IMPACT 2030

A STRATEGIC PLAN FOR

SUNY Downstate
Health Sciences University

DOWNSTATE
HEALTH SCIENCES UNIVERSITY

Acknowledgements

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A Message from President Wayne J. Riley

When I joined SUNY Downstate Health Sciences University (Downstate) as president five years ago, my priority was identifying immediate and long-term avenues for holistic institutional advancement—academically, clinically, financially, and across our research enterprise.

Before beginning, however, I asked the Presidential Transition Team—comprised of faculty, clinicians, students, researchers, and administrators—to study, review, and make strategic recommendations for improvement across five broad institutional verticals: **clinical services, academics and education, research, community services,** and **institutional operations**.

The Presidential Transition Team conducted an extensive institutional audit of student reports, academic plans, and an in-depth review of organizational operations and culture to determine impacts on the faculty and staff. Data compiled indicated that they saw themselves as a valuable part of Downstate's mission, overwhelmingly believing in the promise and value-proposition of a broader, healing community. The audit laid a solid foundation for Downstate's strategic advancement. Moreover, it was the catalyst for a strategic planning process that began in 2018.

Following more than a year of work, we planned to roll out the (then-named) IMPACT 2025 Strategic Plan in March 2020. However, the coronavirus pandemic emerged simultaneously—a global public health crisis unlike any in more than a century. New York City became its epicenter, and Brooklyn began experiencing substantial deaths, mainly among black and brown residents whose chronic and underlying illnesses significantly impacted the numbers. Governor Cuomo subsequently designated University Hospital at Downstate (UHD), our clinical arm, as a COVID-only hospital. As a result, the launch and implementation of IMPACT 2025 would be delayed, and the Strategic Planning Committee would have to regroup and reassess the five institutional verticals vis-à-vis the way the pandemic now precluded.

While our heroic first responders fought to save lives, support from the community was incredibly uplifting. Downstate received financial and in-kind support, donations of food items, and critically-needed PPE that helped our first responders and other healthcare professionals remain focused on saving lives. In addition, we are grateful for the many cards, letters, and messages received while battling one of the most challenging pandemics in global history.

In May 2020, the nation witnessed the killing of George Floyd, a black man, at the hands of a white law enforcement officer. Amid the pandemic, his death, and other similar events, crystalized a national call to action as the reality of racism, police brutality, and social injustices rose to the fore.

SUNY Downstate stands solidly against these injustices and continues to work with stakeholders to address and support efforts that

positively impact inequalities and inequities, including the lack of access to quality healthcare that disproportionately affects marginalized communities and communities of color.

Public health guidelines have impacted how business and everyday life operates. Amid the discussions of race, health disparities, and social injustice, we reviewed the IMPACT 2025 document vis-à-vis these new realities, renaming it **IMPACT 2030** and extending its life. We reexamined and reassessed the strategies against what the "new normal" would look like while keeping health disparities, race, social injustice, and the pandemic as foundations for this vital work.

We reexamined how these changes would now impact the goals and objectives in the five distinct areas of our Strategic Plan:

1. **Clinical Care**
2. **Educational Excellence**
3. **Research and Discovery**
4. **Downstate and the Community**
5. **Organizational Culture and Transformation**

As we reflect on the link between race and health disparities and the goals outlined for our tripartite education, clinical care, and research missions, College of Medicine dean F. Charles Brunicardi, M.D., created a Health Equity and Social Justice Workgroup comprised of students and healthcare leaders seeking solutions and best practices while navigating a changed world.

One critical element to elevating Downstate as a top-quality institution was its identity, which has remained understated and underrated within the broader community. In 2019, Downstate launched the first component of a rebranding campaign by renaming SUNY Health Science Center at Brooklyn, Downstate Medical Center, as "The State University of New York Downstate Health Sciences University." Downstate's new name encapsulates the full spectrum of the institution's contributions to higher education, scholarship, workforce development, and healthcare. In addition, the new name more appropriately reflects the wide-ranging nature of academic offerings through our five schools and colleges. It reflects Downstate's history and global significance while promoting local, national, and global visibility.

As part of the rebranding campaign in 2021, Downstate Health Sciences University unveiled a new logo and brand identity honoring its legacy, establishing an approachable, legible, and contemporary visual identity, and reflecting our commitment to an accessible institution. Furthermore, we renamed the University Hospital of Brooklyn "University Hospital at Downstate (UHD)," retaining the critically-important "Downstate" name as its foundation. The new identity also includes a sub-brand—Downstate Health—encompassing all of UHD's clinical offerings, services, and locations. Lastly, we launched a new website—a necessary component of the institution's forward-facing endeavors.

The **IMPACT 2030** Strategic Plan is the culmination of our principles of shared governance. Its planning and structure considered various stakeholders' voices, vision, participation, and commitment to transparency. This valuable dialogue led to finalizing an inclusive, equitable, and diverse plan, yet it remains ambitious and forward-thinking.

While **IMPACT 2030** has been developed and implementation has already begun for some elements, we understand the need to be nimble. Therefore, we are prepared to reassess and realign priorities as necessary in response to fluid conditions. SUNY Downstate Health Sciences University will continue an open dialogue with our stakeholders about our progress in implementing or revising **IMPACT 2030**.

Wayne J. Riley, M.D., MPH, MBA, MACP

President,
SUNY Downstate Health Sciences University

Downstate's Response to the Pandemic

PREPARING FOR A NEW NORMAL

In March of 2020, we were preparing to release **IMPACT 2030**, Downstate's Five-Year Strategic Plan. Suddenly, "normal," as we knew it became "different," and our institutional focus shifted to the coronavirus. Early in the pandemic, no one could anticipate such a significant number of global deaths. We are now in the age of the 'new normal.'

Following then-Governor Cuomo's April 2020 designation of University Hospital at Downstate (UHD) as a COVID-only facility, UHD experienced a surge in COVID infections and admissions. Dedicated teams of essential staff, including frontline workers, labored to save lives in the face of a virus that rapidly changed. Our frontline and essential workers never relented, helping our patients fight the virus while making them comfortable.

GETTING THE MESSAGE OUT

Through it all, we relied on committed teams of faculty, staff, and even our students, to begin the process of getting us back to business. The Coronavirus Preparedness Task Force, under the leadership of Dr. Brunicardi, established the Back to New Normal (BTNN), a workgroup created to research and make recommendations on the safest and most effective ways to return to campus.

Chaired by Heidi Aronin, MPA, Senior Vice President and Chief Administrative Officer, the BTTN workgroup surveyed the Downstate community to assess concerns about returning to campus and subsequently established recommendations for policies and procedures consistent with public health guidelines and safety protocols. The BTTN workgroup continues its work as local, state, and federal guidance remains fluid.

ON-CAMPUS COVID PREVENTION EFFORTS

To help prevent the spread of COVID-19, we employed a contact tracing program and also launched a Surveillance Pooled Saliva Testing Program to test large groups of asymptomatic students and employees. These efforts allow campus leaders to take appropriate action, including isolation and quarantining, as necessary. Kitaw Demissie, M.D., Ph.D., School of Public Health Dean and Campus Safety Monitor, leads these efforts.

COPING WITH THE MENTAL HEALTH IMPACT OF COVID-19

One of the overlooked impacts of battling the pandemic is its effect on healthcare and other essential workers' mental health. We developed recurring peer support groups via videoconferencing and telephone for Downstate clinicians to address issues and concerns related to their frontline work with COVID patients. This work is led by the Department of Psychiatry.

We are also helping students cope with concerns about the pandemic and other matters that may cause them stress and anxiety. Former SUNY Chancellor Jim Malatras, Ph.D., announced that the ThrivingCampus app would be adopted throughout the State University system as part of a comprehensive plan to expand access to mental health services to every student at SUNY's 64 campuses. The app provides students with mental health resources and access to more than 6,000 mental health providers. Our own President Riley served as Co-Chair of the SUNY Student Mental Health Task Force.

COVID-19 VACCINE ADMINISTRATION

David H. Berger, M.D., MHCM, FACS, University Hospital at Downstate's Chief Executive Officer, leads the Downstate team overseeing vaccine efforts to ensure efficient and effective administration of the coronavirus vaccine per CDC and other public health guidelines. To date, thousands of vaccine doses were administered to Downstate/UHD frontline, other essential workers, staff, students, and patients.

LESSONS LEARNED FOR THE FUTURE

As we cautiously shift focus to other endeavors, we are ready to launch **IMPACT 2030**. We reflect upon the pandemic's daunting and unimaginable challenges and the insights they have provided as we prepare for Downstate's next five years.

