

August 12, 2009

Strategic Planning & Partnerships Commission

Proceedings by Authority

State of New York,
City of Jamestown ss.:
Mayor's Conference Room

The regular meeting of the Strategic Planning & Partnerships Commission of the City of Jamestown, New York was held on Wednesday, August 12, 2009 at 8:00 a.m.

Members Present: Co-Chairman Greg Rabb, Len Faulk, Linda Swanson, Mike Sullivan, Jim Zadoorian, Dave Painter

Others Present: Amanda Chapel, Bill Rice, Lee Harkness, Kerri Brown, Martha Zenns

Co-Chair Rabb called the meeting to order.

APPROVAL OF MINUTES

The minutes of the July 2009 meeting were approved.

MEETING SCHEDULE

- Chairman Rabb announced that he cannot do morning meetings in the Fall due to his school schedule. Late afternoon meetings are the only possibility. Co-Chair Harkness cannot do Friday mornings.
- We will get everyone's input before a decision is made.

NEIGHBORHOOD PLANNING INTERN

- An email went out announcing that the Neighborhood Planning Intern Sylvia is coming in next Tuesday. A reception will be held at Greg Rabb's home on the 21st at 5:00. The intent is for her to meet people. She will be encouraged to attend other events in order to meet other people so that she feels at home.

STRATEGIC GOAL SETTING SESSION

- The plan now is to have something in September.
- There will be three visits by Bob Shibley – one – to get the context of our issues and the people involved; the second, after he gets the context of our issues, a proposal for the City Council/Foundation/Commission retreat meeting will be formatted for late September or early October; the third, will be a follow up to discuss the report and recommendations.
- The first stage would be to have a meeting with the new healthcare policy committee, (he has a background in the Buffalo corridor to help focus that group),

City Council persons, the Mayor and foundation heads. The foundations have developed some ideas and goals as well

- A date and time for the retreat needs to be established.
- Bob will suggest some dates. Jim and Len will try to coordinate some dates for his first visit and then secondly plan a retreat date.
- At the last meeting consultant funds needed to be raised. The goal has almost been reached.
- The evening meeting last time worked out best.

NEIGHBORHOOD REVITALIZATION PLAN

- An intern from the University of Washington, Sylvia is coming next week. She will be here one month. Charles Buki will be coming the following week so it will be the 23rd, 24th and 25th.
- He wants to spend most of the time deep diving in the neighborhoods.
- We had some other thoughts; would be useful to get the realtor involved? It has been difficult getting a realtor to come to the table. Bill Soffel was our contact from Multiple Listing Service.
- The Friday Morning Networking Group is a group of professionals, one representative of a field. A realtor is a member of that group. Possibly she would have an idea.
- Contact will be made with her as well as other realtors. The best time to get together will also be requested. It will be a one-time meeting at this point. The goal of the meeting would be really an intelligence gathering meeting by Charles Buki and the Neighborhood Revitalization Plan.
- The tentative date will be Tuesday the 25th at noon tentatively at Roberto's.
- The steering committee may meet with him again.

HEALTHCARE ECONOMIC IMPACT GROUP

- The group has broken out into sub-committees looking at everything from physician recruitment to the concept of corridor redevelopment by the hospital.
- Two sessions have been held on the recruitment side. The last one was also with individuals who were a little bit more principle to the actual nuts and bolts of recruiting physicians. Trying to identify the major blocks and the major opportunities. Trying to focus our recruiting efforts – where would they be and what is the best opportunity for success?
- A couple things were identified. One is to reconnect with The University of Buffalo because of past ties with our existing physicians, intern programs, internal medicine programs.
- The group has been focusing principally around trying to identify the biggest systemic issues that really we're up against. There's a shortage (1) of physicians to begin with and (2) even if we're able to identify candidates here, how do we collectively make it so that they would see this as a more valuable opportunity than other opportunities that they may be presented with? The key drivers helping to make their decision would be (1) are they related or from the area and how do we

focus on those folks, how do we cultivate those relations and how do we nurture those things throughout the course of the recruiting process?

- The meeting consisted of an intelligence session, everybody around the table tried to ground on those principle areas of where do think we may have the greatest success. We have not lost sight of the immediacy of the issue. There is a loss of Primary Care Physicians in the area. The focus is on the immediate but we also have a perspective on the long term in terms of what we need to do to be successful.
- Olean has a bounty for anyone that attracts physicians to the community. Big banners at the hospital and around town. The amount is approximately \$15,000. It is a community wide campaign, not just the hospital.
- Every community in upstate New York is fighting for it.
- Is there a loan forgiveness program?
- No. that's part of the strategy that is being looked at. The Chautauqua County Health Network did start up a fund, a donor advised fund at the Community Foundation and have \$100,000 in it. It's called the Stan Lundine Medical Improvement Fund. Students have \$250,000 or more of significant debt coming out of school. There's also a state grant program, Doctors Across New York, there were three different platforms, One was a guaranteed salary and one was a loan forgiveness. There was a special scholarship that if you trained in New York State, and you stayed in New York State.
- The State assesses each community and what they think the position shortage is and there's a lag of a couple of years. Jamestown has had some major retirements and exodus when they first looked at the needs of the community Jamestown was ok, now we're out of sync. The hospital is going to be applying for that grant and it is significant dollars.
- The biggest thing that new physicians are looking for is lifestyle issues, because these guys are on call all the time versus other communities that are 20 people deep so you're on call schedule is limited.
- The hospital is working on recruiting what are called hospitalistic folks who can practice within the hospital to offload some of the on-call issues. This is compounded now with what's called medical backup which means there's always a physician they rotate with as part of their privileges at the hospital. They are the physician of last resort. If someone comes into the hospital and has no primary care, no medical history and has all types of issues. The doctor has to treat that patient but someone has to be assigned to manage the medical conditions of the patient. If there is no specialist or there is not a complement of doctors who are trained to manage that, the medical backup is you. The doctor could be a primary care doctor and all of a sudden now needs to deal with other issues he is not trained in. His medical liability carrier is saying he is putting himself in a significant risk point because he is not trained in those areas.
- The Joint Venture portion is another sub-committee. How do we improve a platform that the physicians in the hospitals can work together to form joint relations.
- Dr. Don Pamisano spoke at Chautauqua Institution. He is the former President of the American Medical Association. He's very prominent, talking about healthcare reform. One of the topics that he touched on was the future of hospital/physician relations. WCA is working to try to improve the perspective of both sides to

