

**BROOKLYN COMMUNITY BOARD 6
YOUTH/HUMAN SERVICES/EDUCATION COMMITTEE
JANUARY 28, 2015**

PRESENT:

K. ENO	A. FAILOA	R. FREEMAN
L. HILL	T. JACKSON	J. LI
D. RAMOS	A. SCHEFRIN	B. SOLOTAIRE

EXCUSED:

M. SCOTT	R. UNDERWOOD
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ABSENT:

A. ANANTHARAMAN	P. BELLENBAUM	F. BROWN
E. CAUSIL-RODRIGUEZ	R. CERVONE	E. FELDER
F. JEAN	C. PETERSEN	M. SCOTT
S. TURET	R. UNDERWOOD	

GUESTS:

K. BERNIER – REP. FROM NYU LANGONE		
G. FALKENT – REP. FROM NYU LANGONE		
R. FEMIG – REP. FROM NYU LANGONE		
J. SMALLING – REP. FROM NYU LANGONE		
L. WATKINS – REP. FROM NYU LANGONE		
L. FELTINGTON	S. MUNSON	D. HOFFMAN

*****MINUTES*****

Presentation and discussion with representatives for NYU-Cobble Hill regarding the healthcare services to be provided at the former Long Island College Hospital site at Atlantic Avenue and Hicks Street.

NYU Langone presentation on new medical center in Cobble Hill. Gary Larkin, MD, MPH Sr. Vice President-Network Integration presented:

- NYU and Medical Center are a hospital and a medical school
- Vision is World class patients centered integrated Academic medical center
- Differentiation in marketplace
- Clinical excellence
- Superior patient experience
- State-of-the-art facilities
- Manage population Health
- With the best information technology doctors can help the community with managing the patients
- NYU gets most of their patients from the Brooklyn area
- Most patients live in Brooklyn

- 11 NYU sites currently in Brooklyn connected to the information systems
- Lutheran is their partner and the Services will be integrated
- Enhanced access to NYU facilities and physicians
- Specialists are coming to Brooklyn first was pediatric specialty care
- Brooklyn represents 27% patient base
- Plan to use the existing Lutheran network and expand
- Want robust ambulatory care
- Clinical Cancer center
- Become a leader in dental care
- Plan for Cobble Hill
 - Freestanding Emergency NYU Department
 - Multi-specialty practices
 - Medical imaging
 - Satellite of NYU Cancer center
 - Investing \$180 million investment over 4 years

Rob Femia, MD, MBA -Vice Chair of Emergency Department

- Full service Emergency department
 - Started on Halloween
 - All board certified Ed physician's
 - 24/7 ct scan, x rays, ultrasound, labs
 - Pharmacy
 - 45-50 patients daily- volume doubled
 - 8-10 ambulances daily
 - 5-6 patients require hospitalization
 - 18% pediatric patients

Patient experience

- START triage
- Bedside registration
- Rapid nursing assessment and rapid physician contact
- Patient experience scores and comments

Jackie Smalling, RN:

- Worked in Brooklyn since 1986 at LICH
- Has been enriched working with NYU and getting to see the patients who used to come to the hospital in the neighborhood
- Will be a familiar face for the patients in the neighborhood

Difference between urgent care, doctors' office and emergency room

- Can do anything that can be done in an emergency room
- The equipment and procedures are the same
- Have the ability to get you where you need to get (to the hospital) quickly
- Have seen a variety of diagnoses in Cobble Hill already

Heart attack and stroke and severe infections

- Are all time-sensitive
- With a stroke a rapid diagnosis is key to saving brain cells
- Cobble Hill Emergency Department has the medication that is needed to help with the stroke
- Have a telemedicine ability to get specialists in stroke who can quickly diagnose the patient
- Shrink the up-front time and provide timely interventions to these types of situations
- Regular practice is that nurses bring patients right back and not left in the waiting room
- Heart attacks-best practice is to get interventions such as angioplasty or stent placement
- NYU start cardiac medications while transferring to a PCI (pulmonary cardiac intervention) center
- Have 2 ambulances on site at all times for transfers after treatment
 - Partners always have ambulances available even when they leave for transfers

Early recognition is key for best outcomes

- No waiting rooms
- Seen by a physician immediately
- Transfer agreements and systems already in place with Brooklyn hospitals and NYULMC

Transfer process to hospital of patient choice

- Patients needing hospital admissions are treated, stabilized and then transferred
- Goal is to maintain the patients relationship with their pcp and to allow patients needing hospital admission to choose the hospital of their choice
- Understanding the FDNY ambulance receiving designation process
 - FDNY has been told that the class of patients should be general adults and pediatrics
 - In the process of changing distinction
- Plan for new building will take 3 1/2-4 years to build
 - Emergency, multi-specialty clinic, ambulatory and office space, cancer center, mechanical penthouse
- State-of-the-art ambulatory practice in a single location

