

NEW YORK  
**DOWNTOWN**  
HOSPITAL

Member  
NewYork-Presbyterian Healthcare System  
Affiliate: Weill Medical College of Cornell University

**Community Service Plan Summary**

**2012 Update**

## **Mission Statement**

**New York Downtown Hospital is a community teaching hospital primarily serving the people who live or work in Lower Manhattan.**

**New York Downtown Hospital offers services and technology appropriate to a community hospital with emphasis on outreach, emergency and ambulatory services. New York Downtown Hospital achieves access to specialized services for its patients and community through formal affiliation with an academic medical center.**

**As a teaching hospital, New York Downtown Hospital conducts graduate and/or undergraduate educational programs and provides clinical experience for physicians, nurses and other health professionals.**

**As a community hospital, New York Downtown Hospital offers to its patients, medical staff and employees a caring, culturally sensitive environment, which emphasizes the value of patient dignity and employee and professional pride.**

**The programs and services of New York Downtown Hospital will, within the limits of its resources, respond to the needs of its community.**

## **Hospital Service Area**

**New York Downtown Hospital is the primary hospital serving the Lower Manhattan communities of the Financial District; Chinatown; Battery Park City; Little Italy; TriBeCa; City Hall; Police Plaza; the Federal, State and City Courthouse complex; and the rapidly expanding residential community of Lower Manhattan. These neighborhoods currently employ 317,000 people and provide housing for 227,000. The Hospital defines its primary Service Area as the area south of Canal Street. This area, as well as those immediately adjoining, delivers a high number of patients to the Hospital. The Hospital's secondary Service Area extends to Houston Street. The Hospital also continues to serve a significant number of patients from Brooklyn and Queens. The South Street Seaport, the World Trade Center site and the Statue of Liberty attract 5 million tourists annually to the Hospital's Service Area, swelling the Downtown population by an average of almost 14,000 people a day. A significant increase in visitors was realized following the opening of the 9/11 Memorial.**

**Since the closure of St. Vincent's Hospital in April 2010, Downtown Hospital's service area has increased considerably with a number of patients from SoHo, TriBeCa and the Lower West Side now utilizing the Hospital for Emergency, Orthopaedic, Obstetrical and Surgical services.**

## **Goals and Updates for Selected Priorities**

### **Wellness & Prevention Center**

#### **Goals:**

The Hospital will construct and staff a Wellness & Prevention Center, consisting of four integrated components: a women's health center; a breast health center; a cardiovascular health center and a preventive medicine center. The Center will include a discrete entrance for the Women's Health Center.

Following a wellness screening, ongoing care, if needed, can continue with one of New York Downtown Hospital's highly qualified physicians and specialists. The Center's staff can arrange a follow-up for those who have a diagnosis that requires treatment. Patients can also be referred to specialists at the NewYork-Presbyterian Healthcare System, Weill Cornell Medical Center or the Strang Center for Cancer Prevention. This is a significant differentiator from other wellness and screening centers.

The Health Screening Program includes age- and gender-specific risk assessment. Individuals coming for a health screening will be seen by one of the Hospital's many qualified Internal Medicine physicians. A comprehensive history will be taken, a full physical examination will be performed, and appropriate screening protocols for the individual will be ordered.

The emphasis of the Women's Health Center is early detection. In addition to some of the common health care services provided to women today such as cardiology, diabetes, and cancer screenings, diet and nutritional education are also offered. Provided services will address, but not be limited to, the following conditions: cancer detection and follow-up treatment; incontinence; pelvic organ dysfunction; chronic pelvic pain; general gynecological evaluation and menopause management; breast imaging and health; and osteoporosis.

The Cardiovascular Disease Prevention Center will focus on the prevention of heart and vascular disease through early detection, as well as implementation of therapeutic lifestyle changes and risk factor modification. These include a comprehensive history and physical examination, detailed lipid analysis, state-of-the-art 3-dimensional echocardiography, and 64 slice cardiac computed tomography angiography for the early detection of subclinical heart disease. A full range of stress testing modalities, utilizing the most sophisticated equipment, are also available. A Cardiac Rehabilitation Center will also be constructed.

This new 20,000 square foot facility, conveniently located on the first floor of the Hospital, will provide both comprehensive diagnostic and treatment services, many of which are not presently available in the vicinity. By providing the best, evidenced-based, affordable services, the Center will help to lower medical costs while preventing disease and keeping patients healthier.

