Stony Brook School of Medicine Faculty Senate Meeting October 24th, 2006

Dr. Cedric Priebe (Presiding) Dr. Scott Johnson (Recording)

Attendance: Please see attendance roster.

Dr. Priebe called the meeting to order at 5:08 pm. Dr. Priebe welcomed all attendees to the first plenary Faculty Senate meeting for the academic year 2006-2007.

I. Review of Minutes of Meeting of May 30th 2006:

Dr. Johnson

• Minutes of the May 30th meeting were accepted as written. Dr. Priebe asked that if anyone had any questions or concerns regarding the previous minutes to address them with him or S.Johnson.

II. Report from the Dean of the SOM

Dr. Fine

- Dr. Fine gave an update on the status of several SOM issues.
- The DOH and CMS have both recently conducted investigations at SBUMC. The initial statement of deficiencies which were responded to pertained to 3 pediatric cases.
 - o 19 deficiencies were found and addressed.
 - SBUMC responded to both the DOH and CMS. SBUMC received no negative feedback from the CMS response and the DOH has yet to provide any feedback to SBUMC.
 - SBUMC is currently awaiting a second statement of deficiency from the DOH.
 - Or. Fine anticipates that this investigation will reveal a lack of compliance in 2 areas of participation for Medicare and Medicaid. We can expect that investigators will be here for at least several weeks, if not months or years.
 - o Dr. Fine expects that it will be a stressful environment, particularly in the beginning of the year 2007.
- During a 2 week period in late August and early September there was an onslaught of DOH investigators at SBUMC. The exit interview was lengthy and indicated certain areas of deficiencies.
 - Credentialing
 - o QA- not adequate in some departments
 - o HIV program concerns- some protocols have not been updated in 15 years.
- There were no major patient-related issues.
- Medication related errors were investigated, but SBUMC has not yet received any feedback.
- JCAHO made an unannounced visit to SBUMC in late August. A modest number of Requirements for Improvement were established.
 - One response involved the audit of medical records by our faculty. Medical records were audited for legibility, appropriate use of abbreviations, and appropriate signatures.
 - o Plans to continuously monitor and audit medical records should reveal better compliance.
 - o Dr. Fine expects a 3 year accreditation from JCAHO. However, we need to be vigilant regarding compliance, as JCAHO will likely perform a follow-up visit to ensure continuing compliance.
 - We also must be diligent in adhering to all of the requisite remediation changes proposed by JCAHO.

- Dr. Fine addressed the lack of SBUMC's public response to the negative media publicity, particularly that published in Newsday.
- SBUMC hospital and SOM administration recently met with the editorial board of Newsday to voice their concerns that Newsday was disingenuous in linking pediatric cardiothoracic surgery cases to general pediatrics. Also conveyed concerns that the negative publicity has held up the opening of the new cancer center.
- Dr. Greene also presented quality data regarding 1) the low pediatric hospital mortality rates and 2) the short door-to-balloon times for cardiac catheterization during a heart attack. (SBUMC average time is 80 minutes as compared to a benchmark time of 120 minutes).
- The Newsday editorial board seemed open and receptive to SBUMC's concerns, although the editorial board and newsroom may not communicate directly. We will probably not see anything regarding these issues until after the elections, as this is not presently on their priority list.
- Regarding the criticisms that SBUMC has not publicly defended itself, Dr. Fine explained that several media consultants have opined that it would be most prudent to not publicly engage with Newsday or the DOH regarding these issues.
- Statement of the facts is important for the hospital staff and SOM faculty; there should also be some information disseminated to patients.
- SBUMC has advertised the fact that 25 SBUMC doctors are listed in NY magazine
 as NY's Best Doctors, as well as the fact that SBUMC received a modern hospital
 consumer choice award. Ads have been developed which display our positive
 outpatient care statistics and present our patient care the way it is really given.
- There have also been suggestions to initiate radio spots involving positive patient testimonials with various diseases describing the excellent care they received at SBUMC.
- We need to be proactive and anticipate a possible negative response from the DOH.
- Town Hall meetings have been well-received; several have taken place in the recent past. However, there has been little direct communication with the voluntary faculty. On November 29th all voluntary faculty have been invited to a 3 hour cocktail party at the Old Field Club to provide the administration an opportunity to present updates and information, as well as outcome and mortality statistics.
- Dr. Benjamin queried whether there has been any change in admission rates or in any
 other markers which would signify a change in patients' perception of SBUMC. Dr.
 Fine answered that the hospital census has not been substantively affected, although
 it may be a little lower than usual. The magnitude of any possible patient
 dissatisfaction cannot be adequately ascertained.
- Dr. Priebe commented that there have been several pediatric surgical patients who
 have cancelled their scheduled surgeries and have gone elsewhere for surgery
 because of the recent negative publicity.
- Dr. Fine commented that there are plans to modify the major modernization project to allow construction of a covered walkway from the hospital parking lot to the hospital.
- Dr. Priebe asked if Dr. Fine has been able to convey the importance of the need for administrative support in the CTSA grant award application process. Dr. Fine responded that he has engaged faculty on the West campus for collaborative support. The Stony Brook enterprise is neither an East nor West campus enterprise. Everyone is very cognizant that it is very important to engage in translational research, and that the CTSA is the vehicle which is exceedingly important to obtain.

