Message from the Chairman

It is a pleasure to introduce this year’s annual report for the Department of Public Health. When we began planning for this report, we were focused on the department’s continuing development at a time when our healthcare system and institutions are constantly being challenged by issues of quality, access and cost - all areas of interest and expertise in the department. But on September 11, our world changed and we were faced with a new set of challenges in medicine and healthcare: bioterrorism.

“Responding to Change”
Fortunately, we were already well positioned both to begin addressing these new problems and to shape our response to the possibility of a bioterrorism attack. Faculty in the Division of Outcomes and Effectiveness Research had been working for over a year on a federally funded project to develop a computerized model to optimize the delivery of antibiotics or vaccines in New York City and to study how best to use the NewYork-Presbyterian Healthcare System’s hospital beds in a public health crisis. We immediately expanded beyond these efforts by developing complementary projects. Several faculty members are now working on a decision analysis, or guide, to aid physicians confronted with the prospect of new, rare and life-threatening illnesses. They are also developing new ways to differentiate between unusual “bioterrorism” illnesses and common ailments such as influenza in both the emergency and outpatient settings.

In addition, we have been active participants in the hospital’s bioterrorism task force and lead in its efforts to coordinate activities with the New York City Department of Health and the Mayor’s Office of Emergency Management. Our developing expertise in this arena has resulted in numerous presentations and educational sessions both within our own institution and elsewhere. Several publications are in progress. I am very proud of our swift response to this enormous and acute public health challenge.

In addition to our important activities in response to the events of September 11 we have had an excellent year. One of the highlights was the completion of the renovations to our home in the Kips Bay building. Our reopening ceremony in May was a joyous and memorable event. We are especially thankful to the Dean and to our generous donors for supporting the creation of this magnificent new space.

“A Growing Department”
The year also saw areas of significant growth as we continued to build on the organizational framework we established last year. We formed a new Division of Medical Ethics in collaboration with the Department of Medicine. We are very fortunate, indeed, to have an excellent leader of this division in Dr. Joseph Fins. The division has gotten off to a great start securing new funding and collaborating with faculty both within and outside of the department. Cathy Acres recently joined the division and will serve as the Administrative Director.

The Division of Outcomes and Effectiveness Research continued its steady growth with the addition of Bruce Schackman, who joined us after completing his PhD at the Harvard School of Public Health. The division has had a very successful year in terms of new grants and projects funded by the NewYork-Presbyterian Healthcare Network, federal and local government sources and private foundations.
The Division of Community and Public Health Programs has expanded and added a new dimension with the addition of Dr. Juan Emilio Carrillo. Dr. Carrillo, an internist and public health physician, has a long history of successful activities in community medicine and will work with us to develop additional programs to serve communities on the Upper East Side of Manhattan and throughout our Network hospitals’ catchment areas. The Adult Services Clinic has also joined the division and has thus consolidated the Medical Center’s two methadone programs under the sponsorship of the department.

Our Division of Prevention and Health Behavior has been more active than ever in its research to uncover the causes for substance abuse and to develop comprehensive prevention strategies. The division is actively recruiting new faculty to expand its current focus to include strategies for the prevention of heart disease and cancer.

Last year we launched two consulting programs. The Clinical Research Methodology Core, directed by Dr. Linda Gerber, is already becoming a major resource for clinical investigators in the Medical College. The Core’s expertise in biostatistics, data analysis and study design puts it in a key position to assist the Medical College as it embarks on its new strategic plan to enhance clinical research.

Under the leadership of Dr. Madelon Finkel, our “external” consulting group, Cornell Analytic/Consulting Services, has begun to reach out to our Network and affiliate hospitals and to private industry, offering educational programs in clinical research methods and consultation services to assist in research design and analysis.

As a result of these and other new efforts that you will read about in this report, our department has grown substantially. We have added 18 new faculty and staff. Our operating budget has grown 14% over the last year, and the outlook for the future is bright.

The events of the past several months clearly indicate that our work is more important and more meaningful than ever before. Our research informs critical clinical, healthcare, and policy decisions. Our outreach programs strive to bring needed comprehensive care to the community. Our educational endeavors help prepare physicians, institutions, communities and public agencies to meet the healthcare challenges of today and tomorrow.

We are a growing department addressing the challenges of healthcare’s changing times.

Alvin I. Mushlin, M D, ScM
Chairman

"The events of the past several months clearly indicate that our work is more important and more meaningful than ever before”.  
Al Mushlin
Division: Health Services and Policy Research

The Division of Health Services and Policy Research is charged with studying organizational and financial issues pertinent to the U.S. healthcare delivery system. Its activities include studies on financing and reimbursement of healthcare programs, quality of care issues, pharmacoeconomics and pharmaco-epidemiology.

New Recruitment

We are currently conducting a nationwide search for a Division Chief for our Health Services and Policy Research Division. This individual will lead a group consisting of current faculty in the department involved in health services and policy research, and will undertake the recruitment of additional junior faculty. During the past year, we interviewed a number of exceptional candidates and are hopeful that a final decision will be arrived at during the upcoming academic year.

Research Activities

New research activities encompassed participating in the Agency for Healthcare Research and Quality grant on Integrated Delivery Systems and Clinical Preparedness for Bioterrorist Events in collaboration with the Division of Outcomes and Effectiveness Research; a subcontract with the University of Medicine and Dentistry of New Jersey for a prostate cancer study; pharmacoeconomic modeling for asthma and diabetes, and an evaluation of a telemedicine monitoring program for post-transplant renal patients. A number of these projects are a result of the efforts of our newly created Cornell/Analytic Consulting Services unit. This unit was officially launched during the academic year and is directed by Dr. Madelon Finkel.

Education

During the 2000-01 academic year, faculty members of the division, under the leadership of Dr. Finkel, offered a new course to first year medical students on evidence-based medicine, and developed a new course for second year students on the U.S. healthcare system. They continued to offer the first year course in epidemiology and biostatistics, and the third year rotation in health systems. The division also presented a seven-week course to residents in family medicine at The Brooklyn Hospital.

The division inaugurated the Lorraine and Ralph Lubin Distinguished Visiting Professorship in Healthcare Policy. The first holder of this professorship was Steven A. Schroeder, M.D., President and Chief Executive Officer of The Robert Wood Johnson Foundation.

Future

The division looks forward to concluding its search for a new division chief who will provide us with the leadership to build and fulfill our mission to conduct research on the organization, financing and delivery of healthcare. We will take advantage of the hospital merger and the extensive healthcare network to do health policy research and to study system initiatives in order to enhance the accessibility, quality and cost-effectiveness of care.

Hirsch S. Ruchlin, PhD, Acting Chief
Division: Outcomes and Effectiveness Research
The division, in its second year in the Department of Public Health, has had an exceptional year of growth on the research and recruitment fronts.

New Recruitment
The division is pleased to welcome the addition of Bruce Schackman, PhD to its research team. Dr. Schackman recently completed his PhD in health policy with a concentration in decision sciences at Harvard University and joins us after a successful business career, most recently with CIT Venture Capital. Dr. Schackman is interested in treatment decisions for HIV and hepatitis C populations.

Research Activities
The division is engaged in a series of research projects designed to improve healthcare delivery across our network and region. Of particular note, over the past 18 months, we have been engaged in a federally sponsored study to analyze how best to organize the healthcare delivery system to respond to a large-scale anthrax attack in the New York metro region. The project titled Integrated Delivery Systems and Clinical Preparedness for Bioterrorist Events is the first task order awarded to the division under our five-year contract with the Agency for Healthcare Research and Quality. This contract was awarded to nine institutions across the nation and allows Weill Medical College to participate in competitive bidding for fast-track research on cutting edge issues in healthcare.

Dr. Nathaniel Hupert has taken the lead role in the bioterrorism project and developed a computer simulation model of the response of the New York-Presbyterian Healthcare System to a known anthrax bioterrorist attack in New York City. This system will form the laboratory for our simulation and modeling of the clinical, public health, communication, and economic impact and response to an influenza outbreak and a terrorist event. Several of our faculty members have been recipients of exceptional new awards during FY2000-01: Drs. David Battleman and Linda Gerber each were awarded a Weill Medical College Pilot Award in Outcomes/Quality of Care/Health Services Research. Dr. Gerber's project will develop a survey instrument and pilot data to strengthen an R01 NIH application to study factors influencing change of dietary behaviors in low-income populations with hyperlipidemia. Similarly, Dr. Battleman's project will provide data to support an intended submission to the Agency for Healthcare Research and Quality for a Center for Education and Research on Therapeutics Grant.

Dr. Nathaniel Hupert was nominated by the Dean and awarded the New York City Council Speaker's fund three-year award for his project titled Prospective Multi-center Study of the Role of Racial and Ethnic Disparities and Treatment Variation in Diabetic and Non-diabetic Foot Ulcer Outcome. The division has also been engaged in several on-going research projects: Computerized Decision Tool for Community Acquired Pneumonia funded by the Aetna Quality of Care Research Fund, PI: Mark Callahan, MD; Economic Consequences of Bacterial Resistance funded by the Merck Quality of Care Foundation, PI: David Battleman, MD, MSc; Psychosocial Factors and Cardiovascular Disease sub-contract with Mt Sinai, PI: Thomas Pickering, MD, WMC PI: Linda Gerber, PhD.

Research Core Support
Of special note are the contributions made by some of the division's faculty members to the Weill Medical College Core resources. Dr. Linda Gerber serves as Director of the Clinical Research Methodology Core Facility and Paul Christos, MS, MPH, serves as the CORE's lead Biostatistician.

Education
Division members participate in teaching activities for a number of the Department of Public Health courses, as well as other courses across the undergraduate and medical curriculum. The division runs a highly subscribed training program for residents called the Managed Care and Health Systems Rotation. Funding for the program is provided by Empire Blue Cross and Blue Shield and from the Departments of Medicine at Weill-Cornell and Columbia. The rotation is the largest joint-training program for residents from the two New York-Presbyterian Hospital campuses. Of special note, the medical students recognized Paul Christos as an outstanding teacher for his efforts in the Biostatistics course taught by the Department of Public Health.
Patient Care activities
The division is committed to providing our physicians/scientists access to clinical activities as a crucial component of their ongoing work in clinical research. All of our physicians participate at the Cornell Internal Medicine Associates practice, providing in-patient and outpatient services and serve as advisors, role models and teachers to junior faculty and residents by participating in PIC rotations.

Future
Dr. Battleman and Dr. Callahan received a two-year grant from the Academic Forum to undertake a prospective study on predictors of appropriate care for patients with congestive heart failure. This will be a multi-center study, and aims to understand which patients are at risk for not receiving adequate beta-blocker and ACE-Inhibitor use.

The Agency for Healthcare Quality and Research (AHRQ) awarded a three-year grant for the study of medical errors in hospital settings in November 2001. Dr. Hal Kaplan at Columbia is the PI for the overall study, which will involve three academic partners (Columbia, Weill-Cornell, and the University of Chicago) along with 10 community hospital partners from the NewYork-Presbyterian Healthcare System. Dr. Callahan is the Weill-Cornell site PI, and will collaborate with Drs. Battleman and Mushlin as key members of the analytic team for the overall project.

The division is actively recruiting for new junior faculty members to join the department in the summer of 2002. It is anticipated that two new faculty will be hired this year, and a number of outstanding candidates are under active consideration. Additionally, to support the ever-expanding research mission of the division, active recruitment is underway to hire two new research nurses.