#### **Update:**

Construction of the Wellness & Prevention Center is complete. The New York State Department of Health conducted an inspection of the facility on September 10, 2010. On May 20, 2011, Hospital President and CEO Jeffrey Menkes was joined by elected representatives and other community and Healthcare System leaders for the formal opening of the Wellness & Prevention Center. Warren Licht, M.D., Chief Medical Officer and Director of the new Center, observed that, since early 2011, patient visits have already increased to 1,600 a month and are soon expected to reach the Center's projected goal of 2,000 a month. Advanced technology, including a new digital mammography and DEXA Scan, and a Cardiac Rehabilitation Center are part of the new Center.

In 2011, the Wellness & Prevention Center exceeded the projected goal of 2,000 patients per month and is currently serving more than 3,300 patients per month for preventive and diagnostic testing.

### **Radiation Oncology Program**

#### **Goals:**

The Hospital anticipated establishing a joint radiation oncology program with the NewYork-Presbyterian Healthcare System to close the gap in the continuum of cancer services available to residents of Lower Manhattan and the surrounding area. The proposed program would have provided linear accelerator services, CT simulation (using a PET/CT scanner) for radiotherapy planning purposes, as well as brachytherapy services and exam rooms, all within the context of a strong outreach and prevention program already in place at Downtown Hospital.

#### **Update:**

The Hospital did not receive anticipated funding from the NYS HEAL 11 Grant. The early diagnosis and treatment of cancer is now under the purview of the Wellness Center. The Hospital continues to pursue funding sources for this needed facility.

### **Colonoscopy Screenings**

#### **Goals:**

Under the direction of its Department of Community Affairs, New York Downtown Hospital engaged in a cooperative effort with the Visiting Nurse Service (VNS) Chinatown NORC, along with the local DOH, the United Hospital Fund and other local partners to initiate a campaign to increase the colonoscopy screening rate within the Lower Manhattan Asian community.

Steps to achieve a higher colonoscopy screening rate included:

A language-concordant "navigator," a community health worker trained to identify and address patient-reported barriers to CRC screening, and

Tailored interventions to include:

Analysis of obstacles through surveys

Patient education to address obstacles through health workshops  
Procedure scheduling assistance  
Translation and explanation of bowel preparation  
Assistance with transportation  
Assistance with insurance coverage, and  
Provider/PCP grand rounds and conferences

**Update:**

The funding for the colonoscopy navigator program ended in August 2010. In all, 167 individuals were assisted and 12 individuals went for diagnostic colonoscopies. Two patients had adenomas; but there was no evidence of cancer.

Since the conclusion of this funded program, the Hospital has remained a part of the DOH-Colon Task Committee, with two members of Hospital staff serving as Committee advisors. The Committee meets four times a year and arranges health related presentations and workshops in the community. During Colon Health Awareness month (March 2011), the Hospital partnered with the Colon Task Committee and DOH to conduct three workshops in Manhattan (at Americare, the Salvation Army, and the Chinese Consolidated Benevolent Association). The Hospital's Chinese Community Partnership for Health (CCPH) continues to provide free hotline service to assist the general public with their colonoscopy scheduling. In 2012, the Hospital partnered with the American Cancer Society and the Chinatown NNORC to conduct a colonoscopy workshop for the Chinese Consolidated Benevolent Association (CCBA) at which Vivian Huang, M.D. presented. The Hospital, together with the Chinatown NNORC, sponsored another workshop for CCBA, featuring Daniel Hunt, M.D., who addressed the benefits of early detection of colon cancer, as well as preventive and mitigating measures like diet and exercise.

## **Emergency Preparedness Services Enhancement**

**Goals:**

- The Hospital will conduct ongoing training of the staff in Emergency Preparedness and Awareness. This will include drills.
- The Emergency Preparedness Symposium will be an on-going emergency preparedness initiative of the Hospital. Since 2003, the Hospital has brought together emergency preparedness specialists from all over the world to share their expertise to better prepare health care professionals, emergency response personnel, and community leaders for future emergencies. The next International Emergency Preparedness Symposium will be conducted during the fall of 2011. We will reinvigorate the Symposium for the tenth anniversary observance of September 11, 2001.

As the only hospital in Lower Manhattan, New York Downtown Hospital was concerned that the proposed 30% reduction in the number of EMS stations would adversely impact the

safety of Lower Manhattan. Therefore, the Hospital developed a plan to respond to this prospect. New York Downtown Hospital would expand its services to include three permanent Basic Life Support (BLS) ambulance units.

FDNY-EMS did not expand our service this year. Our proposal will be resubmitted for fiscal year 2011.

