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COMMITTEE ON HIGHER EDUCATION

CITY COUNCIL
CITY OF NEW YORK

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TRANSCRIPT OF THE MINUTES

Of the

COMMITTEE ON HIGHER EDUCATION

January 17, 2019
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HELD AT: 250 Broadway-Committee Rm, 14th Fl.

B E F O R E: INEZ D. BARRON
Chairperson

COUNCIL MEMBERS:
LAURIE A CUMBO
ROBERT F HOLDEN
BEN KALLOS
YDANIS A. RODRIGUEZ

COMMITTEE ON HIGHER EDUCATION

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A P P E A R A N C E S (CONTINUED)

Jane Bowers
Interim Vice Chancellor and University of the
City University of New York, CUNY

Vincent Boudreau
President of the City College of CUNY

Marcia Keizs
President of York College

Jennifer Raab
President of Hunter College

John Kotowski
Director, City Relations for the Central Office

Jo Wiederhorn
President and CEO of the Associated Medical
Schools of New York

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[gavel]

CHAIRPERSON BARRON: Good morning. Good

morning, welcome. I am Council Member Inez Barron and

I have the pleasure, the distinction and the honor of

serving as the Chair of the Committee on Higher

Education and before we start today's hearing, I just

want to share a quote with you. As you know this past

January 15th would have been Martin Luther King's 90th

birthday had he lived so I want to share a quote with

you from Doctor Martin Luther King. You may be 38

years old as I happen to be and one day some great

opportunity stands before you and calls you to stand

up for some great principle, some great issue, some

great cause and you refuse to do it because you are

afraid, you refuse to do it because you want to live

longer, you are afraid that you will lose your job or

you are afraid that you will be criticized or that

you will lose your popularity or you're afraid that

somebody will stab you or shoot you or bomb your

house so you refuse to take a stand, well you may go

on and live until you are 90 but you're just as dead

at 38 as you would be at 90 and the sensation of

breathing in your life is but the belated

announcement of an earlier depart... death of the

spirit, Doctor Martin Luther King Junior. Today we are holding an oversight hearing on pursuing a career in health care at the city university of New York. During the last legislative session, the committee held an oversight hearing on the status of nursing programs at CUNY in 2016 and an oversight hearing on the CUNY School of Medicine in 2017. There is a continuing shortage of skilled health care workers in the country and projections on supply versus demand only worsen each year. According to the US census, in 2030 when all baby boomers are over the age of 65 older people will outnumber children for the first time in US history. As the population ages and lives longer accruing often complex conditions some of which were once terminal aren't and are now treatable for long term, the need for health care services will increase. Between the aging population and the affordable care act which is now being... bringing essential health care to millions of previously uninsured Americans there is a great need for more family practitioners, general internists, pediatricians and obstetricians, gynecologists as well as trained home health aides, nursing assistants, medical and clinical lab technologists

and medical and lab technicians in many communities across the country, state and city. In New York State the health care sector which does not include health care workers employed outside the sector such as nurses working at educational settings or pharmacists working in settings such as retail pharmacies or supermarkets, accounted for 12.3 percent of total employment in 2016 representing a nearly 30 percent increase or an additional 260,000 jobs between 2000 and 2016. During that same period employment home health care increased by 183 percent representing the largest increase in employment while employment in ambulatory care settings increased by 37 percent. In New York City employment in the health care sector grew by 37 percent between 2000 and 2016 while there was a 13 percent increase in employment. During that same period within the health care sector employment increased by more than 35 percent in home health care, one percent in ambulatory care. While the state as a whole is not currently suffering from a shortage in the number of many types of skilled medical providers, they are poorly distributed limiting access to care for underserved populations. As of December 2017, more than 5.8 million individuals

resided in primary care health care professional shortage areas, 2.8 million in dental care and more than 4.4 million in mental health. CUNY has been working to meet the challenges facing the health care industry which if not addressed in a holistic manner threatens to become a crisis in New York City. But there is one critical facet of this challenge that I must address and that is the blatant lack... the, the overwhelming lack of people of color in the medical professions particularly black doctors. According to the most recent data from the American Association of Medical Colleges only 5.7 percent of medical school's graduates were black or African Americans despite constituting some 13.5 percent of our nation's population. And according to the Center for Disease Control, blacks are twice as likely to die from heart disease as whites, blacks are also significantly more likely than whites to suffer from many other conditions such as high blood pressure, diabetes, stroke and other diseases that are more common at much older ages in whites than blacks and yes, blacks are more likely to die from all health causes at earlier ages than whites. This is profoundly disturbing. There are many reasons why this may be

the case including discrimination, lack of access to primary medical care or lack of insurance among others but research is beginning to reveal another reason why this may be the case and that is the lack of black doctors. In 2008 a study by the National Bureau of Economics Research showed that black male patients were more likely to agree to preventative health measures after seeing a black doctor than seeing a white or Asian doctor. The study highlighted that the way in which white and Asian doctors interact with their black patients played an important role in these outcomes. For instance, white and Asian doctors said similar clinical things to their patients but tended to stand closer to their white patients, made more eye contact and touched them more frequently, all things that communicate empathy and concern. Black doctors meanwhile interacted empathetically with their black patients while using similar non-verbal cues to communicate empathy and the importance of preventative follow up care. In addition, a black patient who sees a physician of their race may be less guarded, more comfortable and more relieved even which further underscores the extent to which they may follow

through with additional treatment and provider visits. Indeed, as one news article in the study suggested the secret of keeping black men healthy may in fact be black doctors. CUNY has long been a champion of race and ethnic diversity among its student body and I want to applaud the important contributions it is making to address the underrepresentation of people of color in health care careers. Of course, I truly believe that this contribution will help save many black lives as well as the lives of other underrepresented people of color. But I believe that we can do better, indeed we must do better because our lives are at stake and these lives matter. At this hearing the committee is seeking an updated overview of CUNY's nursing programs and the school of medicine as well as an overview of all health care programs at CUNY and how the university is preparing the workforce to meet the growing demands of the health care sector and occupations in health care outside of the sector. In particular I'm, I'm interested in learning about outreach and recruitment efforts of health care programs at CUNY especially as they relate to the expansion of access to medical careers among

underrepresented minorities. Additionally, we would like to hear about how CUNY is increasing necessary health care services in underserved areas of the city. I'd like to recognize the members of the Committee who are present; we have Council Member Kallos, Council Member Rodriguez and Council Member Holden. I'd also like to thank Joy Simmons, my Chief of Staff and Ndigo Washington, my CUNY Liaison and Director of Legislation, Chloe Rivera, the Community... the Committee's Policy Analyst and Paul Sinegal, Counsel to the Committee and Eisha Wright, the Finance Division Unit Head who is temporarily standing in as the Committee's Finance Analyst. And at this point I'm going to have the Counsel call the first panel and ask them to take the oath. We have Jane Bowers, Interim Executive Vice Chancellor of the University Provost of CUNY; we have Vincent Boudreau, the President of the City College of CUNY; we have President Marcia Keizs from New York College of CUNY and Jennifer Raab the President from Hunter College, class of January 1967 majored in physiology, minored in psychology and the Counsel will administer the oath.

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2 COMMITTEE CLERK: Good morning. In
3 accordance with the rules of the Council I will
4 administer the affirmation to the witnesses. Please
5 raise your right hands. Do you affirm to tell the
6 truth, the whole truth and nothing but the truth in
7 your testimony before this Committee and to respond
8 honestly to Council Member's questions?

9 JANE BOWERS: I do.

10 COMMITTEE CLERK: Thank you, can you
11 please restate your names for the record.

12 JANE BOWERS: Jane Bowers.

13 VINCENT BOUDREAU: Vincent Boudreau.

14 MARCIA KEIZS: Marcia Keizs.

15 JENNIFER RAAB: Jennifer Raab.

16 JANE BOWERS: Thank you, good morning
17 Chair Barron and members of the Higher Education
18 Committee. My name is Jane Bowers as you've heard, I
19 am the Interim Executive Vice Chancellor and
20 University Provost at the City University of New
21 York. In this role, I serve as CUNY's chief academic
22 officer, responsive... responsible for all of our
23 academic programs, student affairs, faculty affairs,
24 academic technology, libraries, and institutional
25 research. As a sign of the importance CUNY gives to

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2 today's topic, I am joined by three college
3 presidents, Jennifer Raab of Hunter College, which
4 offers CUNY's largest nursing program; Marcia Keizs
5 of York College, whose unique nursing program serve
6 the diverse community in Southeast Queens and Vincent
7 Boudreau of the City College of New York, home of
8 CUNY's Medical School. They will each address the
9 excellent educational opportunities at their
10 institutions and I will begin by giving an overview
11 of health education at the university. Arguably, the
12 quality of health care depends on the skills and
13 education of the health workforce. To a substantial
14 extent, health care in New York City depends on CUNY
15 and its graduates. CUNY is committed to providing
16 high quality academic programs to prepare a pipeline
17 of culturally diverse students to fill critical roles
18 in health care. About ten percent of all of our
19 undergraduate students and ten percent of graduate
20 students at CUNY are pursuing degrees in health and
21 human services fields. In academic year 2017/2018,
22 more than 5,100 students, 2,300 associate and 2,800
23 baccalaureates graduated with degrees in health-
24 related fields, 1,300 of them in nursing. At the
25 graduate level, another 1,500 students earned masters

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2 or doctoral degrees in the same year. In 2017, CUNY
3 graduates comprised more than a third of all newly
4 licensed RNs in New York City. We offer more than 150
5 undergraduate and graduate certificate and degree
6 programs in health and human services areas,
7 including nursing and allied health. We are justly
8 proud of the academic quality of our health programs.
9 [clears throat] excuse me. In 2017, the combined CUNY
10 pass rate on the NCLEX, the state licensing exam for
11 nurses, was 86 percent, higher than the combined
12 NCLEX pass rate of 83 percent for all other New York
13 City based nursing programs. Likewise, New York City
14 College of Technology's first-time licensure rate in
15 dental hygiene is consistently 95 percent or better.
16 Most of this education is offered in person on our
17 campuses but through the CUNY School of Professional
18 Studies we also offer online BS and MS programs in
19 nursing and other health related fields such as
20 health information management and nursing education.
21 CUNY also offers more than 50 non-degree adult and
22 continuing education programs for the health care
23 workforce. These programs provide opportunities for
24 non-traditional students to prepare for emerging
25 careers in the health care sector. New programs

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2 include the state's first credit bearing certified
3 recovery peer program developed in response to the
4 opioid epidemic; a community health worker
5 apprenticeship program created for 1199 and Bronx
6 Lebanon Hospital; and a health coach program for
7 Community Care of Brooklyn. We have invested
8 significantly in health care education in recent
9 years, launching the Graduate School of Public Health
10 and Health Policy in 2015 and CUNY... the CUNY School
11 of Medicine in 2016. We are also in the process of
12 searching for a new University Dean of Health and
13 Human Services who will provide academic leadership
14 and coordinate cross campus initiatives for the CUNY
15 colleges and graduate schools that offer health
16 education. of critical importance, the dean will
17 network with employers to increase clinical
18 opportunities for students. Currently there are
19 insufficient clinical placements to meet student
20 demand and this shortfall limits the number of
21 otherwise qualified students we can admit to certain
22 health majors particularly nursing. CUNY nursing
23 graduates come from diverse cultural and linguistic
24 backgrounds. Nearly 64 percent of our associate
25 degree graduates are people of color as are more than

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2 70 percent of our bachelor's degree graduates. A
3 majority of undergraduate nursing students who attain
4 a degree are foreign born. CUNY's nursing students
5 are often residents of the same urban neighborhoods
6 as the patients they ultimately serve. Many of our
7 health programs are equally diverse. For example,
8 City Tech runs the largest dental hygiene program in
9 the region and graduates, graduates significant
10 numbers of underrepresented students in a field that
11 has limited minority representation. Graduation from
12 a CUNY health related program provides aspiring
13 students with a road to the middle class through
14 employment in a respected profession. Jobs in the
15 health care field represent about 12 percent of all
16 jobs in New York State and many of the fastest
17 growing occupations are in the health care industry.
18 The New York State Department of Labor expects that
19 the state economy will add almost 125,000 health care
20 jobs between 2016 and 2026, a growth rate of 21
21 percent. According to a data match between CUNY and
22 the New York State Department of Labor, student who
23 earn associate degrees in nursing or allied health
24 fields such as radiologic technology, typically earn
25 salaries that range from 60,000 dollars to the mid-

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2 70,000s three years after graduation. With a
3 bachelor's degree, CUNY trained nurses and other
4 health professionals typically make salaries from
5 just over 60,000 to the low to mid 90's three years
6 after graduation. To be sure, students encounter
7 financial challenges on the way to these careers
8 despite CUNY's affordable tuition. Financial aid may
9 not cover the reduced course load many students must
10 take in order to complete their challenging and time-
11 consuming clinical classes. Students may pay out of
12 pocket for required background checks or drug panels,
13 for licensure prep courses, for the NCLEX licensing
14 exam and for the New York State license itself. To
15 make it slightly easier to bear these costs, CUNY
16 supports its health students by covering the costs of
17 liability insurance for their clinical placements. We
18 would like to do much more because investments made
19 in these students benefit not only them but also
20 their families and New York City. CUNY must be
21 prepared to navigate the dynamic and changing health
22 care landscape by adapting its mix of program
23 offerings by securing sufficient clinical placement
24 slots for our students and by providing the necessary
25 academic support to ensure that students can manage

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2 the appropriately rigorous health program curricula.

