

FACULTY AND PROFESSIONAL STAFF OF THE COLLEGE OF MEDICINE

Minutes of the Semi-annual Assembly

December 1, 2010

Presiding Officer Stephen Rinnert called the meeting to order.
Minutes of the previous meeting (June 9, 2010) were unanimously accepted.

Dean's Report

Dean Taylor gave an update and history of the LCME status. He stated that Downstate is fully accredited and we have the maximum allowable accreditation from the visit in 2005. There had only been an 87% pass rate on Step One. Nationally the rate is in the mid-nineties. The LCME visit in 2005 cited several areas for non-compliance. Unfortunately many of the citations were not addressed. The LCME does not like citations that are not addressed. Since these citations are decades old, this posed a major problem with LCME. Upon Dean Taylor's arrival, LCME sent a letter stating that if Downstate did not address the citations, there would be serious consequences, such as probation. Dean Taylor stated that he spent the first two months thinking of how to address these problems with LCME. LCME stated that there were 9 areas of non-compliance which had to be addressed. In January 2008, LCME notified Dean Taylor that there was compliance in 4 of the areas they wanted a progress report for the other areas. In Oct 2008, LCME sent a letter stating that Downstate was in full compliance in 2 of the 5 areas. The next site visit would be 2012-2013. In August 2010, Dean Taylor will send a letter to LCME regarding the three areas of non-compliance. They are 1) Standard FA-13-The state of recommendations related to student promotions committee policies, 2) update of the research building and 3) update of new information management system software to monitor student evaluations and patient log. LCME was not happy with the paper systems and the delay of getting evaluations in a timely matter.

- 1) The state of recommendations related to student promotions committee policies- There were a number of recommendations on the promotion/policy committee. One of the recommendations is to have faculty members serve 5 years. Dean Taylor would like the Executive Committee to recommend faculty who are willing to serve. For those who are not familiar with the grades and the promotions committees, they have different functions. If a student fails a course, the student has to go to the grades committee. Promotion committee deals with students who have a problem such as a death in the family or a serious illness that might hinder their work. The promotion committee can take into consideration factors beyond academics. The Dean was also asked to develop a system for formal reporting for professionalism or related issues and how it should be tracked, identified and addressed. This issue came to light when the students complained of lack of professionalism in the faculty. The promotion committee reported that faculty was not on time for lectures or absent. The students complained that faculty members were not attending group sessions. Dean Taylor thought the parallel complaint of both students and faculty was interesting. The Dean met with the Executive Comm and asked Dr. Charlene An to chair a committee to look at professionalism. Dean Taylor stated that this issue has to be addressed because we are the role models. The Dean has met with Dr. An and she is working on this report.

- 2) Update of the research building-Before the state budget crisis, the legislature allocated 100 million dollars for this building. Gov. Patterson signed off on this so it is in the budget. There was a selection process with the steering committee with representation from the College of Medicine and the School of Public Health. The design team has been chosen. There is currently a designing phase with various committees involved. A final decision has not been made, but there will be a 12,000 square foot simulation center, a team learning facility and 9,000 sq ft of new research labs. The building will also house the School of Public Health. This process is ongoing. The Dean does not foresee problems with the construction of the building because the money is there. The new building will promote new jobs. This is the first building built on this campus since 1990.
- 3) Update new information management system software to monitor student evaluations and patient logs-After looking at a number of products, we decided to go with New Innovations. This product is already being used by residents and our major affiliates. The company has set up a module for students. It is used for residents' evaluation and it seems to be working. Pediatrics and Obstetrics and Gynecology are testing the student module with mixed results. Dean Taylor stated he would like to see this software up and running in the upcoming year since this is one of the areas of non-compliance.

Another big item is the state budget. The school has had three budget reductions in the last year and a half totaling 14%. We have been notified there would be at least 2 more reductions so we are anticipating a cut of 24% of our budget. We have to work together as a faculty and administration to work out how we are going to deal with some of these issues to have the least impact on our mission. To say that it won't have an impact on our mission would be misleading. Cuts of that magnitude will have an impact on our mission. Good management and loyal faculty, which we have, will manage this issue. Downstate has been through this before and we still have great students with great results.

Dr. Rinnert, the presiding officer, introduced Dr. Sass.

Curriculum Renewal

Dr. Sass reported to the audience on USMLE, Step 1 and 2 changes and LCME accreditation standards

USMLE

- Foundational Science will appear in all 3 Step Exams
- Increased sophistication of clinical skills testing
- Real time evidence-based medicine decision-making highlighted

Step 1

- Not "getting rid" of Step 1
- Reducing Step 1 "recall items"-using clinical vignettes, video clips
- More interpretation of literature (abstracts, pharmaceutical advertisements)
- Throughout all Step exams more biostatistics and epidemiology

Step 2

- Multi-media integrated cases to assess clinical judgment
- Live search queries on clinical problems considered
- Current Step 2 CS deemed appropriate for end of traditional 2nd year student, want to assess more sophisticated skills

LCME Accreditation Standards

- Shift from specifically naming required disciplines to “content guided by disciplines traditionally titled”
- Move to adult learning and focus on “outcomes based terms that assess student progress in developing expected competencies”

Dr. Sass stated that the Implication of the Curriculum Renewal are:

- Competencies and outcomes assessments are not going away but rather becoming a common link across medical education and licensing
- Need clinical context of foundational science early in education
- We must reinforce/bring foundational science to later years
- Application is crucial-explicitly teach skills such as application of foundational science, physical diagnosis, clinical reasoning, and evidence-based decision making, and higher level patient care skills including communication and interpersonal skills

Dr. Sass gave an overview of the curriculum renewal process (see attachment)

