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PROFILE: NEW YORK METROPOLITAN REGIONAL MEDICAL PROGRAM

GRANTEE: Associated Medical Schools of Greater New York

COORDINATOR: I. Jay Brightman, M. D.

Originally prepared by: Dan Spain  
Operations Officer

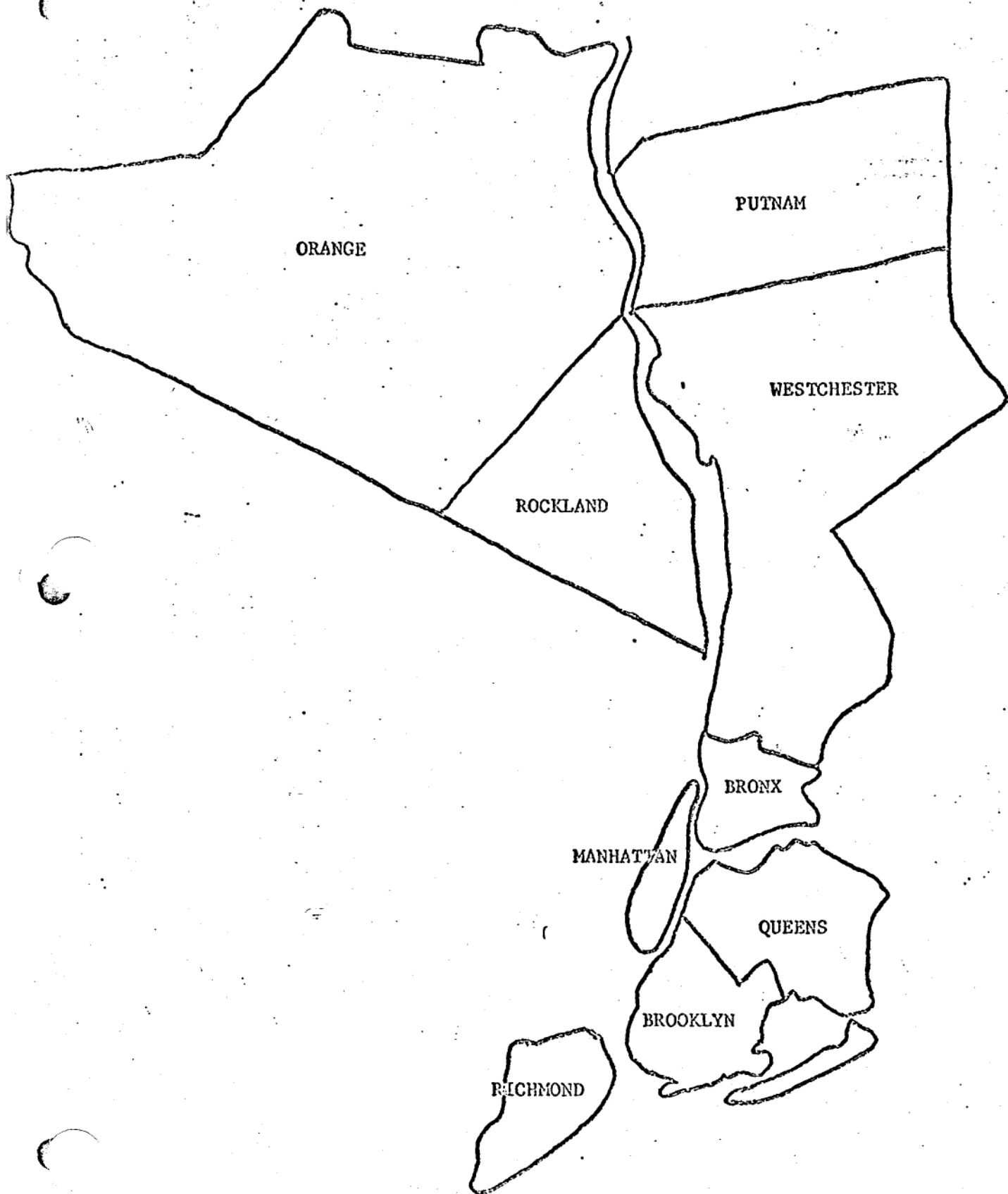
Originally dated: July 29, 1969

Updated:

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ORANGE

PUTNAM

WESTCHESTER

ROCKLAND

BRONX

MANHATTAN

QUEENS

BROOKLYN

RICHMOND

I. GEOGRAPHY

## II. DEMOGRAPHY

## I. Geography

The NYMRMP covers the five counties of New York City and the contiguous counties of Westchester, Rockland, Orange and Putnam.

