



**Mount
Sinai**

Call #:	MTG 0010
Title:	Meeting of Committee for Academic Excellence
Date:	May 13, 1971
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MTG10
Committee for Academic Excellence
May 13, 1971

- Lyons: This is May 13, 1971, in the auditorium of the Nurses' Residence, a meeting which is titled "Excellence," which has been called by Dr. Horace Hodes, professor of pediatrics of the Mount Sinai School of Medicine.
- Hodes: Anything you want not to be confidential will be anything but confidential. Al, do you want to take these?

I think I should explain to some of you that the thinking behind this started with not simply people who were full-time people, but some who were geographic full-time and some volunteers. It's a small group of people and it was rather decided in the beginning that the group start with full-time people. We did not visualize a great big organization with secretaries and committees, and we were not really concerned with organizational matters. The plan was to enlarge this full-time group by others who wanted to join. The idea was to work out the principles and ask people who wanted to come in.

Now, I realize that Harriet Gilbert's in the audience, and that she is chairman or president, I don't know which - Which? Pro tem president of the Faculty Organization, and I think, I haven't talked with her about why we don't think her organization fills the bill. I'll tell her now. For this reason: One, as all of us, at least those of us who founded the new organization believe, the Faculty Organization is interested in things that have to do with really the governance of the institution. That is, while we're interested in tenure and so on, we're not really interested in working out the details and negotiating with the Dean or talking with the insurance people and so on.

Also, I think it would be not quite frank to say that we've been a little bit disappointed with the fact that nothing has come out of the governance situation, and I understand this perfectly well. Meanwhile, while some faculty voices are not being heard, others are being heard. So I hope Harriet doesn't feel that there's any intention on the part of the founders of

Hodes: this group to take over the functions that she's got and her group are supposed to have.

On the other hand, if you read the latest thing which you have, we do feel that there are a group of people in this institution who are not being heard. On the other hand, the AAS, which I think is a very effective organization, and particularly its executive committee, often speaks as if they're speaking for all the rest of us. And there are many examples of this. I cite the last one, the letter that was sent out over the signature of a couple of us which I'm responsible for, because I really proofread it and got it wrong, was taken to Mr. Levy, and before, just about the minute it got to the rest of you, and he called me up last night in a great dither, at first, about what was going on.

Now, I haven't had any occasion to speak with Mr. Levy myself, except once in the last few months. Many of us feel he has very important things to do and we do not rush to him with things that are minor. But that's not the case with the AAS, and that's their privilege, if they want to do it that way, but I don't think they speak, at least for many of us, in many ways. I think they have somewhat different interests from some of us, and I think it's fine that they pursue them. But I'm sure that there ought to be a counter-voice. That is one of the main ideas.

Now, we also believe that we ought to address ourselves, as one of our main efforts, to making this an academic university hospital. Mount Sinai Hospital is a very great hospital, but it is undergoing change. Changes are going to be made and I think we should have a voice in them, as well as other people.

On the back side of this sheet is almost an identical, the English is changed very slightly, to what you got in your original paper that we sent you. And I think there's not much point in going on with all of the details, except for one thing. That is Item 4 which states that we believe that in order to have an academic hospital, that there has to be departmental management of all the beds in the hospital. Now, this does not mean that the chairman of the department distributes the beds to A, B, and C. We are talking about a situation where there's a completely democratic situation. The chairman may be the president of the

Hodes: meeting or may preside at it, but his vote doesn't count any more than the other people who are running this.

This is no new thing really to the Mount Sinai Hospital. I think that some of you know that ever since I've been here, this is exactly what happens in our department. I understand, at least from talks with the people in orthopedics and neurology, I may have to be corrected, and in urology, that this happens. So there isn't anything really new to what we're trying to say. It has not happened on surgery and medicine, although, on at least one occasion a couple of years ago I was told, and I wasn't at the meeting so I don't know, that the surgical department voted to have some sort of bed allocation plan, not entirely democratic as I remember it, but based on functions which the individual members of the department carried out, including various points for various functions. I believe that they may have - I don't know whether they've rescinded this or not. So this isn't so revolutionary.

Now, this number 4 scratches some of the people who practice, in at least some of the departments, very hard. They're, I think, against it and it upsets them, and I think this is part of the reason for the outcry.

I haven't anything else to say about this, except the floor is open for discussion. If you people want the organization to go on, we think you ought to elect permanent officers. I again say that there ought to be a minimum of organization, there ought not to be big committees, we ought to meet and talk informally. Harriet?

Gilbert: I would like to just make a few comments about this organization, to point out a few items this projected organization and its relationship to the pro tem Faculty Organization. I think that since there's more of an audience here than has attended any of the Faculty Organization meetings, this is a very good time to have your ear, and to give you somewhat of a progress report, and I think you should consider, in the light of what I'm going to tell you, the action that you take.

Now, the Faculty Organization, which started as three separate organizations of the full-time clinical

Gilbert: faculty, the voluntary clinical faculty, and the basic science faculty. I've named them in the opposite order in which they were formed. Ultimately, these three splinter groups, which were accused originally of being very divisive and seeking to fragment the faculty and so forth, got together and had a great deal of discussion and negotiation and found actually that their aims were in fact very, almost identical. So by-laws were written and each of the groups joined to form one overall faculty organization.

