

Faculty Senate Meeting Minutes
December 16, 2019
Hofheimer Hall - 7th Floor - 5:00 pm

Present (in alphabetic order): Cipi, Anjeza (call-in); Daniel, Dianne; Hosseini, Alireza; Lappinen, Erik (call-in); Morris, Shannon; Musto, Alberto; Pakrashi, Tarita (call-in); Rubino, Mary; Strunc, Michael.

Visitors-Drs. Homan, Flenner, Mylona

1. The Faculty Senate was called to order at 5:00 by Dr. Hosseini.
2. The minutes from the November 2019 meeting were approved.
3. Dr. Richard Homan, Dean, President and Provost of EVMS gave a presentation that updated progress on a number of issues. (1) On our pre-SACS assessments, medical students are doing well above average in a number of areas, including diversity, inclusion, attitudes and community outreach. The faculty, although over-stressed, are at the national mean, and with more support forthcoming this level will increase. A formal report was promised to the press and will be released soon, as well as posted on the EVMS website and discussed in the upcoming Town Hall meeting. Areas that need more effort include processes to address misconduct, including sexual, gender, ethnic and other types, so that individuals feel that there are suitable methods available to address these concerns, engaging both HR and compliance through General Consul's office. These processes involve multiple consecutive steps that take time to perform and the results by their nature need to be confidential, thus creating a perception to some onlookers that matters are not being addressed. The sequence of events within the misconduct evaluations and the fact the results might not be generally disclosed will be explained in a Town Hall meeting. (2) A new methodology to draw down additional Federal funds is being formulated that may allow Sentara to access \$40 million more per year, with potential benefit to EVMS. This is related to the classification of hospitals in Virginia as either a Type 1, which are UVA and VCU (most favorable to receive Federal funds), and a non-Type 1, such as Norfolk General. By creating a Type 1A class through legislation, there would be a potential for a non-state owned hospital to get some of these Federal benefits. Sentara has involved a consulting

group used by Dean Homan in previous medical schools to examine this approach, this could also spinoff into other Virginia medical schools that would then be in competition for this support. (3) EVMS is the only Virginia medical school that is below state base adequacy support. This support would also aid in improvements in Waitzer and Lester Halls. The Dean has been addressing this goal and will visit Richmond soon on this issue. Dr. Derkay will be part of the White Coats on Call group heading to Richmond in February, and it was suggested that this group speak about this subject as well. Dr. Derkay will be contacted by the President's Office and given talking points to aid in addressing these issues. Increases in this base adequacy will support additional improvements in Lester and Waitzer Hall. (4) With support from Drs. Mylona and Combs, among others, over 6000 pages of accreditation material including the Quality Evaluation Plan (QEP) was sent to SACS. EVMS received the SACS written responses to this material, with only minor administrative comments returning. (5) Waitzer Hall construction is on time and on budget and will be completed in the summer of 2020. (6) The BOV approved an endowed chair of Otolaryngology to support Dr. Strasnick, which closed this year's endowment period utilizing the Sentara affiliation funds. (7) To fill the chair of Internal Medicine, 16 candidates had been found, with one candidate getting a job offer. This candidate leveraged the EVMS offer to get a counter-offer from this current institution and will stay with them, so the EVMS position is still unfilled and the search continues.

4. Dr. Flenner discussed the SACS accreditation process including the Quality Enhancement Plan (QEP). Major QEP areas include evaluation of student success (learner outcomes) with strong methodologies to assess this and sufficient resources from the school to do this successfully. Dr. Combs and his team submitted documentation to address this area specifically, which is specific to the school's mission and comprehensive plan. Our previous SACS review QEP emphasized the incorporation of educational and medical technology in the classroom and in the use of simulations. The current QEP emphasizes cultural humility, with self-awareness, reflection on our own biases, cultivating a sensitivity and openness to other identities and their ideas. This aligns with the vision and mission of EVMS and our

current strategic plan, including equity and inclusion. This approach was agreed upon through a collaborative process that included a retreat, surveys and focus groups. The goal is to graduate students that can serve a diverse population of patients, initially focusing on medical students and later disseminated this approach throughout the SHP. Drs. Mylona, Robinson and others are involved in the writing of this QEP. Documentation will be submitted in February, in February/March EVMS will have an onsite marketing campaign. The primary focus of the SACS review will be the QEP, with questions about it potentially discussed with individuals representing all EVMS stakeholders.

The LCME survey visit will occur October 4-7 and is specific to the medical school. This review is voluntary, but without LCME accreditation EVMS medical students can not get financial aid or take the USLME step exams. The LCME materials were reviewed internally in November and now materials are being revised. This 600 page summary will be finalized in March, reviewed in April by both outside consultants and EVMS committees, submitted to LCME in July (with updates in August/September), to be followed by the October LCME visit. During the LCME visit, the LCME representatives will have meetings with junior and senior faculty, administration, staff, business affairs and students to clarify any questions they may have and to understand and evaluate the EVMS student environment. Note that as it is generally done, students to be interviewed are selected by EVMS, with first and second year MS are interviewed one day and third and fourth year MS the next day. Areas under review are the lack of a continuous quality improvement (CQI) plan, now being addressed by Dr. Molly O'Keefe , with the first meeting occurring in Dr. Homan's office with senior management and key stakeholders. Previous multiple non-compliant concerns include the diversity pipeline, progress in faculty/professional development (which has been well-addressed through Dr. Mylona's group), and consulting support for student financial and debt management. This last item will be addressed by improved communication through the Office of Financial Aid (Dr. Kimble and Deborah Brown). Another item is to improve student health services; the EVMS response is creating an Office of Student Health, to be located in Andrews Hall and run by a physician independent of the

