable to Downstate. However, the University Faculty Senate affords an opportunity for Downstate faculty to gain knowledge of such system-wide issues

as funding and quality indicators. It is an avenue in which to speak on behalf of Downstate in Albany, bring specific concerns of the campus to the attention of the Chancellor, and share with Downstate's faculty and Faculty Assemblies important issues and concerns from the state perspective.

Since the last Middle States site visit, Downstate's faculty governance structures have been revitalized. Downstate is now represented by four faculty senators (and four alternate senators) as well as a campus governance leader. Dr. Henry Flax, senior senator, also chairs the SUNY Faculty Senate's Health Science Sector. Downstate faculty are also represented on five senate committees (Diversity and Cultural Competence, Ethics, Operations, Graduate Education, and Student Life).

#### **DOWNSTATE FACULTY GOVERNANCE**

##### **Centerwide Faculty and Professional Staff Assembly**

At the Downstate campus-level, the organization that represents the total faculty and professional staff at Downstate is the Centerwide Faculty and Professional Staff Assembly. Faculty from each of Downstate's colleges and schools actively participate in the Centerwide Assembly. Standing committees of the Assembly are outlined in its bylaws, and include Educational Policy and Curriculum Integrity; Faculty and Professional Staff Personnel Policies; Research, Resources, Planning, and Budgets; Nominations, Elections and Ballots; Bylaws; and Library. The current presiding officer of the Centerwide Assembly is Dr. Stephan Rinnert, professor of clinical emergency medicine in the College of Medicine.

The Centerwide Committee, which has elected representation from each of the five schools and colleges, serves as the executive committee, with responsibility for ensuring that resolutions and recommendations of the Assembly are communicated to Downstate's president. Twice a year the president is invited to a Centerwide Assembly meeting to keep the faculty and professional staff updated on campus activities and provide a forum in which questions can be asked. Faculty from all five colleges and schools attend these sessions.

##### **College Faculty and Professional Staff Assemblies**

Each college and school participates in the Centerwide Faculty and Professional Staff Assembly through its own Faculty and Professional Staff Assembly (FPSA). Each of these Assemblies is structured in accordance with its respective bylaws, which constitutes the faculty governance document for each college or school. A major strength of this governance structure is the active involvement and participation of faculty in various committees that impact academic life. Through these committees, as well as ad hoc committees or task forces set up to address specific issues, the faculties explore, assess, and advise on the full range of academic, academic support, and student life issues impacting their respective college or school.

### DOWNSTATE STUDENT GOVERNANCE

Students are encouraged to take an active part in the governance of SUNY, of Downstate, and of the colleges and schools. Each college and school has its own student council. Representatives of each council participate on committees in the University Council, a center-wide student governance body that represents the interests of the entire student body. The council serves as liaison between students and administration and provides access to the president; determines expenditures of student activity fees; oversees campus clubs, organizations, and student publications; and plans and implements campus events.

Students are nonvoting members on the Faculty and Professional Staff Assembly and other selected committees. As specified by the *Policies of the Board of Trustees*, the student president of the University Council sits as the representative to the SUNY Student Assembly. Annually, two students are elected by their peers to sit on the Downstate Campus Council.

### UNION REPRESENTATION

The Executive Branch of the State of New York, pursuant to the certification of the Public Employment Relations Board, recognized the United University Professions (UUP) as the exclusive representative for faculty and professional staff for collective negotiations with respect to salaries, wages, hours, and other terms and conditions of employment.

As outlined in the agreement, there are regularly scheduled Labor-Management meetings that provide a forum for discussion on matters of interest to both parties.

The range of concerns of the union is quite broad, but its chief aim, in concert with administration, is to assure that full and correct information is made available to employees; that terms of employment are clearly defined, and that employee grievances are fairly and equitably addressed.



# CHAPTER FOUR



## A TEACHER IS A COMPASS THAT ACTIVATES THE MAGNETS OF CURIOSITY, KNOWLEDGE, AND WISDOM IN THE PUPILS

### STANDARD 9: FACULTY

Faculty play a central role in developing and achieving the educational mission of Downstate, and have direct involvement in all areas of its academe, including admissions, curriculum development, and student promotions. This is in accord with SUNY's *Policies of the Board of Trustees*, which states, "The faculty of each college shall have the obligation to participate significantly in the initiation, development, and implementation of the educational program." (Article X: College Faculty, Section 4, Responsibility.)

Faculty qualifications, procedures for appointment and tenure, and support for professional development are regularly assessed through the various accreditation processes undertaken by Downstate. Since the last site visit by the Middle States Commission, nine academic programs, colleges, or schools undertook specialty self-study and received full, continued accreditation by their respective accrediting body. Each of these accrediting processes included a review of faculty qualifications.

Downstate has a richly diverse faculty that reflects the cultural tapestry of Brooklyn and adds value to Downstate's educational and clinical landscape. Downstate's MSCHE Institutional Profile (2014-2015) reported a full- and part-time faculty of 1,029 (845 full-time, 184 part-time). Statistics compiled by the Office of Diversity and Inclusion demonstrate that 25.3% of faculty categorize themselves as being from an under-represented demographic group (assistant professor: 44%, associate professor: 16%, and professor: 16%). One-third (33.6%) of the faculty are women (assistant professor: 44%, associate professor: 33%, and professor: 24%).

### APPOINTMENT

While faculty appointment policies are broadly set by the University and comply with relevant federal and state equal employment laws and regulations, each of Downstate's five colleges and schools appoints faculty according to its unique needs. Each college and school has a Committee on Academic and Professional Qualifications (CAPQ) that oversees the qualifications of its faculty in accordance with the *SUNY Policies of the Board of Trustees*. The promotion and tenure guidelines employed by the colleges and schools afford valuable structure for faculty evaluation and are provided to all faculty members on appointment. In addition, SUNY is an equal opportunity employer and has established policies to ensure fairness and impartiality in hiring, as well as academic freedom.

In the College of Medicine, department chairs recommend to the dean the initial rank and tenure that should be awarded to an individual faculty member upon hiring.

Recommendations for associate and full professor appointments go through the faculty Committee on Professional and Academic Qualifications, which reports to the dean. The final appointment decision is made by the dean and ultimately by the president. The college maintains a five-track appointment system (two tenure-eligible: academic/clinical; and three nontenure-eligible: clinical/educator, research, and teaching). The academic track is the principal full-time tenure-eligible track; faculty on this track are expected to make substantial contributions in teaching, in clinical activities when appropriate, and in significant research and/or scholarly activities.

In the School of Graduate Studies, all faculty members are hired through the College of Medicine. Those assigned to teach in Graduate Studies are selected based on demonstrated research and teaching ability. They hold a PhD, MD, or MD/PhD in an appropriate area of specialization and have extensive postdoctoral training in research at well-recognized institutions. Their record of publications provides evidence for their accomplishments, and the quality of their research seminar presentations serves as a critical part of the interview process. Qualification to mentor doctoral students is based on the individual's ability to maintain a productive level of research grant support.

In the School of Public Health, the full-time faculty recruitment process is initially operated through the auspices of interdisciplinary search committees. These committees are led by a faculty member of the department in which the new member of the faculty will be placed, in addition to two to three additional faculty drawn from other departments. Once applicant interviews are complete, the search committee selects two to three candidates. The search committee chair sends these applicants on to the department chair, who then transmits them to the dean of the SPH. The dean then makes a final selection from the two to three finalists. All full-time faculty members possess the terminal degree of their field (MD, PhD, or DPH [DrPH]).

Faculty in the College of Health Related Professions have the professional expertise, college-level teaching, and administrative experiences appropriate to their discipline. This includes documented expertise, advanced study, and licensures required to teach effectively and in appropriate depth and breadth, and to develop and administer curricula. All faculty in the Physical Therapy Program, which is a doctoral-degree granting program, hold a doctoral degree.

The College of Nursing also encourages doctoral preparation for faculty. All College of Nursing faculty must at minimum hold a master's degree, current licensure, and certification as necessary. Seventy percent of the faculty in the College of Nursing are prepared at the doctoral level.

The number of faculty needed for teaching is reviewed annually by each of the colleges and schools during the budget planning process. In the College of Medicine, the department chairs determine the number of faculty needed at each level in each discipline and recommend this to the dean. In the School of Graduate Studies, because the faculty participates extensively in teaching in the College of Medicine, the number of faculty needed in each discipline reflects teaching needs in the College of Medicine. In addition to its core of full-time faculty, the College of Medicine has the benefit of the services of several hundred voluntary faculty members, both alumni and local practitioners, who provide important educational services for the college's medical students.

In the College of Health Related Professions, the number and qualifications of faculty needed for teaching in relation to the total number of students are reviewed annually, taking into consideration the recommended guidelines for the various accrediting bodies of the different professions.

The College of Nursing annually reviews number and qualifications of faculty needed for teaching in relation to its student enrollment and the accreditation guidelines for the nursing specialties represented.

In the School of Public Health, faculty are appointed in accordance with the school's mission, goals, and objectives and with requirements set by the school's specialty accrediting body, the Council on Education for Public Health. SPH has adequate faculty, with appropriate training and experience, to support the specific master and doctoral instructional aims of each core concentration.

### SUPPORT FOR FACULTY DEVELOPMENT

Professional development is encouraged and supported at the centerwide and individual college and school levels. The Faculty Development Initiative was initially developed by the College of Medicine as a centerwide initiative open to all faculty members from all the schools. These undertakings are now part of the responsibilities of the Office of Faculty Affairs and Professional Development.

In August 2014, President Williams created the Office of Faculty Affairs and Professional Development and appointed a new vice president to lead it. This office's mission is to plan, coordinate, and implement academic personnel matters and faculty education development programs. (See Appendix E, *Faculty Development Plan*.) To ensure maximum involvement in creating a development plan for this new office, three inter-college and -school work groups have been formed. These include a task force on campus culture focusing on community life, a work group for mentoring and professional development, and a work group on excellence in education to provide best practices to Downstate's teaching faculty. A number of social events, some with educational presentations, are planned to recognize the contributions of outstanding faculty from each college and school. Academic personnel matters, including

recruitment, on-boarding, and promotion and tenure are supported by this office in consultation with the deans.

Dr. Merlino provides counseling, conflict resolution, guidance, and support to all faculty, department, and school leadership as requested. The Office of Faculty Affairs and Professional Development is committed to a campus culture that nurtures successful careers and work-life integration.

Projects implemented by Dr. Merlino to facilitate faculty success include a monthly seminar series, formal mentoring programs in all Downstate colleges and schools, and specialized workshops and peer support groups organized around similar interest topics.

Recent faculty development seminars have included:

- The Millennial Learner
- Blended Teaching
- Simulation Show-Case & Presentations
- Tenure and promotion
- Achieving Work Life Integration
- Faculty Orientation
- The New Curriculum
- Research Funding Initiatives
- Medical Education Events
- Small Group Facilitation
- Library Resources: Secret Treasures
- Working with Struggling Learners
- Simulation Equipment & Teaching

Another component of faculty development occurs at the departmental and divisional level, where chairs and chiefs are charged with assuring that junior faculty tend to the developmental milestones required for appropriate career advancement. The Department of Medicine, for example, offers an 18-week seminar course on research methodology that is open to all faculty from all schools, as well as residents and students, called "Principles of Research Methodology." The course, led by Dr. Phyllis Supino, professor of medicine and director of clinical epidemiology and the clinical research division of cardiovascular medicine, includes sessions on teaching medical- and health-profession students the logic of research design and hypothesis construction.

The individual colleges and schools provide release time and support faculty attendance at professional conferences related to clinical, research, teaching, or academic roles. They sponsor faculty development activities that reflect the needs and culture of the particular college or school.

The School of Graduate Studies encourages junior faculty to develop mentor-mentee relationships with more senior faculty in the school. After consultation with the dean, the school also allows co-advising situations where two faculty members jointly advise a student on thesis work. The School of Graduate Studies adjusts its class schedules to accommodate major

national or international meetings (such as the Society for Neuroscience meeting) as needed. SGS hosts a campus-wide Research Day and sponsors seminar series for each of its three programs. Faculty members attend the seminars and are offered the opportunity to meet individually with seminar speakers.

In the College of Health Related Professions, lunchtime brown bag presentations are held several times a year and are available to all faculty. Topics are determined by the Committee on Faculty and Professional Staff, a college-wide committee with representation from all CHRP programs. Presenters may be CHRP faculty or members of departments such as Instructional Technology or Students Affairs. Recent topics have included “The Use of the Mobile Learn App on iOS and Android Devices,” “Supporting First-Year Students in Transition,” and “The Use of Standardized Patients as a Teaching Modality.” Monthly nursing grand rounds as well as College of Nursing faculty development programs are available to all faculty members.

SUNY policies provide for sabbatical leaves for professional development for faculty and professional staff. These policies are reaffirmed in the contract between the State of New York and the United University Professions (UUP). The UUP also sponsors a Special Projects Fund for full-time faculty and professional staff who wish to participate in activities where replacement salary is necessary. An amount up to \$4,000 may be awarded.

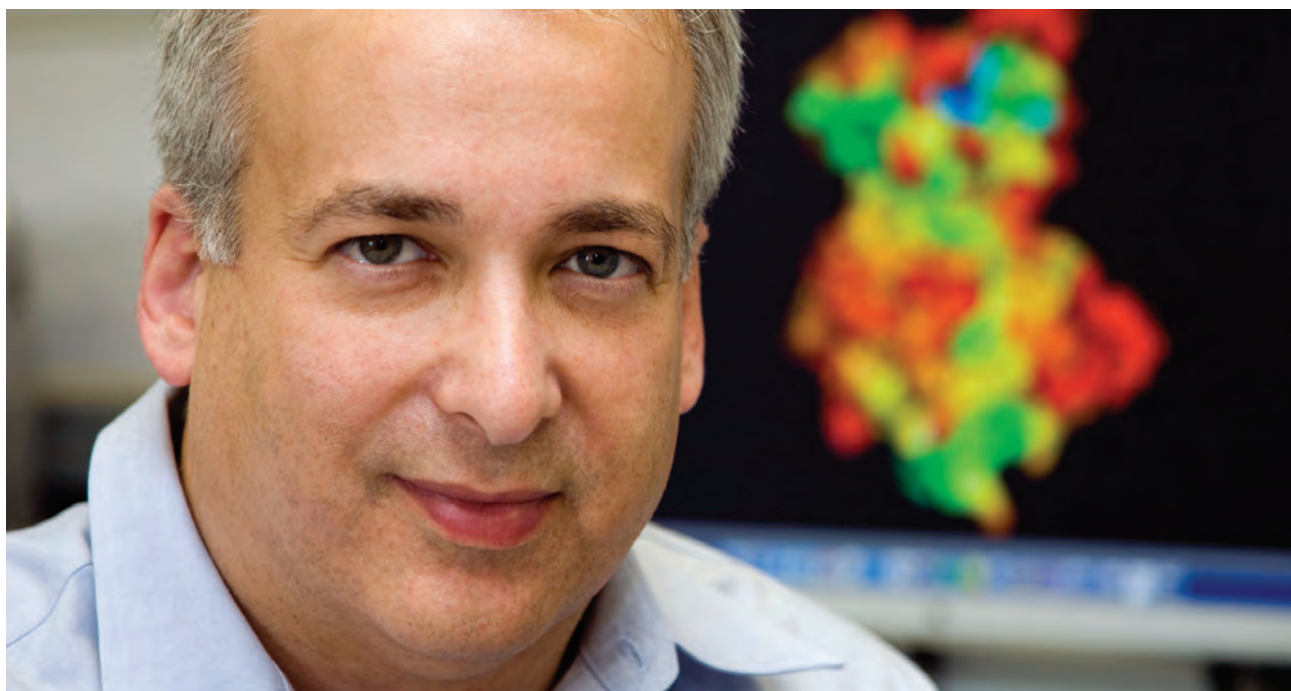
Through the UUP contract, SUNY Downstate annually receives an allocation for Professional Development Awards for faculty and professional staff. Applicants for these awards may request funding for instructional material

development; seminar, coursework, or conference participation; grant proposal development; and other work-related professional development projects. For 2013-14, the total allocation was \$87,424. Awards average approximately \$500 and approximately 150 to 170 awards are granted annually. For 2014-15, the allocation was a similar amount.

The UUP contract also provides that faculty and professional staff may enroll at no cost in one graduate or undergraduate course per semester (including summer session and intersession) at any SUNY school, on a “space-available” basis. This benefit is particularly valuable for faculty in the colleges of Nursing and Health Related Professions who are pursuing advanced degrees. All of these programs afford faculty the opportunity to enhance teaching and research skills and build expertise.

In addition to faculty development activities, the commitment to excellence in teaching is reflected through several SUNY-wide annual awards: Distinguished Professor, Distinguished Teaching Professor, Distinguished Service Professor, and the Chancellor’s Award for Excellence in Teaching. Annually, Downstate nominates faculty candidates for these awards; the Distinguished Teaching Professor in particular stipulates skill in teaching as a key criterion.

The colleges of Health Related Professions and Nursing offer annual faculty awards to provide incentives for excellence in teaching; scholarship; commitment to the college, University, or professional organizations; and service to the community. The College of Medicine annually presents awards to recognize the achievements of preclinical, clinical, and clinical affiliate faculty.



Todd C. Sacktor, MD, Distinguished Professor of Neurology and of Physiology & Pharmacology

## PROMOTION AND TENURE

The vice president of the Office of Faculty Affairs and Professional Development is responsible for supporting faculty personnel actions, guidelines, and policies related to appointment, promotion, and tenure reviews, as well as focusing on issues that impact the faculty experience at Downstate. This office also holds responsibility to monitor the faculty annual review process with the deans; coordinate programming to enhance the professional development of faculty and administrators; spearhead the faculty, chair, and academic leadership recruitment and selection processes; collaborate with administration and academic divisions to establish and monitor compensation and productivity standards; and support periodic reviews of departments, centers, and other programs.

Informing faculty and professional staff of personnel policies happens in a consistent manner throughout all divisions on campus. Downstate provides an extensive all-day mandatory orientation for new faculty. All faculty members are provided with a copy of the UUP contract and *Policies of the Board of Trustees*, Article XII, from “Evaluation and Promotion of Academic and Professional Employees.”

The Department of Human Resources is available to all members of the faculty anytime a question arises regarding personnel policies or procedures. Changes in personnel policies and procedures are communicated via centralized mailings and emails. When a new contract is negotiated with UUP, copies of the new contract are made available to all faculty and professional staff in a timely fashion.

In the College of Medicine, the productivity of each faculty member is reviewed by the chair of each of its constituent departments. The chair prepares an annual report for the COM dean, which includes teaching evaluations; peer-reviewed academic output (published studies, reviews, textbook chapters, journal editing); grants; and service on institutional, regional, national, and international professional committees/task forces. The faculty member reviews the report with the chair and develops an action plan to address weak areas. After a set period of time, the chair must determine whether the faculty member is worthy of promotion and tenure and prepares a letter concerning promotion for the Committee on Academic and Professional Qualifications (CAPQ) to consider. The CAPQ, in its advisory role to the dean, prepares a report for the dean addressing the proposed change in rank/tenure. The faculty member has an option of being considered for promotion and tenure through an alternate pathway, in which qualifications for promotion and tenure are considered by a committee of peers within the faculty member’s department. As faculty in the School of Graduate Studies are all College of Medicine appointees, these processes apply to the SGS as well.

In the School of Public Health, decisions pertaining to advancement from assistant to associate professorships, promotion from associate to full professor status, and tenure are made under the auspices of the SPH CAPQ. A

standing committee appointed by the dean is comprised of members elected by the faculty as part of the overarching faculty governance structure. Candidates are deemed ready for advancement by department chairs, who are charged with transmitting the candidate’s dossier to the CAPQ.

New faculty members in the College of Health Related Professions are invited to an informational session with the dean and chairperson of the CAPQ committee to review guidelines for promotion and tenure. Every faculty member has a copy of the guidelines for promotion and tenure per academic rank. Chairs annually assess faculty didactic teaching and scholarly and professional accomplishments. This assessment includes a review of self-evaluations that are completed by faculty, presented to the program chairs, and ultimately to the dean. These include faculty goals related to teaching; scholarship; clinical practice; and service to the university, college, and community. Programs in the College of Health Related Professions may, at the discretion of the faculty in each program, conduct peer review of actual classes. Online student evaluations also include evaluation of faculty teaching that are considered in faculty assessment. The program chairs recommend faculty to apply for promotion and/or tenure. Applications are considered by the CAPQ committee, which makes recommendations to the dean.

The dean of the College of Nursing meets with newly appointed faculty to explain and review expected faculty outcomes and guidelines for promotion, tenure, reappointment, and the role of the CAPQ. The associate deans in the College of Nursing annually meet with each faculty member to review faculty self-evaluations that include goals related to teaching; scholarship; clinical practice; and service to the university, college, and community. Online student evaluations also include evaluation of faculty teaching in the CON. The path for faculty appointment, reappointment, promotion, and tenure in the College of Nursing begins with review of the faculty member by a CAPQ committee member who writes a recommendation. This is reviewed by the full CAPQ committee, which makes a recommendation to the dean.

*Part-time faculty members:* In general, each college reviews part-time and adjunct faculty members similarly to the way full-time faculty are reviewed. Mechanisms for review include student evaluations and administrative evaluations. Part-time faculty members are considered for promotion in the same way as are full-time faculty.

## FACULTY AND EDUCATIONAL CURRICULA

In all of the colleges, curriculum assessment is a dynamic process with full involvement of faculty. For example, the current format in the College of Medicine is the result of a curriculum renewal process that reflects the effort of dozens of faculty members, administrators, and students.

The new core competency-based curriculum for the COM was reviewed and approved by the Liaison Committee on Medical Education in February 2013. The faculty of the COM and



the SGS had extensive involvement in its development and continue to play an active role in monitoring the role of faculty in the curriculum. The Dean's Council for Education (DCE) is the working committee (chaired by the senior associate dean for academic affairs) that meets monthly to supervise and review the curriculum across all four years of medical school. The presiding officer of the Executive Committee of Faculty and Professional Staff of the COM and the chair of the Executive Committee's Sub-Committee on Educational Policy and Curriculum (CEPC) are on the DCE, as are six COM at-large faculty members (three basic science and three clinical science). These six members are nominated by the Executive Committee and approved by the dean for 24-month terms. Thus, there are multiple mechanisms for assuring ongoing faculty input into the development of the curriculum.

In the School of Graduate Studies, the curriculum is developed, implemented, and taught by the faculty in consultation with the dean. Courses required of all students are reviewed by the SGS Committee of the Faculty on a regular basis and revised and updated as needed by ad hoc committees of faculty. Core courses required by a specific program are reviewed and revised on a regular basis by the Executive Committee of that program or by an ad hoc committee appointed by the executive committee of that program. Electives are often designed by individual faculty members or groups of faculty and are reviewed by the Committee of the Faculty if they are general courses or by the Executive Committee of the individual program if they are program-specific courses. In addition to the Committee of the Faculty and the Program Executive Committees, the curriculum is discussed twice a year at the Faculty Assembly of the School of Graduate Studies, which is open to all faculty in the school.

The School of Public Health faculty curriculum committee meets prior to the start of each semester to review the overall curriculum and syllabi for new or significantly revised courses. Syllabi with minor revisions are reviewed by the department chair. The committee operates according to written policies and procedures to ensure the curriculum is academically sound, consistent with the SPH's core goals and learning objectives, current with respect to the public health needs of individuals and communities, and compliant with accreditation standards. Hybrid courses that incorporate both online and in-person instruction are offered at the master's level and have been offered at the doctoral level. The faculty role in the development of hybrid courses is the same as it is for classroom courses.

In the colleges of Health Related Professions and Nursing, all academic faculty share responsibility for the development, implementation, and evaluation of the curriculum. The curricula offered in each program housed within the College of Health Related Professions reflect the professional needs and priorities outlined by the respective professional organizations, accreditation bodies, patient populations served, and the healthcare industry, as well as the college's mission. Courses are reviewed annually

by program faculty. In both colleges, substantive changes, such as alteration in course description, objectives, and credit allocation must be approved by the colleges' respective curriculum committees.

The College of Nursing recently revised its graduate and undergraduate curricula to reflect the integration of competency standards consistent with the language in the *Essentials of Master's Education in Nursing* and the *Essentials of Baccalaureate Education for Professional Nursing Practice* of the American Association of Colleges of Nursing. The *Essentials* documents provide a new set of core competencies expected of graduates of baccalaureate and master's degree nursing programs. In addition, the revised graduate curricula reflect the recommendations of the *Advanced Practice Registered Nurse (APRN) Consensus Model for APRN Regulation: Licensure Accreditation Certification and Education* known as the LACE Model. Nurse practitioner clinical specialty courses must also meet the requirements of the National Organization of Nurse Practitioner Faculties and the *Criteria for Evaluation of*

**In August 2014, President Williams created the Office of Faculty Affairs and Professional Development and appointed a new vice president to lead it. This office's mission is to plan, coordinate, and implement academic personnel matters and faculty education development programs.**

*Nurse Practitioner Programs.* The clinical nurse specialty curricula meet the requirements of the National Association of Clinical Nurse Specialists. The nurse anesthesia specialty curriculum reflects the requirements of the Council on Accreditation of Nurse Anesthesia Educational Programs. The nurse midwifery specialty curriculum, offered as a collaborative program with the midwifery education program in the College of Health Related Professions, is consistent with the requirements of the American College of Nurse Midwives. In addition, individual program tracks utilize national guidelines and standards pertinent to their particular population focus.

All faculty members participate in developing, implementing, and revising curricula to reflect relevant professional nursing standards and guidelines, which are clearly evident within the curriculum and within expected student outcomes. The CON bylaws delineate the process for reviewing and implementing curriculum changes. In the CON, a number of courses are offered as hybrid courses. These are developed, reviewed, and revised in the same manner as are on-site courses.

#### TEACHING PERFORMANCE

Each college and school provides for administrative and student evaluation of faculty teaching. In the College of Medicine, for example, all faculty members teaching

students in the new core competency-based curriculum receive rapid feedback from students by anonymous computer surveys, the results of which are electronically transmitted to the teacher within a span of weeks after the teaching exercise. Teaching performance is also reviewed as part of the Dean's Council of Education's session, at which individual units (the integrated clinical and basic science courses defined by a unifying theme) are reviewed.

The School of Graduate Studies has course evaluation forms that students fill out for individual courses with an enrollment greater than four and for core courses regardless of enrollment. This course-evaluation student feedback is reviewed by the course director, the dean, and by either the Committee of the Faculty of the SGS or the executive committee of the relevant program. Teaching by individual faculty in core courses is also evaluated in an informal way by the course director. The dean, program directors, and presiding officer of the faculty also periodically solicit feedback from individual students about courses. The dean monitors the student outcomes of individual thesis advisors and will intervene with faculty improvement plans as needed or prevent unsuccessful thesis advisors from advising students in their laboratories in the future.

In the School of Public Health, students complete course evaluations that are reviewed by the course instructor and

department chair. Faculty complete annual effort surveys and development reports and meet annually with their department chairs to review their teaching performance.

In the College of Health Related Professions, students, faculty, department chairs, and the dean perform ongoing and periodic evaluation. The college has developed standard student evaluation forms for use in anonymous, online end-of-course evaluations. Each CHRP program adapts this form as necessary to meet its specific evaluation needs. Data gleaned from these evaluations are a component of the annual faculty evaluation process, which is carried out jointly with the faculty member and the program chairperson.

The College of Nursing conducts periodic evaluation by students, faculty, and deans. Standard student evaluation forms are used in anonymous, online end-of-course evaluations. Data from these evaluations are part of the annual faculty evaluation process, carried out by the faculty member and dean.

Formal and informal arrangements exist for mentoring junior faculty throughout the five colleges/schools and vary by department. Junior faculty members may be given assistance with lecture preparation from more experienced teachers, have opportunities to present their lectures in an informal setting to senior faculty, or be assigned a mentoring committee that includes senior faculty members.



