### Faculty Council Meeting
**Meeting Minutes**  
Monday, December 20, 2021  
4:00-5:30PM – ZOOM Meeting

<table>
<thead>
<tr>
<th>Timing</th>
<th>Agenda Item</th>
<th>Presenter</th>
<th>Summary of discussion</th>
<th>Action items/Motions/ Votes</th>
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<tbody>
<tr>
<td>4:01-4:06PM</td>
<td>Welcome and Chair Announcements</td>
<td>Nicole Ward</td>
<td>The VA Faculty Council representation amendment passed through Faculty Senate. Congratulations to Dr. Matthias Buck on being elected as the Chair-elect for Faculty Council. He will start this role January 15th, 2022 and will take over as the Chair in September, 2022. Dr. Darin Croft will assume the position of Chair January 15th.</td>
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<tr>
<td>4:06-4:09PM</td>
<td>Approve Minutes from the November 15 Meeting</td>
<td></td>
<td>Several edits were suggested to the minutes. The minutes were edited and a vote was taken.</td>
<td>A motion was proposed by a FC member and seconded by a FC member to accept the minutes with the edits as suggested. Vote: 38 for, 0 against, and 0 abstentions. The motion is approved.</td>
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<tr>
<td>4:09-4:10PM</td>
<td>Faculty Council Steering Committee Report of Activities</td>
<td>Darin Croft</td>
<td>Dr. Croft presented a summary of the Faculty Council Steering Committee Report of Activities for the December 6 meeting.</td>
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<tr>
<td>4:10-4:40PM</td>
<td>Report from the ad hoc Professionalism Committee</td>
<td>Todd Otteson</td>
<td>Dr. Todd Otteson presented the final report of the ad hoc Professionalism Committee. The committee is slated to sunset in December. He reinforced the need for the committee to be a resource/advisory board for faculty (not disciplinary) and that it is meant to complement the Professional Responsibilities outlined in the Faculty Handbook. He provided an overview of processes and challenges, committee responsibilities, membership, and structure. Discussion followed.</td>
<td>The ad hoc committee unanimously recommended that the Professionalism Committee be a Dean’s committee.</td>
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<tr>
<td>4:40-4:50PM</td>
<td>Cleveland Health Sciences Library Update</td>
<td>Jessica DeCaro</td>
<td>Jessica DeCaro, Director of the Health Sciences Library, provided an overview of faculty services (curriculum support services and instruction and research support).</td>
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<td>4:50-5:07PM</td>
<td>Updates on MetroHealth Research Initiatives</td>
<td>John Chae</td>
<td>Dr. John Chae provided an update on the research initiatives at Metro Health, their new vision statement, and the identification of three high-impact strategic alignment priority areas covering the full breadth of research activities performed by MetroHealth.</td>
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<tr>
<td>5:07-5:17PM</td>
<td>NEC Updates</td>
<td>Scott Howard</td>
<td>Dr. Scott Howard, Chair of the Nomination and Elections Committee, provided an update on the members, charge, goals and activities of the committee. They are in the process of creating a video guide for the election process and encouraged junior faculty (an important voice) to play a greater role in the nomination and election process.</td>
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<tr>
<td>5:17-5:33PM</td>
<td>Shared Core Facilities for all Faculty in the School of Medicine</td>
<td>Chris Flask</td>
<td>Dr. Chris Flask, Chair of the Core Facility Steering Committee, explained the committee’s role, history, and accomplishments.</td>
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<tr>
<td>5:33PM</td>
<td>Bylaws Recommendation on Proposed Amendments to the Bylaws (faculty Petition)</td>
<td>Darin Croft</td>
<td>(None; this agenda item was postponed to the January meeting due to time constraints.)</td>
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<td></td>
<td>Updates from the Faculty Senate Ex Com Representative</td>
<td>Robert Bonomo</td>
<td>(None; this agenda item was postponed to the January meeting due to time constraints.)</td>
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<td></td>
<td>New Business</td>
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<td>A member wanted to propose an item of New Business and was told that it could be sent to Nicole Ward and Nicole Deming for consideration by the FCSC as an separate topic for the January meeting agenda.</td>
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<tr>
<td>5:35PM</td>
<td>Adjourn</td>