Despite this extraordinary challenge, Downstate never veered from its outstanding education, research, and clinical care missions. Priorities may have been shifted to accommodate the uncertainties of the virus, but they were never lost.

This pandemic reaffirmed our collective strengths and dedication to the community. When our tenacity and commitment were tested, we found even greater resolve and are prepared for the challenging road ahead.

We intend to move forward with a greater appreciation for our struggles, a newfound understanding of our capabilities, and an expansion of our greatest possibilities.

Mission, Values, and Vision

Downstate's mission, values, and vision statements are foundational elements of our identity because they lay the groundwork for implementing the initiatives outlined in the **IMPACT 2030** Strategic Plan. The mission statement reminds both internal and external audiences why Downstate exists and about the critical nature of our work, while the vision statement sets expectations for where we see ourselves in the future. Without a vision statement, stakeholders cannot align around a common goal. The values are the behaviors and principles on which we achieve our mission and vision, and set us apart from other institutions engaged in similar work.

The mission, vision, and values statements were adopted by Downstate after a diverse group of faculty, staff, and administrators spent months meeting, discussing and fine-tuning the language to ensure that it was holistically reflective and inclusive of all aspects of the institution. The statements were revisited by the five Workgroups during this strategic planning iteration.

MISSION

- To provide an outstanding education for a new generation 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

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 partner organizations

Innovation

We research and develop new and creative approaches and services for 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

VISION

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

Introduction

During the summer of 2018, SUNY Downstate began a strategic planning process – **IMPACT 2030** – to set campus-wide priorities in five distinct areas: **education**, **clinical care**, **research and discovery**, **community relationships**, and **organizational culture and transformation**.

The planning was grounded in a set of Workgroups, one for each area of focus. Workgroup Chairs served on a Steering Committee that synthesized products into draft strategic plans for consideration by Downstate's Executive Management Committee.

The Workgroups met several times throughout 2018 and into 2019, engaging more than 100 participants. They gathered data to analyze current conditions and reviewed reports prepared by other groups, including the "Student Government Leadership Strategic Planning Initiative," the "Rapid Strategic Assessment," and the Campus Climate Survey completed in 2017. The Workgroups assessed Downstate's strengths and weaknesses and identified opportunities for growth and change.

Together, the Workgroups and Steering Committee drafted goals for each **IMPACT 2030** area, specified objectives and tactics for each goal, and identified measures to track progress against the goals and objectives. They reviewed these strategies with Downstate's Executive Management Committee and hosted a Strategic Planning Retreat to assess the revised plans.

Downstate leaders – more than 100 strong – gathered at the SUNY Global Center in January 2019 to consider the strategies. The session began with an exercise that recounted participants' experiences with Downstate over the past 50 years that included sharing pride in accomplishments and remembering challenges confronted.

SUNY Downstate Health Sciences University – then known as Downstate – began in 1860, with the founding of a school of medicine within Long Island College Hospital. Downstate has grown to become one of the nation's leading urban academic medical centers – one that serves a large and diverse population clinically, educates a highly varied group of students – including many first-generation Americans and first-generation advanced-degree holders – and employs physicians, clinicians, scientists, tradespeople, managers, and other staff from a variety of diverse backgrounds. Downstate's accomplishments recounted during the January 2019 retreat session included the following:

DISCOVERY AND CLINICAL INNOVATION

- Identification of nitric oxide as a signal molecule in vascular health. The 1998 Nobel Prize in Physiology or Medicine was awarded to Dr. Robert Furchgott for this discovery.
- The National Medal of Technology awarded to Dr. Raymond Damadian for developing the first MRI machine capable of taking full-body images.
- Dr. Samuel L. Kountz, the nation's first African American transplant surgeon, founded the Downstate kidney transplant program in 1972.
- The first open-heart surgery in New York State, performed by Dr. Clarence Dennis and his Downstate team. Dr. Dennis invented one of the first heart-lung bypass machines.
- The first federally-funded dialysis center in the United States.
- The first federal funding to study the transmission of HIV from mother to fetus.
- Discovery of head direction cells by Dr. James Ranck and the 'Ranck Group' contributions to spatial learning.
- Groundbreaking research on the cellular basis of epilepsy, and RNA translation in brain function, memory, and learning.
- Brooklyn's only kidney transplantation program.
- The Downstate Biotechnology Incubator and BioBAT.

EDUCATION

- The first and only health sciences university in Brooklyn.
- The first medical school founded within a hospital, and the first to make bedside training an integral part of medical education.
- Accreditation of the Midwifery program by the American College of Nurse-Midwives as the first in the country to accept students with backgrounds other than nursing.
- One of the largest medical schools in New York City in terms of enrollment – one that has trained more practicing New York City physicians than any other school and trained nearly half of the physicians practicing certain specialties in Brooklyn.
- The only School of Public Health in Brooklyn and first public School of Public Health in New York City.
- Expansive and expanding Health Professions programs.
- A College of Nursing that trains the next generation of nurses at the undergraduate, graduate, and doctorate levels.

COMMUNITY AND DIVERSITY

- An enduring commitment to inclusion, equity, and access in admission and hiring, including student pipeline programs.
- The Brooklyn Free Clinic, a Downstate student-run organization that provides free healthcare to the uninsured in Brooklyn.
- The Brooklyn Health Disparities Center, a partnership among SUNY Downstate Health Sciences University, the Arthur Ashe Institute for Urban Health, and the Office of the Brooklyn Borough President.
- Primary care designation for the National Health Service Corps.

Downstate has faced many challenges over the past five decades. Financial constraints are ever-present. Demographic changes have increased healthcare demands, and Downstate serves a population largely insured by government payers. Many campus buildings are aged and in need of significant rehabilitation. Downstate's research enterprise has had high and low points over this period. Competition in the clinical landscape has grown markedly as a number of other Brooklyn hospitals have partnered with leading healthcare systems in Manhattan and on Long Island. Downstate's clinical volumes have declined. The institution has lost talented researchers, faculty, and practitioners. Recruiting new staff is a challenge today due to competition, and because of the time it takes to hire.

Following their reflections, retreat participants reviewed and strengthened the goals proposed by the **IMPACT 2030** teams (See Table 1). They also defined values and behavioral shifts they believed would strengthen Downstate's work culture.

This report presents the resulting strategies, including the values and behavioral changes desired throughout Downstate. The sections that follow present objectives and tactics for each goal. The final section of the report includes initial steps outlined to implement the strategy and priorities for the first phase of this work.

IMPACT 2030 Strategic Goals

TABLE 1.

A Clinical Care

1. Achieve the highest ratings for the quality of patient care experiences among Brooklyn hospitals.
2. Grow surgical case volume by six percent within three years and enhance other clinical programs.
3. Improve clinical operational efficiency and effectiveness.

B Educational Excellence

1. Achieve active learning excellence through access to a broad and distinctive range of clinical, practical, and research experiences.
2. Engage in interprofessional learning activities that advance academic, clinical, and research excellence.
3. Expand Downstate's academic programs through innovation and strategic partnerships.