# CHAPTER FIVE



## OPPORTUNITY, ACCESS, AND MISSION ARE KEY TO ADMISSIONS STRATEGIES

### STANDARD 8: STUDENT ADMISSIONS AND RETENTION

Downstate's mission is the basis for its enrollment goals. Consistent with its mission, Downstate seeks to recruit a broadly diverse, highly select student body that is passionate about excellence in clinical care and scientific research, interested in urban health and health-equity issues, and engaged and excited about learning, whether at the undergraduate or graduate level. Downstate's strategic enrollment goals also reflect state funding levels and accreditor-required faculty:student ratios.

Over the ten-year period since the last Middle States Self-Study, Downstate's total enrollment profile has remained stable, with moderate overall growth. The colleges of Medicine, Health Related Professions, and Nursing have grown, while the School of Graduate Studies has strategically decreased its class size. There was significant growth in the School of Public Health, which grew from a program with a single master's concentration to a full-fledged school with multiple master and doctorate concentrations in 2008. (See Table 1.)

This chapter draws from 2014 enrollment and retention data available to the Workgroup at the time it convened and conducted its analysis. **See pages 32 to 40 and Appendix G for 2015 data, which is similar to the 2014 data.** Although there are year-to-year fluctuations, enrollment trends in age,

gender, race, and residency have remained stable across the last five years.

In the academic year that began in September 2014, there were 1,865 students enrolled in Downstate's five colleges and schools, up from 1,580 in 2005 – an increase of 285 students, or 18 percent. Growth in the School of Public Health accounted for approximately 52 percent of the enrollment increase.

Historically and currently, the largest number of students matriculates in the College of Medicine. In 2014, the College of Medicine accounted for 43 percent of Downstate's total enrollment; the College of Nursing and College of Health Related Professions each comprised 21 percent; the School of Public Health, 11 percent; and the School of Graduate Studies, 3 percent.

The top 10 educational programs by headcount at Downstate in 2014 are detailed in Table 2. Slightly more than 80 percent of Downstate's students are enrolled in master or doctoral programs, reflecting Downstate's status as a medical and biomedical research university. In 2014, the enrollment profile included 1,527 graduate students (1,149 full-time and 378 part-time) and 338 undergraduate students (216 full-time and 122 part-time).

Because of its focused curricula, Downstate attracts an older, goal-oriented student body. In 2014 the majority of

TABLE 1

Total Enrollment: All Schools (Head Count)												
School	2005		2010		2011		2012		2013		2014	
	N	%	N	%	N	%	N	%	N	%	N	%
College of Medicine	772	49%	791	46%	805	46%	818	45%	820	44%	803	43%
Public Health	51	3%	82	5%	87	5%	106	6%	165	9%	200	11%
School of Graduate Studies	74	5%	78	5%	74	4%	73	4%	61	3%	59	3%
College Health Rel. Prof.	295	19%	361	21%	368	21%	367	20%	381	20%	396	21%
College of Nursing	375	24%	377	22%	398	23%	410	23%	417	22%	395	21%
Non-matriculated	13	1%	13	1%	19	1%	25	1%	21	1%	12	1%
All Students	1580	100%	1,702	100%	1,751	100%	1,799	100%	1,865	100%	1,865	100%

TABLE 2

Top 10 Educational Programs by Head Count 2014		
College	Program	Number of Students
College of Medicine	Medicine, MD	803
College of Nursing	Family Nurse Practitioner, MS	130
School of Public Health	Master of Public Health, MPH	126
College of Nursing	Nursing RN to BS	115
College of Health Related Professions	Occupational Therapy, MS	102
College of Health Related Professions	Physician Assistant, BS	90
College of Nursing	Accelerated Nursing, BS	60
College of Health Related Professions	Diagnostic Medical Imaging, BS	49
College of Health Related Professions	Medical Informatics, MS	49
College of Health Related Professions	Doctor of Physical Therapy, DPT	47

students fell in the 25-29 age bracket, and the average age of students was 29.

Approximately two-thirds of Downstate's enrolled students are female, reflecting the continuing dominance of women in many health-specialty fields. (For example, in 2014, Nursing's female enrollment was 80 percent; Health Related Professions', 75 percent; and Public Health's, 73 percent.) Women comprised 45 percent of students in the College of Medicine.

As discussed in the chapter on Mission and Goals, Downstate is committed to increasing the representation of minorities in the health professions, and it is also committed to a focus on urban health and health equity. Downstate's racial and cultural enrollment patterns reflect these intertwined missions, as well as Brooklyn's broad diversity. Downstate is justifiably proud of the diversity of its student body. Of students who identified themselves by race in 2014, more than half (60 percent) self-identified as minority. More than a quarter of all students were under-represented minority (20 percent Black; 8 percent Hispanic). Diversity is not limited to race – it also includes factors such as culture, religion, sexual orientation, and socioeconomic status. Downstate sponsors a wide variety of programs and activities designed to maintain applicant diversity.

As a public institution within the SUNY system, a significant component of Downstate's mission is to meet the educational

and workforce training needs of New York State. Because of this, the vast majority of Downstate's students – 95 percent in 2014 – are drawn from within the state, with 67 percent coming from New York City. Of these, again in alignment with the needs of the immediate community Downstate serves, 40 percent in 2014 were residents of Brooklyn.

## RECRUITMENT AND ADMISSIONS

Recruitment and admissions practices at Downstate produce strong matriculating classes. All of the colleges and schools work closely with Downstate's Admissions Office, which handles application processing functions, and each college/school maintains its own faculty-led admissions committee. Admissions decisions are made at the college/school level collaboratively by faculty and deans, in accord with SUNY and Downstate admissions policies. The participation of faculty in setting guidelines, interviewing candidates, and determining whom to admit ensures faculty involvement in recruitment and admission of students. It also ensures that entering students are a good academic and philosophic "fit," and that students who receive an admissions offer have a clear understanding of the learning objectives (See Appendix F, *Learning Objectives*) and rigor of the Downstate specialty program they are seeking to enter.

In 2006, as detailed in a SUNY planning exercise called *Mission Review II*, Downstate projected a stable enrollment through 2010 of 1,645 total students by headcount and 1,550 FTE, based on an assumption of no additional state

TABLE 3

Enrollment History and Projection	2010	2011	2012	2013	2014	2015	2016	2017	2018
	Actual						Planned		
<b>Undergraduate</b>									
First-Time, Full-time	0	0	0	0	0	0	0	0	0
Undergraduate Transfer (Sum/Fall)	203	189	203	208	207	212	217	217	217
Undergraduate Continuing/Returning	140	147	132	138	131	135	138	138	138
Transfer, Full-Time (Sum/Fall)	74	75	94	101	94	104	99	99	99
Continuing/Returning, Full-Time	119	109	119	134	122	108	128	128	128
All Full-Time	193	184	213	235	216	212	227	227	227
All Part-Time	150	152	122	111	122	135	128	128	128
Total Undergraduate	343	336	335	346	338	347	355	355	355
<b>Graduate</b>									
New Graduate	371	395	416	478	585	443	614	614	614
Graduate Continuing/Returning	988	1,020	1,059	1,041	942	1,052	989	989	989
New Graduate, Full-time	266	267	292	354	493	338	518	518	518
Continuing/Returning Full-Time	759	759	759	759	759	882	797	797	797
All Full-Time	1,016	1,037	1,071	1,132	1,149	1,138	1,206	1,206	1,206
All Part-Time	343	378	393	387	378	357	397	397	397
Total Graduate	1,359	1,415	1,475	1,519	1,527	1,495	1,603	1,603	1,603
<b>Degree/Cert Seeking Total</b>	<b>1,693</b>	<b>1,736</b>	<b>1,780</b>	<b>1,851</b>	<b>1,857</b>	<b>1,839</b>	<b>1,950</b>	<b>1,950</b>	<b>1,950</b>
<b>Non-Matriculated</b>	<b>12</b>	<b>17</b>	<b>25</b>	<b>21</b>	<b>12</b>	<b>19</b>	<b>13</b>	<b>13</b>	<b>13</b>
Total Students	1,702	1,751	1,799	1,865	1,865	1,858	1,958	1,958	1,958
Fall FTE	1,478	1,492	1,561	1,612	1,604	1,585	1,684	1,684	1,684

funding. Actual growth in terms of total student numbers was slightly higher. By 2010, Downstate's actual total enrollment had reached a headcount of 1,702 (FTE, 1,478); by 2014, it had risen to 1,865 (FTE 1,604). Through 2018, total enrollment is projected to increase slightly. See Table 3, Enrollment History and Projection.)

Downstate's applicant pool across all colleges and schools is sufficiently broad to achieve enrollment goals. Downstate anticipates continued stability in its overall demographic profile. In 2014, the College of Medicine received 5,369 applications and admitted an entering class of 181 new students; Graduate Studies received 114 applications and admitted 8 new students; Nursing received 844 applications and admitted 186 students; Health Related Professions received 845 applications and admitted 154 new students; and Public Health received 341 applications and admitted 88 new students.

In terms of educational offerings, Downstate intends to maintain its current profile of programs, with the caveat that programs that prepare students to enter the health professions must be sufficiently agile to respond to evolving workforce trends and acceleration in degree requirements for professional licensure. For this reason, the majority of programs in the College of Health Related Professions have migrated to the master's level, and an accelerated degree program in the College of Nursing has been added to meet workforce demand for more nurses at the BS level. The School of Graduate Studies has added a joint degree program in nanomedicine with SUNY Polytechnic Institute in Albany, reflecting new trends in medical-scientific innovation. The School of Public Health's focus on global health includes a new Peace Corps master's program. The new round of strategic planning will include reviews of emerging trends in healthcare delivery to ensure currency in program offerings.

### COLLEGE OF MEDICINE

Admission to the College of Medicine remains highly competitive. The size of the applicant pool is appropriate in terms of number and depth.

The size of the entering class has remained stable at roughly 180 students per year. This is appropriate to educational resources (including instructional space, faculty-student ratios, and clerkship opportunities) and allows for the college to admit approximately 20 transfer students into the third year. A total of 181 new medical students matriculated in the Fall 2014 entering class.

The four-year class profile in terms of ethnicity, gender, and age was similar to previous class profiles. The average student age was 25; 45 percent of the class was female; and 60 percent of the class self-identified as minority, with 15 percent identifying as underrepresented minority. In addition to maintaining ethnic diversity as defined by the Integrated Post-secondary Education Data System (IPEDS) categories, Downstate's College of Medicine (as well as all of Downstate's colleges and schools) continues to enroll a wide array of students from

different subcultures, and a large number of students who are first- and second-generation Americans.

**Diversity Recruitment:** The College of Medicine has consistently maintained an underrepresented minority enrollment of over 10 percent of the entering class (in 2014 it was 16 percent), and ranks among the top 10 schools of medicine in the United States in the number of African-American students admitted. The Office of Minority Affairs plays an important role in diversity enrollment strategies. Minority Affairs participates in recruitment activities sponsored by the Association of American Medical Colleges, the Associated Medical Schools of New York, Historically Black Colleges and Universities (HBCUs), the National Association of Medical Minority Educators (NAMME), and local colleges and universities.

Educational pipeline programs targeted to underrepresented students to promote health and science include:

*The Undergraduate Summer Research Program* by the Office of Minority Affairs: Designed for undergraduate students who are historically underrepresented in the biomedical and health professions to conduct research under the direction of a faculty member in the basic sciences, public health, or clinical medicine.

*Early Medical Education Program:* An initiative to increase the competitiveness of undergraduate premedical students by offering enrichment early in their college career from 8 participating schools – 7 CUNY and 1 SUNY.

*NY Academy of Sciences Afterschool STEM Monitoring Program:* Provides middle school students the opportunity to be mentored in the subjects of genetics, human body systems, and math. Mentors who complete the training and twelve sessions of teaching and training will receive a New York Academy of Sciences Education Mentor Certificate.

*Exposure to Health Careers* in conjunction with The Brooklyn College Educational Talent Search Program (BCETSP): The goal of this program is to increase the number of youth from disadvantaged backgrounds who complete high school to enroll in and complete their post-secondary education. Students in the program are low-income and first generation college students.

*Health Science Academy* high school program: This is a health science STEM afterschool science enrichment program, co-sponsored with the Arthur Ashe Institute for Urban Health, using a college level anatomy and physiology curriculum contextualized within health disparities, supplemented by study and research skills, summer internships in local community-based organizations, or clinical research.

*Health Science Academy, 9th Grade Bridge:* Provides students with an overview of the health science academy's curriculum through lecture and activities. Experiential introduction to health disparities, six body systems and the Academy's approach are taught.

*Health Science Academy, Middle School Program:* Provides health career exploration through classroom activities, speakers, and trips. It helps students to build skills in critical thinking, collaboration, questioning and reflection as well as familiarity with career clusters and pathways.

*Health Disparities Summer Internship Program:* High school students accepted into the Arthur Ashe Institute's Health Science Academy are invited to take advantage of a 4-week health disparities paid internship program. Students attend informative lectures and engage in interactive learning with their peers, covering the topics: An Introduction to Health Disparities, Culture, Health in America, Immigration and Health, Health Disparities in Brooklyn, and Policy and Advocacy.

*H-PREP (Daniel Hale Williams Society):* Increases the exposure of motivated high school students to the field of medicine. During the course of the program, students attend lectures about various healthcare issues, perform anatomy dissections, and develop a research project.

Students who enroll in these programs may or may not elect to apply to Downstate. Downstate offers these programs both as a service to the community and as part of a long-term strategy to increase the pool of well-qualified students.

### SCHOOL OF GRADUATE STUDIES

The School of Graduate Studies continues to admit an entering class of highly competent PhD students. It also administers the joint MD/PhD program. Students in this program complete the first two years of medical school, then intensively pursue their PhD in the School of Graduate Studies, followed by a return to the medical school to complete the MD degree requirements. The average time for completion of both degrees is approximately eight years.

In 2014 total enrollment in the School of Graduate Studies numbered 59 PhD students plus 11 additional students participating in the MD/PhD program. Of the eight new PhD students admitted in 2014, two were admitted to Biomedical Engineering, two to Molecular and Cell Biology, and four to Neural and Behavioral Science.

For PhD students, in 2014 students ranged in age from 23 to 55 years old, with an average age of 30. The majority of students, 61 percent, were female. Fourteen percent self-identified as being Black or Hispanic; 19 percent were Asian. Fifty-one percent of students were residents of New York State, and of those, the majority were residents of Brooklyn. International students accounted for 36 percent of the student body.

To strategically enhance its applicant pool, SGS has hired a recruiter who participates in local and regional recruitment fairs in the Northeast and Middle Atlantic States, and in the National Minority Graduate Fair. SGS faculty also attend these fairs in order to showcase the

research strengths of Downstate to potential applicants. Another recruitment effort is to invite promising applicants to campus to attend research seminars and participate in Brooklyn-based "dine around" informational dinners with faculty and current students.

One goal of SGS enrollment strategies is to increase the admission of U.S. citizens and permanent residents in order to become more competitive for federally funded grants. (Prior to 2000, a large proportion of Graduate Studies' PhD applicants came from China). In 2010, for the first time, students who were U.S. citizens or who enjoyed permanent residency status outnumbered international students; U.S. citizens have outnumbered international students every year since 2010. One of the efforts supporting this goal is the Summer Research Program for college students enrolled at the sophomore or junior level who are seriously planning to pursue a PhD degree in the biomedical sciences. Students are provided a \$3,000 student assistantship and undertake research projects under individual faculty sponsorship. They must produce an abstract, a written summary of the project, and an oral presentation at the end of the program.

SGS has also sought to recruit more students from ethnic groups that have been traditionally underrepresented in the sciences. It has partnered with Medgar Evers College, a CUNY school located in Brooklyn, on a five-year, \$2.2 million NIH grant for student research training, called the Research Initiative for Scientific Enhancement, or RISE. Downstate is supporting the program by providing mentored research training, participating in a lecture series, and facilitating courses and workshops. SGS has also worked with SUNY and the New York Academy of Science on a program that sends PhD student mentors to local Brooklyn high schools to teach science and math. While students in these programs may or may not eventually elect to apply to the School of Graduate Studies, this is a long-term strategy to broaden this component of the applicant pool.

### COLLEGE OF HEALTH RELATED PROFESSIONS AND COLLEGE OF NURSING

The colleges of Nursing and Health Related Professions maintain parallel recruitment strategies that have produced successful admission yields. These include Open House events, program information sessions conducted by faculty, and recruitment visits to community colleges, hospitals, and clinics. The Office of Student Admissions also conducts in-person and telephone preadmission counseling on behalf of the colleges.

Specific recruitment strategies employed by the College of Nursing include partnerships with healthcare agencies; middle schools and high schools to introduce nursing as a career; strengthening articulation with community colleges for the RN/BS program; and implementing evening and weekend clinical experiences for students who need to work full-time while pursuing their degree.

Specific recruitment strategies employed by the College of Health Related Professions include developing strong relationships with transfer counselors at community colleges; with academic counselors at senior colleges; and with faculty, deans, and program directors at feeder institutions.

Both colleges offer programs that are highly sought after. For example, according to research by the Center for Health Workforce Studies at the University at Albany (Shown in Table 4, *Projected Employment Changes 2012-2022*), Downstate's educational offerings in Nursing and the Health Related Professions offer training in healthcare occupations projected to be among the fastest growing by 2022.

Students enrolled in these two colleges are among the most diverse at SUNY Downstate, not only in terms of race and ethnicity, but also in terms of socioeconomic status, age, and family status. The student bodies of the colleges of Nursing and Health Related Professions reflect the broad range of ethnic and cultural groups in the Brooklyn metropolitan region.

In 2014, the College of Nursing enrolled 395 students, a 5 percent increase from 2005. This increase appropriately reflected available faculty funding and accreditor-required faculty:student ratios. CON enrolled 175 students in undergraduate programs in 2014: of these, 72 attended full-time. Another 216 students were enrolled in graduate programs; of these, 108 attended full-time. Four students enrolled in certificate programs. Of the 186 new entering students, 118 enrolled as undergraduates, and 66 enrolled in graduate programs.

The average age of students enrolled in the College of Nursing in 2014 was 34, with the largest number falling in the 25 to 29 age bracket. Eighty percent of enrollees were female. The percentage of males enrolled doubled from 10 percent in 2010 to 20 percent in 2014, reflecting the national trend of rising numbers of males choosing nursing

as a profession. Forty-five percent of students self-identified as under-represented minority. Eighty-two percent of Downstate's nursing students live in New York City, with 54 percent drawn from Brooklyn.

In 2014, the College of Health Related Professions enrolled 396 students, a 34 percent increase from 2005. There were 163 students enrolled in undergraduate programs: of these, 144 students attended full-time. Of the 179 students enrolled in graduate programs, 156 attended full-time. Seven students enrolled in certificate programs. Of the 154 entering students, 89 enrolled in undergraduate programs, and 65 enrolled in graduate programs.

The average age of students enrolled in the College of Health Related Professions in 2014 was 29, with the largest number falling in the 25 to 29 age bracket. Seventy-five percent of enrollees were female. Thirty percent self-identified as under-represented minority. Seventy-nine percent of CHRP students live in New York City, with 54 percent drawn from Brooklyn.

#### SCHOOL OF PUBLIC HEALTH

The School of Public Health (SPH) developed from a single Master of Public Health Program housed in the College of Medicine to a full-fledged School of Public Health offering master's and doctoral degrees in 2008. It is the only School of Public Health in Brooklyn; one of only three in New York City; and one of only 57 in the country that is accredited by the Council on Education for Public Health, the national accrediting body. The focus of the SUNY Downstate School of Public Health is on Urban and Immigrant Health, a topic that is integrated into its five core concentrations: Biostatistics, Community Health Sciences, Environmental and Occupational Health Sciences, Epidemiology, and Health Policy & Management.

The SPH has demonstrated continued growth since its inception in 2008. It has grown from 82 students in 2010 to 200 students in 2014, a 144% increase. The School's Master of Public Health degree program, currently with 126 students, is the third-largest program on campus by headcount. A new certificate program in public health, added in 2013, enrolled 29 new students in 2014, many of them medical residents or employees of Downstate. In addition, the School of Public Health has added a Center for Global Health and a Peace Corps Master's International Program to augment its international public health presence.

The School recruits and selects students who have demonstrated a strong interest in public health, have a high academic standing, and who also express an interest in returning to their communities to advance the health of populations. Admission to the program is competitive. Enrollment includes a diverse mix of physicians and other health professionals seeking training or a second degree in public health; individuals currently employed in public health positions; individuals seeking to change careers; and recent baccalaureate graduates. This mix of students by age,

TABLE 4

Projected Employment Changes 2012-2022 – % of Growth Increase			
Nursing	%	Health Related Professions	%
Nurse practitioners	33.7	Diagnostic medical sonographers	46.0
Nurse midwives	28.3	Physician assistant	38.4
Nurse anesthetists	24.7	Physical therapists	36.0
		Occupational therapists	29.1
		Health information technicians	22.1

Source: Center for Health Workforce Studies: Healthcare Employment Projections: An Analysis of Bureau of Labor Statistics Setting and Occupational Projections, 2012-2022.



gender, academic background, employment history, race, and ethnic group provide a unique learning environment that enhances each student's understanding of public and population health.

The selectivity of the School of Public Health's applicant pool is high. Many hold an MD or other advanced degree. SPH also participates in Open Houses, recruitment fairs, community events, and college visits as part of its recruitment efforts. SPH community partners include the Brooklyn Health Disparities Center, the Arthur Ashe Institute for Urban Health, the New York Committee for Occupational Safety and Health (NYCOSH), and the New York City Department of Health and Mental Hygiene. The new Public Health/Academic Building, which is expected to open in 2016 and will include state-of-the-art space dedicated to the School of Public Health, will also aid recruitment and enrollment efforts.

In 2014, the School of Public Health enrolled 200 students. Sixty-seven percent of students were enrolled part-time. The average student age was 32, with the majority falling in the 25-to-29 year-old age bracket. Seventy-three percent of students were female. Sixty-nine percent of students were minority, with 48 percent self-identifying as under-represented minority. Seventy-two percent of students are drawn from New York City, with 40 percent being residents of Brooklyn.

#### ACCURATE AND COMPREHENSIVE INFORMATION FOR PROSPECTIVE STUDENTS

Information about Downstate's biomedical science, public health, nursing, and health professional programs is

communicated to prospective students in a variety of ways, among them college bulletins; the *Student Handbook*; program brochures; program information sessions conducted by faculty; and recruitment visitation programs to community colleges, senior colleges, and community events. The material is current, accurate, comprehensive, and easily accessible.

On behalf of the colleges and schools, the Office of Student Admissions conducts in-person pre-admission counseling sessions, responds to e-mail inquiries, provides telephone counseling to prospective applicants, and conducts regularly scheduled information sessions and an annual Open House. Communication between deans and program chairs and the Office of Admissions is ongoing and bidirectional. Each year, the recruiters and admissions staffs are briefed on programs and admissions requirements to ensure that accurate and current information is communicated to prospective students.

Information about transfer credits at both the undergraduate and graduate level is available in college bulletins and the *Student Handbook*, as well as from the Office of Admissions. Because admission to Downstate's undergraduate programs occurs at the junior-year level, all entering undergraduate students are, in effect, "transfer students" in that they must fulfill all prerequisite liberal arts and science credits in order to be considered for admission. The colleges, schools, and Admissions Office strongly recommend that applicants seek preadmission advisement from Downstate on prerequisite equivalencies. Transfer credit at the graduate level is limited.



STATE UNIVERSITY OF NEW YORK  
DOWNSTATE MEDICAL CENTER

# COLLEGE ENROLLMENT

SEE APPENDIX G FOR ADDITIONAL ENROLLMENT DATA.

SEE APPENDIX H FOR COLLEGE PROFILES AND LEARNING  
OUTCOMES.

CHARTS UPDATED WITH 2015 INFORMATION

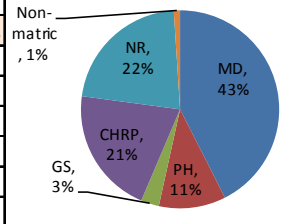
SUNY DOWNSTATE MEDICAL CENTER OFFICIAL EXTRACT (%) Fall 2010-2015

(IPEDS: 196255)

Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
<b>Percentage (%)</b>					

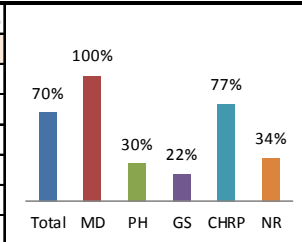
**HEADCOUNTS % BY COLLEGE**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	1702	1751	1799	1865	1865	1858
Medicine	46%	46%	45%	44%	43%	43%
Public Health	5%	5%	6%	9%	11%	11%
Graduate Studies	5%	4%	4%	3%	3%	3%
CHRP	21%	21%	20%	20%	21%	21%
Nursing	22%	23%	23%	22%	21%	22%
Non-Matriculated	1%	1%	1%	1%	1%	1%



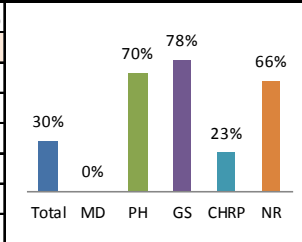
**TIME STATUS: % FULL-TIME**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	71%	70%	71%	73%	73%	70%
Medicine	100%	100%	100%	100%	100%	100%
Public Health	38%	33%	42%	41%	34%	30%
Graduate Studies	36%	30%	37%	30%	10%	22%
CHRP	76%	73%	76%	82%	77%	77%
Nursing	22%	24%	28%	35%	46%	34%
Non-Matriculated	15%	11%	8%	10%	17%	16%



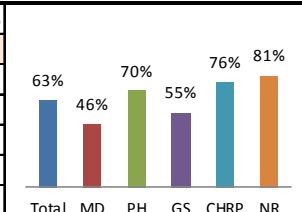
**TIME STATUS: % PART-TIME**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	29%	30%	29%	27%	27%	30%
Medicine	0%	0%	0%	0%	0%	0%
Public Health	62%	67%	58%	59%	67%	70%
Graduate Studies	64%	70%	63%	70%	90%	78%
CHRP	24%	27%	24%	18%	23%	23%
Nursing	78%	76%	72%	65%	54%	66%
Non-Matriculated	85%	89%	92%	90%	83%	84%



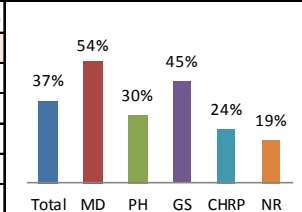
**GENDER: % FEMALE**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	64%	64%	63%	62%	63%	63%
Medicine	48%	47%	46%	44%	45%	46%
Public Health	65%	69%	70%	71%	73%	70%
Graduate Studies	55%	51%	51%	54%	61%	55%
CHRP	77%	75%	75%	75%	75%	76%
Nursing	90%	90%	84%	84%	80%	81%



**GENDER: % MALE**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	36%	36%	37%	38%	37%	37%
Medicine	52%	53%	54%	56%	55%	54%
Public Health	35%	31%	30%	29%	27%	30%
Graduate Studies	45%	49%	49%	46%	39%	45%
CHRP	23%	25%	25%	25%	25%	24%
Nursing	10%	10%	16%	16%	20%	19%



**STUDENT LEVEL: % GRADUATE STUDENTS**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	80%	81%	81%	81%	82%	81%
Medicine	100%	100%	100%	100%	100%	100%
Public Health	100%	100%	100%	100%	100%	100%
Graduate Studies	100%	100%	100%	100%	100%	100%
CHRP	60%	57%	60%	57%	59%	59%
Nursing	48%	55%	54%	57%	56%	53%

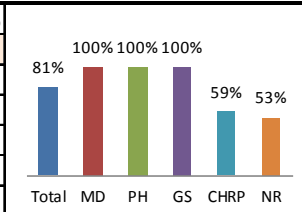
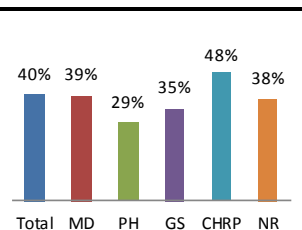


FIGURE 1

Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
<b>Percentage (%)</b>					

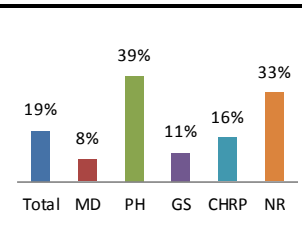
**RACE: % WHITE**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	38%	39%	40%	38%	38%	40%
Medicine	46%	43%	43%	40%	40%	39%
Public Health	22%	36%	32%	29%	29%	29%
Graduate Studies	23%	27%	27%	23%	27%	35%
CHRP	45%	50%	48%	45%	44%	48%
Nursing	22%	24%	35%	33%	34%	38%