recognize that the new healthcare reform environment's going to require a greater degree of interrelations.

- Specifically, WCA is working with 31 Sherman Street which is the Physician Office Building next to the Hospital. It's owned by a group of physicians and WCA is getting very close to redeveloping that under a joint hospital physician model.
- The physician community is now showing an interest in redirecting some of their ancillary services back into the hospital because the trend had been to pull these services out into their physician practices. There are benefits to that from the physicians' respect but financially detrimental to the hospital. As long as that continues to happen, the hospital lacks the resources to reinvest in the area.
- The Corridor area general concept was to develop a corridor with folks to populate those buildings and resources to redevelop the area. Given the existing physician condition and the resources that are within the community, a more practical idea is emerging relative to the development of this area. It has to do with more looking at how do we create more open space around the hospital? How do we create a more inviting environment in that whole corridor? How do we take some of the neighborhood community initiatives under way and deploy those around the hospital? It really becomes creating more green space, looking at the parking lot, etc? How to make the area more inviting while at the same time, looking for those development opportunities. Bob Shibley has been asked to give us some perspectives and help us think through some of these concepts.
- A neurologist with JAMA – Dr. Peters – left the area because he was not making enough money apparently for JAMA for them to keep him. He was an excellent neurologist. If there had been a possibility he could have done more with the Hospital, maybe there would have been a possibility he could have stayed. It's not just recruiting, but also retaining.
- Why is there a revolving door? One of the difficult things has been recruiting people of different cultural backgrounds in Jamestown and western New York. With Muslims or Budists it's a very small community base for them. That's one of the difficulties. Trailing spouses are miserable that are not from here. It is a difficult area to come to from the big city to survive here with no family and no support structure. How welcoming of a community are we? Being a small town physician is different than being a company physician or a specialist that just works 9-5 in a really large practice. To get privileges at the Hospital, you must take back up call; and in a large teaching hospital, there are not those expectations because residents do all that and interns and medical students are not supposed to do that.
- A very important point is the financial and lifestyle issues that physicians expect. A neurologist can be recruited anywhere. The physicians derive their income from other physicians who refer to them. The ability for the physicians to create the appropriate professional relations relative to that is what drives their economic base. The hospital does not employ the physicians. When JAMA recruits someone new the rest of the practice has to support that doctor to be successful.

URBAN DESIGN PLAN

- The façade continues on the Field & Wright Building and will be completed in the next two weeks. Work continues on Jim Walton's building and the alleyway next door. Fencing and landscaping on the entryway of that. The Swanson Building next to the Reg Lenna building has been completed but more work will be done on the windows. Thurston Terrace started last week and they are at McDuff's and are working west. Hoyt Alley has been completed. Potter's Alley is being worked on. The WiFi is up and running downtown and can be accessed anywhere. Renaissance Square by the Ice Arena and BWB Building is having fencing going in this week. Member item funding from Cathy Young has not been determined. Virtual Downtown is working with Digital; the project is underway. It will be presented at the International Downtown Association meeting this Fall.
- A new Executive Director for the Lucy-Desi Center has been hired. She started last Monday.
- The festival went well this past weekend.
- The Taste of Jamestown had nine restaurants this year and sold in excess of 14,000 tickets. That's even up from last year and that's with the rain. Events are going very good this summer downtown, except for the rain.

NEXT GEN TASK FORCE

- The group did not meet last month. Emails go out to the entire group even if Joelle and Kerri cannot attend to encourage them to participate.
- If any events are going on and individuals are looking for volunteers send Joelle or Kerri an email and they will get that out to the Next Gen Leaders. It's a great opportunity for them to volunteer and network.
- The last Thursday of every month social gatherings continue to be held in order to look for networking opportunities for the young professionals. The last networking event had 30 and the prior gathering also had about 30. Approximately 45-50 young professionals have been reached in the area. Positive feedback continues from it. The important thing is to retain them, keep them posted of career opportunities. Networking is the way to push them in this type of community so the group pushes them to get involved in whatever they can to be involved in order to meet people.
- The young professionals group at the Institution will also be involved. Most work in the Jamestown area.

There being no further business, the meeting was adjourned.

James N. Olson
Director of Financial Services/City
Clerk