Division: Medical Ethics
In January 2001, Antonio M. Gotto, Jr., MD, Dean of Weill Medical College of Cornell University, established the Division of Medical Ethics in the Departments of Public Health and Medicine, with its administrative and research home in Public Health. The division will lead Cornell’s efforts in the conduct of research in medical ethics and coordinate its curricular activities in this increasingly critical area of study. Areas of divisional interest will include the ethics of health services, outcomes and policy research, the ethics of clinical decision-making and the care of the terminally ill. It will also cover resource allocation and health economics, as well as the ethical dimensions of clinical and basic science research.

New Recruitment
Joining the division last year were Cathleen A. Acres, RN, BS, MA; Victor W. Sidel, MD; Alan Gibofsky, MD, JD; Eric J. Cassell, MD and Lisa Staiano-Coico, PhD. Cathleen, who will be the Assistant Director of the division, joins us from the NewYork-Presbyterian Hospital where she has served as a patient representative and worked collaboratively with Dr. Fins on palliative care, medical ethics and patient consults for the last five years. We are also very pleased to count among our ranks Drs. Sidel, Cassell and Gibofsky, who are long-standing faculty members of the Department of Public Health. And finally, we are very pleased to welcome Dr. Staiano-Coico, Senior Associate Dean of Research at the Medical College, with a new secondary appointment in Public Health.

Research Activities
The division has been extremely active on the research front. In addition to ongoing efforts on the project titled From Contract to Covenant in Advance Care Planning, funded by The Fan Fox and Leslie R. Samuels Foundation, the division submitted and was awarded several exceptional grants. Contract to Covenant is a collaborative project of the Weill Medical College divisions of Medical Ethics and Geriatrics and the Missoula Demonstration Project. The project’s objective is to improve advance care planning by re-conceptualizing the patient-proxy relationship as one that has both contractual and covenantal dimensions. Our goal is to better describe the values that patients and their proxies bring to advance care planning, in order to modify how both the law and medicine understand and use advance directives.

The Fan Fox and Leslie R. Samuels Foundation continued its generosity and support to the new division by funding two new important initiatives. The first of these, Integrating Palliative Care into Hospital Practice: Development of Educational Materials for the Goals of Care Assessment Tool (GCAT) seeks to improve the integration of palliative care into hospital practice. To address this problem and improve the provision of end-of-life care in the hospital setting, the division proposes the development and testing of Goals of Care Assessment...
Tool. The G C A T is a process-oriented, goal-setting instrument designed to help clinicians recognize when death is near and plan more timely and comprehensive end-of-life care strategies in conjunction with patients and their family. A second award granted by the Fan Fox and Leslie R. Samuels Foundation supports the project titled Establishing a Faculty Associates Program in Medical Ethics at Weill Medical College of Cornell University. This three-year award provides funding for an innovative program that offers advanced training and clinical research in medical ethics to our Well-Cornell faculty. Recipients will receive funding to devote 20% of their time and effort to the Faculty Associates Program over three years, with award renewals after the first and second years. At the conclusion of this program, faculty associates will be expected to pursue independent clinical and scholarly work in medical ethics with extramural funding.

**Patient Care Activities**

With support from the hospital, staff members are engaged in an active ethics consultation service in conjunction with the Office of Patient Services at New York Weill Cornell Medical Center. In this capacity, we seek to help patients, families and clinicians address ethical dilemmas in clinical practice. We consult on all of the clinical services and run a monthly center-wide ethics committee meeting. These sessions review ethics case consultations, as well as provide continuing post-graduate education in clinical ethics.

**Education**

The division participates at all levels of educational activities at the Medical Center, ranging from the medical ethics component of Medicine, Patient and Society I, II and III for medical students; staff education for medical interns; intramural education programs and Ethics Rounds.

**Future**

The mission of this newly established division will be to better translate ethical principles into clinical practice and education and to make ethics a theme in clinical and health services research. A major focus will be efforts to improve the care to patients at the end of life and their families, both within our institution and nationally. In addition, we plan to address the ethical dimensions of medical research.

Joseph J. Fins, MD, Chief

**Division: Prevention and Health Behavior**

The mission of the Division of Prevention and Health Behavior is to conduct research concerning behavioral aspects of chronic disease risk and prevention. This division's work focuses on (1) identifying behavioral risk factors for major health problems such as cancer, cardiovascular disease and alcohol and drug substance abuse; (2) developing and evaluating intervention strategies to prevent these health problems and (3) improving the skills of health professionals, as well as educating the general public about behavioral strategies for chronic disease risk and prevention.

**New Recruitment**

The division has recently begun a national search for two new faculty members, one in the area of cardiovascular health and the other in the area of drug prevention methodology, to increase its capacity to conduct research in prevention and health behavior. A number of outstanding candidates have been identified and it is anticipated that the selection process will be concluded during the 2001-02 academic year.

**Research Activities**

The Division of Prevention and Health Behavior currently has several NIH grants, including a NIDA-funded Multi-Ethnic Drug Abuse Prevention Research Center, which is conducting a large-scale prevention trial with urban minority adolescents. The Center grant was designed to increase our understanding of the techniques, strategies and programs capable of reducing the incidence and prevalence of drug abuse with a broad range of individuals, through comprehensive and strategically planned prevention research efforts. The division also has several on-going collaborations with outside research groups. These collaborations include a project with Dr. Jeanne Brooks-Gunn of Columbia University's Teacher's College that examines the role of cognitive-behavioral skills in mediating the impact of a drug abuse and violence prevention program among inner-city minority youth, and a project with Dr. Richard Spoth of Iowa State University to examine drug prevention among rural youth.
Dr. Kenneth Griffin submitted and was awarded funding from NIDA for his two-year project titled Personal Competence Skills and Adolescent Alcohol Use. Dr. Botvin was awarded a five-year merit award in continuation for his work on Drug Abuse and Violence with Minority Youth, and he was the recipient of a generous gift from Mrs. Tyler Jones Tarango in support of his work.

During the past year, the division has been heavily committed to dissemination activities, with 44 completed publications and 28 conference presentations. In addition, the division held its first annual Drug Prevention Summit at Snowbird, Utah, where leading experts in drug abuse prevention met to discuss effective approaches to prevention. Another critical dissemination activity has been the development and publication of a new peer reviewed scientific journal in prevention called Prevention Science. This journal is the official publication of the Society for Prevention Research for which Dr. Botvin, Division Chief, is the founding editor. It serves as an interdisciplinary forum designed to disseminate new developments in the theory, research, and practice of prevention. As a further indication of the leadership the division is providing, both at Cornell and nationally, Dr. Botvin was elected and became President of the Society for Prevention Research at the annual conference, which was held in Washington, D.C. in June.

During the year, members of the division continued to serve on National Institutes of Health grant review committees and expert advisory panels, including expert advisory panels on smoking prevention for the Centers for Disease Control.

Education
Under the direction of Dr. Lewis Drusin, the division runs an ACGME accredited residency program in General Preventive Medicine. Its goal is to produce leaders in modern public health who intend to pursue careers in either academia or in healthcare policy positions. Areas of emphasis include community, clinical and preventive medicine, outcomes and clinical effectiveness research, health services and policy research, epidemiology, medical care organization, and health economics.

Future
The division looks forward to concluding its search for new faculty, not only to help us continue our success in the areas of drug and violence prevention, but to broaden our efforts into other areas of prevention and health behavior. The upcoming year will also encompass a strategic planning effort to re-evaluate the future and focus of the Center.

Gilbert J. Botvin, PhD

Division: Community and Public Health Programs
The Division of Community and Public Health Programs has experienced extraordinary growth during the fiscal 2000-01 year, primarily due to the addition of the NewYork-Presbyterian Adult Services Clinic. In January 2001, the clinic was officially consolidated under the administration of the division. This merger is part of the strategy developed by a tri-institutional ad-hoc committee established by the Dean to develop strategies to enhance the clinical, research and educational mission of the methadone clinics. The committee included medical and administrative leadership from the Rockefeller University, the NewYork-Presbyterian Hospital and Weill Medical College and was chaired by Dr. Alvin Mushlin.

New Recruitment
We are pleased to welcome the addition of J. Emilio Carrillo, M.D., M.P.H to its faculty ranks. Dr. Carrillo will continue his role as Medical Director of the NewYork-Presbyterian Hospital Community Health Plan and the NewYork-Presbyterian HealthCare System and will work with the division to develop new programs toward the establishment of an office of community medicine.

Research Activities
Dr. Carrillo was awarded a sub-contract with Denver Health on an Agency for HealthCare Quality and Research sponsored project titled Capacity to Conduct Studies on the Impact of Race/Ethnicity on the Access, Use and Outcomes of Care. Utilizing the integrated electronic information system across seven network hospitals, Dr. Carrillo is studying approximately 500,000 unique patient registrations for racial/ethnic disparities in treatment.
In addition, Dr. Sonia Austrian continued her work on the project titled Relationship of Caregivers’ Health to Social Support and Social Networks sponsored by the Cornell Gerontology Research Institute. This pilot study investigated the relationship between a caregiver’s perceived health and the presence or absence of social networks and social supports.

Patient Care Activities
With the addition of the Adult Services Clinic to the division’s already existing Adolescent Development Program, our methadone programs now reach a client base of over 350 patients. Under the leadership of Dr. Elizabeth Khuri and Dr. Aaron Wells, we are working on initiatives to expand services such as primary care, launch innovative programs such as medical maintenance, explore new research opportunities, and continue to consolidate our administrative and business practices. In light of recent events, the important role played by our employee assistance programs has become even more self-evident. The division runs two employee assistance programs: The Employee Assistance Program Consortium, servicing employees of the Medical College and its neighboring consortium institutions, directed by Dr. Sonia Austrian and the Employee Development Center, which provides services to corporations throughout the New York area. Both programs offer professional and confidential counseling to employees who are experiencing difficulties both at home and at work. The mission is to provide services that will result in a humane yet business-oriented approach to productivity and to the general well being of employees. Finally, The Midtown Center for Treatment and Research, a substance abuse treatment program, located in midtown Manhattan, continued its success under the leadership of Martin Sherry by launching a new executive track program. This new program fills a gap by providing individual and group counseling substance abuse services to New York’s executive employees.

Education
Division faculty participate at all levels of educational activities at the Medical Center. In particular, under the direction of Dr. Ann Beeder, it runs an ACGME-accredited residency program in Addiction Psychiatry. This one-year program consists of didactic, clinical-spectrum services, teaching, administrative and elective opportunities.

Future
The mission of the Division of Community and Public Health Programs is to continue to provide substance abuse services and to expand its scope of activities to encompass a broad array of community programs in the areas of disease prevention and health promotion.