3 Based on past experience I am confident that we will

4 rise to these challenge, challenges and I thank you

5 for this opportunity to address you today. I would

6 like to turn the mic I guess over to Vincent

7 Boudreau, the President of City College to speak.

8 VINCENT BOUDREAU: Thank you Jane and

9 thank you members of the Council, Chair Barron for

10 this opportunity to present the CUNY School of

11 Medicine. The recently accredited CUNY School of

12 Medicine built on the 45-year tradition of success at

13 the Sophie Davis Biomedical Education Program and its

14 determined to address the following critical

15 challenges in health care and medical education.

16 First the limited number of physicians who seek to

17 serve our underserved communities in areas of the

18 greatest need, primary care. And second the limited

19 opportunity that is provided to young men and women

20 from underserved communities many of whom are

21 underrepresented minorities to successfully pursue a

22 medical education. So, we address these challenges in

23 three ways; a unique seven-year program that recruits

24 high school graduates from New York State who

25 demonstrate an understanding and embrace of our

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2 social mission, the establishment of a comprehensive,
3 nurturing environment and a curriculum that centers
4 on the patient and focuses on increasing... on creating
5 compassionate and caring physicians who appreciate,
6 respect and value diversity. So, why the shift from
7 the Sophie Davis Program to the CUNY School of
8 Medicine? In its old structure, the Sophie Davis
9 Program operated under a cooperating school model.
10 During the first five years in this program, students
11 completed a baccalaureate degree together with the
12 didactic components of the first two years of
13 traditional medical school and I should say those
14 first two years were at CUNY tuition rates. Students
15 then transferred as third year medical students to
16 one of six cooperating medical schools to complete
17 two years of clinical education, clerkships.
18 Unfortunately, despite its extraordinary mission and
19 outstanding record of accomplishment, our partner
20 medical schools frequently placed greater emphasis on
21 specialty practice areas over careers in primary care
22 and that diluted the potency of our student's
23 commitment to primary care for the underserved. In
24 addition, changes in medical education, expansion of
25 class sizes in other medical schools and the

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2 consumption of clerkship slots by offshore medical
3 schools significantly reduced the capacity of
4 clinical training for our students and made our
5 earlier model obsolete. So, in our new model, we are
6 particularly concerned about the long-term financial
7 viability of the educational program and
8 simultaneously we are concerned about not being an
9 additional burden on the state health care
10 infrastructure. So, we built a structure without
11 ownership of a hospital, but with an affiliation
12 agreement between the medical school and our clinical
13 partners in New York State in New York hospitals and
14 other health, health care facilities. The clinical
15 faculty members are employees of and are paid
16 directly by the hospital, significantly decreasing
17 the potential of financial obligations for the
18 school. This affiliation model presents the greatest
19 degree of separation between the medical school and
20 the hospital and the least amount of risk and, and
21 financial liability to our parent institutions, the
22 City College of New York, CUNY and the state for
23 delivering the clinical components of medical
24 education. So, that's our, our model let me tell you
25 who we are. The CUNY School of Medicine, like the

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2 Sophie Davis program is committed to diversifying a
3 profession that has often been insufficiently
4 representative. We work, in particular, to make sure
5 that patients in underserved communities have doctors
6 and physicians' assistants who are attuned to their
7 needs. One way to do this is by recruiting medical
8 students from the communities they will serve,
9 students who are committed to providing health care
10 to the underserved. With these goals in mind, our
11 program has been a significant source of a diverse
12 body of physicians working in New York's underserved
13 communities especially in primary care. And I'm going
14 to start by talking about the Sophie Davis
15 accomplishments and then I'll talk about the CUNY
16 School of Medicine. So, over the year history of
17 Sophie Davis 65 percent of their graduates practice
18 medicine in New York and that's the most of any
19 medical school in the state, 41 percent of Sophie
20 Davis graduates pursue careers in primary care
21 medical specialty and these figures place the Sophie
22 Davis among the top ten medical schools in the United
23 States in producing primary care physicians. If this
24 trend continues with the CUNY School of Medicine
25 graduates, we will be the number one school providing

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primary health care physicians in New York State. Twenty six percent of Sophie Davis graduates are practicing in health professional shortage areas in New York State and that compares to a state figure of only 14 percent of physicians working in HPSAs. Over the course of the 45 years as the Sophie Davis program and now as the CUNY School of Medicine, 33 percent of its students have been from underrepresented minorities. Over the past 10 years, this number has increased to 42 percent of enrolled student, students. The transformation of the Sophie Davis Program into the CUNY School of Medicine has not diminished our accomplishments in this area. Quite the contrary, over the past two years, 58 percent of our admitted students have been from underrepresented demographics, African Americans and Latinos. Sixty three percent of the students currently in attendance are from the same two groups. At the last meeting, fall 2017, of the Association of American Medical Colleges, the AAMC in Boston, our school was cited for being among the top five schools in the United States in terms of recruitment of African American students, preceded only by four medical schools in historically black colleges and

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2 universities; Howard, Meharry, Morehouse and then
3 Charles Drew. So, I'd like to put these figures in
4 the context of student recruitment at other medical
5 schools nationally represented as a percentage of
6 national averages. The average percentage of African
7 American students in medical schools, so this is
8 different from the graduate figure that you cited
9 earlier Chair, is seven percent, at the CUNY School
10 of Medicine its 39 percent. The average percentage of
11 Latinos in medical school is 6.5 nationally, at the
12 CUNY School of Medicine it's 24 percent. We have more
13 than the average number of women in school than the
14 national average; the national average is 48 percent,
15 we are 62 percent at the CUNY School of Medicine. And
16 at the end of my documents there are charts showing
17 these figures in more detail. So, let me now talk
18 about faculty and administrative diversity. Although
19 the CUNY School of Medicine is a well... is well above
20 diversity attainment figures for medical schools
21 nationwide, this is an area where we have work to do.
22 It's been an issue that the students themselves have
23 raised with the faculty and in response to their
24 input and concerns that we further diversify our
25 faculty, we now have students on every hiring

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2 committee and they've long since served that role in
3 recruitment committees and that's one of the reasons
4 why we've been able to recruit such a diverse group
5 of students. The school is in the midst of a build
6 out process and so we anticipate that this is one
7 place at COMMITTEE CLERKNY where we will be hiring in
8 numbers in the near future and that means that with
9 some focus and concentration there's a real chance to
10 build on our diversity hires but here are the... here
11 are the figures. Nationally, medical school faculty
12 are comprised 4.8 percent of Latino, faculty members
13 three percent are African Americans. At the CUNY
14 School of Medicine 12.4 percent of our faculty are
15 Latinos, nine percent are African American. Sixty
16 percent of our faculty are women, as compared to 39.5
17 percent nationwide, 25 percent of our department
18 chairs come from underrepresented groups as compared
19 to 12 percent nationwide. Twenty five percent of the
20 school's deans and 29 percent of our senior
21 administrative staff are either African American or
22 Latino. So, these are numbers that compare well with
23 national figures, but we are not satisfied with these
24 numbers and we will be working to increase them. So,
25 the CUNY School of Medicine passed its intermediate

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2 accreditation review last year and will graduate our
3 first class of doctors in the spring of 2020. At this
4 writing, the school is still assembling the
5 instructional and administrative staff that it will
6 need for the last two years, people that will manage
7 some of the more complicated elements of medical
8 education, including clinical placements and
9 rotations. Our research operation is just getting
10 underway and the fact that we have more hires to make
11 gives us ample opportunity to strengthen our
12 diversity figures for faculty and administration.
13 Still, we are excited to be able to serve the needs
14 of our city and our state. The mission to provide
15 more sensitive and effective primary health care to...
16 in underserved communities and to diversify the
17 medical profession by bringing the whole people into
18 medical school is, in fact, a single, united mission.
19 We look forward to serving this mission for our city,
20 for our state and for our people. Thank you.

21 JANE BOWERS: Thank you President
22 Boudreau, I'm turning it over now to President Keizs
23 of York College.

24 MARCIA KEIZS: Good morning Chair Barron
25 and members of the Committee on Higher Education.

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2 Thank you for the opportunity to testify this
3 morning. You know who I am, Marcia Keizs, President
4 of York College. As many of you are well aware, for
5 over 50 years York College has served as the academic
6 nucleus of the diverse Southeast Queens community.
7 Our students, many of them immigrants, or children of
8 immigrants, represent more than 100 different nations
9 of origin, speaking almost as many different
10 languages. I want to focus my testimony this morning
11 on our nursing program and I just want to give you a
12 little context of the college. Our college is
13 organized into three schools; the School of Arts and
14 Sciences, the School of Business and Information
15 Systems, and the School of Health Sciences and
16 Professions. The Department of Nursing, our nursing
17 program resides in the Health Sciences and
18 Professional programs and delivers a two-pronged
19 nursing program; a long-standing baccalaureate in
20 science BS RN to BS and the generic BS nursing
21 program. Both are accredited by the Accreditation
22 Commission for Education and Nursing and the New York
23 State Department of, of Professions. Our current
24 accreditation which was granted in 2014 was a full
25 eight-year ACEN accreditation. At the present time as

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2 well just so you know, in the borough of Queens, York
3 College is the sole CUNY college offering nursing
4 programs at the baccalaureate level. We hope within
5 the next two years or so, we are currently working on
6 a masters at that... in nursing, that is not on board
7 yet, but we are solidly providing at the
8 baccalaureate level. In terms of the kind of results
9 we have in our students, our most recent results, the
10 2018 results in terms of the NCLEX pass rate it was
11 94 percent, well above the New York State average of
12 87 percent. I want to talk a little bit about
13 recruitment and... I'm sorry, excuse me, let me just
14 focus on the two nursing programs for a minute. There
15 are two pathways, a long standing established in 1985
16 RN to BS. What this means is that students came to us
17 at York holding the associate degree and being
18 nurses, having passed the NCLEX exam and what we did
19 at York was to complete them with the baccalaureate,
20 that's the long-standing program established in 1985.
21 In 2012, we did a variation on that program where we
22 established a dual joint admission between our
23 community colleges and ourselves so that students who
24 entered the community college would get seamless
25 transfer into our baccalaureate program. So, we have

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2 that variation going. The second program, the generic
3 nursing program is newer to York, it was established
4 in 2011 and reflects the colleges commitment to the
5 2010 institute of medicine report, the Future of
6 Nursing; Leading Change, Advancing Health and
7 recognized the need in Queens and in New York City to
8 increase the total number of baccalaureate prepared
9 nurses entering the workforce. York's first cohort of
10 generic BS students graduated in 2013 and we have had
11 a total of 137 students graduate from that program
12 since 2013. Our recruitment efforts start in our... at
13 office of admissions where it is centered on what
14 they describe as an inside Queens, outside Queens
15 approach. We focus first on our Queens population and
16 we also focus on the other boroughs sometimes, sorry
17 President Raab but we do try to come into Manhattan
18 sometimes and into Bronx and maybe even to Brooklyn,
19 but we do try to focus on the Queens inside out as,
20 as they say. The majority of our new first-time
21 student applications come from Queens followed by
22 Brooklyn and then from the other boroughs. The
23 majority of the high school visits is focused on
24 Queens to maximize those relationships. As I said
25 then there's a broadening out as well so that we work

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2 with our sister community colleges to work to, to
3 lock in seamless transfer from the community colleges
4 to York. The current status of our program and I want
5 to focus on the generic since it's really our larger,
6 larger program. We currently have 130 generic nursing
7 students and 22 RN to BSN. The ethnicity of the
8 students in the generic program is 30 percent black,
9 49 percent Asian or Pacific Islander, 11 percent
10 Hispanic, nine percent white, etcetera. Our
11 department is really transforming the education of
12 our nursing students through the use of simulations,
13 simulations in our state-of-the-art simulation labs.
14 Students are prepared to meet the complex needs of
15 patients in the current health care system and to
16 function in the role as future nurse leaders. Our
17 students learn to collaborate and to lead by example
18 by our faculty where seven out of eight full time
19 faculty holds PhD degrees and I must tell you Chair
20 Barron and your colleagues this is not an easy thing
21 to recruit and to maintain these faculty, they have
22 many opportunities elsewhere and it's a constant
23 struggle quite frankly because sometimes they're
24 recruited away but right now we do have seven PhD
25 trained and our last faculty who does not have PhD is

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pursuing the PhD at the graduate school. Our faculty guide our students through research and for... to professional conferences is of our core element of what we do because we really want to create nursing leaders. A core value for us at York is community engagement and experiential learning and naturally students in the nursing program not only get this through, through their clinical training but they get this through other collaborations and I just want to cite why. Since 2013, our nurses led by Doctor Alaxandre, our students have participated in a summer two-week, three credit course in Haiti where York College students work alongside healthcare professionals in a service learning experience. And that experience is really something that is transformative for students. Currently we're also working with the Joseph Addabbo Health Care Center where we expect to place some eight or so already trained nurses to work in that center. What we are looking to for the future is to expand our program quite frankly but it is going to take some resources because nurses at the PhD level have many opportunities although they're very committed to teaching and research and we would like to see our

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2 program expanded because we believe we can serve a
3 broader population in Queens, that would mean
4 additional resources. Further, the other thing we are
5 very committed to is for our graduates to pursue the
6 masters and then ultimately the doctorates like the
7 model that exists at Hunter for instance or at the
8 College of Staten Island. We have in our own nursing
9 department the kind of individual who can propel
10 that, Doctor Valerie Taylor Haslip, I believe last
11 time you had a hearing she was here, she's the Chair
12 of our nursing program, she obtained her
13 undergraduate degree from an HBCU but later on she
14 came back to CUNY, she got her masters at Lehman and
15 her PhD at the Graduate Center, she moved into the
16 ranks of teaching at the associate degree level and
17 she now Chairs our department and leads it. Our
18 students are encouraged to model that kind of
19 professional trajectory. Our master's program which
20 we expect to launch in 2020 will help us on that
21 journey and down the road as I mentioned we hope to
22 be able to model what Hunter has and what the College
23 of Staten Island has in the DNP, the doctorate of
24 nursing. Thank you for the opportunity to provide
25 this testimony today.

