

**The Rockefeller University Hospital
Community Service Plan
Comprehensive 3-Year Plan 2014-2016**

Introduction

The Rockefeller University Hospital was the first medical institution in this country devoted solely to clinical research. Its mission, to serve as a clinical site for the conduct of medical research and to provide a place to educate young physicians in the laboratory sciences relevant to clinical investigation, remains essentially unchanged since its founding in 1910. All patients are voluntary research subjects who are not charged for their participation or care. These volunteer subjects are recruited both nationally and locally with a commitment to ensuring representation of women, children and ethnic and racial minorities.

1. Mission Statement

To promote health and enhance the quality of life by conducting clinical research and providing quality patient care in an environment where science, medical practice and learning blend to advance medical scholarship and alleviate human suffering.

2. Definition and brief description of the community served

A. Hospital Service Area

The Rockefeller University Hospital is located on the Upper East Side of Manhattan in Community District 8. The Rockefeller University Hospital is unusual in that it is solely committed to conducting clinical research. As a result, our community/service area is defined as the New York Metropolitan Area. The Rockefeller University Hospital has provided an array of clinical research and patient care services since it's founding in 1910. Research participants are culled from all over New York City as well as through collaborations with neighboring hospitals, Universities, and clinics. As a result, our enrolled research participant demographics follow those of New York City overall. In calendar year 2012 18% of research participants identified as Hispanic, 25% identified as Black or African-American and 49% identified as white (RUH subject rate and ethnicity report 2012), which mirrors the geographic makeup of New York City (44% white, 25% Black or African-American, and 28% Hispanic) (www.census.gov 2010).

The Rockefeller University Hospital is owned by the University and is licensed for 40 inpatient beds for clinical research. The Hospital provides researchers with an opportunity to conduct clinical studies, and offers both normal volunteers and people with diseases under study the opportunity to stay in the hospital and help to contribute to important advances in science. The Hospital has an inpatient unit as well as an outpatient center where prospective patients are screened and many outpatient studies are conducted.

Medical services, surgical services, emergency care, specialized care and ambulatory care are provided by New York Presbyterian Hospital. In addition cancer care, education and research is provided by Memorial Sloan-Kettering Cancer Center. Both institutions are located adjacent to Rockefeller University Hospital. The Rockefeller University Hospital does not provide medical care for research participants enrolled in a study outside of the care required by the study. Should a research participant become too ill to participate in the study they are transferred to New York Presbyterian Hospital since they are equipped to administer intensive acute care.

The Rockefeller University Hospital is staffed 24 hours a day with professional nurses and has nutritional research services, social work, and a radiology suite as well as its own research pharmacy. The staff Hospitalist and on-call physicians provide additional medical support to the clinical research teams. Social service needs, primary and chronic disease needs, health issues of uninsured persons, low-income persons, and minority groups are assessed by an on-site social

worker. The social worker then refers research participants based on needs to local institutions that can provide resources.

In 2012 The Rockefeller University Hospital had approximately 804 inpatient days (102 admissions) and more than 3,900 outpatient visits. Nine research studies were conducted in the hospital's inpatient unit and nearly 70 studies were conducted in the outpatient research center.

B. Description of Service Area and Community Served

The Rockefeller University Hospital community served/service area is determined based on research being conducted. Principal Investigators identify a medical research area of interest and submit a protocol for review and approval by the institutional review board (IRB). If and when the protocol is approved, the recruitment office works with the investigator to develop and submit advertisements to local newspapers, magazines, and online providers. Identification of sites to advertise is determined by current trends in readership among local newspapers, magazines, and visits to particular websites such as Craigslist's and Facebook. The demographics of research participants who have voluntarily joined our recruitment repository to be notified about future studies is similar to that of the demographic of New York City, 20% identified as Hispanic, 39% Black/African-American and 35% identified as white (RUH recruitment repository data 2013).

C. Health needs of the community

The New York Metropolitan area has an array of health needs based on geographic location and socioeconomic status. According to the New York City Department of Health and Mental Hygiene 22% of New York City adults considered themselves to be in fair or poor health (nyc.gov Epi Data Brief). Chronic diseases such as diabetes, hypertension and obesity continue to severely affect the community we serve. Nearly 650,000 adult New Yorkers reported having diabetes in 2011, an increase of approximately 200,00 adults since 2002, and more than 57 percent of New York City residents are identified as overweight or obese (nyc.gov community health survey: available www.nyc.gov/health/survey). More than 25 percent of research participants are uninsured and do not have a primary care physician to monitor their chronic diseases. Participants tend to seek care at the emergency room with no follow-up care to track disease progression. Although The Rockefeller University Hospital does not provide direct care to research participants outside of the research protocol, the health of our participants is our highest priority and so, in addition to providing all of the care that we do provide free of charge, we provide resources and services to insure access to support services and medical facilities outside of our Hospital to meet the health needs of our participant community. To that end, The Rockefeller University Hospital has a social worker on staff to conduct one-on-one consultations with, and assessments of, research participants to determine their needs and identify outside resources that can further assist them in receiving the care they require. As part of this service, The Rockefeller University Hospital maintains strong relationship with organizations in the New York Metropolitan area that can provide these services in order to expedite referrals.