## II. Demography

This region serves nine million people with 35,000 physicians, 223 hospitals, 43,000 nurses and a multitude of other health professionals.

### 1) Population Statistics

- a) Total Population - 9,000,000  
Land Area - 1,971 miles  
100% urban except Westchester county (93%)  
Metropolitan area: New York City (10,695 persons per sq. mile)
- b) In metropolitan New York boroughs the percent of non-whites ranges from 8.5% to 25%; Long Island and Westchester counties range from 3.2% to 7.7%.
- c) The median age is 34 years.
- d) The population density is 6,000 persons per square mile.

### 2) Health Statistics:

Mortality Rates per 100,000 (1964):

Diseases of heart	449
Malignant Neoplasms	181
Vascular Lesions, CNA	94
General Arteriosclerosis	17
Other diseases of Circulatory System	13
Diabetes	19
All diseases	1,030

### 3) Facility Statistics:

- a) New York Metropolitan Area -- 7 Medical Schools
  - Albert Einstein College of Medicine
  - Columbia University of Physicians and Surgeons
  - Cornell University Medical College
  - New York Medical College
  - New York University School of Medicine
  - State University of New York Downstate Medical Center
  - Mount Sinai School of Medicine

(Two new at later date: Stoney Brook, Long Island - about 1971  
Westchester County - after 1971)

III. POLITICS



b) Hospitals and Beds:

	<u>Hospitals</u>	<u>Beds</u>
Total (all types)	223	107,000
Metropolitan New York boroughs	156	65,000
Westchester, Nassau & Suffolk	67	42,000

4) Personnel Statistics:

<u>Professions</u>	<u>Number</u>	<u>Per 100,000</u>
Physicians	18,622	163
Dentists	8,000	
Nurses	101,221	590.3
(Active)	66,492	387.7

III. Politics

1) Governor: Nelson Rockefeller (R)

2) Senators: Charles E. Goodell (R), 1968-1971  
Jacob K. Javits (R), 1957-1975  
Labor and Public Welfare  
Select Committee on Nutrition and Human Needs  
Joint Economic Committee

3) U. S. Congressmen:

Joseph P. Addabbo (D)  
Appropriations  
John B. Bingham (D)  
Banking and Currency  
Hugh L. Carey (D)  
Education and Labor  
Interior and Insular Affairs  
Barber B. Conable, Jr. (R)  
Ways and Means  
Joint Economic Committee  
Jacob H. Gilbert (D)  
Ways and Means  
Frank Horton (R)  
Government Operations  
Theodore Kupferman (R)  
Interior and Insular Affairs  
Adam C. Powell  
Education and Labor  
Ogden R. Reid (R)  
Education and Labor  
Government Operations

Howard W. Robison (R)

Appropriations

John J. Rooney (D)

Appropriations

Benjamin Rosenthal (D)

Foreign Affairs

Government Operations

William L. Ryan (D)

Interior and Insular Affairs

James H. Scheur (D)

Education and Labor

John W. Wydler (R)

Government Operations

IV. HISTORICAL REVIEW

IV. Historical Review1966

Local representatives of several medical organizations as well as the deans of all the local medical schools early requested the New York Academy of Medicine to participate in forging a program for New York City which would represent all of the various interests in a Regional Medical Program. Meetings were held with representatives of appropriate and interested agencies including the deans of all the medical schools in the city, members of the up-state Planning Group concerned with the regional health program and with representatives of the Regional Medical Program in Bethesda.

It was decided that the most feasible way to establish a Program would be for the medical schools to form a corporation, including the New York Academy of Medicine.

The new corporation, The Associated Medical Schools of Greater New York, became the applicant for the first planning grant.