Robert B. Millman, M.D., Chief
Faculty Profiles

Alvin I. Mushlin, MD, ScM
- Chairman
- The Nanette Laitman Distinguished Professor of Public Health
- Public Health Physician-in-Chief of the New York Presbyterian Hospital – Weill Cornell Center
- Professor of Medicine

Extramural Efforts:
Chair, Healthcare Quality and Effectiveness Research Study Section, Agency for Healthcare Research and Quality
Committee on Evaluations and Effectiveness of Medical Interventions, Institute of Medicine
National Board, GE-AUR Radiology Research Academic Fellowship
Chair, Health Policy Sub-Committee, New York State Cardiac Advisory Committee
New York State Governor’s Task Force on Healthcare Quality Improvement and Information Systems
New York Academy of Medicine, Membership Committee
Institute of Medicine Committee on the Effectiveness of Medical Interventions
Professional Memberships:
American College of Physicians
American Federation for Clinical Research
American Public Health Association
Association for Health Services Research
Herman Biggs Society
International Society for Technology Assessment in Healthcare
New York Clinical Club
New York Academy of Medicine
Society for General Internal Medicine
Society for Medical Decision Making

Division of Health Services and Policy Research

Hirsch S. Ruchlin, PhD
- Acting Chief, Division of Health Services and Policy Research
- Professor of Economics in Public Health
- Professor of Economics in Medicine

Oliver T. Fein, MD
- Professor of Clinical Public Health
- Professor of Clinical Medicine
- Associate Dean (Network Affairs)
- Associate Attending Physician

Honors:
Elnora M. Rhodes Society of General Internal Medicine Service Award

Extramural Efforts:
New York City Chapter, Physicians for a National Health Program
Institute of Medicine: Robert Wood Johnson Health Policy Fellowship
US-EU Medical Education Exchange
Professional Memberships:
American College of Physicians
American Public Health Association
Association for Health Services Research
New York Academy of Medicine
Physicians for a National Health Program
Society of General Internal Medicine

Madelon Lubin Finkel, PhD
- Professor of Clinical Public Health
- Director, Cornell Analytic Consulting Service

Extramural Efforts:
American Council of Science and Health
Professional Memberships:
American College of Epidemiology
Association for Health Services Research
Academy of Benefit Authors, International Foundation of Employee Benefit Plans

Mary E. W. Goss, PhD
- Professor of Sociology in Public Health Emeritus

Honors:
Leo G. Reeder Award, Medical Sociology Section of the American Sociological Association

Professional Memberships:
Eastern Sociological Society
American Sociological Association
American Public Health Association
Academy for Health Services Research and Health Policy
Association of Teachers of Preventive Medicine
International Sociological Association

George G. Reader, MD
- Livingston Farrand Professor of Public Health Emeritus

Extramural Efforts:
Continuing Medical Education Committee
Heken Keller International
Home Care Professional Advisory Committee
International Health Committee
Visiting Nurse Services of New York
Professional Memberships:
American College of Physicians
Eastern Sociological Society
Institute of Medicine
American Public Health Association
Division of Outcomes and Effectiveness Research

Mark A. Callahan, MD
• Chief, Division of Outcomes and Effectiveness Research
• Assistant Professor of Public Health
• Assistant Professor of Medicine
• Assistant Attending Physician

Extramural Efforts:
Greater New York Health Association, Error Reduction Committee
Improvement Leaders Network: Voluntary Hospital Association
Medical Management Committee, NewYork Hospital Care Network, Inc.
Network Medical Directors Committee
Network Quality Assurance and Improvement Committee
System Policy Planning Committee, NewYork-Presbyterian Hospital

Professional Memberships:
American College of Physicians
American Medical Association
Society for General Internal Medicine
Society for Medical Decision Making

David S. Battleman, MD, MSc
• Assistant Professor of Public Health
• Assistant Professor of Medicine
• Assistant Attending Physician
• Associate Director of Outcomes Research, NewYork-Presbyterian Healthcare Network

Honors:
Quality of Care Research Fund Award, the Academic Medicine and Managed Care Forum, 1999, 2001

Extramural Efforts:
Physician Review Committee, Empire Blue Cross Blue Shield - NewYork-Presbyterian Healthcare Network Representative

Professional Memberships:
American College of Physicians
Society for General Internal Medicine
Society for Medical Decision Making
Society for Health Services Research

Paul J. Christos, MS, MPH
• Lecturer in Public Health
• Biostatistician, Clinical Research Methodology Core

Honors:
Excellence in Teaching Award: Weill Medical College

Extramural Efforts:
Lecturer, Graduate School of Health Sciences, New York Medical College

Professional Memberships:
International Dermato-Epidemiology Association

Linda M. Gerber, PhD
• Associate Professor of Public Health
• Director, Clinical Research Methodology Core

Extramural Efforts:
Co-Director, IRB Training Program, Weill Medical College Executive Committee, Human Biology Association
Career Development Committee, American Association of Physical Anthropologists

Professional Memberships:
New York Academy of Medicine
Human Biology Association
American Heart Association - Council on Epidemiology
American Association of Physical Anthropologists

Nathaniel Hupert, MD, MPH
• Assistant Professor of Public Health
• Assistant Professor of Medicine
• Assistant Attending Physician

Professional Memberships:
American College of Physicians
Society for General Internal Medicine

Edward C. Jones, MD, MA
• Assistant Professor of Public Health
• Assistant Professor of Orthopedic Surgery, Hospital for Special Surgery
• Assistant Attending Orthopedic Surgeon, Hospital for Special Surgery
• Co-Director, Center for Clinical Outcome Research, Hospital for Special Surgery
• Co-Director, Laboratory for Clinical Investigation

Extramural Efforts:
Musculoskeletal Education and Research Institute, Board of Directors, NewYork-Presbyterian Hospital Network Quality Assessment and Improvement Committee
The Journal of Musculoskeletal Medicine, Consulting Editor

Professional Memberships:
American Academy of Orthopedic Surgeons
American Medical Association
Connecticut State Medical Society
Fairfield County Medical Society

Robert G. Marx, MD, MSc
• Assistant Professor of Public Health
• Assistant Professor of Orthopedic Surgery, Hospital for Special Surgery
• Assistant Attending Orthopedic Surgeon, Hospital for Special Surgery
• Director, Center for Clinical Outcome Research, Hospital for Special Surgery

Professional Memberships:
American Academy of Orthopedic Surgeons
Canadian Orthopedic Association
American Orthopedic Society for Sports Medicine
Valerie Mike, PhD
• Clinical Professor of Biostatistics in Public Health
Professional Memberships:
- Society for Clinical Trials
- Society for Philosophy and Technology

Bruce R. Schackman, PhD
• Assistant Professor of Public Health
Extramural Efforts:
- Outcomes Committee, Adult AIDS Clinical Trials Group
- Quality of Life Subcommittee, Adult AIDS Clinical Trials Group
- National Advisory Committee, New Jersey Center of Biomaterials
Professional Memberships:
- Academy for Health Services Research and Health Policy
- International Society for Pharmaco economics and Outcomes Research
- Society of Medical Decision Making

Phyllis G. Supino, EdD
• Clinical Associate Professor of Public Health
• Associate Research Professor of Public Health in Medicine
• Director, Data Management, Biostatistics and Educational Programs, Division of Cardiovascular Pathophysiology
Awards:
- "Best National Abstract" (United States), awarded at the 5th International Conference of Nuclear Cardiology (American Society of Nuclear Cardiology and non-US Affiliates)
Professional Memberships:
- American Federation for Medical Research
- American Heart Association
- American Statistical Association
- American Society of Nuclear Cardiology
- Kappa Delta Pi - An Honor Society in Education
- Charter Member - Evidence-Based Medicine SIG, Society for Academic Emergency Medicine
- Evidence-Based Medicine Working Group (Emergency Medicine), New York Academy of Medicine
- Member, Healthcare Advisors - An Association of Physicians, Scientists and other Health Care Professionals
- Fellow, New York Academy of Medicine

Division of Medical Ethics
Joseph J. Fins, MD
• Chief, Division of Medical Ethics, Departments of Medicine and Public Health
• Director of Medical Ethics, NewYork-Presbyterian Hospital - Weill Cornell Center
• Associate Professor of Public Health
• Associate Professor of Medicine
• Associate Professor of Medicine in Psychiatry
• Associate Professor of Medicine in Psychiatry and Bioethics
• Associate Professor, Program in Clinical Epidemiology and Health Services Research, Weill Graduate School of Medical Sciences of Cornell University
Honors and Awards:
- Award for Teaching Excellence, Weill Medical College of Cornell University
- Harold Coppersmith Memorial Lecture, NYU Downtown Hospital

Victor W. Sidel, MD
• Adjunct Professor of Public Health
• Member, Division of Medical Ethics
• Consultant, Institutional Review Board
• Member, GenVec Oversight Committee, Weill Medical College of Cornell University
Extramural Efforts:
- Distinguished University Professor of Social Medicine, Montefiore Medical Center Albert Einstein College of Medicine, Bronx, NY
- President - Public Health Association of New York City
- Chair - Medical Student Board of Trustees
- International Physicians for the Prevention of Nuclear War
- Member, International Human Rights Committee
- Member, American Public Health Association
- Member, Executive Committee, New York City Chapter
- Fellow, American College of Physicians
- Fellow, American Society for Bioethics and Humanities
-Member, American Society of Law, Medicine & Ethics

Facility Profiles (cont.)
Division of Prevention and Health Behavior

Gilbert J. Botvin, PhD
• Chief, Division of Prevention & Health Behavior
• Professor of Psychology in Public Health
• Professor of Psychology in Psychiatry
• Attending Psychologist

Honors:
Society for Prevention Research, Presidential Award for Excellence in Scientific Contributions to Prevention Research, National Institute on Drug Abuse, National Institutes of Health
Exemplary Smoking Prevention Program Award, Center for Disease Control
Exemplary Substance Abuse Prevention Program Award, Center for Substance Abuse Prevention, Substance Abuse and Mental Health Services Administration
Exemplary Drug Abuse Prevention Program, U.S. Department of Education
Extramural Efforts:
President, Society for Prevention Research
Editor, Prevention Science
Expert Panel Member, Smoking Prevention in Schools, American Legacy Foundation
Expert Panel Member, Elementary Smoking Prevention, Centers for Disease Control
Expert Panel Member, Advisory Meetings on Future Goals Panel Reporting, National Education Goals Panel
Invited Speaker, Developing Prevention & Promotion Research Worldwide, Inaugural World Conference, Carter Center
Expert Panel Member, Confronting Challenges to Alcohol Focused Prevention Research, National Institute on Alcohol Abuse and Alcoholism
Coordinator, 1st Annual Drug Abuse Prevention Summit, Weill Medical College of Cornell
Professional Memberships:
American Association for the Advancement of Science
American Psychological Association, Division of Health Psychology
American Public Health Association
Society for Prevention Research

Lewis M. Drusin, MD, MPH
• Professor of Clinical Public Health
• Professor of Clinical Medicine
• Attending Physician
• Director, Department of Epidemiology, New York Presbyterian Hospital – Weill Cornell Center
• Director, General Preventive Medicine Residency Program

Honors:
Cornell Alumni Association, special award for fundraising activity
2001 Frank H.T. Rhodes Exemplary Alumni Service Award – Cornell University
Extramural Efforts:
Committee on Infections, New York-Presbyterian Hospital
Editorial Board – Genitourinary Medicine
Quality Assurance – Clinical Subcommittee, New York-Presbyterian Hospital
Committee on Infections – Rockefeller University
Executive Chair, Cornell Alumni and Outreach Committee
Main Representative to the Economic and Social Council of the United Nations, International Union Against Sexually Transmitted Infections
Professional Memberships:
American College of Physicians
American College of Preventive Medicine
American Sexually Transmitted Disease Association
Harvey Society
Infectious Diseases Society of America
International AIDS Society
International Society for Sexually Transmitted Disease Research
International Union Against Sexually Transmitted Infections
Medical Society for the Study of Venereal Diseases
New York Academy of Medicine
New York Society of Infectious Diseases
New York Society of Tropical Medicine
Royal College of Physicians
Royal Society for Tropical Medicine and Hygiene
Royal Society of Medicine
Society for Healthcare Epidemiology of America

Jennifer A. Epstein, PhD
• Assistant Professor of Psychology in Public Health

Extramural Efforts:
Editorial Board, Journal of Child and Adolescent Substance Abuse

Kenneth W. Griffin, PhD, MPH
• Assistant Professor of Public Health

Professional Memberships:
American Psychological Association
American Psychology Society
American Public Health Association
Society for Prevention Research
Society of Behavioral Medicine

Barbara L. Reissman, DrPH
• Senior Lecturer in Public Health

Professional Memberships:
American Public Health Association
Division of Community and Public Health Programs