EVMS Medical School that will to the provision of student health care. To avoid conflicts of interest, any physicians in this office cannot be involved in the teaching or evaluating of medical students. The perceived limited availability of student research opportunities was related to the lack of a recognized centralized resource for such research. The problem of student mistreatment complaints, with a higher incidence in Surgery and Obstetrics, is most prevalent during resident-student interactions. In addition, all physicians evaluating students must have EVMS faculty appointments, which has not been universally understood. The administration is working with the departments to address this issue, which may be difficult to completely resolve prior to the LCME visit. Dr. Derkay mentioned that in Pediatrics a re-education program was instituted to reduce the causes that created these complaints and that this program may be useful to other clinical departments. Another issue was the lack of uniformity of clerkship experiences occurring across multiple teaching entities, which may have caused the small drop in clinical skills seen in the last two Step 2 cohorts, although the EVMS average was still near the national average. In examining curriculum management, there were several courses and clerkships that performed poorly over the last 3 consecutive years. To address this performance deficit, MEC needs to make changes to correct these problems. The admissions process needs refinement that would improve the transparency and uniformity of this process for all applicants. A mock LCME site visit with the EVMS consulting group will occur August 16-18. The LCME visit will be in October and then render a decision in 2021. Dr. Derkay asked if there was anything the Faculty Senate could do specifically to address some of these problems, followed by the suggestion from Dr. Flenner to have a heightened awareness of resident-student interactions and to address problems if they are present. Individual departments have been visited by the EVMS student complaint oversight group and during these visits attempts have been made to identify champions within the department to support their goal. Dr. Kimble has become the new Dean of Admissions and a new director of admissions has been hired that is coming from the Pennsylvania School of Osteopathic Medicine. There was a discussion of the scoring of students' applications, with the example of evaluation by four PA faculty and a comment about examining the diversity of the

admissions committee. A suggestion was made to invite Dr. Kimble to address the Faculty Senate and discuss how the Senate can help in any of the aforementioned areas.

5. Dr. Mylona thanked the Senate for the initial input on their review of the criteria for institutes and centers. The process for the review of institutes and centers will be going forward shortly. She noted that the Fine Academy of Educators will have additional meetings and seminars this semester. She mentioned that the next Dean's lunch will be on January 10. It was noted that the SHP faculty was combined with the Basic Science faculty to increase the total number (10) present at the first Dean's lunch. It was mentioned that for the first lunch, initially notifications went out separately to the ranks of faculty, first to full professors, then associate and then assistant professors; this strategy did not recruit sufficient faculty. The next Dean's lunch in January 10 will involve Primary Care departments, with Family Medicine, Internal Medicine and Pediatrics (possibly also Ob/Gyn) involved. Dr. Derkay will work with Dr. Mylona's group to get the date and initial invitation out shortly.
6. Dr. Derkay discussed the creation of an Institute for Integrated Neurohealth made possible by the generous donation of 15 million dollars. This will support a multi-disciplinary approach to address progressive neurological disorders. Initially, it will involve members from Neurology, PM&R and Palliative Support of Medical Care. The Faculty Senate supports this concept and sends this affirmation forward to Dr. Homan.
7. Shannon Morris discussed three active faculty grievances submitted to the Faculty Senate Grievance Committee. (1) For the first grievance, an open hearing was held on November 5 and then a report from the Grievance Committee was submitted to Dr. Homan on November 14. Dr. Homan has replied to this grievance. (2) For the second grievance, the same committee was to be used because of subject overlap with the first grievance. A letter will be sent to the grievant stating that this grievance has several technical issues, including that it can not be reviewed until it is reduced to 1000 words to fit the specifications of the grievance format. (3) For the third grievance, there is a chair and a committee has been constituted and is available to serve, but this grievance is in hiatus,

as the department is still working with the grievant to resolve the grievance. (4) Dr. Jay Collins will chair the committee for the fourth grievance. (5) For the fifth grievance, Shannon Morris will chair and she needs members for his committee. There was discussion in November about the consulting firm of Horthy Springer that was used by Pediatrics to formulate their internal grievance policies. Shannon has sent an email to Dr. Mylona discussing this potential resource. Dr. Derkay had a further discussion with Horthy Springer representatives while they were on campus and there was a suggestion by them that an abuse of process addition would aid in helping streamline the EVMS grievance procedures. Stacey Purcell, General Consul, wants to expedite the grievance revisions and will address the Faculty Senate January 27, 2020 to separate some grievances that may only involve HR and the grievant's department, as well as notifying the Senate when HR grievances may also involve the Senate. The Faculty Senate's role in grievances needs to be clarified, as well as the potentially developing internal grievance processes that can involve Appointments and Promotions committee decisions. It was noted that medical groups should also have grievance procedures in place. In addition, communications between institutions needs to be transparent, allowing them to be informed that about the status of a grievance e.g. ongoing, no decision made, etc. It was confirmed that Faculty Senate alternates can serve on Faculty senate grievance committees. Dr. Daniels volunteered for one of the grievance committees.

8. Dr. Derkay will report about the Hot Topics items at the next Faculty Senate meeting in January.
9. There is no update on the Faculty Handbook revisions. Revisions to the Faculty Handbook are on hold due to the upcoming SACS/LCME accreditation visits.

The Faculty Senate adjourned at 6:00 PM.

Next Meeting: January 27, 2020