June, 1967

01 Planning Grant Award. Direct costs: \$967,010  
June 1, 1967 through May 31, 1968

May, 1968

Request to use \$146,050 of unobligated first year planning funds to conduct a two neighborhood health survey was disapproved by the National Advisory Council at its meeting on May 27-28, 1968.

Supplemental Planning Grant Award - Mobile Coronary Care Unit Project. \$295,269 direct costs; \$48,297 indirect costs. The period extends from June 1, 1969 to May 31, 1969. The Earmarked Subcommittee of the Council reviewed this proposal on May 26, 1969, and agreed that this project should be funded. The Council concurred and recommended approval for one year in the amount of \$88,399 plus appropriate indirect costs.

Pediatric Pulmonary Disease Project. The Earmarked Subcommittee of the Council concluded that this project was worthy of support at its meeting on May 26, 1968. The Council concurred and recommended support for one year in the amount of \$206,870 plus appropriate indirect costs.

June 4, 1968

02 Planning Grant Award. Period extends from June 1, 1968 through May 31, 1969. The total award of \$1,041,617 represents new funding of \$783,716 and an estimated carryover of \$257,901 from the first year planning grant.

The second year planning application documented definite progress toward the establishment of a sound organization, recruitment of a qualified staff, and in the development of necessary cooperative agreements with the many health or health related agencies in the New York Metropolitan Area. Several studies were initiated to determine the health needs in the city in relation to health manpower, facilities, etc.

August, 1968

Supplemental Planning Grant Award. Direct costs: \$76,100; indirect costs \$19,543. Council recommended approval of the request for interim support to continue the Memorial Hospital Feasibility Study through May 31, 1969. This study was originally funded out of the first year planning grant.

October, 1968

Dr. J. Frederick Eagle replaced Dr. John Deitrick as President of the Associated Medical School of New York, which is responsible for the New York Metropolitan Regional Medical Program.

January, 1969

Dr. I. Jay Brightman appointed by the Trustees of the New York Metropolitan RMP as Program Coordinator.

March, 1969

02 Planning Grant Extended. At the request of Dr. Brightman, the 02 year was extended four months - from June 1, 1969 through September 30, 1969. DRMP committed \$137,032 in supplementary funds. This request was granted to allow the Region additional time to apply for operational status.

May, 1969

01 Operational Grant Submitted. This application requests renewal support for the core staff of the Region and operational funds for eight projects, one of which has been funded as a feasibility study under the planning grant.

August, 1969

01 Operational Grant Approved. Council and Review Committee agreed that this Region was ready for operational status.

Core Support. Reviewers concluded that funds for both the central staff and for the medical schools staff were appropriate.

Projects. Five (5) of the eight (8) projects submitted were approved with the conditions recommended by the Review Committee and site visitors. The remaining three (3) projects were disapproved with recommendations related to resubmission.

Special Action. The Council considered a special request from the Region for funds to participate in the planning of the New York Health and Hospitals Corporation. They recommended that the proposal be returned for further consideration; that a delegation of Council, Committee and Staff visit the Region to assess the progress of the new Corporation and the Region's participation in its goals; and that this or a revised application be submitted through regular review channels, both local and national.

An award will be made in the amount of \$1,480,136 for support of core and three projects which were funded under the planning grant--Mobile Coronary Care, Pediatric Pulmonary, and the Memorial Hospital Feasibility Study.

September, 1969

Negotiation Meeting in Bethesda.

Representatives of the NYRMP, including Dr. Brightman and Dr. Eagle, were advised that their operational grant request had been approved. It was also explained that support for the Region would be continued by a planning grant award due to the uncertainty of the level of the Fiscal Year 1970 appropriation for Regional Medical Program grants.

October, 1969

Award issued in the amounts of \$1,480,136 (d.c.) and \$291,071 (i.c.)  
Period: 10/1/69 - 9/30/70

V. CORE STAFF

V. Core Staff

- 1) Location - Central Staff: The New York Academy of Medicine  
2 East 103rd Street  
New York, New York 10029
- 2) Chart - See Attached

The Trustees of the AMSGNY approved the appointment of administrative staff beginning July 1, 1967. The Director began on that date and served the first three months with a skeleton staff. The Associate Director joined the program August 1, 1967. As the planning process accelerated, the staff successively added personnel for data research, public-relations and communications administration program development, medical economics, sociology and nursing.