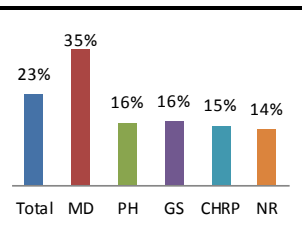
**RACE: % BLACK**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	24%	22%	19%	20%	20%	19%
Medicine	11%	10%	10%	8%	8%	8%
Public Health	33%	29%	31%	39%	40%	39%
Graduate Studies	12%	5%	10%	10%	12%	11%
CHRP	24%	20%	19%	18%	17%	16%
Nursing	54%	50%	38%	38%	37%	33%



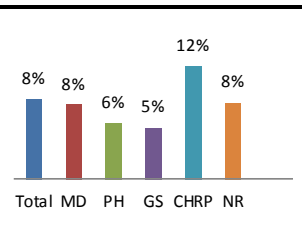
**RACE: % ASIAN**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	21%	23%	25%	24%	24%	23%
Medicine	32%	34%	37%	37%	35%	35%
Public Health	20%	18%	19%	14%	16%	16%
Graduate Studies	17%	16%	14%	18%	19%	16%
CHRP	13%	15%	15%	17%	17%	15%
Nursing	8%	10%	13%	13%	14%	14%



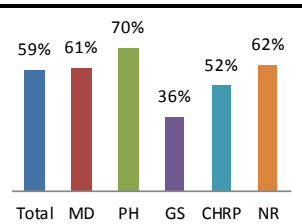
**RACE: % HISPANIC**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	7%	7%	7%	7%	8%	8%
Medicine	8%	7%	7%	7%	7%	8%
Public Health	10%	8%	5%	5%	8%	6%
Graduate Studies	4%	4%	4%	3%	2%	5%
CHRP	6%	5%	10%	12%	13%	12%
Nursing	6%	8%	6%	6%	8%	8%



**RACE: % MINORITY**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	59%	59%	57%	60%	60%	59%
Medicine	54%	57%	57%	60%	60%	61%
Public Health	71%	60%	65%	68%	69%	70%
Graduate Studies	36%	34%	32%	34%	36%	36%
CHRP	53%	48%	52%	54%	55%	52%
Nursing	77%	75%	65%	66%	66%	62%



\*Minority: Non-white and non-international

**RACE: % INTERNATIONAL**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	3%	2%	2%	2%	2%	1%
Medicine	0%	0%	0%	0%	0%	0%
Public Health	7%	5%	3%	2%	2%	1%
Graduate Studies	41%	39%	41%	43%	37%	29%
CHRP	2%	1%	1%	1%	1%	0%
Nursing	1%	1%	1%	1%	1%	0%

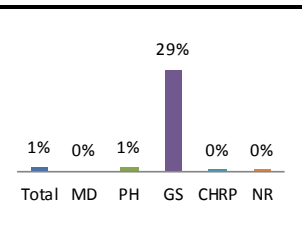


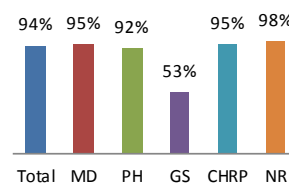
FIGURE 2

Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
Percentage (%)					

**RESIDENCY: % STUDENTS FROM NEW YORK STATE**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	92%	92%	94%	94%	95%	94%
Medicine	94%	93%	96%	95%	97%	95%
Public Health	85%	92%	98%	92%	92%	92%
Graduate Studies	41%	43%	42%	46%	51%	53%
CHRP	96%	96%	96%	94%	94%	95%
Nursing	98%	97%	98%	98%	97%	98%

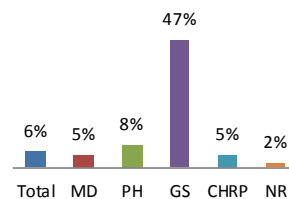
Fall 2015



**RESIDENCY: % STUDENTS FROM OUT-OF-STATE**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	8%	8%	6%	6%	5%	6%
Medicine	6%	7%	4%	5%	3%	5%
Public Health	15%	8%	8%	8%	9%	8%
Graduate Studies	59%	57%	62%	54%	49%	47%
CHRP	4%	4%	4%	6%	6%	5%
Nursing	2%	3%	2%	2%	3%	2%

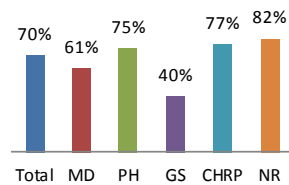
Fall 2015



**RESIDENCY: % STUDENTS FROM NEW YORK CITY**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	69%	70%	69%	67%	67%	70%
Medicine	64%	65%	61%	56%	55%	61%
Public Health	60%	60%	63%	69%	72%	75%
Graduate Studies	31%	32%	33%	33%	34%	40%
CHRP	78%	79%	78%	78%	79%	77%
Nursing	83%	83%	83%	82%	82%	82%

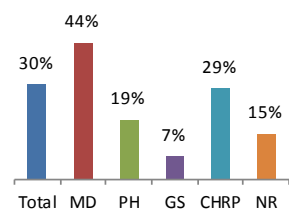
Fall 2015



**AGE (% Under 25)**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
SUNY DOWNSTATE TOTAL	31%	30%	29%	30%	30%	30%
Medicine	46%	46%	43%	43%	44%	44%
Public Health	22%	24%	27%	28%	22%	19%
Graduate Studies	10%	8%	5%	8%	7%	7%
CHRP	30%	29%	28%	30%	28%	29%
Nursing	7%	6%	8%	10%	11%	15%

Fall 2015



**ENROLLMENT BY DEGREE %**

	Fall 2010	Fall 2011	Fall 2012	Fall 2013	Fall 2014	Fall 2015
Doctor of Medicine	46%	46%	45%	44%	43%	43%
Master of Science	21%	22%	22%	21%	21%	21%
Doctor of Philosophy	5%	4%	4%	3%	3%	3%
Master of Public Health	4%	4%	5%	6%	7%	6%
Doctor of Physical Therapy	2%	2%	3%	2%	3%	3%
Doctor of Public Health	1%	1%	1%	2%	2%	3%
Advanced Certificate	0%	0%	0%	2%	2%	3%
No Degree	1%	1%	1%	1%	1%	1%
<b>Total</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>	<b>100%</b>

Fall 2015

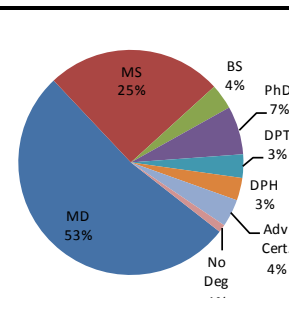


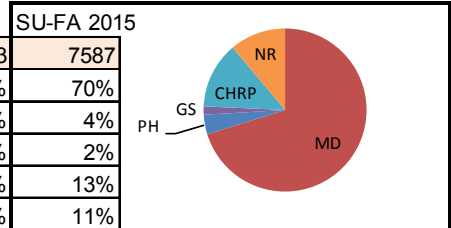
FIGURE 3

# ADMISSIONS

SU-FA 2010	SU-FA 2011	SU-FA 2012	SU-FA 2013	SU-FA 2014	SU-FA 2015
------------	------------	------------	------------	------------	------------

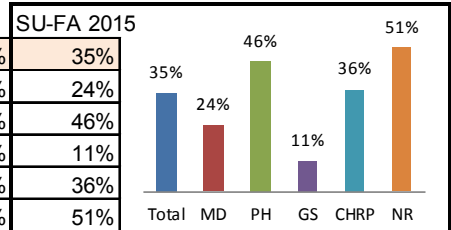
## COMPLETED APPLICATIONS (Summer & Fall)

	SU-FA 2010	SU-FA 2011	SU-FA 2012	SU-FA 2013	SU-FA 2014	SU-FA 2015
SUNY DOWNSTATE TOTAL	7430	7914	8107	7986	7513	7587
Medicine	72%	71%	69%	69%	71%	70%
Public Health	2%	2%	2%	3%	5%	4%
Graduate Studies	2%	1%	2%	2%	2%	2%
CHRP	11%	11%	13%	13%	11%	13%
Nursing	13%	14%	14%	14%	11%	11%



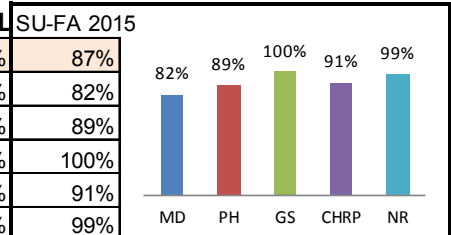
## NEW STUDENTS: % TOTAL ENROLLMENT (Summer & Fall)

	SU-FA 2010	SU-FA 2011	SU-FA 2012	SU-FA 2013	SU-FA 2014	SU-FA 2015
SUNY DOWNSTATE TOTAL	34%	33%	35%	37%	34%	35%
Medicine (M1)	22%	22%	22%	22%	23%	24%
Public Health	55%	31%	62%	56%	44%	46%
Graduate Studies	19%	15%	18%	7%	14%	11%
CHRP	39%	38%	40%	47%	39%	36%
Nursing	46%	49%	49%	49%	47%	51%



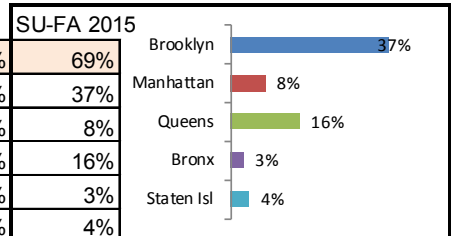
## RESIDENCY: NEW STUDENTS FROM NEW YORK STATE as % of ALL

	SU-FA 2010	SU-FA 2011	SU-FA 2012	SU-FA 2013	SU-FA 2014	SU-FA 2015
SUNY DOWNSTATE TOTAL	87%	87%	87%	87%	87%	87%
Medicine (M1)	80%	81%	86%	82%	92%	82%
Public Health	82%	96%	83%	86%	92%	89%
Graduate Studies	20%	27%	23%	25%	63%	100%
CHRP	93%	95%	93%	93%	92%	91%
Nursing	97%	96%	98%	99%	97%	99%



## NEW STUDENTS FROM NEW YORK CITY\*

	SU-FA 2010	SU-FA 2011	SU-FA 2012	SU-FA 2013	SU-FA 2014	SU-FA 2015
<b>NYC</b>	59%	63%	63%	65%	67%	69%
Kings (Brooklyn)	32%	36%	37%	36%	40%	37%
New York (Manhattan)	6%	5%	5%	6%	6%	8%
Queens	15%	17%	16%	17%	16%	16%
Bronx	2%	2%	2%	3%	2%	3%
Richmond (Staten Island)	4%	4%	3%	4%	3%	4%



2009-10	2010-11	2011-12	2012-13	2013-14	2014-15
---------	---------	---------	---------	---------	---------

## DEGREES AWARDED (% of All AWARDS)

	2009-10	2010-11	2011-12	2012-13	2013-14	2014-15
Doctor of Medicine	33%	33%	34%	37%	35%	32%
Bachelor of Science	33%	32%	35%	30%	32%	29%
Master of Science	23%	24%	22%	20%	22%	19%
Master of Public Health	6%	5%	5%	6%	5%	12%
Doctor of Philosophy	2%	2%	1%	3%	1%	1%
Doctor of Physical Therapy	4%	3%	3%	4%	4%	3%
Doctor of Public Health	0%	0%	0%	0%	0%	0%
Advanced Certificate	0%	0%	1%	0%	1%	3%
<b>TOTAL</b>	<b>530</b>	<b>576</b>	<b>583</b>	<b>568</b>	<b>617</b>	<b>641</b>

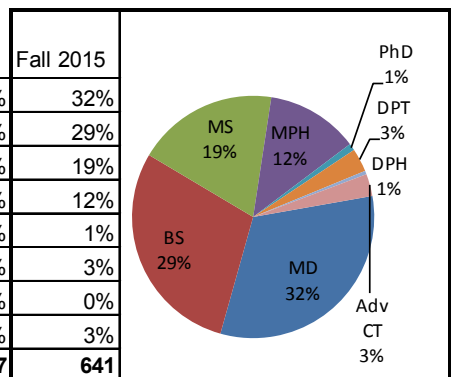


FIGURE 4



SUNY  
DOWNSTATE  
Medical Center

## REAL EDUCATION SHOULD CONSIST OF DRAWING THE GOODNESS AND THE BEST OUT OF OUR STUDENTS

### STANDARD 9: STUDENT SUPPORT SERVICES

SUNY Downstate provides an integrated, full-service student support program to meet the needs of its students and support student success. Downstate's five dean's offices, the Office of Minority Affairs, Student Health, and Student Counseling Service, as well as the divisions of Student Affairs and Student Life, work collectively and collaboratively to provide a full range of academic, social, administrative, and counseling support to students.

The support needs of Downstate students differ from those at more traditional four-year colleges with large undergraduate student populations. The majority of students (in 2015, 81.3 percent) enroll in high-intensity graduate programs with a clear focus on a specific health or science career. Undergraduate students enter discipline-specific programs at the upper-division level and have already completed their liberal arts and prerequisite science coursework elsewhere. The average age of Downstate students is 29, and most are financially independent of their parents and live off-campus. Downstate recognizes this and provides educational and recreational programs that are targeted to this mature population and reflective of Downstate's broadly diverse ethnic, racial, and cultural student body.

Downstate's student support services are administered by highly qualified professionals with appropriate credentials and prior work experience. In Student Affairs and Student

Life, for example, administrators at the associate director level and above have all served in professional capacities in higher education for periods ranging from 10 to 25 years or more. Most have served in significant roles at other institutions of higher education, and all have qualifications appropriate to their area of specialty. The director of Student Health Services is a physician; the director of the Student Counseling Service is a cognitive psychologist. All of the staff members in the Office of Academic Development have significant experience in working with students on resolving barriers to academic success.

### ADVISEMENT AND COUNSELING

#### Academic Advising

Downstate is strongly committed to the academic success of its students. Academic advising is conducted as a purposeful partnership between students and their advisors within their program of study and is supported by a variety of structures as appropriate to each school or college. Advising at Downstate considers and respects students' diverse backgrounds, interests, and abilities. Each student's academic progress is carefully monitored, and guidance and support are offered throughout the student's matriculation.

In Nursing, Health Related Professions, and Public Health, each student is assigned a specific advisor to assist with problems or issues and for discussions regarding academic progress and career opportunities. Students may also consult, formally or informally, with additional faculty, with the chair or associate deans within their department or





program of study, and with any of the deans in Student Affairs. In the School of Graduate Studies, students work closely with their thesis advisor.

In the School of Public Health, faculty advisors also assist students in selecting a concentration and monitoring progress toward the successful completion of the degree. For master's students, special emphasis is placed on advising students engaged in the practical field experience. Each student and faculty advisor must review the protocol and assure that the proper documents are completed. For doctoral students, each student and his or her dissertation advisor work in concert to assure that requirements and documents are completed properly. Students engaged in dissertation work must register for thesis advisement each semester until the dissertation is completed and approved.

In the College of Medicine, in years one and two, students are assigned to a faculty mentor and work with specific faculty small-group facilitators. They may also consult with the associate deans regarding academic progress, career plans, and for general counseling. During the third and fourth years, students are assigned a clinical assistant dean who works directly with the student to form a clinical schedule and advise on clinical performance and specialty choice. Medical students having difficulty may be referred to the Office of Academic Development for academic counseling.

### Academic Counseling

In support of Downstate's mission, the Office of Academic Development (OAD), under the direction of Seth Langley, PhD, works closely with both students and faculty to help students achieve their full academic potential. OAD offers programs to students in all of Downstate's colleges and schools, scaled to their specific needs.

Services offered include:

- Individual academic counseling, as needed or requested for study, learning, memory, reading efficiency, time management, and/or exam reasoning skills.
- Active learning counseling sessions promoting long-term retention and problem solving that focus on methods of summarizing, integrating, and organizing information.
- Approaches to reviewing and self-assessment are presented to help ensure effective, long-term mastery of the plethora of medical facts and details.
- Clinical learning environment sessions that address adjusting to the relatively unstructured but demanding clinical setting.
- Individual and/or group peer tutoring sessions, provided free of charge as needed or requested.
- Screening for previously undiagnosed learning difficulties and referral to a professional if a difficulty is identified.
- Support and referrals to meet needs that present an obstacle to optimal academic performance.

### Personal Counseling Services

In the Student Counseling Service (SCS), directed by Christine Saunders-Fields, Psy-D, students receive

assistance with academic stress as well as any personal difficulties that might be interfering with academic performance. Dr. Saunders-Fields has worked extensively with young adults and with ethnically diverse young adults. SCS maintains a referral network of qualified psychotherapists available for crisis counseling, short-term and long-term therapy, and specialized services. An option for longer-term therapeutic treatment, if needed, is available through the Department of Psychiatry. Counseling services are available Monday through Friday, and include evening hours of operation. In urgent situations, walk-ins are accommodated. If an emergency occurs during evenings or weekends, students are seen at the acute outpatient care facility of Downstate's hospital.

### Student Health Service

The Student Counseling Service is part of the Student Health Service (SHS), which supports the success of students by providing high-quality health care, health education, and prevention services to students. In addition to medical services, SHS assists students enrolled in clinical courses in meeting vaccination and other medical clearance requirements. A complete description of available health services is published annually in the *Student Handbook* and in a flyer distributed during student orientation. There is no charge for office visits to the Student Health Service, but students are required to carry health insurance to cover hospitalization and costs for services that SHS does not provide. For students who do not have their own coverage, Downstate offers a health insurance option, comparable in cost and coverage to the "silver-rated" plans under the New York State Health Insurance Exchange.

SHS and SCS are administered independently of academic administration and academic advisement. Health records are not co-mingled with academic records, and SHS and SCS staff do not make academic evaluation or promotion decisions on any student. All information is kept strictly confidential.

### Financial Counseling

Given the national trend of increased student-loan indebtedness, Downstate's Office of Financial Aid has increased its efforts to educate and advise students regarding financial matters. Downstate strongly encourages students to limit their reliance on student loans as much as possible.

Advice on budgeting and repayment options are provided to all students over the course of their attendance at Downstate, and informational programs regarding loan repayment and scholarship and grant opportunities are offered. Workshops address various financial aid topics, with the common thread of recognizing that student loan debt is best addressed at the time of borrowing. Financial Aid's website includes information about living on a budget, the importance of protecting identity, and the necessity to maintain and check credit status. Financial Aid also participates in the Division of Student Affairs' social media efforts, to help ensure that information provided to students is as accessible as possible.

As required by the U.S. Department of Education, SUNY Downstate provides all students and applicants with specific consumer information to ensure they are able to make educated choices before applying for or taking student loans.

In addition to these financial counseling services, in the College of Medicine, accepted applicants complete the AAMC Financial Literacy 101 Program before arriving at Downstate. Once at Downstate, they have access to a range of training modules on debt management. Fourth-year medical students are required to attend a three-hour loan repayment session that addresses living on a budget as a resident. Students are also given the contact information via email of many sites that will be needed during their residency, including the Direct Loan Center, NSLDS, and the contact information of the director of financial aid.

### THE DIVISION OF STUDENT AFFAIRS

The Division of Student Affairs has oversight for the functions of Admissions, Financial Aid, Registrar, and Academic Development (see Figure 1, Division of Student Affairs). The division explores ways to enhance the entire student experience and develop solutions to student issues and concerns, both individual and collective. With a “students-first” approach, it serves as student mentor, advocate, and voice.

The Division of Student Affairs is headed by Jeffrey Putman, EdD, vice president for student affairs and dean of students. In this capacity, Dr. Putman serves as the chief student affairs officer for all five colleges and schools. He and his staff work closely with faculty and administration to ensure coordination in admissions processes, academic support, student services, and curricular issues within and between academic units. Although the dean’s offices of the individual colleges and schools retain primary responsibility for student advising and academic support, they all consult with the Division of Student Affairs on these issues.

A major improvement within the Division of Student Affairs since the last Middle States study was an overhaul of its IT infrastructure. In 2007, to provide a seamless experience for students and enhance communications between subdivisions,

Student Affairs implemented Banner, an administrative software application for educational institutions. Banner allows multiple student support offices to share a common database and integrates student information into one coordinated system. Since the initial Banner implementation, additional features have been added, including the ability to pay tuition and fees online and a more robust application system.

In 2013, Banner was linked to a web-based portal, called MyDownstate. Through MyDownstate, students can log in to Banner Self Service, Prime Courseware (an implementation of the Angel Course Management System), and Downstate’s email system. Students can also directly view information on tuition and fees, registration, and financial aid packaging, as well as grades and unofficial transcripts.

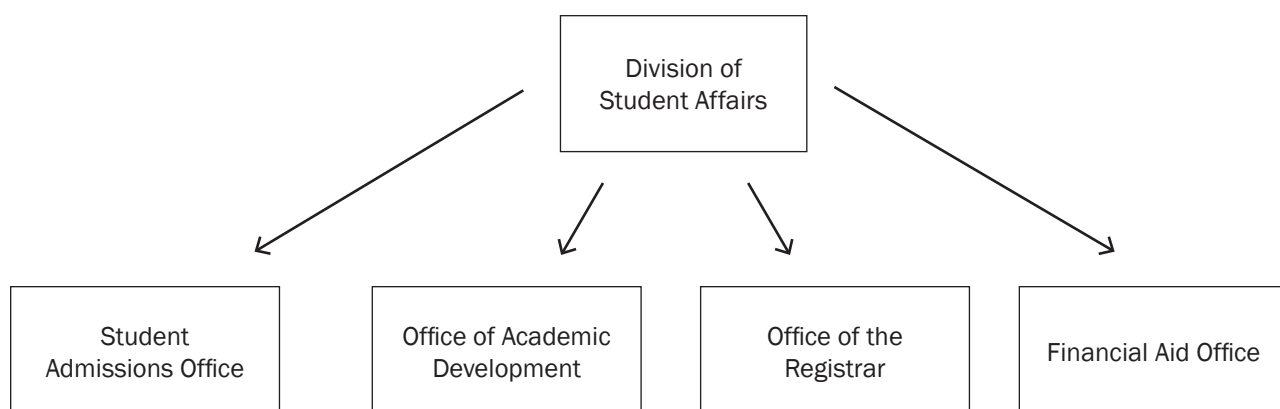
To further enhance communications with students, Student Affairs has implemented a presence on social media, using Facebook and Twitter. These vehicles are used to keep students informed of pertinent information regarding activities, important dates, and other items of interest.

Student Affairs contributes to the academic mission by collaborating with faculty to enhance the student experience. It provides general help and is a central source of information. The office also interprets and develops institutional policies related to students.

Student Affairs supports student retention; provides advisement and consultation to faculty on issues relating to student concerns, including crisis management; helps students access academic services; coordinates academic appeals and disciplinary proceedings; and prepares publications related to student services. It also provides services for international students, students with disabilities, and veterans, and supports events that commemorate milestones and celebrate achievements.

If necessary, Student Affairs will act as an intermediary in helping to resolve student concerns. Methods that students may employ to resolve concerns are described in detail in the *Student Handbook*. Complaints related to a curriculum or grading issue are initially addressed at the course or

FIGURE 1



department level. The Office of Diversity and Inclusion is responsible for ensuring compliance with federal equal opportunity, Title IX, and other federal regulations.

While the campus has a strong safety record, among the committees managed by Student Affairs is the Downstate Personal Safety Committee. This group is charged with assessing existing policies that impact on the personal safety of students, faculty, and staff. The campus has a very low incidence of criminal activity as the result of a strong identification program maintained at campus entrances and a shuttle service for students, faculty, and staff offered by University Police/Public Safety. SUNY Downstate is in full compliance with the Clery Act and all federal reporting regulations. The Clery Act Report and campus crime statistics are available online.

### Student Admissions Office

The Office of Student Admissions provides services related to application processing, recruitment, and marketing. It also produces informational publications and counsels prospective students. Student Admissions works with the colleges and schools to strengthen ongoing recruitment efforts, using vehicles such as open houses; on-campus information sessions; off-campus transfer fairs; marketing materials; and social media and the web to promote Downstate's educational offerings.

Since the last Middle States Self-Study, the Office of Student Admissions has expanded services and refined its processes. The website for prospective students has been greatly enhanced and applicants can now more easily access information about Downstate's academic programs. Formats for open houses and information sessions are more lively and attract larger audiences. Admissions staff have expanded the number and scope of recruitment fairs attended and have drawn on students to assist with their efforts. Student Admissions works with the individual colleges to ensure that admissions policies are equitable and fairly applied and that all equal opportunity guidelines are followed.

### Financial Aid Office

Almost all of the students who attend Downstate need financial aid in order to meet the cost of attendance. Many of Downstate's students are economically disadvantaged, based on criteria set by the U. S. Department of Health and Human Services. Sufficient financial aid is therefore crucial to Downstate's recruitment and retention efforts. In 2014, the Office of Financial Aid facilitated \$36,072,458 in financial aid to 1,140 students. While numbers are not yet complete for the 2015/16 academic year, to date (March 2016) 1,156 students have received \$38,221,036 in financial aid.

Consistent with Downstate's mission, admission is offered on a "need-blind" basis. This means that no student is denied admission because of inability to pay and that every admitted student is afforded the opportunity to attend through a combination of loans, grants, and work-study opportunities. These are detailed on the financial aid website and in the *Student Handbook*.

As reviewed earlier in this chapter, the Financial Aid Office provides financial counseling services to students. In addition, the institutional website contains complete financial aid information, including instructions on costs and how to apply for aid. The Office of Financial Aid determines students' eligibility for aid and guides them through the application procedures. Email, brochures, and social media platforms are used to inform students about opportunities and deadlines. As each student's file progresses to the point that aid may be offered, the Financial Aid Office mails an award letter that contains personalized information. Documents and requirements that are missing are mentioned in the award letter. If students fail to respond promptly, additional letters or emails are sent, reminding them of missing information.

**Admissions staff have expanded the number and scope of recruitment fairs attended and have drawn on students to assist with their efforts.**

The office also accumulates data and maintains the records required to provide timely reports on Financial Aid operations. The Office of Financial Aid works with the academic promotions committee of each college or school to monitor students' academic progress and ensure compliance with federal Title IV regulations. It also conducts entrance and exit interviews to review students' debt and repayment plans.

As described earlier in this chapter, the Office of Financial Aid also counsels students on debt load.

### Office of the Registrar

The Office of the Registrar is responsible for the accuracy, consistency, and security of student academic records and for documenting students' academic performance from matriculation to graduation. It also provides statistical data required by state and federal regulations.

The Registrar handles class schedules, registration, course selection, course add/drops, grades, transcripts, loan deferments, and is the custodian of matriculated student academic records for both current and former students. It also responds to college- and student-specific needs: for College of Nursing students, for example, the Office of the Registrar provides the program completion validation required to sit for advanced practice nursing certification examinations.

Downstate operates on a semester calendar, and registration is held each semester. All of the colleges and schools use the Banner system for registration, with some exceptions in the College of Medicine. For example, COM Foundations Year 1 students in their first semester are registered through "block registration," and third-year COM students are primarily registered for clinical placements through lotteries. The Office of the Registrar ensures that Downstate is in compliance

with the Family Educational Rights and Privacy Act (FERPA). A complete description of the current compliance with FERPA is outlined in the *Student Handbook*.

Student electronic records are secured on a separate server for security purposes and are password protected. The Offices of the Registrar, Student Admissions, and Financial Aid are in the process of implementing a document imaging program that will permit records to be accessed through the Banner Student Information system.

## OFFICE OF STUDENT LIFE AND THE STUDENT CENTER

### Student Life

The Office of Student Life oversees the Student Center, which is the hub of campus activities, as well as many campus events. As such, it creates and strengthens a strong sense of campus identity.

