THE GEORGE WASHINGTON UNIVERSITY Washington, D.C.

MINUTES OF THE REGULAR MEETING OF THE FACULTY SENATE HELD ON DECEMBER 13, 2013 IN THE STATE ROOM

- Present: Provost Lerman, Registrar Amundson, and Professor Siegel; Deans Akman and Goldman; Professors Acquaviva, Brazinsky, Costello, Downes, Dickinson, Fairfax, Galston, Garris, Harrington, Hawley, Helgert, Lantz, Marotta-Walters, McAleavey, Miller, Newcomer, Parsons, Price, Pulcini, Rehman, Roddis, Sidawy, Simon, Stott, Swiercz and Weiner
- Absent:President Knapp; Deans Brown, Dolling, Eskandarian, Feuer,
Johnson, Vinson, and Interim Deans Kayes and Maggs; Professors
Brand, Briscoe, Castleberry, Cordes, Jacobson, Katz, Lindahl,
McDonnell, Prasad, Shesser, Swaine, Williams and Yezer

CALL TO ORDER

Since President Knapp was on travel, Provost Lerman announced that he would chair the meeting. In addition, Parliamentarian Charnovitz could not be present due to another professional commitment, and had arranged for Professor Jonathan Siegel of the Law School to substitute for him. Provost Lerman welcomed Professor Siegel, and called the meeting to order at 2:19 p.m.

APPROVAL OF THE MINUTES

The minutes of the meeting held on November 8, 2013 were approved as distributed.

INTRODUCTION OF RESOLUTIONS

No resolutions were introduced.

REPORT ON THE SCHOOL OF MEDICINE AND HEALTH SCIENCES

Dean Jeffrey Akman presented the Report, which provided a history of the School and its programs, its structure and organization, and some of challenges that accompany the School's unique organization within the University system. (The Report is included with these minutes in powerpoint format, and a number of page references will point to detailed information on several topics.)

He began by providing a history of the School, which began in 1825 as a medical department within the Columbian College; 79 years later, the department became GW Medical School. In 1972 the School was renamed and became the School of Medicine and Health Sciences because it had recently established a Physician's Assistant Program and a Family Nurse Practitioner Program. As nursing programs evolved in the School, the groundwork was laid that ultimately led to the establishment of the School of Nursing in

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2010. Similarly, in 1987, the first Masters in Public Health degree was established in the School, and as that grew and other degree components came together, the School of Public Health and Health Services was formed in 1997. That same year, the University sold the GWU Hospital to University Health Systems, and now retains a 20% ownership stake in a company called District Hospital Partners. Three years later, GW spun off the adult faculty practice group and created a separate nonprofit corporation called the GW Medical Faculty Associates (MFA).

In 2010 and 2011 GW reorganized the GWU Medical Center which by then included the SMHS, the SPHHS and the SON in one entity. This reorganization, which was deemed "the three dean" model by some, resulted in a structure where the deans of each of the three schools reported to the Provost, and the SMHS Dean assumed the duties of the Vice President for Health Affairs in addition to those related to the SMHS.

Since this overall restructuring in 2010-11, the School has been undergoing its own reorganization merging what were the remnants of the old GWUMC and the SMHS. What has not changed is the School's historic mission, which includes education and training, research, the clinical component, and service to the community and the nation; these remain as they have throughout the history of the School.

The structure of the SMHS itself is complex, as it is bound together through affiliation agreements that link the School to primary academic partners including the GW University Hospital, GW MFA, Children's National Health System (CNHS), (formerly the Children's National Medical Center, recently renamed), the Veteran's Administration Medical Center, Inova Fairfax Hospital, and many other health systems, hospitals and clinical sites where GW students gain clinical experience and where SMHS has mostly voluntary faculty.

Dean Akman then provided some detail on the faculty picture within the organizational structure as this is clearly a very different structure than that in many of the other schools in the University. 80% of the full-time faculty are not employed by GW they are employed by the MFA and CNHS. As a result, fewer than 20% of faculty are employed by the University and the School, and their faculty appointments and promotion come through the School in a process that is consistent with the rest of the University in terms of the promotion of the faculty, from departments to the SMHS APT Committee, to the SMHS Dean and finally, to the Provost. However, tenure differs depending on where a faculty member is employed. SMHS faculty members who are GW-employed have tenure like everyone else; the same tenure criteria and process stands for them. There is a cohort of 15 to 20 or so MFA-employed faculty who were tenured prior to the separation of the MFA from the University. When that happened in 2000 those faculty members retained their tenured positions. There was a process at that time to try and figure out what that would mean, but there does not seem to have been a resolution of that. Nevertheless, these members of the MFA, still have tenured positions at the University.

That said, most of the remaining members of the faculty in the MFA do not have tenure and almost every single faculty member who is hired in the MFA is in a non-tenuretrack position. The employment contract is with the MFA even though their faculty appointment is at GW. The situation is similar at CNHS; there is tenure at Children's but it is only specific to their employment there; they do not have tenure at GW. Their tenure is

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also no guarantee of ongoing employment at Children's. So, most of the SMHS full-time faculty have no potential to get tenure at GW.

Dean Akman next gave an overview of the departments and institutes in the SMHS. There are five basic science departments: Anatomy and Regenerative Medicine; Biochemistry and Molecular Medicine; Microbiology, Immunology and Tropical Medicine; Pharmacology and Physiology; and Systems Biology (which is primarily housed at Children's). There are also three non-M.D. health professional departments recently created out of a reorganization of Health Sciences, those being Clinical Research and Leadership, Physical Therapy and Health Care Sciences, and Physician Assistant Studies. The 14 clinical departments listed on page six of the Report are all housed at the MFA except for pediatrics, which is at Children's. There are also a group of nine Centers and Institutes that primarily reside in the School but are University Centers and Institutes organizationally. These are listed on page six of the Report.

Turning to the reorganization of the leadership of the SMHS which began toward the end of 2010 when he came on board, Dean Akman described several new administrative hires/appointments. There are also seven new department chairs in the School. Two department chair searches are underway in Pediatrics and Obstetrics & Gynecology. The Pediatrics search will fill a newly created position in the sense that the department chair's role has historically been linked with the Associate Dean for Academic Affairs which is the School's decanal position at Children's that is the liaison to the SMHS. The Associate Dean for Academic Affairs is the chief academic officer now responsible for all of the academic programs at Children's and the department of Pediatrics chairmanship is now a separate position along with the other chairs that exist at Children's.