Coordinators with staff have been appointed at each medical school and at the New York Academy of Medicine.

The coordinators and central staff meet regularly to discuss planning activities and proposals for operating grants and feasibility studies, to communicate and coordinate among the schools themselves and their affiliated hospitals, and to discuss their proposals for progress under RMP.

Medical School Coordinators. The coordinators for each of the medical schools and the New York Academy of Medicine are appointed by the respective deans with the advice of the director of the program.



The coordinators, the deputy director, and the two assistant directors on the Central Staff form the cabinet responsible to the director.

New York University School of Medicine

Coordinator - Stephen L. Gumpost, M.D. (60%)  
 Assoc. Coordinator - Jacobus L. Potter, M.D. (30%)

New York Academy of Medicine

Assoc. Director for Continuing Education - Werner Heidel, M.D. (100%)

Columbia University, College of Physicians & Surgeons

Coordinator - Dr. Liphcott

Albert Einstein College of Medicine

Coordinator - William Glazier ( )  
 Assoc. Coordinator - Barbara Berstein ( )

Downstate Medical Center

Coordinator - Charles R. Greene, M.D. ( )

Mount Sinai School of Medicine

Coordinator - Courtney B. Wood, M.D. ( )  
 Assoc. Coordinator - Louise Johnson, M.D. ( )

New York Medical College

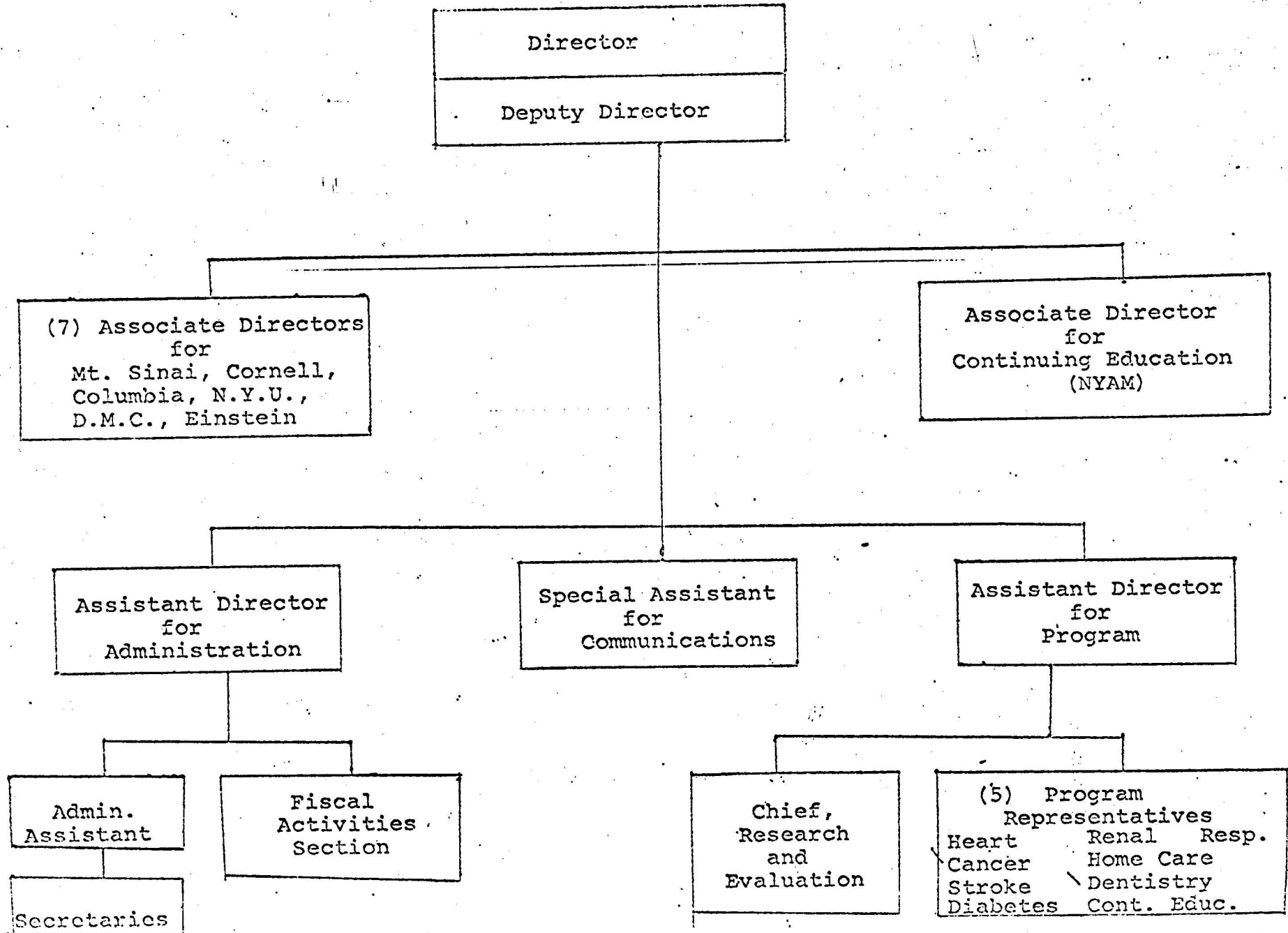
Coordinator - Richard Narren, M.D. ( )