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<td>A motion was made by a FC representative and seconded by a FC representative to adjourn the meeting. The vote was unanimously in favor. The Chair adjourned the meeting at 5:35PM.</td>
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<tr>
<td>Mark Aulisio</td>
<td>Chris Flask</td>
<td>Qingzhong Kong</td>
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<td>Todd Bafus</td>
<td>Matt Grabowski</td>
<td>Cynthia Kubu</td>
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<td>Others Present (cont)</td>
<td>Kishore Guda</td>
<td>Richard Martin</td>
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<td>John Chae</td>
<td>Jonathan Haines</td>
<td>Maureen McEnery</td>
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<td>Jessica DeCaro</td>
<td>Joyce Helton</td>
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<td>J. Alan Diehl</td>
<td>Scott Howard</td>
<td>Jo Ann Wise</td>
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<td>Nicole Deming</td>
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<td>4:01-4:06PM</td>
<td>Welcome and Chair Announcements</td>
<td>Nicole Ward</td>
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<td>4:06-4:08PM</td>
<td>Approve Minutes from the September 27 Meeting</td>
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<td>4:08-4:11PM</td>
<td>Faculty Council Steering Committee Report of Activities</td>
<td>Darin Croft</td>
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<td>4:11-4:26PM</td>
<td>Report from the ad hoc Professionalism Committee</td>
<td>Todd Otteson</td>
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<td>4:26-4:34PM</td>
<td>Faculty Committee on Community</td>
<td>Jonathan Haines</td>
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<td>4:34-4:40PM</td>
<td>New Proposal for a New MS in Translational Pharmaceutical Science</td>
<td>Tawna L. Mangosh</td>
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<td>4:40-4:52PM</td>
<td>VA Research Presentation</td>
<td>Robert Bonomo</td>
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<td>4:52-4:58PM</td>
<td>Update from the Faculty Senate Ex Com Representative</td>
<td>Robert Bonomo</td>
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<td>4:58-5:06PM</td>
<td>Updates on the Committee on Women and Minority Faculty</td>
<td>Amy Hise</td>
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<td>5:06-5:19PM</td>
<td>Updates on the Lecture Committee</td>
<td>Alan Tartakoff</td>
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| 5:19-5:43PM | New Business       | Corinne Bazella  | As a new business agenda item, Dr. Bazella elaborated on curricular changes currently being considered by the Committee on Medical Education. The changes would impact the transition between the 3rd and 4th years of medical school lengthening the time for students to complete an Acting Internship (AI) (where students act like interns with more authentic responsibility for patient care), to enhance their opportunities and competitiveness for matching in tough-to-match programs. Where this added time would come from is still being discussed.  
It was suggested that the CME provide Faculty Council members with information they can share with their faculty members. Any comments or questions should be directed to Dr. Bazella (presentation attached). FC members expressed concern about the process by which the changes were made, and a breakdown in communication with faculty that would be directly impacted by the changes. FC member suggested that the time could come from prep time for Step 1, since it is now pass/fail. FC member communicated that significant modifications in the curriculum should have sought out faculty input, including basic science faculty, earlier on and throughout the process. FC members learned a town hall with Clinic Program students was already held and student response was positive. | Dr. Bazella will send slides of her material to be circulated to FC members to share with their department faculty. Dr. Bazella will return to Faculty Council in December or January with an update on this topic. |
| 5:43PM  | Adjourn             |                  | When polled, Faculty Council had no additional items to be addressed.                                                                                                                                       | A motion was made and seconded by a FC representative to adjourn the meeting. The vote was unanimously in favor. The Chair adjourned the meeting at 5:43PM. |
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Ad Hoc Committee on Professionalism:
Recommendations on Formation of a
School of Medicine Professional Conduct Committee