**Robert B. Millman, MD**
- Chief, Division of Community and Public Health Programs
- Saul P. Steinberg Distinguished Professor of Psychiatry and Public Health
- Attending Physician
- Director, Alcohol and Substance Abuse Services, Payne Whitney Psychiatric Clinic
- Chairman, Committee on Physician's Health, New York-Presbyterian Hospital

Extramural Efforts:
- Chairman, Board of Directors, Drug Strategies
- Board of Directors, National Drug Research Institute
- Scientific Advisory Panel, D.A.R.E. America
- Medical Advisor, Office of the Commissioner, Major League Baseball

Professional Memberships:
- Academy of Medical Educators in Substance Abuse
- American Academy of Psychiatrists in Alcoholism and the Addictions
- American Psychiatric Association
- American Public Health Association
- American Society of Addiction Medicine
- New York Academy of Medicine

**J. Emilio Carrillo, MD, MPH**
- Assistant Professor of Public Health and Medicine
- Assistant Attending Physician
- Executive Director, The New York Hospital Community Health Plan (NYHCHP)
- Medical Director, The NewYork-Presbyterian Healthcare System

Extramural Efforts:
- Agency for Healthcare Research and Quality Expert Panel Vulnerable Populations

Professional Memberships:
- Admissions Committee- Weill Medical College of Cornell University
- Public Health Association of New York- Board of Directors
- American Medical Association
- American College of Physicians
- National Latino Boricua Health Organization

**Elizabeth T. Khuri, MD**
- Associate Professor of Clinical Public Health
- Assistant Professor of Pediatrics
- Clinical Affiliate
- Director, Adolescent Development Program
- Associate Director, Alcohol and Substance Abuse Service

Extramural Efforts:
- Drug Policy Committee, Weill Medical College
- Child Protection Committee of the Medical Board, New York-Presbyterian Hospital
- Medical Ethics Committee, NewYork-Presbyterian Hospital

Professional Memberships:
- American Association for the Advancement of Science
- American Medical Association
- American Medical Society on Alcoholism and other Drug Dependencies
- American Psychiatric Association
- American Public Health Association
- American Society of Addiction Medicine
- New York Academy of Medicine
- The New York Academy of Sciences

**Sonia Austrian, DSW**
- Assistant Professor of Public Health
- Director, Employee Assistance Program Consortium

Extramural Efforts:
- Health Care Employee Assistance Program Network
- NASW Mental Health Committee
- Faculty Council – Payne Whitney Clinic
- Adjunct Professor – Columbia University School of Social Work

Professional Memberships:
- Academy of Certified Social Workers
- American Orthopsychiatric Association
- Council on Social Work Education
- Employee Assistance Professionals Association

**Ann Bordwine Beeder, MD**
- Assistant Professor of Public Health
- Assistant Professor of Psychiatry
- Assistant Attending Physician
- Director, Addiction Psychiatry Residency

Professional Memberships:
- American Psychiatric Association
- American Society of Addiction Medicine

**Ross Brower, MD**
- Assistant Professor of Clinical Public Health
- Clinical Assistant Professor of Psychiatry
- Assistant Attending Physician

Professional Memberships:
- American Psychiatric Association
- American Public Health Association
- American Society of Addiction Medicine
- American Society of Adolescent Psychiatry
- American Academy of Addiction Psychiatry

**Eugene G. McCarthy, MD, MPH**
- Clinical Professor of Public Health
- Director, Health Benefits Research Unit

Professional Memberships:
- American College of Public Health
- American Federation of Clinical Research
- American Public Health Association
- Massachusetts Medical Society
- New York Academy of Medicine
- New York City Health Association
- New York State Health Association

**Bruce Phariss, MD**
- Clinical Assistant Professor of Public Health
- Clinical Assistant Professor of Psychiatry
- Medical Director, Midtown Center for Treatment and Research

Professional Memberships:
- American Academy of Psychoanalytic Physicians
- American Medical Association
- American Psychiatric Association
- American Society of Addiction Medicine
<table>
<thead>
<tr>
<th>Name</th>
<th>Title and Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Levin, Arthur, MD</td>
<td>Adjunct Clinical Assistant Professor of Public Health</td>
</tr>
<tr>
<td>Meraj, Hasan, MD</td>
<td>Research Associate in Public Health</td>
</tr>
<tr>
<td>Miller, Daniel, MD</td>
<td>Clinical Professor of Public Health</td>
</tr>
<tr>
<td>Mills, Stephen, M Ph</td>
<td>Staff Associate in Public Health</td>
</tr>
<tr>
<td>Mostashari, Farzad, M D, M Ph</td>
<td>Clinical Assistant Professor of Public Health</td>
</tr>
<tr>
<td>Mustalish, Anthony, M D, M Ph</td>
<td>Associate Professor of Clinical Public Health</td>
</tr>
<tr>
<td>Napolitano, Barbara, PhD</td>
<td>Research Associate in Public Health</td>
</tr>
<tr>
<td>Offit, Kenneth, M D</td>
<td>Assistant Professor of Public Health</td>
</tr>
<tr>
<td>Oliveria, Susan, ScD, M Ph</td>
<td>Assistant Professor of Public Health</td>
</tr>
<tr>
<td>Olson, Sara, PhD</td>
<td>Assistant Professor of Public Health</td>
</tr>
<tr>
<td>Pascarella, Emil, M D</td>
<td>Adjunct Associate Professor of Clinical Public Health</td>
</tr>
<tr>
<td>Peterson, Constance, M A</td>
<td>Lecturer in Public Health</td>
</tr>
<tr>
<td>Peterson, Margaret, PhD</td>
<td>Associate Statistician in Public Health</td>
</tr>
<tr>
<td>Rapoport, M ark, M D, M Ph</td>
<td>Adjunct Clinical Assistant Professor of Public Health</td>
</tr>
<tr>
<td>Rosen, Daniel, PhD</td>
<td>Adjunct Assistant Professor of Public Health</td>
</tr>
<tr>
<td>Rosenberg, Kenneth, M D</td>
<td>Clinical Assistant Professor of Public Health</td>
</tr>
<tr>
<td>Schueller, Ruth, JD, DrPh</td>
<td>Clinical Assistant Professor of Public Health</td>
</tr>
<tr>
<td>Seligmann, Arthur</td>
<td>Clinical Associate Professor Emeritus of Public Health</td>
</tr>
<tr>
<td>Sh, Qiuhu, PhD</td>
<td>Adjunct Assistant Professor of Biostatistics in Public Health</td>
</tr>
<tr>
<td>Sterton, Penny, M D, M Ph</td>
<td>Clinical Assistant Professor of Public Health</td>
</tr>
<tr>
<td>Stone, Patricia, PhD, M Ph</td>
<td>Adjunct Assistant Professor of Public Health</td>
</tr>
<tr>
<td>Tardiff, Kenneth, M D, M Ph</td>
<td>Professor of Public Health</td>
</tr>
<tr>
<td>Trachtenberg, Judith, Phd</td>
<td>Lecturer in Public Health</td>
</tr>
<tr>
<td>Ullman, Alice, M S</td>
<td>Clinical Associate Professor of Social Work in Public Health</td>
</tr>
<tr>
<td>Warshawer, Ellen, M A</td>
<td>Associate Epidemiologist in Public Health</td>
</tr>
<tr>
<td>Weiss, Carol, M D</td>
<td>Clinical Assistant Professor of Public Health</td>
</tr>
<tr>
<td>Williams, Christopher, Phd</td>
<td>Adjunct Clinical Assistant Professor of Public Health</td>
</tr>
</tbody>
</table>
Academic Activities

The Department has established a number of business meetings and research/academic forums, that have resulted in enhanced communications, systems, and policies. They have also increased collaborative activities among our colleagues in the department, across our medical center, and with outside institutions.

The following list includes new activities that highlight an exciting and productive year....

### Business Meetings

<table>
<thead>
<tr>
<th>Event Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Faculty Council</td>
<td>Monthly forum for full-time faculty to report on and discuss institutional,</td>
</tr>
<tr>
<td></td>
<td>departmental, and divisional business items</td>
</tr>
<tr>
<td>General Faculty</td>
<td>Quarterly meeting for all Public Health faculty to discuss topical departmental</td>
</tr>
<tr>
<td></td>
<td>issues</td>
</tr>
<tr>
<td>Administration</td>
<td>Quarterly meeting of divisional administrators for sharing information and</td>
</tr>
<tr>
<td></td>
<td>providing administrative updates of policies/procedures</td>
</tr>
</tbody>
</table>

### Seminars

<table>
<thead>
<tr>
<th>Seminar Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Academic/Research</td>
<td>Monthly forum to present current research projects and issues - open to the</td>
</tr>
<tr>
<td>Conference Series</td>
<td>medical center community</td>
</tr>
<tr>
<td>Journal Club</td>
<td>Monthly discussions of recent literature for the faculty and for residents in</td>
</tr>
<tr>
<td></td>
<td>our general preventive medicine and addiction psychiatry training programs,</td>
</tr>
<tr>
<td></td>
<td>and medical and graduate students</td>
</tr>
<tr>
<td>Student Health Policy</td>
<td>Co-sponsored by the Department of Public Health, a student-run forum with</td>
</tr>
<tr>
<td>Forum</td>
<td>guest speakers on current healthcare issues</td>
</tr>
<tr>
<td>Guest Speakers</td>
<td>Special lectures by guests and recruitment candidates</td>
</tr>
<tr>
<td>Research In Progress (RIP)</td>
<td>Research In Progress (RIP) Bi-monthly informal and interactive work session</td>
</tr>
<tr>
<td></td>
<td>to provide our faculty and collaborators a forum for active and constructive</td>
</tr>
<tr>
<td></td>
<td>dialog on proposed research projects</td>
</tr>
</tbody>
</table>

### Special Events

<table>
<thead>
<tr>
<th>Event Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lorraine and Ralph Lubin Visiting Professorship</td>
<td>The Visiting Professorship is endowed by a gift from the family of Dr. Madelon Lubin Finkel. In February 2001, the department hosted the first annual Lubin Visiting Professor, Dr. Steven A. Schroeder, President and CEO of the Robert Wood Johnson Foundation.</td>
</tr>
</tbody>
</table>

The department has also been active on the education front working with the medical college and hospital to establish new courses and develop innovative revisions for existing curriculum and programs.

### Medical College Courses

<table>
<thead>
<tr>
<th>Course Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Evidence-Based Medicine</td>
<td>A team of Public Health faculty designed and introduced a new component to MPSI, to develop skills in question framing, database searching and critically appraising literature.</td>
</tr>
<tr>
<td>U.S. Healthcare System</td>
<td>Redesigned as a second year course using an innovative debate/panel discussion format with invited specialist from the healthcare industry</td>
</tr>
<tr>
<td>Introduction to Epidemiology and Biostatistics</td>
<td>First year course presenting the basic principles of epidemiology and biostatistics</td>
</tr>
<tr>
<td>Public Health and Community Medicine</td>
<td>Second year course consisting of seminar sessions and field trip experiences in various public health topic areas</td>
</tr>
</tbody>
</table>

### Other Educational Activities

<table>
<thead>
<tr>
<th>Activity Type</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>IRB Training</td>
<td>Faculty members participate on an interdisciplinary team which includes an IRB training program for all WMC investigators</td>
</tr>
<tr>
<td>Clinical Research</td>
<td>A course covering the essential methods of clinical research co-sponsored by the Department of Medicine</td>
</tr>
<tr>
<td>Methodology Course</td>
<td>Run by the Division of Outcomes Research, an education program for residents on managed care and healthcare systems</td>
</tr>
<tr>
<td>Managed Care and Health Systems Rotation</td>
<td>One year ACGME accredited program run by faculty of the Division of Community and Public Health Programs</td>
</tr>
<tr>
<td>Addiction Psychiatry Residency</td>
<td>Two year ACGME accredited program run by faculty of the Division of Prevention and Health Behavior</td>
</tr>
<tr>
<td>Preventive Medicine Residency</td>
<td>Two year ACGME accredited program run by faculty of the Division of Prevention and Health Behavior</td>
</tr>
</tbody>
</table>
Research

The research mission of the Department of Public Health is to improve healthcare quality and cost-effectiveness and through that to improve our healthcare system's value to the public's health. Our projects also strengthen health promotion and disease prevention, explore the ethical dimensions of medical research and clinical care, and we provide epidemiologic, biostatistical and health economic services to our colleagues within the medical center and outside healthcare organizations.