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2 JANE BOWERS: Thank you President Keizs
3 and President Raab would you like to speak now?

4 JENNIFER RAAB: Good morning Chair Barron
5 and members of the Higher Education Committee of the
6 City Council. Thank you for the opportunity to
7 testify before you regarding the status of nursing
8 and some other health care related programs at Hunter
9 College. I am Jennifer Raab, President of Hunter
10 College which has played and continues to play a
11 vital role in preparing skilled health care workforce
12 to serve New York City. It has been one of our
13 strategic goals to recruit a diverse student body
14 with an emphasis on underrepresented minority groups
15 in order to diversify the future workforce, enhance
16 their cultural competence and address the
17 comprehensive healthcare needs of New Yorkers. The
18 Hunter College School of Nursing is the oldest and
19 largest school of nursing within the CUNY system. We
20 have been preparing nurses for practice in urban
21 environments with diverse populations for more than
22 60 years. Our programs range from bachelor's degrees
23 in nursing to doctorate in nursing practice. This
24 reflects our commitment to preparing practitioners
25 from entry level positions to a highly specialized

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2 practice and leaders in positions in nursing. The
3 school offers four undergraduate programs. The first
4 is our Bachelor of Science in nursing which my
5 colleague Dr. Keizs referred to as our generic
6 program admitting students who come to us as
7 undergraduates in their second year of study. We
8 recently created a small but very focused honors
9 program that attracts high school seniors who have a
10 commitment and a passion for nursing. We recruit a
11 cohort of between 20 to 25 students in their freshman
12 year, they are given special scholarships and special
13 mentoring with a focus on creating nurse leaders for
14 New York. Our third program is an RN to BS program
15 for the individuals with associate degrees which was
16 also mentioned by my colleague Dr. Keizs. These
17 programs are particularly important in the senior
18 colleges because the study that Keizs referenced from
19 2010 done by my predecessor, Dr. Donna Shalala,
20 really reinforced the fact that associate level
21 trained nurses, nurses with just the RN and not the
22 bachelor's degree are not going to be hired for most
23 health care jobs in this country in the coming years,
24 you're seeing a decrease in their hiring so it is
25 incumbent upon all of the CUNY schools and I think

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2 we're all very committed to creating these pipelines
3 from the community colleges to... so that these nurses
4 can get their bachelor's degree and succeed in the
5 jobs particularly in the hospitals in New York. Our
6 fourth undergraduate degree is also something that
7 focuses on both increasing diversity but also the
8 workforce shortage of nurses and it's an accelerated
9 second degree nursing program which is designed to
10 attract undergraduates who did... have not received a
11 nursing degree and get them the prerequisites, get
12 them the nursing degree and then get them on a fast
13 track to a masters. So, it's another focus to
14 increase the number of nurses that we're graduating.
15 We have renowned masters program offering a number of
16 specialties including the adult/gerontology clinical
17 nurse specialist, a community/public health nursing
18 practice, and our psychiatric mental health nurse
19 practitioner. We're also working on new programs in
20 palliative care and, and cancer care as well as other
21 specialties. And finally, a number of years ago
22 Hunter created the first doctorate nursing practice
23 program at Hunter College in which we prepare nurses
24 for leadership positions within the health care
25 system and it has become a very popular program on a...

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2 on a full time and a part time basis to move nurses
3 from positions of care to real positions of
4 leadership in our facilities in New York. Hunter was
5 also actively and continues to be substantially
6 engaged in the creation of new PhD nurses at the CUNY
7 Graduate Center. All of our programs are fully
8 accredited by the Commission on Collegiate Nursing
9 Education and the pass rate for our graduates on the
10 NCLEX nursing exam was over 91 percent in 2018. We
11 are currently investing private philanthropy and
12 supporting our students in preparation for this
13 critical test. In recognition of Hunters
14 contributions to the field of nursing, Hunter
15 recently received the 2018 nursing champion award
16 from the New York City Health and Hospital
17 corporation. The Hunter School of Nursing has a
18 diverse student population, with a commitment to
19 always increasing these numbers. We have over 17
20 percent African American students, ten percent
21 Hispanic students and 33 percent Asian students in
22 our combined programs. Our masters and doctoral
23 programs are even more diverse with 23 percent
24 African American students in our master's program and
25 almost ten percent Hispanic students and 35 percent

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2 African American students in our doctoral programs
3 with almost seven percent Latino students. We are
4 also very proud of the fact that 97 percent of our
5 nursing graduates work in New York City after
6 graduation. Our efforts to include and to increase
7 student diversity includes strategic and coordinated
8 efforts to create seamless pipelines from students
9 graduating from high school and with associate degree
10 in nursing including RNs to get them to graduate and
11 undergraduate degrees in nursing as I mentioned. Our
12 school of nursing has been working consistently with
13 high schools, community college, New York City
14 hospitals, health care facilities and the local
15 government agency to recruit students with high
16 school diplomas or an RN to pursue education on our
17 bachelors, masters and doctoral levels. We are also
18 striving to support and retain our students once they
19 come to Hunter, which is another very important
20 indication and support for student success. We are
21 proud that our attrition rate in 2018 for our nursing
22 bachelors' program was barely two and a half percent
23 and for our master's program it was one percent, good
24 numbers mean success. One example of our innovative
25 efforts at creating pipelines to nursing education at

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2 Hunter was the renowned BEST program, which stands
3 for becoming excellent students in transition to
4 nursing. This is a program begun in 2004 supported by
5 the federal government up to 2016 and it created
6 opportunities for individuals from educationally and
7 economically disadvantaged backgrounds in
8 particularly recruiting high school students in which
9 we're allowed to provide student stipends,
10 scholarships, tutoring, special counseling and
11 opportunities for mentorship. This BEST program
12 provides a great model for all of us going forward in
13 recruiting underrepresented students into the field
14 of nursing. Another example of our best practice
15 methods, methods is the partnership we have forged
16 with Community Colleges. In 2011, we established a
17 special collaboration with Queensboro Community
18 College to recruit their RN students into our
19 Bachelor of Nursing program. We have now expanded
20 that successful collaboration to La Guardia Community
21 College and have secured a 300,000-dollar grant from
22 the Petrie Foundation to help finance this pipeline.
23 We hope to expand this initiative to include the
24 Borough of Manhattan Community College in the future.
25 I should not though that while focusing on recruiting

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2 is very important, one of the issues in nursing
3 education is actually the great demand for students
4 to become nurses so we estimated, it's really
5 anecdotal but listening to our students and looking
6 at their survey response that about ten percent of
7 our incoming freshman class has their heart set on
8 being a nurse and about 20 percent of our transfer
9 students so the interest is there, it's about
10 support, it's about capacity and training because the
11 qualifications to be accepted into nursing programs
12 are extremely rigorous and that training needs to
13 start early to support their knowledge and their
14 learning and success in basic science classes. In
15 addition to our extensive nursing programs, Hunter
16 offers several undergraduate and graduate programs in
17 other health related disciplines. We are proud to
18 highlight our medical lab science program which
19 prepares students for advanced practice in hospital
20 and private diagnostic labs, academic research
21 laboratories, pharmaceutical and biotech companies.
22 The program has been quite successful in attracting
23 students from underrepresented populations and
24 currently almost 27 percent of the undergraduate
25 students and 20 percent of our graduate students in

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2 this program identify as African American or
3 Hispanic. With respect to our other health care
4 related programs, over 14 percent of students in
5 nutrition and food science, almost 13 percent of the
6 graduate students in our doctorate of physical
7 therapy program and almost ten percent of the
8 graduate students in speech language pathology
9 identify as African American or Hispanic. In my
10 tenure as president of Hunter College, I am proud to
11 have raised 15 and a half million dollars for various
12 foundations, trusts, individual donors and alumni to
13 support our School of Nursing program. In Fiscal Year
14 2019, nearly 320,000 dollars in scholarships have
15 been awarded to nursing students with additional
16 private funds being used to recruit and retain high
17 achieving faculty and nationally renowned
18 researchers. At Hunter College we're not only
19 committed to increasing student diversity but faculty
20 representation as well. We know that diverse faculty
21 not only benefit Hunter College through their
22 teaching, scholarship and service, but also serve as
23 role models for our students. Among the 23-tenure
24 track and tenured faculty in nursing, nearly nine
25 percent identify as African American or Hispanic. We

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2 have extended this commitment to diversity to our
3 adjunct faculty. Forty two percent of our adjunct
4 faculty identify as members of underrepresented
5 groups with 27 percent of our adjunct faculty who
6 identify as African American and 15 percent identify
7 as Hispanic. As part of our commitment to increase
8 faculty diversity, we recently submitted an RCOUNCIL
9 MEMBERI grant, which stands for Research Centers in
10 Minority Institutions to NIH and if funded this grant
11 will allow us to strengthen our efforts in recruiting
12 African American and Hispanic scholars and
13 researchers working in the health care field at
14 Hunter College. At Hunter College a critical part of
15 our mission is to support the health and wellness of
16 low income, under resourced communities in New York
17 City through faculty and student engagement. This
18 enhances our graduates' commitment to return and
19 serve in this communities. And I'd like to speak
20 about two of our recent focus on supporting
21 communities in both East and West Harlem. In Hunter
22 College... Hunter College commitment to East Harlem has
23 been long standing and its importance is further
24 cemented when we moved our Silberman School of Social
25 Work to that neighborhood in 2011. Since then Hunter

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2 has significantly expanded its engagement with the
3 East Harlem community. Some examples include having
4 12 nursing students from our community nursing and
5 pediatric nursing specializations placed in a local
6 public-school PS 7 to work with teachers on improving
7 the student's health and health assessments and their
8 hygiene skills. In collaboration with Weill Cornell's
9 Clinical and Translation Research Center, our nursing
10 students teach CPR and opioid overdose prevention to
11 community residents. They also provide cardiovascular
12 risk screening and counseling to people in East
13 Harlem through a partnership with Weill Cornell and
14 Heart to Heart. One of our faculty members who is a
15 resident of East Harlem, Dr. Judith Aponte, who is a
16 Hunter Alum and, and as I said East Harlem resident,
17 resident is a leading Latino practitioner, scholar
18 and researcher in the field of nursing with a focus
19 on diabetes. She has collaborated with the Union
20 Settlement Association and Senior Centers in East
21 Harlem to explore how technology may be utilized by
22 older adults to help manage their diabetes. In West
23 Harlem our Rudin Professor of Nursing, Dr. Elizabeth
24 Cohn is the co-founder of Communities of Health at
25 Harlem Health Revival, which is a faith based and

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2 community-based organizations working together to
3 improve the spiritual, physical and mental health of
4 Harlem residents. This project is a partnership with
5 Reverend Calvin Butts and the Abyssinian Baptist
6 Church's Health Ministry. Dr. Cohn is also the
7 community engagement lead for the NIH funded All of
8 Us Research Program which has enrolled 10,000
9 participants since May 2018 and 66 of which of whom
10 are underrepresented in biomedical research. This
11 program many of you may have heard about in the movie
12 mate... where it was made famous in the story of
13 Henrietta Lacks and this is the NIH's program in
14 Harlem in which we're deeply involved. And I'd love
15 Chair Barron at some point to be able to talk about
16 referring to your earlier comments about health
17 disparities in care, we have a major new grant that
18 we're extremely excited about from the NIH, it's a
19 multimillion dollar grant over a number of years with
20 Temple University to address health disparities
21 particularly in cancer and particularly in prostate
22 cancer and we'll be doing that on the Eastern
23 seaboard from Philadelphia to New York and our
24 professor who's received the grant is a major expert
25 in the issue of health disparities particularly with

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2 black men and prostate cancer. I'd like to end by
3 just talking about two students who inspire us to
4 keep doing the work we're doing and as an indication
5 of our commitment to the topic of today's hearing. A
6 recent graduate named interestingly Rachel Nurse-
7 Baker was the daughter of immigrants from Trinidad
8 and Grenada who grew up in Bedstuy, she went to the
9 Clara Barton High School showing early on passion for
10 nursing but she had many obstacles in her way as an
11 immigrant and in an under resourced family but she
12 made it to Hunter, we supported her education, she
13 became the Vice President of our student nursing
14 association and we're so proud today that she's at
15 New York Presbyterian, New York Methodist Hospital
16 providing care and living her dream. Mariel Acosta
17 Melo, a 2017 graduate who is Latino came to Hunter
18 through the program I mentioned, the BEST program
19 where she was recruited as a high school student
20 again to realize this passion, she worked with Dr.
21 Judith Aponte as her mentor and who inspired her to
22 consistently commit to nursing and is now an RN at
23 Mt. Sinai in the cardiovascular intensive care and is
24 planning to come back to us for her graduate
25 education to become a certified nurse anesthetist.

