

## **June 13, 2002, the Medical School at the University of Minnesota**

### **Minutes Faculty Assembly Meeting University of Minnesota Medical School June 13, 2002**

A meeting of the University of Minnesota Medical School Faculty Assembly was held on Thursday, June 13, 2002 at 4:00 p.m. in 2-690 Moos Tower. Alfred Michael, Dean of the Medical School, presided.

#### **Comments by the Dean**

Dean Michael assured the Faculty Assembly that he will do everything possible to have a smooth transition for the new Dean. As stated in an email from Senior Vice President Frank Cerra to the Medical School faculty and staff, until a new Dean is appointed the Associate Deans will handle day-to-day operations in their areas of expertise: Dr. Charlie Moldow for research, administrative, and space matters; Dr. Anne Taylor for faculty affairs, including promotion and tenure matters; Dr. Roby Thompson for clinical affairs and University of Minnesota Physicians (UMP); and Dr. Greg Vercellotti for educational matters. Dr. Cerra will meet with the Dean's Operations Group each Monday morning, the Dean's Finance Group each Thursday afternoon, the Department Heads at their monthly meeting, and the Faculty Advisory Council at their monthly meeting.

#### **Report of the Nominations Committee.**

Dr. Sarah Schwarzenberg, Vice Chair of the Faculty Advisory Council (FAC), presented the following list of nominees for the respective committees:

- \* Education Council ? James Nixon (Pediatrics)
- \* Committee on Student Scholastic Standing ? Colin Campbell (Pharmacology)
- \* Medical School Admissions Committee ? Lenore Everson (Radiology), Lael Gatewood (Laboratory Medicine and Pathology), and Daniel Romero (Pharmacology)

A motion was made, seconded, and unanimously passed by the Faculty Assembly to accept these nominations.

Revisions to the Policies and Procedures of the Committee on Student Scholastic Standing (COSSS).

Dr. Theodore Thompson, Director of Medical School Clinical Education, went over the role of the COSSS which is to monitor each student's progress through Medical School and to ensure that each student is qualified to receive the Doctor of Medicine degree. The revisions to the policy are necessary to eliminate outdated procedures and are as follows:

\* Years 1 through 4 and Step 1 and 2 of the United States Medical Licensing Examination (USMLE) should be completed within a four-year period, not to exceed seven years total from the beginning date of enrollment, with the exception of those enrolled in dual degree programs (four years maximum for Years 1 and 2, three years maximum for Years 3 and 4, ten years maximum for dual degree programs). Approval to lengthen the required total number of years must be approved by the COSSS.

- \* In Years 3 and 4, the grade (H) Honors replaces Outstanding.
- \* Students who have failed two courses in Year 1 and Year 2 will not be eligible to take re-examinations without the express approval of the Committee.

\* If a student has 1 failing grade (N) or an incomplete grade (I) in course work, or has failed the USMLE Step 1 or 2 once, the student is notified by letter from the Education office and placed on an "At Risk" status and may be asked to appear before the COSSS (Year 1 or 2). If the failing grade is in Year 3 or 4, the student will be required to appear before the COSSS to request permission to repeat the course.

\* Students in "At-Risk" status with continuing and/or serious academic deficiencies may be placed on academic probation. Students who are placed on academic probation must satisfy the probationary criteria established by the COSSS in order to return to good standing.

\* A student may be dismissed for one or more failures in Medical School coursework, three failures of USMLE Step 1 or two failures of USMLE Step 2, failure to make satisfactory academic progress, and for "revised" behavioral violations. Some

behavioral violations are cheating, conduct which violates professional and/or ethical standards of the medical profession (e.g., disruptive or unethical behavior), and/or unlawful conduct or improper behavior within or outside the University of Minnesota (e.g., abuse).

\* Procedures for hearing to consider dismissal will include a statement of the grounds for dismissal and will include documents submitted at the hearing. For the student subject to dismissal on academic grounds, the Committee may place the student on academic probation with specific criteria to satisfy in order to return to good academic standing and/or remain in the Medical School. For students found to have committed non-academic behavioral violations, the Committee may impose disciplinary sanctions, including but not limited to, warning, required compliance, probation, suspension, and/or dismissal. Students may appeal behavioral violations to the President's Student Behavioral Review Panel.

\* Section IX, "Students with Emotional or Behavioral Difficulties," was replaced with the section called, "Students with Personal, Medical, or Emotional Problems." If such difficulties are recognized by the COSSS and deemed to contribute to academic deficiencies or behavioral violations, the COSSS may recommend evaluation and/or counseling and may require progress of treatment for re-entry to the Medical School if on mandatory leave of absence.

A motion was made, seconded, and unanimously passed by the Faculty Assembly to accept these revisions.