Background: In February 2020, Faculty Council voted to create an ad hoc Committee on Professionalism tasked with identifying best practices with respect to professional codes of conduct for faculty, drafting a professional code of conduct for faculty in the School of Medicine (SOM), and providing recommendations on a Professional Conduct Committee if the ad hoc Committee thought that was necessary. **The ad hoc Committee unanimously agreed that a Professional Conduct Committee would benefit the SOM and our broader community.**

Guiding Principles for a Professional Conduct Committee: The role of the Professional Conduct Committee is to promote the highest ideals of professionalism in the SOM and serve as a peer advisory committee for faculty, chairs and administration when professionalism lapses occur. In principle, professionalism lapses are viewed similar to medical errors and not as personal or character flaws. They may occur as a result of individual, inter-individual, medical, psychological, situational, or system level factors. The Professional Conduct Committee is not a disciplinary committee; it serves as a resource for all members of the SOM to foster and support a culture based on the norms of integrity, respect, inclusive excellence and kindness articulated in the proposed SOM Professional Code of Conduct.

Process and Challenges: The members of the ad hoc Committee on Professionalism met two to four times monthly from December 2020 to the present. The members researched best practices at peer institutions, hosted listening sessions with multiple stakeholders including faculty, HR representatives, compliance officers, CWRU General Counsel, and leaders at the CWRU and four hospital campuses. Out of these discussions a number of challenges associated with the SOM’s multi-affiliate model were identified that helped clarify the appropriate scope of the proposed Professional Conduct Committee. These challenges include:

- **Institutional Processes:** Significant differences in HR processes, risk management, employee privacy rights, and employment processes among the five institutions that employ SOM faculty.
- **Impact of Faculty Appointment on Employment:** Differences in the requirement for an academic appointment as a condition of employment. Professional staff (i.e., physicians, psychologists, scientists) at the Cleveland Clinic and the VAMC are not required to have a faculty appointment as a condition of their employment. In contrast, a faculty appointment is required for professional staff employed at MetroHealth, University Hospital and CWRU.
- **Reporting Requirements:** State licensing boards, other professional organizations and regulatory boards mandate that if concerns arise regarding a healthcare provider that may negatively impact patient safety, an intervention is required. Such concerns may be directly related to professionalism lapses and include interactions with other colleagues. For these reasons, faculty who provide clinical services may be held to a higher level of peer and institutional scrutiny than faculty who are not directly involved in patient care. Similarly, there is
variability among the five institutions that employ SOM faculty and administration with respect to processes to address professionalism lapses (i.e., some of the hospitals have robust processes in place whereas CWRU SOM and others do not, specifically regarding inter-collegial conflict).

The above points are representative of some of the primary challenges the ad hoc committee identified in informing how the proposed committee will operate across institutions and its scope of authority. Recognition of these challenges reinforced the ad hoc Committee’s decision to recommend that the Professional Conduct Committee’s primary goals are to serve as a resource and advisory board for faculty rather than a disciplinary board. Each institution associated with the SOM has their own disciplinary process and those existing processes are independent of the Professional Conduct Committee’s charge. This is also consistent with best practices identified in the literature and the ad hoc Committee’s research on peer-institution’s practices.

These recommendations are meant to complement the Professional Responsibilities detailed in the CWRU Faculty Handbook which speak to excellence in scholarship and teaching, responsibilities to the University, and respect for academic freedom. There are limited options in the Faculty Handbook to address faculty-on-faculty professionalism concerns. The existing options include the Integrity Hotline and referral to the CWRU Conciliation Officer. Neither of these options is effective unless both faculty members want to engage in mediation to resolve a conflict. Further, the Faculty Handbook provides limited options to address professionalism lapses that fall below the intervention thresholds established using other processes (e.g., research misconduct).

**Professional Conduct Committee Responsibilities:** The members of the Professional Conduct Committee will serve as peer advisors and resources to faculty, Chairs, institutional leadership and all other members of the SOM to model and encourage the highest levels of professionalism. In this role, they may: present seminars; advise faculty, Chairs, leadership and Faculty Committees on best practices; and serve as a resource for the CWRU Offices of Compliance, Research Misconduct, Equity, the SOM Office for Diversity, Equity and Inclusive Excellence and similar offices whose missions intersect with professionalism.