Other important national searches underway include a new position which is the Senior Associate Dean for M.D. Programs -- that position will have under it all of the residency programs as well as the Medical Education (M.D. program). Thus, everything to do with Medical Education will fall under that particular position and that position will report to the Dean. There is also a search ongoing for a Senior Associate_Dean for Research. Other new offices opened in the last two years in connection with several initiatives, the first being the Office of Diversity and Inclusion in the School which will emphasize pipeline programs into medicine and the health professions for underrepresented minorities. Dean Akman said this area is a priority for him, and is timely due to the fact that new accreditation standards will be forthcoming in this area. SMHS is actually ahead of the curve in its establishment of this Office. There is also a new Office of Clinical Practice Innovation which will be expanding research, particularly in the area of introducing novel health care interventions. It will also seek new sources of revenue and resources beyond the classic NIH funded research. Lastly, the Rodham Institute for Health Care Professional Education to Eliminate Disparities is a brand new institute at the SMHS. The focus is on educating and training health care professionals, students, and residents to enable them to address health disparities in the District and the surrounding metropolitan area. There will also be a component of health services delivery research that will be added and the Institute is expected to generate a lot of potential for cross-school collaboration, especially with the SPHHS and the SON.

Dean Akman next provided information about the four-year M.D. program. Currently there are 718 students. A snapshot of the Class of 2017 shows that the average age

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of students is 23 with an age range from 20-36. 55% are female, and 45% male. 82 undergraduate and 10 graduate schools are represented, with one-fourth of the admittees' majors/areas of study being science. Somewhat surprisingly, three-quarters major in other disciplines, and this furthers the achievement of building broadly trained humanistic physicians. SMHS students have done incredibly well on the three step set of the U.S. Medical Licensing Exam, with a pass rate of 98% for the Class of 2015, meaning probably only one student did not pass. This is, of course, a testament not only to the quality of the students, but also to the faculty teaching them.

Dean Akman said that a major priority of his has been around tuition and debt load, especially for medical students. GW has historically had a reputation as being one of the most expensive Medical Schools in the country; in the last decade it was ranked first, second, and third. The Dean said when he came on board the SMHS was fourth and everyone has worked very hard to bend the tuition curve and improve its ranking in this respect. The Report indicates that SMHS is now 13th, however, it is presently the 16th most expensive. Dean Akman said he hoped to continue this progress and achieve a ranking in the 20's by 2017. The debt load issue is very complicated. Even though the School is putting more money into scholarships there are some competing factors in terms of the increasing cost of living in the District as well as overall access to inexpensive loans. The School continues to work very hard on the issues of tuition and scholarships where it can have a direct impact.

Dean Akman briefly discussed planning for a revised M.D. curriculum, which is expected to be implemented in August of 2014 for the incoming class. Details on the core issues this revised curriculum will emphasize and other information concerning the revision are included in the Report on page 12.

Another issue for the SMHS is the number of accreditations that are required not only for the SMHS itself and its M.D. Programs, but also for every one of the 37 programs in Graduate Medical Education, including Residency and Fellowship Programs. (Details on the programs are provided on pages 14 through 17 of the Report). One thing that has become really important over the last few years has been a change in residency duty hours. This came about because of patient safety issues and reducing the number of work hours for a resident to hopefully mitigate their fatigue. Residents used to work more than 80 hours per week but they are now limited to 80 hours or less. There are restrictions on moonlighting (these count as duty hours and some residents may not moonlight). There are limitations on the number of hours that can be worked in one shift, mandatory free time rules, and rules concerning the number of hours between shifts, consecutive night float hours, and in-house call duty. (See page 18 of the Report.)

Dean Akman also discussed in some detail several of the many standards SMHS programs must meet. There are new Graduate Medical Education requirements (page 19 of the Report). Clinical Competency Committees have been created in every department with residency programs. For details on two new elements in the accreditation process, Milestones and the GME Clinical Learning Environment Review(CLER), see page 19 of the Report.

Dean Akman next provided information on the Health Sciences Programs, which are a very dynamic and growing part of the SMHS. Last year a full accreditation was earned, and many of the programs in this area have their own accrediting bodies whose requirements must be met. There are 32 active degree programs with a fall enrollment of 894 students, plus an additional 300 military contract students. Graduate programs offered are listed on Page 3 of the Report). The Dean also reviewed the School's vision with respect to developing collaborations with a number of programs, including those in the School of Nursing, at the Virginia Science & Technology Campus. He also outlined several new programs and programs under development, along with offerings of the Institute for Biomedical Sciences (pages 21-23 of the Report). Information on the School's very robust International Medicine Program, with 120 academic affiliations in 45 countries and over 700 participants, may be found on page 24 of the Report.

Research is an important area in which the School continues to invest. Total research spending in 2014 is expected to be approximately \$24 million (excluding the C06 NIH Grant to create a Center for Neglected Tropical Diseases of Poverty). This total represents an increase of 4.4% or \$1 million above last year, even during sequestration. Significant investments were made last year in HIV/AIDS, Neglected Diseases of Poverty, neurosciences, cancer, cardiovascular, and wound healing research. Approximately \$4.5 million in Indirect Cost Recoveries are expected. A significant piece of the strategy is to help build research capacity within the MFA by working with its leadership to recruit clinical and translational research-focused faculty in the clinical departments. The Report lists highlights for eight grants to SMHS researchers of over \$1 million apiece on page 26 of the Report.

As might be expected, a number of events are held in connection with SMHS programs during the course of the year. There are white coat ceremonies for participants in every one of the major programs, including medical students, residents, physician assistant and physical therapy students. Community Service and participation in the Master Teacher Leadership Development Program (a highly regarded program in its tenth year with the Graduate School of Education and Human Development) are also celebrated. These events are depicted on pages 27 and 28 of the Report.

As everyone has probably noticed, there is a lot of building going on in and around Ross Hall. New laboratories were just opened for the Center for Neglected Tropical Diseases of Poverty. Infrastructure is under construction with an expected date of completion in Spring 2015 for a new system that will not only power Ross Hall, but also the Science and Engineering Hall under construction across 23rd Street. A brand new facility, the CLASS (Clinical Learning and Simulation Skills) Center with an anticipated completion date of Spring 2014, will contain state of the art examination and operating rooms to train students and residents and prepare them for performing procedures on patients. (Details on the Center are provided on page 30 of the Report.)

Space is an important issue for the SMHS. The 6th floor space in the GWU Hospital now used by the School will revert to the Hospital in March of 2014. This will require relocation of the displaced, including the SMHS offices, to leased quarters on Pennsylvania Avenue in buildings GW owns, and also facilities on K and M Streets. The School is also looking to the VS&T campus and has also been part of the winning proposal to develop the Walter Reed campus on 26th Street in Washington, D.C. It is unclear exactly what role the School will have in the redevelopment of this facility, but it may well offer an intriguing opportunity in a part of the city where GW does not have a presence. In conclusion, Dean Akman presented information on fundraising and priorities for the School. The fundraising program has exceeded totals for the past two years. A successful grateful patient program has been established in collaboration with the MFA, and there are an increased number of donors in the Adopt-A Doc program, where alumni support tuition for current medical students (and develop what is hopefully a lifelong relationship). Outreach efforts to SMHS alumni have also been increased in many different ways, and thanks to the generosity of donors, three new SMHS professorships were recently established (information is on page 33 of the Report).