Student Life provides significant opportunities for students to enhance their personal, intellectual, and leadership skills. The office works closely with Downstate's nine student governance councils and provides office support for more than 1,400 student program offerings annually, including mini-course programs, movies, coffeehouses, intramural sports, craft nights, tournaments, entertainment, leadership training, cultural events, speakers, seminars, and the annual Winter Ball.

Student Life also provides support to over 60 student clubs and organizations, as listed in the *Student Handbook*. All student clubs and organizations are required to include a service learning activity both in the fall and in the spring semesters. Each club and organization is also required to submit monthly reports on their events and meetings.

Facilities that support the activities of the student clubs and organizations include meeting rooms of various sizes, an information center, large-screen televisions, pianos, vending services, lounges, bookstore, gymnasium, tennis court, swimming pool, Jacuzzi, sauna, squash courts, weight room, and locker rooms.

### Office of Residence Life

Approximately 400 students reside in two residence halls, which are located next to Downstate's Student Center and across the street from the Health Science Education Building. Since the last Middle States Self-Study, Facilities Management examined the feasibility of converting double rooms on dorm floors to single rooms to provide more privacy for students, but found that the cost would be prohibitively expensive. Downstate has spent \$2.5 million on renovations to the dorms in the last several years. Infrastructure improvements include elevator rehabilitation, a new heating system, lobby and recreational area improvements, a video security system, electrical upgrades, cabling for computers, and most recently, installation of wi-fi. Aesthetic improvements include an attractive new entranceway to the complex to increase student safety and better define the complex as the student residence

area; construction of a new corridor that connects the two dorms so that they are served by one central entranceway; refurbished kitchenettes and new furniture and carpeting; and new shower rooms in the second and third floors. In the Student Center, gym and sporting equipment has been replaced and upgraded, and a new tennis court surface has been laid. A new chiller was added to improve air conditioning. New windows on the side facing the Student Center have been installed.

## ASSESSMENT OF STUDENT SUPPORT SERVICES

A variety of instruments that collect data on students' assessment of support services and advisement are used in planning, as is feedback gathered from direct interaction with students. Staff meet regularly with students in a variety of committees (University Council, Medical Student Council, CHRP Council, Nursing Student Council, Student Technology Fee Committee, Student Health Advisory Committee, Student Center Governing Board, Residence Hall Council) and through class meetings and student organizations.

SUNY Downstate participates in a modified version of the SUNY-wide Student Opinion Survey (SOS), which is specifically designed to fit the specialized urban health professions campus. Of the 558 students who completed the survey, 380 students (69.9%) rated the quality of education at Downstate as "high" or "very high," and 87.1% of students responded that their academic experiences at Downstate met or exceeded expectations. 67.0 percent of students were "satisfied or very satisfied" with Academic Support services, and 72.4 percent were "satisfied or very satisfied" with study areas. 70.4 percent were "satisfied or very satisfied" with Financial Aid services, 73.8 percent with Health Services; 83.5 percent with the course Registration process, and 81.8 percent with Personal Security and Safety.

The AAMC Graduation Questionnaire, completed by all graduating students in the College of Medicine, includes questions that assess student support services. These include academic counseling, tutorial help, personal counseling, debt management counseling, faculty mentoring, career planning, student health, student relaxation space, and policies and procedures to deal with student mistreatment. The COM Dean's Council of Education discusses results of the questionnaire for education with staff of the Division of Students Affairs. In almost all areas, across all years, Downstate's results are as good or better than the national average.

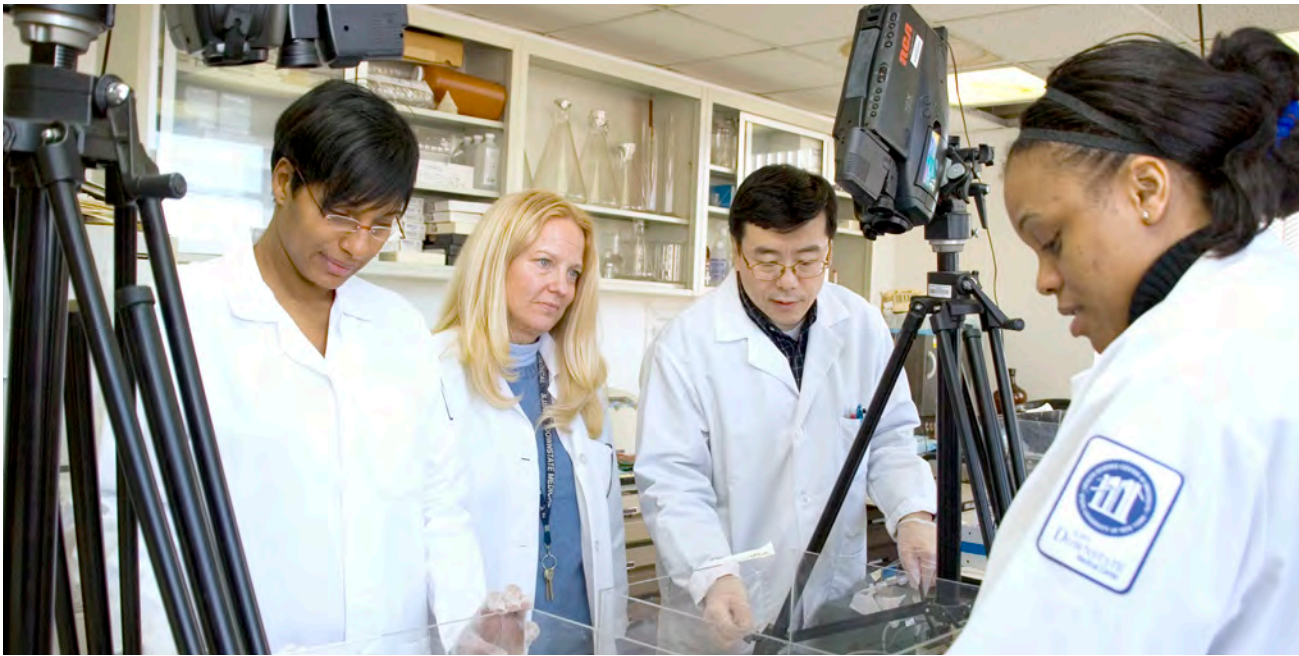
The Office of Student Life asks all students to evaluate Orientation and uses this feedback to develop future programs. It also conducts an annual student opinion survey on students' interest in movies, music, and entertainment to develop the activities calendar. Residential Life and Services conducts an annual assessment to improve services in the residence halls.

IN ADDITION TO MIDDLE STATES ACCREDITATION,  
**MORE THAN 90% OF DOWNSTATE STUDENTS**  
 ARE ENROLLED IN PROGRAMS ACCREDITED BY SPECIALTY BODIES

PROGRAM	COLLEGE	ACCREDITING ORGANIZATION	ACCREDITED THROUGH
<b>Medicine MD Degree</b>	College of Medicine	LCME	2021
<b>Public Health MPH Degree</b>	School of Public Health	CEPH	2016
<b>Public Health DPH (DrPH) Degree</b>	School of Public Health	CEPH	2016
<b>Public Health Advanced Certificate</b>	School of Public Health	CEPH	2016
<b>Diagnostic Medical Imaging BS Degree</b>	College of Health Related Professions	CAAHP	2018
<b>Midwifery MS Degree</b>	College of Health Related Professions	ACME	2022
<b>Midwifery Advanced Certificate</b>	College of Health Related Professions	ACME	2022
<b>Occupational Therapy MS Degree</b>	College of Health Related Professions	ACOTE	2021
<b>Physical Therapy BS/DPT Combined Degree</b>	College of Health Related Professions	CAPTE	2023
<b>Physician Assistant BS Degree</b>	College of Health Related Professions	ARCPA	2019
<b>RN to BS BS Degree</b>	College of Nursing	CCNE	2025
<b>Accelerated Nursing BS Degree</b>	College of Nursing	CCNE	2025
<b>Pediatric Clinical Nurse Specialist MS Degree</b>	College of Nursing	CCNE	2025
<b>Adult - Gerontology Clinical Nurse Specialist MS Degree</b>	College of Nursing	CCNE	2025
<b>Nurse Anesthesia MS Degree</b>	College of Nursing	CANAEP	2017
<b>Nurse Midwifery MS Degree</b>	College of Nursing	CCNE	2025
<b>Women's Health Nurse Practitioner Certificate Program</b>	College of Nursing	CCNE	2025
<b>Family Nurse Practitioner Certificate Program</b>	College of Nursing	CCNE	2025

**LCME:** Liaison Committee on Medical Education  
**CEPH:** Council on Education for Public Health  
**CAAHP:** Commission on Accreditation of Allied Health Programs  
**ACME:** Accreditation Commission on Midwifery Education  
**ACOTE:** Accreditation Council for Occupational Therapy Education

**CAPTE:** Commission on Accreditation in Physical Therapy Education  
**ARCPA:** Accreditation Review Committee for Physician Assistant  
**CCNE:** Commission on Collegiate Nursing Education  
**CANAEP:** Council on Accreditation of Nurse Anesthesia Educational Programs



Diana Dow-Edwards, PhD, professor of physiology and pharmacology, cell biology, and of neural and behavioral science, with students.

**STANDARD 11:  
EDUCATIONAL OFFERINGS**

**STANDARD 13:  
RELATED EDUCATIONAL ACTIVITIES**

**STANDARD 14:  
ASSESSMENT OF STUDENT LEARNING**

**EDUCATIONAL OFFERINGS**

Downstate’s mission commits to excellence in educating graduate and undergraduate students for careers in the health professions and biomedical sciences. Downstate’s educational offerings include content, rigor, and coherence appropriate to the programs and degree levels offered. All Downstate’s colleges and schools identify program- and course-specific learning goals and objectives for their educational offerings.

The curricula for each of Downstate’s five colleges and schools are listed in their respective *Bulletins*. Curricula are designed to foster comprehensive learning experiences. Students receive course syllabi containing explicit course descriptions, objectives, expected learning outcomes, teaching-learning strategies, course requirements, and grading/evaluation methods. (See Appendix H, *College Enrollment Profiles and Learning Outcomes*.)

Educational offerings are subject to ongoing, rigorous assessment to foster continuous improvement. Faculty committees, in conjunction with their respective college or school dean, determine assessment and the expected outcomes for each course. If there is a determination that change is needed, the curriculum committee structure of each college and school reviews and approves changes

prior to implementation. Broad revisions may require review and approval by the college’s or school’s faculty governance structure. Faculty-student meetings and exit interviews also provide valuable qualitative feedback and are used to drive improvement.

Educational offerings are regularly and extensively evaluated as a component of required specialty accreditations, including the LCME (Liaison Committee on Medical Education), CCNE (Commission on Collegiate Nursing Education), CEPH (Council on Education for Public Health), and the accrediting bodies of each of the allied health professions. Since 2009, Downstate has undergone nine successful accrediting reviews by external bodies. (See, *Assessment of Student Learning*.)

There have been a number of changes in the educational offerings since the 2006 MSCHE site visit. For example, the Master of Public Health Program formerly housed in the College of Medicine has transitioned to full-fledged school status, with doctoral and advanced certificate programs added to its curricula. CHRP programs have continued to transition to graduate-level education, reflecting changes in credentialing requirements in several disciplines. The College of Medicine and the College of Nursing have introduced new curricula to respond to the evolving healthcare landscape.

The core values expressed in Downstate’s mission statement are a unifying force for Downstate’s educational offerings: to value Downstate’s contributions to the community; commit to the highest standards of ethical behavior and to high performance in education, research, and patient care; respect; innovation; commitment to diversity; and foster excellence through holding to high standards of professionalism.

Downstate’s five colleges and schools offer 24 programs, as detailed in Table 1.

**TABLE 1: DOWNSTATE’S EDUCATION PROGRAMS**

Program	Degree
Medicine	MD
Public Health	MPH
Public Health	DPH (DrPH)
Public Health	Post-baccalaureate Certificate
Molecular and Cellular Biology	PhD
Neural and Behavioral Science	PhD
Biomedical Engineering	PhD
Midwifery	MS, Advanced Certificate
Occupational Therapy	MS
Physical Therapy	BS/DPT
Physician Assistant	BS
Diagnostic Medical Imaging	BS
Medical Informatics	MS
RN to BS	BS
Accelerated BS	BS
Pediatric Clinical Nurse Specialist	MS
Adult-Gerontology Clinical Nurse Specialist	MS
Nurse Anesthesia	MS
Nurse Midwifery	MS (Concurrent Program with CHRP)
Women’s Health Nurse Practitioner	MS, Advanced Certificate
Family Nurse Practitioner	MS, Advanced Certificate

**College of Medicine**

In August 2013, the College of Medicine began the first year of its newly designed Integrated Pathways Curriculum (IPC), following a strategic review of the existing curriculum and process that began in 2008. IPC, which was endorsed by faculty governance and the dean, is the culminating effort of 25 committees and participation by over 160 faculty and students. Fundamental changes in the Integrated Pathways Curriculum include:

- Adoption of the Accreditation Council for Graduate Medical Education (ACGME)’s six competencies as the basis for the curriculum;
- Creation of a more student-centered learning environment;
- Integration of normal and abnormal basic science knowledge and concepts;
- Integration of the teaching and assessment of clinical skills and medical knowledge;
- Adoption of active learning principles for design of lessons;
- Creation of outcome-based learning objectives to guide students and faculty;
- Creation of weekly higher-order formative assessments that go beyond recall of facts;

- Creation of a searchable database of learning objectives that will ensure appropriate coverage of topics;
- Design of longitudinal opportunities for students to develop clinical skills, starting from the first week;
- Transition to the clinical years in April of the second year (shortening the preclinical period by approximately 3 months);
- Introduction of a Pass/Fall grading system for the preclinical period (with the possibility of Distinction in Foundations for the whole period).

IPC contains three phases: Foundations of Medicine (18 months); Core Clinical Medicine (12 months); and Advanced Clinical Medicine (14 months). Foundations of Medicine consists of six major interdisciplinary units that integrate learning normal structure and function with abnormal, and learning basic science while acquiring clinical skills. Core Clinical medicine consists of paired clerkships to enhance interdisciplinary teaching. Advanced Clinical Medicine includes integrated biomedical science selectives, a diagnostic imaging rotation, a critical care rotation, an expanded emergency medicine rotation, four weeks of geriatrics and palliative care, a subinternship, and ample time for electives and interviews for residencies.

Under IPC, teaching, learning, and assessment are transparently competency-based with Accreditation Council for Graduate Medical Education (ACGME) frameworks adjusted appropriately for undergraduate medical education. Teaching methods promote student-centered, active learning and foster problem solving and clinical learning. Featured are interactive lectures, problem-based learning, small-group discussions, increased use of simulation, and asynchronous learning using online courseware. Assessment and competency milestones are integrated throughout the four years. The goal is to train students to be knowledgeable, technically skilled, socially conscious, and professionally responsible physicians.

**School of Graduate Studies**

The School of Graduate Studies offers three interdisciplinary PhD programs: Molecular and Cellular Biology; Neural and Behavioral Science; and Biomedical Engineering. These three programs offer curricula consistent with the expertise of the program faculty, with whom PhD candidates have a mutually beneficial and intensive one-on-one relationship. The interdisciplinary nature of SGS programs optimizes the teaching effort of the faculty, since any individual graduate course is taught by faculty of several basic science and clinical departments.

Program requirements are rigorous and include a core curriculum and 46 course credits, including fundamental courses and advanced courses, two laboratory rotations, a qualifying examination, and defense of a research proposal and thesis. The qualifying examination is administered by the program faculty and selected by the program executive committee; the thesis examinations are all judged by a committee jointly chosen by the student and thesis advisor and appointed by the dean.

All students are required to complete at least two laboratory rotations before deciding with whom they will study for their PhD thesis. This gives the student the opportunity to have at least two role models from whom to learn scientific techniques, reasoning, best laboratory practices, experimental design, and laboratory management. In addition, courses in which students read, evaluate, and discuss papers in the literature on a specific topic are used not only to impart knowledge on that topic, but to learn how experimental protocols are designed, hypotheses are formulated, background information is acquired, and discussions sections are used to move the findings forward.

### College of Health Related Professions

The College of Health Related Professions provides professional educational programs in Midwifery, Occupational Therapy, Physical Therapy, Physician Assistant, Medical Informatics, and Diagnostic Medical Imaging. Each program has defined goals, objectives, and expected learning outcomes that guide the curricula.

Four of the six educational programs offered in the college (Midwifery, OT, PT, Medical Informatics) offer graduate-level education. Since the last decennial MSCHE site visit, OT transitioned to master's level training, and PT initiated a comprehensive BS to DPT program. As a result of this transition, the curricula in these programs have added content in research and incorporated teaching and learning strategies that foster graduate-level critical thinking. Critical review of research articles is integrated throughout the graduate courses and the culminating experiences include the development of research proposals, research theses, and field analyses. Emphasis is placed on the evaluation of research studies and on the use of research findings in professional practice. Teaching-learning strategies; evidenced-based information that is culturally specific; and appropriate evaluation measures are used to facilitate the development of independent thinking. Faculty who teach graduate-level courses have terminal degrees appropriate to course and degree level.

*Midwifery:* The Midwifery program offers both advanced certificate and master's degree curricula. Most courses contain both didactic and clinical components; research is taught as two separate courses within the master's curriculum. The program is fully accredited by the Accreditation Council for Midwifery Education through 2022.

*Occupational Therapy:* The content and rigor of the curricula offerings in the Occupational Therapy program are congruent with its mission to educate future occupational therapists. Since the 2006 MSCHE site visit, the program discontinued its advanced certificate program in Early Intervention Occupational Therapy, and has incorporated much of this content into its core MS degree curriculum. The Occupational Therapy program is accredited by the Accreditation Council for Occupational Therapy Education through 2021.

*Physical Therapy:* The Physical Therapy program prepares students to become practitioners who will assume the roles of clinician, educator, consultant, researcher, and administrator. In alignment with specialty accreditation standards, the program developed the BS/DPT (Bachelor of Science/Doctor of Physical Therapy) degree. The Physical Therapy program is accredited by the Commission on Accreditation of Physical Therapy Education through 2023.

*Medical Informatics:* Medical Informatics offers the master's degree. The field involves the storage, retrieval, and communication of biomedical information and information management that contribute to improving health care. It also includes consumer health informatics, data protection, evaluation of healthcare information systems, and research. Students in MI are taught core elements of the discipline with content and rigor that are appropriate to the master's level degree, including critical appraisal and decision making.

*Physician Assistant:* The Physician Assistant program offers the baccalaureate degree. It provides the academic and clinical foundation for primary care PAs, preparing them to participate in the team approach to patient care. Research is a skill that students and faculty are acquiring as the curriculum evolves. The Physician Assistant program is accredited by the Commission on Accreditation of Allied Health Education Programs through 2019.

*Diagnostic Medical Imaging:* SUNY Downstate offers one of the few bachelor's degree-granting programs in Diagnostic Medical Imaging (DMI) with a dual curriculum in general and cardiac sonography in the tri-state area. Applicants to the program are well qualified, and graduates are sought for employment by numerous clinical institutions. The Diagnostic Medical Sonography program is accredited by the Commission on Accreditation of Allied Health Education Programs (CAAHEP) through 2018.

### College of Nursing

The College of Nursing offers baccalaureate degree, master's degree, and postgraduate certificate programs. Curricula in all programs have been revised to incorporate new standards issued by the American Association of Colleges of Nursing. *The Essentials of Baccalaureate Education for Professional Nursing Practice* were incorporated into the baccalaureate curriculum in 2012. Master's programs incorporated *The Essentials of Master's Education in Practice* in 2013. The revised master's degree and postgraduate certificate curricula reflect the recommendations of the advanced practice registered nurse (APRN), *Consensus Model for APRN Regulation: Licensure Accreditation Certification and Education*, known as the LACE Model.

In November 2014, the educational offerings in the baccalaureate degree, master's degree, and postgraduate certificate programs undertook self-study as part of the accreditation review of the Commission on Collegiate Nursing Education (CCNE). All programs were granted continued accreditation for the maximum period of 10 years, extending to 2025.



Educational offerings were evaluated based upon clear statements of expected student outcomes derived from the mission, philosophy, and objectives of the program; teaching-learning practices consistent with professional nursing standards and guidelines; incorporation of content and learning experiences essential to practice in professional nursing as a generalist or specialist; consideration of the needs and expectations of the community of interest; and curricula practices that are periodically reviewed for ongoing quality improvement.

The upper-division baccalaureate curricula are designed to educate two types of students: 1) those who are already licensed as registered professional nurses (RN to BS) and 2) individuals who already hold a bachelor's degree in another discipline and are seeking basic preparation for beginning nursing practice (Accelerated BS). Students in both programs must transfer in lower-division prerequisites in liberal arts and sciences as a foundation for upper-division courses in nursing. The Accelerated BS Program offers courses consistent with the rigorous training required of RNs, and students are eligible to sit for licensure following graduation.

The undergraduate programs prepare graduates to become competent generalists with the knowledge, skills, and values for meeting the present and evolving health needs of culturally diverse clients in a variety of settings. Strategies and evaluative measures for both programs include midterm

and final examinations, independent student assignments, computerized and web-based assignments, reflective journals, individual/group presentations, community assessments, and research critiques, as well as performance evaluations in courses with clinical components.

Master's degree and postgraduate certificate programs prepare professional nurses as specialists in advanced nursing practice roles. Advanced practice nurses are expert clinicians with significant autonomy within their scopes of practice. They engage in both independent and interdependent practice in collaboration with physician colleagues and other healthcare providers. In addition to their direct care role, advanced practice nurses function as educators, consultants, researchers, and healthcare policy experts. Currently, the College of Nursing offers master's programs in nurse practitioner, clinical nurse specialist, nurse midwifery, and nurse anesthesia; and certificate programs in nurse practitioner. The College of Nursing is conducting a comprehensive assessment of all aspects of the clinical nurse specialist and the nurse anesthesia programs, with an emphasis on faculty resources.

Course requirements in the master's degree and post-graduate certificate programs are rigorous. The curricula are sequenced to insure that students build their clinical specialization studies on a foundation of graduate core courses and advanced nursing practice core courses. In addition to written examinations, examples



of strategies and evaluative measures include case scenarios for alternative diagnoses; clinical logs using evidence-based practice; group clinical presentations; analysis of national clinical guidelines and recommendations of best practices; analysis of ethical issues in case studies involving research on vulnerable populations; analysis of research studies relevant to students' areas of specialization and a research project. In 2014, the College of Nursing hired an associate dean for research as part of a strategic initiative to position the college as a Center for Nursing Research.

#### **School of Public Health**

The School of Public Health offers master's, doctoral, and certificate programs through four departments: Community Health Sciences, Environmental and Occupational Health Sciences, Epidemiology and Biostatistics, and Health Policy and Management. Within these departments, SPH offers five master's and three doctoral concentrations. An MD/MPH degree option is also offered. Curricula in these programs foster graduate-level critical thinking and culminating experiences that include the development of research proposals, research theses, and field analyses. Faculty have terminal degrees appropriate to course and degree level.

**Community Health Sciences** educates and trains public health practitioners in the health of urban and immigrant communities domestically and around the world. Downstate's location in Brooklyn, which is home to many immigrant communities, provides numerous opportunities for study. All MPH and DPH (DrPH) core courses include time spent learning about and contributing to the health of local communities. Studies of immigrant communities include simultaneous study of countries of origin. Community research is conducted over a wide range of channels.

**Environmental and Occupational Health Sciences** engages in public health practice and conducts both basic and applied research. Faculty are actively engaged in research and teaching on the assessment, control, and prevention of environmental and occupational chemical, biological, physical, and workplace hazards and in better understanding their impacts on human health and safety. A special focus of the department is the impact of the "urban built environment" on public health.

**Epidemiology and Biostatistics** provides expertise and training in applying epidemiological and statistical methods to population-based research. It fosters collaborative, cross-disciplinary research that addresses the role of biological, behavioral, socio-economic and environmental factors in the study of urban and immigrant health outcomes. Students in the department can elect a master's concentration in either Epidemiology or Biostatistics.

**Health Policy and Management** prepares leaders who will understand, guide, and improve public health and healthcare systems. Health Policy trains students to assess, collaborate, plan, innovate, and advocate for improvement in public health and healthcare systems. Health Management provides skills on leadership of public health organizations and healthcare systems, including financial, operational, and scientific expertise.

#### **CLINICAL TRAINING OPPORTUNITIES**

Downstate students have access to training facilities at a significant number of affiliates that complement the educational experience on campus, including Downstate's own onsite teaching hospital, University Hospital of Brooklyn. Patients at these facilities come from many countries and backgrounds, exposing students to medical and behavioral conditions that would be regarded as exotic in less cosmopolitan settings. Student access to a broad case mix is consistently cited by students as one of Downstate's greatest educational strengths. Affiliation sites are listed in the school *Bulletins*.

Downstate, through its faculty and administration, assumes full responsibility for coordinating and supervising clinical education provided at affiliated institutions. Oversight provided by Downstate includes assurance that clinical affiliation agreements between SUNY and each clinical training health facility are executed. These contracts define the educational parameters and responsibilities of each participating institution. A signed agreement between the clinical affiliate and SUNY Downstate, for the purpose of the clinical education of all students, must be in effect prior to placement.

Clinical faculty hold either a salaried or nonsalaried academic appointment at Downstate and are qualified through their education, clinical training, and licensure to serve as clinical faculty. Specific clinical requirements, standards of behavior, and outcome indicators are outlined in clinical handbooks, course syllabi, or other correspondence that are shared among clinical preceptors, faculty, and students. Specific site selection and ongoing monitoring of the supervised clinical education activities are designed to ensure that the learning objectives are being met and to assist in managing students' clinical learning experience. These mechanisms ensure that educational activities carried out in the institution's name adhere to the policies and procedures outlined by SUNY Downstate Medical Center.

#### **LIBRARY**

The learning resources, facilities, instructional equipment, library services, and professional library staff provide the infrastructure necessary to support educational programs. The Medical Research Library of Brooklyn occupies three floors on the south wing of the Health Science Education Building and serves all students and faculty at Downstate.

The library comprises 65,000 square feet and seats 422. It is easily accessible to all students and faculty and is open seven days a week. Off-hours access is available to all students through use of their ID and PIN number. Electronic resources are easily accessible via the web, with over 100,000 visits annually recorded on the library server. The library is adequately staffed by professional full-time personnel who hold faculty titles, plus administrative and clerical support. Work-study students are employed as needed. Library services include:

- Access Services Department, which is responsible for circulating library materials and reserves;
- Archival and Special Collections Department, which is responsible for historically significant materials;
- Classroom Services, which is responsible for room scheduling and audiovisual services;
- Interlibrary Loan Department, which obtains materials not found in the library's collection;
- Photocopy Service, for making photocopies of materials;
- Academic Computing, which provides assistance in curriculum-related computing; and
- Reference, for help in using the library's resources and for placing materials on reserve for student use.

The Reference Service offers a wealth of computerized databases. Its highly trained staff of researchers assists both students and faculty upon request and also offers classroom instruction in the use of computer searching skills and Internet. Searching may be done within the library at a large number of available computers, or remotely.

The Learning Resource Center on the lower level of the library houses a wide variety of slides and tapes, computer-assisted instruction in courses such as Human Gross Anatomy, with enough computers to instruct an entire class, and a wide range of instructional programs.

Education Services provides curriculum-related and clinical support classes. Courses in evidence-based health care are provided. Expert searching is available for researchers who need in-depth search and analysis in their subject areas, including instruction in conducting complicated database searches. This service is also available for assistance in grant applications. The library presents classes on research techniques to students enrolled in research courses.

All students are made aware of the services and resources available through the library and Learning Resource Center during the first week on campus. The library staff orients them to the capabilities of the library, while the educational computing technology staff orients them in the use of computers, the network on campus, Prime, and e-mail. Students extensively use the electronic reserve capability and electronic collection of the library. Journal articles, lecture outlines, and supplemental course materials are placed on e-reserve and allow students immediate access. (See Standard 3, *Institutional Resources*, for additional information on the library.)

### INFORMATION TECHNOLOGY

Downstate's Division of Information Services and Academic and Library Computing (ALC) support the programs, goals, and objectives of Downstate's academic enterprise. The division provides the physical, technological, and informational resources that allow the Downstate community to create a culture of collaboration and scholarship across the continuum of teaching and learning.

