



Office of the  
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## Dr. Berk's Remarks

Thank you for that heartwarming welcome. As I look around this auditorium tonight I am thrilled to see so many good friends and valued colleagues -- people who make this place so exceptional, and who make our collective future so promising.

I deeply appreciate each one of you – my leadership team, faculty members, students, staff, and especially community leaders who give time, talent and resources. You are the core of this Medical Center and the authors of its current and future success.

I'd also like to thank President Seligman for his leadership and for his confidence in me and his optimism about the future of this medical center.

I also want to thank my family. Some very important people in my life are here today: my wife, Mary for her constant support, for her common sense and critical nature. Also here today are my daughter Mariah, with her husband, Anthony DiMarco, my mother, Eve Berk, and my sister Karen Berk. Their support, love, and encouragement, are a daily source of strength for me. Thanks for bringing the joy to my life.

Investitures provide us the rare opportunity for a new beginning. So I'd like to use this occasion to share my vision of where the University of Rochester Medical Center is headed. Martin Luther King, Jr. used the phrase, "the fierce urgency of now." I can't think of a phrase that more aptly captures the opportunities that we face today in academic medicine -- and the "fierce urgency" with which we must embrace those opportunities and challenges. To thrive, we must expect, even *welcome* change as we chart our future direction.

There are three major trends that we can anticipate as we plan for our future. The first is pursuit of quality and transparency in our clinical enterprise. We are a consumer-driven society and increasingly health care will be purchased based on price and quality. Consumer reports rates insurance companies for home, auto, life and now health care. Can ratings of Medical Centers be far behind? In fact, the most distressing event in the past 2 months was the Health Grades report that gave SMH low marks for outcomes in several diseases. We must make the care at our Medical Center of the highest quality. Anything less is



unacceptable.

The second trend is the shift to a knowledge-based economy. Rochester was the Flour City in the 1800s for its role in agricultural commerce, and the imaging industrial city of Kodak, Xerox and Bausch & Lomb in the 1900s. But in the 21st century we will be led by the strength of knowledge powered by institutions of higher learning. Our production will be the cognitive and translational efforts of our faculty, researchers and students. Our strategic plan must be designed to guide us through a landscape where intellect, innovation, and creativity are cultivated and where the spirit of exploration, discovery and risk-taking, leads the way. The relevance of higher education to a knowledge-based economy is obvious. This institution is dedicated to equipping students with the critical thinking and caring skills they will need to compete in this new economy. We are intensely involved in the discovery, dissemination, application and commercialization of new knowledge. Simply stated, I believe the success of this Medical Center and the University of Rochester in achieving their missions will determine, in a significant manner the extent to which Rochester and our region thrive in the new economic order.

The third trend we must acknowledge is the awesome power of technology. As a cardiologist I have personally witnessed that the major advances in treatment of heart disease over the past 20 years have been devices, not drugs. Coronary artery disease has been tamed by angioplasty balloons, corralled by stents, and conquered by drug eluting stents. Similarly, the risk of cardiac arrhythmias and sudden death in patients with heart failure has been dramatically reduced by pacemakers and implantable defibrillators. Thus, we must embrace technology to lead the way in developing future medical therapies.

While embracing technology we must also remain true to our heritage of excellence in basic research and fundamental discoveries. Hence our mission statement will be: using education, science and technology to improve health. The fierce urgency I feel is rooted in my belief that never before in the history of this institution has the convergence of opportunities been greater. We are privileged to be here at this time.

New beginnings are also times of promises (frequently unrealized). So - I want to make sure that tonight I provide you some "high probability" promises. On August 1 when I was first appointed to this position I promised to work on two critical issues confronting URMC: the ED and NIH bridge funding. I am here to report that it is now 100 days since then and we have made significant progress in both issues. The ED, under the leadership of Sandy Schneider and Robbin Dick has dramatically improved its throughput and triage functions. Other departments have stepped up to improve patient handoffs. We will be submitting a plan within the month to increase the number of short stay and observation beds and to create 20 new in-patient beds within the next 12 months. With respect to NIH funding we have been more successful in our grants applications than expected and have not witnessed declines in total funding. Nevertheless David Guzick and Howard Federoff have nearly finalized a plan for bridge funding to begin December 1st. We have had two other notable successes in my first 100 days. First, we have redesigned the Graduate Medical Education website and 19 of the 25 residency programs (representing a total of 951 web content pages) to enhance our recruitment efforts this year. Second, we received notice of award on October 3 that URMC was one of 12 institutions to receive a CTSA, the largest grant at \$43M in the history of URMC. Certainly these recent events auger well for the medical center.

So where do we go from here? In August, I discussed the strategic planning process that we anticipate will yield a roadmap for the future by the spring of 2007. Rather than review the contents of the strategic planning I want to give you a sense of the excitement that this process will generate. First, this excitement is about people – faculty, staff, students and community. We want to make URMC the best place to work in Rochester, because we are making a tangible difference. Thus our efforts have to be translational, that is they must introduce new therapies, new products into the marketplace. Second, the process must be community oriented. We want to engage Rochester by taking leadership roles in research, health care, and economic development. A tangible example is developing approaches to improve the health of our own

employees. We have created the Wellness U website, banned smoking from the campus, and are creating best practice clinical pathways derived from evidenced based medicine for patient care. Third, my own personal contribution is to promote our efforts around science and technology. As a scientist who has been funded for 20 years, I believe that discoveries and advancement of medical research represent the best avenue for this University to achieve national prominence. I would like to use tonight's plenary lecture by Craig Jordan regarding cancer stem cells as an example of how we can make the excitement of our strategic plan real to the community. Education as will occur tonight must be for students, community and our faculty. The basic research underlying this must be world class, and interdisciplinary. We must recruit nationally recognized scientists who can build on our innovative programs such as stem cell biology. This requires facilities – a stem cell institute; graduate students and courses; ethical discussions among all stake holders. clinical faculty interested in using stem cells to treat illness; and leadership willing to support the long-term investment necessary to succeed. I think you will appreciate the elegance of stem cell based approaches to disease therapy after you hear Craig Jordan's presentation.

In concluding, I call on three groups to assist us in this process -our faculty, our alumni and our community leaders, especially our board members. The URMC board is a distinguished group of individuals that I have come to appreciate for their insight and commitment. I know that their guidance will be critical for our success. The mission I have shared with you today is a reflection of my belief that we can, and will, achieve great things together. I pledge to you my best efforts to make this vision a reality. And I ask for your best efforts in return. I am committed to creating a place where our dreams and the dreams of our community, can prosper. Leadership on this campus resides not only in the offices of chairs, deans and CEOs. If our vision is to succeed, leadership must be every classroom, laboratory and office on this campus. Please join me in embracing the "fierce urgency of now."