In terms of priorities for the School, work continues to enhance relationships with clinical partners. SMHS will also focus on implementation of the University's Strategic Plan including expanding existing collaborations with a number of the schools. In fact, the potential is there for fruitful collaboration with all of the schools. SMHS continues to look for ways to expand global partnerships and opportunities, grow research, and focus on and expand its culture of professionalism, civility, and leadership. SMHS is also embarking on its own strategic planning process, which will focus on issues outlined in pages 35 and 36 of the Report.

Discussion followed the Dean's report. Professor Newcomer asked what the yield rate was for this year's medical class. Dean Akman responded that something like 11,000 to 12,000 applications were submitted and of approximately 1,000 students interviewed, 300 to 400 were accepted, and 177 elected to attend. The total class size is 185. Professor Newcomer also asked how the duty hours for residents are policed. Dean Akman responded that this is a very extensive and resource-intensive process. Residents have to enter all of their hours into a program called Evalue. These hours are monitored by the departments and again by the School's Office of Graduate Medical Education, and the SMHS is extremely strict about monitoring. Every single aspect of duty hours must be monitored. This is an absolute requirement and a very serious issue for everybody. Accrediting bodies provide no leeway – if residents exceed their authorized duty hours, a school can lose its accreditation.

Professor Swiercz asked if the Affordable Care Act (ACA) will have any direct impact on medical education. Dean Akman says it will have a huge impact in a couple of different ways, particularly due to the consolidation of the health care marketplace as it relates to hospitals and health systems reacting to the changes related to the ACA. In the D.C. area marketplace, there is Georgetown MedStar, Hopkins, and other health systems that are growing and expanding. For the SMHS as a School what is relevant is the need for education and training sites, so as the marketplace shifts it could potentially affect the affiliation agreements that the School has with a number of different hospitals. SMHS is dependent upon its relations with these hospitals, and as new entities are merged into one another, the new health care system may or may not want to continue to have an affiliation with the SMHS. Secondly, the ACA will affect revenues that come in and the level of reimbursements for physicians. That is relevant to compensation for physicians who are also faculty members. In addition, the already-mentioned affiliation agreements between the GW Hospital and the School and the MFA could also be impacted. It should be noted that, although the ACA is now law, most of the regulations that are part of that law are as yet unwritten. There are also in addition to the ACA a number of other issues in terms of government impacts on medical education, such as Medicare. This affects graduate

medical education because residency training is supported by Medicare and if there are cuts in Medicare there can be cuts in the support for residency training. Sequestration is another issue with potential implications for medical education.

Professor Weiner said he thought that the restructuring that has been done and is continuing is very impressive. He asked the Dean to comment about this restructuring and whether or not past accreditation issues have been part of the impetus for it. Dean Akman responded that the challenge going into the restructuring was finding a way to strengthen the dean's positions in all three of the former Medical Center Schools. In particular, in the Medical School the deanship was not historically the strongest in terms of what the dean had the capacity to do and in terms of resources available to him or her at that time. The restructuring has given the Dean oversight of the research operation and funds to support the entire Medical Education program which were formerly lodged in the Office of the Vice President for Health Affairs. The accrediting body for the SMHS did take note that the deanship was not the strongest, especially as it related to access to resources. Another impetus for the restructuring was that removal of the top layer of administration resulted in a savings of approximately \$2 million per year in administrative costs.

Provost Lerman also responded to this question because he was involved in the restructuring of the Medical Center. He said he thought the deeper problem was a misalignment of responsibility and authority -- the dean was responsible nominally for making sure that SMHS was a world-class medical school and meeting all the accreditation requirements. At the same time, the dean often lacked the authority in terms of access to resources and the decision-making authority to carry out the School's mission. One of the great outcomes of the new organizational structure is that the SMHS has been provided with more autonomy and control. The same is true for the other two schools in the former Medical Center, the SPHHS and the SON – they have flourished under this new model.

Professor Parsons said it struck him that the current organization of the Medical Education enterprise is a rather lumpy sort of affair with contracts for different people varying quite widely. He said it wasn't quite clear, for example, in terms of the MFA, if the Dean is ultimately hierarchically responsible for the MFA and its operation and if, for instance, the Dean decided he wanted the MFA to become a more research-focused operation that this would be in his power to do. Dean Akman responded that the answer is basically no, as the MFA is a separate non-profit with a separate Board of Directors and separate leadership. It has its own President, and its own Board. However there is an important affiliation agreement that was recently modified in terms of incentivizing collaboration. For the decision-making around academic appointments, all of these appointments in the MFA flow thru the SMHS Dean and to the Provost. The clinical practice appointments flow through the MFA leadership and Board. However, the recruitment and appointment of chairmen of departments is a joint process. There has to be agreement and that was part of a new memorandum of understanding between the Dean and the President of the MFA.

Secondly, the incentives for the MFA to build research have been increased in terms of investments in the MFA that did not exist before. On particular hires, the School and the University agree to invest in the MFA to support the recruitment of research faculty as well as to provide support with indirect costs. Since historically research costs money, more money can be generated by clinical practices rather than research, so the financial incentive was to for the MFA to grow clinically. Another important point is that while faculty in the MFA are employed by a separate nonprofit, it is very much integrated into the fabric of the University. The three SMHS members of the Faculty Senate are employed by the MFA and MFA faculty serve on almost every committee in the University. They are also some of the University's most distinguished and senior members of the faculty. The challenge is how all of the components work together strategically and align their visions and strategies with the other organizations that have somewhat different priorities. It is when this alignment is achieved that all of the components can make really terrific music together.

Professor Lantz asked about how the lack of opportunities for tenure might have implications for recruiting and retaining faculty in the School, and how it relates to incentives for doing research. Dean Akman responded that he thought the lack of tenure might be an issue for some but it was difficult to know because these people tend not to apply. The School does offer recruitment packages and multi-year contracts instead. It is less and less typical as health care systems continue to evolve and change that tenured positions are not available, and retention does not seem to be an issue.

Professor Price said that the sale of the Hospital happened before Dean Akman came on board, and she asked how retaining the 20% ownership piece affects the running of the Medical School and how common that arrangement is with other medical schools. Dean Akman responded that it is often said that when you've seen one academic medical center, you have seen one academic medical center-three is really no typical arrangement. GW has yet another major affiliation agreement that defines the nature of the Hospital with the SMHS. In the late 1990's the Medical Center was having a very difficult time financially, and the University had come to the conclusion that it was unwilling to have the ongoing liability that came with the financial losses. So they sought a partner and selected United Health Services, which is one of the largest for-profit Hospital chains in the country. GW has a unique and very challenging structure that is built primarily around the Medical School, a for-profit teaching Hospital, a separately incorporated faculty practice plan, and a separately incorporated pediatrics department. In terms of managing the Hospital, GW is a silent partner and its CEO reports to corporate headquarters in King of Prussia Pennsylvania. That said, the department chairs are all chiefs of service in the Hospital, so, for example, Dean Akman said when he served as chairman of the Psychiatry Department, he was also chairman of Psychiatry department in the MFA, chief of the Psychiatry service in the Hospital, as well as the academic chair for the SMHS. That is the typical arrangement in the GW structure. Obviously, one of the best things that happened with the purchase of the Hospital by UHS was that they built a new Hospital, which GW was not able to or planning to do. The relationship seems to be working well and the current CEO really embraces the GW relationship.