Now, what remains to be done is to have meetings of these three subdivisions and elect final officers. I speak to you as the pro term president of the Clinical Sciences Faculty Assembly, which is the full-time clinical organization. This has yet to be done, partly because things have been in a state of flux for the following reason: Once this organization was formed, following the reaction to it and the backlash to it, we received what I consider as recognition from the administration, in the following way. The presidents of each of the subsections of the Faculty Organization were invited to sit on the Professional Relationships Committee and on the subcommittee of that general committee, and have been actively involved in drafting rules of tenure. Now, those rules of tenure have been finally formulated, and there's a meeting of the full Professional Relationships Committee at which the subcommittee's recommendations will be presented for presentation to the Board of Trustees. In this, the faculty's wishes about tenure I think were genuinely heeded and are reflected in the final proposal.

Now, this has been accomplished through representation of the three subgroups of the faculty. You may say, well, tenure is one thing, but tenure has to do with one of the items that you have emphasized here, and that is promotions and appointments and matters of medical school personnel.

The other aspect in which we've been involved, again, members of the Executive Committee and the presidents of the three subsections of the Faculty Organization were appointed, a new governance committee was appointed and we have had representation on this governance committee. Again, there was a subcommittee to talk about the actual representation of the governance. This has been done and now there's going

Gilbert: to be a full meeting of the governance committee within the next few weeks to launch forth into the role of students and administration and faculty in the governance.

Now, this had come a long way and as I say, again, our opinions were solicited and have been heeded by the administration. Again, governance is still another thing and your organization does not seem to be that much involved in it.

One other important thing I think you should know, which is a very recent development, in terms of our representation and avenues of communication with the administration, is as follows: Drs. Koritz and Gitlow and myself received a communication from Dean James asking us to serve on a committee to examine the problem of finding a replacement for the executive officer of the Graduate School. Now, this directly bears on personnel, faculty and medical school matters. The committee is headed by Jack Peter Green. It's comprised of a number of other people, from the department chairmen, other members of the faculty. Again, the Faculty Organization was included in this and, in fact, is playing a key role.

The other request that was made of us is that we investigate the problem of student affairs and again make recommendations for replacement of the Dean and the Associate Dean of Student Affairs who have a need to be replaced, and, in addition, investigate the whole problem of student affairs and the personnel and the management of student affairs.

Now, I think those are rather key areas, and although this is just a recent request, reflects again the role that the existing Faculty Organization has played and is playing, in the eyes of the administration in Medical School affairs.

Now, I would only fear that - and I realize that the desire to form this committee is that of dealing with some rather imminent and important issues, and that the Faculty Organization has moved, as everything else around here moves, very slowly and very deliberately, and it was felt, I imagine, that these issues required a stronger and more prominent pressure. But I would wonder if it is tactically wise, first of all, to form another organization, because I feel that

Gilbert: this in a way may permit the administration and cause them to feel, 'Well, who is representative here? I mean, we have a faculty and they can't seem to agree even among themselves as to who they want us to ask and whose opinion they want us to solicit and who actually represents them.'

I would wonder if it would perhaps be preferable to incorporate the Faculty Organization into this organization, or this organization into the Faculty Organization, or to try to achieve these aims and recommendations through the Faculty Organization.

I would emphasize to you, first of all, as it first came out, and you have obviously made changes, this was a full-time affair, and I know that you didn't really mean it this way. It created quite a stir and it upset the clinical - right, and I think that Dr. Gitlow, to whom I spoke, certainly is quite willing to accept and understand. But we don't want to go two steps forward and five steps back, in the sense of making the voluntary people feel that they are not part of the scene and the action, because they have been very much part of it. Again, it is not the AAS with whom we have dealt, but we have dealt with people on the voluntary staff who hold Medical School faculty appointments of senior status, and they are more than reasonable and more than involved and interested in the welfare of the Medical School and in all the issues that you have cited here.

So, I would just raise the question or the point or the suggestion, that perhaps it would be more effective to utilize the avenues of communication that have already been opened up and are being constantly utilized to communicate with the administration.

Hodes: Harriet, I can answer you in one easy lesson. I was one of the people who wanted a single faculty organization. I point out to you that the AAS is still at this moment outside the Faculty Organization. You may not know that we tried to get them to give up this favored position, which they refused to do, and quite wisely, because all these committees you're on, all of them are on too. Furthermore, there's going to be a great big committee to decide the fate of the whole Medical Department. Two members of the AAS are on it, none of you, not a single one of you.

Hodes: There are two things; they are functional and political things. I point out again that, why does the AAS stay out of this organization? Because they know a good thing when they see it. They refuse like anything. In fact, they wanted to represent the whole faculty, which did not go, but they're still out of it, and they've got a good reason. It's a good, strong, functioning body and it's perfectly all right with me. But I think we need something like this.

I might tell you that the Dean does not object to this. I don't want to quote him and get him into trouble, but I think that he would not object, I know he would not object to a counterpoise of other clinical people. And Dr. Yalow's in the back of the room - talked to me for a while this morning - there's no reason why we can't increase this organization if we want to and if they want to, to people who are in the basic sciences. This can't, should not be interpreted to mean that we're against them or not fully supportive of them. I think for example, it's clearly the difference - this is the AAS and the Faculty Organization.