Report of the Presiding Officer

Dr. Rinnert thanked Dr. Sass for her presentation. Dr. Rinnert announced that there was a position open as presiding officer elect because Dr. Patricia O’Neil is now the chief of surgery and can’t commit to the duties of presiding officer elect. Dr. Rinnert asked that if anyone was interested, they should let him know. The chairs of the subcommittee, except for CAPQ, are not elected. They are appointed by the presiding officer of the Executive Committee. Dr. Rinnert introduced the subcommittee chairs

Dr. Maya Nowakowski-Nominating Committee

Dr. Rauno Joks (Chair)-CAPQ

Dr. Christopher Roman-(Vice Chair) CAPQ

Dr. Keith Williams- CEPC Committee

Dr. Matt Avitable-Faculty and Professional Staff

Dr. Edward Quadros-Research, Resources, and Budget

Dr. Allen Norin-ByLaws

Dr. Charlene An- Student Admissions, Academic Standards

Dr. Kathleen Powderly-Student Activates

Dr. Rinnert spoke on behalf of Dr. An who was unable to attend. Dr. An, who is the chair of the Student Admissions and Academic Standards sub-committee is working with the curriculum committee on setting guidelines for professionalism.

Dr. Rinnert stated that elections will soon be held for next year. Anyone who is interested should let him know.

ALRC –There are several projects with emergency medicine, trauma, and cardiology with many activities. The birthing simulator is here and located in the Advanced Learning Resource Center in the basement of the library. The webpage is up and can be accessed through the Library’s webpage. Dr. Brian Gilette is leaving. We are currently looking for someone to head the ALRC Faculty Development- There are still some issues with faculty development activities, especially with busy schedules and limited resources. There were many grand rounds scheduled. In April 2010, there was a faculty development symposium which had an okay turnout. We had an in-house speaker, Dr. Gilette, who gave a presentation on the simulation center. Dr. Rinnert stated

that in the future, he hoped to have more in-house speakers at the Faculty Development symposiums. The Faculty Development website also has some logistical problems. Academic Building-Dr. Rinnert stated that the decision of the location of the new building has not been made.

The Sesquicentennial Celebration events were great

Reports of Subcommittee Chairs

NOMINATIONS

Dr. Nowakowski stated that the Executive Committee ballot needed 4 members for basic sciences and 3 clinical, presiding officer elect and 1 secretary. Dr. Joks has volunteered to be the presiding officer elect. Nominations were taken on the floor.

BYLAWS

The current issue with the Executive committee is that the presiding officer term is ending and the presiding officer elect has had to step down. The Executive Committee has asked the bylaws committee to review this. One suggestion was to make the term shorter. Dr. Norin, who is the chair, stated that it was not a great idea. One of the problems they are experiencing is that clinical assignments are taking a tremendous amount of time and causing people to step down. Years ago, the Executive Committee informally had staggered terms in which the presiding officer was a clinician and the presiding officer elect was a basic scientist. If the clinician has to step down, the basic scientist would assume the role as presiding officer. Dr. Norin stated that there should be a recommendation to have alternate terms between clinical and basic science faculty.

On Friday, will be a student- faculty picnic and softball game. If the ground is wet, the softball game will be moved to the gym.

CAPQ

Dr. Roman introduced the members of the CAPQ committee: Dr. Rauno Joks, Chair, Dr. Christopher Roman, Vice Chair, Dr. Bonny Baron, Dr. Audree Bendo, Dr. Paul Harris, Dr. Douglas Lazzaro Dr. Lisa Merlin, Dr. Judith Mitchell, Dr. Frank Scalia, Dr. M.A.Q. Siggiqui and Dr. Rebecca Twersky

This year, CAPQ has reviewed 29 recommendations for appointment and/or promotion. There have been 4 tenure reviews. Last year, the committee reviewed 29 promotions and/or appointments and 7 tenure recommendations To date, there are 50 active dossiers that contain a current letter of justification from the Department chair, letters of recommendation, a CV or reprints. Upcoming affiliations have brought and will bring more recommendations for appointments as well as promotions. The CAPQ would like to stress the importance of a clear and updated CV. This only ensures a fair review of the candidate's qualifications. If the scholarly activities and teaching and service information are not clear, the recommendation will be tabled for clarification and the faculty member will be asked to provide a clearer CV in the required format.

STUDENT ACTIVITIES

Dr. Powderly has new student volunteers. One of the items that was brought to her attention was that student leadership was unable to pay for tickets for the Sesquicentennial Ball. There was no

student rate for the ball. \$200 is a lot for students. The Executive Committee, asked faculty to sponsor students. One faculty member and several departments sponsored students.

FACULTY AND PROFESSIONAL STAFF

Dr. Avitable introduced the members of the sub-committee:

Dr. Mary Ann Banerji	Medicine
Dr. Annette Ceratto	Surgery
Dr. John Hartung	Anestheology
Dr. Stephen Fox	Physiology/Pharmacology
Dr. Todd Sactor	Physiology/Pharmacology
Dr. Matthew Avitable	Scientific Computing

Dr. Avitable stated that the committee surveyed junior faculty in the basic sciences. They gathered opinions on how they viewed their role here at Downstate and whether there was sufficient support for advancement in their career at Downstate and for the future.

Compliance with the COM policy to formally meet with department chairs at least once per year was assessed. There were 19 junior faculty members identified by departmental chairs. Out of the 19 surveys sent out 11 surveys were returned. Next the survey will be sent out to junior faculty in the clinical departments. The sample will be larger and the questions will better fit the clinical departments.

Respectfully submitted,

Kathleen E. Powderly, PhD
Secretary