MINUTES

429th MEETING OF THE FACULTY SENATE

3:00 pm, Wednesday, April 23, 2014

School of Medicine Administration, Boardroom 103

PRESENT: Drs. Ahn, Barone, Carroll, Chanmugam, Crino, Daoud, Dlhosh, Gee, Gonzalez-Fernandez, Gottesman, Heitmiller, Herman, Ishii, Kumar, Li, Macura, Matunis, McCormack, Mooney, Pluznick, Poynton, Shuler, Sperati, Srikumaran, Williams, Wolfgang, (Karen Reddy for Natasha Zachara)

Mmes: Mssrs: Mandell, Rini

ABSENT: Drs. Ahuja, Bivalacqua, Bunz, Emmett, Keefer, Lacour, Puttgen, Shepard, Solomon, Swartz, Taverna, Tufaro, Urban,

Wade

Mmes: Mssrs: Halls, Huddle, Johnson, Putts, Tanner

REGULAR GUESTS: Drs. Clements, Gauda, Skarupski, Smith

Mmes: Smith Mssrs: GUESTS: Dean Rothman, Dr. Miller

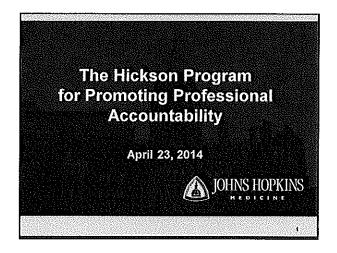
Approval of the minutes

The minutes of the 428th meeting of the Faculty Senate of March 19, 2014, were presented, reviewed, and approved.

- Paul B. Rothman, MD, Dean of the Medical Faculty was introduced and conducted an interactive discussion. Dr. Rothman started the conversation with two big issues: (1) the Clinical Excellence task force, and (2) faculty salaries issue that arose from the faculty satisfaction survey. A survey exploring the faculty's views about creating a new track for clinical faculty has been disseminated with a ~30% response rate. Concern was raised that all faculty have not received the survey email or reminders. The dean has requested that this issue be resolved. The concern with creating a new track is the diminution of the faculty rank, status, and prestige by adding various prefixes. The Dean reported that a task force has been convened to address faculty salaries (headed by Dr. Justin McArthur). Dr. Rothman has met with Senator Barbara Mikulski (D, Maryland) who, with Senator Dick Durbin (D Illinois) and others are working to increase the NIH budget. Dr. Rothman also reported that the SOM has re-infused the Discovery Fund that will be used to support research.
- Janice Clements, PhD, Vice Dean for Faculty and Redonda Miller, MD, MBA, Vice President, Medical Affairs presented the "Hickson Program for Promoting Professional Accountability" which will roll-out in June with the training of peer messengers. The program is based on patient complaint data (note: only 5% of practitioners get patient complaints here) and uses the nationwide Patient Advocacy Reporting System (PARS) for benchmarking. There is a pyramid of progressive discipline where most 'interventions' begin and end at the bottom-most level ('cup of coffee' meeting over a single, unprofessional incident). (see page 2-5)
- Estelle Gauda, MD, Senior Associate Dean for Faculty Development reviewed the organizational structure of the umbrella Office of Faculty (headed by Vice Dean Clements) and the Office of Faculty Development within that structure. Dr. Gauda identified the various faculty members and their roles in the offices, the mission of the OFD, as well as her vision in her role as Senior Associate Dean. (see page 6-9)
- Rachit Kumar, MD, Chief Resident gave an update on the House Staff Council activities. As a result of the council's strong interest in gaining a better understanding of the affordable care act, they have arranged a seminar on Tuesday, April 29, 2014 at 5:00PM in the Chevy Chase Auditorium (Zayed 2119A): "Insight into the Affordable Care Act: What it means for you as a health care provider" by Atul Grover, MD, PhD (Chief Public Policy Officer, AAMC) (see page 10). Dr. Kumar also announced that residents are now allowed to sign-off on the MOLST forms and that bowling and baseball social events have been organized by and for the House Staff Council. This was Dr. Kumar's last meeting (moving to Phoenix) and new House Staff Council officers have been elected.
- Review of Letter of Support for Graduate Medical Education External Funding policy. An email vote on the Faculty Senate's position on the Graduate Medical Education External Funding Policy was 13 to support and 1 to remain silent. Dr. Crino circulated a draft letter which was then edited by the group (see page 11).