To track our progress we have organized our research activities into three major categories: sponsored research grants; internal core consulting, and external consulting. Following are examples of the sizeable growth we have experienced since the strategic plan implementation in 1999.

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Proposals Submitted</td>
<td>16</td>
<td>25</td>
<td></td>
</tr>
<tr>
<td>Total Proposal Dollars</td>
<td>$5,717,962</td>
<td>$9,284,066</td>
<td>62%</td>
</tr>
<tr>
<td>Total New Awards</td>
<td>9</td>
<td>11</td>
<td></td>
</tr>
<tr>
<td>Total New Awards Dollars</td>
<td>$2,482,024</td>
<td>$3,401,156</td>
<td>37%</td>
</tr>
</tbody>
</table>

Note: Figures include direct & indirect costs

Clinical Research Methodology Core
(Launched as a Research & Sponsored Programs Core service to Medical College investigators in September 2000)

- Total number of projects: 54
- Type of service:
  - Biostatistics: 49 (91%)
  - Methodological Advice: 5 (9%)
- Number of divisions/offices that utilized the Core: 21

This facility provides epidemiological, biostatistical, and related consultative services to investigators at the Weill Medical College of Cornell University and the Graduate School of Medical Sciences. The overall goals of the Core are (1) to stimulate and encourage New York Weill Cornell Center investigators to develop clinical research proposals and grant applications, and (2) to assist investigators with the scientific aspects of investigative research, including protocol design, data analysis and interpretation, and manuscript preparation.

During its first year of operation, the Core found that the majority of services requested by our research community were of a biostatistical nature. Requests included: analysis of data from existing studies, preparation of abstracts, manuscripts or presentations, and assistance with design of future studies. Approximately 8 projects resulted in grant applications and 10 in abstract or journal submissions.

"The Department conducts research that contributes new knowledge on how best to deliver accessible, high quality, effective and cost-effective care, and, to improve the health of the public"

Al Mushlin
Research (Cont.)

Cornell Analytic/Consulting Services

(Established September 2000 as a consulting unit typically servicing healthcare organizations outside of the Weill Cornell campus)

<table>
<thead>
<tr>
<th>Client</th>
<th>Consultant</th>
<th>Contract value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rogosin</td>
<td>M. Finkel, PhD, Hirsch Ruchlin, PhD, Paul Christos, MS, MPH</td>
<td>$35,200</td>
</tr>
<tr>
<td>Brooklyn Hospital</td>
<td>M. Finkel, PhD, Paul Christos, MS, MPH</td>
<td>$10,000</td>
</tr>
<tr>
<td>Brooklyn Hospital</td>
<td>M. Finkel, PhD</td>
<td>$5,000</td>
</tr>
<tr>
<td>University of Medicine and Dental Medicine of New Jersey</td>
<td>M. Finkel, PhD</td>
<td>$2,800</td>
</tr>
<tr>
<td>WMC – Physician Organization</td>
<td>M. Finkel, PhD, Paul Christos, MS, MPH</td>
<td>$17,000</td>
</tr>
<tr>
<td>Mount Sinai</td>
<td>L. Gerber, PhD</td>
<td>$15,954</td>
</tr>
<tr>
<td>Merck</td>
<td>H. Ruchlin, PhD</td>
<td>$80,920</td>
</tr>
<tr>
<td>Strategic Marketing Technology</td>
<td>Mark Callahan, MD</td>
<td>$30,000</td>
</tr>
<tr>
<td>CLAL The National Jewish Center for Learning and Leadership</td>
<td>J. Fins, MD</td>
<td>$10,000</td>
</tr>
<tr>
<td>Total number of contracts</td>
<td></td>
<td>9</td>
</tr>
<tr>
<td>Total contract value</td>
<td></td>
<td>$206,874</td>
</tr>
</tbody>
</table>

The Cornell Analytic Consulting Services Unit of the Department of Public Health has been created to provide expert epidemiologic, biostatistical and health economic consulting services to its clients. In particular, the unit is designed to provide expert analytic studies in pharmaco-epidemiology, pharmaco-economics, outcomes research and data management. Clients include network hospitals, pharmaceutical companies, healthcare organizations, managed care organizations, and public (City, State and Federal) agencies.

During its first year of operation, consulting contracts included teaching seminars, evaluation of a tele-medicine monitoring program, economic impact analysis, manuscript preparation and pharmacoeconomic modeling.
The department applied for and was selected as one of nine organizations nationally to form the Integrated Delivery System Research Network (IDSRN) sponsored by the Agency for Healthcare Research and Quality (AHRQ). This contract allows us to compete over the next several years for “Task Orders” for up to a total possible award amount of 2 million dollars. Importantly, this proposal developed strategies for collaboration with faculty across departments within the Medical College. It also includes partners from Columbia University - Mailman School of Public Health, Memorial Sloan Kettering Cancer Center and the New York-Presbyterian Hospital System.

The purpose of this contract is to develop a national network of integrated delivery systems (IDS) capable of conducting rigorous and timely research on access, outcomes or quality of medical care, healthcare organization or financing options to achieve optimal results. Specifically to:

- Assess information gaps and research needs.
- Conduct timely research in key substantive and methodological areas.
- Develop new approaches and tools for translating research into practice and improving patient safety.
- Evaluate what interventions, strategies, and structures are effective and cost-effective.

The network includes:
- Managed care plans
- Hospital-based integrated delivery systems
- Large, multi-specialty physician groups.
- Universities and academic health centers

Investigators: Alvin I. Mushlin, MD, ScM; Nathaniel Hupert, MD, MPH; Hirsch Ruchlin, PhD and Mark Callahan, MD

Title: Integrated Delivery Systems and Clinical Preparedness for Bioterrorist Events

Funding: Agency for Healthcare Research and Quality

Collaborators: Neal Flomenbaum, M.D., (Emergency Department) and Jack Delaney (Emergency Department)

This project addressed the question of hospital capacity for managing the mass casualties from a large-scale bioterrorist attack on an urban population center. Using the corporate and affiliate members of the New York-Presbyterian Healthcare System as a model for a major urban hospital network, we conducted “surge capacity” surveys and developed unique computer models using discrete event simulation software to create realistic outcomes following a hypothetical anthrax attack on New York City.

In the course of this project, members of the department worked with the New York City Mayor’s Office of Emergency Management and Department of Health to perform simulation modeling of outpatient antibiotic distribution centers (called Points of Distribution, or PODs). Additionally, we applied our models to historical influenza data from the 1999-2000 flu season, in order to assess the impact of case load on emergency department and hospital inpatient services.

In response to the anthrax attacks of September-October, 2001, we have also expanded our research focus in counter-terrorism to include decision rules for use in clinical settings and for mass triage. The first of these is a Bayesian analysis using historical and current case reports to help distinguish anthrax from influenza and influenza-like illness.
Community-acquired pneumonia (CAP) is diagnosed in approximately 4 million adults each year, with more than 1.2 million of these patients requiring hospitalization. Streptococcus pneumoniae, the bacterial pathogen responsible for pneumococcal pneumonia, is, by far, the most common cause of CAP. Over the past decade, the prevalence of antibiotic resistant Streptococcus pneumoniae has increased steadily from less than 5% before 1989 to more than 30% today. In this 3-year multi-center retrospective study, we evaluated the clinical and economic consequences of pneumococcal antibiotic resistance and modeled the impact of emerging resistance within The New York-Presbyterian Healthcare System.

Data from this study revealed that the impact of antibiotic resistance for patients with pneumococcal pneumonia was significant, particularly for patients that are put on incorrect initial antibiotic coverage. Overall, the average length of stay was more than 2 days greater and total direct hospital costs were over 35% higher for patients infected with antibiotic resistant organisms. Additionally, clinical stability was reached more slowly in these patients. Modeling these data within our multi-hospital system, we found that antibiotic resistance in pneumococcal pneumonia results in incremental cost in excess of $1.6 million and over 1300 additional bed-days. If the prevalence of resistance were to rise by 10%, then the attributable excess costs could approach $2.5 million and the excess bed-days could exceed 2000.

From this study we conclude that physician decision-making that leads to higher rates of appropriate empiric antibiotic selection for patients with pneumococcal pneumonia may significantly improve clinical outcomes and reduce resource utilization. Ongoing efforts within the department are geared toward developing novel computer-based methods to improve this decision-making process.

The purpose of this study is two-fold: first, to develop explanatory models to better understand the factors that contribute to patients not being treated with β-blockers both in the hospital and as outpatients. Second, we will use our explanatory models to develop interventions to improve the appropriate use of these medications across our hospital system, The New York-Presbyterian Healthcare System.
Investigators: Linda M. Gerber, PhD
Title: Psychosocial Factors and Cardiovascular Disease: Project 1 (subcontract: MT Sinai, PI: Thomas Pickering, MD) Race, Socioeconomic Status (SES), and Diurnal Blood Pressure Rhythms
Funding: NHLBI/National Institute of Health
Collaborators: Phyllis August, M D, (Department of Medicine); Manikkam Suthanthiran, M D (Department of Medicine); Richard Devereux M D, (Department of Medicine); Peter Okin M D, (Department of Medicine); Mary Roman M D, (Department of Medicine) and Velvie Pogue M D, (Harlem Hospital)
This project is designed to investigate our past observation that the diurnal rhythm of blood pressure is different in groups of Black hypertensive patients studied under a common protocol at two medical centers in New York City (Weill Medical College and Harlem Hospital), separated geographically by only a few miles, but serving very different populations. The blood pressure pattern did not differ in normotensives, and our hypothesis is that the difference seen in the hypertensives is the result of psychosocial factors, acting via (a) effects on BP during the day, and/or (b) effects on sleep and BP during the night.

We anticipate that this study will provide answers to a number of important questions. The first is whether the differences in dipping status observed in different groups of hypertensive subjects can be explained by different sleep patterns, or whether they are the consequence of other factors such as the effects of posture on blood pressure. We will also learn to what extent the changes in blood pressure are paralleled by changes in catecholamines and cortisol, which should provide clues as to the underlying physiological mechanisms.

Investigators: Linda M. Gerber, PhD
Title: Assessing management of hyperlipidemia in a clinic serving low-income patients: a survey of clinician perceptions
Funding: Weill Medical College - Pilot Award
Collaborators: Phyllis Supino, EdD; Paul J. Christos, MS, MPH; Alvin I. Mushlin, MD, ScM; J. Emilio Carrillo, MD, MPH; Alexander R. Green, M D (Department of Medicine) and Jamie Dollahite, PhD, RD (Cornell University, Division of Nutritional Sciences)
Cardiovascular diseases are the most common causes of death among all racial and ethnic groups in the US, with poor nutrition being one of the major contributors. Notable disparities in heart disease exist among certain racial/ethnic populations. Dietary behavior modification is recognized as one effective means of reducing coronary risk factors. Benefits resulting from the application of nutrition recommendations are often not experienced, however, because of the complex nature of food choice behavior that is impacted by personal, social, and situational factors. In order to understand the determinants of dietary adherence, we must close the gap in understanding why people choose what they choose to eat. Expanded research is needed on novel theories that address behavioral, cultural, social, and environmental factors related to food choice behavior and chronic disease (Federal Register, Feb 23, 2001). Understanding the intervention context, including the healthcare providers and the environment in which they work, is an important part of the dietary change equation. Dietary interventions for low-income, minority populations must be culturally appropriate and able to be implemented given the limited resources available.