C Research and Discovery

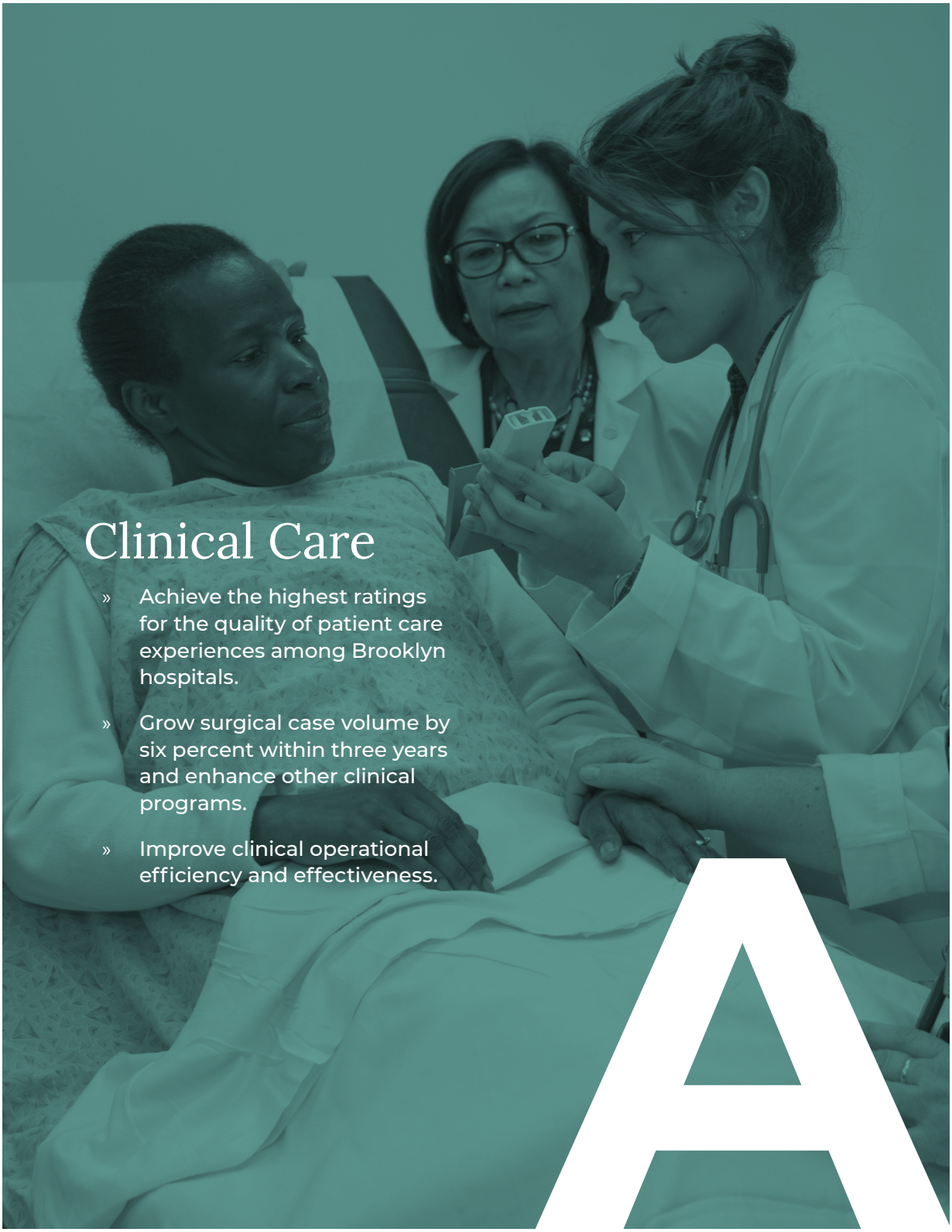
1. Become a Center of Excellence in Interprofessional Translational Research with an emphasis on research that impacts the health and well-being of the communities that we serve, and which targets the elimination of health inequities.
2. Expand and diversify Downstate's research infrastructure.
3. Create and sustain a research culture that drives discovery and innovation that is supportive of diversity, equity, and inclusion.

D Downstate and the Community

1. Improve community health outcomes through Downstate's urban health education, prevention, and clinical care.
2. Strengthen communication with Downstate's community and stakeholders.
3. Strengthen alumni/ae engagement.

E Organizational Culture and Transformation

1. Ensure a healthy and equitable organizational culture grounded in values that reflect the concerns and aspirations of Downstate's people and those they serve.
2. Implement operational processes that enhance efficiency, strengthen fiscal health, and enable academic, clinical, and research excellence.
3. Promote a culture of faculty, staff, and student development and advancement.



Clinical Care

- Achieve the highest ratings for the quality of patient care experiences among Brooklyn hospitals.
- Grow surgical case volume by six percent within three years and enhance other clinical programs.
- Improve clinical operational efficiency and effectiveness.

Clinical Care

The Clinical Care Workgroup was tasked with assessing Downstate's clinical practices and patient volumes. The analysis was used to design strategies to strengthen the efficiency and quality of care and bolster financial stability through growth in specialty surgical lines and other clinical services.

University Hospital at Downstate (UHD) is the teaching hospital for Brooklyn's only academic medical center. Its faculty, staff, and students reflect the diversity of the borough. UHD cares for people who are medically underserved. Nearly 75.0 percent of Downstate's patients are under 55 years of age – a figure that surprised Workgroup members and presented opportunities for shaping patient-centric care.

Patient volume has fallen across the board at UHD in recent years, with an inpatient discharge decline of 13.0 percent, outpatient visits falling 6.0 percent, and surgical procedures dropping by 13.0 percent. UHD ranked 4th in inpatient discharges among residents of its service area.

GOAL 1
PATIENT CARE EXPERIENCE

The quality of Downstate's patient care experience has seen recent gains; however, there is opportunity to improve. Downstate ranks below average in Medicare's HCAHPS quality ratings and relatively low in the private Leapfrog Patient Safety Assessment. The strategy proposes to push these ratings higher in the coming years. These ratings are linked to quality results. By strengthening clinical outcomes, UHD will be positioned to generate more referrals and improve reimbursement.

The retreat participants felt the **IMPACT 2030** Clinical Care goal and objectives were ambitious, yet necessary. To reach these goals, participants noted that Downstate needed to strengthen data collection and reporting, develop leadership among chairs, chiefs, nursing, and other leaders, and to involve clinical and support staff.

GOAL 2
CLINICAL GROWTH

Clinical Care's growth strategy focuses on select surgical specialties and on increases in ambulatory care visits. Developing higher-acuity service lines will enhance UHD branding and generate better financial margins, assuming improvement in the efficiency of our care delivery. This focus will align patient expectations with the offerings expected of an academic medical center. It is important to acknowledge that the coronavirus and its requisite social distancing will prove to be another difficulty in developing strategies to increase ambulatory care volume. At the same time, this presents a unique opportunity to increase our telemedicine presence.

Retreat participants supported the goals and objectives, and also expressed concerns. To grow its clinical business, Downstate must build relationships with other area hospitals to expand the patient care base that is required to increase specialty services. Participants noted that significant changes such as creating a surgical intensive care unit (SICU) are cost prohibitive. Downstate must partner with well-capitalized organizations and/or obtain New York State funding for major surgical expansion. The participants also noted that Downstate needed an experienced surgical service-line executive to pursue this goal.

GOAL 3
COST EFFECTIVENESS

To reduce readmissions, Downstate must also strengthen its cost-effectiveness by lowering length-of-stay and preparing patients to better manage their health following discharge. The strategy includes objectives and tactics to strengthen efficiency in care delivery and improve care documentation to generate accurate patient charges.

The retreat participants made several suggestions that add to the tactics, including developing leadership, strengthening case management and utilization, incorporating care paths, and improving clinical rounding.

A CLINICAL CARE

In 2022, University Hospital at Downstate created a Strategic Plan with new mission, vision, and values statements, as well as setting seven drivers with corresponding strategic goals.

MISSION

As the only health sciences university hospital in Brooklyn, we are devoted to achieving health equity in our communities through outstanding patient care, research, and education.

VISION

To be the best place to get care and the best place to give care.

VALUES

We Care.

Welcoming to All
Equity
Collaboration
Accountability
Respect
Excellence

UHD Strategic Plan
2022-2025

Goal 1. Achieve the highest ratings for the quality of patient care experiences among Brooklyn hospitals.

Objective 1

Improve the patient experience.

Tactics

a. Improve **'nursing communication with patients'** score from 71.3 percent to 73.8 percent, then subsequently to 76.0 percent.

b. Improve **'responsiveness to patients'** score from 48.9 percent to 51.8 percent, and subsequently from 56.1 percent to 61.0 percent.

c. Improve **'hospital environment'** (cleanliness, noise reduction) score from 61.0 percent to 62.1 percent, and subsequently to 65.3 percent.

d. Improve **'staff worked together'** score from 83.2 percent to 85.0 percent.

Objective 2

Increase the Leapfrog rating.

Tactics

a. Improve Patient Safety Indicators (PSIs).

b. Reduce Hospital-Acquired Infections (HAIs).

c. Reduce Hospital-Acquired Pressure Injuries (HAPIs).

d. Improve medication safety by improving barcode scanning.

Measures: HCAHPS survey rating; Leapfrog score; measures for each of the tactical changes.

Goal 2. Grow surgical case volume by six percent within three years and enhance other clinical programs.

Objective 1

Increase surgical volume by six percent within three years.

Tactics

a. Recruit or develop a surgical service line executive leader.

b. Develop and expand surgical service lines to meet community needs, including kidney transplantation, cardiothoracic, musculoskeletal/orthopedic, and pediatric specialty surgery.

c. Establish a formal surgical intensive care unit (SICU) with non-operative surgical intensivist coverage.

d. Strengthen the overall quality of surgical services, including streamlining surgical scheduling.

Objective 2

Increase the volumes of general ambulatory care and specialty care.

Tactics

a. Build partnerships with borough-wide ambulatory care networks.

b. Increase specialty referrals from Downstate faculty, private practitioners, and other hospitals.

c. Promote niche care services including precision medicine.

d. Increase off-hour clinical services.

e. Implement patient-centered, streamlined registration, and scheduling.