With there being no further business Dr. Crino thanked everyone for coming and adjourned the meeting at 4:55PM

Respectfully submitted, Kimberly A. Skarupski, PhD, MPH Recording Secretary

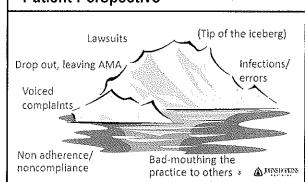


Why bother dealing with disruptive behavior?

April 23, 2014

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Consequences of Disruptive Conduct: Patient Perspective



Failure to Address Disruptive Conduct

Leads To:

- Team members may adopt disruptive person's negative mood/anger (Dimberg & Ohman, 1996)
- Lessened trust among team members can lead to lessened task performance (always monitoring disruptive person)... affects quality and pt safety (Lewicki & Bunker, 1995; Wageman, 2000)
- · Withdrawal (Schroeder et al, 2003; Pearson & Porath, 2005)

Feips W, et al. How, when, and why had apples spot the barret regarding group members and dysfunctional groups. Research and Organizational Behavior, 2005; 27:175-222.

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Consequences of Disruptive Conduct: Healthcare Professional Perspective Harassment suits (Tip of the iceberg) Infections/ errors Burnout Bad-mouthing the organization in the community Felps W. et al. How when, 2 of why bus Jappies spoil the bornet regulate group members and ALESS HARRES diplocational group, personal and Organization and States 2005; 27:175-272.

The Center For Patient and Professional Advocacy (CPPA)

- Founded by Dr. Gerald Hickson in 2003
- Offers programs to address and prevent disruptive behavior
- · Based on patient complaint data
- Patient Advocacy Reporting System (PARS) database – provides useful benchmarks

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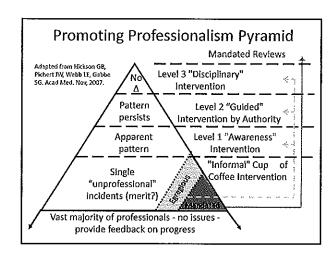
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CPPA Program Components

- Identifying issues via patient complaints as benchmarked to similar specialties
- · Identifying and training peer messengers
- · Positioning for protection from discovery
- Promoting accountability using graduated interventions

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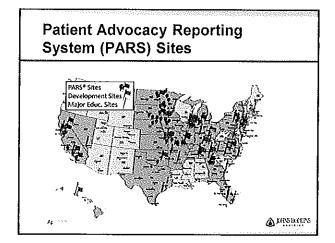
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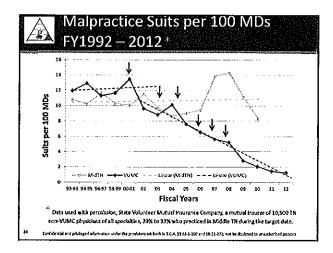


Infrastructure for Promoting Professional Accountability (PA)

- 1. Leadership commitment
- 2. Goals, credo, and supportive policies
- Surveillance tools to capture pt/staff allegations
- 4. Model to guide graduated interventions
- 5. Processes for reviewing allegations
- 6. Multi-level professional/leader training
- 7. Resources to help disruptive colleagues
- 8. Resources to help disrupted staff and patients

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Status Update

Phase 1: Engagement, Analysis & Planning

- · 2 day site visit for readiness assessment
- Gap analysis report identified barriers and best practices related to implementation
- · Leadership discussions

Phase 2: Establish Peer Messenger Committees

- JHH Co-Chairs: Drs. James Ficke and Justin McArthur
- · JHBMC Chair: Dr. Chris Durso
- · Letters of invitation sent by Dean Rothman
- All nominees accepted

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Next Steps

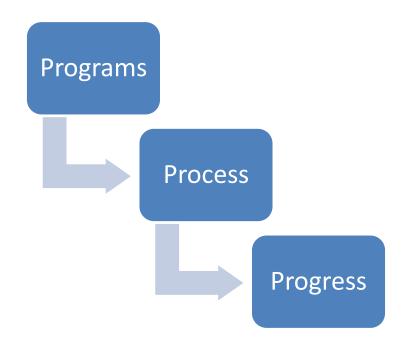
- Train peer messengers (PARS kick-off scheduled for June 18-19)
- · Conduct interventions on high-risk physicians
- · Focus energy/momentum on positives
- Implement a new patient complaint database (lead by Patient Relations)
- Reevaluate the JHH and JHBMC patient complaint and grievance policies

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Office of Faculty Development

Supporting Faculty



Mentor Time Difficult Conversation Publish Writing Ski Building Work- life satisfaction

Professional Growth

Educational Competencies

Leadership
Development

Leadershir Skill Building

Junior Faculty Mid-level Faculty Senior Faculty Principle and Proc Promotic

Educational Skill Building

- Provides knowledge and skill-building seminars and workshops
- Organize departmental mentorship and leadership programs
- Create web-based information resources to support faculty development
- Advise and assist faculty in navigating systems and understanding processes

OFFICE OF FACULTY DEVELOPMENT TEAM

Janice Clements, Ph.D
Professor, Comparative Medicine,
Neurology and Pathology
Vice Dean of Faculty

Kimberly Skarupski, Ph.D.