Now, I don't want to belittle your work, but I must say that all these committees you mention, every Tom, Dick and Harry is on it. The Student Affairs Committee has at least 40 people that I know of and anybody who wants to be on it can be.

Gilbert: No, this is now a committee that's just been formed. It has ten, eight people on it.

Hodes: Even if you're on the Executive Faculty, you don't have much authority around here. If you don't believe me, take my place and find out.

Gilbert: I think that the tenure problem shows that it really moves along remarkably well and remarkably in favor of the faculty's wishes. And that was a very small committee.

Hodes: I must tell you about the tenure. At least six years ago, Hans Popper, first I and then Hans Popper and I made a study of many medical schools. I made a special trip to Hopkins. I talked to Tommy Turner who was then dean. We got data from Harvard and all kinds of people. And we wrote up a very acceptable tenure situation. It was not acted on. The reason it was not

Hodes: acted on, the School didn't see the money and so on. So we've done all this work over and over again, about the tenure thing - which has been done five, six years ago.

I really am not attacking your organization. I simply think that we need a non-organization group in the sense that we are not responsible to the Dean. He does not appoint us to committees. We don't want to be on this sort of thing. But, when things come up, we want to be able to speak. For example, the issue came up some time ago of whether or not we should move the 250 - move to this institution 250 beds for orthopedics from the Joint Disease Hospital. I tell you that, except for orthopedics, every single chairman in this hospital was against it. We lost.

I'm not implying the AAS was for it. Nobody spoke up about this. We lost this thing. Now, maybe it was a good idea. But your views were not considered. Our's were not listened to, too hard. And there are many things that should have been heard from the faculty.

Another thing is an extended care institute. This is a good idea, although some of us were against it. We could see advantages to it. There was a one maybe two hour, one long meeting about it, and that was the last we heard. The next we heard it was all ready to go.

It turns out, we heard this again just last week by accident, that the State is not going to put money into that sort of thing, and now there arises again the possibility that we add 250 acute beds. Don't you think that you ought to be in on this? It's almost - it's not by design, I think it's just the way it happens.

Gilbert: I just simply want to make the point that if the faculty feels that it wants a voice, and I think we all do, let us try to get as united and loud a voice as possible. If we are going to end up with multiple voices speaking simultaneously, no one will be able to hear us.

Hodes: We have two different objectives. I think you've got to do all this committee stuff. You've got to go through the tenure, you've got to go through the

- Hodes: governance. This is a second governance committee, I might point out, not the first, the second.
- Gilbert: Yes, but the first one had an entirely different representation and did not heed the wishes of the faculty. That's the difference.
- Hodes: I think we have two different jobs to do, really. Now, I don't know whether I can make it any clearer. I come back to the business of the AAS. Why do they have to have an AAS? Why don't they disband and join the Faculty Organization? They're not dumb people in this organization. I've known them for 22 years. They've got a real good reason. And I think, so do we.
- Q: You mentioned making this into an "academic institution." What do you envision as an "academic institution"?
- Hodes: Well, I think the problem is clear, and at the risk of again being accused of dividing the faculty, I think that the people who practice here and whose main interest is in practice, who are very needed and they're very good doctors and there's nothing against them, that's their main interest in life. They have counter interests to yours and mine and some of the people here who practice and spend much more time in this institution. I think it's quite clear. This is the history of every institution that's ever gone this route. And it's not over yet. I think you all know that this argument's going on at Yale. It's been over at Hopkins only because they started in 1880 and it took them to 1936. I think there's a conflict.
- Q: I think, being full-time, not being involved in patient care, or not, I think that from my point of view, I feel that the part-time people and the full-time people, I very seriously question whether there's advantage for the School, or the patient care, or the teaching by going to a full-time faculty.
- Hodes: I never hope that we go to a full-time faculty. Again, I point to my own department. What we're looking for is a synthesis of the two. Nobody in his right mind would visualize a hospital of this size full of full-time people. I hope that nobody believes that this is what I want to do. I don't have to tell you, we don't want it run that way. But I think the interests of the

Hodes: two, three groups that run in a department have to be really synthesized.

Baron: [Dr. Murray Baron] What you're doing, you should be - much of the power is in the department chairmen.

Hodes: No. Do you see a departmental chairman here, besides me? Dr. Berson can't come. Dr. Leopold said he would come but he didn't come. No, not at all. I think this is not shifting the responsibility to them. Why?

Baron: Well, because every department is going to run - you can say that it's going to run democratically. But if you're at a meeting, perhaps you have some mavericks in your department, but I'm sure a good portion of your department will not vote against you. Whereas if you were not in any way --

Hodes: You mean, we have a meeting and I say, "We're going to have 90 beds ward and four semi-private," and they will all say "Yes."? Is that it? Well, this organization that we've got, that we have here, will prevent this better than anything I know.

If you're not united in this thing, what's going to stop them from doing it now? Who's going to stop them now?

Gilbert: I think, what you're proposing, there has to come a maturity and a change of attitude, so we no longer regard the department chairman as the patriarch of the department. I believe things can be done democratically within departments. I think we've had a very recent example of it - a secret ballot in which the wish of the department was solicited, and _____ did, and I think that's certainly quite reasonable.