Measures: Surgical case volume; general ambulatory care and specialty care visits; individual measures for each of the tactical changes.

Goal 3. Improve clinical operational efficiency and effectiveness.

Objective 1

Achieve expected length of stay (ELOS) to an average length of stay (ALOS) ratio of 1.10.

Tactics

a. Reconstitute the Length-of-Stay Committee.
b. Monitor patient flow to prioritize patient care.
c. Provide clinical decision support technology to better manage patient care.
d. Improve the efficiency of clinical rounding to expedite work-up and discharge decisions.
e. Reduce turnaround times on clinical services to improve through-put.
f. Minimize in-patient work-up of incidental findings.
g. Minimize overutilization of labs/unit monitors to visualize patient test schedules.
h. Institute monthly review of physician/department scorecards for length-of-stay and case-mix index.

Objective 2

Reduce hospital readmission rates to the national average.

Tactics

a. Set improvement targets and focus readmission activities on the defined high-risk populations.
b. Enhance transitional care efforts to prepare patients for discharge via pre-discharge counseling and to provide multidisciplinary aftercare.

Objective 3

Strengthen the validity and consistency of the hospital case-mix index (CMI).

Tactics

a. Analyze the CMI continuously to determine whether coding accurately reflects patient complications and comorbidities.
b. Strengthen documentation by continually training physicians and monitoring their performance.
c. Build a robust clinical documentation initiative.
d. Analyze physician admissions patterns to minimize unnecessary admissions.
e. Analyze length-of-stay (LOS) by provider to identify continual outliers.

Measures: Average length-of-stay; readmission rate; CMI; individual measures for each of the tactical changes.

Educational Excellence

- Achieve active learning excellence through access to a broad and distinctive range of clinical, practical, and research experiences.
- Engage in interprofessional learning activities that advance academic, clinical, and research excellence.
- Expand Downstate's academic programs through innovation and strategic partnerships.

Educational Excellence

Downstate is Brooklyn's only health sciences university. It has a solid history of success across its Colleges of Medicine and Nursing and Schools of Graduate Studies, Health Professions, and Public Health. The Educational Excellence Workgroup considered ways in which Downstate could ensure future success for its academic offerings.

GOAL 1
CLINICAL, PRACTICAL, AND RESEARCH EXPERIENCE

Clinical and/or applied practical experiences represent an essential part of the curriculum within each of Downstate's five schools/colleges. The primary goal of these experiences is to allow learners to integrate and apply the knowledge and skills learned in the classroom to practical, professional settings. The Workgroup proposes to expand the scope of clinical, practical, and research experiences available to learners.

GOAL 2
INTERPROFESSIONAL LEARNING

Many of the accrediting bodies for our schools/colleges now require interprofessional education (IPE), and our students are clamoring for these opportunities since they mirror the real–world health landscape. IPE brings people from multiple disciplines together to learn interactively and to improve health outcomes. The Workgroup embedded the tenets of IPE— teamwork, shared learning, and collaboration— as integral parts of Downstate's educational mission.

GOAL 3
EXPANSION

The Workgroup proposed that Downstate position itself as a leader in innovative education that prepares learners for success in a dynamic healthcare environment. To be competitive, Downstate must grow its enrollment by expanding academic programs and staying current with trends, such as the use of educational technologies, that define the future of teaching and learning.

Considering Downstate's long history of serving immigrants and low-income Brooklyn residents, the Workgroup proposed to recruit diverse learners who are representative of our community. This can be accomplished through the development of new pipeline programs and by strengthening existing ones.

Retreat participants wholeheartedly supported each of the Workgroup's goals. They suggested several changes, included in the tables that follow.

Goal 1.

Achieve active learning excellence through access to a broad and distinctive range of clinical, practical, and research experiences.

Objective 1

Establish new affiliations and partnerships with other SUNY schools and organizations to offer a broader range of learning opportunities. Complete this work in the context of an overall assessment of Downstate's educational offerings and its accreditation requirements.

Tactics

a. Assess the current affiliations/partnerships for all five schools and colleges.

b. Scan existing clinical and practical training opportunities outside of Downstate.

c. Analyze results of scans and identify gaps in training programs.

d. Recommend new learning opportunities to pursue.

e. Examine SUNY schools and colleges that are feasible/suitable to form partnerships. Coordinate this work across all Downstate schools/colleges.

f. Develop articulation agreements with feasible partners.

Objective 2

Utilize our status as a health sciences university and leverage our clinical faculty, residents, research expertise and other resources to develop high-quality opportunities for our learners.

Tactics

a. Identify Downstate's unique resources that can be used to initiate partnerships with other collaborators, (e.g., library resources, Institute for Genomic Health, Brooklyn Center for Health Disparities and Simulation Lab.)

b. Draw direction from Downstate's Office of the President and marketing leaders to identify potential external partners.

Objective 3

Increase scholarship support to underrepresented students to enable participation in clinical, practical, and research-based learning.

Tactics

a. Raise funds for scholarships with help from Downstate's Office of Philanthropy.

Measures: New SUNY affiliations; increase in scholarship funds.

Goal 2. Engage in interprofessional learning activities that advance academic, clinical, and research excellence.

Objective 1

Identify interprofessional teaching and learning priorities.

Tactics

a. Appoint a joint task force with faculty representatives of all five schools/colleges to develop teaching and learning priority areas that can be taught interprofessionally.

Objective 2

Develop innovative interprofessional curricula.

Tactics

a. Develop curricula for the identified priority areas.

b. Obtain State approvals of curricula.

c. Pilot and finalize the new curricula.

Objective 3

Implement strategies for the responsible allocation and dissemination of educational resources.

Tactics

a. Utilize the new Space Committee process to identify space that can be used for collaborative teaching and learning.

b. Enlist the Classroom Services Department to provide equipment for new programming.

c. Identify faculty qualified to teach the classes.

Measures: New teaching and learning priorities.

Goal 3. Expand Downstate's academic programs through innovation and strategic partnerships.

Objective 1

Develop innovative strategies to recruit, retain, and graduate students.

Tactics

a. Identify local and SUNY institutions to create partnerships that expand our pipeline programs.

b. Strengthen existing pipeline partnerships (e.g., The Arthur Ashe Institute for Urban Health).

c. Create pipeline programs for students interested in nursing.

Objective 2

Create novel programs that meet the needs of our communities of interest and prepare students for current and future workforce needs.

Tactics

a. Collaborate with the Workforce Development Committee at SUNY Albany or similar institutions to identify future job trends in healthcare, and identify opportunities for new and expanded programs to meet workforce needs.

b. Inform all Downstate colleges/schools about needs of healthcare employers and changes required for their curricula.

Objective 3

Build a technological infrastructure that supports learners with diverse needs.

Tactics

a. Complete technology infrastructure projects needed to support online learning.

b. Hire instruction designers to help faculty transition courses to online/hybrid platforms.

c. Provide 24/7 support to facilitate teaching and collaboration.

Measures: New SUNY affiliations.

Research & Discovery

- Become a Center of Excellence in Interprofessional Translational Research with an emphasis on research that impacts the health and well-being of the communities that we serve, and which targets the elimination of health inequities.
- Expand and diversify Downstate's research infrastructure.
- Create and sustain a research culture that drives discovery and innovation that is supportive of diversity, equity, and inclusion.

Research & Discovery

The Research & Discovery Workgroup shaped strategies that promote a research resurgence throughout Downstate, setting a goal to increase total extramural-funded activity by five percent annually. The highest expenditure level attained over the past 10 years was $62M in 2012; funding totaled $48.3M in 2020*.

Meeting the goals of the Research & Discovery Workgroup requires that Downstate focus intensively on research growth and quality in all five schools and colleges, with leadership from the President's Office, and from each Dean and Department Chair.

GOAL 1
CENTER OF EXCELLENCE

The strategy proposes that Downstate become a Center of Excellence in Human Interprofessional Translational Research, focused on eliminating the health inequities in the populations Downstate serves. This goal builds on strengths and opportunities inherent in Downstate and on its long-standing dedication to the community.

The institution has strong basic and translational research, as well as community linkages through the Arthur Ashe Institute for Urban Health. Downstate serves a diverse patient community, underrepresented in medical research, who have health issues that beg for understanding and are likely to attract federal funders. The strategy seeks to foster collaboration across the institution (e.g., between the School of Public Health and the Clinical and Translational Science Center), to build partnerships with outside organizations including external Institutional Review Boards (IRBs) to help expand research, and to strengthen ties with foundations that will support Downstate's research plans.