In order to address these gaps in understanding, we propose to administer a structured questionnaire to all clinicians at Cornell Internal Medicine Associates (CIMA) to examine current perceptions and practices in a clinic serving low-income populations with hyperlipidemia. This will help us understand how providers’ experiences interact with the clients’ experience to enable or complicate the adoption and maintenance of recommended dietary behaviors.

The goal of this research is to develop a questionnaire that can be administered to all clinicians at the four sites selected for an already submitted NIH grant application. This tool will help to strengthen the application as well as contribute to the model we are proposing to build in order to depict dietary change trajectories of low-income, minority people. This model, as stated in the NIH application will consider the vast array of individual and site-specific influences that affect that adoption and maintenance of dietary change. The NIH study proposes to investigate dietary change in a dynamic context that can be used for the development of interventions with more effective strategies to reduce heart disease in low-income populations. Results from this pilot study will greatly enhance the model building in that it will incorporate an important component of dietary change, that of the providers’ perceptions including disparities between stated programmatic goals and performance in the management of hyperlipidemia in low-income, minority people.
Investigators: Mark Callahan, MD
Title: Computerized Decision Support for Community Acquired Pneumonia
Funding: Academic Forum: Aetna Quality of Care Research Fund
Collaborators: David Battleman MD, MSc and Michael Oppenheim, MD (Department of Medicine)
Significant variations in the treatment of pneumonia occur across the United States. These variations can lead to worsened clinical outcomes for patients and to increased resource utilization. In order to improve quality of care and reduce resource consumption, the research team developed a computerized decision support tool based on the Pneumonia Severity Index (PSI). The PSI is an 18-item clinical risk assessment tool for pneumonia that helps to guide both antibiotic choice and the decision as to whether or not to admit the patient to the hospital or to treat the patient as an outpatient.
The project involves automating the PSI for use in the emergency room, prospectively enrolling patients with pneumonia into the study, using the PSI as a decision support aid for physicians working in the emergency room, and assessing the impact of the tool on quality of care, patient outcomes, and resource consumption.

Investigators: Mark Callahan, MD
Title: Linking Best Reporting and Learning to Improve Safety
(Sub-Contract: Columbia University. PI: Harold S. Kaplan)
Funding: Agency for Healthcare Research and Quality
Collaborators: Hal Kaplan, MD, (Columbia), David Battleman, MD, MSc
This project is a three-year study to examine the epidemiology, clinical outcomes, and economic impact of medical errors. The study will be conducted across three academic medical centers (NYPH-Columbia, NYPH-Weill-Cornell and the University of Chicago), along with 10 community sites in the NYPH System. Additionally, data will be provided as a peer-profiling feedback mechanism to the participating institutions as a mechanism for shared best practice learning in order to reduce medical errors in the hospital setting. The impact of the feedback and learning system will be prospectively evaluated by comparing the rates of medical errors over time.

Investigators: Mark Callahan, MD
Title: Partnerships for Quality Education
Funding: Empire Blue Cross/Blue Shield & Departments of Medicine Cornell / Columbia
Collaborators: Oliver Fein, MD
The Partnerships for Quality Education program is a multi-year project designed to provide resident physicians with education about the changing healthcare system. The project involves a two-week block rotation for internal medicine residents during their PGY-3 year. The rotation is mandatory for all PGY-3 residents at both the Well-Cornell and the Columbia campuses of New York-Presbyterian Hospital. Six block rotations are conducted each academic year, and over 90 residents participate on an annual basis in the training. The course material covers topics including health care economics, quality of care, health care policy, managed care, access to care, the insurance system, Medicare and Medicaid policy, the pharmaceutical industry, concepts on regional variation and the role of cost-effectiveness studies in health care, and issues of disability policy and services.

Investigators: Nathaniel Hupert, MD, MPH
Title: Prospective Multi-center Study of the Role of Racial & Ethnic Disparities and Treatment Variation in Diabetic and Non-diabetic Foot Ulcer Outcome
Funding: New York City Council Speaker's Fund for Public Health Research
Collaborators: Mark A. Callahan, MD; Alvin I. Mushlin, M.D., ScM and K. Craig Kent, MD (Department of Surgery)
This study focuses on the outcomes of current treatment strategies in diabetic and arterial-insufficiency foot ulcers, an area of considerable therapeutic uncertainty. It will be the largest cohort study of its type performed in a major urban hospital network. Its aim is to determine predictors of outcomes in vascular and diabetic ulcers, including among other factors treatment modality, functional status, comorbidity, disease-specific knowledge base, sociodemographic variables including race/ethnicity, educational level and income, and barriers to health care including insurance status. We will employ statistical techniques to adjust for this rich variety of patient characteristics in order to determine independent predictors of successful wound healing.
Investigators: Joseph J. Fins, MD
Title: From Contract to Covenant in Advance Care Planning
Funding: Fan Fox and Leslie R. Samuels Foundation
Collaborators: In conjunction with the Division of Geriatrics and the Missoula Demonstration Project
This collaborative project of Weill Medical College of Cornell University and the Missoula Demonstration Project hopes to improve advance care planning by reconceptualizing the patient-proxy relationship as one that has both contractual and covenantal dimensions. Our goal is to better describe the values that patients and their proxies bring to advance care planning in order to modify how both the law and medicine understand and use advance directives.

Investigators: Joseph J. Fins, MD
Title: Integrating Palliative Care into Hospital Practice: Development of Educational Materials for the Goals of Care Assessment Tool
Funding: Fan Fox and Leslie R. Samuels Foundation
Collaborators: Cathleen A. Acres, RN, BS, MA
Palliative care remains poorly integrated into hospital practice. To address this problem and improve the provision of end-of-life care in the hospital setting, we are developing educational materials that will train clinicians in the use of a Goals of Care Assessment Tool (GCAT).

We believe that this process-oriented, goal-setting instrument will help clinicians recognize when death is near and plan more timely comprehensive end-of-life care strategies in conjunction with patients and their family. We plan to evaluate the GCAT’s impact on end-of-life care at the New York Weill Cornell Center of New York-Presbyterian Hospital. We believe that the GCAT will promote systemic and organizational changes in clinical practice that will improve end-of-life care in the hospital setting.

Investigators: Joseph J. Fins, MD
Title: Establishing a Faculty Associates Program in Medical Ethics at Weill Medical College
Funding: Fan Fox and Leslie R. Samuels Foundation & The Lucius N. Littauer Foundation
Collaborators: Cathleen A. Acres, RN, BS, MA; Alvin I. Mushlin, MD, ScM; Franklin G. Miller, PhD, Victor Sidel, MD
The Faculty Associates Program will fund established Weill Medical College faculty physicians to develop or redirect research, clinical or educational activities in medical ethics as it relates to their current areas of expertise. “Faculty Associates’” primary academic appointment would remain in their home department but they would devote 20% of their time to Joint Division of Medical Ethics’ activities. The Faculty Associates will participate in an on-going seminar in theoretical ethics to be convened in the Division. Their contributions to our ethics programs would include service on the ethics consultation service, pedagogical activities in the undergraduate and graduate medical curriculum as well as the pursuit of an independent research agenda in medical ethics, including a demonstration project within the institution.

Through the faculty development dimensions of the proposed program, we expect Faculty Associates to develop additional substantive skills that will enrich their abilities as teachers of bioethics and allow them to be effective mentors and collaborators for both students and faculty.

Investigators: Joseph J. Fins, MD
Title: Fidelity, Wisdom and Love: Patients and Proxies in Partnership
Funding: Fan Fox and Leslie R. Samuels Foundation
Collaborators: Barbara Maltby, MA and Paul Christos, MS, MPH
This project is designed to build upon the academic work produced from the "From Contract to Covenant in Advance Care Planning" study to produce a kit to be sent to religious, social and community groups in New York and elsewhere so that effective meetings on advance directives can take place without the need for outside expert assistance. The kit will include an introductory video on the nature of the patient/proxy relationship, the educational workbooks, the group leader’s guide, and supporting materials, such as proxy forms and questionnaires.
The project is meant not only to increase awareness of health care agency but also to help proxies better prepare for the awesome responsibility they have accepted.
Investigators: Gilbert Botvin, PhD
Title: Drug Abuse and Violence Prevention with Minority Youth
Funding: National Institute on Drug Abuse/National Institute of Health
This study is a 5-year investigation designed to test the efficacy of a broad spectrum, competence enhancement, drug abuse prevention approach and its direct extension and application for reducing aggression/violence with inner-city, minority students.

Investigators: Gilbert Botvin, PhD
Title: Multi-Ethnic Drug Abuse Prevention Among New York Youth
Funding: National Institute on Drug Abuse/National Institute of Health
Collaborators: Dr. Jeanne Brooks-Gunn & Dr. Charles Basch (Teachers College - Columbia University), Dr. Steven Schinke (Intersystems, Inc)
The Multi-Ethnic Drug Abuse Prevention Research Center represents an integrated group of individual research projects designed to collectively address the need for efficacious preventive interventions for African-American and Hispanic American youth. Projects develop and test drug abuse prevention approaches.

Investigators: Gilbert Botvin, PhD
Title: Rural Youth and Family Competencies Building Project (Sub-Contract: Iowa State. PI: Richard Spoth, PhD)
Funding: National Institute on Drug Abuse/National Institute of Health
Collaborators: Richard Spoth, PhD, PI (Iowa State)
The purpose of the proposed research is to conduct a longitudinal, controlled study of a theory-based, comprehensive intervention targeting rural youth and families. The proposed study will evaluate family- and peer-related risk and protective factors, as well as youth substance outcomes, at posttest, one-year follow-up, and two-year follow-up assessments, using multi-method, multi-informant procedures.