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2 These students and our commitment to nursing and
3 health care education exemplify our Hunter College
4 motto, *mihi cura futuri*, the care of the future is
5 mine. Thank you for this opportunity to speak with
6 you this morning about Hunter College's commitment to
7 health care education in New York City.

8 JANE BOWERS: Thank you President Raab
9 and I'd like to thank these three wonderful
10 Presidents for their leadership in health care
11 education in our CUNY colleges and we are happy to
12 answer any questions you might have Chair Barron and
13 members of the Committee. Thank you.

14 CHAIRPERSON BARRON: Wow, that was quite
15 a bit of information, getting some feedback on my
16 mic. That was quite a bit of information, very
17 inspiring and quite pleasing to know of the
18 accomplishments that CUNY has... is standing on and is
19 looking to expand going into the future. I want to
20 commend you for the presentation which cites the
21 great work that you're doing in your individual
22 schools and throughout CUNY as a whole and we just
23 have some questions. Can you tell me a little bit
24 about CUNY's consortium of nursing programs and how...
25 who's a part of that, is that open to all of the CUNY

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2 schools, how... do they meet and what do they do, how...
3 what's their relationship to hospitals?

4 JANE BOWERS: Well we do have nursing
5 council... okay, thank you. We do have a nursing
6 council, I assume that's what you're referring to
7 which is the nursing deans from all of the nursing
8 programs in CUNY and they do meet regularly. Right
9 now of course without a dean at CUNY Central in this
10 interim period we, we still continue to have the
11 nursing council meet but not with a dean at the head
12 which will be helpful when that happens because
13 their, their activities will be better organized and
14 move forward and I assume that that is what you're
15 referring to but if there's something else that's a
16 consortia arrangement that you know of that... [cross-
17 talk]

18 CHAIRPERSON BARRON: Well, well since
19 you're talking about that we'll just... [cross-talk]

20 JANE BOWERS: Yes... [cross-talk]

21 CHAIRPERSON BARRON: ...follow that...
22 [cross-talk]

23 JANE BOWERS: Okay... [cross-talk]

24 CHAIRPERSON BARRON: ...that organization
25 and talk about nursing... [cross-talk]

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2 JENNIFER RAAB: I would... [cross-talk]

3 CHAIRPERSON BARRON: ...council.

4 JENNIFER RAAB: ...just... I would just also
5 add that I think there's, there's... we spoke... Dr.
6 Keizs and I were speaking about because of this need
7 for real seamless transfer from the community
8 colleges to the senior colleges and because these
9 students really, it's our responsibility to ensure
10 they get this bachelor's degree so they'll be able to
11 continue to practice their chosen field, we all speak
12 with each other very regularly and we have... all of us
13 have some very specific programs to make sure that
14 we, we're working on these pipelines so I think it's
15 one place where we really do communicate... [cross-
16 talk]

17 JANE BOWERS: Yes, CUNY, CUNY is very
18 aggressive at... in developing these two plus two
19 programs in key educational areas and, and health
20 education nursing being, being the absolute most
21 important in my view and they're, they're really
22 wonderful for students because it is... the transfer is
23 seamless, you, you don't apply... have to apply as long
24 as you follow the path in the community college and
25 the curriculum has been developed jointly by the

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2 community college faculty and the senior college
3 faculty so it really is just a seamless flow and
4 creates many opportunities for students and
5 opportunities for collaboration among the colleges.

6 CHAIRPERSON BARRON: When you say two
7 plus two, you're talking about the associates then...
8 [cross-talk]

9 JANE BOWERS: Associates to... [cross-talk]

10 CHAIRPERSON BARRON: Okay... [cross-talk]

11 JANE BOWERS: ...the baccalaureate, yes.

12 CHAIRPERSON BARRON: Okay...

13 JANE BOWERS: Yes, and that is two plus
14 two because its guaranteed, you do your two years
15 and, and, and do well and get your associate and then
16 you just move over to the bachelor's degree where
17 there's... where there's this agreement arrangement.

18 CHAIRPERSON BARRON: Can you give me some
19 information, I know it's quite select and a very
20 demanding program to get into the nursing program...
21 [cross-talk]

22 JANE BOWERS: Uh-huh, uh-huh... [cross-
23 talk]

24 CHAIRPERSON BARRON: ...and DOE talks about
25 their great improvements and that's great for what

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2 they've done but I would imagine that there are
3 students who weren't adequately prepared in high
4 school but who have a great desire to want to be a
5 nurse or want to be doctor but they come under
6 prepared due to the shortcomings of the DOE, is there
7 an opportunity for us to identify those students who
8 have that love, that drive, that desire and the
9 potential but it has not been manifested through
10 their grades, what is the selection process, how does
11 a student actually get into a nursing program and are
12 there opportunities if you don't get in at the
13 beginning to get in somewhere down the line other
14 than at that entry point?

15 JANE BOWERS: This varies from college to
16 college so I'm going to ask... [cross-talk]

17 CHAIRPERSON BARRON: Okay... [cross-talk]

18 JANE BOWERS: ...my... President Raab and
19 President Keizs to comment on the admissions and, and
20 compensatory sort of activities.

21 CHAIRPERSON BARRON: Okay... [cross-talk]

22 JANE BOWERS: ...that they might engage.

23 MARCIA KEIZS: This is a challenge...

24 [cross-talk]

25 CHAIRPERSON BARRON: Is your mic on?

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2 MARCIA KEIZS: And students who come in
3 wanting to be nurses at York there are five courses
4 that they must take, and they must get... earn on that
5 a 3.0 GPA which is for some people a high benchmark.
6 However, because there are five specific courses
7 there is wrapped around those courses some tutorials
8 imbedded within those courses and so students then
9 focus on that, take those courses and through that
10 pipeline get selected but yes, it is a bit of a high
11 benchmark because it is a 3.0 but there is wrap
12 around support. The other thing I do want to say with
13 regard to this is that there are also students with
14 special needs, those students identify if they
15 identify and they must we, we can't assume they need
16 it, we can't predict they need it, we can't think
17 they need it, if they identify they will get the
18 needed accommodations, those students who may have
19 cognitive disabilities etcetera should they identify
20 through the office of disabilities they will get the
21 needed support in order to prepare themselves for,
22 for entry. Now as for those who don't get it we at
23 York have... this is a very tough thing, believe you me
24 because students who come in wanting to be nurses its
25 very difficult to say well why don't try... why don't

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2 you try something else, it's very, very difficult but
3 we do have some other avenues where we work with
4 students through advisement in order to keep them if
5 we can within the health care field and so we work
6 through advisement in those areas but capacity is an
7 issue for us and the high GPA is a bit of an issue
8 but we do try to provide the tutorials in order to
9 help students in. Dr. Raab.

10 JENNIFER RAAB: Right, I would... I think
11 it's very similar situations, I think that's one of
12 the reasons Chair Barron that we all focus on these
13 pipeline programs from the community colleges because
14 that is a place where the students can really get the
15 support, get their RNs and then move on to the senior
16 colleges but again we also... we're all trying to do
17 the outreach to recruit and support the students but
18 there's, there's... really is a capacity issue as well
19 because we're looking at a, a professional school
20 where there's... the cost of the education is very
21 intense, I think it's been mentioned in some of the
22 literature, we need to place our students and so
23 there's challenges on getting placements for the
24 students and then there's challenges in recruiting
25 and growing a faculty so we're all... I don't... we've,

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2 we've grown our, our program over the years and we
3 continue to commit to small percentage growth every
4 year because of the need for nurses but that... the,
5 the gateway is a very... is a serious one and there's...
6 we try to support the students to get to that gateway
7 but we also then try to talk to them about other
8 options in their profession so we, we've just added a
9 bachelors in social work which for students who
10 wanted to help, you know be part of a caring and
11 support is also an attractive alternative, we have
12 community urban public health as an undergraduate
13 major so I think we're doing all the different things
14 from supporting students who want to get into the
15 career to providing alternatives to thinking about
16 ways we can grow the undergraduate population and
17 there's a lot of challenges coming on different
18 fronts.

19 JANE BOWERS: I, I should also add that
20 we do work with the Department of Education and, and
21 with the high schools so we have college now courses
22 in every borough that are connected to... or, or cater
23 to students who might have an interest in, in health
24 education so some examples of courses we've offered
25 through college now and college now of course as you

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know is... gives college credit to high school students for courses they take while they're high school students under our auspices and some recent coursework, introductory nutrition at La Guardia Community College, principles of epidemiology at Hunter, environmental health issues at Medgar Evers and introduction to human services and social work at BMCOMMITTEE CLERK plus we have a, a... an early college school, a CUNY early college school called the Hero High School located in the South Bronx and it has a focus on nursing and health careers so from grades nine to 14 students prepare for a career as a registered nurse or community health worker and they can earn an associate degree from Hostos Community College after they complete high school and participate in internships at Monte Fiore Medical Center and other clinical sites and about 150 students have graduated from this new high school so far and all... nearly all are pursuing college degrees so we do try to help at the front end build a, a pipeline or a ladder through curriculum and through early college high schools to these professions granted we can do more and we would like to do more but these things take time and, and money.

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2 CHAIRPERSON BARRON: So, is it the same
3 five courses that have to be met, Hunter you have the
4 same five courses?

5 JENNIFER RAAB: No, I think we are now
6 at... I think we have three courses that... we, we went
7 to... because of this problem we used to have an... we
8 used to do... require more courses and admit in the
9 junior year and, and about five years ago we made the
10 admission in the sophomore year, we added fewer
11 courses, we also have an entrance exam so it's, it's,
12 it's very rigorous, I mean I, I often think that
13 people in... don't always comprehend how deeply
14 rigorous the training is to be a nurse... [cross-talk]

15 CHAIRPERSON BARRON: Uh-huh... [cross-talk]

16 JENNIFER RAAB: ...and the qualifications
17 and I just have enormous respect for people committed
18 to this profession but it is a very challenging
19 entrance and, you know again I think we all want to
20 do more to make sure more people are prepared but
21 there will be... it is one of those professions I think
22 where people... more people would aspire to enter than,
23 than, than will be allowed and that's why I think
24 many of us have focused on other options if this is a
25 passion so I think as Dr. Bowers mentioned nutrition,

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2 we've been growing our undergraduate nutrition
3 program, a wonderful career in health, we send people
4 to dietary internships in hospitals so we try to find
5 people's passion and help them... [cross-talk]

6 CHAIRPERSON BARRON: Uh-huh... [cross-talk]

7 JENNIFER RAAB: ...find career tracks in
8 the health care industry where they... the health... in
9 the support industry that are satisfying as well...

10 CHAIRPERSON BARRON: So, with the
11 required courses that have to receive a... the... where
12 you have to achieve a 3.0, if you... [cross-talk]

13 JANE BOWERS: It's probably different...
14 [cross-talk]

15 JENNIFER RAAB: Yeah and for us we, we
16 just rank and so people... students if they take the
17 courses, they take the entrance and they... our faculty
18 looks at the composite portfolio so we're looking at...
19 and then we're looking at our own students and then
20 we have people transferring in every year to take
21 those classes again and to take that exam so the
22 demand is really extraordinary. As I said we've been
23 growing in small... as we can increase our capacity but
24 it's a deep demand.

25

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2 CHAIRPERSON BARRON: So, in, in both of
3 your schools where you're... you have your nursing
4 programs if a student doesn't reach a particular
5 benchmark, are they out?

6 JENNIFER RAAB: We work... they're not out...
7 we work very hard to make sure they're not out at
8 Hunter but if they're... they may not be accepted to be
9 a nurse and that's what I'm saying, we have... I've
10 invested significant resources for counseling those
11 students so that's where I'm going to say if... maybe
12 you'll try again but at some point, if this isn't
13 going to work would you think about nutrition...
14 [cross-talk]

15 CHAIRPERSON BARRON: So, they may have an
16 opportunity to... [cross-talk]

17 JENNIFER RAAB: ...to, to... and so we, we...
18 our goal is to keep that student at Hunter College
19 and to graduate them with their bachelors degree and,
20 and one thing I did mention before also is then we
21 have this accelerated program now so again you may be
22 able to improve your science scores and come back and
23 try for the accelerated program. We want that student
24 who started at Hunter College or transferred to
25 Hunter College if they are not fortunate to realize

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2 their dream to get into the nursing program we want
3 them to stay to graduate and to have a career path
4 and that's why as I said we worked hard to provide
5 ways to respond to that passion with a... with a career
6 path that's viable for them.

7 CHAIRPERSON BARRON: Okay, I have lots of
8 questions, but my colleagues have been very patient
9 so I'm going to ask Council Member Rodriguez has
10 questions and then I'll come back and we'll get other
11 questions and I'll come back again.