GOAL 2
EXPAND AND DIVERSIFY

Providing the necessary institutional resources and leadership for the expansion of the research enterprise at Downstate is essential. A strong administrative structure will lay the framework for setting a clear research vision for the future, establishing the institution as a leader in Interprofessional Translational Research. Research resources and support services have often been inconsistent and uncoordinated, making grant submission and management, and the conduct of research more difficult and time-consuming than necessary. A more robust infrastructure will facilitate an increase in research grant submissions from a larger, more diverse group of researchers.

GOAL 3
CULTURE OF RESEARCH SUPPORT

To create and sustain a research culture that drives discovery and innovation and is supportive of diversity, equity, and inclusion, Downstate must implement a strategy that seeks to diversify its researchers and to develop the grantsmanship and research skills of junior researchers. The strategy includes activities to diversify our research faculty and trainees, support an expanding research enterprise, and establish common standards for evaluation and promotion. Towards this goal, Downstate has significantly improved its IRB and privacy board by streamlining processes, strengthening quality, becoming more customer-centered, and enhancing compliance. These initiatives will be expanded to further enhance grant development, submission, and post-award processes. However, the IRB and privacy board have yet to be accredited by the Association for the Accreditation of Human Research Protection Programs, Inc. (AAHRPP) which sets and monitors standards for ethics, quality, and protections for human research. This is an accreditation Downstate should pursue.

** These dollars reflect expenditure data.*

Goal 1.

Become a Center of Excellence in Interprofessional Translational Research with an emphasis on research that impacts the health and well-being of the communities that we serve, and which targets the elimination of health inequities.

Objective 1

Establish the areas where Downstate is best positioned to fill important gaps in research and compete for Federal funding.

Tactics

a. Convene a group of community stakeholders, researchers, clinicians, trainees, and administrators from all schools/colleges to prioritize research areas with high–impact community benefits and probability of funding.

b. Convene interprofessional work groups to develop plans for each identified priority area.

c. Provide pilot funding (with positive return-on-investment expectations) for research groups in the high priority areas.

d. Strengthen Downstate's role in leading multi-institutional research initiatives to protect the primacy of Downstate and its researchers in studies that use our patient data.

Measures: Business plans for research priorities.

Goal 2.

Expand and diversify Downstate's research infrastructure.

Objective 1

Develop a research leadership structure for capacity building.

Tactics

a. Utilize the Office of the President to promote both Downstate and its research culture within the institution, the international scientific community, and our neighborhood.

b. Appoint a SUNY Downstate Senior Vice President of Research (SVPR) to coordinate research across all of the Downstate community and its research affiliates. David J. Christini, Ph.D. was appointed Senior Vice President of Research in May 2020.

c. Create a research infrastructure led by the SVPR to enable research growth.

d. Work with the SVPR to develop a process and structure for research within each school/college that includes ongoing community review and input.

Objective 2

Develop and maintain a repository of resources available to Downstate researchers.

Tactics

a. Utilize the office of the SVPR to create and update the following resources:
   - » Database of research expertise and active grants across all faculty, staff, and trainees.
   - » Directory of available grants and granting agencies.
   - » Database of community partners relevant to research and their Downstate contacts.
   - » Catalog of equipment for basic and clinical research at Downstate with associated fees and privileges.
   - » Negotiate volume pricing from vendors and outside providers of technical services.

Objective 3

Expand core research support services across Downstate.

Tactics

a. Utilize the office of the SVPR to develop, coordinate, and offer the following support services:
   - » Study design and statistical analysis data processing services.
   - » Academic or community partnership assistance, development, and training.
   - » Budget development, management, and implementation.
   - » Research computing including high-performance computing and data collection and analysis platforms support.
   - » Research ethics training and support.

Objective 4

Increase Downstate's Federally–funded projects by 5 percent annually.

Tactics

a. Provide financial resources to seed the creation of a nationally recognized Center of Research Excellence for multiple identified priority areas.

b. Provide the SVPR with ample funding to spur recruitment and other essential growth activities.

Measures: Hire a SVPR; catalog and increase the repository of resources; expanded core support services; increase extramural funding.

Goal 3. Create and sustain a research culture that drives discovery and innovation that is supportive of diversity, equity, and inclusion.

Objective 1

Expand research faculty recruitment and diversity with emphasis on those from underrepresented populations (URP).

Tactics

a. Recruit new research faculty with programs of research and expertise in Downstate's priority research areas.

b. Increase recruitment and research placement of junior researchers and develop them through mentorship and training.

c. Develop metrics to evaluate recruitment and retention to track annual progress.

Objective 2

Increase research trainee excellence, equity, diversity, and retention and evaluate annually.

Tactics

a. Generate targeted recruitment of URP students both nationally and internationally.

b. Focus placement of graduate students in Federally-funded labs to provide enhanced training.

c. Provide career counselling and professional development with faculty mentoring and outside resources.

d. Deepen trainee communication and marketing skills and expand networking opportunities.

Objective 3

Establish common standards for evaluation of research activity across the Downstate schools/colleges with the intention of eliminating disparities in promotion including, but not limited to race, gender, sexual orientation, and age.

Tactics

a. Redefine and bolster research requirements for faculty advancement that take into account inequities in opportunities for scholarly achievement.

b. Support non-traditional research and research roles.

c. Create a longitudinal effort to support and check in on faculty to ensure promotions goals are achieved.

d. Increase protected time for clinical faculty using measures of effort (relative value units, etc.).

Objective 4

Improve the responsiveness of processes that support research grant submission and administration.

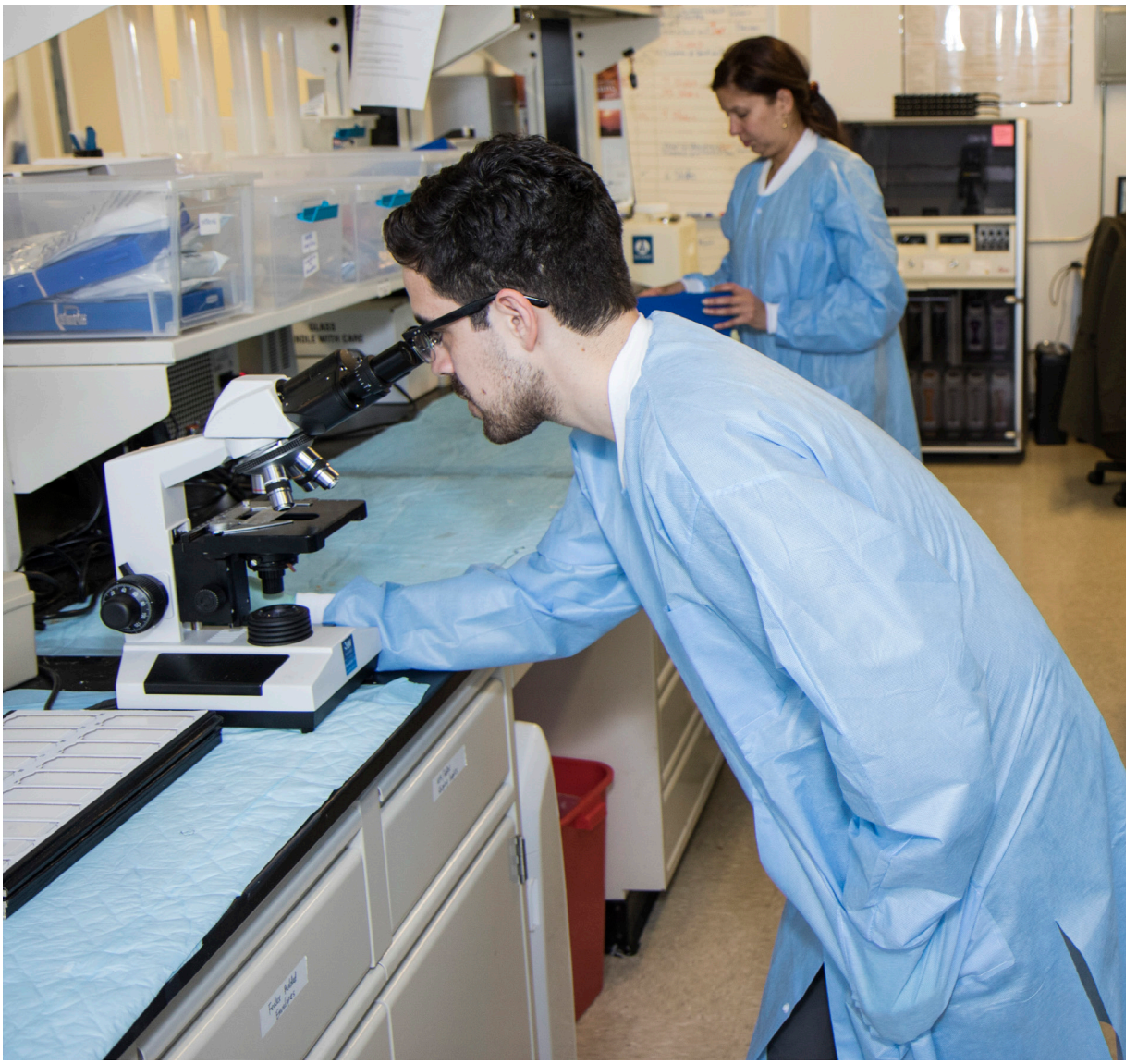
Tactics

a. Streamline grant development and administration using online submission and tracking capacity, where possible.

b. Shorten the timeframe required to hire faculty and other research staff.

c. Simplify and expedite purchasing processes.