Professor Newcomer said she thought it would be really interesting to see a graph that shows perhaps five years of data on yield rates for the medical class as well as the proportion that have financial assistance. This would be interesting not only for the Medical School but all of the schools, to track trends and figure out yield rates, what proportion of students are getting financial aid, and how that might be correlated. Dean Akman said that for medical students the debt load fluctuates rather widely and so, when interest rates are low students borrow more. It is really out of the school's control for the most part and there are also debt forgiveness programs which incline the students to borrow more because they anticipate the debt will not need to be repaid. Despite this, the School has been holding down tuition and increasing scholarships and attending to the things about which it can make a difference.

In response to Professor Parsons's question, Professor Simon said he thought the relationship between the SMHS and its academic and clinical partners might be characterized as lumpy and bumpy, but the real point is that everyone has shared goals. Since Dean Akman came on board the groups are running very much in parallel, and that is really why the accomplishments have been so great since he came on board.

GENERAL BUSINESS

I. INTERIM REPORTS OF SENATE STANDING COMMITTEES

Professor Rehman noted that the Interim Report of the Committee on Appointment, Salary, and Promotion Policies was received for distribution at the meeting and inclusion with the minutes. No other Interim Reports were submitted.

II. <u>REPORT OF THE EXECUTIVE COMMITTEE</u>

Professor Rehman presented the Report, which is included with these minutes.

Professor Newcomer inquired about the process for electing Senate representatives. While she said she had only been on the Senate two and a half years, she understood that voting for Senators had to be conducted in a meeting rather than by e-mail, and she asked if there is a precedent in any of the Schools for the latter. The Senate Coordinator clarified that this would require a change to the *Faculty Organization Plan*, which could be accomplished by a Resolution adopted by the Senate and approved by the Faculty Assembly.

Professor Roddis said this issue had been discussed in the School of Engineering and Applied Science. Electronic voting is not considered part of a deliberative assembly process based upon Robert's Rules of Order. In particular, there is a section in Robert's Rules that explains exactly why electronic voting (without a deliberative assembly process) is not appropriate. Professor Roddis recommended that any discussion of a resolution to change the *Faculty Organization Plan*-mandated process begin with a review of Robert's Rules in this respect. A short exchange followed, with Professor Newcomer noting that a higher response rate was typically received via e-mail rather than in-person voting at meetings.

Professor Rehman said she thought this issue had arisen in nearly every school, and that one way to move forward might be to assign this issue to a Standing Committee to examine, because it is something that everyone is grappling with.

Professor McAleavey raised a question about the due dates for grades. As everyone knows, grades are due five business days after a scheduled final examination. However, the current draft of the revised Faculty Handbook [in process] says that grades are also due after the last day of class in a class that has no final examination. He said he thought this nonsensical, and asked for a clarification. Vice Provost Martin said she thought that everyone agrees that it is reasonable that grades should be due five business days after the

deadline for the last work product, whether that would be a final exam or project. That said, the Handbook in process can be easily revised if language contradictory to established

III. **PROVOST'S REMARKS**

Provost Lerman commented briefly on several topics, the first being a symposium taking place that day on the history and role of the Federal Reserve System. This is the first of four events to be organized by GW over the next 12 months to mark the Federal Reserve's 100th anniversary and supported by the Sloan Foundation, the New York Stock Exchange and Euronext. The series will bring together leading economists and other experts on the Federal Reserve. In addition, Provost Lerman noted, GW will launch a massively open online course (MOOC) on this topic, drawing from material presented in last year's lecture series at GW led by Federal Reserve Chair Ben Bernanke. Vice Provost Paul Berman is developing the MOOC, which will include interviews with leaders in the field. Professor Frank Sesno, Director of the School of Media and Public Affairs, will serve as moderator for many of the interviews featured in the MOOC. The course will explain to the American public what the Fed does and why. The Fed is probably one of the most important institutions that affect people's welfare in the U.S., but it is also probably among the least understood.

Provost Lerman said that Senate members may have heard that Professor McAleavey [Chair of the Senate Committee on Libraries], is serving on a Committee established to conduct a strategic review of the GW Libraries System. The Committee, formed at the request of the Faculty Senate, has submitted a report, and Provost Lerman has met with the group to discuss the report. Provost Lerman will discuss the report with President Knapp. The hope is to make it available to the University community so that everyone will get a sense of what the University aspires to in its GW Libraries System.

The Committee on China Initiatives previously discussed with the Senate has been very active and has met regularly. It is developing recommendations on what GW's strategy in China should be and how to engage there in ways that align well with GW's mission and history as well as its assets and resources. Several issues are under discussion, including how to balance complex issues including academic freedom and economic matters. Other issues are where [geographically] partnerships should be undertaken, whether or not facilities should be built, and recruitment of U.S. students to study in China. Another question is what the University wants to do with its own educational programs there and the scale of GW's faculty resources focused on China. Not surprisingly, the conversations have been far-reaching. Provost Lerman said his hope and expectation is that these will deeply inform the direction of GW's China strategy as it moves forward. If these discussions are fruitful, it is likely the group will look at other important international areas that are part of the globalization strategy of the Vision 2021 Strategic Plan.

Provost Lerman then gave a brief recap of the three active decanal searches underway. Although the Senate's resolution on Dean Searches is on hold pending review of the *Faculty Code* by the Trustees, these search committees are abiding by both the intent of it and to the extent possible, the spirit of it. The one exception is in the School of Nursing, where it makes no sense to have an election of members for the search committee. This is because there only five tenured faculty members in the School, so they will serve as a Committee of the Whole. Each of the three search committees will include two Trustees and one senior administrator as non-voting members. Senior Vice Provost Maltzman and Dean for the Virginia Campus and CPS Ali Eskandarian will serve on the School of Business search committee and that of the School of Nursing, respectively. In addition, the Provost is serving on the Law School search committee.

Provost Lerman said he was pleased to report that the collective GPA for all University varsity athletes is 3.2, and that this is among the highest in the country for NCAA Division I programs. The Provost said that he and Athletics Director Patrick Nero are completely aligned in creating a Division I sports program that emphasizes academic performance and high graduation rates for GW's student athletes. The students and the coaches have all embraced this philosophy, and the parents of these gifted athletes have resonated with the notion that GW is a place where their students will graduate and be successful academically as well as have a great athletic experience. Provost Lerman also noted that the men's basketball team has done quite well this year, winning 9 games and losing only 1. The athletics program overall is one of which the faculty can be quite proud, and Provost Lerman invited everyone to think about attending some of the games, the next one being a basketball doubleheader on December 21st, with the women playing first and the men second.

IV. CHAIR'S REMARKS

In the President's absence, the Chair's remarks were made by the Provost.

BRIEF STATEMENTS (AND QUESTIONS)

There were no brief statements or questions.

ADJOURNMENT

Provost Lerman wished everyone happy holidays, and upon motion made and seconded, the meeting was adjourned at 3:45 p.m.