A critical skill for students in the health professions and sciences is use of information technology and learning resources. There is extensive use of information technology by the students and faculty in all of Downstate's colleges and schools. This is true of the clinical specialization courses, in which students are expected to access and use the most recent national clinical practice guidelines, as well as in research courses.

All of the colleges and schools house individual computer labs, in addition to the resources maintained in the library. Classrooms contain LCD projectors for instruction and presentations and feature wired or wireless access to the Internet. The entire student body and faculty have email accounts through the university, which allows for easy accessibility in both directions.

Academic and Library Computing provides support for online and computing needs, helps to maintain and administer the colleges' and schools' computer laboratories, and conducts periodic workshops. It supports a suite of applications designed to support Downstate's educational offerings, including software for managing and mapping competency-based curricula. In 2011, ALC implemented a formal Equipment Replacement Program to assess and plan for stable equipment replacement. The total equipment inventory is approximately \$1.2 million. Each year, equipment is assessed for replacement assuming a three- to five-year life cycle. (See Standard 3, *Institutional Resources*, for additional information on information technology.)

### TRANSFER CREDIT

SUNY Downstate Medical Center is a specialized educational institution that offers only graduate and upper-division undergraduate professional education. All undergraduate programs offered at Downstate rely on student development of foundation knowledge acquired at other undergraduate institutions. Academic prerequisites and prior educational experience requirements reflect core competencies for entry into the professional phase programs in allied health, nursing, medicine, graduate studies, and public health. The prerequisite courses required for admission are clearly outlined in promotional materials and application documents distributed and posted on the Downstate website and the college and school *Bulletins*. Downstate is in compliance with SUNY's seamless Transfer Paths guidelines.

Prior learning is recognized through transfer credits and course exemptions in both undergraduate and graduate programs. Prior academic coursework may replace required course of study content, as per specific guidelines published

in admission materials. In undergraduate programs, grades on all prior course work applied toward the upper-division prerequisite credits must have a grade of “C” or above.

At the discretion of the Admissions Committee, program of study transfer credits may also be awarded. In graduate programs, students who have completed graduate courses at another institution, prior to matriculation, with a minimum grade of “B” or better, may transfer credits if the courses are judged equivalent to those required by the specific graduate program.

### DISTANCE LEARNING (DL)

Currently, no Downstate programs are delivered 100 percent via distance learning, although some courses within programs utilize a hybrid format. Policies have been put in place to ensure that, as Downstate moves towards increased use of distance learning methodologies, all DL courses are designed and taught with a high degree of integrity and quality and meet required standards for student verification and protection. A growth model for DL is envisioned, in alignment with SUNY’s university-wide strategic plan for enhancing access to higher education via DL. Policies support the following principles: All Downstate DL students are served with the same level of services as residential students, and have sufficient access to instructors and academic support. All courses are evaluated as to their appropriateness for online delivery. Faculty are supported in effective distance education pedagogy. Hardware/software for course development and currency in online delivery methodologies are maintained. The Council of Deans (see, Assessing Student Learning) rigorously assesses DL effectiveness and outcomes.

### RELATED EDUCATION ACTIVITIES

In addition to traditional degree granting programs, Downstate offers continuing medical education programs for physicians and healthcare professionals and advanced certificate-bearing educational programs. Each of these programs is consistent with the SUNY Downstate Medical Center mission.

**Continuing Medical Education:** The primary purpose of continuing medical education is to support lifelong learning and professional development for physicians and healthcare professionals. This is accomplished through educational programs that include, for example, review courses, seminars, workshops, and grand rounds that achieve a set of intended learning outcomes. These outcomes typically include all desired changes in knowledge, practice behaviors, and improved patient outcomes. Instructional objectives are established to identify intended learning outcomes that meet or exceed the expectations of the Accreditation Council for Continuing Medical Education (ACCME). The overarching goal is to provide access to cutting-edge knowledge and research that improves levels of patient care – locally, nationally, and worldwide.

For all activities, regularly scheduled and one-time conferences, the audience is surveyed to ascertain the effectiveness of the course via a participant evaluation

form. These forms include questions related to the relevance of the topic to the physician’s practice, the knowledge of the speaker, whether new knowledge was learned, and if there was a perceived conflict of interest or commercial (i.e., pharmaceutical) support influence. In most learning environments, there is a question and answer period, which enables the presenter to discuss participants’ specific questions relating to the presentation. The activity directors are also encouraged to ascertain CME activity effectiveness through discussion with participants, faculty, and a faculty focus group.

Additionally, a staff person from the Office of Continuing Medical Education (OCME) conducts site visits at all conferences and random visits at regularly scheduled conference CME activities. The site visitor completes a site visit evaluation form to ensure compliance with the *ACCME Essentials*. After each visit, if necessary, a letter from the OCME is sent to the activity director pointing out any possible problem with regard to compliance with the *ACCME Essentials*. These visits and subsequent communication, such as the executive summary of the activity, serve as another important connection between the Office of CME and CME activity directors (those who are responsible for putting on the CME program), and assures future compliance with the *Essentials*. The Office of CME was assessed by ACCME in 2015, and reaccredited through 2021.

**Certificate Programs:** Advanced certificate programs are offered by Downstate in the Colleges of Health Related Professions (Midwifery) and Nursing (Women’s Health Nurse Practitioner and Family Nurse Practitioner). The School of Public Health offers a post-baccalaureate certificate program. Each of the certificates is credit bearing, and the credits may be applied to degree programs at Downstate. All certificate programs are evaluated and monitored by the faculty, program chairs, and college or school dean, as per established institutional procedures. Academic oversight assures transferability of credit-bearing certificate courses to comparable degree programs.

**Experiential Learning:** College credits are not granted for work experience, structured internships, or life experience.

**Basic Skills:** As a specialized campus in the health and medical sciences, admission is competitive and all enrolled students demonstrate academic proficiency in basic educational skills. Students who need additional academic support may seek guidance from faculty, participate in structured tutorial programs, or seek help through the Office of Academic Development.

### ASSESSMENT OF STUDENT LEARNING

Downstate’s colleges and schools produce a variety of outcomes assessment analyses. These are undertaken at the student, course, program, college and school, and institutional level to meet the requirements of accrediting bodies, analyze activity success, provide performance feedback, and modify existing programs, as well as to serve as a basis for long-range planning. Information on

assessment results is available to prospective students upon request from the respective college or school.

Downstate’s student assessment activities are sustained and continuous. They are aligned with and reflect the institutional mission and the foci of each college and school. Many of Downstate’s outcomes assessment activities are summative in nature; that is, they are directed at summarizing activity success and analyzing attainment of goals and objectives. Others are formative: the information gathered is used to modify activities with the intent of improving them. Learning outcome measures routinely assessed at Downstate include, for example, entrant grade point averages, scores on standardized national examinations, performance in basic science courses, evaluations of clinical performance, and course and faculty evaluations by students.

**ON-GOING ASSESSMENT THROUGH ACCREDITATION PROCESSES**

In addition to Middle States accreditation, the majority of the programs offered at Downstate undergo self-study and are accredited by their national professional specialty organizations, as detailed in Table 2. In 2014, 93 percent of Downstate students were enrolled in programs that undergo specialty self-study. Each college and school formulates outcomes assessment instruments and collects data, with many survey instruments geared towards collecting the data required by their specialty accrediting body. The specialty accreditation processes require educational programs to provide assurances that their graduates exhibit general professional competencies that are appropriate for entry to the next stage of their training. See Table 2.

Downstate adheres to SUNY Board of Trustee policy mandating periodic review of student learning and external review of all education programs. There are four Downstate programs that do not undergo review by specialty accrediting bodies. Under the direction of the new dean for the College of Health Related Professions, the Medical Informatics Program will undergo review in May 2016 and the report will be available at the time of the Middle States site visit. The School of Graduate Studies had been scheduled for external review in 2012, but received permission to reschedule the review to permit an extensive reorganization of its fall and spring course schedules in response to curriculum changes in the College of Medicine, which affect students pursuing MD/PhD degrees. External review is planned for 2017.

**OUTCOMES ASSESSMENT AND CONTINUOUS IMPROVEMENT**

Outcomes assessment is used extensively to ensure continuous improvement, as shown in the following examples:

**College of Medicine – Curricular Revision:** A complete curricular revision, the Integrated Pathways Curriculum, was instituted in the College of Medicine in August 2013. Committees on assessment of student learning, assessment of faculty effectiveness, and assessment of curriculum effectiveness were part of the new curriculum’s planning process. Students must demonstrate mastery of six competencies at pivotal points throughout their four years of study, and faculty must certify that students meet expectations before students are allowed to proceed to the next step of their training. A dean for

**TABLE 2**

Accreditation Reviews by Professional or Specialty Accrediting Organizations			
College or Program	Accrediting Organization	Date of Last Visit	Accredited Through
SUNY Downstate	Middle States	2011	2016
Medicine	LCME	2013	2021
School of Public Health	Council on Education for Public Health	2010	2016
Nursing	Commission on Collegiate Nursing Education	2014	2025
Nurse Anesthesia	Council on Accreditation of Nurse Anesthesia Educational Programs	2014	2017
Diagnostic Medical Imaging	Commission on Accreditation of Allied Health Education Programs (CAAHEP)	2012	2018
Midwifery	Accreditation Commission on Midwifery Education	2012	2022
Occupational Therapy	Accreditation Council of Occupational Therapy (ACOTE)	2012	2021
Physical Therapy	Commission on Accreditation in Physical Therapy Education (CAPTE)	2012	2023
Physician Assistant	Accreditation Review Committee for Physician Assistant (ARC-PA)	2011	2019

assessment, Dr. Bonnie Granat, was hired to establish and evaluate learning objectives, and Academic Computing assisted with implementing software that tracks student progress. In addition, the Dean's Council for Education, the College of Medicine's curriculum oversight body, has in place a standing calendar to review curriculum effectiveness. It also has a subcommittee, the Curriculum Evaluation Committee, that assists in this process. The COM Dean's Council for Education complies with LCME accreditation standards, which require a continuous quality improvement process.

**School of Public Health – Assessment of the Field Experience:** A central feature of the School of Public Health is a field experience that focuses on a public health practice issue. At its completion, faculty debrief the student to elicit suggestions on strengthening the experience for subsequent students. This feedback has led to a more consistent process of working with students to plan and implement their field experience. In addition, all students give an oral presentation of their field experience to the faculty and submit a written paper reviewed by at least two faculty members. At regular faculty meetings, completed field experiences are reviewed and used to identify areas in which the curriculum can be strengthened. To date, review of the field experience has helped stimulate the development of a placement writing exam and remedial writing course, the development of a research workshop for students to design their field experience, and an ongoing focus on curricular attention to critical thinking, work plans, and experiential learning.

**College of Health Related Professions:** The College of Health Related Professions surveys national data trends and assesses workforce needs to ensure that educational curricula and learning objectives offered within the college remain current with healthcare trends, community needs, institutional mission, and accreditation requirements. For example, since the last review, the college's first doctoral program, a combined BS/DPT, was established and learning objectives were revised to reflect doctoral-level rigor. In order to keep up with market demands and the evolving and emerging needs within the professions, a number of additional degree offerings are being discussed, including a second track in Diagnostic Medical Imaging (a Certificate Program for Sonographers), a second track in Medical Informatics (Picture Archiving Communication System Administrator), and doctoral programs in Midwifery and Occupational Therapy. If these programs move forward into the formal strategic planning process, learning objectives and measures will be part of the curriculum development.

**College of Nursing – Curriculum Revision:** Curriculum and teaching-learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement. In 2012, the undergraduate and graduate curricula were revised to integrate the American Association of Colleges of Nursing's (AACN) Baccalaureate and Master's Essentials

through the curriculum. These Essentials reflect the core competencies expected of graduates of baccalaureate and master's nursing programs. The dean and faculty revised learning objectives and learning measures to reflect the revised competencies. Faculty work closely with students and "Success Action Plans" have been implemented. Graduates of the college have been surpassing New York State and national pass rates on national licensure examinations.

**School of Graduate Studies – Time to Degree:** Reducing the number of years to degree has been a long-term goal of the School of Graduate Studies. In 1998, the average time to degree for MD/PhD's was 9 years and for PhD's it was 7.6 years. Since then, there has been a steady decline. The school's 2010 to 2015 strategic plan includes a goal of reducing average time-to-degree to 4.5 years. Reductions have been attained through increased faculty oversight and a formal evaluation process of student progress conducted every six months. These times-to-degree compare favorably to median time-to-degree nationally.

#### **Facilitating Outcomes Assessment**

Outcomes assessment is an integral part of planning at Downstate. Each college and school is independently administered by a dean and faculty organization that direct the academic program, ensure that the curriculum is periodically reviewed, prepare for accreditation visits, and establish learning objectives and guidelines for student admissions, promotion, and graduation. Each college and school participates in strategic planning, and it is during this process that critical decisions are made, many reflecting student outcomes assessment. The campus structure that assists the colleges and schools with outcomes assessment planning through data compilation is the Office of Institutional Research (OIR).

OIR uses existing internal data sources and directly collected data to ensure that reporting to the SUNY system, the federal government, and accreditation bodies is carried out in an accurate and timely fashion. Examples include the SUNY Institutional Research Information System (SIRIS), the Integrated Postsecondary Education Data System (IPEDS) data collection, the annual Middle States profile, and submission of enrollment data to SUNY. Upon request, OIR can also consult on methodologies to assess outcomes of educational programs or on studies to help faculty and administrators make decisions about curricular change, admissions policies, and other aspects of courses and programs. Examples include studies to determine whether there are significant differences in student outcomes related to the clinical sites students were assigned to, analysis of the factors predicting success on the NBME examination, and studies of the relationship of admissions variables to student success.

Assessment at Downstate has been enhanced by the Office of Faculty Affairs and Professional Development, established by President Williams in 2014. Faculty

Affairs offers seminars to improve instructional skills, including for example, sessions on assessment, teaching to millennial learners in health care, and blended learning.

### ASSESSING STUDENT LEARNING

At Downstate, assessment of student learning is fundamental. It is essential to the education of healthcare professionals. Every course and every program is assessed at every pivotal gateway, and improvements are continuously implemented to ensure strong outcomes. The results of our continuous assessment are demonstrated in Downstate's excellent national test results, learning outcomes, graduation rates, licensure results, and postgraduation employment data. It is Downstate's obligation, its duty, and its passion to ensure that the students we train and develop are well prepared to pursue their careers in the health professions.

Assessment is guided by the Council of Deans, which provides senior institutional-level review of assessment policies and procedures used by the individual colleges and schools. The assessment objectives of the Council of Deans include assisting colleges in developing evaluation plans based on student learning outcomes compared to target performances; collecting institutional information about Downstate's outcomes and disseminating information to the campus and to key stakeholders; sharing assessment best practices across colleges and their programs; and presenting information to campus decision makers and planners as they develop strategic plans and allocate resources in support of Downstate's core educational mission.

The Council of Deans plays a strong role in creating and maintaining a campus culture of self-evaluation and improvement. Membership includes the dean of each college and school, Downstate's vice president for faculty affairs and professional development, the vice president for student affairs, the associate vice president for strategic policy and planning, the director of institutional research, and as appropriate, student and faculty representation. In its capacity as an assessment committee, the Council of Deans is chaired by Dr. Mark Stewart, dean of the School of Graduate Studies, and professionally supported by Dr. Bonnie Granat, dean of assessment for the College of Medicine.

Each college and school (or in the case of Health Related Professions, each educational program in the college) has clearly articulated learning objectives, programs of study, and course objectives. These are disseminated to students through advisement sessions with the deans or appropriate faculty members, as well as the *Bulletins*.

Each college and school has a faculty curriculum committee charged with monitoring the quality of the course offerings, and these committees make recommendations to their respective deans or program directors for changes. The

curricula of the colleges and schools are continuously reviewed by the faculty using student evaluations and input from teaching faculty. As the colleges and schools find it necessary or advisable via their curriculum committees, courses are added, modified, or dropped, and the order or schedule of courses may be revised.

### LEARNING GOALS AND OBJECTIVES

The curricula offered in each college and school reflect learning experiences and sequencing that enable students to develop professional knowledge, skills, and competencies needed for practice. Learning objectives are developed by the faculty and administration in concert with published core competencies for the professions/disciplines and institutional mission. Learning goals, objectives, and competencies for each program are presented to students in their program manuals, courses of study, and syllabi. Course syllabi include measurable instructional objectives and expected student competencies, thus providing an objective mechanism for evaluation of the program goals. Course syllabi outline the knowledge that should be gained upon completion of the module/course, the method of evaluation, and competency-level requirements, as well as remediation activities.

*Evaluation of Student Performance:* Assessment of students and student learning begins at the time of admission and continues through and after graduation. Each college and school uses standard measures for evaluating candidates for admission, including admission essays, grade point averages, scores on such standardized tests as the MCAT and GRE, recommendations, and personal interviews. The colleges and schools have very low attrition rates, indicating that the criteria used in determining acceptances are suitable for predicting success in completing the academic programs.

*Responding to Feedback from Students:* Course evaluations completed by students are routinely performed in each of the colleges and schools. These are shared with the teaching staff, curricular oversight committees, and deans of the individual colleges and schools and used to improve the quality of course organization and content.

Individual faculty evaluations by students are transmitted to the faculty member by the department or program chair. Student survey results are also reviewed and discussed, and appropriate follow-up is provided when necessary.

### STUDENT LEARNING ASSESSEMENT – COLLEGE REVIEW College of Medicine

In the College of Medicine, student performance is evaluated by written exams, as well as oral examinations and examinations using standardized patients. Students are also evaluated by attending physicians, residents, and supervisors in the clinical aspects of their training. There is a robust formative feedback program throughout the four-year course of study. Evaluations of students are

based on the college’s six domains of competence, as detailed in Table 3.

Educational program effectiveness is evaluated through the following indicators: results of USMLE exams, student scores on internally developed examinations, performance-based assessment of clinical skills, student responses on the AAMC Medical School Graduation Questionnaire, student evaluation of courses and clerkships, student advancement and graduation rates, and National Residency Match Program results.

Assessment continues after graduation through a questionnaire sent to residency program directors by the dean’s office. Results are reviewed by the dean’s staff and the COM Dean’s Council for Education. Data on strengths or

weaknesses of graduates are used in combination with other data sources to make recommendations for change.

**School of Graduate Studies**

In the School of Graduate Studies, students are evaluated by examinations within individual courses, an obligatory qualifying exam that seeks to ensure a wide-ranging knowledge of the program area, ongoing presentations of research to peers and faculty, and defense of a thesis proposal as well as a final dissertation. Graduation requires satisfying several curricula requirements common to all SGS programs and others specific to the student’s program. Responsibility for ensuring that students complete these requirements lies with the Program Executive Committees. See Table 4 for SGS Learning Assessment Measures.

**TABLE 3**

College of Medicine Learning Assessment Measures for the Six Domains of Competence		
Domain	Year 1 and Year 2	Year 3 and Year 4
Professionalism	<ul style="list-style-type: none"> <li>Evaluations by clinical mentors and small-group facilitators in case-based learning groups</li> <li>Standardized patient exams</li> </ul>	<ul style="list-style-type: none"> <li>Clerkship evaluations</li> <li>Standardized patient exams</li> <li>NBME subject exams</li> </ul>
Medical Knowledge	<ul style="list-style-type: none"> <li>Results of written and practical exams</li> <li>USMLE Step 1 Results</li> </ul>	<ul style="list-style-type: none"> <li>NBME subject exams</li> <li>Internal MCO exams</li> <li>Clerkship evaluations by supervisors</li> <li>Standardized patient exams</li> <li>USMLE Step 2 results</li> </ul>
Interpersonal and Communication Skills	<ul style="list-style-type: none"> <li>Standardized patient exams</li> <li>Evaluations by clinical mentors and small-group facilitators in case-based learning groups</li> </ul>	<ul style="list-style-type: none"> <li>Clerkship evaluations by supervisors</li> <li>Standardized patient exams</li> </ul>
Patient Care	<ul style="list-style-type: none"> <li>Written exams</li> <li>Standardized patient exams</li> <li>Evaluations from clinical supervisors</li> </ul>	<ul style="list-style-type: none"> <li>Written exams</li> <li>Standardized patient exams</li> <li>Evaluations from clinical supervisors</li> </ul>
Systems-Based Practice	<ul style="list-style-type: none"> <li>Written exams</li> </ul>	<ul style="list-style-type: none"> <li>Clerkship evaluations</li> <li>Written exams</li> </ul>
Practice-Based Learning and Improvement	<ul style="list-style-type: none"> <li>Evaluations by clinical mentors and small-group facilitators in case-based learning groups</li> </ul>	<ul style="list-style-type: none"> <li>Clerkship evaluations</li> <li>Written exams</li> </ul>

**TABLE 4**

School of Graduate Studies Learning Assessment Measures	
<p>Students are expected to:</p> <ul style="list-style-type: none"> <li>Be familiar with the major developments in their chosen field</li> <li>Be able to critically evaluate the scientific literature in their field</li> <li>Demonstrate an analytical capacity that allows a graduate to understand the literature and to plan, perform, and interpret experiments that advance knowledge</li> <li>Be able to prepare, edit, and finalize written and oral presentations of conducted research</li> <li>Be able to convey information in an unambiguous fashion, both didactic and experimental, to a heterogeneous audience</li> <li>Demonstrate a clear sense of the moral and ethical considerations underlying modern scientific research</li> </ul>	<p>Within each student’s chosen field, the student is expected to:</p> <ul style="list-style-type: none"> <li>Demonstrate a detailed understanding of the concepts and techniques specific to the program area</li> <li>Be competent in executing the techniques common to that field</li> <li>Understand the scientific basis of those techniques</li> <li>Be able to teach a novice how to execute those techniques</li> <li>Understand the limitations of techniques utilized</li> </ul>



*Retention and Graduation Rates:* Student retention in the SGS is generally very high. No student has been dismissed in the past four years for reasons of insufficient academic progress. Those few students who leave voluntarily (four in the last four years) usually do so for personal reasons or an inability to find a laboratory compatible with their interests.

Graduation rates (time-to-degree) for PhD candidates have been stable over the last 8 years. For MD/PhD students graduating between 2009 and 2014, the average time to degree (PhD portion of dual degree) was 5.8 years. For the PhD students graduating between 2009 and 2014, the average time to degree was 6.1 years. (Very short times-to-degree reflect students enrolled as advanced students.) The school continues to work to improve these rates by requiring annual works-in-progress presentations for all students and efforts to complete the qualifying examination at the end of year one or early in year two.

*Postdoctoral Placements:* The high quality of Downstate’s graduate students is reflected in their outstanding postdoctoral appointments. In recent years, Downstate MD/PhD graduates have placed, for example, at Beth Israel Deaconess Medical Center, Yale-New Haven Hospital, St. Luke’s-Roosevelt Hospital, Baylor University, University of California-San Francisco, and University of California-San Diego. Recent PhD graduates are serving in postdoctoral positions at the National Institutes of Health, the National Institute of Allergy and Infectious Diseases (NIAID), Harvard

Medical School, Duke University, and Columbia University, among others. In addition, several students have been placed in medically related companies such as Avatar Biotechnologies, Halo Neuro Systems, and Ogilvy Healthworld.

*Placement Rates:* Virtually all graduates are employed either as postdoctoral trainees or residents, or in industry upon graduation.

*Course Evaluations by Students:* In the School of Graduate Studies, course evaluations for the first-year courses, which are the courses that students submit evaluations for (Biochemistry, Molecular and Cellular Biology 1, Molecular and Cellular Biology 2, and Introduction to Cellular and Molecular Neuroscience), continue to receive overall good ratings.

**College of Health Related Professions**

In the College of Health Related Professions, faculty continuously review program prerequisites, course content, instructional strategies, clinical placement, and evaluation mechanisms to ensure that each educational program meets or exceeds the accreditation standards outlined for each discipline. Evaluations of students are based on the programs’ learning assessment measures, as detailed in Table 5.

Four of the six programs in the College of Health Related Professions have implemented graduate degrees. Each of these programs has modified its admission prerequisites and curricula, especially in the areas of research design

TABLE 5	
College of Health Related Professions Program Assessment Methods	
Diagnostic Medical Imaging (DMI)	<ul style="list-style-type: none"> <li>• Anonymous evaluation of each course taken: didactic and clinical</li> <li>• Exit interviews</li> <li>• Graduate survey 6 months after finishing all requirements</li> <li>• Employer satisfaction survey</li> </ul>
Medical Informatics (MI)	<ul style="list-style-type: none"> <li>• Anonymous evaluation of each course taken: didactic and clinical</li> <li>• Graduate survey 6 months after finishing all requirements</li> <li>• Employer satisfaction survey</li> </ul>
Midwifery (MW)	<ul style="list-style-type: none"> <li>• Anonymous evaluation of each course taken: didactic and clinical</li> <li>• Exit interviews</li> <li>• Graduate survey 6 months after finishing all requirements</li> </ul>
Occupational Therapy (OT)	<ul style="list-style-type: none"> <li>• Anonymous evaluation of each course taken: didactic and clinical</li> <li>• Anonymous semester review evaluation at the end of each semester</li> <li>• Exit interviews</li> <li>• Graduate survey one year after finishing all requirements</li> <li>• Employer satisfaction survey</li> </ul>
Physical Therapy (PT)	<ul style="list-style-type: none"> <li>• Anonymous evaluation of each didactic course taken</li> <li>• Evaluation of each clinical experience</li> <li>• Program summative evaluation upon graduation</li> <li>• Graduate survey 6 months after finishing all requirements (feedback on licensing exam)</li> <li>• Graduate survey 12 months after finishing all requirements (evaluation of program and job search)</li> <li>• Employer satisfaction survey</li> </ul>
Physician Assistant (PA)	<ul style="list-style-type: none"> <li>• Anonymous evaluation of each course taken: didactic and clinical</li> <li>• Student survey at the end of the didactic phase of the program</li> <li>• Exit interviews</li> <li>• Graduate survey 6 months after finishing all requirements</li> <li>• Employer satisfaction survey</li> </ul>

and implementation, to meet the demands of graduate education. In addition, student-learning objectives have been modified to reflect higher-order functioning, such as analysis and synthesis. The minimum passing course grade and final grade point averages have been modified to reflect standards in graduate education. Master’s practica and clinical research have been added as appropriate, and evaluation methods have been modified to reflect clinical integration.

**Program Assessment Methods:** In all CHRP programs, faculty review course evaluations and semester reviews (if applicable) at the end of each semester and discuss adjustments in individual courses, course sequence, assignments, scheduling, grading, and so forth, based on student feedback. Each program reviews academic performance at the end of each semester and discusses any modifications that may be needed in the program. Program outcomes are also annually reviewed by the dean.

Faculty in all programs review academic performance in the middle of each semester in order to make recommendations to individual students regarding tutoring, study habits, course withdrawal, modification of course of study, or other academic remediation that is available.

Student evaluations of didactic and clinical courses, including evaluation of faculty, are completed at the end of each semester. In addition, students complete an end-of-didactic phase evaluation as well as exit surveys for their respective CHRP programs and Downstate. These assessments provide information essential for ongoing program evaluation. All course and clinical evaluations are completed online through PRIME (educational software-didactic) or on Access (clinical). To facilitate objective review of the findings, all course evaluations for the college are now completed on PRIME and downloaded to the Dean’s Office.

**Graduation Rates** within the College of Health Related Professions are consistent with national and regional outcomes. Students enroll in the College of Health Related Professions as a cohort and generally complete the prescribed curriculum in a lock-step fashion in two to three years, depending on the discipline.

In keeping with the college’s mission, CHRP programs offer alternative scheduling options (i.e., deceleration and part-time study) in order to meet the academic and personal needs of adult learners. CHRP students are often balancing family, employment, and other personal demands while enrolled in the academically demanding curricula.

**Employment Rates:** Each program in the college obtains data from graduates regarding employment status approximately six months after graduation in several ways: email surveys, telephone surveys, and online surveys such as Survey Monkey.

Online and email surveys have limited response rates. Programs have improved response rates with repeat reminders via telephone and email and also by conducting telephone surveys. In addition, each program attempts to collect qualitative data from employers concerning recent graduates. All programs report very positive comments.