Investigators: Jennifer Epstein, PhD
Title: Alcohol Use Among Black, Hispanic and White Urban Youth
Funding: National Institute on Alcohol Abuse & Alcoholism/National Institute of Health
Collaborators: Kenneth W. Griffin, PhD, MPH & Gilbert J. Botvin, PhD
Alcohol-related problems continue to be a major source of concern in the United States. Specifically, alcohol has been associated with a wide variety of illnesses and has been implicated in accidents, falls, fires, drowning and suicides. Adolescence is the critical period to intervene to prevent alcohol abuse before it begins or escalates. As ethnic minority groups have become the target of alcohol advertising recently, inner-city Hispanic and Black youth may be at greater risk of alcohol use and deserve further attention. Before effective programs can be implemented with multi-ethnic urban youth, research elucidating the etiology of alcohol use among these predominantly minority adolescents is necessary. This application proposes secondary analyses to examine the longitudinal predictors of alcohol use for multi-ethnic youth and make ethnic comparisons among three ethnic groups (Hispanics, Blacks, and Whites). This study would capitalize on data already collected as part of a large-scale prevention trial that was funded by NCI to assess the efficacy of a cognitive-behavioral skills training program on smoking (1 R18 CA 39280; P.I. Gilbert J. Botvin, PhD). The proposed study will examine untreated control subjects only from a longitudinal cohort collected between 1988 and 1991. The panel design will focus on three assessments: (1) the baseline measurement, (2) the one-year follow-up, and (3) the two-year follow-up. Measures assessed a wide range of concepts expected to relate to adolescent alcohol use: social influences for alcohol use including normative beliefs about alcohol use, social skills efficacy, social skills knowledge, assertiveness, decision-making, self-efficacy, self-esteem, risk-taking, and psychological distress. Structural equations modeling will be used to test theoretical models and conduct multiple group comparisons based on ethnicity. This research is significant because it will increase our understanding of the etiology of alcohol use in understudied minority groups. In addition, the longitudinal analyses will go beyond prior work that only determined cross-sectional predictors of alcohol use among Hispanic and Black adolescents. Results of this research will provide information relevant to development of more effective alcohol prevention approaches for these multi-ethnic urban youth.
Investigators: Jennifer Epstein, PhD  
Title: Predictors of Adolescent Drug Use Among Inner-City Youth  
Funding: National Institute on Drug Abuse/National Institute of Health  
Collaborators: Kenneth W. Griffin, PhD, MPH & Gilbert J. Botvin, PhD  

Drug-related problems continue to be a major source of concern in the United States. Specifically, cigarette smoking, alcohol, and other drug use are associated with a wide variety of illnesses, deaths and other negative consequences. Substance abuse has huge costs for society. Adolescence is the critical period to intervene to prevent drug abuse before it begins or escalates. As ethnic minority groups have become the target of cigarette and alcohol advertising recently, inner-city youth are at greater risk of initiating drug use and deserve further attention. Before effective programs can be implemented with multi-ethnic urban youth, research elucidating the etiology of drug use among these predominantly minority adolescents is necessary. This application proposes secondary data analysis to examine predictors of poly-drug use (cigarette smoking, alcohol use, and marijuana use) for multi-ethnic, inner-city youth; make ethnic comparisons for poly-drug use among four ethnic groups (Asians, Blacks, Hispanics, and Whites); and investigate the role of linguistic acculturation in poly-drug use among Hispanic adolescents. This study would capitalize on data already collected as part of a large-scale prevention trial that was funded by NCI to assess the efficacy of a cognitive-behavioral skills training program on smoking (1 R18 CA 39280; P.I. Gilbert J. Botvin, PhD). The proposed study will examine untreated control subjects only from a longitudinal cohort during the middle school/junior high school period. The panel design will focus on three assessments: (1) the baseline measurement, (2) the one-year follow-up, and (3) the two-year follow-up. Self-reported measures assessed a wide range of constructs expected to relate to adolescent drug use: social influences for drug use (such as friends' use and normative beliefs about drug use), social skills efficacy, assertiveness, decision-making, self-efficacy, self-esteem, risk-taking, and psychological distress. This research is significant because it will increase our understanding of the etiology of drug use in understudied ethnic minority groups residing in inner-city regions. Both cross-sectional and longitudinal analyses of adolescent drug use among inner-city adolescents will be conducted. Findings from this research will provide information relevant to development of more effective drug abuse prevention approaches for multi-ethnic, inner-city populations.

Investigators: Kenneth W. Griffin, PhD, MPH  
Title: Self-Regulation Distress and Adolescent Drug Use  
Funding: National Institute on Drug Abuse/National Institute of Health  
Collaborators: Gilbert J. Botvin, PhD  

The goal of this project is to examine the relationship between cognitive/behavioral self-regulation skills and the initiation and escalation of alcohol, tobacco, and other drug use during the middle school years among youth from different racial-ethnic and geographic backgrounds. This will be accomplished by developing, testing, and refining several etiological models of drug use among adolescents that served as untreated control students in several school-based drug abuse prevention trials. The proposed research aims to elucidate how self-regulation skills are protective in terms of adolescent drug use, and the hypothesized models will be cross-validated among ethnic and gender subgroups of youth. The long-term goal is to improve our understanding of how drug use develops among youth of different backgrounds.

Investigators: Kenneth W. Griffin, PhD, MPH  
Title: Personal Competence Skills and Adolescent Alcohol Use  
Funding: National Institute on Alcohol Abuse & Alcoholism/National Institute of Health  
Collaborators: Gilbert J. Botvin, PhD  

Although research has shown that competence skills are associated with less alcohol use among adolescents, the etiologic protective mechanisms remain unclear. The goal of this project is to investigate how competence skills protect young people from alcohol use and this will be accomplished by examining longitudinal data on the initiation and escalation of alcohol use among samples of middle school youth. Mediation analyses will test the hypothesis that personal competence skills reduce alcohol use by enhancing psychological well being or reducing distress; moderational analyses will test whether personal competence skills buffer the effects of other risk factors for alcohol use (e.g., peer influences). Differences in the prediction of experimental versus heavy alcohol use will be tested. The long-term goal is to improve our understanding of how alcohol use develops and to improve prevention programs for diverse youth populations.
Investigators: Kenneth W. Griffin, PhD, MPH
Title: Ethnic Differences in Competence and Adolescent Drug Use
Funding: National Institute on Drug Abuse/National Institute of Health
Collaborators: Gilbert J. Botvin, PhD

Little is known about the protective effects of competence skills in adolescent drug use and whether these mechanisms change over the course of adolescence. A primary aim of the proposed research is to develop etiologic models that focus on competence skills and adolescent substance use over the course of adolescence from the 7th through 12th grades. This will be accomplished through secondary data analysis of control group participants from school-based drug abuse prevention trials. The proposed research will examine mediational and moderational models of competence and drug use and will cross-validate them across ethnic and gender subgroups. For example, hypotheses to be tested include 1) whether socially competent youth perceive fewer social benefits to engaging in drug use compared to youth with poor interpersonal negotiation skills, and 2) if highly competent youth succeed in developmental tasks and experience a sense of mastery and psychological well being that is protective in terms of drug involvement. By improving our understanding of how drug use develops over the course of adolescence among youth of different racial-ethnic backgrounds, a long-term goal is to inform the development of effective prevention programs for ethnically diverse populations, and ultimately, to reduce rates of substance abuse and addiction that contribute to health disparities among racial/ethnic populations.

Investigators: J. Emilio Carrillo, MD, MPH & Alvin I. Mushlin, MD, ScM
Title: Capacity to Conduct Studies on the Impact of Race/Ethnicity on the Access, Use & Outcomes of Care
Funding: Denver Health & Hospital Authority (AHRQ sub-contract)
Collaborators: Sheri Eisert, PhD & Patricia Gabow, MD, PI (Denver Health & Hospital Authority)

This AHRQ Task Order was designed to explore the New York- Presbyterian Healthcare System's capacity to conduct studies on the impact of race/ethnicity on the access, use and outcomes of care. Denver Health System conducted a study of its own capacity and Triangle Institute explored capacity at six other Integrated Delivery Systems (IDS) around the country. The New York-Presbyterian Healthcare System is built around the Academic Medical Centers of Cornell and Columbia Universities and is composed of 31 hospitals and long-term care facilities with over one hundred associated ambulatory healthcare centers and three Medicaid-CHP HMOs (PHSPs). The Information Systems of this multi-component system have evolved in relation to the constraints resulting from a series of acquisitions, mergers and affiliations. The IDS' Information System integration is most integrated in seven System hospitals: New York-Presbyterian Hospital (Cornell campus), Payne Whitney, Westchester Division, Community Hospital of Brooklyn, New York Hospital Queens Medical Center, Wyckoff Heights Medical Center and New York Methodist Hospital.

These seven hospitals are electronically linked through the HealthQuest registration system, the Eagle/TSI billing system, the Cerner clinical information system and the Universal Index. Through the common registration system, HealthQuest, all inpatient, emergency and ambulatory registrations are entered in the same format that includes an obligatory field describing ethnic and racial identity. The available codes that can be entered are Asian (A), Black (B), Hispanic (H), Indian (I), Other (O), Spanish (S), Unknown (U) and White (W). Unfortunately there is no common policy and procedure across the seven hospitals dictating how the clerk who conducts the registration should determine the ethnicity and race of the registrant. Similarly there are no routine quality control studies at these facilities surveying the accuracy of registration racial and ethnic coding.

In the year 2000 there were 489,478 unduplicated, unique patients registered through the common patient-registration information system. The obligatory patient registration demographic information includes a racial and ethnic identifier. Linkages were demonstrated among the demographic, utilization, insurance class and select clinical data of approximately half a million patients that register for care at either the inpatient, outpatient or emergency room settings. This data can also be linked to the data that is generated by the other collaborating IDSs. Optimal linkages were demonstrated with the Denver Health System.
Elder care is one of the most important social and public health issues in the United States. People are living longer and thus are more apt to develop a chronic illness that will impair their cognitive and/or physical ability to independently perform activities of daily living. Thus there is, and will continue to be, a need for caregivers.

This pilot study looks at the relationship between a caregiver’s perceived health and the presence or absence of social networks and social supports. The aim of this pilot is, using caregiver’s physical and mental health as the dependent variable, to determine how the quantity and quality of social networks and social supports affect physical and mental health.

Subjects were primary caregivers at least 55 years old. A self-administered questionnaire collected data on current perceptions of physical and mental health and quality and quantity of support systems and networks. Data show increased levels of depression resulting from assuming caregivers role and lessening of ties to families and community primarily due to lack of time. A limitation is that these caregivers were identified through agency contacts and thus have some degree of support while clearly there are many others with little or no support networks.

One condition has been selected for evaluation in this study, Type II diabetes. Diabetes has been selected since it disproportionately affects Latinos and African Americans and since disparities have been demonstrated in previous research. Differences in access to care by race/ethnicity for those with Type II diabetes, within and between systems, will be measured by:

- Financial barriers using uninsurance or underinsurance rates.
- Utilization differences using emergency and preventive care rates.
- Qualitative description of language barriers, such as percent of bilingual providers and availability of translation services.

Differences in the utilization of services by diabetics, within and between systems, will be measured by:

- Has there been an ophthalmology encounter in the last 12 months?
- Has a urine protein or serum creatinine been obtained in the last 12 months?
- Has more than 1 HgbA1C been obtained in the last 12 months?
- Has a full lipid profile been obtained in the last 2 years?

Dr. Ruchlin provides ongoing consultation in the following areas: (1) Asthma: To investigate the impact of relapse and re-hospitalization rates on use of emergency department care. (2) Depression and cancer: To develop decision trees as the basis of modeling the cost-effectiveness of new drugs compared to current standard practice. The economic modeling includes reduced medical care use and also gains from increased workforce productivity. (3) Diabetes - Economic modeling to assess cost-effectiveness for a new compound currently under development. The areas of expected potential benefit are reduced cardiovascular and neurological events, renal failure, blindness, and amputations. This project is being undertaken within a broader framework which also includes an economic analysis of the impact of the metabolic syndrome on medical care utilization and workforce productivity.
Investigators: Joseph J. Fins, M D
Title: Spiritual Guide to Palliative Care from a Jewish Perspective
Funding: CLAL The National Jewish Center for Learning and Leadership
Faculty of the Division of Medical Ethics will provide editorial consultation to the volume, "A spiritual Guide to Palliative Care from a Jewish Perspective" and serve as third author of a proposed volume for this effort funded by a grant to CLAL-The National Jewish Center for Learning and Leadership from The Fan Fox and Leslie R. Samuels Foundation through the partnership for Caring, coordinating center.

Investigators: Madelon Finkel, PhD
Title: Mini-course in Biostatistics
Funding: Brooklyn Hospital
Collaborators: Paul Christos, M S, M P H
A seven-week mini series on the basics of epidemiology and biostatistics is given to the Residents in Family Medicine at Brooklyn Hospital. Essentials of study design, data analysis, and research hypothesis testing are discussed. This course is given annually.