Elizabeth A. Amundson Elizabeth A. Amundson Secretary

School of Medicine & Health Sciences

THE GEORGE WASHINGTON UNIVERSITY



Faculty Senate Report December 13, 2013

Jeffrey S. Akman, M.D.

Walter A. Bloedorn Chair of Administrative Medicine

Vice President for Health Affairs and Dean





Brief History

- 1825: Columbian College opens Medical Department
- 1904: Columbian College Medical School becomes GW Medical School
- 1972: GW Medical School becomes GW School of Medicine and Health Sciences (SMHS)
 - Establishes Physicians Assistant Program
 - Creates Family Nurse Practitioner Program leading to establishment of School of Nursing in 2010
- 1987: SMHS offers Masters in Public Health degree leading to establishment of School of Public Health and Health Services (SPHHS) in 1997
- 1997: GW sells GWU Hospital (GWUH) and maintains 20% ownership stake in District Hospital Partners
- 2000: GW spins off GW Medical Faculty Associates (GW MFA) into a separate nonprofit organization
- 2011: GW reorganizes GWU Medical Center with merger of VPHA and Dean positions and "3 Dean Model"

School of Medicine & Health Sciences



Mission

- Education and training
- Research
- Clinical
- Service





- Affiliation agreements link SMHS to primary academic partners GWUH, GW MFA, Children's National Health System (CNHS), Veteran's Administration Medical Center, and Inova Fairfax (as well as to other health systems, hospitals and clinical sites)
- Approximately 80% of the full-time faculty employed by GW MFA and CNHS
- Faculty appointments and promotion from departments to SMHS APT Committee to Dean SMHS to Provost
- Tenure
 - GW employed faculty
 - MFA employed faculty
 - CNHS employed faculty



Structure

- Health Sciences Departments
 - Clinical Research and Leadership
 - Physical Therapy and Health Care Sciences
 - Physician Assistant Studies
- Basic Science Departments
 - Anatomy and Regenerative Medicine
 - Biochemistry and Molecular Medicine
 - Microbiology, Immunology and Tropical Medicine
 - Pharmacology and Physiology
 - Systems Biology

Structure

• Clinical Departments

- Anesthesiology and Critical Care
- Dermatology
- Emergency Medicine
- Medicine
- Neurology
- Neurological Surgery
- Obstetrics and Gynecology
- Orthopedic Surgery
- Pathology
- Pediatrics
- Psychiatry and Behavioral Sciences
- Radiology and Radiation Oncology
- Surgery
- Urology

Structure

Centers and Institutes

- GW Cancer Institute
- GW Center for Integrative Medicine
- GW Heart and Vascular Institute
- GW Institute for Neuroscience
- GW Institute for Spirituality and Health
- Institute for Biomedical Sciences
- Katzen Cancer Research Center
- McCormick Genomics and Proteomics Center
- Ronald Reagan Institute of Emergency Medicine



Leadership

• New leadership hires/appointments since December 2010

- VPHA/Dean
- Associate VPHA/Associate Dean
- Senior Associate Dean for Health Sciences
- Associate VP for Development & Alumni Relations (DAR)/Associate Dean for SMHS DAR
- Associate Dean for Finance, Administration and Operations
- Associate Dean for Health Affairs
- Interim Associate Dean for Faculty Affairs and Professional Development
- Associate Dean for Diversity, Inclusion and Student Affairs
- Department Chairs
 - Surgery
 - Physician Assistant Sciences
 - Neurology
 - Dermatology
 - Physical Therapy and Health Care Sciences
 - Psychiatry & Behavioral Sciences
 - Clinical Research and Leadership

School of Medicine & Health Sciences

Leadership

• Searches Underway

- Senior Associate Dean for M.D. Programs
- Senior Associate Dean for Research
- Associate Dean for Medical Education
- Department Chairs
 - Obstetrics & Gynecology
 - Pediatrics

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New Offices/Institute

Establishment of New Offices/Institutes

- Office of Diversity and Inclusion
 - Accreditation standards
 - Pipeline programs into medicine and health professions
 - Create additional resources
 - Faculty recruitment
- Office of Clinical Practice Innovation
 - Conduct comparative effectiveness and population-based research and introduce novel health care interventions
 - Enhance GW funding and collaborations
- Rodham Institute for Health Care Professional Education to Eliminate Disparities
 - Education and training of students and residents equipped to address health disparities

School of Medicine & Health Sciences

M.D. Program

- Total M.D. students: 718
- Class of 2017 Snapshot:
 - Admitted: 177
 - 55% female, 45% male
 - Average age: 23 years; Age range: 20 36
 - 82 Undergraduate schools and 10 Graduate schools represented
 - Majors/Areas of Study: 101 Science, 76 Non-Science (Top Majors: Biology, Psychology, Anthropology, Public Health)
- USMLE Step 1 pass rate for Class of 2015: 98% (mean score = 230)
- Tuition and debt load
 - Ranked 4th most expensive medical school in 2010; 13th most expensive among private institutions in '12/'13, trending towards a ranking in the 20s by 2017



Revised M.D. Curriculum

• Implement in August 2014

• Revised Curriculum continues to emphasize:

- fundamentals of medicine and clinical practice
- transition to advanced clinical practice
- Tracks: global health, public health, community health, medical humanities, research, etc.

Shortened and integrated pre-clinical curriculum

- Geared toward getting students in contact with patients earlier and integrating basic sciences into the clinical clerkships
- Interprofessional experiences, health disparities, professionalism and ethics, public health
- Faculty development re team based learning
- Other Features
 - Reduced lecture time; more team based learning; paperless



M.D. Program - Match



Some of the institutions to which GW's Class of 2013 were matched:

Stanford University, California University of California-Irvine Medical Center, California University of California-San Francisco Medical Center Yale-New Haven Medical Center, Connecticut Children's National Medical Center, District of Columbia The George Washington University Hospital, Emory University, Georgia Johns Hopkins Hospital, Maryland Harvard, Massachusetts Beth Israel Deaconess Medical Center, Massachusetts Einstein/Montefiore Medical Center, New York Mt. Sinai Hospital, New York New York-Presbyterian Columbia University Medical Center Hospital of the University of Pennsylvania Hahnemann University Hospital, Pennsylvania Baylor University Medical Center, Texas University of Washington Medical Center

Specialties and/or programs to which the Class of 2013 were matched include:

Anesthesiology Dermatology Emergency Medicine General Surgery Internal and Family Medicine Neurology Obstetrics-Gynecology Orthopaedic Surgery Otolaryngology Pediatrics Plastic Surgery Psychiatry Radiation Oncology Radiology Research Medicine

School of Medicine & Health Sciences

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M.D. Program Accreditation

- Currently fully accredited
- Next LCME site visit likely Winter 2015/Spring 2016
- Revision of accreditation standards including addition of new standards in 2015
- Revision of self-study and survey process
- Preparation underway

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Graduate Medical Education

- Accredited Programs: 37
- Total residents and fellows: 856
- Institutional Accreditation
 - Full 5 year Accreditation
 - Successful CLER site visit (Nov 2013)