Cornell University Medical College

Coordinator - George G. Reader, M.D. ( )  
 Assoc. Coordinator - Isadore Rosenfeld, M.D. ( )

3) Curriculum Vitae - See Attached

NYMRMP CORE PLANNING STAFF



New York Metropolitan Regional Medical ProgramPersonnel

<u>Central Office</u>	<u>Position</u>	<u>Salary</u>
I. Jay Brightman, M.D.	Director	100%
Leo L. Leveridge	Deputy Director	100%
Bruce D. Bennett	Asst. Dir. for Program Development	100%
	Asst. Dir. for Administration	100%
Fredrica Brooks	Special Asst. for Communication	100%
Peter M. Marano	Chief of Research & Evaluation	100%
Rose Heifetz	Program Representative	100%
Margaret Barnett	" "	100%
Allen Fite	" "	100%
Lucie Benedict	" "	100%
Josephine Kopetzky	Administrative Asst.	100%
	Accountant	100%
Katherine E. Ross	Executive Secretary	100%
	Senior Secretary	100%
Elena Caquias	Secretary	100%
Jacqueline De Bionne	Secretary	100%
Zora V. Kosuta	Secretary	100%
Diane G. Sam	Secretary	100%
Nancy Zayas	Secretary	100%
	"	100%
	"	100%
	"	100%
David S. Lachter	Office Clerk	100%
	Clerk Typist	100%
	"	100%
	"	100%
	"	100%

## Curriculum Vitae

Name

I. Jay Brightman, M.D.

Present position

Director, New York Metropolitan RMP

Current appointments

Associate Professor Community Health  
Albany Medical College

Chairman of Professional Advisory  
Committee and member of board and of  
executive committee, Association for  
Crippled Children and Adults of New York  
State, Inc.

President, Association of State and Terri-  
torial Chronic Disease Program Directors

Education

New York University	1930	B.S.
New York University	1934	M.D.
New York University	1940	Doctor of Medi- cal Sciences
Columbia University	1943	Master of Public Health

Previous positions

Private practice (part-time)  
1938-41

Research fellow - N.Y.S. Dept. of Health  
1941-42

Various positions with N.Y.S.D. of H.  
1943-52

Ass't. Commissioner for Welfare Medical  
Services, N.Y.S.D. of H. on assignment  
1952-56

Executive Director, N.Y.S. Interdepartmental  
Health Resources Board  
1956-60

Ass't. Commissioner for Chronic Disease  
Services, N.Y.S.D. of H.  
1960-66

Deputy Commissioner for Medical Services  
and Research, N.Y.S.D. of H.  
1966-69

## Curriculum Vitae

Name Leo L. Leveridge, M.D.  
257 Alps Road  
Wayne, New Jersey 07470

Born September 1, 1915  
Cliffside Park, N.J.