III. Report of the President of the University Senate

Dr. Lane

• Dr. Bernard Lane (Professor, Department of Pathology) reported on the recent issues confronting the SUNY Stony Brook University Senate.

- Dr. Lane described the University Senate as the "Senate of Senates." Whereas the SOM Faculty Senate deals only with issues peculiar to the SOM, the University Senate deals with all issues that involve the entire campus.
- Dr. Lane reported on the recent No-Smoking Resolution that was being promulgated by SUNY Chancellor Ryan across all SUNY campuses and proposed by the Stony Brook University Senate. The University Senate proposal for a Campus-wide No-Smoking Policy was supported by the SOM Faculty Senate with the caveat that enforcement may be problematic. However, there has been significant resistance from the SUNY Stony Brook under graduate and graduate student bodies regarding this resolution and the voting on it has been postponed.
 - o The student body is very much enfranchised in the University Senate, as they comprise up to 18% of the Senate membership.
 - The student body, both undergraduate and graduate, has voiced strong opposition to a smoking ban on campus. It is perceived as a violation of their civil rights and an infringement on their lifestyle, as many live on campus 24/7.
 - Enforcing such a ban would require both peer pressure and education.
 - O The students suggested a 6 month hiatus from voting on this proposal and that the university provide education to the student body on the detrimental effects of smoking on the individual and society.
- Dr. Lane commented that this should be a 5 year plan. Goals are educating the student body and encouraging peer pressure that smoking is the wrong thing to do.
- A suggestion was made to distribute an American Cancer Society pamphlet to educate on how to make the campus smoke-free. It is imperative to educate the students that a smoking ban is not a civil rights issue, but a health issue.
- A suggestion was made that perhaps over several years a policy could be implemented whereby matriculation at Stony Brook would be contingent upon smoking cessation. Someone responded that Stony Brook is a public institution and we would be heading towards a slippery slope as we would have no legal standing to make matriculation contingent upon not smoking.
- Dr. Lane commented that if we can't help them kick the smoking habit then the nosmoking ban will never work. Perhaps the university can consider making a smokefree campus an aid to recruitment, rather than making it a requisite for matriculation.

IV. Report of the RAAP committee and Progress of CTSA application Dr. Bahou

- Dr. Wadie Bahou, Vice Dean for Research/Office of Scientific Affairs and RAAP (Resource Allocation and Academic Planning) Committee Chairman, reported on the progress of the RAAP committee and the CTSA (Clinical Transitional Science Award) application process.
- Dr. Bahou stated that the CTSA has been spearheaded by Dr. Marie Gelato, with small working groups building on progressive success in translational research over the last 7 years by the GCRC.
- Dr. Bahou described how the Office of Clinical Trials was developed to facilitate interactions between pharmaceutical companies and faculty investigators.
- The CTSA is a large sizeable grant that promotes translational research in an
 institution. It must be a university-wide initiative and both sides of campus must be
 engaged in a collaborative effort.
- A CTSA Planning Grant was submitted in January 2006, for which funding was received. The next deadline submission date for a full CTSA grant is January 2007. However, we will not be prepared to submit an application by this deadline. Our proposed submission date is Fall 2007, at which time we expect a robust and competitive 3rd round of CTSA submissions.