As part of their peer advisory responsibilities, the members of the Professional Conduct Committee may be asked to weigh in on concerns regarding professionalism lapses that fall outside the responsibilities of existing offices and/or do not meet the threshold for existing processes. Professionalism questions can come to the attention of the Professional Conduct Committee from Department Chairs, institutional leadership or directly from the faculty, staff and broader CWRU SOM community including other Offices such as Compliance, Research Misconduct and so on. If a professionalism concern arises from someone other than the Chair, the Professional Conduct Committee will inform the relevant faculty leadership (e.g., Chair, institutional leadership) in a timely manner. Members of the Professional Conduct Committee will have the requisite training to ascertain if any professionalism concern that is forwarded to them is best addressed by another office (see above) and will forward those concerns to the
appropriate office promptly. The ad hoc Committee recommends that there is close and
timely communication on a need to know basis between the Professional Conduct Committee
and other CWRU and SOM offices whose missions intersect with professionalism. Importantly,
the ad hoc committee thought it was important that the Professional Conduct Committee
members approach any professionalism complaint without any predetermined conclusion or
bias and with the underlying assumption that most faculty actions are based on positive
intentions.

When a professionalism lapse falls outside of any existing Offices or process for faculty or does
not meet the threshold for existing processes, the Professional Conduct Committee may assist
Chairs or institutional leadership, if requested, to provide advice regarding the impact or
severity of the alleged professional lapse and related levels of potential resources to minimize
future lapses (e.g., a conversation with a member of the Professional Conduct Committee for
an initial complaint, 360 evaluation or coaching for more serious concerns or a pattern of
repeated lapses). If advice is provided to Chairs or leadership, the Professional Conduct
Committee will establish a process to monitor and evaluate the effectiveness of the advice as
part of a continuous improvement process.

The Professional Conduct Committee will provide an annual report to the SOM Faculty Council.

*Rationale: A prominent theme that emerged from the faculty feedback was the need to have a
structure to help faculty adhere to the highest levels of professionalism. The proposed
Professional Conduct Committee provides the resources to support faculty and leadership when
professionalism questions arise, particularly related to how faculty treat others.

One of the responsibilities of Department Chairs is to facilitate the professional development of
their faculty. Department Chairs have in depth knowledge of their faculty, including potential
mitigating circumstances that can contribute to professionalism lapses as well as other
examples of unprofessional behavior to which the Professional Conduct Committee is not privy.
Thus, it is appropriate that the Department Chair should be informed of any concerns regarding
professionalism lapses. If professionalism concerns regarding a Chair arise, appropriate
institutional leadership will be informed.

The Professional Conduct Committee’s role is to promote and model the highest levels of
professionalism. It may also serve as a support to faculty and department chairs by providing a
confidential* peer-review process to assess professionalism lapses (independent of clinical peer-
review processes in the hospital settings) and provide resources to minimize future
professionalism lapses. The review process will also include a careful assessment of system wide
factors that hinder faculty’s ability to demonstrate consistently professional behavior. Similar to
the SOM Student Mistreatment Committee, the ad hoc Committee recommends that the
Professional Conduct Committee monitor compliance with its’ recommendations and associated
outcomes.
An annual report to the Faculty Council promotes transparency with respect to the number of and general nature of concerns raised to the Professional Conduct Committee as well as other services the Committee may provide. This is analogous to the Conciliation Officer’s annual report to the CWRU Faculty Senate.

* The ad hoc Committee recognizes that there are legal limits to confidentiality, including mandatory reporting requirements associated with Title IX or other mandatory reporting requirements for healthcare providers (e.g., imminent risk of suicide/homicide, child or elder abuse).

Committee Membership:

- The Professional Conduct Committee will include 10 members with two members representing each of the five institutions employing faculty in the SOM (i.e., CWRU, Cleveland Clinic, MetroHealth, University Hospital, VAMC).
- At least one member of the Professional Conduct Committee will be a mental health expert, i.e., psychiatrist or psychologist.
- The ad hoc Committee recommends that at least one institutional representative be appointed by the individual institution’s leadership. All members of the Professional Conduct Committee should have demonstrated expertise and experience in issues related to professionalism, evidence of training necessary to fulfil their roles on the committee (e.g., implicit bias, etc.), and a track record of excellent communication skills and experience on committees entrusted with highly confidential information.
- Representatives from the SOM Office for Diversity, Equity and Inclusive Excellence (i.e., Tina Lining) and the CWRU HR (e.g., Danielle Haslett) and General Counsel (e.g., Michelle Arendt) will serve as advisory, non-voting members of the Professional Conduct Committee to provide essential advice.
- If the professionalism concern involves faculty employed by the hospital partners, HR and legal representatives from those institutions will be invited to attend during committee deliberations to advise on relevant institutional policies.
- Other non-voting, advisory leaders (e.g., Lisa Palazzo from the Compliance Office, Tracy Wilson-Holden from Research Misconduct) may be invited to assist the Professional Conduct Committee’s work on an ad hoc basis.
- The Professional Conduct Committee will be led by a Chair appointed by the Dean. In addition, the Dean will appoint a Co-Chair to serve if the Chair is not available.
- All members of the Professional Conduct Committee will be required to adhere to the highest levels of professionalism and maintain confidentiality, unless otherwise legally required, given the sensitive nature of the work of the committee.