Marital Status Married - one daughter

High School American High School of Paris, France  
Diploma 1932

Pre-Medicine Antioch College, Yellow Springs, Ohio  
1932-35

Medicine McGill University Faculty of Medicine,  
Montreal, Canada; M.D., C.M., 1940

Licenses Alberta, Canada, 1941; New Jersey, 1942;  
New York, 1942; North Carolina, 1948

Internship (Rotating) New York City Hospital, New York,  
New York; 1940-42

Residency Plastic and Reconstructive Surgery; 1946-48  
Veterans Administration Hospital, Bronx,  
New York City. (Thereby completed training  
requirements of the American Board of Plastic  
Surgery. Not completed are the two years  
full-time practice of the specialty required  
before taking the examinations.)

Pathology Assistant Pathologist, V.A. Hospital,  
Oteen, N.C.; 1950-51

Practice Plastic Surgeon, V.A. Hospital, Temple, Texas;  
1948. Surgeon, Health Center, Celo Community  
Celo, N.C.; 1949. (General Practice and  
Plastic Surgery) Emergency Room Physician,  
Englewood Hospital, Englewood, N.J.; (part-  
time) 1963. Plastic surgery associate,  
Paterson, N.J.; (half-time) July 1963 to  
30 June 1967.

Curriculum Vitae

Name

Bruce D. Bennett

Born

May 30, 1926  
Cleveland, Ohio

Marital Status

Married - four children

Military Status

Veteran-United States Naval Reserve  
1944-1946

Education

Kent State University, Kent, Ohio  
1950-1952, Major in History and  
Sociology.  
Wayne University, Detroit, Michigan  
1952-1953 (Awarded fellowship from  
National Tuberculosis Association for  
study leading to Master's Degree in  
Social Administration).

Positions Held

1952-1956 Assistant Executive Director,  
Winnebago County Tuberculosis Association  
Rockford, Illinois.

1956-1960 Director, Public Relations  
Illinois Tuberculosis Association  
Springfield, Illinois

1960-1966 Program Consultant, Respiratory  
Diseases, National Tuberculosis Association  
New York, New York

1967-Present Assistant General Director  
New York Tuberculosis and Health Association  
New York, New York

VI. OVERALL ORGANIZATION

## VI. Overall Organizations

1) Chart - See Attached

2) All major elements within organization:

- a) The Associated Medical Schools of Greater New York are the grantee. Its members are the seven medical schools in the region and the New York Academy of Medicine. The Trustees are the seven deans and the Director of the Academy; The Trustees are responsible for the financial management, for establishing general policies of operation and the scope of the program, for guiding the planning phase of the program, for setting priorities for approving feasibility studies and staffing patterns. They are guided by recommendations from the Regional Advisory Group and staff. Each Trustee has appointed a representative to the Regional Advisory Group and an Associate Director to the staff to serve as coordinator for his institution. The Director of the Regional Medical Program is the Chief Executive Officer, responsible to the Trustees of the Associated Medical Schools of Greater New York for the execution of all policies established by them with the recommendations and advice of the Regional Advisory Group.
- b) Regional Advisory Group. The members of the RAG are designated by the AMSGNY at the annual meeting of the Trustees of this organization.

The Regional Advisory Group was broadened in representation in February 1969 when the terms of the original RAG expired. The revision was primarily designed to permit adequate representation from all professional groups concerned with Regional Medical Programs plus adequate representation from the nine counties comprising the Region. The Regional Advisory Group meets at least three times a year. It has 88 members and includes nine representatives from medical societies; five from dental societies; five from nursing districts; six from other professional organizations; eleven representatives of voluntary agencies; eight representatives from hospital administration, four planning group representatives; four representatives of RMP county committees, eight official public health representatives; sixteen educational institutions. Twelve members are designated as public representatives and include one executive from the State Charity's Aid Society, one from the Association for the Aid of Crippled Children, and one from HSMHA Region II. Fifty percent of the Regional Advisory Group members are physicians.

List of names - see attached.