Hodes: We visualize this really as a chairmen and clinical group of people. There isn't any reason why it can't be talked out this way. Well, what am I here for? You see, if my interest is to be autocratic, what am I talking to you for?

Man: Murray, I think you misread this, or you certainly misread what was easily misread, the first letter sent out, if you think that we're trying to organize this with only the full-time faculty. I've come from a hospital where there is a full-time faculty, and only a full-time faculty, and it's a disaster because there

Man: are no doctors. Bad teaching for medical students, it's bad care for the patients, and nobody sends their patients there anyway. A full-time medical school, particularly of this size in this community, will not work in my opinion. I would never be in favor of it. This is why I regret the misreading that was inevitable by virtue of the document that came out first.

Hodes: Well, I just want to say that the group was not organized only by full-time people. There were in the room people of all three categories.

Man: It won't work, Murray, and I don't think any of us are rooted enough to think that this, by gaining all of this power to ourselves we'll accomplish anything. We won't; we'll destroy most of what's good about Mount Sinai. I don't think there's any question about that. But our objection is in two lines - number 1, the Association of the Attending Staff is - really the voluntary faculty - has, some of us think, an inordinate voice in the policy making. They have a fixed 30 votes on the Medical Board.

Man: They have a direct access to everybody in the institution. A vote is taken in the Department of Medicine, by secret ballot, and a member of the Association of the Attending Staff goes directly into this meeting and says that vote wasn't valid. These are the kinds of avenues that are disturbing to those of us who feel the AAS have an inordinate voice in -

Man: How many votes on the Medical Board are chairmen of departments?

Hodes: 24. What are you shaking your hands at? Well, let me break it down a little bit. Some of the department chairmen are not full-time people. So very often things that have been lost have been - but why should the AAS people sit on it? Why shouldn't some of the people in this room? Why aren't people from Harriet's group on it? Because they [the AAS] have got this position of power, and they've got it, I think, because they're politically well organized. I've pleaded with the people in our department who are full-time and part-time to go to the meetings. They won't go. And I don't want to go into why they don't go but the point is, they don't go. And in this organization, there are more people who practice, but this doesn't mean that everybody who comes in here for an hour a week should

Hodes: have the same say as the people who are here ten hours a week, and that goes for full-time people and part-time people.

Gilbert: The other thing you have to remember is that these people, this organization, has been in existence because this was until recently a hospital and they were in charge of the policies of the hospital, and I think a lot of this -

Hodes: - well, they weren't, Harriet. The chairmen were in charge, and we yielded some of this voluntarily and I think maybe we made a mistake, but it was done that way, and I think now other people -

Gilbert: -- there's been a shift now, over towards the Medical School in orientation.

Hodes: You're saying it better than I could.

Man: Harriet, how would you suggest, standing here now, that the efforts of your organization and this embryonic and not yet really born organization be fused? You've been in this longer than I have. You think this organization should not form, should form as an arm of the committee, and the organization - what would be your suggestion?

Gilbert: Well, the Faculty Organization, subsections have by-laws which actually they were accepted at a meeting which you may not have attended but nonetheless we held, and the next step was to meet again and elect officers. I would certainly like to use the interest that has been created by this particular coming to life of the faculty again, use that interest to call a meeting of the full-time clinical faculty, the part-time faculty, elect officers, and there is nothing in here that is not in the by-laws of the Faculty Organization.

Man: Is that arising from an urgent situation...What happened in the Department of Medicine over the past month represented an urgent matter that required the attention of the clinical faculty, organized as faculty, and I think the coming into existence of this organization represents an almost inevitable backlash in which the faculty as a faculty, not making its views known and instead, the views that were made known were those of the AAS.

Man: ...the action committee...

Gilbert: Well, this is required, we have an executive committee, an executive board, and I think if we had a faculty meeting and elect your officers, and the executive committee, we'd then have a membership as well as a board and it would just become one and the same thing.

Hodes: I would like to answer that later, after Kurt speaks, because I think there's an objection to it, Harriet.

Kurt: [Hirschhorn?] Since, as Harriet is fully aware, I was sort of one of the movers at the beginning of the formation of a faculty organization as a whole, I think that perhaps I ought to express a few thoughts, as to my thoughts on the relationship between these two efforts.

First of all, I completely agree with Arnie Katz that a void currently exists in terms of political action, from the point of view of the group represented by this effort. I personally view this, and I've told this to Horace, as for the time being an interim situation. I feel that a committee like the one that is proposed must be formed to resolve the ever-growing and ever-increasing number of problems that are arising, as typified by the situation in Medicine at this particular point, and several other things that have come up. I also, on the other hand, agree with you that when a real, active executive committee of the entire faculty is formed, that can function, that can respond to emergencies, without - and this is an argument we've had many times - invariably having to go back to their constituencies for long hassles, but can really act for the benefit of the faculty and therefore of the academic excellence of the School, then -- well, whatever good you want to draw from this particular committee as it would exist at that particular time can be incorporated into your organization in the form of a political action arm of that organization.