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GME - Residency Programs

- Anesthesiology: 30
- Diagnostic Radiology: 19
- Emergency Medicine: 43
- Internal Medicine: 103 (13 Primary Care)
- Neurology: 9
- Neurological Surgery: 9
- Obstetrics and Gynecology: 40
- Ophthalmology: 12
- Orthopedic Surgery: 20
- Otolaryngology: 7
- Pathology: 15
- Psychiatry: 25
- General Surgery: 28 (4 research)
- Urology: 8



GME - Fellowship Programs

- Internal Medicine:
 - Cardiology 8
 - Critical Care Medicine 3
 - Endocrinology 5
 - Gastroenterology 6
 - Geriatrics 3
 - Hematology/Oncology 6
 - Infectious Disease 5
 - Interventional Cardiology 2
 - Nephrology 5
 - Hospice and Palliative Medicine –
 2
 - Pulmonary Critical Care 7
 - Rheumatology 2
 - Sleep Medicine 1

- Anesthesiology:
 - Anesthesiology Critical Care 2
 - Pediatric Anesthesiology 8
- Pathology:
 - Cytopathology 1
- Radiology:
 - Neuroradiology 3
 - Vascular/Interventional Radiology – 2
- Psychiatry:
 - Psychosomatic Medicine 3
- Medical Toxicology 2
- Clinical Neurophysiology 1



GME: Resident Duty Hours

- Residents MUST not work > 80h/week
- Moonlighting hours are included in duty hour totals (PGY1's are NOT ۲ permitted to moonlight)
- Residents MUST have **AT LEAST 1 day/week free** (averaged over 4) • weeks)
- PGY1s may not work more than **16 hours** •
- PGY2 and up may work up to 24 hours •
- Residents SHOULD have **10 hours between shifts**, but MUST have 8 ۰ hours between shifts.
- Night float cannot be >6 consecutive nights •
- PGY2s and up cannot take in house call more often than every 3rd night ۲



GME: New Requirements

- Six Core Competencies
 - Patient Care
 - Medical Knowledge
 - Professionalism
 - Interpersonal/Communication Skills
 - Systems-based Practice
 - Practice-based Learning and Improvement
- Clinical Competency Committees
 - Rotation evaluations
 - 360-degree evaluations (Peer, nurse, patient etc.)
 - Self assessment
 - Research project synopsis
 - Evaluation of teaching skills
 - Procedure log
 - Milestones achievement
 - Compliance (HIPAA, CITI, Step 3, license etc.)
 - Attendance record
 - In-service scores
 - Portfolio

• Milestones School of Medicine & Health Sciences



GME: Learning Environment

- Clinical Learning Environment Review (CLER): ACGME survey of teaching hospitals, every 1-2 years
 - Patient safety
 - Quality improvement
 - Transitions in care
 - Supervision
 - Duty hours oversight, Fatigue management and mitigation
 - Professionalism

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Health Sciences Program

- 32 active degree programs with fall enrollment of 894 students, plus additional 300 military contract students
- graduate programs
 - physician assistant
 - physical therapy
 - immunohematology
 - emergency services management
 - clinical research and leadership
 - clinical research administration
 - clinical and translational research
- undergraduate programs
 - clinical health sciences
 - medical laboratory sciences
 - clinical management and leadership
 - clinical research administration
 - sonography
 - emergency health services
 - Pharmacogenomics (pharmaceutical sciences)
 - health sciences
 - health science laboratory technology
 - cytotechnology

School of Medicine & Health Sciences



Health Sciences

- Major accomplishments in 2013
 - Maximum accreditation status awarded to Physician Assistant Program (2020)
 - Physical Therapy Program national reputation continues to grow; new PT neurologic residency program
- Vision for VSTC
 - Collaboration with School of Nursing
 - Post-baccalaureate Pre-Health Professions
 - Medical Laboratory Sciences
 - Occupational therapy doctorate
 - Evaluation of PA/PT expansion programs
 - Partnerships with community colleges
- Program Development
 - Integrative Medicine, Translational Microbiology, Molecular & Diagnostic Laboratory Sciences, Health Intervention and Disaster Response, MSHS Laboratory Sciences – all online program approvals
 - Military Contract Programs
 - PhD Translational Science
- Long term strategy for Online Education



Institute for Biomedical Sciences

- Interdisciplinary Ph.D. training in biomedical sciences
 - SMHS, CCAS, Children's National Health System
 - GW-NIH partnership
 - Biochemistry and Systems Biology
 - Molecular Medicine
 - Microbiology and Immunology
 - 58 students



International Medicine

- Office of International Medicine Programs (IMP) celebrates 20 year anniversary
 - Education/training, research collaborations, medical missions and incountry capacity building
- 120 academic affiliations in 45 countries
- 7,000+ medical professionals and students have participated in IMP projects
- Student and Residents Opportunities Worldwide
 - Medical students, residents and fellows take part in international summer internships, medical and surgical missions, and clinical rotations abroad
 - International M.D.s complete residencies and fellowships at GW
- Continuing Medical Education
- Expansion of Medical Research Fellowship Program

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Research

- Total research spending in FY 2014 is expected to be approximately \$24M (excluding C06)
- Increase of 4.4% or \$1M above last year -- -- even after sequestration
- \$4.9M of IDCs are expected
- Efforts to grow clinical and translational research
- Investments in HIV/AIDS, Neglected Diseases of Poverty, neurosciences, cancer, cardiovascular, wound healing



SMHS Major Research Awards

Grant Highlights – Over \$1Million

| \$1,611,525 | Imtiaz Khan (MITM) | NIH, National Institute of Allergy and Infectious Diseases | CD8+ T cell effectors against microsporidia |
|---------------|------------------------------------|---|---|
| \$4,198,046 | Jeremy Brown (EMed) | NIH, National Institute of Diabetes and Digestive and Kidney Diseases | Multi-Center Study of Tamsulosin for Ureteral Stones in the Emergency Department |
| \$1,708,400 | Paul Brindley (MITM) | NIH, National Cancer Institute | Role of Live Fluke Granulin in Cholangiocarcinogenesis |
| \$4,252,149 | Fred Gordin (Medicine) | NIH, National Institute of Allergy and Infectious Diseases | CPCRA Clinical Trials Units |
| \$1,973,645 | Matthew Colonnese (Pharm/ Phys) | NIH, National Eye Institute | Emergence of Visual Alertness in Cortical Networks |
| \$1,951,440 | Richard Katz (Medicine) | Patient Centered Outcomes Research Institute (PCORI) | Changing the Healthcare Delivery Model: A Community Health Worker/Mobile Chronic Care Team Strategy |
| \$2,122,525 | Mandi Pratt-Chapman (GWCI) | Department of Health and Human Services, Centers for Disease Control and Prevention | Enhancing National Comprehensive Cancer Control Capacity |
| \$1,867,921 | Dominic Raj (Medicine) | NIH, National Institute of Diabetes and Digestive and Kidney Diseases | Gut Microbiota and Atherosclerosis in ESRD |
| \$1,761,024 | Dominic Raj (Medicine) | NIH, National Institute of Diabetes and Digestive and Kidney Diseases | Anti-inflammatory Therapy in Diabetic CKD |
| ool of Medici | ne | | |