### **Establishing a Department of Emergency Medicine**

Dr. Roby Thompson, Associate Dean for Clinical Affairs, presented the background for a Department of Emergency Medicine to be established. The reasons to form this department are as follows:

- \* Emergency Medicine is a unique academic discipline with distinct educational, clinical, and research content.
- \* Emergency Medicine is a primary board recognized by the American Board of Medical Specialists since 1979.
- \* Medical School graduates enroll directly in Emergency Medicine Graduate Medical Education programs without prior training in any other specialty.
- \* The residency programs at Hennepin County Medical Center (HCMC) and Regions Hospital respectively have 11 and 9 residents a year and 33 and 27 residents total. The programs are fully accredited and fill all of their positions through the National Residency Matching Program.
- \* There are now 46 faculty based at these two hospitals, including many with national recognition.
- \* The Emergency Medicine faculty at HCMC has written over 268 referred publications and 100 book chapters.
- \* Over 144 University of Minnesota third and fourth year medical students take four-week elective courses per year, primarily at these two sites and many of these students have Regions and HCMC faculty as their advisors.
- \* Second year students take a transition course to help prepare them for their clinical rotations.
- \* In the past five years, 59 students have matched in Emergency Medicine. It is one of the six most often selected specialties for graduates.

The configuration of this department will be based around the clinical operations and ongoing academic activities of Emergency Medicine at HCMC and Regions Hospital. A core full-time academic faculty will be identified at these two institutions that will bear the major responsibilities for Medical School activities. The core faculty will be subject to the Regents' Policy on Private Practice with modification approved by the Dean. The clinical activity will be focused at the two sites but the department will maintain an administrative home on the Medical School campus, which will serve as the coordinating site for medical student activities and will also be the base of the outreach activities. This will maximize contact and interaction with other Medical School departments and faculty while requiring minimal financial support. The Medical School will contract, with the respective faculty, plans to support the core full-time faculty and to arrange for payment of the Dean's Tax, reporting of salaries, etc. Promotion and tenure for the full-time and the part-time faculty will follow University of Minnesota policies and procedures. The Dean of the Medical School will appoint the initial Department Head after appropriate faculty consultation. A full search process for a permanent Head will occur after the Department is organized and stable.

A motion was made, seconded, and unanimously passed by the Faculty Assembly to endorse the establishment of a Department of Emergency Medicine.

### **Revisions to the Bylaws and Constitution**

Dr. Schwarzenberg spoke of the need to change the language of the Bylaws and the Constitution to create consistency and to reflect practices used today. Dr. Schwarzenberg pointed out the most significant revisions and changes as follows:

\* Page 7, lines 17-23 through page 8, lines 1-2 in the Bylaws: Reflects joint accreditation for Medical School-Twin Cities and School of Medicine-Duluth.

\* Page 11, lines 17-24 through page 12, lines 1-9 in the Bylaws: Adds section to incorporate Medical School's Faculty Practice Organization and UMP.

\* Page 15, lines 11-25 through page 15, lines 1-14 in the Bylaws: Reflects Research Council operation.

\* Page 17, Article III in the Bylaws: Reflects current practice and relationship of Faculty Assembly to Executive Faculty per University Senate Constitution. Also, see Article VII of the Constitution.

A motion was made, seconded, and unanimously passed by the Faculty Assembly to endorse the proposed changes to the Bylaws and the Constitution.

The Department of Emergency Medicine will be added to the listing of departments in the Bylaws if the vote favorably reflects the Department's establishment.

### **Report of the Faculty Advisory Council**

Dr. Schwarzenberg thanked the outgoing members of the FAC: Tim Ebner, William Jacott, John Perentesis, and Doug Wangenstein. She also welcomed the newly elected and re-elected members: Robert Bache, Peter Bitterman, Carole Bland, Blanche Chavers, Kathleen Conklin, Elke Eckert, Alan Hirsch, Scott McIvor, James Pacala, Patrick Schlievert, Sarah Jane Schwarzenberg, Betsy Seaquist, and Virginia Seybold.

The following subcommittees were formed and reflect the activities of the FAC this past year:

\* Promotion and Tenure Revisions ? Chair, Ginger Seybold

\* Faculty Mentoring ? Chair, Scott McIvor

\* Compact/Faculty Survey Follow-Up ? Chair, Carole Bland

\* Medical School Relationships and Liaison with University and Academic Health Center ? Chair, Marty Dworkin

\* Faculty Retention and Rewards/Mid-Career Issues ? Chair, Betsy Hirsch

\* Faculty Communication ? Chair, Jim Pacala

\* Diversity ? Chair, Walter Low

The FAC agenda during the past year included a review of the strategic research priorities developed by the Medical School retreat as well as the financial initiatives in the Medical School. The Council also reviewed the Medical School and departmental compacts. The FAC interviewed and reviewed the Dean candidates. It was noted that Dr. Anne Taylor, Associate Dean for Faculty Affairs, will be developing an agenda based on faculty vitality and the work products of the FAC subcommittees.

### **Closing Comments**

Dean Michael spoke of Dr. Cerra's intention of expediting the decision of appointing a new Dean. Dr. Cerra plans on a meeting with the Dean's Search Committee the day after the last candidate has been at the University. He would then begin negotiations the next week with the first choice candidate. It is Dr. Cerra's hope that he can recommend a candidate to the Board of Regents in July, and the new Dean would be able to start in early Fall.

Dean Michael then asked if there were any questions. There being no questions, the meeting was adjourned at 5:00 p.m.

Respectively submitted,

Joyce Delaney

Staff to the Faculty Assembly

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