Associate Professor of Medicine
Assistant Dean for Faculty
Development

Cynthia Rand, Ph.D.

Professor of Medicine
Vice Dean of Faculty, Bayview
Associate Dean for Leadership
Development

David Yousem, M.D. MBA Professor of Radiology Associate Dean for Professional Development

Maura McQuire, M.D.
Assistant Professor
Assistant Dean for Parttime Faculty

Linda Dillon Jones, Ph.D.
Senior Faculty Development
Consultant

Recent New Additions

Michael Barone, M.D.
Associate Professor of
Pediatrics
Associate Dean for Faculty
Educational Development

Estelle B. Gauda, M.D.
Professor of Pediatrics
Senior Associate Dean for
Faculty Development

OUR PARTNERS

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Office of Women in Science and Medicine Barbara Fivush, M.D. (Office of Faculty) Office of Cultural Competence and Diversity Chiquita Collins, Ph.D. (Office of Faculty)

Professional Development Office Donna Vogel, M.D., Ph.D.,

Talent Management and Organization Development Louis Biggie

Institute for Educational Excellence
Jo Cofrancesco, M.D.

Advisors

Senior Faculty
Advisory Council

Advisors

Department Directors

Advisors

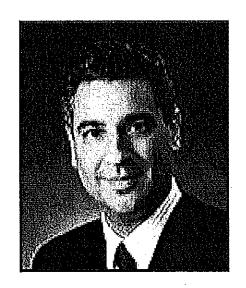
Junior Faculty
Resource Advisory
Council



Insight into the Affordable Care Act: What It Means for You as a Health Care Provider



Tomorrow's Doctors, Tomorrow's Cures®



Atul Grover, M.D., Ph.D., leads the public policy, strategy, and outreach efforts that advance the work of the academic medicine community. As Chief Public Policy Officer for the Association of American Medical Colleges (AAMC), he also oversees their health, educational, scientific, and other policies.

A leading expert in health care affairs, Dr. Grover will give a special presentation translating his insider knowledge about the Affordable Care Act health law, and the U.S. health care system's current and future states into understandable terms.

Tuesday, April 29, 2014
Chevy Chase Auditorium, Zayed 2119A
5:00 PM

Moderator: Julia McMillan, MD
Sponsored by JH House Staff Council

April 29, 2014

Paul B. Rothman, M.D. Dean of the Medical Faculty

Re: Faculty Senate support for the Graduate Medical Education Committee policy concerning outside, "non-traditional" funding for clinical training of medical graduates

Dear Dr. Rothman,

The Faculty Senate has considered the development of agreements with outside, "non-traditional" funding sources for the clinical training of medical graduates, in which the funded program agrees to accept individuals supported by those funding sources. We understand that while such agreements may provide benefits, they may also compromise – or appear to compromise – the integrity of the recruitment, selection, and promotion processes for all clinical trainees. We respectfully present our position on the Graduate Medical Education Committee policy concerning these agreements.

The Faculty Senate:

- 1. Recommends that such agreements be entered into only with oversight and monitoring by the Graduate Medical Education Committee and the Associate Dean for Graduate Medical Education.
- 2. Supports the Policy on External Funding of Residents and Clinical Fellows proposed by the Vice Dean for Education, Dr. Roy Ziegelstein, and the Associate Dean for Graduate Medical Education, Dr. Julia McMillan. This policy would mandate review and approval of each proposed agreement, and ongoing monitoring by the Graduate Medical Education Office.
- 3. Would welcome an annual report on the status of external Graduate Medical Education funding and the opportunity to provide feedback.

Sincerely,

Jude P. Crino, M.D. Chair, Faculty Senate

Arjun S. Chanmugam, M.D., M.B.A. Vice Chair, Faculty Senate

Edward S. Ahn, M.D. Secretary, Faculty Senate

Cc: Roy C. Ziegelstein, M.D. Julia A. McMillan, M.D.