Measures: Increase the number of faculty and trainees from URP; strengthen training, support, and communications skills of trainees; assess faculty annual satisfaction responses; standardize research requirements for faculty advancement; streamline grant administrative processes.



Downstate and the Community

- Improve community health outcomes through Downstate's urban health education, prevention, and clinical care.
- Strengthen communication with Downstate's community and stakeholders.
- Strengthen alumni/ae engagement.

Downstate and the Community

As we work to advance healthcare in Brooklyn and promote public health and health education, we must support community and government engagement as a campus-wide strategy. This strategy aims to strengthen relationships with faculty, staff, students, alumni/ae, community businesses, and other partners and residents, and to create mechanisms for planning and assessment that inform collaborative work. Now, more than ever, both global and local events require thoughtful, multi-pronged solutions to complex issues. All types of community engagement—from outreach, to consultations, to long-term collaborations and shared leadership—help foster and sustain the relationships that make our work more efficient and effective.

The Workgroup recommended pursuing several strategies for engagement and creating processes to evaluate and strengthen our partnerships. We must deepen our knowledge of the community—its diverse cultures, beliefs, economic conditions, social networks, power structures, norms, and values. We must also engage community members in discussion about their health and wellness assets and needs.

GOAL 1
IMPROVED COMMUNITY HEALTH OUTCOMES

The Workgroup recommended periodic community needs assessments that analyze health needs and assets and detail Downstate's plans to reduce health inequities. To be truly effective, we must ask stakeholders about their concerns and interests to understand how we can best partner with them to address the differences in health outcomes in our community.

Retreat participants supported this goal, asking that Downstate complete community needs assessments every three years. They suggest that Downstate involve students in community assessment work to build research projects.

GOAL 2
DOWNSTATE'S MESSAGE TO THE COMMUNITY

The Workgroup also recommended that Downstate commit more effort to multiple streams of communication – sharing its services and impact with the community, state, and local public officials, and other stakeholders. The retreat participants suggest that Downstate improve both the content and the delivery of its messages, as well as incorporate more student stories into its institutional narrative.

GOAL 3
AN ENGAGED ALUMNI/AE BODY

The Workgroup recommended that Downstate increase its capacity to connect effectively with its alumni/ae to build sustained relationships of engagement and stewardship. We must consider establishing one alumni/ae services office responsible for graduates from all Downstate schools/colleges. Such an office would allow for fresh opportunities to engage with current students and to encourage alumni/ae to support the institution.

Retreat participants suggested that Downstate engage and enhance the student experience to generate greater loyalty among graduates. They believe that engaging more alumni/ae in teaching will build connections, and that Downstate should provide more information about how it uses alumni/ae financial support.

Goal 1. Improve community health outcomes through Downstate's urban health education, prevention, and clinical care.

Objective 1

The local community and Downstate's research programs partner to tackle local health priorities with engaged research.

Tactics

a. Incorporate Downstate community outreach activities practices to support the institution's research programs.

b. Provide opportunities for Downstate researchers to connect with community members and partners.

c. Establish data collection systems to facilitate assessment of the impact of all outreach activities and to support Downstate's research goals.

Objective 2

Conduct periodic community needs assessments to determine the impact of our programs and identify emerging community needs.

Tactics

a. Complete a community needs assessment.

b. Incorporate community needs assessment findings into Downstate's strategies.

c. Assess impact and deploy resources accordingly.

Objective 3

Partner with elected officials on local, state, and federal health initiatives to meet community health priorities.

Tactics

a. Conduct mapping projects to identify districts of Downstate students, staff, and patients to inform outreach to elected officials.

b. Develop targeted communications to City and State legislative leaders of the respective Higher Education and Health Committees.

c. Develop new programs in partnership with elected officials that address community health priorities in targeted districts.

Objective 4

Downstate and local industry develop multiple innovative partnerships to benefit the community.

Tactics

a. Build new partnerships with local businesses and community-based organizations.

b. Establish a Special Events Department.

Measures: Improvement in priority health areas identified in needs assessment; operating and capital funds added to Downstate as a result of partnerships with legislators and business leaders.

Goal 2. Strengthen communication with Downstate's community and stakeholders.

Objective 1

Develop marketing, social media, and direct mail programs promoting Downstate's work in the community and impact in healthcare and research.

Tactics

a. Share information with Downstate staff, faculty, as well as our community partners, government officials, and other stakeholders.

b. Work collaboratively with legislators to address health disparities.

c. Reinvigorate the Community Advisory Board (CAB).

d. Rebrand the institution in alignment with our mission. *

Measures: Increased web traffic on the Downstate site; instill goodwill and pride in the services Downstate provides to the community.

* Downstate launched a new website, and a brand new identity campaign in December 2021. The new identity consists of a new logo for Downstate, renaming of UHD, and new graphic guidelines.

Goal 3. Strengthen alumni/ae engagement.

Objective 1

Create an alumni/ae engagement strategy.

Tactics

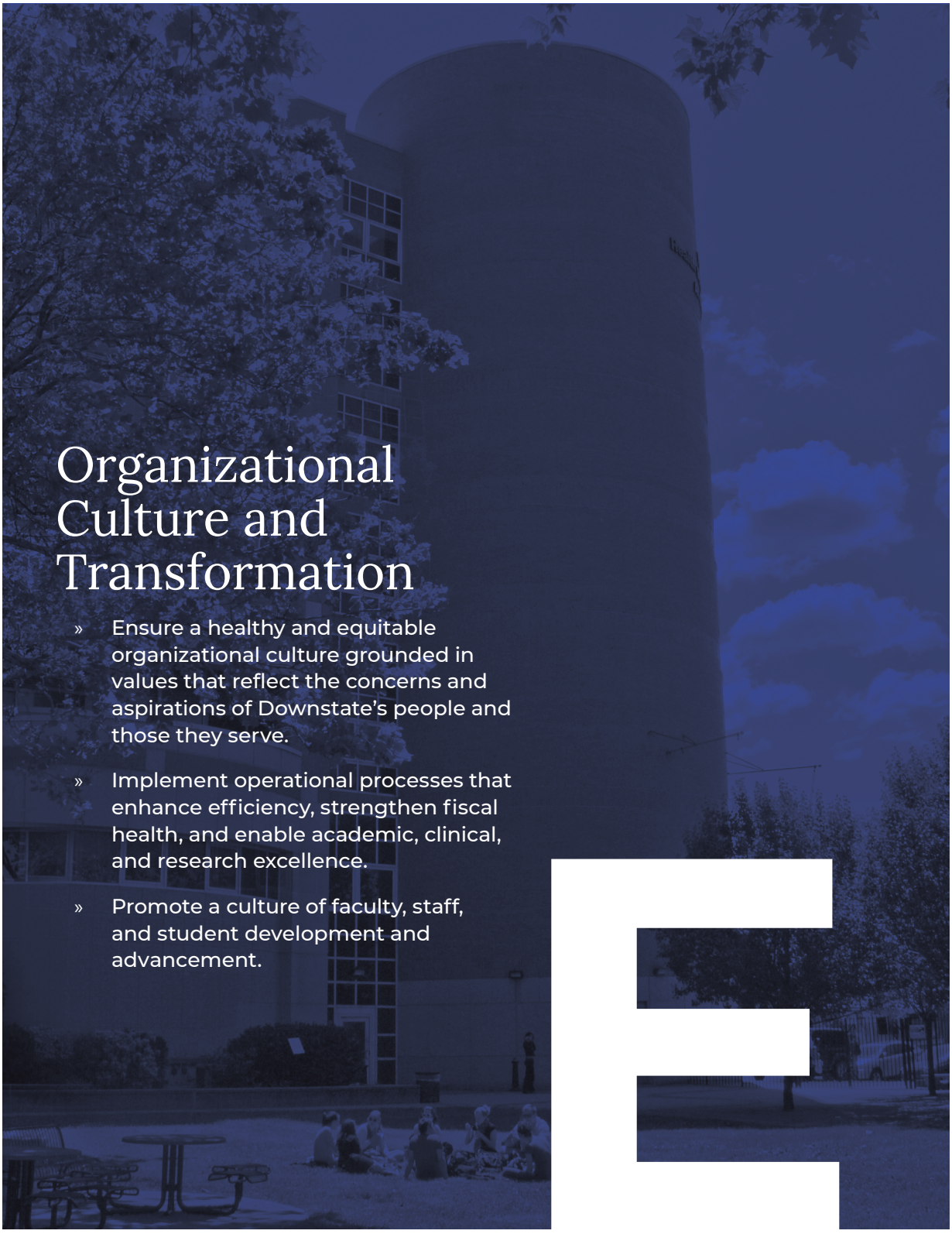
a. Create a central registry group for all alumni.