12 COUNCIL MEMBER RODRIGUEZ: Thank you
13 Chair. No, as we are getting close to celebrating a
14 Martin Luther King legacy, it's difficult to swallow
15 how we as a city can be comfortable on how we are
16 doing building the pipeline all the students that
17 should be entering having all the opportunity to be
18 in the health field like that feels so exclusive not
19 because we couldn't build a pipeline but, you know
20 because people justify that we can go to sleep in
21 peace like they say business is a magical word, it's
22 like things will happen overnight and it's all about
23 students take classes they, you know are able to get
24 into medical school without being as strong in
25 science in math not because they didn't have the

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2 capacity but, you know because we didn't invest
3 because we don't care because like the ultimate
4 crisis unless it effects people directly like we're
5 comfortable with what we have and I think that... you
6 know my wife always told me that we as a human being
7 get to justify in our brain that we have to live with
8 what we have and there's always a reason why someone
9 kills another person because what's the matter is the
10 instinct to survive and here we have in the city that
11 still in 2019 we can live with those numbers, that
12 don't make sense, that don't make sense at all like
13 still like six percent of the students going to our
14 New York City public schools they don't have a
15 brother and sister who was a doctor, who was an
16 engineer like those kids they are not strong in math
17 and science so here we are, you know still working
18 with that population that they would be doing good
19 regardless, are we investing and this is not about
20 CUNY, it's not about Hunter, it's not about City,
21 it's not about Hostos and those... 125 kids being able
22 to make it for how many years, how many students went
23 through years after years and not being able to say
24 there's like a slump line, there's a lot of science
25 problems going on and their not... other places and

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that's where the pipeline is starting but you know take advantage those kids who live in the surrounding area. So, unless we as a city build the pipeline, guys and you are all... there are challenges. I used to be a teacher for 30 years and in two weeks, three weeks I, I got someone who was a 98 average student, he would make me look good because he came in strong already, my challenge was those who were 80, those who 65, City College is something amazing like we trust... you know we were denying to pass the student whose average was from 85 to 92 to enter the senior colleges and they did a pipeline... a, a, a pilot project and they decided to choose students who were never traditional sector and I signed up because I have... they send information because some of the students that used to be par were put on high school, they were... they have accents, probably have a stronger accent than them and they were not doing good in the SAT. When the City College gave them the opportunity most of them graduated with three-point average. Yes, it's tough to get into those science programs, into the medical school but we have to lower a little bit the entry because the way of how the program is structured right now would not allow

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2 for us to grow and we will continue walking into the
3 emergency room in our hospitals and most of the
4 doctors they will now look how New York City is, 29
5 percent Latino, 27 percent black, more than ten Asian
6 so a few things that I believe is important to look
7 at this is one, one for me... one is when it came to
8 the CUNY School of Medicine how, how can we advocate
9 for them to have all the financial support, I was a
10 political science major, we know that the cost to be
11 a political science major is not the same as to be a
12 doctor... as to go into medical school so for me
13 there's a few things guys, one is the challenges
14 about the cost of those students, share those numbers
15 with us so that we can go and lobby there at the
16 state level... school of engineer and other fields and
17 the second piece is about diversity in the staff I'm
18 not... I think is a good number, I'm not happy with
19 that number and especially the number... tend to be
20 lower as we go higher so for me to, you know... the
21 great president you know of my former... my president...
22 City College I had those two questions when...
23 especially to, to the... to the, the CUNY School of
24 Medicine, one the cost, what are the challenges that
25 we have, second, capacity and third about leadership

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2 of the staff and how can we change the program so
3 that the student who is started in City College in
4 bio or science they also should be able to transfer
5 to the school... to the CUNY School of Medicine because
6 unless things change in the Sophie Davis the student
7 has to go directly, there wasn't an opportunity for a
8 student who is starting in the bio or science to be
9 able to say I can transfer to the School of Medicine.

10 VINCENT BOUDREAU: A couple of answers to
11 that, let me start with... let me start with the
12 finance question. We do have issues at, at the School
13 of Medicine and, and, and when the school was founded
14 it was founded on the expectation that we would get
15 more or less the same deal that the SUNY medical
16 schools got, now SUNY medical schools when they were
17 founded or when they were established during the
18 Pataki administration he had a policy called the
19 capitation policy so dollar for dollar what students
20 paid in tuition was matched by the state and you know
21 those numbers to... that, that policy ended towards the
22 end of his administration but the money was baselined
23 into the... into the budget so there was an expectation
24 when the, the CUNY School of Medicine was funded...
25 founded that we would have something similar to that,

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2 the projection was that we would get something like
3 11.2 million dollars for the state and that's, that's
4 roughly, you know dollar for dollar tuition that the
5 students have paid, that money has never come through
6 so in, in the first couple of years of the medical
7 years when we're teaching what they call the didactic
8 courses where it's essentially a classroom course
9 this school is doing quite well, in fact it, it...
10 they... it takes in a little bit more tuition than it
11 costs to run the program. We are now getting into the
12 areas where the students are doing their clinical
13 rotations and so, you know there are cadaver
14 programs, they're working the hospitals, we are as I...
15 as I said paying the instructional costs of, of
16 faculty associated with the hospitals and so all of a
17 sudden instruction gets more expensive so we are, you
18 know tirelessly advocating for the agreement that's
19 never... it's never quite been repudiated, it just
20 hasn't been acted on and I will say that CUNY has
21 been, you know exceptionally supportive of this, it's
22 one of the lead items in our budget request this year
23 but this is a real serious issue for us that, you
24 know medical education is expensive education, the,
25 the average cost of... or the budget of the SUNY

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2 medical schools is between 30 and 40 million dollars,
3 the state budget for the CUNY School of Medicine is
4 11 million dollars and so we think there's a real
5 argument to be made about fiscal equity particularly
6 in light of the, the commitment of the school to
7 primary health care education and to diversifying the
8 medical profession. So, that, that's the first
9 answer. The answer... the... I mean the question
10 Councilman that you asked about the opportunity of
11 people to come into the program, the program is
12 structured in such a way that our first years don't
13 overlay a traditional medical school and so it's
14 almost like if you don't... if you don't get the
15 didactic courses that in most medical schools you
16 would get in third and fourth year we teach them in
17 the third and fourth year of the undergraduate course
18 so we have a robust pre-med program that comes out of
19 biology in psychology so, so probably there is many
20 city college graduates getting into medical school as
21 are in the CUNY School of Medicine but they're not
22 going to graduate from the CUNY School of Medicine
23 and this, this has something to do with... as I say
24 with the way the curriculum is structured, its also a
25 capacity issue. I think if we're able to solve the

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2 budget issue we would be able to think about opening
3 up a way into the CUNY School of Medicine for a
4 second year or third year or fourth year student. As
5 things stand right now, we take in... we admit about
6 seven percent of the students that apply for us so
7 we, we get about a thousand applications, the annual
8 class is, is 70 students but one of the things that I
9 think we're really proud of is unlike a lot of
10 medical schools we don't have kind of a quantitative
11 algorithmic based admission process, it's a very
12 qualitative process so every student is, is
13 interviewed, students, faculty sit down with every
14 single candidate that makes the initial cut and one
15 of the big criteria is are you committed to the
16 social mission of the CUNY School of Medicine so I
17 don't think... you know when you say we're accepting
18 seven percent of, of the students it's not the top
19 seven percent GPA, its not the top seven percent SAT,
20 its seven percent that's called from the entire list
21 of, of, of applicants and I think that that, that's
22 reflected in our... in our diversity numbers. With that
23 said we have a thousand students that apply to this
24 school every year and if we had the capacity to
25 educate them all the way through, we would embrace

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2 that mission with, with, with enthusiasm. I think
3 those were the three questions, did I miss something?
4 Virtually all of them, virtually all of them, yeah.
5 Yeah, we have very few that apply from outside the,
6 the city, 20... 26 percent come from the area within
7 five miles of, of, of the city college campus.

8 [off mic dialogue]

9 VINCENT BOUDREAU: Yeah, I'll have to go
10 back to the... to, to the college and get it but I'll...
11 if, if I can I'll send it one.

12 COUNCIL MEMBER RODRIGUEZ: My last
13 question was about... my last question was about staff,
14 leadership... [cross-talk]

15 VINCENT BOUDREAU: Yeah... [cross-talk]

16 COUNCIL MEMBER RODRIGUEZ: ...and, and how,
17 how we're doing at the top level... [cross-talk]

18 VINCENT BOUDREAU: Yeah... [cross-talk]

19 COUNCIL MEMBER RODRIGUEZ: ...even though
20 you showed at 12 percent at the low... of the... [cross-
21 talk]

22 VINCENT BOUDREAU: Yeah, you know so 25
23 percent of our deans and there, there are a lot of
24 deans in the school of medicine are, are from
25 underrepresented communities, I don't want to say... I

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2 don't want to say that its all about budget, but
3 budget is an important element of this. So, we just
4 made a retention offer to somebody where we, we
5 offered them 45,000 dollars above the salary they'd
6 been making because they had gotten a matching offer
7 from a medical school for 90,000 dollars above our
8 current salary and, and this person decided to stay,
9 she's a woman of color, we're really proud of that
10 retention effort but we are virtually every year
11 faced with members of our medical faculty who come
12 with hundred thousand dollar raise offers from
13 competing institutions, the first answer. The second
14 answer is you look at the... you look at the... you look
15 at the, the medical school numbers nationwide, six
16 percent, seven percent, that really speaks to the
17 pipeline that you're talking about. I think our best
18 chance at, at the CUNY School of Medicine is to... is
19 to be talking to the students that are going through
20 our medical school early on about not just careers in
21 primary health care but careers in teaching. Four of
22 the faculty members of color that are currently
23 teaching at the CUNY School of Medicine are City
24 College graduates and they come back to the... to the
25 medical school to teach at lower salaries because

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2 they're committed to the mission so I think we have..
3 we have a mission not just to educate primary health
4 care doctors but also to educate people that are
5 going to come back and teach. The economic reality of
6 a place like City College is many... and Hunter and
7 York and all the CUNY schools is your core faculty,
8 our faculty that are there and not just to draw a
9 paycheck but they're there because they're committed
10 to the mission and, and we've got to build that into
11 the construction of our... of our pipeline and as I
12 said earlier nobody's happy with, with, with our
13 figures, you know the, the, the national figures of
14 diversity in medical schools are a disgrace, we are
15 above that but we're not sufficiently above that and
16 we're going to work on that every year.

17 JANE BOWERS: I have to excuse myself
18 Chair... [cross-talk]

19 CHAIRPERSON BARRON: Yes... [cross-talk]

20 JANE BOWERS: ...Barron... [cross-talk]

21 CHAIRPERSON BARRON: I was told that you
22 would have to leave... [cross-talk]

23 JANE BOWERS: ...yes but the, the
24 presidents will stay.
25

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2 CHAIRPERSON BARRON: Yes, thank you so
3 much, appreciate your presentation... [cross-talk]

4 JANE BOWERS: Thank you very much.

5 CHAIRPERSON BARRON: Thank you. Just
6 before I ask Council Member Holden to pose his
7 questions, as we're talking about the finances a
8 little bit, I just have a couple of questions. In
9 your testimony you said you have an affiliation
10 agreement between the medical school and clinical
11 partners... [cross-talk]

12 VINCENT BOUDREAU: Yes... [cross-talk]

13 CHAIRPERSON BARRON: ...and another
14 sentence says this affiliation model presents the
15 greatest degree of separation between the medical
16 school and the hospital... [cross-talk]

17 VINCENT BOUDREAU: Right... [cross-talk]

18 CHAIRPERSON BARRON: ...and the least
19 amount of risk and financial liability to our parent
20 institutions... [cross-talk]

21 VINCENT BOUDREAU: Uh-huh... [cross-talk]

22 CHAIRPERSON BARRON: So, I'd like for you
23 to talk about that but then I did hear you also say
24 the instructional cost of the faculty at the hospital
25 are born by CUNY and then the third part is when

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2 CUNY's announcement about the CUNY School of Medicine
3 was made it said that there was a campaign underway
4 to raise 20 million dollars in interest free loans
5 for the inaugural BS MD class so I want to know
6 what's the status, what is that 20 million going to
7 cover and what are the conditions under which a
8 student would have to present to qualify for that
9 loan?

10 VINCENT BOUDREAU: Okay, let me start
11 with the instructional costs, you know medical
12 schools are, are, are risky endeavors for
13 universities and it's because most of them or many of
14 them when they build a medical school they build a
15 hospital and so that means that the university takes
16 on the financial liability of a hospital if its... if
17 it's doing well that's great but many of them don't
18 and, and, and so in setting up our school rather than
19 building or managing or operating a hospital with all
20 the risks associated with that we entered into a
21 relationship with St. Barnabas Hospital and so in
22 third and fourth year medical students who are doing
23 their clinical work are educated there the... and the
24 combined annual cost that we pay for those
25 instructions and it comes in a number of different

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2 buckets is roughly two million dollars a year so
3 these are expenses that we did not have in the first
4 two years and now that we're in the third year of
5 medical school those expenses come, come on board.
6 So, on the one hand that is a, a risk mitigating
7 strategy because we don't necessarily need to be
8 concerned about the financial health of St. Barnabas,
9 but it means we have a fixed cost to pay every single
10 year. Sorry, your second question was...