On the other hand, I don't think you're quite ready to do that at this particular point, and I would strongly urge you, therefore, to accept this in the sense of something that is necessary at this time, and that perhaps and hopefully can be incorporated later into a general faculty move, so as to give a strong voice to the faculty in the major decisions in this

Kurt: School, so they don't come haphazardly down to us from above.

This is all that, basically, I think we're asking in the formation of this committee. There is no way, as I know it, in the Faculty Organization at this particular time, to set on some of these crucial issues in a hurry. And this is basically, I think, what we're after.

Hodes: There's more to it than that. I come back to the issue as to what makes the AAS such a strong organization. They don't have to ask the Dean's permission to do anything. They are outside of this thing - your group - which the Dean set up. I would abandon this effort the minute the AAS gives itself up and joins the faculty. This is what we tried to get them to do. But they're not as dumb as that, they wouldn't do it.

Gilbert: But Horace, there's quite a difference between the AAS and the voluntary faculty, in terms of numbers. The AAS encompasses everybody who's on the attending staff. It's hundreds and hundreds and hundreds of people. The voluntary staff who have appointments, assistant professor and higher, number only about 350, the same in number as the full-time faculty.

Hodes: But the point is, really, that the AAS is in both organizations. They're there, and they have a voice and they can block anything that they want to block just by talking, and what - When they give up, we'll give up. It's the same thing. They're in a very good position. I talked with them a long time, as a matter of fact, the people on their executive committee, and they wouldn't do it, and from their standpoint they're right. Also, they do have a very small group. It's true, they have a great big number of people, but how many people come to their meetings? It's run by a very small executive committee. Actually, one of the things I'm trying to get through the executive committee and everybody to agree to, and I think Dr. James is pretty interested in it, is to have mail ballots for all organizations in this place, and to have a certain number of the votes necessary to settle any subject. My prediction is that the AAS is going to fight this pretty hard. I guess I would, in their place. They're two different things.

I'm sorry, I don't know your name.

Strauss: My name is Bernard Strauss. I'm Director of Medicine at the Beth Israel Medical Center. I agree that this may be an interim organization, but it's been formed for a rather urgent reason, at least in part, and has aroused the interest of some of us because of this urgent situation, and I think rather than devote all the time this afternoon in discussing whether or not such an organization should be, I think we ought to take a stand on this urgent situation.

There is a controversy which is raging here which is intimately involved with the purpose of this meeting, and that's the achievement of academic excellence. And I think the departments should be heard from also. I have known Dr. Berson for many years. I know him to be a man of great integrity and unimpeachable honesty. He's lately been accused of being pathologically moral. In this era of credibility gaps, we need more morality, not less. We need to honor promises and commitments, not abandon them. Rousseau said the most precious thing possessed by man is the morality of his actions and the love of virtue.

I understand there are some who would like Dr. Berson to resign. It has even been said that "either he goes or I go." This is an unworthy statement. Let us not divide our house while it is still being built. When all the world bestows praises and prizes on this man, let us not award him a stone. A man should not be without honor in his own country. We must not reject a man who brings honor to our house and yes, virtue as well. If we do reject him, we all stand diminished.

Mr. Chairman, I move that it is the sense of this meeting that we request the president of our School and the Board of Trustees to create the conditions to enable this gifted physician to continue to grace our faculty.

Hodes: Dr. Strauss, you haven't been with this organization for a while, but I can tell you, one of the virtues of it is that it acts quickly, even though it sends out the wrong mail. Those of us who formed this organization sent a petition to Mr. Levy directly saying in effect something like what you said. He's quite aware of what we think about it. He's a little annoyed that he has extra work, but he knows about it. I don't think we would gain anything by doing it. I think everybody knows how we feel about it. It's been

Hodes: made known to everybody and sundry. It's really been done. It was done quite promptly. And I think it points out one of the virtues of it.

Baron: [off mike] ...you have one stand and I don't have any idea what the opposite stand is or .. why this has come up in the first place?

Hodes: Well, do you really think this is the time to go into that? Look, why don't we get our business done and I'll tell you all you want to know that I know, all I can tell you, and it changes from minute to minute. Dr. Strauss' point is very interesting because I doubt that the AAS made such a resolution - it shows the difference of opinion we have. I know that the Faculty Organization hasn't done it, at least I don't think they have. So I believe we need this thing.

Baron: Has anyone gone to the Faculty Organization and attempted to talk to the executive committee of the Faculty Organization with these kinds of urgent situations? It really does sound like this is a duplication of -

Hodes: Why should anybody have to go to the executive officers of the Faculty Organization?

Baron: Because we have an existing -

Hodes: Well, why don't they do something? Why didn't they do something?

Baron: What? Well, perhaps, it may be a failure of dissemination of information.

Hodes: I've tried to point out again and again that we have an organization already, that's outside of the Faculty Organization, that wields a tremendous amount of power and there's no counterweight to it. No counterweight from opinions which are different from their's.

Baron: The only thing I'm bringing up is that apparently this information is widely distributed but I must say that this is the first time that I really was aware of it, and I think that I have heard a reasonable amount of gossip, and perhaps one of the failures has been that not enough of the Faculty Organization are aware of it.