b. Assess our current engagement structure and systems through the creation of a strategic plan.

c. Define new programs, structures, and systems related to alumni/ae.

d. Implement new structures/systems to strengthen alumni/ae engagement.

Measures: Increase in interactions with alumni/ae; increase in alumni/ae teaching at Downstate; increase in alumni/ae contributions.



Organizational Culture and Transformation

- Ensure a healthy and equitable organizational culture grounded in values that reflect the concerns and aspirations of Downstate's people and those they serve.
- Implement operational processes that enhance efficiency, strengthen fiscal health, and enable academic, clinical, and research excellence.
- Promote a culture of faculty, staff, and student development and advancement.

Organizational Culture and Transformation

Downstate has a remarkably diverse work culture in its academic, clinical, and administrative settings. It also has an excellent reputation for training strong health professionals, many of whom practice locally and reflect the demographics of the communities Downstate serves.

The Workgroup considered ways to strengthen Downstate's work culture. It considered the results of the Campus Climate Survey, completed in late 2017, and discussed conditions in the work environment that both support and impede change. The Survey generated positive comments about peer relationships at work, pride in Downstate's contributions to its communities, and optimism about Downstate's future, based on recent facility improvements and enhanced leadership communication.

The Survey also identified several areas for improvement. Respondents requests included supervisors and managers to listen and share more, clarify goals, provide feedback, recognize good work, and respect and trust staff more completely. Nearly half of the employees said they feared speaking up and half wanted more accountability at all levels. Discussion in the Workgroups raised similar issues.

GOAL 1
WORK CULTURE

The Workgroup used information from the 2017 Campus Climate Survey and the members' own experiences at Downstate to form its first goal, which proposes enterprise-wide work culture transformation centered on five core values: **accountability**, **recognition**, **respect**, **trust**, and **transparency/involvement**. The Climate Survey highlighted several strengths and areas for improvement in Downstate's current work environment:

STRENGTHS

- Collegial workplace
- Commitment to, and pride about Downstate's mission
- Optimism about Downstate's future
- Safe environment (re: accident, injury, violence)
- Job security

CHANGES DESIRED

- More effective supervisory and management practices
- Greater respect for, and trust in staff
- Feedback on performance
- Recognition for positive contributions
- More information and transparency
- Clarity about the organization's goals
- Better listening
- Greater accountability

The retreat participants applauded Downstate leaders for including work culture in the strategic conversation, and to listening as people shared their concerns. They recommended that Goal 1 consider Downstate's stakeholders including staff, students, and patients.

GOAL 2
PROCESS AND TECHNOLOGY REFORM

The Workgroups and the Steering Committee discussed barriers to strategic success in Downstate's purchasing, human resources, grant administration and other administrative practices. They also noted that Downstate remains behind the curve in the use of technology for administrative, clinical, academic, and research work.

Retreat participants asked that Downstate commit to breaking down the current "silo mentality" to help harmonize and standardize processes across the campus, and mitigate what some have termed the 'frustrated dedication' of Downstate's staff. They also want to improve communication and promote transparency by receiving timely information about decisions affecting the campus and institutional finances.

GOAL 3
PROFESSIONAL GROWTH

The final Organizational Culture and Transformation goal focuses on professional development. Retreat participants applauded this goal, noting that it signals Downstate leaders sincerely desire meaningful change and are willing to support the professional development necessary to achieve it.

Goal 1. Ensure a healthy and equitable organizational culture grounded in values that reflect the concerns and aspirations of Downstate's people and those they serve.

Objective 1

Integrate values critical to Downstate's success: accountability, recognition, respect, transparency, involvement, and trust.

Tactics

a. Involve staff, faculty, and students in defining the values and the behaviors that best promote these values.

b. Adopt the values throughout Downstate, beginning with the Executive Management Committee.

c. Incorporate the values into performance evaluations.

Objective 2

Embed the values in hiring, promoting, assessing, developing, and recognizing staff throughout Downstate.

Tactics

a. Develop competencies for all staff that reflect Downstate's values.

b. Embed these values in the processes used to select and promote staff, using behavioral-event interviewing.

c. Embed the values in staff assessment and development.

d. Recognize staff who model Downstate's values.

Measures: Staff survey results; competency models for all titles.

Goal 2. Implement operational processes that enhance efficiency, strengthen fiscal health, and enable academic, clinical, and research excellence.

Objective 1

Improve critical business processes by adopting and deploying effective methods for streamlining work.

Tactics

a. Streamline hiring processes to reduce the time required by half or more, using 'breakthrough' techniques.

b. Standardize business processes throughout Downstate by creating a comprehensive set of improvement tools, and train staff to use them.

Measures: Significantly shorter hiring timeline.

Goal 3. Promote a culture of faculty, staff, and student development and advancement.

Objective 1

Select and develop faculty and other leaders, managers, and supervisors who have the commitment and capacity to develop those who work with them.

Tactics

a. Include staff development as a critical competency for use in assessing candidates for hiring and promotion.

b. Develop the capacity of faculty and other leaders, managers, and supervisors to support staff development, and evaluate their abilities to do so.

Objective 2

Strengthen systems and structures that support staff and student development.

Tactics

a. Develop a standard set of practices for faculty and other leaders, managers, and supervisors to use in promoting growth of their staff and students; train and encourage people to use these practices – e.g., professional training, career paths, mentorships, and others.

b. Assess and strengthen development opportunities open to staff and students; take advantage of opportunities available through SUNY; require faculty and other leaders and supervisors to encourage staff to use these resources.

c. Promote the value of recognition among faculty and other leaders, managers, and supervisors through the use of everyday practices such as “ongoing regard”.

Measures: Hours of training per employee; number of employees completing training; training-based certifications; career plans for staff; assessment feedback on staff development for supervisors and managers; positive comments on staff development in employee surveys.

Values and Behavior Summary

Throughout the **IMPACT 2030** Workgroup goal development process, with special emphasis from the Organizational Culture and Transformation Workgroup, there was significant discussion about individual behaviors that must be addressed if the institution wants to carry out its mission and strive for its vision. This common theme of improving individual behaviors led to breakout sessions focused on creating desired behavioral changes around defined values. These values and lists of behavioral changes are included below in the form of "From-To" statements.

Although the values outlined at the retreat are not identical to the overall organizational goals included in our organizational values of **PRIDE** – **P**rofessionalism, **R**espect, **I**nnovation, **D**iversity and **E**xcellence, they are undoubtedly connected. Working to cultivate stronger individual behaviors around recognition, accountability, respect, trust, transparency, and involvement will reinforce our institutional values. We take pride in our Downstate community and recognize that everyone plays an intrinsic role in helping to achieve our overall success.

Recognition.

Ongoing appreciation or admiration for work well done communicated directly to colleagues, subordinates, and others.

From

- Dismissive
- Talking or yelling over, or down to people
- Negative criticism
- Public embarrassment
- Threatening statements
- Preferential treatment
- No communication

To

- Sincere, genuine appreciation
- Personal engagement and acknowledgment
- Letters, birthday cards, other personal considerations
- Awareness of service above the call of duty
- Promotion and salary increase based on accomplishment
- Equitable two-way evaluations

Accountability.

Well-defined commitments that are reasonable given the capacity to meet them. Work diligently to meet these commitments. Inform those involved of progress and of potential obstacles or delays.