11 CHAIRPERSON BARRON: So, the
12 instructional... the instructional staff... [cross-talk]

13 VINCENT BOUDREAU: Yeah... [cross-talk]

14 CHAIRPERSON BARRON: ...at the hospital is
15 paid by... [cross-talk]

16 VINCENT BOUDREAU: Is paid by city
17 college, by the CUNY School of Medicine so that's as
18 I say about two million dollars a year.

19 CHAIRPERSON BARRON: Okay and then the
20 third question was about the 20-million-dollar
21 interest free loans that you wanted to establish,
22 what's the status, what will that 20 million dollars
23 cover, can any of the students apply and is this just
24 a one time endeavor or do you think that this will be
25 something that will be recurring?

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2 VINCENT BOUDREAU: So, as you know I came
3 on as President two years ago and, and, and so I came
4 into a situation where I was discovering a number of
5 kind of foundational agreements for the, the CUNY
6 School of Medicine, the original... the original
7 feasibility study that we had established for the
8 School of Medicine actually said we needed about 100
9 million dollars in, in scholarships, when I... and, and
10 there are... there are documents that revise that
11 number down to, to 20 million dollars and in fact
12 there was virtually no, no progress towards that goal
13 in philanthropy. One of the problems that we're
14 running into... and so we had to start that operation
15 from scratch two years ago, in fact we hired the
16 fundraiser who would be responsible for that a year...
17 a year ago and it was... it was one of the areas when I
18 came into this position where I thought our, our
19 progress against the goal was nowhere near where it...
20 where it needed to be so this is a real focus of, of
21 our efforts to develop philanthropic momentum.
22 Frankly one of the challenges is we have 45 years of
23 graduates of the Sophie Davis School of Medicine who
24 don't think that they're part of the CUNY School of
25 Medicine and so, so getting them to associate the,

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2 the, the debt that they feel towards city college to
3 this new endeavor rather than the old endeavor we
4 just got a million dollar gift three weeks ago from a
5 graduate of Sophie Davis and he explicitly said I
6 want this to go for scholarships to Sophie Davis
7 students rather than CUNY School of Medicine students
8 so this is a... this is something we really have to
9 work on. As far as eligibility requirements for the
10 scholarships, you know typically donors will, will
11 set their own eligibility requirements but in our
12 vision virtually everyone who goes to the school of
13 medicine should have some scholarship to mitigate
14 what is in fact a fairly expensive tuition, the
15 students pay 40,000 dollars a year once they enter
16 the medical school portion and that compares
17 favorably with the school... SUNY Schools but to reach
18 the students that we want to give medical education
19 to they're going to need scholarships support.

20 CHAIRPERSON BARRON: So, the 20 million
21 dollars will be designated by the person who's making
22 the contribution, or does it go into a general pot
23 and then the school will distribute it?

24 VINCENT BOUDREAU: It will all depend on
25 the agreement... on the agreement with the donor so

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2 some donors will say I want... I would like to give
3 this scholarship for specific purposes, some will be
4 general purpose and I think we'll use the general-
5 purpose funds to even out the gaps in, in, in
6 whatever the specific allocations are but this is
7 something I'm going to be working on very
8 intensively.

9 CHAIRPERSON BARRON: Okay, Council Member
10 Holden, Kallos. Okay, we're going to hear next from
11 Council Member Kallos.

12 COUNCIL MEMBER KALLOS: I want to thank
13 our Chair Barron for, for her strong questioning and
14 opening statement and amazing quotes that opened
15 this. I, I just had a very important question for
16 Vice Chancellor Jane Bowers, I'm concerned that the
17 Chancellor isn't here, I'm concerned that the Vice
18 Chancellor didn't see fit to stay so my question to
19 the... is there somebody from intergovernmental here
20 taking notes for the Vice Chancellor? Okay, so my,
21 my... [cross-talk]

22 CHAIRPERSON BARRON: And just so that you
23 know Council member I was told at the outset that she
24 was on a tight schedule and would have to leave so
25 just so that you know.

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2 COUNCIL MEMBER KALLOS: Right, I, I

3 appreciate it just... [cross-talk]

4 CHAIRPERSON BARRON: CUNY always stays,

5 this is the first time... [cross-talk]

6 COUNCIL MEMBER KALLOS: Okay... [cross-

7 talk]

8 CHAIRPERSON BARRON: ...that a CUNY... no, I...

9 [cross-talk]

10 COUNCIL MEMBER KALLOS: So, I, I guess

11 my... [cross-talk]

12 CHAIRPERSON BARRON: ...that a CUNY

13 panelist has had to leave so... [cross-talk]

14 COUNCIL MEMBER KALLOS: ...my, my question...

15 [cross-talk]

16 CHAIRPERSON BARRON: ...I just want to say

17 that... [cross-talk]

18 COUNCIL MEMBER KALLOS: ...to the Vice

19 Chancellor... [cross-talk]

20 CHAIRPERSON BARRON: And I'm sure there's

21 somebody here who's going to take the questions back...

22 [cross-talk]

23 COUNCIL MEMBER KALLOS: Sure, my, my

24 question... [cross-talk]

25 CHAIRPERSON BARRON: Okay... [cross-talk]

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2 COUNCIL MEMBER KALLOS: ...is just can you
3 educate more students, low income students of color
4 to enter nursing professions and health care with a
5 hole in the ground, can you educate the people there
6 or can you do it better by actually building the
7 school that was intended to educate those students
8 that was planned five years ago? So, my question to
9 the Vice Chancellor is just can you educate more
10 people with a hole in the ground or a nursing school,
11 that is it?

12 CHAIRPERSON BARRON: We will make sure
13 that they get that question and expect an answer to
14 that.

15 COUNCIL MEMBER KALLOS: Thank you.

16 CHAIRPERSON BARRON: And we will make
17 sure we relay the answer so that you'll know. Okay,
18 Council Member Holden.

19 COUNCIL MEMBER HOLDEN: Yes, I too had a,
20 a few questions to the Vice Chancellor so John maybe
21 you can answer. The... there's a search for the
22 university dean of health and human services, do we
23 know how long that search has been going on and how
24 long the position... is, is it vacant the position now?
25 It is, okay. How long has it been vacant?

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2 CHAIRPERSON BARRON: We're going to have
3 to ask you to come to the panel and the counsel...
4 [cross-talk]

5 COUNCIL MEMBER HOLDEN: Sorry, sorry...
6 [cross-talk]

7 CHAIRPERSON BARRON: ...will...

8 COUNCIL MEMBER HOLDEN: Sorry John.

9 CHAIRPERSON BARRON: He's prepared, he
10 knows. Okay and John if... Mr. Kotowski if you would
11 submit to oath.

12 COMMITTEE CLERK: Okay, do you affirm to
13 tell the truth, the whole truth and nothing but the
14 truth in your testimony before this committee and to
15 respond honestly to Council Member's questions? Thank
16 you, please... [cross-talk]

17 CHAIRPERSON BARRON: Please give us...
18 [cross-talk]

19 COMMITTEE CLERK: ...state your name...
20 [cross-talk]

21 CHAIRPERSON BARRON: ...your name for the
22 record. Oh, oh you have to video, we want to see your
23 face as well.

24 COUNCIL MEMBER HOLDEN: Now you're in
25 trouble.

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2 CHAIRPERSON BARRON: Your name please...
3 your name and testimony.

4 JOHN KOTOWSKI: John Kotowski, City
5 Relations, Director for the Central Office.

6 COUNCIL MEMBER HOLDEN: Yeah, so the, the
7 question about the... how long has the position of dean
8 of health and human services been vacant and when do
9 we expect to finish the search?

10 JOHN KOTOWSKI: Okay, the prior dean was
11 Bill Lowenstein and... who had been the dean for
12 sciences for quite a number of years he stepped down
13 and he... his other role was the John F. Kennedy
14 Institute which he went back to so this has been
15 vacant for about I'll say eight months, six to eight
16 months and I'm, I'm not sure Councilman whether or
17 not they've started the search, that I'll find out
18 for you.

19 COUNCIL MEMBER HOLDEN: Because I, I, I
20 agree with Dr. Raab about the associate degrees in
21 nursing, I think we need more bachelor's degrees and,
22 and that's really probably true in most fields the...
23 these days that we need baccalaureate or advanced
24 degrees I'm just wondering and again this... I don't if
25 John you can answer this but why don't we have more

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2 advanced degrees in the health areas especially city
3 tech which led the way for so many years, you know I,
4 I taught at City Tech for a long time and our nursing
5 was... you know department was great, in most, most of
6 the areas dental hygiene, dental lab, nurse... like I
7 said nursing, radiology, vision care, these are all
8 very, very important areas of health care and yet
9 many of them are either associates or, or, or
10 bachelors they're not even what I... why don't we have
11 a masters degree?

12 JOHN KOTOWSKI: I think the presidents in
13 their testimony kind of alluded to that, its
14 resources, its capacity, its... you know it's the
15 ability to bring them on and move them through. The,
16 the health science programs and you were at tech for
17 a long time so you know its limited in space and its
18 limited in resources, I think Councilman Kallos was
19 alluding to the school that Hunter College is trying
20 to form over with, with Sloan Kettering, finances for
21 this have not been forthcoming from, from... you know
22 from the state or... you know from any other source so,
23 you know I think the colleges are trying to build its
24 resources that have kind of hog tied them.

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2 COUNCIL MEMBER HOLDEN: But that's
3 always... that's... I, I was at CUNY for 40 years and
4 it's never been a good budget, we never had a great
5 budget, we... you know we, we expanded at City Tech but
6 I'm just wondering why everything is lagging behind
7 and it's, it's... if it's only about budget maybe we
8 really have to get more vocal with this because
9 associate degrees don't cut it I think today...

10 JENNIFER RAAB: John may, may I say...
11 [cross-talk]

12 JOHN KOTOWSKI: Go ahead please.

13 JENNIFER RAAB: I think it... raised a very
14 good point but I think its... I'm sorry... the, the
15 accreditors often influence what the degree level
16 will be and one of the things... I think the beauties
17 of a CUNY is that you do have the associate level
18 degrees where that is the appropriate and the
19 terminal degrees and the dental hygienist and
20 certainly theologist and we're growing those
21 programs, the accreditors have and Dr. Keizs and I
22 both experience this, been pressuring elevation in
23 any of the degrees so physical therapy for example
24 used to be a masters and the accreditors determined
25 it would be a doctorate and we all had to revamp but

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2 the... so I think most of us within our purviews are
3 looking at what the appropriate programs are and
4 actually are very committed to growing them and are...
5 I think you, you... as Dr. Keizs said I think you're
6 going to see in the next few years more programs
7 where appropriate and I know I'm doing my best to
8 grow our programs so our physical therapy, speech
9 pathology the applications are just skyrocketing for
10 programs that need space, resources, etcetera but we
11 were... we're making plans to grow them and I think
12 also opportunistically looking at degrees. I think
13 both of us had had a conversation for many years
14 about whether there should be a pharmacy degree at
15 CUNY and we both think it should be at our college
16 but we're friends so that's okay...

17 COUNCIL MEMBER HOLDEN: But you had... but...
18 so, you have articulation agreements with all the
19 CUNY schools... [cross-talk]

20 JENNIFER RAAB: So... yes... [cross-talk]

21 COUNCIL MEMBER HOLDEN: ...Hunter and...
22 Hunter and... [cross-talk]

23 JENNIFER RAAB: Well we're... as... [cross-
24 talk]

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2 COUNCIL MEMBER HOLDEN: York... [cross-
3 talk]

4 JENNIFER RAAB: ...appropriate that's right
5 and I think... but I do think the... so, some of these
6 degrees we're... the nursing is a particular crisis
7 because here's a... this is a field where the employers
8 have really determined that a degree that we're
9 giving is not the degree that they want to hire from
10 and I feel... and been very vocal within CUNY that we
11 have to make this commitment at the senior colleges
12 from both us that we really must provide the degree
13 that the employer is looking for so it will be in ten
14 years the number of associate level nurses is being
15 hired is declining... [cross-talk]

16 COUNCIL MEMBER HOLDEN: Right... [cross-
17 talk]

18 JENNIFER RAAB: ...and we really need to do
19 that, we're... some associate level degrees as I said
20 are... that is the right degree and there will be a
21 seamless hiring. The medical lab science program I
22 spoke of that's a bachelor... that's actually a BA
23 degree, every time we graduate a student with that
24 degree one of the hospitals or a quest will hire that
25 student, it's complete growth area so we are

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2 systematically and strategically growing that so I
3 think most of the presidents are really very
4 interested because we know our students will get...
5 will get jobs with these degrees but the, the nursing
6 associate is a particular dislocation that CUNY as an
7 institution is addressing and I think we'll, we're
8 committed to continue to do so... [cross-talk]

9 COUNCIL MEMBER HOLDEN: Yeah, I want to
10 shout out to Hunter by the way, my... I got my MFA from
11 Hunter, a, a great college and... they all are by the
12 way; Queens College, anybody here from Queens
13 College, no... oh, there we go, great, shout out, that
14 was my bachelors but Hunter was terrific, I, I knew
15 Margaret Mag... Dr. Margaret Magnus so... was in the
16 nursing... led the nursing... [cross-talk]