& Health Sciences



SMHS Events

Community Service Day







M.D. White Coat Ceremony







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SMHS Events

Resident White Coat







Master Teacher Leadership Development Program





Other Events:

- PA White Coat Ceremony
- PT Excellence Awards and White Coat Ceremony



Bricks and Mortar

- CO6 NIH grant for Center for Neglected
 Tropical Diseases of Poverty
 - NIH approved move in December 2013
- SEH/Ross Hall Central Utility Project
 - Anticipated completion Spring 2015
- CLASS Center
 - Anticipated completion Spring 2014



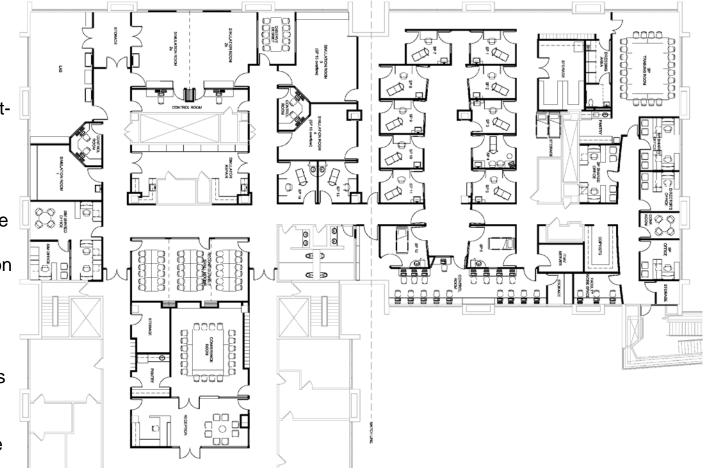




CLASS Center Overview

New CLASS Center Facts

- 17,000+ sq.ft.
- Centrally located control rooms
- Additional in- and outpatient rooms
- Debriefing rooms
- Wet lab/dry lab space
- High-acuity simulation rooms utilizing both standardized and simulated patients
- Administrative offices
- Enhanced break-out space ample storage

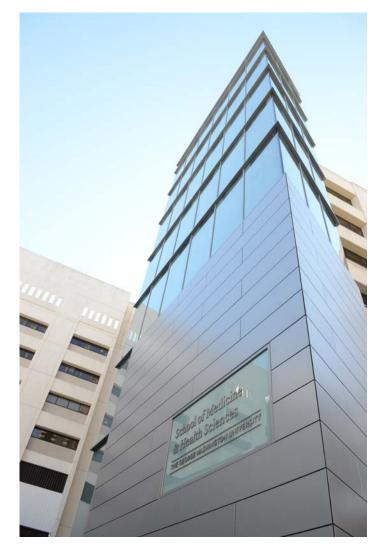




Bricks and Mortar

• Additional Egress - Outside Stair

- Completed December 2013
- SMHS/ VPHA Dean's Suite
 - Anticipated completion January 2014





- 6th floor of GWUH, currently SMHS space, to revert to GWUH in March 2014
- Health Sciences and other SMHS offices to be housed in 2000 Penn and 2100 Penn
- SMHS offices in 2131 K, 2030 M
- Foggy Bottom cap issues
 VSTC
 - Walter Reed campus



- Created grateful patient fundraising program in collaboration with GW MFA
- Increased number of donors in Adopt-a-Doc program
- Exceeded attainment goals the past two years
- Increasing outreach efforts to SMHS alumni
- New endowed SMHS professorships in past year
 - Frank N. Miller, MD Distinguished Teaching Professorship
 - Charles and Sonia Akman Professorship in Global Psychiatry
 - Drs. Yolanda and James Oertel Professorship in Medical Humanities



- Continue to enhance relationships with clinical partners
- Implementation of GW strategic plan, including:
 - Expanding collaborations with GW schools
 - Expanding global partnerships and opportunities
 - Growing research
 - Focus on professionalism, civility, leadership
- Embark on SMHS strategic planning process
- Maintaining accreditation of all academic programs
- Student debt load
- Diversity and inclusion



Priorities

- Fundraising: Endowments and Operating Funds to Support
 - Faculty
 - Professorships, Research Funds, and Residency Programs
 - Students
 - Scholarships, Educational Programs, and Student Life
 - Programs of Excellence
 - Research, Clinical, and Educational Programs
 - Facilities
 - CLASS Center, Laboratories, and Student Facilities



Thank you

School of Medicine & Health Sciences

THE GEORGE WASHINGTON UNIVERSITY

The George Washington University Faculty Senate Committee on Appointment, Salary, and Promotion Policies (including Fringe Benefits)

Interim Report December 10, 2013

We have had a busy semester with four meetings held in the fall semester; another four meetings are scheduled for the spring 2014 semester.

Our first meeting was held on September 6, 2013 to consider the upcoming changes in benefits, key points are:

Medical and Prescription Drug Costs are Increasing in 2014:

- Without plan design changes, active employee contribution rates would increase approximately 25% in 2014.
- With the proposed plan design changes, the increase would be approximately 12.5%.
- Cost increases are being driven by anticipated utilization, increased enrollment, and fees from Health Care Reform.
- Co-pays will be brought in line with the market (i.e, increased).
- In 2014, the price of generic prescriptions will increase from \$10 to \$15.

What We Know About Our Population:

- 60% of covered individuals choose the Basic Plan.
- 40% of covered individuals choose the Basic plan for Individual/Employee only.
- 17% of covered individuals choose the High plan.
- GW does not give faculty cost of living raises, only merit raises, so the rising health care costs may translate into a reduction in the overall value of salary + benefits for our faculty.

Health Care Costs—Data on GW contributions

At the request of ASPP Committee, the Benefits Administration provided comparative data (at our December 6 meeting) on the health care cost increases in the recent years as well as health care costs at some of the market basket schools. The market basket data indicates that our health care costs are lower than some of the comparable schools. While GW's contributions to Active Medical and Prescription Budget will be increasing in 2014 by 7.8%, Employee contributions will be increasing by 18.4%. The Committee plan to further discuss these numbers in the New Year.

Faculty Salary Equity

Faculty Salary Equity Committee Chair Professor Steven Tuch and Associate Provost for Faculty Recruitment & Personnel Relations Annie Wooldridge attended our meetings on September 27 and December 6 to provide updates on their committee's work. Their committee was charged in 2009 to identify salary differences at the university that might be attributable to factors like race, age, gender, etc. Using 2011 salary data, 111 low outliers were identified in Phase 1. In Phase 2, determination of possible non-discriminatory reasons for these outliers was made through information obtained from the Deans for 91 faculty members. A total of 23 cases now remain for action by Provost's office.