Rationale: Given the SOM’s multi-affiliate model and institutional differences, it is important that all of the institutions who employ SOM faculty have equal representation. The Professional Conduct Committee will be tasked with reviewing highly sensitive and confidential materials. In order for the Professional Conduct Committee to be effective, institutional leaderships’ support
and trust in the committee members is essential. Members of the Professional Conduct Committee should represent the highest ideals of professionalism with a demonstrated track record of integrity, keen emotional intelligence, and the ability to adhere to strict confidentiality requirements. Per peer institutions’ recommendations and experiences, professionalism lapses may be related to mental health factors; thus, it is important that the committee membership include at least one member with expertise in mental health. Expertise in DEI, HR and law will inform the Professional Conduct Committee’s work to ensure compliance with institutional policies and procedures.

Committee Structure: The ad hoc Committee on Professionalism unanimously recommends that the Professional Conduct Committee be established as a Dean’s committee.

Rationale: The ad hoc Committee on Professionalism unanimously recommends that the Professional Conduct Committee be established as a Dean’s committee due to the needs for high levels of confidentiality and the private nature of information that may be collected and shared (including implications for protected information), and need to liaise with hospital partners. For these reasons, it is strongly advised that at least 50% of the Professional Conduct Committee’s members be appointed by leadership. This is analogous to the SOM Committee on Student Mistreatment (in which all members are appointed) and possible, per the SOM by Laws, if the committee is established as a Dean’s committee. The proposed Professional Conduct Committee’s mandate does not overlap with any existing SOM faculty committee; thus, per the SOM by laws, it is under the Dean’s purview to establish such a committee.

Resources: The SOM will expand on existing and develop new resources (i.e., coaching, 360 evaluations, communication skills training, implicit bias training, mentoring, wellness programs, stress reduction strategies) to assist faculty in modeling the utmost professional behavior on a consistent basis. In addition, a careful review of system level factors that influence faculty members’ professional behavior will be completed under the recommendation of the Professional Conduct Committee. The impact of professionalism resources and any recommended system level changes will be assessed as part of continuous improvement processes to enhance professionalism on an ongoing basis.

Rationale: Maintaining consistent professional behavior requires ongoing skills development and learning as well as consideration of system/environmental factors.

SUMMARY: The ad hoc Committee on Professionalism unanimously endorsed the formation of a Dean’s Professional Conduct Committee whose members include faculty who have demonstrated a high level of integrity and professionalism. All of the institutions associated with the CWRU SOM will be represented equally and committee members will have completed specific training so they can fulfill their obligations as members of the committee. The ultimate goal of the Professional Conduct committee is to promote professional behavior that aligns with the core norms articulated in the proposed SOM Professional Code of Conduct. The ad hoc Committee recommends formation of a Professional Conduct Committee to provide resources.
to faculty and department chairs, including a peer-review process to advise on professionalism concerns and assist faculty, department chairs and others throughout the SOM. The ad hoc Committee anticipates that further refinement of these recommendations will occur as the Professional Conduct Committee begins to implement its work. Thus, the above recommendations are intentionally broad in order to avoid being narrowly prescriptive and potentially limit the Professional Conduct Committee’s ability to exercise reasonable judgement based on group consensus.