17 JENNIFER RAAB: Yes, yes... [cross-talk]

18 COUNCIL MEMBER HOLDEN: ...department, she
19 passed... [cross-talk]

20 JENNIFER RAAB: Wonderful... [cross-talk]

21 COUNCIL MEMBER HOLDEN: ...but she was...
22 [cross-talk]

23 JENNIFER RAAB: ...she was... [cross-talk]

24 COUNCIL MEMBER HOLDEN: ...she was a good
25 friend of mine... [cross-talk]

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2 JENNIFER RAAB: ...a legend, yeah that's
3 right... [cross-talk]

4 COUNCIL MEMBER HOLDEN: ...and would always
5 talk about the nursing in Hunter and that's why
6 actually I enrolled at Hunter because of Margaret
7 Magnus not in nursing but in art because she said it
8 was a great college and, and, and it is so thank you
9 Dr... thank you all for your wonderful testimony...
10 [cross-talk]

11 JENNIFER RAAB: Well please come visit
12 our, our new art... [cross-talk]

13 COUNCIL MEMBER HOLDEN: I'd... [cross-talk]

14 JENNIFER RAAB: ...studios... [cross-talk]

15 COUNCIL MEMBER HOLDEN: ...love to go back
16 there... [cross-talk]

17 JENNIFER RAAB: You'll have to come by..
18 alright... [cross-talk]

19 COUNCIL MEMBER HOLDEN: I haven't been
20 back in years, but I'd love to go, thank you. Thanks
21 so much.

22 CHAIRPERSON BARRON: Thank you. President
23 Boudreau I just have I guess one or two more
24 questions. So, as, as the school is continuing to
25 meet its goals and have the first graduating class in

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2 2020 you're going to need additional faculty, you're
3 going to need additional... how are you... where are you
4 on that path to getting the additional faculty, how
5 many people are we talking about and is that the same
6 type of faculty that will be now at the hospital when
7 the students begin... [cross-talk]

8 VINCENT BOUDREAU: Yeah... [cross-talk]

9 CHAIRPERSON BARRON: ...the work there?

10 VINCENT BOUDREAU: Yeah... no, the... so,
11 the, the, the faculty at the hospital are employees
12 of the hospital so... [cross-talk]

13 CHAIRPERSON BARRON: Okay... [cross-talk]

14 VINCENT BOUDREAU: ...we're essentially
15 subcontracting, it's a partnership agreement and,
16 and, and so that's a... that's an entirely different
17 faculty, every year in the... when we had the first
18 year of medical students, we are hiring faculty to
19 teach the second year and... [cross-talk]

20 CHAIRPERSON BARRON: Right... [cross-talk]

21 VINCENT BOUDREAU: ...and so now we have
22 the third... [cross-talk]

23 CHAIRPERSON BARRON: Right... [cross-talk]

24 VINCENT BOUDREAU: ...year we're hiring,
25 the fourth year. I'm, I have to say I'll have to get

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2 you the numbers on, on how many we're hiring every
3 year, I will say it is the only place we're hiring at
4 City College now is in the medical school so, it's,
5 it's, its both faculty, it's, it's lab technicians,
6 it's people guiding... doing the research, it's, it's...
7 so, I, I, I will say that I see about 20 hires, I did
8 last year and, and I've, I've... probably if I can
9 remember I've signed papers for about 12 additional
10 people so far this year, that should start to wind
11 down next year but my guess is and I'll follow up
12 with, with, with hard data is... it's about 20 people a
13 year.

14 CHAIRPERSON BARRON: And did I... did I
15 recall you accurately saying... is my recollection
16 accurate that you have students who is sitting on the
17 selections, could you just talk about that briefly?

18 VINCENT BOUDREAU: So, we have... [cross-
19 talk]

20 CHAIRPERSON BARRON: Because I'm always
21 very concerned about the old boy network... [cross-
22 talk]

23 VINCENT BOUDREAU: Uh-huh... [cross-talk]

24 CHAIRPERSON BARRON: ...that sort of blocks
25 people of color, blacks from getting in... [cross-talk]

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2 VINCENT BOUDREAU: Yep... [cross-talk]

3 CHAIRPERSON BARRON: ...and breaking
4 through that because they're not a part of that
5 closed system.

6 VINCENT BOUDREAU: Yeah and I think... and
7 I think that's a legitimate concern, I think... you,
8 you know when we went from the Sophie Davis School
9 which was still an undergraduate program and, and the
10 medical professors... [cross-talk]

11 CHAIRPERSON BARRON: Right... [cross-talk]

12 VINCENT BOUDREAU: ...that taught were
13 typically from other places that would come in all
14 the sudden we had to be the medical school and I
15 think in the initial round of hiring people were so
16 concerned to get the technical expertise that they
17 weren't concerned about the, the, the... you know they
18 weren't concerned that, that the faculty be as, as
19 representative as it needs to be. Last year or maybe
20 it was in the spring of 2016 there was a... there was a
21 little incident on campus between students of color
22 and a couple of students who weren't and it, it... at a
23 moment when the school was moving from Sophie Davis
24 to the medical school it, it gave us a moment to kind
25 of do some soul searching and think about what we

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2 needed to do and what we needed to be, at that time
3 some of the courses in the old Sophie Davis program
4 that were about cultural sensitivity and the needs of
5 the community and how do you emphasize with patients
6 they had been taken out of the curriculum and that
7 had been brought back in, students were concerned
8 that they didn't have a voice in faculty hiring and
9 so in consequence of that they were brought in to the
10 hiring process and this year's crop of, of faculty
11 hires are more diverse in consequence of that and
12 there were some other innovations that came out and,
13 and... as, as a consequence of that, we had brought a
14 team of, of, of medical school professionals from
15 various colleges, three men and women of color to
16 come in and do an audit of how we were approaching
17 these issues but one of the real tangible results of
18 that was the presence of students on, on the faculty
19 hiring process and I think it's been a really good
20 thing for the school.

21 CHAIRPERSON BARRON: Perhaps we can get
22 CUNY to put some students on the search committee for
23 a chancellor and get some movement for getting that
24 process going... [cross-talk]

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2 VINCENT BOUDREAU: That would be
3 fantastic. Do, do we have students on the search
4 party, we do, yeah.

5 CHAIRPERSON BARRON: Okay. Thank you. Of
6 course we always want to get into the data and we'll
7 send the questions to CUNY we always want to know
8 disaggregated information in terms of the health care
9 degree program at CUNY in terms of the number of
10 students by age, gender, high school, residency,
11 race, ethnicity for each of the programs, the nursing
12 program, physicians assistants program, we did
13 already talk about the supports to students in these
14 programs. We did mention the retention rate for the
15 school of medicine, you said you want... how is... what
16 is that retention rate, I don't recall?

17 VINCENT BOUDREAU: Well, so... [cross-talk]

18 CHAIRPERSON BARRON: Have you lost any
19 students... [cross-talk]

20 VINCENT BOUDREAU: So, far... [cross-talk]

21 CHAIRPERSON BARRON: ...from the School of
22 Medicine?

23 VINCENT BOUDREAU: ...we've, we've lost
24 less than five percent of the students, we don't... now
25 we... I, I will say this they're going into the most

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2 challenging part of their medical education right
3 now, so we bring in 70 students, I think our senior
4 class now has 67 students in it so we lost three in
5 that, it's, it's not bad, we'd like it to be better.

6 CHAIRPERSON BARRON: Do we know what
7 happened to the student, was it a manner of academics
8 or were there other social issues at... or finance
9 issues, do we have a way of knowing why that student
10 left?

11 VINCENT BOUDREAU: I don't know a...
12 [cross-talk]

13 CHAIRPERSON BARRON: ...those students
14 left... [cross-talk]

15 VINCENT BOUDREAU: ...specifically I know
16 that the students are in the biology department
17 pursuing a kind of standard pre-med... [cross-talk]

18 CHAIRPERSON BARRON: So, they moved to...
19 [cross-talk]

20 VINCENT BOUDREAU: ...degree... [cross-talk]

21 CHAIRPERSON BARRON: ...another... [cross-
22 talk]

23 VINCENT BOUDREAU: They moved to another
24 program... [cross-talk]

25

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2 CHAIRPERSON BARRON: Science, okay. And...

3 so, we know that NYU, you know came into a big pot of
4 money and they announced that the tuition charges
5 would be fully subsidized for its students going
6 forward because they want to encourage students to
7 work in underserved locations and primary care
8 fields, how can CUNY reconcile its desire for its
9 graduates to provide primary care with the MD tuition
10 program, the MD tuition program at the... at the level
11 that it is?

12 VINCENT BOUDREAU: I, I, I think it's a
13 tough reconciliation to be perfectly honest with you,
14 I, I think our medical school is, is less than the
15 SUNY medical schools, I think the, the... you know the
16 campaign to raise philanthropic monies to defray the
17 cost of education needs to be a real priority for the
18 school and, and I'm, I'm disappointed that it wasn't,
19 you know well underway when we named the school like
20 I, I think to launch a campaign after you name a
21 school is, is, is an awkward set of sequences however
22 I think that... you know if you... if, if you think about
23 what the school needs it, it needs those tuition
24 dollars to run but it would... but our goal should be
25 that those tuition dollars should come out of the

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2 students pockets and so a philanthropic campaign
3 that, that fully funded scholarships for students is
4 a distant goal but I think it's something we have to
5 keep working on, it, it, it's not a satisfactory
6 answer at this moment I think but you know making
7 fund raising for the school of medicine a priority on
8 campus and a campus that really has tremendous
9 philanthropic potential has to be at the top of the
10 agenda.

11 CHAIRPERSON BARRON: And I haven't talked
12 to you directly but my, my goal is to return CUNY to
13 be tuition free as it was when I attended which was
14 the reason that I could attend. Do you have any
15 further questions? Okay, I want to thank the panel,
16 the other data that we need we'll put in writing and
17 send to you, but I want to thank you for your
18 presentation very much...

19 JENNIFER RAAB: Thank you for this
20 opportunity... [cross-talk]

21 VINCENT BOUDREAU: Thank you.

22 CHAIRPERSON BARRON: And we'll next have
23 Jo Wiederman... Wiederhorn who is from the American...
24 Associated Medical Society... no, Associated Medical
25 Schools of New York. Welcome, if you would raise your

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2 right... no. Thank you, if you would just give us your
3 name and you can begin your testimony, thank you.
4 When you see the red light it's on.

5 JO WIEDERHORN: I hope my testimony goes
6 better than that. Okay, my name is Jo Wiederhorn, I'm
7 the President and CEO of the Associated Medical
8 Schools of New York. I want to thank you for this
9 opportunity to present in front of you today. the
10 Associated Medical Schools of New York represents New
11 York State's 16 medical schools. We train more
12 students than any other state in the country, we have
13 more medical schools than any other state in the
14 country and we train more physician residents than
15 any other state in the country. So, medical education
16 and medical school is truly a big business in New
17 York State. We have eight medical schools within the
18 five boroughs of New York, that is a very high
19 concentration of medical schools and you'll see at
20 the back... on the back of the testimony there's a list
21 of all of the medical schools that we have here. the
22 CUNY College of Medicine and previously when it was
23 Sophie Davis, they were part... they are and were parts
24 of our organization. We have been providing... we have
25 been overseeing diversity programs in New York State

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2 since 1985 at that time the science technology entry
3 programs began in the state, we were instrumental in
4 the development of them and up until about three
5 years ago as an organization we oversaw them at ten
6 medical schools within the state. Those programs are
7 designed to get high school and now junior high
8 school kids interested in going into, into science
9 technology or entry at science technology programs
10 at, at the medical schools they concentrated on
11 getting junior high and high school kids interested
12 in going into medicine. About five years ago the
13 state education department changed its funding
14 formula and at that time it became more advantageous
15 for the schools to apply individually rather than for
16 us to oversee them, more money that went directly to
17 this programming that way, so we stepped back and let
18 the schools do it themselves. Currently we oversee
19 six diversity in medicine programs, four of them are
20 post-baccalaureate programs that are unique in that
21 the student applies to the medical school, a medical
22 school will refer them to one of our four post-
23 baccalaureate programs and if the student
24 successfully completes the, the program the, the
25 school that referred him or her has to take them in

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2 their next year entering class. We've had one program
3 at Buffalo since 1991 at the... at SUNY Buffalo, we
4 have over 500 practicing physicians who've gone
5 through that program, we have three other programs
6 around the state those programs are different in that
7 they also provide masters degrees so that when the
8 students complete the master's degree, when they
9 complete the program the have a masters plus they
10 have an automatic entry into medical school. Those
11 programs are also very successful and what we do for
12 those programs is we provide stipends to the students
13 at the Buffalo program in particular the students are
14 not allowed to work because it... when the program was
15 originally developed it was seen to be necessary for
16 kids to really concentrate on their studies as
17 opposed to having to go out and work since many
18 students couldn't quite make the academic
19 requirements because of their need to work when they
20 were in undergraduate school so we provide stipends
21 for the students and in Buffalo the school provides
22 free tuition for the post-baccalaureate program. At
23 the other three programs because they offer master's
24 degrees, the students pay tuition but we provide
25 stipends for them which can either go to paying down