Community Engagement/Public Participation

D. Participants

The Rockefeller University public participation and involvement process is designed to give the public sufficient opportunities for early and continuing participation in hospital projects, plans and decisions and to provide full access to key decisions. The Rockefeller University Hospital is committed to serving The Rockefeller University research needs and recognizes the importance of including the local neighboring community as well as New York Metropolitan Area as a whole in this process. The public is encouraged to participate through the following mechanisms: circulation of newsletters, pamphlets, and brochures; review of hospital website information; the hospital's patient satisfaction survey; and participation in patient support groups, focus groups, public information meetings, hearings, and open houses as they occur. Advisory committees that include

community representative are convened as necessary. The Hospital staff participates in community events such as health fairs and street fairs, and attends community and neighborhood board meetings.

Community health needs in New York City are determined by the New York City Department of Health and Mental Hygiene, by local community planning boards, community boards, hospitals, community based organizations, local businesses, faith based organizations, schools, and individuals. Rockefeller University Hospital reviews all prevention agenda priorities defined by these various institutions and determines which priority areas they can support based on current research conducted. This bidirectional method of engagement allows researchers the opportunity to learn about community priorities, align research with patient needs, foster collaborations across stakeholders to improve health and accelerate translation of research findings into practices that can be used to improve health.

The Rockefeller University Hospital also receives support and participation on its public health priorities and Community Service Plan from The Rockefeller University Center for Clinical and Translational Science (RUCCTS) Advisory Committee on Community Engagement and Recruitment (ACCER). The ACCER membership includes representatives from local Practice Based Research Networks (PBRNs), local institutions of higher education as well as hospital administration. The ACCER coordinates community engagement activities for the RUCCTS as well as for the hospital, conducts strategic planning initiatives to identify successes, challenges and barriers focused on community engagement and recruitment. ACCER members are also members of local and national public health organizations such as the Public Health Association of New York City (PHANYC), American Public Health Association (APHA), Health Care Leaders of New York (HCLNY), Greater New York Hospital Association (GNYHA), and the City University of New York (CUNY). Members of ACCER visited the Wadsworth Laboratories of the NYS Department of Health in Albany in 2013 to discuss opportunities for collaborations on public health challenges.

a. Outcomes

The Rockefeller University Hospital also solicits input from the community through surveys. In 2008 the ACCER conducted a survey on the streets of New York to assess the local communities knowledge of the Rockefeller University Hospital. Of the 246 respondents surveyed, about 50 percent did not know Rockefeller University had a hospital on campus, none had negative feelings about Rockefeller, and more than 50 percent would prefer to hear about research opportunities via on-line venues. The survey results are currently being used to increase the visibility of The Rockefeller University Hospital in the community. Since 2008 various initiatives have been conducted to increase the hospital's visibility in the community. An awning was placed over the FDR drive, a new sign was placed in front of the University for identification purposes, and the external community engagement website was updated <http://www.rockefeller.edu/ccts/communityengagement> We are in the process of planning a follow-up survey to our 2008 survey to assess if visibility to the community has changed.

Hospital Administration staff also participated in meetings, conferences and executive briefings throughout the year focused on the Prevention Agenda Priorities Toward a Healthy State and strategies hospitals can adopt to address public health priorities over the next three years.

C. Service to the Community

The Hospital provides support to the community it serves as befits its medical expertise and its facilities. For example, the Hospital participates in University committees, provides back up for the activities of the Occupational Health Service, maintains a campus-wide emergency medical response team, and opens its facility for campus health-screening programs conducted by the Occupational

Health Service. It also participates in various public education activities including the National Psoriasis Foundations annual walk held in May, and provides public education on obesity and diabetes at local health fairs.

E. Assessment of Public Health Priorities

a. Criteria of Public Health Priorities/Priority Setting:

The Rockefeller University Hospital prevention agenda priorities were selected based on data from the New York City Department of Health and Mental Hygiene’s Take Care New York 2016 policy agenda to improve the health of all New Yorkers. The policy agenda identifies 10 key areas of intervention for New Yorkers. Current research being conducted at The Rockefeller University Hospital accords with the prevention priorities identified by the New York State Department of Health and the New York City Department of Health and Mental Hygiene. In particular, after reviewing the priority areas The Rockefeller University Hospital identified one priority area as the focus of our community service plan during the next 3 years, “Reduce Obesity in Children and Adults”.

b. Prevention Agenda Priority

Prevent Chronic Disease Action Plan

Intervention Focus Area 1: Reduce Obesity in Children and Adults- According to the New York City Department of Health and Mental Hygiene 57% of adults and 39% of children are overweight or obese (Rockefeller University Hospital Data Source: NYC Department of Health and Mental Hygiene, <http://www.nyc.gov/html/doh/downloads/pdf/chi/chi28-suppl5.pdf>). Investigators at The Rockefeller University Hospital are conducting studies on the natural history of obesity as well as insulin resistance and the metabolic syndrome to determine optimal treatment for patients with obesity. Part of each study includes nutritional assessment and guidance provided by licensed research dietician. In addition, studies are assessing the impact of losing 10% of body weight on the inflammation associated with obesity.

c. Status of Priorities

The prevention agenda priority selected above reflects the priority set by the New York City Department of Health and Mental Hygiene’s Take Care New York 2016 policy for a healthier New York City. The Rockefeller University supports the City’s agenda for a Healthy New York and has implemented programs internally to address the priority identified above. To implement the priority, Rockefeller University will work with the hospital and campus community to identify ways to expand community programs focused on the prevention agenda priority area described above.