**College of Nursing**

In the College of Nursing, program evaluation is used continuously and systematically to assess the quality and effectiveness of all aspects of College of Nursing programs, thus providing feedback for development, implementation, and curricular change. The College of Nursing uses a number of surveys and other data to assess program effectiveness. These include student surveys (course, clinical experience, and faculty evaluations), graduation rates, exit surveys, alumni, and employer surveys.

TABLE 6	
College of Nursing: Program Learning Assessment Measures	
<b>Bachelor of Science</b> Accelerated BS RN to BS	<ul style="list-style-type: none"> <li>• Anonymous evaluation of each course taken: didactic and clinical</li> <li>• Semester student forums to obtain feedback from students</li> <li>• Exit surveys</li> <li>• Graduate follow-up surveys (1 and 3 years after graduation)</li> <li>• Employer satisfaction surveys (1 and 3 years after graduation)</li> </ul>
<b>Master of Science</b> Clinical Nurse Specialist Nurse Practitioner Nurse Anesthesia Nurse Midwifery	<ul style="list-style-type: none"> <li>• Anonymous evaluation of each course taken: didactic and clinical</li> <li>• Semester student forums to obtain feedback from students</li> <li>• Exit surveys</li> <li>• Graduate follow-up surveys (1 and 3 years after graduation)</li> <li>• Employer satisfaction surveys (1 and 3 years after graduation)</li> </ul>
<b>Post-Master’s (Advanced Certificate)</b>	<ul style="list-style-type: none"> <li>• Anonymous evaluation of each course taken: didactic and clinical</li> <li>• Semester student forums to obtain feedback from students</li> <li>• Exit surveys</li> <li>• Graduate follow-up surveys (1 and 3 years after graduation)</li> <li>• Employer satisfaction surveys (1 and 3 years after graduation)</li> </ul>

Since the last Middle States accreditation visit, the College of Nursing has revised both its undergraduate and graduate curricula to reflect recent health professions education reform. The Institute of Medicine (2003, 2005) has proposed a set of core competencies that all healthcare professionals should possess and has recommended that these be used as an overarching vision for all healthcare professional education in the 21st century. For graduate nursing education, these competencies have been incorporated into the newly revised American Association of Colleges of Nursing document, the *Essentials of Master's Education in Nursing* (AACN, 2011). For undergraduate nursing education, these have been incorporated into the newly revised American Association of Colleges of Nursing document, the *Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008). The *Essentials* documents provide a new set of core competencies expected of graduates of baccalaureate nursing programs.

**Program Assessment Methods:** In all programs, faculty review course evaluations collected by the Program Evaluation Committee, a standing committee of the College of Nursing Faculty and Professional Staff. Data are then used by faculty to submit proposals for curricular modifications and changes to the Curriculum Committee, which in turn forwards them to the Faculty Assembly for approval and date of implementation. Program outcomes are reviewed by course faculty and the dean on an annual basis.

In all programs, faculty review students' performance after midterm examinations for academic advisement. Advisement may consist of tutoring, assistance with study and time management skills, course withdrawal, and referral for counseling, if necessary.

**Student Evaluation:** In the College of Nursing, the associate deans, in collaboration with the program directors, conduct Student Forums once or twice a semester to provide students with opportunities to articulate their concerns about any aspects of their program of study. Student

forums are also scheduled upon the request of students. For example, in 2012, students were dissatisfied about the online delivery of content in the Advanced Pathophysiology hybrid course. In response, the faculty made adjustments and held more in-class sessions.

**Process of Preceptor and Clinical Practicum Site Evaluation:** Student evaluation of their preceptors and clinical practicum sites occurs online through PRIME at the end of each semester. Students complete course, faculty, and preceptor/clinical site evaluations as appropriate. In addition to the online evaluation tools, the nurse practitioner and clinical nurse specialist graduate programs employ a paper and pencil tool.

In the College of Nursing, students in the Accelerated BS and Nurse Anesthesia programs enroll on a full-time basis as a cohort and generally complete the prescribed curriculum in 15 months and 27 months, respectively. In the other programs, a majority of students complete their programs of study on a part-time basis.

The majority of the students in the College of Nursing continue to work while enrolled in the RN-to-BS or the master of science programs. Faculty develop individualized programs of study to meet students' needs and enhance their success. Students in the Accelerated BS and Nurse Anesthesia programs are enrolled only on a full-time basis.

**Employment Rates:** All programs in the College of Nursing obtain data from graduates regarding employment status in several ways: graduate follow-up surveys, employer satisfaction surveys, and telephone surveys. In addition, graduates continue to inform faculty about their employment status. All programs report very positive comments about graduates.

**School of Public Health**

The growth and direction of development of the School of Public Health has been strongly guided by the criteria outlined by the Council on Education for Public Health

TABLE 7

School of Public Health Learning Assessment Methods	
<ul style="list-style-type: none"> <li>Review and recommended revision of course curricula by course directors and the Committee on the Curriculum</li> <li>Comparison of CEPH curricular criteria for coverage of required public health core subjects</li> <li>Course evaluations completed by students at the end of every course given</li> <li>Student grades on papers, projects, and courses indicate the level of student mastery of course-specific competencies</li> <li>Culminating Experience utilized by faculty to assess student mastery of the public health competencies for the MPH degree and the student's respective concentration</li> <li>Dissertation utilized by faculty to assess student mastery of public health competencies for the doctoral degree and the student's respective concentration</li> </ul>	<ul style="list-style-type: none"> <li>Student participation in periodic student-administration forums, held at a minimum, once a semester</li> <li>Submission of anonymous suggestions to the administration on a regular basis</li> <li>Assessment of the needs of the communities served by SUNY Downstate</li> <li>Consultation with the Community Advisory Group and various community stakeholders to determine workforce expectations and requirements</li> <li>Review of current field-based practical experiences by students</li> <li>Meetings between the officers of the Student Council and the deans</li> <li>Student feedback forums with the dean and vice dean</li> </ul>

(CEPH) for accreditation of schools of public health. The progress of the development of the school is continually measured against these criteria and the measurable objectives relevant to its mission and goals, including outcomes for students and student performance.

*Program Assessment Methods:* Evaluation is accomplished through ongoing examination of the school's educational, research, and service activities. Data are continually collected on all aspects of the school's operation, analyzed, and measured against the school's goals and objectives. Course evaluations indicate how students experience the course instructor's ability to communicate the subject matter. Student performance is evaluated throughout each course and aggregated data are collected and reviewed by the Committee on Outcomes, Evaluation, and Assessment for use in planning.

The Committee on Outcomes, Evaluation, and Assessment develops outcomes measures based upon CEPH guidelines and in line with the stated mission and goals of the school. These outcomes measures are discussed in faculty working groups, the community advisory group, the deans and chairs of the School of Public Health, and the Student Council, and they are finalized in faculty meetings. These measures guide the administration in the development of the school's policies and strategic planning.

*Time-to-Degree Completion:* The School of Public Health has established targets for time-to-degree completion. For the MPH degree, the target degree goal is seven years and for the doctorate level, eight years. Students are accepted into the program in cohorts, but not all students within the same cohort graduate at the same time (most students are employed full-time and are enrolled in the degree program part-time). Over 80 percent of students complete the MPH degree within the seven-year allotted timeframe. The number of students withdrawing and leaving the program is relatively low. For the doctoral degree, 50 students have enrolled since the program began in 2008. Since students in this track have eight years to complete their degree, most are still working on finishing their course of study, and there have been two graduates to date.

*Employment Rates:* The School of Public Health has a comprehensive database to track its alumni. The database includes the graduates' demographic information, degree, concentration and graduation data, as well as current employment information. The executive assistant to the dean is responsible for collecting and organizing this information. She uploads the data on recent graduates and periodically contacts all alumni via e-mail or phone to request updated contact and employment information. Participation by alumni is voluntary; however, data received from survey participants demonstrate that most graduates are employed.

### ASSESSMENT THROUGH NEW TECHNOLOGY

*New Innovations Software:* Many of Downstate's educational programs contain a clinical component. Students are

assigned to participate in clinical activities through which they gain experience in performing procedures and assessing diagnoses. These include all required clerkships in the College of Medicine; the Physician Assistant, Physical Therapy, Midwifery, and Occupational Therapy programs in the College of Health Related Professions; and the programs in the College of Nursing. Downstate has licensed both graduate and undergraduate modules of the New Innovations Software suite to meet these needs. College of Medicine schedules are synched with Banner and homegrown lottery system (developed by Student Affairs) through an interface maintained by the Student Information Systems group in the Office of Academic Computing.

The evaluation module allows faculty to gather and compile data on the quality of student performance in the clerkships or clinical rotations associated with their training. Case logs are customizable for each clerkship or clinical rotation, and data relating to procedures and diagnoses that the students encounter are collected. Case entry can be entered online or from iPhone/Android devices.

For the College of Medicine, evaluations and case logs are synched with the student information system and operational data store through an interface maintained by the Office of Academic and Library Computing. The program is used by some CHRP programs and is available to all schools if requested. The Occupational Therapy Program and the Midwifery Program use New Innovations software for monitoring clinical progress of their students.

*Typhon Software:* The College of Nursing uses this electronic skills tracking system, which comprehensively collects each student's patient encounter logs that need to be tracked during clinical rotations. The system is web-based, HIPAA compliant, and allows students to quickly and easily enter patient encounter information such as demographics, clinical information, diagnosis and procedure codes, medications, and brief clinical notes.

*Competency-Based Outcomes:* The Integrated Pathways Curricular Database (IPCD), recently implemented, is a competency-based curriculum management and mapping system that supports the sharing of curriculum outcomes and materials among programs, departments, and schools. The IPCD will create a longitudinal and historical view of curricula by tracking events, learning content, and activities over time. The system facilitates day-to-day administration and delivery of program, course information, and materials to learners; curricular development; and review and innovation, while greatly reducing overhead for internal and accreditation reporting.

The IPCD manages and tracks both learners and instructors and their relationships to curricular materials and activities, which enables tracking of educational hours, roles, and role transitions for curriculum participants. IPCD is currently in production for use with the new College of Medicine curriculum and will be offered to other schools.



# CHAPTER EIGHT



## THOSE WHO REMAIN SUCCESSFUL DO SO BY MANAGING SHORT-RUN EXCELLENCE EVEN AS THEY DRIVE LONG-TERM INNOVATION AND CHANGE; THEREFORE, THEY ARE RENEWED.

### STANDARD 2: PLANNING, RESOURCE ALLOCATION, AND INSTITUTIONAL RENEWAL

### STANDARD 3: INSTITUTIONAL RESOURCES

### STANDARD 7: INSTITUTIONAL ASSESSMENT

#### PLANNING, RESOURCE ALLOCATION, AND INSTITUTIONAL RENEWAL

Strategic planning, resource allocation, and institutional renewal are intertwined. At Downstate, planning is an active, continuous process spanning all levels of the organization. Strategic planning encompasses long-range planning to ensure that the campus grows conceptually and programmatically, as well as short-term planning that occurs annually through the budget planning process.

When President Williams arrived in 2012, he initiated a 360 degree assessment of the institution, with the goal of transformation across the entirety of Downstate's enterprises. In partnership with the SUNY Board of Trustees and SUNY System Administration, he took decisive steps to protect the academic mission from reductions in state allocation support and challenges in building clinical revenue. He also promoted interactions with other institutions, seeking collaborative opportunities in education, research, and clinical care.

Dr. Williams reorganized Downstate's operations with a dynamic new management team focused on the goals of financial stability, academic and clinical excellence, and future viability of the campus. Extensive planning efforts on the campus and system level produced the Performance Improvement Plan for the clinical enterprise, the Sustainability Plan approved by the New York State Executive and Legislature, and a major restructuring plan.

The Sustainability Plan and the Performance Improvement Plan were guided by four principles: academic strength; clinical integration and excellence; pipeline of healthcare professionals; and future financial viability. Both plans emphasized the importance of a vital hospital to Downstate's academic mission and its critical role in the national, regional, and local pipeline of well-trained health professionals. (See Appendices K and L.) The campus-wide Performance Improvement plans are in

progress as Downstate continues to meet its goals, objectives and tasks.

As part of overall institutional assessment, strategic assessment of the academic mission included the following basic principles:

- sufficient resources (human and material) must be available to support current curricular needs in all schools and colleges;
- accreditation standards must be met for all schools and colleges;
- the programs must be able to adapt to challenges and opportunities presented by changes in the professional, scientific, regulatory, and healthcare environments; and
- reinvestment or capital resources must be identified and secured.

The plans also outlined a number of parameters to guide long-term institutional planning:

- Current array of schools and colleges would be maintained and expansion of educational and/or research programs would be assessed;
- Enrollment would remain at current or higher levels (speciality accrediting bodies expect Downstate to maintain at least the current balance of support for programs at current enrollment levels);
- Downstate must remain the sponsoring institution governing the Graduate Medical Education (GME) programs because residents are critical to the undergraduate medical educational program;
- New curricula for the colleges of Medicine and Nursing and other schools must be implemented to maintain accreditation with current and projected available resources;
- Downstate must aggressively pursue greater efficiency in administrative processes, through the implementation of technologies such as enterprise resource planning systems and consolidation of services;
- The environment for sponsored research will continue to be difficult and will require active efforts to maintain levels of research funding;
- Existing clinical affiliations will continue in support of Downstate's clinical requirements.

In support of these goals, Downstate's new Executive Vice President and Chief Operating Officer Astra Bain-Dowell undertook a thorough review of operations and implemented tighter controls and improved systems. Chief Financial Officer Melanie Gehen assessed funding requests, especially those involving faculty hires and college plans, to ensure fiscal responsibility and alignment

with institutional goals and strategic planning. A vice president for faculty affairs and professional development, Dr. Joseph Merlino, was appointed to optimize faculty development, promote best practices, and catalyze faculty exchange and innovation. The associate vice president for policy and planning, Dorothy Fyfe, hired a consultant to review Downstate’s website and develop a comprehensive plan for its architecture, redesign, and content management, as well as integration of mobile and social media technologies.

A number of important goals and supporting objectives in the Sustainability Plan and the Performance Improvement Plan for the clinical enterprise were realized, including a reduction in force. In addition, a number of goals from the 2010-2015 academic strategic plans were realized, including:

- Construction of the new Public Health/Academic Building, with completion expected in 2016.
- Completion of the Advanced Biotechnology Incubator expansion in 2015, doubling its space.
- Full implementation of the College of Medicine’s new Integrated Pathways Curriculum, reflecting the collaboration of 25 committees and 160 faculty.
- Full implementation of the American Association of Colleges of Nursing *Essentials* for baccalaureate and master’s education in all seven of the College of Nursing’s curricula, reflecting significant changes in health care, nursing, higher education, and scholarship skills.
- Full launch with successful implementation of the School of Public Health, from chair and faculty appointments to expanded enrollment and growth in grant funding.
- State-of-the-art renovation of the Gross Anatomy Laboratory.
- State-of-the-art renovation of the Nursing Simulation Laboratory.



Downstate’s new Public Health Academic Building under construction. It will open in 2016.

- Launch of the Library’s “Information Commons,” completely reconfiguring the first floor to an open plan, student-centered area that provides expanded computer access; relaxation and conversation areas; and promotes discussion and engagement among students.
- Launch of Banner in the Division of Student Affairs, an integrated information system for student data that transformed operations throughout its subdivisions, including an improved electronic “handshake” with prospective students.
- Launch of the College of Health Related Professions’ first doctoral program, in Physical Therapy, expanding its depth of offerings.

Assessment of the goals, actions, and outcomes in the 2010-2015 plans formed the basis for the 2016-2020 strategic plan. (See *Downstate 2016-2020*, under separate cover.) Fundamental to all we do is a culture of inclusiveness, the promotion of health equity, and the elimination of health disparities.

**DOWNSTATE 2016-2020**

In the development of the academic strategic plans, each college and school articulated the goals and priorities that are specific to their individual mission, vision, and programs. *Downstate 2016-2020* outlines those initiatives to continuously advance educational excellence, advance research and scholarship, and increase engagement with campus and community. These priorities are individually important and are interconnected in the pursuit of excellence and supported by the University.

In our recent strategic planning discussions, cross cutting issues were identified that have a significant impact on all the colleges, schools, and clinical training facilities. These require campus wide efforts, resources, and commitment and are currently under discussion in terms of goal setting, priorities, process, implementation, and outcomes. With the recent addition of new academic leadership, the dean for the College of Medicine and the dean for the College of Health Related Professions, Downstate is in position to proceed in moving through the planning process.

**Cross-cutting Initiatives:**

- Development of Office of Academic Assessment
- Implementation of new campus website
- Interdisciplinary collaboration in education, research, and clinical services
- Research Centers for Excellence
- Information technology
- Continued operational transformation and resource stewardship
- Expansion of academic-clinical partnerships for student placement
- Foster distance learning
- Heighten workplace engagement and organizational culture

- Reaching Beyond Campus: Engage Alumni, Community, Institutional and International Partners

Key institutional planning also includes SUNY Excels, a planning initiative by Chancellor Zimpher that seeks to elevate the SUNY system through Performance Improvement Plans (PIPs) organized around the key metrics of Access, Completion, Success, Research, and Engagement; and facilities planning in concert with the SUNY Construction Fund, an agency that helps SUNY campuses assess and plan for key infrastructure needs and new building projects. Key initiatives from the 2010-2015 planning cycle, such as the new curriculums in the College of Medicine and the College of Nursing, will continue to be assessed.

When final, *Downstate 2016-2020* will articulate the strategic intent for Downstate’s growth and development. It will provide clear guidance and direction for the future, and simultaneously allow the institution to be nimble and flexible in building upon accomplishments and making adjustments in response to emerging opportunities and challenges. It will be strongly grounded in assessment and rational budget forecasting. And it will set the set the course for continuing success in meeting the vision and values integral to Downstate’s mission, even as the campus prepares for the appointment of a new president.

**Resource Allocation and Assessment Model**

Through a series of immediate and decisive actions by President Williams and SUNY, the fiscal outlook for the institution and Downstate’s academic mission is positive. The diversity of Downstate’s funding streams enable Downstate’s five colleges and schools to manage fluctuations from one year to the next without compromise to the educational mission. As Downstate moves forward, the entire academic enterprise is examining and evaluating its operations, productivity measures, and resources to enhance the core mission of education and training of the next generation of health professionals.

Downstate’s Resource Allocation and Assessment Model is a comprehensive collection of ongoing activities and processes that the organization uses to systematically coordinate and align resources and actions with mission, vision, strategy, and assessment to ensure institutional quality and renewal. The model is structured around four basic elements that enable Downstate to focus its efforts and deploy resources:

- *Strategic planning* – long term perspective sets the agenda for major investments and institutional development over a multi-year period.
- *Infrastructure planning* – forward focus of 3 -5 years for core programmatic areas (academics, student engagement, learning resources, etc.) and essential support areas (institutional advancement, facilities, IT, administrative and academic support services) required to maintain the institution’s ongoing activities.



- *Operational planning (Financial Plan)* – The Financial Plan is executed within the framework of the operational plan aligned with the priorities set in both the Strategic and Infrastructure Plans. The Financial Plan drives the resource allocation decisions at the beginning of each fiscal year, during the mid-year budget review, and drives mid-year corrections. These high level decisions are linked to both the long-term goals of the Strategic Plan and the overall spending authority granted by the Governor of New York State and Chancellor.
- *Ongoing Assessment* – Continual assessment to ensure resources are being used in the manner that supports the established priorities.

Downstate is committed to coordinating the above efforts across the campus to demonstrate integration and linkage. Following the Resource Allocation and Assessment Model, accountabilities have been identified.

**Accountabilities:**

- *President* – Strategic planning champion. Influences and approves plans and assumptions. Establishes policies.
- *Planning and Budgeting Committee* – Articulates strategic plan. Develops budget assumptions. Allocates resources based on priorities. Identifies and evaluates assessment measures. Responsible for assessment of success in fulfilling plans and living within the budget.
- *Departments* – Request and justify resources that support strategic plan and deliver high quality education and support of mission. Advocate for the unit. Identify, collect, and report metrics.
- *Budget Office* – Produces a budget that represents the institution’s priorities, is fiscally responsible, and has sufficient flexibility to respond to unanticipated circumstances. Provides financial reporting and support with regards to systems and financial policies. Provides financial and analytical metrics in a timely manner.
- *Accounting* – Provides optimum finance and accounting processes across all functions. Collects and reports metrics.
- *Faculty-Student Engagement* – Deans and Executive Management seek participation from faculty and students through multiple established and ad hoc committees that focus on input around program and activity priorities. Feedback is provided to the Planning and Budgeting Committee.

Assessment takes on many forms. The process begins with review of strategic planning documents and mission/vision statements to ensure alignment of goals throughout the process of resource allocation and assessment. Student data, research and intellectual activities, departmental

indicators, and external accreditation requirements are monitored, to name a few. The results and analyses are fed into the continual cycle of the Resource Allocation and Assessment Model.

**Key Assessment Vehicles**

- Strategic Planning documents (institution, academic, clinical, departmental).
- Mission and Vision statements (institution, departmental).
- Review and analysis of prior results (enrollment, revenue, expenses) to identify unmet needs, shortfalls, and to facilitate reallocation/de-emphasis of resources
- Analysis of year-to-date actual revenues and expenses as an early warning system of downward cycles or opportunities for mid-year corrections.
- Examination of recent accomplishments and desired outcomes, and the strategies employed to support success.
- Emphasis on enrollment management to align resources with student demand and ensure enrollment of best qualified and diverse student body.
- Key Metrics (enrollment trends by program, graduation rates, retention rates, faculty ratios, research dollars, etc.).
- Review of core business activities that are essential to achieving mission and goals.
- External accreditors.
- Identification of stakeholder’s needs and demand through engagement and solicitation.

(See, *Fiscal Year Activity and Accountability by Quarter* in Appendix J, Financial Report.)

In conclusion, Downstate’s resource allocation planning process engages the educational community through many points of contact. However, we must continue to work to formalize and improve the process to be more systematic. Downstate is a complex organization, which creates challenges in communication and participation around institutional priorities, the planning process, and outcomes. Identifying clear goals that align with strategic priorities that have measureable outcomes is a work in progress and requires engagement at all levels of the process. Finally, as an institution, Downstate recognizes that it must improve the availability, quality, and timeliness of data to support analysis and assessment.

**Operating Revenue and Expenditures**

Downstate’s academic budget is supported by operating and non-operating revenue streams. The largest revenue component comes from appropriations from the New York State legislature. Downstate’s revenue picture is complemented by its investment portfolio, which increased from \$57.2 million in 2009/2010 to \$87.7 million in 2014/2015.

Academic operational and non-operational revenue compared to expenses has demonstrated a positive

balance since the 2011/2012 academic year, as demonstrated in the five-year chart and graph below (Table 1). In 2014/2015, academic revenue demonstrated a positive net balance of approximately \$1.5 million.

Operating revenue comprises multiple sources of income: tuition and fees; federal grants and contracts; state grants and contracts; private gifts, grants, and contracts; residence halls; food service; other sources; and transfers. Nonoperating revenue comprises state appropriations, including debt service payments; federal financial aid

grants, and state financial aid grants. (See Table 2, *Five-Year Revenue*.)

In 2014-2015, operating revenue decreased to \$101.8 million from \$119.1 million in 2013-2014, in large part due to a drop in funding in Federal grants and contracts. This decrease reflects the “timing out” of additional research funding Downstate received under the 2009 American Recovery and Reinvestment Act, or stimulus funding. Under non-operating revenues, the largest source of income is derived from state appropriations.

**TABLE 1**

SUNY Downstate Medical Center Academic Revenue & Expenditure Information, Five Years					
	2010-11	2011-12	2012-13	2013-14	2014-2015
Revenues	207,961,586	199,783,775	222,586,926	228,111,872	220,754,791
Expenses	210,849,666	198,725,659	216,111,973	224,896,061	219,212,766
Total Income/(Loss)	(2,888,080)	1,058,116	6,474,952	3,215,810	1,542,025

**TABLE 2**

**Five-Year Revenue**

	2010-11	2011-12	2012-13	2013-14	2014-15
<b>Operating revenue</b>					
Tuition & fees	\$ 26,330,193	\$ 29,377,412	\$ 32,377,213	\$ 34,775,648	\$ 36,968,149
Federal grants & contracts	43,839,957	39,762,677	36,856,136	34,596,414	24,385,958
State grants & contracts	2,798,880	6,314,057	3,043,929	5,635,640	5,496,717
Other gifts, grants & contracts	7,441,392	6,412,023	10,366,546	12,846,829	7,573,498
Private gifts, grants & contracts	8,330,040	7,338,403	8,183,342	4,890,143	6,085,798
Grants and Contracts subtotal	62,410,269	59,827,160	58,449,953	57,969,026	43,541,971
Residence Halls	2,179,646	2,259,400	2,249,040	2,183,064	2,362,667
Auxillary Other	15,600	15,600	-	-	-
Food Service	998,004	931,346	151,397	249,675	237,475
Auxillary Enterprises subtotal	3,193,250	3,206,346	2,400,437	2,432,739	2,600,142
Other Sources	1,265,168	1,758,921	2,066,677	1,337,655	8,283,827
Transfers	8,959,724	(1,051,886)	5,313,331	22,567,881	10,356,127
<b>Total Operating Revenue</b>	<b>102,158,604</b>	<b>93,117,953</b>	<b>100,607,611</b>	<b>119,082,949</b>	<b>101,750,216</b>
<b>Non-operating revenue</b>					
State Appropriations	126,796,005	143,309,807	158,523,521	133,823,834	144,697,942
Amounts included in State Approp Revenue For Ed Facility Debt Service payments paid by State on Downstate's behalf	(21,912,005)	(37,312,360)	(37,070,780)	(25,393,559)	(26,344,731)
Federal financial aid grants	737,889	515,313	330,251	367,500	448,607
State financial aid grants	181,093	153,062	196,323	231,148	202,757
Non-operating revenue subtotal	105,802,982	106,665,822	121,979,315	109,028,923	119,004,575
<b>Revenues</b>	<b>\$ 207,961,586</b>	<b>\$ 199,783,775</b>	<b>\$ 222,586,926</b>	<b>\$ 228,111,872</b>	<b>\$ 220,754,791</b>

State appropriations increased from \$133.8 million in 2013-14 to \$144.7 million in 2014-15. Combined operating and non-operating academic revenue for 2014-2015 dropped to \$220.8 million from \$228.1 million the year before.

On the expenditures side, the single largest operating expense is instructional costs, which increased from \$98.8 million in 2013-2014 to \$100.5 million in 2014-2015 reflecting state-negotiated COLA's and other contractual costs for Downstate's full- and part-time faculty. (See Table 3, Five-Year Operating Expenditures.) Overall, total expenses decreased from \$224.9 million in 2013/2014 to \$219.2 million in 2014/2015. Downstate ended 2014/2015 with a total academic income of \$1.5 million.

Downstate projects positive net income for the next several years as demonstrated in Table 4.

On the revenue side, the assumptions underlying these five-year projections include a 4 percent annual increase in tuition and fees (not locally determined - tuition and fees are determined by the SUNY Board of Trustees and set by the New York State Legislature); and modest increases in other operating revenue streams. It also assumes a degree of constancy in State appropriation levels.

On the expenditures side, assumptions include a projection of a 2 percent increase in almost all expense

categories, with the exception of "Operation and Plant Maintenance," for which 5 percent increases in 2015-16 and forward are assumed to cover costs associated with the new Public Health/Academic Building expected to open in 2016.

Additional finance information, including SUNY audited reports and IPEDS information, is available in the *Finance Report*, in the Appendices.

**Capital Budget**

According to the SUNY Construction Fund's Master Capital Plan Report for 2014/2015, SUNY is developing its next five-year plan. This plan will balance strategic facility improvements developed by each campus in SUNY's Facility Master Plan with the critical maintenance and backlog needs identified in the Building Condition Assessment. The SUNY Capital Plan will enable the SUNY system to operate with one concerted vision in mind, ensuring that each plan supports the academic mission of the State University system, while providing a safe campus and maintaining critical State assets.