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2 their school loans or for what they need for daily
3 living. These programs also very successful programs
4 unfortunately they have been supported by the state
5 Department of, of Health and over the course of the
6 years they have been... the funding has been cut, two
7 years ago we got a 22 and a half percent cut from the
8 state which made us cut the number of students in the
9 program, we decided to cut the students because we...
10 it was either cutting the students or cutting the
11 student's stipends and we felt if we cut the
12 student's stipends they really wouldn't have enough
13 money to live on and then they'd have to work and so
14 the purpose of the whole program would go down the
15 drain. Now these programs from the very beginning
16 were developed in order to increase the pipeline of
17 underrepresented students in medical school so that
18 if the student applies to one of our medical schools
19 and is put on a wait list for a different medical
20 school if the student gets taken off of that wait
21 list they cannot go to one of our programs and
22 somebody else will go to one of our programs because
23 again the intent was to increase the pipeline for
24 students who otherwise would not have gotten into
25 medical school. So, those are four of the six

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2 programs, our other two programs are at CUNY College
3 of Medicine, one and the other one is at COMMITTEE
4 CLERKNY. I'll get back to those in a minute because
5 we also just started a new program for students
6 who've gone through one of our four post-
7 baccalaureate programs, we have received funding from
8 the state for full scholarships for these students
9 and they're pegged to SUNY tuition. So, we have money
10 for ten students a year to get a full scholarship and
11 in return they need to... they have an obligation to
12 work in an underserved area in New York State for
13 anywhere between two and four years depending on how
14 many years they get the scholarship. So, the first
15 year the get the scholarship, they make the
16 commitment for two years and then it's an additional
17 year after that. We are currently... we just got the
18 budget from the Governor yesterday, we were zeroed
19 out as we were the year before for that program but
20 that has always been an assembly add on so we're
21 going back to see if we can get the assembly to put
22 money back into that program. In terms of our
23 programs with CUNY we have two, one is the program
24 that the president was talking about, we have a
25 learning resource center at the CUNY College of

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2 Medicine and what we do is we support that center, we
3 provide skills, we... I wrote it down just... sorry,
4 academic counseling, coaching, mentoring, there's a
5 pre-matriculation workshop that we support, problem-
6 based learning, skills workshops, they do the, the
7 school does academic in a... evaluation and they
8 provide interventions for at risk students. We find
9 this is really necessary because the students as the
10 presidents said go directly from high school into a
11 medical school curriculum and as students from our
12 post-baccalaureate programs have said, you know once
13 you get into medical school it's like a, a fire
14 hydrant has opened up and everything comes just
15 whooshing right at you and you... you're just like
16 overwhelmed by the amount of work that needs to get
17 done so the intent of the learning resource center is
18 to help the students get through that period. We've
19 been funding that program for about 20 years now, we
20 have a couple of hundred visits a year to the
21 learning resource center that we support. At
22 COMMITTEE CLERK we have a very innovative program
23 where we fund students, we give them stipends and
24 they are paired up with NIH or NSF funded researchers
25 and the intent of that program is to increase the

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2 number of underrepresented students who are
3 interested in going in basic science research. That
4 program also has been very successful and there are a
5 number of charts and graphs at the back of my written
6 testimony but one of the... one of the most interesting
7 things is that between 2008 and 2018 we've been able
8 to track 69 students, of those 37 percent of them
9 went on to, to go to medical school, 49 percent of
10 them went on to go into the biomedical sciences MD
11 PhD... I'm sorry, not an MD, PhD, Master's degree, some
12 further education within the biomedical sciences and
13 14 percent went into other health professions. So,
14 it's a... really a very successful program, we used to
15 fund 30 students a year with our cuts in the D... in
16 our Department of Health funding we now only fund
17 ten, last year we had a little extra money so we were
18 able to fund 13 students, it's a drastic cut from
19 what we used to do at the height of the program. We
20 also used to provide a, a little bit of money for
21 their mentors and what the mentors did was they used
22 this money to help supply their lab and... for teaching
23 purposes, mentoring purposes that sort of thing. We
24 really feel that our programs at CUNY which also at
25 the medical school which we also had to cut with our

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2 cut in funding from DOH, we really feel that those
3 are important programs, they have extremely high
4 success rates and I, I have only one copy but I will
5 be glad to give... to send to you the copies of a... the
6 success rates in all of our diversity of medicine
7 programs. Our post-baccalaureate program, the one in
8 Buffalo the oldest one, 93 percent of the students
9 who entered that program went on to medical school
10 and 85 percent of those actually graduated from
11 medical school and the important thing about those
12 statistics is that once again these are students who
13 otherwise would not have gone to medical school at
14 all and I can tell you a case history about one such
15 student who went to the Buffalo program, he came
16 here, he didn't speak English, he came from Columbia,
17 he is now the Director of Neurosurgery at Cornell
18 Weill Queens Hospital and he says that, you know one
19 of the things that he finds the most enlightening is
20 that most of his patients don't speak English and so
21 it's really great for them to be able to come and
22 talk to him and he can speak to them, relate to them
23 and provide the types of services that the people
24 need and should be getting. So, again one of the
25 things that we are hoping we'll be able to do, I've

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2 heard quite a bit of talking about the cost of
3 medical school, the average student leaves... the
4 average debt that a student leaves with is 191,000
5 dollars after 40... after four years of medical school
6 that's just the principle, if you look at the
7 interest that's accrued on top of that it comes out
8 to 250, 260,000 dollars, this precludes students from
9 going into primary care, they have to get into
10 specialties that will allow them to pay back these
11 loans. So, one of the things that I think we could
12 talk about if you're at all interested is taking the
13 scholarship program that we now do for our students
14 who go through our post-baccalaureate program and,
15 you know doing a pilot program with CUNY Medical
16 School, seeing if we can get some money to provide a
17 couple of scholarships and see how that works out for
18 students who are in the medical school portion of
19 that school and the other thing that I think we
20 should do because one of the major issues that is
21 going on now is the lack of diversity within the
22 biomedical research community and therefore there are
23 a whole series and sets of diseases and conditions
24 that are not being studied and we have been trying to
25 work with a number of the institutions to see if we

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2 can increase the number of underrepresented students
3 who go into biomedical research and one of the things
4 that we could do with COMMITTEE CLERKNY is one, if we
5 could get back to 30 students within our program that
6 would be fantastic, I mean that would be one thing
7 that we could do. We've also had some... they're not
8 even really preliminary discussions but we've, we've
9 talked with the, the woman who runs that program at
10 COMMITTEE CLERKNY about maybe doing a post-
11 baccalaureate program for basic science researchers
12 in conjunction with COMMITTEE CLERKNY. So, that's
13 really... I have lots of statistics that I wrote down
14 as you were talking with President Boudreau about the
15 percentage of students who are underrepresented, I
16 have lots of state statistics which I sort of
17 scribbled down but I could give you... we do enrollment
18 data every year from all of the schools in the state,
19 we break it down by race, ethnicity, gender, we also
20 besides the usual African American and Hispanic
21 Latino we break it down by students who identify
22 themselves as two or more races or ethnicities so we
23 have that breakdown as well and I'd be glad to
24 provide you with any and all of that information.
25 That's my testimony, thank you very much.

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2 CHAIRPERSON BARRON: Thank you, very
3 enlightening, very interesting. So, you started in
4 1985?

5 JO WIEDERHORN: Yes.

6 CHAIRPERSON BARRON: What was the
7 impotence for getting this started?

8 JO WIEDERHORN: Well in... at a... just
9 around that time the AAMC, the National Organization
10 was becoming increasingly aware of the disparity in
11 terms of the number of underrepresented student going
12 to medical school as opposed to white students and
13 they started a program called 3,000 by 2000 and the
14 intent of that program was to see if nationwide we
15 could get 3,000 students underrepresented students
16 into medicine and one of the things that we... if I can
17 just step back, our organization has a committee on
18 diversity in multicultural affairs which is made up
19 of the deans for diversity at all of our medical
20 schools so one of the things that they realized was
21 that you just can't start trying to get students when
22 they're in college and say oh... [cross-talk]

23 CHAIRPERSON BARRON: Uh-huh... [cross-talk]

24 JO WIEDERHORN: ...okay you need to...
25 [cross-talk]

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2 CHAIRPERSON BARRON: Right... [cross-talk]

3 JO WIEDERHORN: ...apply to medical school
4 and we'll help you so the woman who was at that time
5 our in-office director of diversity worked with some
6 of these deans and with Arthur Eves, he was... [cross-
7 talk]

8 CHAIRPERSON BARRON: Oh, yes... [cross-
9 talk]

10 JO WIEDERHORN: ...an assemblyman... [cross-
11 talk]

12 CHAIRPERSON BARRON: Yes, uh-huh... [cross-
13 talk]

14 JO WIEDERHORN: ...from Buffalo and
15 actually Senator LaValle who was from... [cross-talk]

16 CHAIRPERSON BARRON: Uh-huh... [cross-talk]

17 JO WIEDERHORN: ...Long Island and
18 developed this, this step program, the science,
19 technology entry program so that we could start with
20 high school students and then get high school
21 students who were interested and then in 1991 the
22 same group of people applied to the federal
23 government for our first post-baccalaureate program
24 realizing that, you know a lot of the students who
25 were coming up and were interested in going to

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2 medical school just didn't have the qualifications to
3 get in but the admissions committee said all they
4 need is a little academic... [cross-talk]

5 CHAIRPERSON BARRON: Right... [cross-talk]

6 JO WIEDERHORN: ...enrichment, they need
7 time away from their family so that they can
8 concentrate on their studies, they need to know how
9 they can best study, you know they need to be
10 mentored and, and so that was when we put in the
11 grant to the federal government and got our initial
12 grant for our Buffalo post-baccalaureate program. So,
13 we've been doing it a long time and we have great
14 success, we really have great success.

15 CHAIRPERSON BARRON: Well I'm so pleased
16 to, to know now of your program and the questions
17 that I have are what's the average stipend or tuition
18 assistance that you can give to students?

19 JO WIEDERHORN: In our post-baccalaureate
20 program we give 18,000 dollars a year, which really
21 is nothing if the students can't work, you know when
22 it... [cross-talk]

23 CHAIRPERSON BARRON: Uh-huh... [cross-talk]

24 JO WIEDERHORN: ...started out and the... and
25 the students were in Buffalo the cost of living in

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2 Buffalo wasn't that high now we like to tell
3 everybody with the new Buffalo billion the governor
4 put in the cost of everything is going up so that's...
5 it's very difficult for students to survive on eight...
6 18,000 dollars a year that includes their health
7 insurance, their books, their rent, everything so...
8 and then for our scholarship program it's 42,000
9 dollars a year.

10 CHAIRPERSON BARRON: 42,000 for... [cross-
11 talk]

12 JO WIEDERHORN: It... and it's... [cross-
13 talk]

14 CHAIRPERSON BARRON: ...the scholarship...
15 [cross-talk]

16 JO WIEDERHORN: ...pegged to SUNY tuition.

17 CHAIRPERSON BARRON: Oh, I see, okay. Do
18 you find that... I see on the back of your testimony
19 you have a list of, I think what 16 public and
20 private medical schools and these... [cross-talk]

21 JO WIEDERHORN: Yes... [cross-talk]

22 CHAIRPERSON BARRON: ...are the ones that
23 you are... that are part of your organization?

24 JO WIEDERHORN: Yes.
25

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2 CHAIRPERSON BARRON: Do you find that
3 some are more involved than others because you keep
4 referring to Buffalo, SUNY at Buffalo?

5 JO WIEDERHORN: Oh, I keep... that's
6 because that's where our original program was.

7 CHAIRPERSON BARRON: Okay...

8 JO WIEDERHORN: ...but all of our schools
9 are involved in one way or another in terms of our
10 diversity programs not all of them send students to,
11 to our post-baccalaureate program, only ten of them
12 send students to the post-baccalaureate program.
13 Some... you know part of the issue that we have is that
14 some schools its very easy to attract upper...
15 underrepresented students just because of their name...
16 [cross-talk]

17 CHAIRPERSON BARRON: Uh-huh... [cross-talk]

18 JO WIEDERHORN: ...so they don't have the
19 same issues of well this student is good, might need
20 a little help because they were just cherry picking
21 off the top...

22 CHAIRPERSON BARRON: Uh-huh, uh-huh...
23 [cross-talk]

24 JO WIEDERHORN: ...so what we're trying to
25 do with our programs is to let students who don't

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2 necessarily and there are many students, you know the
3 number of students who go to Columbia or Cornell or
4 NYU is miniscule compared to the number of students
5 who go to the rest of our medical schools so we're
6 trying to get all the medical schools to be able to
7 have a fair representation of underrepresented
8 students.

9 CHAIRPERSON BARRON: Thank you so much
10 for coming and for sharing your testimony and we'd be
11 pleased to receive the data that you've offered...

12 [cross-talk]

13 JO WIEDERHORN: Absolutely... [cross-talk]

14 CHAIRPERSON BARRON: ...to send to us.

15 JO WIEDERHORN: Absolutely.

16 CHAIRPERSON BARRON: Thank you so much...
17 [cross-talk]

18 JO WIEDERHORN: Thank you...

19 CHAIRPERSON BARRON: All the best. Are
20 there any others who wish to give testimony? Seeing
21 none this hearing is now adjourned.

22 [gavel]

23

24

25

C E R T I F I C A T E

World Wide Dictation certifies that the foregoing transcript is a true and accurate record of the proceedings. We further certify that there is no relation to any of the parties to this action by blood or marriage, and that there is interest in the outcome of this matter.



Date

January 31, 2019