Time clocks were acquired to stamp triage forms to indicate arrival times for EMS units. This study was completed in November 2011.

As of January 2010, New York Downtown Hospital's Emergency Medical Service Department has been reviewing 100% of emergency runs to improve patient outcomes. When inappropriate treatment modalities are discovered, the crew is remediated and corrective actions are implemented. This initiative has improved patient outcomes and helped to attain our goal of improved patient care.

The Hospital has conducted numerous "in services" on emergency preparedness. Administrators, Nursing staff, Medical residents, hospital staff and community CERTS teams were trained on the use of Command Center, Incident Command Structure, Radio usage and our decontamination showers. In-house disaster drills were conducted and an external disaster drill was scheduled for the fall 2011.

**Update:**

As of January 2011, the Hospital's Emergency Medical Service Department initiated a Critical Care Transport team and Service. This service was implemented to transfer critical patients to tertiary centers expeditiously. The acquisition of this unit was made possible by BNY and The George Link, Jr. Foundation.

The Emergency Medical Services Department now provides a 24-hour, 7-day-a-week Basic Life support unit, 04D. This unit was approved by the FDNY-EMS to assist with 911 calls in our community catchment area.

As of June 2011 we have been running another 24-hour, 7-day-a-week Basic Life Support unit, 81G, as a summer enhancement unit. Hospital President, Jeffrey Menkes, has formally requested permission to run this unit on a permanent basis.

The Hospital will continue to examine turnaround times in the Emergency Department, measuring the time that ambulance units are with a triage nurse. This time study will help determine ways to reduce the amount of time units spend in the Hospital and enable them to return to service more expeditiously. This will enhance the provision of emergency services in our community.

The Emergency Preparedness Symposium for 2011 examined the topic: Ten Years Later – What Have We Learned. Presenters included a physician involved in the Joplin tornado

response and a nurse presently serving in the Rhode Island House of Representatives who addressed the R. I. nightclub fire. They were complemented by local disaster response officials from the FDNY Center for Terrorism, FEMA and the NYC Office of Emergency Management. In 2012, the Symposium will consider Integrated Emergency Communication Systems, exploring current systems and needed enhancements.

## **Impact of Hospital's Collaborative Plan**

One unanticipated result of the Wellness initiative was the expansion of the Hospital's Speakers' Bureau, with an increasing number of physicians being invited to address health and wellness concerns at local corporations and civic associations. Utilizing PowerPoint presentations, with time for discussion and Q&A, the presentations were well received, with many audiences asking for additional and return visits.

The Hospital expanded its facility into an adjacent building (156 William Street) to provide enlarged space for its faculty practice. It is anticipated that Weill Cornell Medical College will occupy an adjacent floor in this building to bring additional clinicians to the Downtown area to meet increasing demands.

The joint program with VNS et al., which engaged the navigator for the colonoscopy screening initiative, has been completed.

## **New Surveys**

The Hospital continues to analyze pertinent data from its Patient Satisfaction Surveys, the New York State Prevention Agenda and the New York City Department of Health and Mental Hygiene. The Hospital continues to be educated about community health needs through its Community Advisory Board and through local elected officials and government organizations. The Hospital is also informed by the community planning initiatives of the NewYork-Presbyterian Healthcare System, with which the Hospital is engaged in a growing relationship.

## **Additional Priorities**

Patients displaced by the closure of St. Vincent's Hospital, are receiving ambulance, emergency, surgical, obstetrical and other healthcare services through New York Downtown Hospital. This has necessitated the acquisition of additional ambulances, the construction of expanded OR and OR intake facilities, the modernization and expansion of the nursery and the neonatal intensive care unit, the creation of a colo-rectal health unit, etc.

The Hospital also opened services offsite at 40 Worth Street (providing Obstetric and Primary healthcare services in cooperation with Weill Cornell Medical College) and at 156 William Street so that more inpatients could be accommodated on the Hospital's fourth floor.

## **Financial Assistance**

**The Hospital is constantly engaged in identifying patients who are eligible for assistance and ensuring that eligible individuals are properly guided through the application process. There is a persistent challenge in educating about the availability of benefits.**

**We are aware that the Hospital will incur additional challenges with increased numbers of families on public assistance and with the Affordable Care Act going into effect. The Hospital has a trained team that guides patients through the application process and assists them with collecting the data required to support their application for financial assistance.**

**The Hospital agreed to participate in two New York Times' articles to expose the plight of hospitalized undocumented immigrants. The articles were featured on page one of the Metropolitan Section in September 2011 and January 2012.**

Printed copies of this report are available upon request.