Questions

- With new freestanding department how do they plan to handle larger volume?
 - As it gets bigger they will add more doctors and nurses
 - Way to make ER bigger is to use out of box thinking to get them through faster
 - Planned in the process where they will be in 6 months and a year
 - See 180 patients in a day in NYC, time to wait for a Doctor is 6 minutes. It is less at Cobble Hill right now and does not want it to go up
- What is needed from the community?
 - Tomorrow presenting to the State
 - Want community to try their services
 - If need emergency care, thinks it provides as good as any place in the city so try it out
 - Feedback is invaluable to them
 - Need forums to talk about what they are doing over time
 - 4 year project that will develop over time

Access to Doctors for people who are on Medicaid to make sure doctors are seeing range of patients

- With more and more patients in Brooklyn, Medicaid becomes a larger safety net
- Patients from Lutheran has a large Medicaid population
 - They will have access to NYU
 - No insurance patients is a generous policy and expands access for Medicaid patients
- Want to bring same practices as they use in Manhattan
 - Want to serve the populations that are underserved
 - Department physicians, residents spend time at NYU and at Bellevue
- Have people who help to make sure patients have an appointment scheduled before they leave the hospital
- Have people who work to get them on financial services
- Have follow up program to see how they are feeling and if they got an appointment now they can help with getting appointments
- Have to increase access being in Brooklyn

Who else have they been meeting with and how do they plan to continue community relations?

- Multiple departments of NYU have reached out are meeting with community and neighborhood associations give a tour of the Emergency Department
- Met with Cobble Hill health center to start a relationship of who to bridge build with and the groups to focus on
- Have a full time medical director for the Cobble Hill Ed
 - Reached out to the community and the physicians in the community. What they perceive the need is
 - Open forum community meetings
 - The Wycoff houses and other tenant associations
 - Ran a flu vaccine program and other community outreach activities for the community
- Plan to reach out and have recurrent meetings and open dialogue
- Want a clear distinction between an urgent care center and an emergency room. This is an emergency room

Capacity for the Cobble Hill Ed

- Have the ability to see way over 100 patients a day
- Getting the word out that Methodist isn't the only hospital in the area
- Would like to receive the status from the state to be able to take critical care ambulances because it is an access to care issue
 - Want to take care of the sickest of the sick
 - Should see decreases volume when those things occur
 - Want people to understand what services are available
- Differences between urgent care and the Ed. Tough question whether to go to an Ed or the urgent care area
 - Will treat whatever condition you have
 - Are the epicenter of social problems, financial problems
 - Want to provide more care and can impact your life get you on a better path to wellness
- See patients with transitional issues such as having memory issues, changes to their home, needs for therapists

Will the facility have office space for pcps?

- Plan is to have practices coming into the network around Cobble Hill want to build primary care practice to bring in the community doctors

Would like to have them participate in the job fair in the Spring and focus on community health

Will be a brand new facility

Building will be on Atlantic and Hicks

Will have a driveway on Hicks with ambulances

2 entrances for Ed and ambulatory care

Want the bus stop to stay in front of building

Won't be interfering with access and egress

Expect developer to demolish the building and they will be between Pacific and Atlantic

State gave them the building and the Ed will move to that building. There will be no lapse in service.

SPRING EVENT DISCUSSION

- Instead of a job fair a youth opportunity fair on a Saturday
- All day long
- Employment focused things like employer's, chamber of commerce
- Civic engagement
- Voting opportunities
- Resume helpers
- Non-profit programs
- Groups to volunteer
- Workshops, key note speakers
- Venues in Red Hook Miccio Center, St. Francis, John Jay, International School on Baltic
- Partner with some local groups
 - BRIC
 - RHI
 - Good Shephard
- Tasks
 - Identifying venue
 - Marketing team on the focus and connecting with schools and CECs or PTAs
 - Identify groups who are participating
- One idea was to invite speakers to facilitate different workshops-so someone from Google could talk about the importance of networking and then stay after the workshop to give the students an opportunity to speak with them one-on-one
- Things to focus on for the event
 - How to network
 - Resume building/interview skills
 - Give students access to opportunities-either immediate (the upcoming summer) or in the future (how to prepare for a career in ___ and ___)
- Dates to keep in mind: Saturday, **May 16**
- Need to confirm date and venue before we start inviting speakers/community leaders, etc.