Hodes: Well, part of this is deliberate. We thought that we would get some ideas on paper, and not have a meeting where we'd spend hours going over commas. We spent long enough. Now we've brought this into the open by a letter that could have been better, I assure you. But we're here now. How we got here I think doesn't make much difference. Now you know about it. We'll go over the points that we want to get to - let me finish my statement - I think, we go over the things that we stand for. Those people in the room who don't want to go along with it really should, are perfectly free to leave and should do so. If you want to go along with the statements and the goals, I think we should organize, have this the official organizing meeting, elect some officers. OK.

Baron: Well, all right.

Hodes: I don't understand your point.

Man: The point is that one of the reasons there has not been a lot of activity here is that a lot of people are not interested in a number of apparent gut issues, and this whole thing has to be apparently organized around issues that can mobilize the faculty. I would like to ask you in turn, why do you think that this organization will have more success at mobilizing the entire faculty, when for example, it was not possible to enormously mobilize the faculty about issues of tenure?

Hodes: But you put words in my mouth. I don't think we're going to mobilize the whole faculty on anything except that they want more beds, more parking lots and more salary. That we'll organize them on.

Man: Organize is a bad term, I don't mean it in that sense, but I mean -

Hodes: We're not going to appeal to the whole big faculty. In fact, that's the point that I'm trying to make. We want the people who ARE interested in these issues, and you're here and apparently interested.

Gilbert: The thing is that obviously the issues that you have mentioned are very encompassing issues, in which every faculty member must be interested. Now, I think you have to make a distinction in your own mind between an

Gilbert: emergency issue on which you wish to take a stand, and the general desire to have faculty representation.

Hodes: All right, let me focus on item No. 4 which is the key issue, the one that the AAS will not - I'm sorry, after that, that will be next. Speak, please.

Man: I just think that some people are missing the sense of the organization, this organization as it's been discussed over the past two weeks. That is, not to set up another constitutional committee, not another legislative committee to represent the entire faculty, but, to use the terminology of the day, this is a hydrety of people who agree on certain principles, who then make their voice known, not as representative of being part of the entire faculty but representative of us who feel along these lines. And I think that this allows this organization to act quickly, to act within days rather than within weeks or months, and to be immediately responsive to the situation.

(crosstalk)

Gilbert: What you are asking for, in a sense, is saying, 'We have formed a cadre of people and we want to have a voice'.....

(crosstalk)

Hodes: No, no. I think none of us want to be on a single committee. I added it up, Harriet. There are 967 committees. I don't want to be on another one and I don't think any of you do.

Gilbert: All right, well, I can see one way out of this. If you have an issue to which you wish to address yourself and pass a resolution regarding, I would suggest that you do so, as a group of individuals who got together, cadre, call it what you will. And secondly, I would then also make your proposals about what you wish in terms of faculty representation, and send this resolution, in addition to the administration, to the Faculty Organization, who can then call their meetings and take a more official action.

Hodes: I'll do that, Harriet, I repeat, and I hope you'll understand me, the very day the AAS does it, we'll do it. OK? All you have to do is persuade them, and we'll do it. You can't ask for anything fairer than

Hodes: that? OK? What else can we do? We're sitting here without any voice except in an organization, and they're another organization, very efficient, very good and very nice and all fine people, but they have different views.

Let's take Item 4, because it comes down to this. We don't propose that tomorrow this change be done, but we go on record that this is what we want, and it's understood that this is not at the department chairman's whim, but that a union of what he wants and what the department wants.

To answer Murray Baron, what I visualize is that if a department chairman is running it in the way that you suggested that some of us do, that there is a group that you can talk to that will listen to you now, because this group is supposed to be made up of chairmen and of people who are not chairmen. There is no group like that, really. The Medical Board sits there as two bodies really, one opposing the other. I hope that a number of chairmen will join this group. I know that a couple of them will. I know Dr. Berson will. And I think Dr. Leopold, I know he's told me he would come. And that's, I think, one of the strong parts, that we'll at least be talking together on a functional basis and not on a political one.

Let's, I think we ought to bring this to the point. Those of you who really do feel that you'd like to stay, I'd suggest that we do elect three officers, a chairman, a vice chairman, perhaps, and a secretary. And I think it ought to be done by ballot, by secret ballot, by nomination and by secret ballot. Those of you who really aren't interested ought to feel free to leave. I can understand why you wouldn't want to do it. Those of you who do, let's get on with it.

I think, if all of you wish to go on with this then, that we ask for nominations for chairman of this committee, for permanent chairman.

Man: I nominate Dr. Hodes for permanent Chairman.

Second -

Hodes: Any other nominations? Someone want to move another nomination?

Man: -- move the nominations are closed.

Hodes: All right, I think - the proper parliamentary procedure then is to cast a single vote, and all in favor say Aye. You have to put your hands up, because I don't want somebody to say there were 97 abstentions. We've had that once. Harriet, yes, OK - are there any nays? Any abstentions? All right, so ordered.

Hodes: Now, I think nominations for vice chairman.

Man: Dr. Arnold Katz.

Second -

Hodes: Any further nominations? Dr. Arnold Katz for vice chairman.

Man: I nominate Harriet Gilbert. (laughter)

Hodes: Harriet, do you accept?

Gilbert: No, I decline.

Hodes: Dr. Gilbert declines.