Sincerely,

Sarah Augustine, MD, VAMC
Moises Auron, MD, Cleveland Clinic
Todd Bafus, MD, MetroHealth
Thomas Collins, MD, MetroHealth
Kishore Guda, PhD, CWRU
Jessie Jean-Claude, MD, VAMC
Qingzhong Kong, PhD, CWRU
Cynthia Kubu, PhD, Cleveland Clinic
Richard Martin, MD, University Hospitals
Todd Otteson, MD, University Hospitals
Susan Freimark, MA (CWRU, Administrative Support)
**Professional Code of Conduct:** The Case Western Reserve University (CWRU) School of Medicine (SOM) is committed to the highest standards of professionalism and it is the explicit expectation that all SOM members will consistently promote a physically and psychologically safe, inclusive culture that fosters the flourishing of all faculty, staff, and trainees to the benefit of our broader community while fulfilling our core missions of excellence in education, research, and enhancing the health of our communities.

**Norms**

Our Faculty Professional Code of Conduct relies on the following norms:

- **Integrity** demonstrated by consistently behaving in an honest and trustworthy manner. This includes ensuring that appropriate credit is given for individual contributions.
- **Respect** for individual differences and opinions manifest by an openness to hear others’ perspectives and engage in civil dialogue and communications.
- **Inclusive Excellence** illustrated by engaging in practices to promote all faculty’s personal and professional fulfillment in light of historic gender, religious, racial and ethnic inequities and cultural differences.
- **Kindness** modeled by cooperative and collaborative behaviors, including collegiality and appropriate professional service.

The above norms and examples are not exhaustive but provide guidance on the professionalism expectations that apply to all SOM faculty.

**Rationale:** These norms are consistent with the standards and expectations set forth for all faculty in the CWRU Faculty Handbook, CWRU Policies and the professional codes of conduct adopted by the SOM’s hospital partners, (Code of Conduct CCF; Code of Conduct MH; Code of Conduct UH; Code of Conduct VA).

The norms and expectations articulated above may overlap with other existing CWRU and CWRU SOM resources and are meant to complement these standards and requirements (e.g., Title IX, Research Misconduct, Student Mistreatment) and those put forth by national professional organizations (e.g., American Medical Association). Despite these existing expectations, standards and resources, there is no overarching Professional Code of Conduct that applies to all faculty in the SOM that specifically addresses how faculty are expected to treat others. A culture based on the norms articulated above is essential in light of faculty members’ responsibilities to CWRU, the SOM, colleagues, trainees, the broader medical scientific community, and the public. Faculty in the SOM serve as role models for our trainees and leaders in our communities; thus, maintenance of these standards is essential. The SOM is committed to provide the resources to help all faculty model the highest level of professionalism.
Research Strategic Plan
The MetroHealth System

John Chae, MD
VP, Research and Sponsored Programs
The MetroHealth System
Professor and Chair, PM&R; Professor, BME
Case Western Reserve University
Project Objective

Improve the alignment of the Research Institute with MetroHealth System’s mission & strategy

May, 2017: New Leadership
Jan, 2018: Strategic Plan Kick-off
June, 2018: Plan Completed
August, 2018: Presented to Dr. Boulanger & Michael Stern
October, 2018: Present to Dr. Boutros
Pre-2018

Senior Leadership

Service Line Leadership

CWRU

Department Chairs
Future Vision
The Result Was a New Vision Statement and the Identification of Three High-Impact Strategic Alignment Priority Areas

New Vision Statement
To be the national leader in translating innovations and discovery to improve the health and quality of life of the community, especially for vulnerable populations

Three Strategic Alignment Priorities
- Migrate to a focused & integrated basic and clinical research portfolio
  - Neuromusculoskeletal Conditions
  - Cancer
  - Cardiovascular Diseases
  - Women and Children’s Disease
- Advance MetroHealth’s population health strategy
- Exploit & explore MetroHealth’s data science & informatics research capabilities
These Three Strategic Alignment Opportunities Cover The Full Breadth Of Research Activities Performed By MetroHealth

1. Focused & Integrated Basic and Clinical Research

Initial Foci:
- Center for Rehabilitation Research
- Center for Cancer Research

2. Advance Population Health Strategy

3. Exploit & Explore Informatics & Data Sciences Research Capabilities

Basic Research → Clinical Research → Implementation Science → Clinical Practice → Standard Of Care

Population Health Research Institute

Service Lines

Community

MetroHealth

Devoted to Hope, Health, and Humanity

School of Medicine
Investigational Operational Principles

- **Translational:** We will engage the translational continuum from basic discovery to implementation science. The MetroHealth System is about clinical and community impact.