Investigators: Madelon Finkel, PhD
Title: Analysis consultation
Funding: Brooklyn Hospital
Dr. Finkel provides on-going consultation in data analysis, epidemiology, biostatistics and health economics to the faculty of Family Medicine at Brooklyn Hospital.

Investigators: Madelon Finkel, PhD
Title: Prostate Cancer Project
Funding: University of Medicine and Dentistry of New Jersey
Cornell Analytic/Consulting Services was asked to participate in a nationwide study designed to assess future physicians' attitudes and intended practices regarding prostate cancer counseling and screening. A randomly selected sample of Cornell medical students was asked to complete an online survey. The School of Public Health at the University of Medicine and Dentistry of New Jersey analyzed the data.

Investigators: Madelon Finkel, PhD
Title: Patient Satisfaction Survey
Funding: WMC Physician Organization
The Physician Organization of the Weill Medical College of Cornell University contracted with Cornell Analytic/Consulting Services to administer a bi-annual patient satisfaction survey. Twenty-two practices that comprise the Physician Organization completed the first survey in July 2001. A follow up survey will be undertaken in March 2002. Data analysis indicated that the overwhelming majority of patients surveyed rated the care and services very highly. Areas in need of improvement were identified and conveyed to the respective practice administrators.

Investigators: Madelon Finkel, PhD
Title: Rogosin Institute Telemedicine Project: An Evaluation
Funding: The Rogosin Institute
Collaborators: Hirsch Ruchlin, PhD and Paul Christos, M S, M P H
The Rogosin Institute has initiated a pilot program that places a remote monitoring device in the home of post-kidney transplant patients. By means of telemonitoring, patients can be monitored without having to come to the clinic. The device allows for "virtual" office visits that are interactive and also permits the healthcare provider to conduct a mini exam (listen with a stethoscope to heart, lungs, abdomen; record blood pressure, oxygen saturation, temperature, weight, and EKG results.

The purpose of our evaluation is to assess patient and provider satisfaction. A cost consequence analysis will look at the costs and potential savings of telemonitoring in this setting. Those with the device in their homes will be compared to a matched control, individuals similar in age, sex, disease status, who will receive care at the clinic as per usual.
Renal failure after coronary artery bypass surgery has been shown to increase mortality and hospital length of stay. This project aims to assess the economic impact of renal failure in CABG patients by quantifying the impact of renal failure that develops (or worsens) on resource consumption. The data source will be the NYPH cost-accounting system, and will employ a case control methodology.
Department of Public Health
Financial Profile
July 1, 2000 to June 30, 2001

<table>
<thead>
<tr>
<th>Funding Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical/Programmatic Funds</td>
<td>2,747,155</td>
</tr>
<tr>
<td>Gifts/Endowments</td>
<td>531,443</td>
</tr>
<tr>
<td>Institutional Funds</td>
<td>1,622,316</td>
</tr>
<tr>
<td>Research Grants/Contracts</td>
<td>3,612,466</td>
</tr>
<tr>
<td><strong>Total Department Funding</strong></td>
<td><strong>8,513,381</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Expenses</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary/Wage</td>
<td>4,754,420</td>
</tr>
<tr>
<td>Fringe Benefit</td>
<td>1,297,716</td>
</tr>
<tr>
<td>Total OTPS</td>
<td>1,377,968</td>
</tr>
<tr>
<td>Indirect Costs</td>
<td>1,083,276</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td><strong>8,513,381</strong></td>
</tr>
</tbody>
</table>

Note: Does not include Medical Ethics and the Adult Services Clinic - transferred to Public Health on 7/1/01 and 9/1/01 respectively
Sources: WMC FRS and NY-PH financial statements

3-Year Trend
Funding Sources

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>1998 - 99</th>
<th>1999 - 00</th>
<th>2000 - 01</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gifts/Endowments</td>
<td>0.427</td>
<td>0.553</td>
<td>0.531</td>
</tr>
<tr>
<td>Institutional Funds</td>
<td>0.726</td>
<td>1.236</td>
<td>1.622</td>
</tr>
<tr>
<td>Clinical/Programmatic Funds</td>
<td>3.022</td>
<td>2.955</td>
<td>2.747</td>
</tr>
<tr>
<td>Research Funds</td>
<td>3.040</td>
<td>2.708</td>
<td>3.613</td>
</tr>
<tr>
<td><strong>Total Department Revenue</strong></td>
<td><strong>7.215</strong></td>
<td><strong>7.452</strong></td>
<td><strong>8.513</strong></td>
</tr>
</tbody>
</table>

A Growing Department
3-Year Trend

Source: WMC FRS and NY-PH financial statements

-29-
Communications

The department recognizes the importance of communicating our work and achievements across our divisions, programs, the medical center, and the medical community at large. During the past year we have made great progress along these lines. We developed a number of new publications and also hosted several special events for our staff, friends and colleagues.

Publications


Last year witnessed the department’s first issue of our annual report titled Building for Our Future. Last year’s report provided a brief history of the department, defined our mission, and described our achievements during the 1999-2000 academic year. During Dr. Mushlin’s first year as chairman, the department focused on establishing the building blocks necessary to carry out our mission. These included: strong organizational foundation, academic and business forums, recruitment initiatives, a new office and research facility, and a state-of-the-art computer network.

Chairman’s Newsletter

In December 1999 we issued our first Chairman’s Newsletter to help keep our medical center community abreast of the latest departmental issues, initiatives, and events. These letters are issued quarterly in hard copy and are also made available on our website.

Website

The department website was first launched in October 2000 in collaboration with the Office of Academic Computing. In these times of high-speed information technology, it has become increasingly important to design and maintain a website that keeps pace with current events. New efforts will be undertaken in the upcoming academic year to revamp our website management process with the goal of providing our colleagues regular updates on departmental research, clinical and educational efforts.

Events

Kips Bay Opening Event

To celebrate the re-opening of our newly renovated office space at the Kips Bay building, the department hosted a reception for friends and colleagues in May 2001. Dr. Antonio Gotto, Dean of Weill Medical College, and Dr. Herbert Pardes, President and Chief Executive Officer of NewYork-Presbyterian Hospital, assisted in hosting the event. Speaking to more than 60 department faculty, college and hospital leaders and special friends of the Department of Public Health, Dr. Gotto spoke of the longstanding commitment of the Lasdon family and Mrs. Nanette Laitman to the department and thanked them for their generosity. He highlighted the importance of the department to the Medical College’s efforts in research, teaching, and in community service. Dr. Pardes emphasized the crucial role that the public health sciences play in the delivery of healthcare and the realization of our medical center’s goal to “become second to none.”

Also in attendance were prior chairman and Professor Emeritus Dr. George Reader; Mrs. Collete Kean, widow of Dr. Benjamin Kean, the renowned clinical Professor of Tropical Medicine and Professor of Public Health at Cornell, and Dr. Madelon Finkel, our faculty member whose family recently endowed the Lorraine and Ralph Lubin Distinguished Visiting Professorship in Public Health.
Other Department Events

The department hosted an open-house party in March 2001 to celebrate the return to our new offices and to thank faculty, staff, college facilities personnel and our neighbors in Kips Bay.

Also, in December 2000, faculty and staff attended a special holiday party. Following the nine months of renovations and relocation to temporary office space, the chairman hosted a private dinner for the full time faculty and staff at nearby Bandol restaurant. A special thank you was offered to all for their patience, hard work and commitment to literally helping to build a new foundation for our future.

And finally, the department initiated its first Annual Picnic, which was held at the Westchester campus on a spectacular summer day in July. In attendance were faculty, staff, family and friends who participated in a day of haute "outdoor" cuisine prepared by our very own senior faculty, as well as a number of "competitive" sports events. We look forward to the picnic's future as a new tradition for the department.
Development
The department’s commitment to excellence in clinical care, research and education could not be accomplished without the support and partnership of private philanthropy.

In fiscal 2000–2001, gift and endowment income accounted for 6% of the Department of Public Health’s funding sources. These critical funds were used to support a number of new and existing research and services programs, visiting professorships, and endowed faculty chairs.
In order to ensure the fulfillment of this commitment, the department is actively seeking gifts for research and teaching as follows:

Endowments:
Professorships for faculty in the divisions of Medical Ethics, Outcomes Research & Health Policy
Research
Postdoctoral Fellowship Program
Faculty Development/Research Fund

Expendable Support:
Start-up funds for new research
Clinical programs support
Chairman’s Development Fund
Divisional Development Funds

Interested contributors are asked to please contact the Chairman’s office or the New York Weill Cornell Development Office at 212/821-0500. The Chairman and the staff of the Development Office will work with prospective patrons on areas and projects of interest and review available recognition opportunities.
Contacts
Administration:
Alvin I. Mushlin, MD, ScM
Chairman
212/746-1269
aim2001@med.cornell.edu

Ann Matier
Department Administrator
212/746-1295
annmatier@med.cornell.edu

Clarissa Crabtree
Human Resources/Faculty Appointments
212/746-1250
ccrabtree@med.cornell.edu

Maritza Montalvo
Curriculum/Residency Programs
212/746-1264
mmontalv@med.cornell.edu

John Policard
Accounting
212/746-1998
jpolicar@med.cornell.edu

Luda Sitkowski
Administrative Assistant to the Chairman
212/746-1269
lus2002@med.cornell.edu

Administration office:
411 East 69th Street – Box 73
New York, NY 10021
212/746-8544 (F)

Divisions:
Community and Public Health Programs
Robert B. Millman, MD, Division Chief
212/746-1248
212/746-8310 (F)
rbm2002@med.cornell.edu

Health Services and Policy Research
Hirsch S. Ruchlin, PhD, Acting Division Chief
212/746-1256
212/746-8544 (F)
hsruchli@med.cornell.edu

Medical Ethics
Joseph J. Fins, MD, Division Chief
212/746-1347
212/746-8738 (F)
jjfins@med.cornell.edu

Outcomes and Effectiveness Research
Mark A. Callahan, MD, Division Chief
212/746-2874
212/746-8544 (F)
macallah@med.cornell.edu

Department website:
http://www.med.cornell.edu/dept/public.health

Prevention and Health Behavior
Gilbert J. Botvin, PhD, Division Chief
212/746-1270
212/746-8390 (F)
gjbotvin@med.cornell.edu

Consulting:
Clinical Research Methodology Core
Linda M. Gerber, PhD, Director
212/746-2153
212/746-8544 (F)
lmg2002@mail.med.cornell.edu
Website: http://www.med.cornell.edu/research/cores/biostat/

Cornell Analytic Consulting Service
Madelon Lubin Finkel, PhD, Director
212/746-2153
212/746-8544 (F)
maf2011@med.cornell.edu

Programs:
Adolescent Development Program
Elizabeth T. Khuri, MD, Director
212/746-1277
212/746-8473 (F)
etk2001@med.cornell.edu

Adult Services Clinic
Aaron Wells, MD, Director
212/988-5081
212/988-5356 (F)
euc2004@med.cornell.edu

Employee Assistance Program Consortium
Sonia Austrian, DSW, Director
212/746-5890
212/746-8586 (F)
saust@med.cornell.edu

Employee Development Center
Jeffrey Emil Diaz, ACSW, Director
212/935-3030
212/935-3037 (F)
jdia@edcworks.com

Midtown Center for Treatment and Research
Martin Sherry, CSW, Director
212/764-5178
212/764-5644 (F)
ms2002@med.cornell.edu

Clarissa Crabtree, Ann Matier, Luda Sitkowski, Maritza Montalvo and John Policard
Weill Medical College of Cornell University
Department of Public Health

Focus
The interface between public health and medicine.

Public Health

Medical/Healthcare Delivery & Performance

Medicine