- We need to ensure administrative and business structures which conform to university policy and we need to find a physical home for the center.
- Dr. Bahou has been meeting with SOM senior administration and with President Kenny to acquire the requisite resources for a competitive CTSA submission. He would also like to engage Dr. Priebe (SOM Faculty Senate president) and Dr. Lane (University Senate president) for their help.
- Dr. Bahou reiterated that if we are not successful in obtaining a CTSA grant we will not be able to move forward as a medical school.
- SUNY Central has decided to develop an Empire Innovation Program that will ensure that we remain competitive; hard lines can be given purely for research. Stony Brook has proposed 8-10 research faculty lines.
- There will be focus on Human Genetics, Avian Influenza, Diabetes/Endocrine, and Stem Cell research. The programs need to be mature, and we are not yet mature in genetics or stem cell research. Initiatives in Avian Influenza and Diabetes/Endocrine have been put forward and 4 new lines have been funded.
- A \$26 million grant from NYS for developing a supercomputing center to be housed at BNL has been awarded. It will function as the nidus for computational-based human genetics initiatives. It is expected to be up and running in January 2007 and 6.5 new lines will be generated.
- A searchable database on the OSA website is now functional. Output is faculty
 publications and research support. Searches can be done based on expertise or
 University faculty.
- The OSA now has support specifically for junior faculty to help with all phases of grant submission.
- The opening of a Genetic Research lab will be announced in approximately one month.
- There has been success in obtaining instrument grants; in conjunction with the VA a
 new small animal imaging facility, with an ultrasound and micro-CT, has been
 opened. This allows collaboration with pharmaceutical companies, who can now
 access this state-of-the-art imaging facility.
- Dr. Bahou would also like to develop a core facility for biostatistics, which is necessary for CTSA.
- Dr. McNurlan suggested implementing an electronic form for grant submission to obtain all of the requisite signatures electronically. Presently this process takes at least 10 days to accomplish with paper forms. Dr. Bahou thought this was an excellent suggestion.
- Dr. Steigbigel reiterated that it is critical that we obtain the CTSA. He suggested that
 emails be sent out to the entire campus faculty to educate and emphasize the
 importance of the CTSA. The emails can notify as to what components are necessary
 for CTSA grant submission. He commented that we now have information on which
 CTSAs have been funded. Twelve have been funded with the entire grant or an
 outline available on the web. Given the critical nature of the CTSA we need to get
 large groups of faculty involved and more organized.
- Dr. Bahou concurred that this is a huge university-wide initiative with only a small amount of faculty participating in the process.
- Dr. Simon reiterated that the Sunshine Laws allow us access to the CTSA grant applications which have been funded and we need to take advantage of this.
- Dr. Priebe thanked Dr. Bahou for his informative report.

V. SOM Simulation center

Dr. Mylona

o Dr. Mylona reported that on the new SOM Simulation Center, which has been renamed the Clinical Skills Center and is located on the 2nd level of the HSC. There

- will be an opening ceremony sometime in December, although the first exams in the center will take place next week.
- O Dr. Mylona stated that 90% of medical schools have standardized patient programs or have human simulators. As we move to a competency-based curriculum, this center will be critical to further assess clinical skills. The LCME is asking for more documentation on the assessment of students and clinical skills are now a requirement for the NBME Step II exam.
- o Dr. Mylona presented the architectural plans of the Clinical Skills Center, which includes 10 exam rooms and also 2 larger rooms with human simulators, one which is a SICU/Trauma Room and the other is an OR for surgical simulation.
- o Dr. Mylona described how standardized patients are recruited and utilized, as well as their value and inherent limitations.
- O Dr. Mylona described the existing SOM programs in years 1-4 which utilize standardized patients: OSCE (objective structured clinical examinations), ICM, clinical performance exams and clerkships.
- Dr. Mylona described the OSCEs in detail; components of the exam and how they are assessed.
- The Dean is committed to supporting the Clinical Skills Center by providing the necessary resources.

VI. Competency Task Forces Retreat

Dr. Mylona

- o Dr. Mylona stated that the scheduled retreat in December will be postponed, as the 10 competency task forces have not yet finished determining their recommendations.
- o It has been difficult to get full membership at the task force meetings. Moving the retreat to January 2007 will allow the task forces to complete their charge. The date in January is to be announced by Dr. Williams.
- Or. Mylona commented that several faculty recently took a trip to Indiana University SOM to review their competency-based curriculum, which has already been implemented and was developed over 10 years. The trip was very informative and helpful to all of those who attended.

VII. APT committee Dr. Priebe

- Dr. Priebe stated that all APT nominations are now done electronically by department chairs and administrative staff. The APT Committee is now more efficient and the time required to process and review an application has been significantly reduced.
- He stated that the optional Personal Statement is now listed on the APT Checklist posted on the website.
- He stated that the Basic Science Educator track is still under discussion by the APT Committee.

VIII. New Business

- Dr. Sussman informed the Faculty Senate that on November 4th there will be a SOM Alumni Dinner honoring the classes of the last 5,10,15,20 years. The Dean is hosting a cocktail hour at Danfords on the Sound. The contact # of Alumni Affairs is 444-2899.
- The next Faculty Senate meeting will be on **Tuesday, November 28**th at 5pm in LH 6.
- The meeting was adjourned at 6:24 pm.