- c) Committees: The Regional Advisory Group has a Committee on Planning, Priorities, and Evaluation, which is responsible for the overall monitoring of the program. This group meets nine times a year and does not meet in the three months that the Regional Advisory Group meets. It serves as an executive Committee to the Regional Advisory Group and has 31 members. Dr. J. Frederick Eagle, Dean of the New York Medical College, is both President of the Associated Medical Schools of Greater New York and the Chairman of the Regional Advisory Group.
- d) The Technical Consulting Panel has six sub-committees: the Heart Disease Sub-Committee, which has 12 members; Cancer, which has 19 members; Stroke, which has 15 members, Diabetes, which has 17 members; Hypertension Renal Disease, which has 15 members and Respiratory Diseases, which has 13 members. This panel subcommittee is appointed by the Director, Dr. Brightman, with approval by the Trustees.
- e) County Regional Medical Program Committees. A county RMP committee has been formally organized in Westchester County and officially designated as such by the Trustees. Informal committees have been meeting in Orange and Rockland Counties and on Staten Island. A committee is in the process of organization in the Borough of Queens.

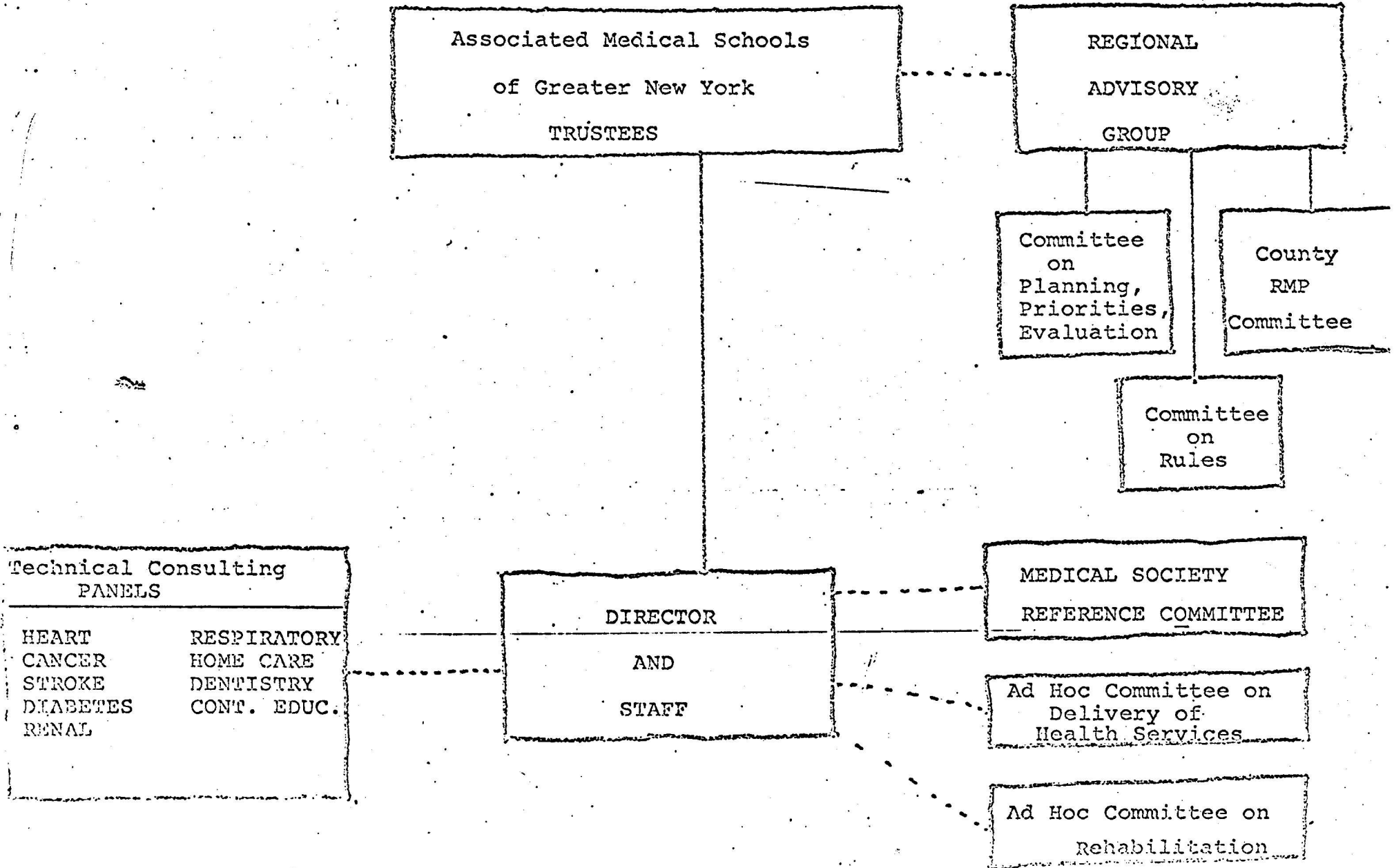
### 3) Review Procedures

The NYMRMP operates through a Central Staff located at 2 East 103rd Street, New York, New York and through the offices of its Associate Directors in the seven medical schools and the New York Academy of Medicine.

Potential applicants are encouraged to contact the Medical School Associate Directors, if they are members of the staff of that school or affiliated institutions, or of any agency located in an area where the medical school or affiliated institution is concerned with community health services. Otherwise, they may contact the Central Office directly. Staff assistance is provided in the preparation of an application.

Each project submitted is assigned to a staff program representative to act as project manager. The Trustees are kept informed of the projects through their monthly meetings with the Director. The application is sent to the Committee on Planning, Priorities, and Evaluation after a Technical Consultation Panel has seen it. This committee indicates the priority that should be given to this project in reference to other projects. The recommendation with regard to technical merit by the Technical Consultation Panel and the desirability and appropriateness by the Committee on Planning, Priorities, and Evaluation are then presented to the Regional Advisory Group for final approval.

NYMRMP. ADVISORY COMMITTEES



VII. GRAND DESIGN

VIII. OPERATIONAL PROJECTS

## VII. Grand Design

Listed below are the Goals and Objectives of the NYMRMP as stated in the regions' operational grant application.