F. Three-Year Plan of Action/Implementation Plan

Public Health Priority Area	Person(s) Responsible for Implementation	Goal(s)	Objective(s)	Measure of Success	Strategies
Physical Activity/Nutrition	The Rockefeller University Hospital Administration	Provide Physical Activity and Nutrition education information and programs for the community served by The Rockefeller University Hospital	By the end of 2017 provide information on Physical Activity and Nutrition in 100% of new patient information packets By the end of 2017 80% of information received on Physical Activity and Nutrition will be displayed in the outpatient research	# Of packets distributed # Of posters posted	Support the placement of DOHMH ads promoting healthy eating and active living in the hospital Post information on the hospital website about the importance of

			center and the inpatient unit of the hospital.		physical fitness and proper nutrition
--	--	--	--	--	---------------------------------------

G. Dissemination of the Report to the Public

The Rockefeller University Hospital Community Service Plan is available on our website www.rucares.org. It is also available by mail upon request. Our Community Service Plan is shared with local organizations as requested and is publicized annually through our eNewsletter. Community members and leaders can provide feedback to The Rockefeller University Hospital’s community programs by contacting Maija Williams, MPH Administrative Director at 212 327-8501 or by e-mail at mwilliams@rockefeller.edu.

H. Ongoing Engagement

The Rockefeller University will continue to engage local partners over the three years of the Community Service plan by attending local community meetings, attending local events sponsored by the state and local health departments, and providing programming focused on the public health priority area identified above. In addition we will design evaluation and monitoring methodologies to ensure progress towards meeting the goals and insure effective and efficient programming.

I. Financial Aid Program

The Hospital conducts research funded primarily through a cooperative agreement with the U.S. Department of Health and Human Services (DHHS), National Center for Advancing Translational Sciences (NCATS) of the National Institutes of Health. Approximately 50% of the Hospital’s operations are funded by this agreement. The balance of the operating costs is funded primarily by a subsidy from The Rockefeller University. All patients are voluntary research subjects who are not charged for their participation in clinical research studies at the Rockefeller University Hospital. In the process of performing patient-oriented research, the need for medically-indicated and thus potentially reimbursable care could arise; however, the hospital does not bill patients or their insurance companies for such service. The Rockefeller University Hospital provides access to social services to help patients access care externally should the need arise. All patients are aware when they agree to participate in a research protocol that there are no fees for services rendered.

Financial Statement –Financial Statement will be made available upon request.

J. Emergency Medical Care

Trained physicians and registered nurses provide emergency medical care to research participants at the Rockefeller University Hospital around the clock. A licensed MD is on call at all times to respond immediately to clinical emergencies. Every MD on call and all clinical research nurses are trained in basic and advanced life support (BLS and ACLS). An emergency cart and defibrillator are located on each of two patient care units to support the rapid delivery of emergency care.

The hospitalist oversees the care of all inpatients and responds to changes in the clinical status of any research participant on the inpatient or outpatient unit. If a research participant has a clinical emergency that exceeds the capability of the hospital to provide appropriate care, the research participant is transferred immediately to the emergency room of NYPH or to the urgent care center of MSKCC. The transferring physician and nurse prepare transfer documents and make direct phone contact with the clinicians at the receiving hospital before the transfer is made. The research participant is transported by emergency medical service ambulance. These transfers are conducted

under the terms of transfer agreements between the Rockefeller University Hospital and the receiving hospital.

K. Changes Impacting Community Health/Provision of Charity Care/Access to Services

The Rockefeller University Hospital, like other healthcare organizations, faces many financial challenges that may impact community initiatives and the services we provide. Rockefeller continues to work within the confines of our institutional commitment, private and government support through grants and gifts, and our commitment to research, to meet our obligations. In particular, The Rockefeller University does not bill for patient-oriented care as part of research conducted at our facility. The Rockefeller University Hospital, however, is affected by the current economic environment and has sustained budget cuts that impact the availability of resources for new initiatives. The hospital has learned how to do more with less and is looking at ways of cost sharing with investigators who receive external funding for their research projects.


In particular, even in the wake of the economic challenges described above, The Rockefeller University Hospital will continue to support our commitment to provide physical Activity and Nutrition education information and programs for the community served by The Rockefeller University Hospital.

L. Board Approval:

The Community Service Plan was approved by The Rockefeller University Hospital Committee the governing board for our institution on October 16, 2013.

Community Service Plan/Community Health Needs Assessment


APPROVED:



James Krueger, MD PhD
Chief Executive Officer



Date



Edward J. Benz, Jr. MD
Chair, Hospital Committee



Date