

**ICAHN SCHOOL OF MEDICINE AT MOUNT SINAI
FACULTY COUNCIL
Minutes
January 9, 2013**

In Attendance: Drs. Aloysi, Barnett, Charney, Choudhri, Felsenfeld, Filizola, Gibbs, Godbold, Goldschlager, Harmaty, Haroutunian, Hausman, Howell, Kim-Schluger, Krauss, Leibowitz, Ma'ayan, Manfredi, Markoff, Miller, Palese, Reiner, Rhee, Teitelbaum, Wang; Ms. Schneier

Dr. Leibowitz opened the meeting at 12:05 p.m. and introduced Dean Dennis Charney.

I. DEAN'S UPDATE

Dr. Charney provided an overview on the School:

- Finances – With a budget of \$1.6B, the School had a slight surplus in 2012, which is unusual for a medical school and speaks to our tight controls and high performance.
- Philanthropy – Fundraising is strong. The major gift from Carl Icahn – which has resulted in a name change for School – is one of the largest in the history of medical schools.
- Hess Center for Science and Medicine – Since its opening in December 2012, both clinical and research faculty have begun to move in. Strong recruitment continues in order to fill building. Approximately 50-60% of the rental units in the attached residential building have been rented; this is an “80/20” building with 20% of unites designated for affordable housing and available through a lottery.
- NIH Funding – Despite NIH budget challenges, our investigators are competing effectively for funding. With an overall funding success rate of approximately 20%, it is imperative to keep submitting grants; the School is providing infrastructure to maximize success, including bridge funding when appropriate.
- Education – The quality of our students has never been higher. The curriculum is undergoing revisions and will continue to change as science changes. A new FlexMed early entrance admissions pathway to the M.D. program will be introduced in 2014 to attract a broader range of students. Is possible that eventually early entry programs will account for up to half of entering classes; we will track students over five to ten years to assess their performance compared to students admitted through the traditional route. The results over time may change the type of students we admit and the way in which we admit them.
- Faculty Practice – Growth was 7% in 2012. As the number of visits increases, so does the need to expand. Recent off-site expansions include urgent care on the Upper West Side and primary care expansion on the Upper East Side.
- Continuum – Mount Sinai is conducting due diligence on a possible merger with Continuum, which includes St. Luke's, Roosevelt, Beth Israel, and New York Eye and Ear Hospitals. There is considerable potential synergy for the clinical care network, clinical trials opportunities and student rotations. If approved, Continuum physicians would be integrated into the Mount Sinai faculty. There would be a single department across entities for each discipline.

In approximately three to four weeks we should have sufficient information to know whether to move to a new phase of discussions.

- Hospital Leadership – Dr. David Reich, Chair of Anesthesiology, has been appointed Interim President of The Mount Sinai Hospital. A national search will be conducted for a permanent President. The role of MSH President will be streamlined to focus on the hospital, and a new President for the Mount Sinai Network (ambulatory practices associated with the FPA and MSH) will be recruited; this restructuring is an important part of our growth model.

In response to questions from Council representatives, Dr. Charney remarked:

- The three-year medical school model of NYU is not something Mount Sinai wishes to adopt; with an ever-increasing amount of information to teach/learn, reduction of the time in medical school is not being considered.
- The Sci-Med early entrance program inaugurated in 2012 has led to the recruitment of excellent students.

Dr. Charney summarized proposed changes to the faculty appointments and promotions methodology, including:

- Investigator Track – In response to the increasing diversity of our faculty, the Academic Track will be renamed and will offer two pathways -- one for traditional academic scholars and one for subject experts from outside academia.
- Research Track -- Flexibility will also be added in this track to recognize accomplishments of candidates coming from industry.
- Clinician and/or Educator Track – A broad range of accomplishments in clinical care, teaching, research, scholarship and administration will be considered.
- Instructors – A single instructor title with no track assignment will be created for entry-level faculty.
- Term Length-- Add flexibility in all tracks by allowing a broader range of terms lengths; Investigator Track faculty would be limited in the aggregate number of years at each rank, but within their time at rank there would be more flexibility of term lengths.

Restrictive Covenants -- In response to questions about restrictive covenants for clinicians, Dr. Charney explained that the covenants protect investments (compensation, equipment purchases, space) that Mount Sinai makes in our faculty. Covenants may vary slightly by situation, but the covenants have many common elements. To Dr. Charney's knowledge, restrictive covenants have not deterred any recruits from accepting our offers of employment.

Benefits -- In response to concerns about recent benefits changes, Dr. Charney acknowledged the importance of soliciting faculty feedback prior to implementation of changes. He remarked that Mount Sinai offers very competitive benefits to our 20,000 employees, and we want to maximize their ability to receive medical care at Mount Sinai. With the appointment of Dr. Haroutunian to the Medical Center Benefits Committee, the Council will now have a voice in benefits discussions.

Dr. Charney sees the Faculty Council as playing a complementary role to that of the Dean's Leadership Board as a resource that provides him with feedback and advice. He asks that representatives take information discussed at Council back to the faculty in their departments and institutes.

II. Faculty Council Committee Updates

Resources Committee – Dr. Haroutunian reiterated that he now represents the Council on the Mount Sinai Benefits Committee. He is also working with Dr. M. Shapiro on IT issues – one concern is that Mount Sinai firewalls prevent sharing of data with colleagues outside Mount Sinai; Drs. Haroutunian and Shapiro will address this issue, as well as limits on the size of email attachments, with IT.

Faculty Disciplinary Tribunal – Dr. Leibowitz announced that Dr. Kristjan Ragnarsson has accepted the role of Chair of the Tribunal.

Professionalism Committee – Dr. Hausman reported that the Committee has sent a recommendation on its first case to the relevant department Chairs; a second case involving authorship is just getting under way.

III. Other Issues

Expenses Related to Clinical Roles -- A question was posed about who decides whether certain expenses relating to practicing medicine – DEA membership, license renewals, NYS registration – will be reimbursed. Physicians, nurses and others have to pay in many departments, and there is some interest in discussing whether there should be a uniform policy across departments.

Patient Data in Research -- A final issue was raised about publications which rely on the use of clinical data from patients of other physicians. There is concern about access to care and what level of involvement/contribution entitles one to status as an author. It was noted that the IRB asks prospective investigators if they are using their own data, which raises question of whether PPHS is the gatekeeper for this issue.

IV. Approval of Minutes

Upon motion duly made and seconded, the minutes of the November 7, 2012 meeting of the Faculty Council were unanimously approved.