- 1) The Goal - To assure for all elements of the population served by this region the highest achievable level of preventive, therapeutic and rehabilitative care for patients with heart disease, cancer, stroke and related diseases within the framework of PL 89-239.
- 2) The Objectives - To establish projects in continuing education, training of professional health and related personnel and patient care demonstration to assure the availability of the newest accepted medical advances to all segments of the population with particular emphasis on those residing in the inner city and rural areas where health service deficiencies have been most evident.

## VIII. Operational Projects

The following projects were approved by the National Advisory Council in August, 1969. These two projects were considered as renewals and will be funded.

- 1) Project #1R - Mobile Coronary Care Unit, St. Vincent's Hospital and Medical Center of New York

This project extends the coronary care unit concept to the acute coronary attack patient before he gets to the hospital by securing an ambulance, equipping it with portable electrographic equipment and facilities for telephone and radio-telephone transmittal of tracings, a portable electrical lifebullator, and complete equipment for cardiopulmonary resuscitation, including appropriate drug and intravenous therapy medication. The unit is staffed by physicians.

- 2) Project # 2 - Regional Cancer Program - Memorial Hospital for Cancer and Allied Disease

The aim of this project is to establish a cooperative regional continuing education program which will make available to the cancer patient the latest developments of research through the continuing education of physicians and allied health personnel. The professional staffs of 34 hospitals will be involved in learning and using the improved techniques now available for patients with cancer.

3) Pediatric Pulmonary Project, Babies Hospital

This project was funded out of earmarked monies with a commitment through September 30, 1970. It was modified prior to the staff review in August 1969 to include related proposals from St. Vincent's Hospital and Albert Einstein. The modification resulted in extending education and services to three additional areas of the region: Bronx County, Lower Manhattan, and Bedford Stuyvesant in Brooklyn.

The following projects were approved by the National Advisory Council in August 1969. Funds were not awarded.

- 1) Project #5 - A Project Designed to Improve Care of the Patients in Westchester County Through Continuing Evaluation, Clinical Service, Education -- Grasslands Hospital, Valholler, New York.
- 2) Project #7 - A Study of Facilities and Services for Respiratory Diseases and Disorders, in the Metropolitan RMP Area with Council of Tuberculosis and Health Associations of New York State.
- 3) Project #9 - Educational Programs for Allied Health Professionals.