

MINUTES
481st MEETING OF THE FACULTY SENATE
3:00 pm, Wednesday, October 23rd, 2019
School of Medicine Administration | Mary Elizabeth Garrett Board Room | MRB 103

PRESENT: Drs. Akst, Antoine, Bennett, Bitzer, Blakeley, Burke, Cabahug, Campbell, Cervenka, Cooke, Cormack, Dezube, Dirckx, Doetzlhofer, Donehower, Duffield, Fu, Gallia, Garcia, Gourin, Hutton, Inoue, Karjoo, Mahesh, Manahan, Marino, McGrath-Morrow, Merkel-Keller, O'Brien, Ponor, Razzak, Redmond, Reesman, Stayman, Stevens, Stewart, Swenor, Tamashiro, Vernon, Wagner-Johnston, Williams, Wu, Zeiler

Mmes: Messrs:

ABSENT: Drs. Al-Grain, Benjamin, Bigelow, Boss, Bulte, Carr, DeZern, Eberhart, Ingari, Kim, Lehmann, Macura, Margolis, Pierorazio, Seymour, Wolfgang

Mmes: Messrs:

REGULAR GUESTS: Drs. Clements, Faraday, Rand, Skarupski

Mmes: Guy, Robbins Messrs:

GUESTS:

Mmes: Anderson, Dr. Lipsett Messrs: Rum

- I. Welcome and review of the 480th minutes.** Dr. Swenor welcomed the senate members to the meeting.
- II. Approval of the minutes.** The minutes of the 480th meeting of the Faculty Senate, October 23, 2019, were presented. A motion was made, seconded, and minutes were approved as distributed.
- III. Cynthia Rand, PhD, Senior Associate Dean for Faculty; Clinical Excellence Committee.** Dr. Rand gave a brief update about the processes in place (and being developed) for the Clinical Excellence Track. The Clinical Excellence Committee, comprised of representatives from each department in the SOM, as well as additional members and inclusive of MD and non-MD members, is meeting to establish the standard operating procedures for applying the Clinical Excellence Track criteria that were approved over the summer of 2019 and based on the pending Gold Book Revisions.

Questions about process raised by faculty members based on review of the Gold Book revisions included:

- Clarification of whether a faculty member could "switch tracks". It was clarified that faculty members working with their mentors and department leadership are expected to choose the track (track selection begins when the faculty is considered for promotion to associate professor and beyond) that they feel best reflects their skills and commitments. This may change over the course of a career. Hence, faculty members can switch tracks, however, they would need to meet the criteria for whatever track they choose.
- A question was raised about how faculty members with heavy administrative responsibilities would be assessed. This is something that the Clinical Excellence Committee will consider. In many instances, administrative responsibilities are clinical in nature (i.e. directing or overseeing a clinical program).
- There was also a question raised about how faculty who invest a great deal of time and effort in community outreach and community program building would be evaluated. Such details are to be addressed in the coming months through the work of the Clinical Excellence Committee.

Finally, Dr. Rand shared that once the operating procedures for applying the clinical excellence track criteria to applications submitted for consideration for promotion are finalized, they will be communicated to the faculty senate and Office of Faculty deans will meet with every department to communicate the process. It is currently anticipated that applications for promotion in the clinical excellent track will be reviewed after January 1, 2020. The new process will be closely monitored and outcomes will be tracked and disseminated as per prior Faculty Senate discussions.

- IV. Pamela Lipsett, MD, MHPE MCCM, FACS Assistant Dean of Assessment and Evaluation; Learner Mistreatment: "What we know (and don't)".** Dr. Lipsett presented the data received from the UME: Graduation Questionnaire, Graduate Survey, and Office of Assessment and Evaluation Focus Groups (2018). Hopkins has above-average levels of reported mistreatment with similar themes across all learner groups (medical students, graduate

students, residents and fellows). Mistreatment of some form is reported by the majority of medical students and the majority of the time this is happening in clinical clerkships. There are categories of mistreatment (i.e., category 1 is communication, category 2 is a series of bad behaviors, category 3 is illegal behaviors such as sexual harassment). The specific numbers in each category for each department have been given to department leadership. There has been an overall increase in the reporting of grievances. It is unclear if that is because there are more episodes or that people are more comfortable with reporting. The data does not allow evaluation of ethnic or racial factors. Overall, the data shows that there is learner mistreatment in multiple environments across the school of medicine and that a culture change is required. There is a pilot SOM Medical Student Ombuds Office (<http://ombuds.jhmi.edu>) with the potential to extend to PhD students, residents and fellows and efforts to increase awareness of the scope of the problem as a first step to changing behaviors.

V. Heather Anderson, Dual Career Specialist in the Office of Faculty Affairs discussed a new program to attract and retain faculty. The Dual Career Program is “committed to assisting spouses and partners locate employment opportunities by offering information, personal assistance and support”. The program was launched one year ago and has assisted 25 faculty partners to date. Additional information available at: <http://facultyaffairs.jhu.edu/career-benefits/dualcareers>.

VI. Discussion & Voting of the latest version of the Gold Book. The revisions were sent for full faculty Senate review in September. These were presented by senators to their departments and centers were asked to bring back any comments. The revisions were passed with 39 Yays and 1 abstention. This now moves on to the ABMF for approval.

A. There was discussion about the need for transparency and active communication about the process for activating the Clinical Excellence Track and the Clinical Excellence Committee. The request was made for a detailed updating of the Office of Faculty Affairs website and creation of informational materials to share with departments so that there is full understanding across school of medicine (mentees, mentors, division directors, department heads, promotion committee members, etc.) about the process, procedures and plans for evaluation of the practical application of the Clinical Excellence Track.

VII. Steve Rum, Vice President, Fund for Johns Hopkins Medicine. Mr. Rum presented guidelines on the Ethical Practice of Grateful Patient Fundraising (GPFR) that were generated via a summit including legal and compliance experts, investigators, donors, etc. and published in JAMA. The guidelines are intended “to help clinicians and development professionals navigate, in a responsible and respectful way, potentially confusing or unclear situations that may arise in GPFR.” He asked the Senate to review the guidelines and then he will return for feedback and discussion. The goal of this process is to determine how to communicate with physicians and scientists within the school of medicine about best practices, to minimize barriers that allow effective interaction with grateful patients and to maximize clinician and investigator comfort.

VIII. Other Business. Dr. Swenor informed the senate that Dr. Landon King is scheduled to appear before the Senate in December 2019. She asked for feedback on what the representatives would like to hear from him. Suggestions were: the state of SOM and University finances; the practical implications of the roll-out of the safe-desktop and data trust on IRB applications and issues; where “easy” buttons are needed for faculty and security (the new JH police force).

With no further announcements, Dr. Swenor thanked everyone and adjourned the meeting at 4:34 PM.

The Faculty Senate will meet next on November 6, 2019 in The Mary Elizabeth Garrett Boardroom (MRB 103).

Respectfully submitted,

Jaishri Blakeley, MD
Recording Secretary