From

- Unclear instructions or expectations
- Conflicting priorities and ineffective communication
- Resisting change
- Not communicating progress or problems
- No enforcement of agreements, ineffective oversight
- Lack of integrity (don't show up)
- 'Not my job' mindset
- Not trusting others
- Not doing a complete job
- Only doing 'my piece'

To

- Clearly defined, realistic, and agreed-upon goals and expectations
- Commitments reinforced as necessary
- Providing resources necessary for success
- Adaptability and willingness to ask for help
- Keeping others informed of progress and problems
- Adaptability in the face of changes in institutional priorities
- Keeping commitments
- Ownership of the entire project

Respect.

Treat others as you want to be treated, listening and being agents of change for people of diverse cultural, religious, gender, and racial backgrounds.

From

- Rude, harsh or dismissive language
- Not listening
- 'Not my job' attitudes
- Insensitivity to cultural and other differences
- Talking down to others
- Not taking responsibility for the common good (litter, etc.)

To

- Active listening
- Non-judgmental
- Attentiveness to diversity (gender, race, culture, etc.)
- Understanding peoples' strengths and weaknesses
- Simple courtesies (greeting, opening doors, using wastebaskets)
- Awareness and empathy

Trust.

Confidence in a relationship built over time through consistently honest interaction.

From

- Not keeping a confidence, gossiping
- Insincere
- Withholding information
- Avoiding responsibility, blaming others
- Unsupportive, not being a team player
- Not showing up
- Not keeping commitments

To

- Being fair
- Humble, compassionate, kind
- Confidential, trustworthy
- Forthcoming, transparent, truthful
- Pitching in to solve a problem
- Taking responsibility for one's own actions
- Constructive

Transparency and Involvement

Transparency: Open, honest, and timely communication.
Involvement: Active participation in decision-making honored by decision-makers for its inherent worth.

From

- Fear of retribution
- Self-preservation
- Withholding information
- Silo-mentality
- No comprehensive campus information
- Anonymous complaints
- Poor listening
- Cloistered decision-making

To

- Candor and clarity about the problems we face
- Town Hall meetings
- Timely updates about major issues
- Easily accessible campus-wide information
- Involving students on committees
- Involving stakeholders in decision-making
- Clarity about rules and regulations

Implementation Priorities and Process

Implementation Priorities and Process

IMPACT 2030 includes 15 strategic goals along with 36 objectives and more than 100 tactics to meet these goals. The plan will guide change for much of SUNY Downstate over the next few years. Given that Downstate cannot accomplish everything at once, implementation will begin over the next six months with several "Phase 1" objectives.

CLINICAL CARE

Downstate will strengthen the quality of the clinical care it provides, as tracked by improvement in industry standards including HCAHPS ratings, Leapfrog scores, length-of-stay, and readmission rates. Meeting the Phase 1 strategic objectives requires coordinated clinical leadership, better communication with patients, more effective discharge planning, and focused clinical reforms in surgery, infection control, pressure ulcer avoidance, and medication safety. UHD must improve cleanliness, reduce noise, and improve the aesthetics of its patient care units. Downstate will pursue these changes while charting a path to clinical service stability and growth through a parallel strategic project.

EDUCATIONAL EXCELLENCE

The **IMPACT 2030** educational goals seek to strengthen clinical, practical, and educational experiences for students, expand interprofessional opportunities, and develop innovative learning practices. This work begins in Phase 1 with assessment and planning in three areas: collaboration across Downstate's schools/colleges and with external affiliates and partners, educational resources, and technological requirements for innovative learning.

RESEARCH & DISCOVERY

Downstate has appointed a Senior Vice President for Research to guide and support research activities across the institution. **IMPACT 2030** proposes that the SVPR institute a new leadership structure that convenes to establish research priorities to make Downstate a Center of Excellence in Human Interprofessional Translational Research, from bench to bedside.

DOWNSTATE AND THE COMMUNITY

The strategy's first phase includes completion of a community needs assessment to analyze health needs and assets, and to detail Downstate's plans to work with the communities we serve. It calls for concerted efforts to engage Downstate's alumni/ae beginning with creation of a strategy designed explicitly to strengthen bonds. Also, the strategy calls for Downstate to strengthen its marketing activities to promote the institution's aspirations, accomplishments, and impact.

ORGANIZATIONAL CULTURE AND TRANSFORMATION

IMPACT 2030 proposes to strengthen Downstate's work culture, building on hopes and concerns expressed through the 2017 staff survey and the strategic planning process. Implementation begins with work on two values critical to the success of the entire strategic process: accountability and trust. Accountability enables implementation, and trust is fundamental to accountability. Downstate is also working to compress its hiring process as the first of several projects to improve business processes that serve the entire institution, and it will strengthen leaders' commitment and capacity to support the professional development of its staff.

The implementation process entails a mix of leadership commitment and oversight, planning, broad involvement across Downstate, careful project management, and more, including the following activities and responsibilities:

1. The Executive Management Committee (EMC) and the leadership groups in each school and department adopt and assume responsibility for **IMPACT 2030**.

2. Downstate's Communication & Marketing team shares **IMPACT 2030** with the community, and each school/college and department shares the plans with staff.

3. The Senior Vice President and Chief Administrative Officer (SVP/CAO) identifies project owners for each objective in Phase 1, consulting with the **IMPACT 2030** Steering Committee and the EMC.

4. Project owners prepare a brief written "charge" for each project necessary to complete an objective: a written description of the work that allows others to understand, contribute and commit to it, including the purpose, targets and measures, scope and scale of the work, a summary schedule, a description of methods to be used, the resources required, and people involved in the project.

5. Project owners and team members create detailed workplans for each project.

6. The SVP/CAO establishes project management structures and systems to guide and maintain accountability for **IMPACT 2030** work: a project management team, schedules that integrate and align all the initiatives, dashboards that track process milestones and results, and periodic meetings and retreats to assess progress and adjust plans.

7. The Office of the President and EMC members provide resources and support for implementation including staff time, technical assistance (facilitation, data, research), meeting rooms, consulting support, intervention when necessary to surmount barriers, and other supports.

Clinical Care

Goals, Objectives	Phase 1 Next 6 Months	Phase 2 12+ Months	Phase 3 18+ Months
1. Patient Care Experience			
Improve patient experience scores	✓		
Increase Leapfrog rating	✓		
2. Clinical Programs			
Grow surgical specialities		✓	
Grow general ambulatory/specialty care		✓	
3. Operational Efficiency and Effectiveness			
Achieve expected length of stay	✓		
Reduce readmission rate	✓		
Increase the case-mix index		✓	

Educational Excellence

Goals, Objectives	Phase 1 Next 6 Months	Phase 2 12+ Months	Phase 3 18+ Months
1. Clinical, Practical, and Research Experiences			
New affiliations and partnerships	✓		
Develop high-quality opportunities		✓	
Increase scholarships for underrepresented students			✓
2. Interprofessional Learning			
Identify teaching and learning priorities	✓		
Develop interprofessional curricula		✓	
Implement allocation and dissemination strategies		✓	
3. Academic Program Expansion			
Create innovative strategies	✓		
Create novel programs		✓	
Build a technological infrastructure			✓

Research and Discovery

Goals, Objectives	Phase 1 Next 6 Months	Phase 2 12+ Months	Phase 3 18+ Months
1. Center of Excellence			
Set research priorities		✓	
2. Research Infrastructure			
Develop leadership structure		✓	
Develop a repository of resources		✓	
Expand core research support services		✓	
Increase research funding			✓
3. Culture of Research Support			
Expand research faculty recruitment and diversity			✓
Build research trainee development and support			✓
Establish common research standards	✓		
Build responsive research support processes	✓		

Downstate and the Community

Goals, Objectives	Phase 1 Next 6 Months	Phase 2 12+ Months	Phase 3 18+ Months
1. Community Health Outcomes			
Build community/research partnerships		✓	
Complete a community needs assessment	✓		
Build partnerships with government officials		✓	
Build partnerships with local industry		✓	
2. Communication		✓	
Promote Downstate's work and impact	✓		
3. Alumni/ae Engagement			
Create an alumni/ae engagement strategy	✓		

Organizational Culture and Transformation

Goals, Objectives	Phase 1 Next 6 Months	Phase 2 12+ Months	Phase 3 18+ Months
1. Organizational Culture			
Integrate work culture values	✓		
Use values in hiring, promoting, assessing staff		✓	
2. Process Reform			
Improve processes		✓	✓
3. Faculty, Staff, and Student Development			
Develop leaders who promote professional growth	✓		
Strengthen systems and structures that enable growth		✓	

DOWNSTATE
HEALTH SCIENCES UNIVERSITY

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Health Sciences University

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