Since the last MSCHE decennial visit, Downstate received strong New York State support for academic capital funding for strategic initiatives as well as for critical maintenance needs. All SUNY educational capital construction is funded through Personal Income Tax (PIT) Revenue Bonds issued by the Dormitory Authority

**TABLE 3**

**Five-Year Operating Expenditures**

	2010-11	2011-12	2012-13	2013-14	2014-15
<b>Operating Expenses</b>					
Instruction	\$ 82,123,819	\$ 74,882,946	\$ 87,530,105	\$ 98,849,893	\$ 100,464,380
Academic Support	18,357,448	18,626,518	20,343,518	19,538,789	21,655,912
Student Services	5,444,379	5,559,365	5,460,790	5,716,376	5,411,952
Scholarships and Fellowships	476,201	534,634	683,064	747,439	519,504
Institutional Support	28,517,169	30,521,034	31,935,407	31,898,648	29,736,812
Research	32,388,188	26,220,678	24,397,911	19,331,516	14,805,711
Public Services	13,317,854	15,766,652	15,502,830	14,946,336	15,347,964
Residence Halls	2,591,129	1,875,440	2,366,433	2,104,511	1,978,827
Food Service	11,700	11,700	-	-	-
Other	1,547,887	1,380,819	484,505	495,019	485,404
Auxiliary Enterprise Subtotal	4,150,716	3,267,959	2,850,938	2,599,530	2,464,231
Operation and Maintenance of Plant	17,359,878	15,818,327	20,192,136	24,075,229	21,194,381
Depreciation Expense	8,162,922	7,176,534	6,867,943	6,867,943	7,297,8930
Other Operating Expenses	551,092	351,012	347,331	311,872	314,026
<b>Expenses</b>	<b>\$ 210,849,666</b>	<b>\$ 198,725,659</b>	<b>\$ 216,111,973</b>	<b>\$ 224,896,061</b>	<b>\$ 219,212,766</b>

**TABLE 4**

5 Year Projections					
	2015-16	2016-17	2017-18	2018-19	2019-20
Revenues	227,546,182	230,955,795	235,037,266	239,234,310	239,965,527
Expenses	223,985,834	227,955,795	232,037,265	236,234,310	236,965,527
Net Income	<u>3,560,348</u>	<u>3,000,000</u>	<u>3,000,000</u>	<u>3,000,000</u>	<u>3,000,000</u>

of the State of New York, for which the debt service is repaid through statewide revenues, pursuant to New York State Finance Law and consistent with provisions of New York State's Multi-Year Capital Financial Plan. Thus, no institutional debt is incurred. The largest capital project currently underway on the Downstate campus is the new Public Health/Academic Building, scheduled for completion in 2016.

#### IPEDS Finance Survey

The IPEDS finance survey for all state-operated campuses is prepared centrally by the office of the State University of New York (University) controller. The data included on the survey is derived from amounts reported in the University's audited financial statements. The completed survey for each campus is provided to campuses annually and is uploaded to the IPEDS database by system administration's Office of Institutional Research. It is not unusual in organizations as complex as the 64-campus State University of New York for there to be issues with data translation. This is the case with the IPEDS data submitted for the current MSCHE self study. Although the financial information used for preparing the IPEDS is based on audited financial information, the allocations made to each campus are not subject to audit. Therefore, on a stand-alone basis, the amounts reported in IPEDS by campus are unaudited.

Additionally, in 2013, SUNY adopted GASB No. 61, *The Financial Reporting Entity: Omnibus*—an amendment of GASB Statements No. 14 and No. 34. As a result, amounts related to auxiliary services corporations, foundations, and housing corporations are not included in the IPEDS amounts with the exception of Part H- Endowments.

Under GAAP, SUNY is required to recognize the cost of post-employment benefits other than pensions (OPEB) on an accrual basis, with campuses seeing a decrease in their unrestricted net assets. As a result, these costs are reported in IPEDS as an increase in operating expenses and an increase in long-term liabilities.

#### Conclusion

With its multiple revenue streams and greater operational efficiencies, Downstate has moved from a position of financial challenge to a time of building fiscal health and sufficient reserves for future growth.

### INSTITUTIONAL RESOURCES

#### Facilities and Space

Downstate's campus is located in a densely populated neighborhood in Central Brooklyn. Its thirteen-acre campus contains ten buildings, augmented by several leased properties for a total of 2.5-million square feet. The Basic Sciences Building, Health Science Education Building, and University Hospital of Brooklyn are physically connected, allowing easy access for students and faculty to classrooms, laboratories, library, and the major clinical teaching site. The Health Science Education Building is home to the College of Medicine, College of Nursing, College of Health Related

Professions, research library, classrooms, auditoria, and faculty offices. The Basic Sciences Building houses the School of Graduate Studies and, currently, the School of Public Health. Additional educational space will be available with the completion of the new Public Health/Academic Building, which on completion will fully house the School of Public Health. Recently renovated relaxation areas for students include the Library Information Commons, student lounges, and recreational space in the Student Center. The Grove, which is adjacent to the Health Science Education Building, provides outdoor recreational space.

Downstate's primary building complex includes over 300 educational classrooms, research laboratories, and clinical exam rooms. Adjacent or off-campus facilities include two biotechnology sites, a nurses' residence, two residential halls, the student activity center, and several parking lots. Clinical facilities include an Urgent Care and Ambulatory Surgery Center located in Southwest Brooklyn, primary care community offices, an outpatient dialysis center, off-site medical practices, and seven school-based health centers.

Downstate has focused its facility planning and capital programming on modernizing and renovating infrastructure and critical building utilities. Current projects underway involve structural repair to buildings, selective new construction, and repurposing of existing space to better serve pedagogical, research, and patient care needs.

Recent capital infrastructure upgrades to the Basic Sciences Building include replacement of the roof and all windows; modernization of all campus elevators; renovations of the Division of Comparative Medicine (Laboratory Animal Resources); renovation of the research laboratories; campus-wide fire alarm and sprinkler systems; and electrical and plumbing upgrades. In addition, the installation of 800 energy-conserving air conditioners financed by the New York Power Authority is achieving savings in the campus's energy budget.

The following projects will commence in 2016 to address key infrastructure issues impacting research and educational facilities support in the Basic Sciences Building:

- Upgrade of Department of Comparative Medicine mechanical equipment supporting heating, ventilation and air conditioning for the laboratory animal research facilities on the 8th and 9th floors of the Basic Sciences Building.
- Installation of new fire pump and standpipe riser to facilitate extension of sprinkler systems building-wide as the Basic Sciences Building is renovated in the future.
- Replacement of the main electrical switchgear servicing the Basic Sciences Building, since the existing switchgear is beyond its useful life cycle, and to facilitate electrical service expansion as the Basic Sciences Building is renovated in the future.
- Replacement of boilers supporting the Basic Sciences Building, the Student Activities Center, the dorms,

and University Hospital, since the boilers and other heating plant related equipment is beyond its useful life, compromising reliability.

- Extension of exhaust stacks on the roof of the Basic Sciences Building to prevent exhaust from re-entering the building and from impacting the new Public Health/Academic Building.
- Planning for basic science research lab and core facilities upgrade is also commencing, with phased upgrades to follow commencing later in 2016 and 2017.

In addition, façade restoration of the Health Science Education Building, including repointing, anchoring, and masonry replacement where needed, is also planned for commencement in 2016.

Downstate is planning the phased replacement of the existing parking garage, Student Activity Center, and the Dormitories. The provision of alternate, convenient parking at market rates is a priority, since it has been determined that the existing 800 vehicle campus garage building is becoming structurally unsound. Downstate is exploring the development of property owned by its Foundation in partnership with a private developer. In addition, Downstate is working with the State University Construction Fund to determine development strategies for the replacement of the 1960s vintage Student Activity Center and dormitory buildings. Redevelopment of these facilities will include the retention of green space for student use as a part of the development mix.

The new Public Health/Academic Building is expected to be completed in 2016. A large first-floor room will be configured to accommodate variable learning environments and the second floor will include medium-sized classrooms. The third floor will include a medical simulation center with 16 examination rooms for standardized patient assessment and teaching physical diagnosis, and six mechanical simulation suites. Over 12,000 square feet on two floors will be built for open collaborative research space.

**Distance Learning or Non-synchronous Learning Courses**

At the present time, Downstate has no programs that are offered by distance learning in their entirety. A number of courses at Downstate use a mixed-methods approach to student learning but use traditional, in-class or in-lab evaluations and testing. The current model of instruction tends to consist of courses using on-line materials, discussion boards, drop-boxes for assignment submission, and other electronic formats available through Downstate’s course management system.

As a matter of policy, on an annual or semester basis (depending on how each individual school or college submits their course information), the Office of the Registrar obtains information from each course instructor on what courses have components that use distance learning.

**Technology and Computer Related Support**

Downstate is supported by a central Information Services (IS) Department that provides support for all core hospital and

academic technology and computers. This includes applications and development, computer hardware and software, physical and wireless networking, data centers for physical and virtual servers, and a centralized helpdesk. There is extensive use of information technology by the students and faculty in all of Downstate’s colleges. This is especially true in clinical specialization courses (in which students are expected to access and use the most recent national clinical practice guidelines) and in research courses.

**The Academic and Library Computing (ALC)** division of IS provides support for on-line and computing needs; maintains and administers the individual colleges’ computer laboratories, computerized testing and curricular automation services, provides system administration, and maintains and supports the Banner student information system. Academic and Library Computing (ALC) supports academic use of technology through its subdivisions that work in close coordination with each other and within IS:

- **Academic Applications and Technology Development (AATD)** maintains the software for a range of key online educational systems including PRIME (a Blackboard Angel-based learning management system or “courseware” used to serve content and conduct activities in courses) and Vocacord (Adobe Connect system used for online web meetings and serving pre-recorded lectures). All students have access to web-based or downloadable learning resources such as 3D Visible Human, Virtual Microscopy, and the Panopto lecture capture system. Neural and Behavioral Science students use highly sophisticated parallel computer modules to model neural networks in the brain. Students have access to several unique sources developed by Downstate faculty, from lecture podcasts to specialty-specific learning modules such as Neuroanatomy and Radiology Atlases, the Virtual Reality Brain Project, and the Histology Lab Manual. PRIME is also used to provide training modules for the hospital’s Healthbridge Medical Record System, which must be completed by all hospital and student users of the system.

AATD trains faculty and staff on the use of various educational technologies through scheduled workshops and on-demand instructional resources. It collaborates with faculty to investigate emerging concepts, hardware, and software and systems so that students, administration, and faculty have access to the best educational technology. It also works closely with other central campus IT departments to create and manage student e-mail accounts and register mobile devices for access to campus Wi-Fi.

- **Curricular Automation and Testing Services (CATS)** manages computers and software installed on more than 400 public computers in labs, classrooms, and the Medical Research Library, working closely with AATD to provide proper configuration. Students make extensive use of these publicly available computers and

the computer laboratories for accessing PRIME and for completing course assignments and papers. In some disciplines, computer laboratories are used extensively for classroom instruction. CATS also manages all computerized and scantron-based exams, with technical support for the computers and institutional and external software packages used for this purpose. It provides assistance in curricular automation, including software research. CATS is also responsible for managing the SAS and SPSS statistical software licenses used for both curricular and research purposes.

- **Academic and Library Systems Administration (ALSA)** supports backend server hardware and operating systems, as well as specialized programming needs. ALSA currently maintains a mixed physical and virtual server environment consisting of over 70 servers to support the needs of educational computing, campus web servers, academic administrative systems, and the student information system (Banner).
- **Student Information Services (SIS)** supports the Banner student information system and associated administrative and external applications that interact with the Banner environment. SIS supports student registration, admissions, financial aid, and bursar offices in day-to-day operations. It maintains the operational data storage, reporting infrastructure, online payment processing, and document imaging systems that are used for student, administrative, and educational computing services.

The **Biomedical Communications** division produces a comprehensive range of traditional and new media products to support the instructional, research, patient care, and public service missions of Downstate. Services include computer graphics, web development, teleconferencing, digital video production, photography, medical illustrations, graphs, booklets and brochures, digital printing, and research poster materials. Consultation and planning are offered at no charge in all areas of media production.

Biomedical Communications (BC) and Academic and Library Computing (ALC) collaboratively oversee the majority of student, faculty, administrative, and clinical web development and support. This includes creating web sites, assisting with cost-effective content management, and ensuring that the academic sites are effectively supported by appropriate infrastructure and tools.

#### Medical Research Library

Located in the Health Science Education Building, the Library provides a wide range of services. Currently, it provides access to approximately 4,000 electronic journals and nearly 400 electronic books. The vast collection includes nearly 300 electronic databases, nearly 400,000 printed journal volumes, 67,000 printed books, and over 66,000 monographs. Its offerings also include a general reserve collection (core textbooks; Special Reserve collection; course-specific and instructor-selected materials), and inter-library loan. The

Library web page is available from computers within the Library, over the campus network, and via the Internet for those wishing information from off campus.

The Library provides comfortable seating throughout as well as individual carrels, tables, and chairs; small-group study spaces; and conference rooms. Opened in 2010, the Library Information Commons, a 9,000-square-foot study space located on the first floor, provides around the clock access to on-line Library technologies in a comfortable and secure space. In all recent specialty accreditation visits, the Library is cited as an excellent resource.

The Library regularly confers with each college and school and with department heads and program chairs to determine the needs of each department and set priorities for journal subscriptions. Among its nearly 300 electronic databases are: PubMed; CINAHL; Clinical Evidence; Cochrane Collaboration; ESCSO HOST; Elsevier Science Direct; Facts and Comparisons; First Search; Harrison Online; Health Reference Center; InfoRetriever (InforPOEM); Inforshare; InfoTRAC; Lexis-Nexis; MDConsult; Merck Manual Online; Micro Medix; NetLibrary; PsycInfo; Statref; UptoDate; Web of Science; Scientific American; and Wiley Interscience.

As part of the SUNY system, the Library has access to the system-wide UNION Catalog that makes over 8 million print titles available to students, faculty, and staff, and also participates in the SUNY document delivery system (ILLIAD) which provides electronic document delivery to the desk top. SUNY CONNECT is a SUNY system electronic collection. The Library is also a member of the National Library of Medicine's National Biomedical Information Network.

The Library's education services assist in curriculum-related and clinical-support classes, and with research assistance and research techniques. Its Advanced Learning Resource Services center provides facilities for small student-group and independent learning needs. This division also includes Classroom Services, AV Delivery/Support, and houses the current Center for Healthcare Simulation, which will move to the new Public Health/Education Building once that facility opens.

The Library is in the midst of a multi-year program to improve user access to its information resources. Within the Library, network wiring has been upgraded to a CAT 6 level with the capability of delivering 1 GB access to each desktop computer. Wireless access points have been strategically placed on its three floors and upgraded to improve transmission speed and security.

#### Downstate Biotechnology Initiatives

Downstate is spearheading an initiative to transform Brooklyn into a center for biotechnology. This initiative includes a 50,000 square feet Biotech Incubator for early stage companies adjacent to the campus and BioBAT, a waterfront location several miles away for incubator graduates and more mature companies. The biotechnology initiative provides educational and research opportunities

for Downstate’s faculty and students and stimulates economic growth and community revitalization. The three phases of the Center have been built with grants from the city, state, and federal government, with no debt incurred.

**Research Support/Sponsored Programs**

Downstate’s research enterprise is broad in scope. Recognizing that continued growth and success in the research mission requires a robust research infrastructure, Downstate recently embarked on a major restructuring of its research administration, including combining the pre-award and post-award offices into one office. Oversight of Downstate’s research mission and the reorganized research administration will be provided by a newly established senior administrative position, the senior vice president for research (under recruitment), several newly established support positions including an associate vice president for research administration and associate vice president for research compliance (in active recruitment), and associate vice president for clinical research (in planning stage). Finally, an Advisory Council on Research consisting of research-intensive faculty from each of Downstate’s colleges and schools has also been established. Its main role is to help campus leadership define and implement successful strategic planning efforts.

Downstate’s commitment to its research mission is evident in curricula components that expose students to translational research and other investigative opportunities. For example, the medical center has played a lead role in a multi-institutional Brooklyn Health Disparities Center (BHDC) funded by the National Institutes of Health. BHDC’s ongoing mission is to develop and implement models to address health equity in minority and new immigrant populations through basic, clinical, behavioral, and community participatory research; community education and outreach; and health professional training. Another example is Downstate’s highly successful stewardship of the Brooklyn Biotechnology Consortium, a partnership of key Brooklyn organizations and start-up companies dedicated to developing an affordable and supportive scientific business environment in the borough of Brooklyn.

The long-term benefits derived from Downstate’s research activities go beyond the immediate impact of federal and non-federal funding and the jobs created by this funding. The research program enhances Downstate’s competitiveness and its mission by elevating its ability to attract the most talented students and faculty to Brooklyn.

**Division of Comparative Medicine (Laboratory Animal Resources)**

The Division of Comparative Medicine (Laboratory Animal Resources) is responsible for managing the care of all animals used in biomedical research and education at the campus. The facility, located in the Basic Sciences Building, collectively comprises 39,000 square feet. It contains several specialized areas including large animal housing, biohazard containment housing, and laboratories for animal radiology, diagnostic, and necropsy activities. The facility supports

130 active Institutional Animal Care and Use Committee-approved protocols for 75 investigators and their graduate students and postdoctoral fellows in the departments of Cell Biology, Medicine, Neurology, Pediatrics, Physiology and Pharmacology, Psychiatry and Surgery, and the International AIDS Vaccine Initiative. Downstate’s animal research program has been continuously accredited by the Association for Assessment and Accreditation of Laboratory Animal Care (AAALAC International) since 1986 and is registered with the U.S. Department of Agriculture, the U.S. Public Health Service, and the New York State Department of Health. The facility has completed phases one and two of a multi-phased renovation without disruption to ongoing research.

**Public Safety/University Police Department**

The Downstate campus is a safe and secure learning environment, and the clinical affiliates also provide systems and personnel to ensure students are safe on clinical rotations. University Police maintains a proactive approach toward public safety on the Downstate campus. Officers are assigned to entrances in each building as part of the identification and facility access program. Additional activities and services include building patrols; booths located in areas of high pedestrian traffic; radio-equipped motor vehicles; emergency phones and alarms; on-demand escort service in the evening; shuttle service to subway stations and bus stops; closed circuit television systems; and high-intensity lighting on the exterior of buildings. With the assistance of grant funding, Downstate recently installed video cameras at numerous locations in areas adjacent to the campus and along routes to parking lots and the nearest subway station. Similar security measures are in place at the affiliated clinical teaching sites. Downstate and its clinical teaching sites have emergency management and emergency response plans in place that detail response to potential threats such as fires, storms, utility failures, major transportation accidents, and so forth. The department participates in drills conducted by the campus’ Emergency Preparedness Committee.

**INSTITUTIONAL ASSESSMENT**

With the appointment of President Williams and a new senior management team during 2012, greater emphasis has been placed on a uniform and regular assessment process and continuous performance improvement throughout the academic programs. Downstate’s graduates are highly successful in their performance as measured by time-to-degree, retention, licensure, and career placement. Faculty productivity and instructional impact are assessed continuously as well as scholarly impact and productivity.

Downstate regularly assesses its overall effectiveness through qualitative and quantitative measures. Among the assessment tools in place are peer comparisons, internal performance metrics, local and published surveys of satisfaction and engagement, comprehensive program reviews, teaching and course evaluations, accreditation activities, national test and licensure data, and targeted studies. The academic deans and institutional research faculty meet regularly with the president to review performance and student outcomes.

The information is used for strategic planning and budgeting, program development, and decision making for hiring faculty, enhancing academic programs, and improving services.

**The Power of SUNY**

Downstate has also worked collaboratively with SUNY in its assessment initiatives. In the spring of 2010, SUNY launched its Strategic Plan: *The Power of SUNY*. New initiatives were developed in the following years to strengthen SUNY as the largest comprehensive system of higher education in the country. The *Six Big Ideas* articulated in the plan – *Entrepreneurial Century, Seamless Education Pipeline, Energy-Smart New York, Healthier New York, Vibrant Communities, SUNY and the World* – provide the focus for system activities and local institutional impact. Each Big Idea detailed metrics and targets for data-driven decision making and assessment of progress through the *Report Card* for each campus and SUNY collectively.

Followed by *The Power of SUNY Refresh*, system leadership articulated a set of guiding principles and identified four major organizing ambitions or system-level outcomes, including the Performance Management System. These system outcomes – increase college readiness, strengthen the value of a SUNY degree, and increase external investments and research – have been translated into campus-level outcomes with campus-defined indicators.

*The Power of SUNY* has led to Networks of Excellence, bringing together top scholars and industry experts to spur research and commercialization and StartUp NY, a New York State program designed to allow businesses to operate tax free for ten years when they align with a campus to create jobs that support the academic mission of the affiliated SUNY college. As of spring 2015, Downstate had successfully partnered with five biotechnology firms at its Biotechnology Incubator, with seven partnerships pending, providing student training and internships in cutting-edge science. Several Downstate faculty members had won grants through the Networks of Excellence process.

**Institutional Effectiveness: Assessment and Continuous Improvement Process**

Downstate’s Assessment and Continuous Improvement process provides the structure and process for the systematic and ongoing collection of data and information to improve the overall effectiveness of programs. The model is built upon Downstate’s mission of providing outstanding education to the next generation of physicians, scientists, nurses, and other healthcare professionals. An integral part of Downstate’s mission is to advance knowledge through research and into practice, to improve the lives of its globally diverse communities, and to embrace cultural diversity.

Institutional effectiveness includes both the assessment of student learning and non-instructional components of Downstate that support, indirectly or directly, student success. The process not only reviews the accredited and externally certified individual academic programs, it provides a method of assessing the effectiveness and efficiency

of institutional services and programs that support the academic programs. The multi-step process, based on Downstate’s mission, vision, and values, involves planning and goal setting, implementation, analysis and assessment, evaluation, and improvement over years. Built upon data collection and analysis for decision making, the process is guided by principles of transparency, diversity, innovation, access, feedback, and fiscal accountability with active participation by Downstate’s communities of stakeholders.

**STRATEGIC THINKING IS KEY**

The complexity of our organization, common to all academic medical centers, and the rapidly changing external regulatory and health services system in which we operate demands strategic thinking, acting, learning, and conversation to improve decision making and enhance effectiveness as an organization.

This process is on-going and allows Downstate to clarify and address major organizational issues, respond wisely to internal and external demands and pressures, and deal effectively with rapidly changing circumstances. It is a natural part of doing business and enables Downstate to maintain sustainability and continue to benefit the residents of New York State and beyond. To that end, strategic planning based on assessment is a direction and guidepost to our future, linking strategy with implementation across campus, building on our strengths and overcoming our challenges.

This is how the campus develops new programs and leverages its resources to achieve academic excellence. It is how we ensure that we remain current and responsive to student and societal needs – and to our public mission.





## DOWNSTATE'S SELF-STUDY REPORT RESPONDS FULLY TO MSCHE'S CHARACTERISTICS OF EXCELLENCE AND THE RESEARCH QUESTIONS THAT FRAMED THE SELF-STUDY. WHILE THE RESEARCH QUESTIONS ARE COVERED IN DEPTH IN THE NARRATIVE, THIS SECTION PROVIDES A SUMMARY OF THE WORK GROUPS' FINDINGS, ALONG WITH THEIR RECOMMENDATIONS.

### STANDARD 1: MISSION AND GOALS

#### Self-Study Research Questions:

- 1.1) *To what extent have initiatives and enhancements, i.e., academic programs, research agenda, infrastructure projects, etc., been driven by the mission and goals of Downstate?*** As discussed throughout the *Self-Study Report*, Downstate's statement of mission, vision, and values guides and reflects all of Downstate's educational offerings. Downstate's initiatives, academic programs, research agenda, and infrastructure projects are strongly grounded in Downstate's mission as a medical university. The mission drives Downstate's scholarly and scientific pursuits, strategic planning, and resource allocation efforts. Infrastructure projects such as the new Public Health/ Academic Building, a new faculty development office, and the focus of Downstate's research agenda on health equity all strongly support Downstate's mission.
- 1.2) *How well are faculty, staff, and students familiar with Downstate's mission and goals and implementation?*** There is a high level of knowledge about Downstate's mission and its four overarching goals among key stakeholders.
- 1.3) *How have faculty, staff, and students been involved in the development of Downstate's mission and goals?*** There is strong involvement by faculty, staff, and students in developing the current Mission Statement. Through the shared governance and college and school committee structures, Downstate faculty and professional staff have been highly involved in ensuring that the Downstate mission is "lived." Through involvement in student and campus governance structures, committees, and student clubs, students are also highly involved. Downstate's new planning initiative, *Downstate 2016-2020*, provides opportunities to be involved in goal development.
- 1.4) *How fully does the Mission, Vision, and Value Statement capture Downstate's institutional identity?*** The current Mission, Vision, and Values Statement strongly captures the essence of Downstate's identity. It incorporates the three components that traditionally define an academic medical center – education of the next generation

of health professionals, biomedical research, and patient care – as well as commitment to social impact, educational access, and diversity.

- 1.5) *Most of Downstate's individual colleges and school have developed their own mission and goals statements, which address their specific constituencies. How well do these stated missions fit into the overall campus mission?*** All of the individual college and school mission statements reflect their own unique foci and respond to their own specialty accrediting bodies while embracing Downstate's overarching mission.

#### Recommendations:

- To ensure continued relevance and appropriate emphasis, schedule regular reviews of the mission statement, engaging broad stakeholder involvement. The new round of strategic planning process represents a good opportunity to review our mission, vision, values, and goals.
- Develop a central database of outreach and community engagement activities to better document and highlight this aspect of Downstate's mission.

### STANDARD 6: INTEGRITY

#### Self-Study Research Questions:

- 6.1) *How effectively are Downstate's institutional policies being communicated to students, faculty, and staff? How effective are the responsible administrative bodies at implementing and enforcing institutional policies?*** Downstate's mission and goals are referenced throughout the institution's written and oral communications in a broad array of venues. Academic administration is highly effective in implementing curricular assessment, revision, and implementation.
- 6.2) *How are the needs of all the constituencies of the institution being considered in terms of curricular improvement?*** At its heart, Downstate's mission focuses on students and helping them achieve success. Downstate's vision of providing "outstanding education of physicians, scientists, nurses, and other healthcare professionals" is reinforced and supported by each college and school through annual assessment and evaluation processes.

6.3) *How well does the Downstate environment promote a culture of integrity, fairness, civility, and ethical values among faculty, staff, and students?* Integrity lies at the heart of policy and decision making at Downstate, and it is implemented and embedded through a hierarchy of governance and reporting structures. These include the SUNY Board of Trustees, the Downstate president and senior management of each operational area, the deans and chairs of each of Downstate colleges and schools, faculty and staff governance, and student councils. The culture of integrity is underscored by fair and impartial policies, guidelines, and expectations that are outlined in a variety of publications.

6.4) *How does each of the various colleges encourage feedback and address student and faculty concerns?* Faculty and all members of the campus are expected to be alert to discrimination, harassment, or disparagement of students or colleagues. In all cases, students and faculty have several pathways and/or venues for expressing their concerns.

6.7) *How effective is Downstate in fostering a climate of academic and intellectual freedom? How does Downstate promote academic honesty in student work?* Downstate and its colleges and schools are dedicated to academic and intellectual freedom. Academic freedoms are protected under the *Policies of the Board of Trustees*, as well as through Downstate policies. In addition, the Committee on Academic and Professional Qualifications for each college and school encourages and supports these freedoms. All of Downstate's colleges and schools define academic integrity and specify the process for resolution of academic misconduct and grievances and appeals. Student grievances are addressed promptly, appropriately, and equitably through the appeals committees established by each academic unit, coordinated and safeguarded by the Division of Student Affairs.

6.9) *How well does Downstate integrate respect for cultural competency/humility and diverse cultures, as well as sexual orientation and gender identity into its operations and training?* Downstate integrates strong respect for cultural competency, cultural humility, and diverse cultures. Faculty and all members of the campus are expected to be alert to discrimination, harassment, or disparagement of students or colleagues based upon gender, race, sexual preference, or religious affiliation. Complaints can be addressed through a variety of mechanisms, including the Office of Diversity and Inclusion, the Office of Faculty Affairs and Professional Development, the Division of Student Affairs, or through the deans' offices of the individual colleges and schools.