Man: Although he isn't present at this meeting, I know that he's quite interested in the organization, and I do think that in order to emphasize the fact that we really want to have a united voice of the faculty, notwithstanding their position, I would like to nominate Dr. Mortimer Bader.

Hodes: Well, why can't he be secretary, if you insist on it?

Man: I would think that it would be highly appropriate. I think that one - because that with the letter that was sent out, that the appearance of more than one full-time person on the committee would be -

Hodes: Arnold, do you want to withdraw you name?

Gilbert: -- executive board --

Hodes: -- no, we don't want to have a board, please, Harriet. Dr. Katz withdraws his name and Dr. Mortimer Bader has been nominated, second?

Hodes: Second, all in favor? Aye. All against, zero. All abstaining, zero. We've got it on tape now, so there's no problem.

Now, secretary.

Man: Harriet Gilbert. [laughter]

Hodes: She's declined, I'm afraid.

Gilbert: I declined for vice president but not for secretary.

Man: You accept that?

Hodes: You would be secretary?

Gilbert: There's a problem in, perhaps, conflict. I'm really torn in the sense that I feel I would like to be involved to represent --

Hodes: -- no representation, Harriet, if you're here, you're an individual. This is an organization of individuals. We've not having you represent anybody but you.

Gilbert: If you nominate me, knowing my position in other -

Hodes: -- I think your position's fine. Is Dr. Gilbert nominated, any second? Second. All in favor?

People: Aye.

Hodes: Any abstentions? No. No abstentions. No, I think - excuse me? Any opposed? Zero. OK.

Now, I would like Dr. Hathaway who's standing in front to count the house, because we are going to be told there were four people here tomorrow.

Gilbert: You should use an attendance sheet.

Hodes: We have an attendance sheet. Very good. There is an attendance sheet and we ought to sign it, but I think I'd like to count in any case.

Man: People have left.

Hodes: I assume that they left because they didn't like the goals of the institution.

Man: -- the vote should be tabulated.

Hodes: Right. That's what I'm talking about. Count it and we'll at least know that. Dr. Donoso, did Dr. Friedberg leave because he had to go somewhere or because he couldn't subscribe to all this?

Donoso: He didn't know whether he belonged here or not, and I couldn't explain to him, I didn't have the --

Hodes: He's in doubt. OK. Will you talk with him?

Donoso: Yes, I will.

Hodes: .. I hope so. Right... new business.

Man: I thought the statement by Dr. Strauss from Beth Israel Hospital was of extreme importance, and perhaps should not be overlooked. In terms of the problem that is going on with Dr. Berson at this moment, that every effort should be made to enlist support from those hospitals that are associated with the Mount Sinai Medical Center, and that a similar letter or some other document be organized, from other hospitals of the Medical Center and sent to the appropriate people, just to keep it going.

Hodes: I think that's an excellent suggestion. I think that Dr. Strauss, you ought to take it on yourself to say just what you said. There's no point in our doing it here again. I think it's quite clear that Dr. Berson's support is tremendous, and it's just going to get nothing. But if it does come from Beth Israel Hospital I think it would have a great deal of influence.

Man: Could we ask Dr. Strauss whether he could send this letter to his counterparts at the Bronx VA and Elmhurst?

Hodes: -- and Joint Diseases --

Man: -- and ask for the chairmen of Medicine in each of the affiliated hospitals to circulate these letters in their hospitals, in support for Dr. Berson?

Hodes: Dr. Yalow had a hand up first.

Yalow: I just want to tell you that the VA has sent such a letter.

Hodes: All right, that's one, do you know -

Yalow: -- Dr. Roth, because he's Chairman of Medicine, including in his letters, he's representative of all the Sinai staff at the VA.

Hodes: Do you know about Joint Diseases? Do you want to ask them too, Dr. Strauss? Hospital for Joint Diseases. I think your letter would be very helpful. A petition.

Now, somebody, and I think he's gone, Murray Baron, asked me about the business with Dr. Berson, so since he isn't here and the rest of us know all about it, I think we can probably skip that item of business. Did he not feel he could stay? I'm not sure I could tell. OK.

Man: Would it be appropriate at this time to propose that the document on which this is founded be sent by this committee to both the Dean and the Medical Board of the Hospital informing them that we have formed a committee, these are our officers, and these are the things that we stand for?

Hodes: That would be one way. I think we're trying to be unofficial.

(Voice off tape)

Hodes: It's the Committee for Academic Excellence of the Clinical Faculty. It's on the front page. And Dr. Yalow objects to this and wants to get other people in it, and as soon as they join we'll just say "of the Faculty." Dr. Yalow?

Yalow: I disagree with it. This isn't, at the moment, especially a faculty group. What you are now setting up is the clinical faculty to deal with situations that encompass more than the clinical faculty. I think there's a very good reason for your organizing on a particular issue. I don't think this sort of ad hoc committee is entitled to say at the moment that it should be primarily concerned with curriculum or all of the other factors, with dietetics or nutrition in the Hospital or social service and so on. I think that this is an inappropriate action at the moment, and I think that we would be more effective if we were to deal with the problems of integrity and academic excellence as represented by particular individuals or

Yalow: groups, and not throw out the kinds of petitions that will get bogged down in all sorts of things which are of long term importance but which are irrelevant to the initial issue.