In many cases, Dean's comments repeated references to the fact that salary issues have been addressed since the 2011 data. Thus the Salary Equity Committee recognized that more recent data needed to be considered. It recently examined 2013 salary data and identified 81 new outliers in Phase 1; letters will be sent out to the Deans to obtain information on these new cases. The process is expected to be completed by the end of academic year.

Faculty Handbook

Dianne Martin, Vice Provost for Faculty Affairs, presented both the outline/table of contents and physical copies of the handbook itself at several meetings of the ASPP committee. (Faculty Handbook will be online though annual snapshots in the form of a pdf file will be available.) Significant changes have been made to streamline the information contained in the Faculty Handbook to make it easier for faculty to navigate. It relies heavily on links to primary sources to ensure that the information remains up to date. Some of the changes are:

- The procedure for completing the I-9 has been revised to allow for online completion. There is also new language relating to foreign nationals appointed to the university. While the university cannot grant tenure to foreign nationals, there is now a procedure in place to help them attain resident status.
- The allowance for moving expenses has been raised.
- The parental childcare leave policy is now in the handbook, and conforms to language in the faculty code.
- The policy for short term medical leave has been clarified. There is now a vendor involved in the gap between a 30 day leave that can be granted by departments/deans for short term disability and the six month timeline at which long term leave takes over.
- The language about numbers of courses to be taught by each faculty member has been clarified, giving chairs and administrators more leeway to act according to departmental needs and more in keeping with a research university. A range of courses is now provided for better transparency and consistency.
- Retiring or resigning faculty who do not have emeritus status will now have email access for one year following the personnel decision. There was no previous policy about that in the handbook.
- At the committee's recommendation, a statement about users of information technology will be added, along with a link to the IT webpage where such information can be found. This change will help faculty to know the limits under which their use of email currently operate.
- Both the new Smoke-Free Campus and Sexual Harassment Policies have been added to the handbook.
- The policies and procedures covering research will be unified across the document.

Diversity in Faculty Ranks

Vice Provost for Diversity/Inclusion, Terri Harris Reed attended our December 6 meeting to talk about increasing diversity at all levels of professoriate, and also how to increase diversity at the upper levels where the number of women Professors is only 25%. She discussed the need to increase the pool at the beginning of hiring process. As there will be 50 or more new hires according to the strategic plan, it is important to develop policies which increase diversity in hiring. The ASPP committee promised to work with VP Reed in the new year.

Respectfully Submitted,

Murli M. Gupta, Chair December 10, 2013

Acting Chair: Gupta, Murli M., Mathematics Abravanel, Eugene, Psychology, Emeritus Achrol, Ravi, Marketing Galston, Miriam, Law Kanungo, Shivraj, Decision Sciences Kumar, Rakesh, Biochemistry Marotta-Walters, Sylvia, Counseling Monfared, Ashkan, Surgery, Neurosurgery Pintz, Christine, Nursing Plack, Margaret. Health Care Sciences Rau, Pradeep, Marketing Rosenbaum, Sara, Health Policy Schanfield, Moses S., Professor of Forensic Sciences and of Anthropology Sell, Susan, Political Science Sidawy, Anton, Surgery Wisenheimer, Adam, Mechanical & Aerospace Engineering Zaghloul, Mona, Engineering & Computer Science

Non-voting:

Acquaviva, Kimberly D., Nursing, Executive Committee Liaison Katz, Louis H., Executive Vice President and Treasurer Lerman, Steven, Provost and Executive Vice President for Academic Affairs Martin, C. Dianne, Vice Provost for Faculty Affairs Shea, Mafona, GW Libraries Human Resources Client Partner, Gelman Library Stewart, Andrea W., Deputy University Librarian (alternate) Wirtz, Philip, Vice Dean for Programs and Education, GW Business School

REPORT OF THE EXECUTIVE COMMITTEE Scheherazade Rehman, Chair December 13, 2013

Our very able Parliamentarian Steve Charnovitz had another commitment today and was unable to attend the meeting, so he arranged to have Professor Siegel substitute for him. We thank Professor Siegel for so graciously agreeing to serve in that role today.

ACTIONS OF THE EXECUTIVE COMMITTEE

Vice President Leo Chalupa will give the Senate an Update on Research at the next Senate meeting on January 10th.

As already reported, we hope to hear reports from the new University Librarian, Geneva Henry, Vice President and Treasurer Louis Katz (financial matters), the Provost (Core Indicators of Academic Excellence, and Vice Admiral (ret.) Mel Williams (GW Valor Program) at our Senate meetings in the spring semester.

The annual letter to the Deans requesting that they convene meeting(s) in their schools to replace or re-elect Senate representatives whose two-year terms will expire April 30, 2014 has been placed in campus mail. As usual, information from the *Faculty Organization Plan* outlining the required process for these elections is included in that letter. It would be helpful if Senate members could monitor this process in their schools to see that it is underway well before the deadline of March 15 for reporting the results to the Senate Office.

PERSONNEL MATTERS

As already reported, one grievance in the School of Business was withdrawn. Two others originating in the Columbian College were dismissed and these dismissals were affirmed by the Dispute Resolution Committee.

A fourth grievance originating in the School of Business is in process and a hearing panel has been appointed to consider this matter.

OTHER MATTERS

As promised, Provost Lerman shared his revisions to the recent notification to faculty concerning the University's response to requests for information about online courses for compliance purposes. We expect this revision will be shared with the University community in the near future.

Provost Lerman also advised that the University will be considering its policy on classified research. This is currently banned, and that ban was reaffirmed in 2001. The Provost will supply the policy and discuss it with the Research Committee of the Senate and we expect the Research Committee will keep the Executive Committee informed as to the progress of this review.

In the area of implementation for the Strategic Plan, Vision 2021, Provost Lerman advised the Executive Committee that Vice Provost Reed will spearhead the effort in the area of Citizenship and Leadership and will coordinate with the Senate's Educational Policy Committee. Work on a revised budget model is also underway. This will be driven by the Deans, and the charge will be forthcoming. In addition, work on a new University budget model is underway; this will also be driven by the deans, and a charge to them will be forthcoming.

The Interim Report of the Committee on Appointment, Salary and Promotion Policies was distributed at the meeting today. As everyone will see, this group has been working very hard with Vice Provost Martin to produce a new version of the Faculty Handbook. The work is progressing very well, and those interested in details should review the Interim Report for details.

The ASPP Committee has also been busy in another area; Senate members may have noticed that it forwarded a number of recommendations concerning the nonconcurrence process in its Annual Report submitted last spring. We will be inviting the Chair, Professor Gupta, to come to the Senate meeting in January to give us a brief overview of the Committee's findings about this process. We thank him and all of the ASPP Committee members for their faithful service and hard work on behalf of the Senate and the University community.

ANNOUNCEMENTS

Due to the holiday schedule, the Executive Committee will meet next Friday, December 20. Resolutions and reports for the January Senate meeting should be submitted to the Senate Office before that date.

Last but not least, all of us on the Executive Committee wish everyone a welldeserved respite over the Winter Break, and we look forward to seeing everyone in the New Year. Happy Holidays.