#### Recommendations:

- Working with Human Resources, the Division of Student Affairs, the Office of Diversity and Inclusion, the Office of Faculty Affairs and Development, and other offices as appropriate, review strategies to ensure consistent application of campus policies and ethic codes.
- Consider developing a section devoted to ethics-related policies in Downstate's online Policy Library.

#### STANDARD 4: LEADERSHIP AND GOVERNANCE

#### STANDARD 5: ADMINISTRATION

##### Self-Study Research Questions:

4.1) *How do the governance structures of the individual schools/colleges relate to the overall governance structure of Downstate?* The dean of each college or school serves as the chief administrative officer of his or her respective academic unit. The five deans are appointed by the president of Downstate, and sit on the Council of Deans. The Centerwide Faculty and Professional Staff Assembly is the organization that represents faculty and professional staff, with responsibility for ensuring that resolutions and recommendations of the entire Assembly are communicated to Downstate's president. Twice a year, the president is invited to a Centerwide Assembly to provide a briefing on campus activity and provide a forum in which questions can be asked.

4.2) *What is the governance structure of SUNY and how does it relate to the overall structure of Downstate?* The overarching administrative body that governs SUNY Downstate Medical Center is the Board of Trustees. The Board does not oversee the routine affairs of any individual SUNY campus. Rather, it allows each campus to have autonomy, as feasible, with regard to its organizational structure and administrative practices. The Board does set broad policies and future direction for the university; acts as an advocate for SUNY, and assists in making the case to the New York State legislature for resources to sustain the institution. The Board appoints the chancellor of the University, who serves as the chief administrator for the 64-campus system.

4.3) *What role do Downstate's campus governance structures play in advancing institutional renewal?* Under the governance model outlined in the *Policies of the Board of Trustees*, the college and school faculties have responsibility for the initiation, development, and implementation of instruction, research, and service programs. In addition to these formal duties, the faculty governance structures also provide a framework for faculty to come together to

have a voice, collectively work on issues that affect the university, and make decisions that, even at the local college or school level, can have a significant impact on the whole campus in aggregate.

**4.4) *What are the governance structures for faculty and students? How effective are these structures in responding to constituent needs?*** Governance structures include the University Faculty Senate, and the University and the Student Assembly at the SUNY level. At the campus level, structures include the Campus Centerwide Committee, the individual college and school Faculty Assemblies, and the Student Councils. These structures are effective in developing committee structures for faculty college governance and for airing concerns. There have been historic issues with active faculty participation in SUNY structures; however, within the past 4 to 5 years, participation has been revitalized.

**4.5) *How well do campus governance structures coordinate with each other? Is communication bi-directional?*** At the University level, the presidents of the faculty and student assemblies communicate frequently, and attend each body's meetings. On the campus level, communication between the faculty and student governance structures could be strengthened. Between administration and faculty governance structures, communication is bidirectional. The deans of each college and school meet regularly with their respective faculty organizations. Students have a voting position on the SUNY Campus Council.

**5.1) *Reviewing the organization charts of each college, how effective are current administrative processes?*** Current administrative processes appear effective, and are revised by the colleges as required. The College of Medicine, for example, hired an associate dean for assessment as part of its planning for the new Integrated Pathways Curriculum. The College of Nursing hired an associate dean for research as part of its efforts to position the College as a Center for Nursing Research.

**5.2) *How can we assure that administrative structures are facilitating learning?*** The colleges' surveys of students, strong graduation and retention rates, strong showing on national and state licensure exams; and strong record of employment attest to a strong learning environment and effective administrative structure.

**5.3) *How well do Downstate's leadership and administration structures encourage a culture of innovation, teamwork, and empowerment?*** Downstate's new president strongly encourages innovation. Examples include participation of Downstate's biotechnology initiatives in StartUp New York, and launch of

competitive funding for cross-disciplinary research on health disparity topics. The president has also encouraged a dynamic learning campus through the new Office of Faculty Affairs and Professional Development, which aims to spur innovation and teamwork through faculty training. Downstate 2016-2020 will provide an opportunity to insure that institutional goals support innovation with resources allocated to support long-term innovation.

**5.4) *How well do Downstate administrative structures and services facilitate effective execution and decision-making?*** Downstate's new leadership is committed to institutional effectiveness. Downstate regularly assesses its overall effectiveness through a variety of measures, including internal performance metrics, faculty and staff performance reviews, and teacher and course evaluations, among others. The administration of Downstate's five colleges and schools is highly effective based on external reviews, student achievement, and alumni success as measured by external as well as internal metrics.

**5.5) *To what extent do Downstate administrators use campus "Big Data" in assessment and decision-making processes? Do Downstate administrators have adequate access to campus and system-wide data to facilitate evidence-based decision making?*** Downstate's administration consistently reviews data to assess progress and guide decision making. Downstate's Office of Institutional Research is working with SUNY on its efforts to capture educational data and use it in effective strategic planning. At the campus level, the new director of institutional research, Charis Ng, is working with the colleges and schools to capture data for use in their analyses. Institutional profiles are routinely posted on the web. While Downstate has access to SUNY's data warehouse, it could benefit from developing its own data warehouse. Institutional Research might wish to consider adding a business analyst component to its function.

#### **Recommendations:**

- Continue to review and implement best practices for efficient operations, including assessment of IT and other tools needed to streamline operations.
- Advance employee innovation and identify strategies to promote high performance.
- Continue to review campus communications systems, with the goal of strengthening communications on campus and raising Downstate's external profile.
- Support campus and individual college and school governance structures, with the goal of promoting participatory campus processes, strengthening committee structures, and developing a campus culture of collaboration, openness, and respect.
- Consider strengthening Downstate's data warehouse capabilities.

**STANDARD 10:****FACULTY****Self-Study Research Questions:**

**10.1) Are there differences across departments in the criteria for faculty appointment, tenure, and promotion? Identify and evaluate the basis for such differences.** As reviewed in the narrative, each college and school defines its own criteria for faculty appointment, tenure and promotion, in alignment with the Policies of the Board of Trustees and the Bylaws and Committee on Academic Promotions and Qualifications of each college and school. The basis for the differences arises from the specific mission of each college and school.

**10.2) How should expenditures for faculty development be prioritized?** The new Office of Faculty Affairs and Professional Development is reviewing and expanding faculty development as part of its strategic plan, including recommendations for expenditures.

**10.3) How is the number of faculty needed at each level in each discipline of each college determined?** Each college and school determines faculty need based on specialty accreditation standards, student enrollment, program of study objectives, and strategic goals.

**10.4) What role do faculty play in designing and evaluating curricula?** How did faculty contribute to the development of the new curriculums in Medicine and Nursing? Under the *Policies of the Board of Trustees*, faculty are responsible for the design and implementation of the curriculum, as well as regular review for effectiveness. Over 160 faculty members participated in developing the College of Medicine's new Integrated Pathways Curriculum. All nursing faculty, including the associate deans, participated in revising the curricula and implementing the new guidelines set by the American Association of Colleges of Nursing.

**10.5) To what extent do faculty engage in community service and outreach activities? What is their role in encouraging students to engage in community outreach?** Faculty play an active role in community service and outreach activities. For example, faculty in the College of Medicine volunteer at the Brooklyn Free Clinic to oversee student clinical care activities. Faculty in the colleges of Nursing and Health Related Professions work closely in a variety of community outreach endeavors. In the College of Health Related Professions, for example, faculty and students participate in "Backpack Day" at local schools, demonstrating to elementary and middle school students how to appropriately balance book loads. Students in the College of Nursing routinely

volunteer at local senior citizen centers and at health fairs, working with Downstate's Center for Health Promotion and Wellness. Students in the School of Public Health undertake community projects as part of their capstone project. In the School of Graduate Studies, faculty and staff, as part of a grant with SUNY and the Academy of Science, are teaching STEM subjects in local high schools.

**10.6) How are faculty supported in incorporating new software and technology into classroom instruction?** Downstate's Division of Information Services and Academic Computing support the programs, goals, and objectives of Downstate's academic enterprise. Together, they provide the physical, technological, and informational resources that allow the Downstate community to create a culture of collaboration and scholarship across the continuum of teaching and learning. There is extensive use of information technology by the students and faculty in all of Downstate's colleges and schools. This is true of the clinical specialization courses, in which students are expected to access and use the most recent national clinical practice guidelines, as well as in research courses.

**10.7) How well does Downstate engage in institutional renewal through balancing new appointments between promising young faculty and renowned professionals who can attract grant support?** Downstate's colleges and schools do an excellent job of balancing the ratio of junior to experienced faculty who are grant supported, and in supporting young faculty members to assume stronger roles. Young faculty members are encouraged to tend to the developmental milestones required for career advancement, form mentor-mentee relationships, and attend professional conferences. In the colleges of Nursing and Health Related professions, faculty members are afforded release time for professional development, clinical practice, and scholarly endeavors. In addition to faculty development activities, the commitment to excellence in teaching is reflected through several SUNY-wide awards: Distinguished Professor, Distinguished Teaching Professor, and Distinguished Service Professor, and the chancellor's Award for Excellence in Teaching.

**Recommendations:**

- As part of the faculty development initiative, continue to encourage doctoral preparation for faculty who do not hold the terminal degree in their profession.
- Create a standardized faculty evaluation and development tool to be used in all colleges and schools, with support to both those evaluating and those evaluated, in order to assess faculty development progress and goals together with metrics to monitor in an on-going and supportive manner.

- Develop formal, best practices faculty mentoring programs tailored to the needs of each college and school, with the goal of enhancing faculty retention and advancement.
- Establish a half-day, orientation and reception for new faculty to welcome new colleagues to the Downstate community, and to promote networking and the establishment of a community of peers.

## **STANDARD 8: STUDENT ADMISSIONS AND RETENTION**

### **Self-Study Research Questions:**

#### **8.1) *Do comparisons of Downstate's retention and graduation rates to similar schools, aspirant institutions, and national averages indicate that the institution is performing effectively?***

Downstate has high retention and graduation rates at both the graduate and undergraduate levels, reflecting Downstate's status as a medical university. Downstate's students have already made career choices when they enroll in Downstate's highly focused, targeted curricula and are older (the average age of Downstate students is 29), goal-oriented, and more mature than their counterparts at large undergraduate liberal arts colleges.

#### **8.2) *What criteria are used to assess whether periodic review of admissions policies are effective? Are changes in the process needed?***

Downstate's mission is the basis for its enrollment goals. Consistent with its mission, Downstate seeks to recruit a broadly diverse, highly select student body that is passionate about excellence in clinical care and scientific research, interested in urban health and health-equity issues, and engaged and excited about learning. Recruitment and admissions practices at Downstate produce strong matriculating classes. The participation of faculty in setting guidelines, interviewing candidates, and determining whom to admit ensures that entering students are a good academic and philosophic fit. Downstate's high retention and graduation rates indicate appropriate selection criteria.

#### **Recommendations:**

- As part of the website redesign initiative, review the academic component of the website for ease of use and alignment with best practices, including social messaging. Evaluate additional IT tools that could improve operational efficiencies and promote engagement with prospective students.
- Continue to develop community-based programs with local high schools and colleges, with the goal of encouraging diverse, well-prepared applicants to Downstate's programs.

## **STANDARD 9: STUDENT SUPPORT SERVICES**

### **Self-Study Research Questions:**

#### **9.1) *What changes in the provision of student support services have been implemented over the past five years? What evidence is there that these changes were based on appropriate assessment results? How effective were the changes?***

A major improvement within the Division of Student Affairs since the last Middle States study was an overhaul of its IT infrastructure. In 2007, to provide a seamless experience for students and enhance communications between subdivisions, Student Affairs implemented Banner, an administrative software application for educational institutions. Banner allows multiple student support offices to share a common database and integrates student information into one coordinated system. Since the initial Banner implementation, additional features have been added, including the ability to pay tuition and fees online and a more robust application system. The academic section of the website has also been upgraded. A variety of instruments collect data on students' assessment of support services and advisement, and are used in planning, as is feedback gathered from direct interaction with students.

#### **9.2) *What type of personal and social development does the institution seek to foster? How effective are programs and services designed to support this development?***

The average age of Downstate students is 29, and most are financially independent of their parents and live off-campus. Downstate recognizes this and provides educational and recreational programs that are targeted to this mature population and reflective of Downstate's broadly diverse ethnic, racial, and cultural student body. Downstate maintains effective advisement and counseling services that consider and respect students' diverse backgrounds, interests and abilities. Each student's academic progress is carefully monitored, and guidance and support are offered throughout the student's matriculation.

#### **Recommendations:**

- Continue to strengthen and evolve the existing framework of student support services, with the goal of supporting student success.
- Annually assess services offered by the Office of Academic Development against outcomes measures, to ensure that students are taking advantage of services offered, and that services are appropriately tailored to professional health education.

## STANDARD 11: EDUCATIONAL OFFERINGS

## STANDARD 13: RELATED EDUCATIONAL OFFERINGS

## STANDARD 14: ASSESSMENT OF STUDENT LEARNING

### Self-Study Research Questions:

**11.1) How well communicated and how easily accessible are statements of expected student learning outcomes at the institutional, program, and course level?** Learning goals, objectives, and competencies for each program are presented to students in their program manuals, courses of study, and syllabi. Course syllabi include measurable instructional objectives and expected student competencies, thus providing an objective mechanism for evaluation of the program goals. Course syllabi outline the knowledge that should be gained upon completion of the module/course, the method of evaluation, and competency-level requirements, as well as remediation activities.

**11.2) What evidence demonstrates that the institution's education offerings have academic content and rigor appropriate to the degree levels? How do the program development and assessment processes foster periodic consideration of academic content and rigor?** Educational offerings are regularly and extensively evaluated as a component of required specialty accreditations, including the LCME (Liaison Committee on Medical Education), CCNE (Commission on Collegiate Nursing Education), CEPH (Council on Education for Public Health), and the accrediting bodies of each of the allied health professions. Since 2009, Downstate has undergone nine successful accrediting reviews by external bodies. (See, Assessment of Student Learning.)

**13.1) Are the processes for developing, offering and evaluating Certificate Programs coherent and consistent across the institution? How do Certificate Programs relate to existing academic departments, degree programs, and existing faculty? Are the levels of relationships and connections effective and appropriate?** Processes for developing certificate programs are consistent with SUNY policies, New York State Education Department policies, and with the accreditation policies of specialty accrediting bodies. Advanced certificate programs are offered by Downstate in the Colleges of Health Related Professions (Midwifery) and Nursing (Women's Health Nurse Practitioner and Family Nurse Practitioner). The School of Public Health offers a post-baccalaureate certificate program. Each of the certificates is credit bearing, and the credits may

be applied to degree programs at Downstate. All certificate programs are evaluated and monitored by the faculty, program chairs, and college or school dean, as per established institutional procedures. Academic oversight assures transferability of credit-bearing certificate courses to comparable degree programs.

**13.2) What evidence exists that students in distance education courses achieve learning goals comparable to the goals achieved in face-to-face courses?** At the present time, Downstate has no programs that are offered solely by distance learning. A number of courses at Downstate use a mixed methods approach to student learning but use traditional, in-class or in-lab evaluations and testing. The current model of instruction tends to consist of courses using on-line materials, discussion boards, drop-boxes for assignment submission, and other electronic formats available through Downstate's course management system.

**14.1) How well has the institution articulated, communicated, and prioritized expected student learning outcomes at the institutional, program, and course levels?** Learning objectives are developed by the faculty and administration in concert with published core competencies for the professions/disciplines and institutional mission. Learning goals, objectives, and competencies for each program are presented to students in their program manuals, courses of study, and syllabi. Course syllabi include measurable instructional objectives and expected student competencies, thus providing an objective mechanism for evaluation of the program goals. Course syllabi outline the knowledge that should be gained upon completion of the module/course, the method of evaluation, and competency-level requirements, as well as remediation activities.

**14.2) How effectively are assessment processes measuring student achievements of expected learning outcomes?** Assessment of students and student learning begins at the time of admission and continues through and after graduation. Evaluation varies by area of concentration and program of study, and is aligned with accreditation standards outlined by each discipline's specialty accrediting body and scaled towards degree level. It can include oral and written examinations, qualifying exams before proceeding to the next level of study, results on national examinations, and evaluation of both didactic and clinical performance. Faculty in all programs continuously review student performance in order to make recommendations to individual students regarding tutoring, study habits, course withdrawal, modification of course of study, or other academic remediation that is available.

**14.4) How effective are campus efforts to encourage, recognize, and value faculty efforts to assess student learning and improve their teaching?** Professional development is encouraged and supported at the centerwide and individual college and school levels. In August 2014, President Williams created the Office of Faculty Affairs and Professional Development and appointed a new vice president to lead it. This office's mission is to plan, coordinate, and implement academic personnel matters and faculty education development programs, including faculty recognition. There are both SUNY-level and campus-level programs to recognize teaching achievement.

#### Recommendations:

- Continue to build the strength of Downstate's course offerings through continuous assessment and improvement in course offerings.
- Encourage innovative delivery of course content that combines enhanced technological modalities with the best of in-person, hands-on course instruction.
- Continue to assess the evolving landscape in the health professions with the goal of incorporating best practices into program offerings and ensuring continued relevancy of course offerings.
- Continue to monitor resource issues and legal and regulatory policies on distance learning, and periodically assess whether dedicated distance learning offerings fit within institutional goals and planning exercises.
- Strengthen student learning assessment by strengthening the culture of measurement and accountability.
- Develop a dashboard for student learning assessment outcomes.
- Review software tools to collect data and strengthen assessment measurement, and to compare institutional outcomes to peer and aspirant academic health centers.
- Consider best practices to ensure data integrity in developing outcomes measures.
- Consider extending the College of Medicine's "Outcomes Assessment Dean" concept to Downstate's four other colleges and schools, as appropriate.

## STANDARD 2: PLANNING, RESOURCE ALLOCATION, AND INSTITUTIONAL RENEWAL

### STANDARD 3: INSTITUTIONAL RESOURCES

### STANDARD 7: INSTITUTIONAL ASSESSMENT Self-Study Research Questions:

**2.1) Have there been any recent significant initiatives in Downstate's academic programs, services, and activities?** Initiatives in Downstate's academic programs are reviewed in *Strategic Intent: The Path*

*Forward* (and *Downstate 2016-2020* under separate cover with the Appendices.) This document reviews academic goals that guided the period between 2010 and 2015, and the current status of those goals.

**2.2) How and why have institutional planning processes changed over the past five years? Have those process changes achieved the desired impact?**

Downstate's academic strategic plans were developed following a thorough assessment of the competitive landscape. The new planning initiative launched in 2016 will articulate the strategic intent for Downstate's growth and development through 2020. It will provide clear guidance and direction for the future, and simultaneously allow the institution to be nimble and flexible in building upon accomplishments and making adjustments in response to emerging opportunities and challenges. It will be strongly grounded in assessment and rational budget forecasting. As clearly communicated by President Williams and fully supported by faculty, students, and staff, Downstate's collective, overarching vision will focus on promoting health equity and addressing health disparities through training, research, and clinical programs in partnership with local communities. A second, equally important focus will target operational transformation and financial stewardship.

**2.3) How well does Downstate connect resource allocation to strategic planning and institutional renewal? What are some of the successful "halo" projects that have contributed to institutional renewal?**

Strategic planning, resource allocation, and institutional renewal are intertwined at Downstate. Strategic planning encompasses long-range planning to ensure that the campus grows conceptually and programmatically, as well as short-term planning that occurs annually through the budget planning process. Every college and school is involved in strategic planning and institutional renewal. Examples of halo projects that have contributed to institutional renewal include, for example, construction of the new Public Health Academic Building, due to open in 2016; expansion of the Advanced Biotechnology Incubator; and the new College of Nursing simulation laboratory.

**2.4) To what extent do these processes reflect institutional and educational assessment?** The new round of strategic planning will incorporate a comprehensive assessment of Downstate's strengths within and across disciplines, resource allocations and investments, faculty and student performances, facility conditions, and space utilization. When final, "*Downstate 2016-2020*" will articulate the strategic intent for Downstate's growth and development. It will provide clear guidance and direction for the



future, and simultaneously allow the institution to be nimble and flexible in building upon accomplishments and making adjustments in response to emerging opportunities and challenges.

**2.5) *Retrospectively, describe the long and short-term goals of Downstate's academic planning projections over the last ten years. What has been implemented to date? How did assessment factor into plans that had not been executed?*** The long- and short-term goals of Downstate's academic planning projections and the status of each of the goals are reviewed in *Strategic Intent: The Path Forward*, and *Downstate 2016-2020*, included under separate cover. Assessment was at the heart of every major objective. Planning for the new Public Health Academic Building, for example, took into account a spectrum of institutional needs, including a state-of-the-art home for the School of Public Health, additional classroom and auditorium space that is configurable, new team-based training methodologies, an expanded simulation center, and additional lab space to attract high-powered and well-funded research faculty who will further contribute to Downstate's already robust research programs.

**3.1) *What steps have been taken to evaluate how effectively resources are allocated and expended? Have specific changes been implemented and what were the outcomes?*** President Williams has taken prudent steps to manage the human, financial, technical, and physical facilities necessary to support Downstate's mission. Downstate's Resource Allocation and Assessment Model requires continual review of the allocation of resources and their outcomes. The Planning and Budgeting Committee meets regularly to review current allocations/outcomes as well as develop future plans. Examples of specific changes that have been implemented are reflected in academic program offerings adapting to the market for health care professionals. We have contracted programs as well as created advanced degrees. In these instances we monitor applications, enrollment, faculty/student ratios, among other benchmarks.

**3.2) *What are the most significant challenges for human resources, technology resources and physical plant resources over the next five years? What is the process by which plans for addressing these challenges are being developed within the context of overall institutional planning?*** The most significant resource challenges in these areas include the need to be nimble in an evolving healthcare environment; to adopt efficient operational systems and processes; to ensure updated workforce skills and increase productivity; and to address deficiencies associated with an aging physical plant. Downstate has worked closely

with the SUNY Construction Fund to address physical plant and critical maintenance needs, and with SUNY Administration relative to planning to meet capital funding needs. Internally it is developing a farsighted senior administration team with experience in addressing the challenges that confront medical universities today.

**3.3) *We know that financial planning can be sensitive to intervening variables. How have Downstate's academic budget processes responded to recent variables?*** Downstate's Executive Vice President and Chief Operating Officer Astra Bain-Dowell undertook a thorough review of operations and implemented tighter controls and improved systems. Chief Financial Officer Melanie Gehen assessed funding requests, especially those involving faculty hires and college plans, to ensure fiscal responsibility and alignment with institutional goals and strategic planning. The Planning and Budgeting Committee is responsible for ensuring the institution is living within the budget. Through its periodic review of past, present and future state, variables are identified and course corrections are developed and communicated to the campus.

**3.5) *How well is the institution keeping up with advances in teaching and learning technologies? Are linked planning and budgetary processes in place to address evolving needs?*** Information Services maintains several divisions that contribute to a robust academic computing environment, as discussed more extensively in the narrative. The Academic Applications and Technology Development (AATD) division, for example, maintains the software for a range of key online educational systems including PRIME (a Blackboard Angel-based learning management system or "courseware" used to serve content and conduct activities in courses). All students have access to web-based or downloadable learning resources, as well as several unique learning resources developed by Downstate faculty. This division also trains faculty and staff on the use of various educational technologies through scheduled workshops and on-demand instructional resources. It collaborates with faculty to investigate emerging concepts, hardware, and software and systems so that students, administration, and faculty have access to the best educational technology. Information Services staff attend conferences and review current journals on evolving technology. They also meet regularly with the faculty and deans of the colleges and schools to discuss needs. Infrastructure needs are communicated to and evaluated by the Planning and Budgeting Committee. They are responsible for prioritizing, identifying assessment measures, allocating resources and monitoring to ensure teaching and learning technologies are meeting the institution's ongoing needs.

**3.6) *When additional resources are devoted to a college, program, or area, how is the success of additional funding measured and tracked?*** Review of academic programs has received increasing emphasis under President Williams. He has asked each college and school to review its goals, successes and challenges, future opportunities, and recommendations for implementation in preparation for the new round of strategic planning. New programs proposed must be based on solid business plans and align with Downstate's mission. Success is measured through on-going evaluation and assessment of progress and attainment of goals, student success, and external measures such as successful specialty accreditation reviews.

**7.1) *How involved are faculty, academic, and institutional leaders in institutional assessment activities?*** Faculty and administration are strongly involved in assessment activities, as evidenced through the numerous specialty accreditation reviews that Downstate's programs undertake, Downstate's Resource Allocation and Assessment model, and continuous support for student success.

**7.2) *What policies and governance structures are in place to facilitate institutional assessment?*** Governance structures that facilitate institutional assessment include the SUNY Board of Trustees, the Chancellor and SUNY Administration, the SUNY Campus Council, the University Faculty Senate, and the colleges' and schools' Faculty Assemblies. Policies and processes include the annual budget process, the strategic planning review, and the SUNY budget process, among others. Downstate's Resource Allocation and Assessment model assures institutional assessment.

**7.3) *How effective have institutional assessment processes been in supporting the decisions made by faculty and staff for improving educational programs?*** The institutional effectiveness model employed at Downstate provides a strong structure and process for supporting decisions made by faculty and staff and for improving educational processes.

**7.4) *How have Human Resources policies and procedures strengthened the institution's abilities to achieve its mission and goals?*** Human Resources (HR) works closely with the colleges and schools to implement effective, fair, and impartial recruitment processes that yield strong candidates. HR also works with the Office of Diversity and Inclusion, and with the Office of Faculty Affairs and Professional Development to develop and implement policies that ensure that the learning environment and workplace strengthen the institution's mandates for achieving its mission and goals.

**7.5) *In what ways has assessment contributed to institutional renewal?*** Assessment at Downstate is guided by four principles: academic strength; clinical integration and excellence; pipeline of healthcare professionals; and future financial viability.

**7.6) *To what extent have improvements in processes, technology, equipment, or facilities reflected institutional assessment?*** With the appointment of President Williams and a new senior management team in 2012, greater emphasis has been placed on uniform and regular assessment processes and continuous performance improvement throughout the academic programs. Downstate's graduates are highly successful in their performance as measured by time to degree, retention, and licensure and career placement. Faculty productivity as well as scholarly and instructional impact is assessed continuously.

**7.7) *How will assessment be used to evaluate the new curriculums in the College of Medicine?*** As part of planning for the new Integrated Pathways Curriculum, the College of Medicine has hired an associate dean for assessment, Dr. Bonnie Granat, who has developed assessment metrics to assess student learning outcomes under the new curriculum. Dr. Granat has worked closely with Information Services to implement software to assist in assessment efforts.

#### **Recommendations:**

- Improve awareness at all levels of the Resource Allocation and Assessment Model and how it functions to allocate resources, identify metrics, monitor expenses, and assess institutional success.
- Continue to review and strengthen the interrelationships among institutional, operational, and college and school planning goals.
- Improve awareness at all levels of the budget allocation process, and of processes associated with tracking and monitoring expenses and expense planning.
- Use the *Downstate 2016-2020* planning initiative to publicize new initiatives, highlight achievements, and create a new sense of campus-wide commitment to Downstate.
- Continue to be a leader in responding to New York State and the nation's health professions workforce needs.
- Continue to be a leader in providing access to health professional education; continue to assess how Downstate may further contribute to increasing diversity in the health professions.
- Continue to assess how to streamline and improve information sharing and processes across the institution.

## **FUTURE DIRECTIONS**

Preparing this *Self-Study Report* was a positive experience for the administrators, faculty, students, and staff involved. We had the opportunity to discuss with our colleagues the state of the academic enterprise at Downstate—and, most important, to hear of the challenges and opportunities we as Brooklyn’s only academic medical center face.

Health care is changing dramatically and so must the education programs to prepare the next generation of physicians, researchers, nurses, and other allied health professionals, and public health experts. This report has helped us take stock of the strengths and resources for thriving in this rapidly evolving landscape. It has also built a foundation for a strategic planning process, *Downstate 22016-2020*.

Thank you to the faculty and students we worked with, the administrators who tolerated our endless questions, and, most of all, the Middle State Commission itself for providing a thoughtful framework to evaluate the philosophy, policies, and outcomes necessary to achieve Downstate’s singular mission.