As long as you identify yourself as the clinical faculty, you cannot expect to get support from either the associated institutions or from the non-clinical faculty. For instance, I do not feel that I should sign my name to this, I'm not clinical faculty. And I think you're going to - I hate to use the words 'be divisive', but I think that you will lose your influence by spreading beyond what might be considered your competence. And I wonder if you would like to consider organizing as an action wing, if possible, of the faculty committee, and organizing not as a clinical faculty but as the concerned faculty.

Hodes: I give you the same answer, Dr. Yalow, the minute the AAS does it, we will do it.

Yalow: This has nothing to do with the AAS.

Hodes: I'm sorry. I'm sorry. We live in this institution, and we think that it does have something to do with it. And for your information, the items on No. 5 are of vital importance to how this place runs as an academic institution.

Yalow: They certainly are, but they are not the sole problems of the clinical faculty.

Hodes: I've invited you to bring your people into it and we'll change the name. I do not want to get into another organization.

Yalow: -- you call it Clinical Faculty, you are not inviting anybody else into it.

Man: -- you're right... maybe we ought to change it --

Yalow: I move that we, that this be considered the Concerned Faculty, that they attempt to develop themselves as the action group of the faculty, because I gather that the faculty, being typical of faculties, has been rather remiss in rising to the emergency situations. So I would like to move that this be called the Committee for Academic Excellence of the Concerned Faculty.

- Hodes: Why don't we just say Faculty? Leave off clinical and call it faculty, all right?
- Yalow: There is a faculty - what I'm looking for is an action wing, to push the general faculty committee into taking some stands, instead of waiting --
- Hodes: OK, Rosalyn, suppose we leave it like this, it's now the - omit the Clinical part, all right? And this tells us, you've heard what our aims are, they're very similar to what you were saying, and we will now ask other people to come, those who are in the non-clinical part of the faculty.
- Man: I think the choice of the "Concerned Faculty" indicates what this is... This is a lobby, not a, it may be a very wise change in word.
- Hodes: Let me tell you why I don't like it. The point is, if you say you're concerned, it means that somebody else isn't concerned. That's very hard to stand for. It's like people who put "I'm for peace" on their automobiles. The implication is that somebody who doesn't put it on is not for peace. There's a limit to what you can say.
- Man: You already have that in the name, Academic Excellence

- Hodes: That really worried me a great deal, and that's the best - I don't want to put also Concerned in it. We'll have two things on which we pat ourselves on the back. If we're for Academic Excellence, it's bad enough.
- Kurt: I would agree with that aspect. I would however say that this does not say that - in response to the point Dr. Yalow made - that this does not in fact say that we, this group, shouldn't be the ones involved in decisions, but that we suggest that there be appointed a committee of Trustees, members of the administration, department chairmen, clinical faculty, because these happen to be clinical ones, to make recommendations regarding the administration, not that we are the ones to make the recommendations, but -
- Hodes: Kurt is right as usual. Rosalyn, I think there's background to this that you must know. The one thing that was brought down to us last year about the organization of this Hospital was that there are too

Hodes: many residents and fellows, and the price of it has gone up tremendously, and just between us, they were talking about one department. And I proposed, I was asked to do the looking at this. Well, I'm smart enough not to do that, so I didn't. The next thing that happened was that committees were formed to come and look at each department to see whether they had too many, too few, I can't imagine anybody having too few residents, but to look at them. And I was visited, among other people, and all chairmen were kept off of it, and what ended up was a non-discussion, a completely non-result.

Now, this one item, about the house staff and the residents, was picked out. And I put this in about the other parts of it because if somebody wants two more administrators, he gets the two more administrators. If somebody wants various other things that have not to do with the faculty, they get them. Some of you may not know, for example, that there are members of the administration, they're very nice people who were pushed into giving them a faculty title, and I very innocently asked at the Executive Faculty, "Of course so and so's an assistant professor, he's bound by the ceiling of the assistant professors." "Oh, no, he's not bound by them." You don't know this. This is what's back of this.

Of course, we react to what goes on in our own departments. We need committees of the Trustees and the administration and the rest of us, because this hospital doesn't function properly, or at least we think we can make it better. Kurt's right, I don't want to be on those committees, but I think some of you ought to be. Jerry, I think had his hand up.

Jerry: (off mike...).... I got in here a bit late, I was at another meeting. The problem as I see it is that we do have a faculty organization, and we do have - the Faculty Organization has been remiss in not getting organized more rapidly, but I think for Mount Sinai it's been working in a pretty - at a normal rate.

Hodes: Jerry, we've already gone through that... (crosstalk)

Man: ... on the question that is being asked about this group. I think that this group in no way wants to take the place or supplant this. This group, in the long run, perhaps, would wish to represent some form of

Man: individualized action arm of that group, but that there is an interim position at this point, where two things are existing, number 1, a lack of a mechanism for emergency action in the Faculty Organization, and number 2, the availability for emergency action of another organization, namely the AAS, which is the only group that can get to the powers that be quickly.

Hodes: Jerry, maybe you'll be reassured to know that our secretary is Harriet Gilbert, OK?

Jerry: All right. Now, the other question is that this could be worked in with the function of the Governance Committee as well.

[tape shut off]