- **Transdisciplinary:** None of us is that smart! We will cross disciplinary and departmental boundaries and facilitate cross-pollination. We need each other, especially those who are different from us.

- **Transformational:** We will engage the transformational pipe-line by developing the next generation of scientists. Our future depends on it!

- **Transinstitutional:** Finally, as an institution, we do not exist in isolation. We are an integral part of Cleveland’s rich academic community. We will work with our partner institutions, especially Case Western Reserve University, and leverage this richness to best serve our patients and our community.
Biomedical engineers
Electrical engineers
Mechanical engineers
Neurologists
Neurosurgeons
Neuroscientists
Orthopedic surgeons
Physiatrists
Sociologists
Therapists
Mission

MetroHealth Center for Translational Rehabilitation Research

To discover, create, test, and translate to standard of care innovative rehabilitation technology and treatments that reduce disability and improve health and quality of life
Translating Discovery into Clinical Practice

- Translational Basic Sciences
- First-in-man, Phase I & II Clinical Trials
- Phase III Pivotal Trials
- Implementation Science
Publications and Grants

Peer-reviewed Publications

Year

13 14 15 16 17 18 19 20

17 20 21 23 35 36 40 44

Grants

Year

13 14 15 16 17 18 19 20

18 24 26 32 40 53 51 51

PM&R

US: #3
OH: #1
Blue Ridge Institute
(Feb, 2021)
## Research Faculty Recruitment

<table>
<thead>
<tr>
<th>Faculty</th>
<th>Hire Date</th>
<th>Present Rank</th>
<th>Effort Funded ≥ 0.70 FTE</th>
<th>R01 or equivalent Funding</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dennis Bourbeau, PhD</td>
<td>2016-4-15</td>
<td>Assistant</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Nathan Makowski, PhD</td>
<td>2016-7-1</td>
<td>Assistant</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Michael Fu, PhD</td>
<td>2017-3-21</td>
<td>Assistant</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Niloy Bhadra, MD, PhD</td>
<td>2017-9-1</td>
<td>Associate</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Kim Anderson, PhD</td>
<td>2018-3-12</td>
<td>Professor</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Tina Vrabec, PhD</td>
<td>2019-1-7</td>
<td>Assistant</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>David Cunningham, PhD</td>
<td>2020-7-1</td>
<td>Assistant</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Gustaf Van Acker, MD, PhD</td>
<td>2021-7-1</td>
<td>Assistant</td>
<td>No</td>
<td>Yes</td>
</tr>
<tr>
<td>James Sulzer, PhD</td>
<td>2022-6-1</td>
<td>Associate*</td>
<td>No</td>
<td>Yes</td>
</tr>
</tbody>
</table>

**Since 2016:**
- 9 faculty signed; one to start 6/22
- 7 of 9 have achieved independent investigator status
- 7 of 9 are 70%+ funded
MetroHealth Invests $9 million in its Old Brooklyn Campus for Rehabilitation

September 30, 2020

May, 2021

25,000 square feet of Research and GME space
20,000 square feet of new clinical space
Center for Cancer Research
Cancer Research: 2017

Bingcheng Wang, PhD

- Director, Division of Cancer Biology, Department of Medicine, MHS
- Professor of Medicine, Pharmacology, and Physiology and Biophysics, CWRU
- World renowned cancer biologist
  - Cell signaling mechanisms regulating malignant progression of cancer cells
  - Continuously funded by NIH, DoD and various Foundations since his arrival at MHS in 1997
- 2017: Only cancer biology investigator at MHS!
Cancer Research: 2018 & 2019

- **2018**: Khalid Sossey-Alaoui, PhD
  - Cleveland Clinic
  - Associate Professor of Medicine (Cancer Biology)
  - Triple negative breast cancer, tumor metastasis
    - Brought a newly awarded R01
    - Supplement: Racial disparity of triple negative breast cancer

- **2019**:
  - Donald Anthony, MD, PhD
    - University Hospitals
    - Professor of Medicine (Rheumatology)
    - Natural killer cell therapy for cancer
    - Brought a newly awarded DoD grant
  - Ashwini Sehgal, MD
    - Professor of Medicine (Renal), Director of Center for Reducing Health Disparities
    - Awarded a cancer therapeutic clinical trial R01: “Pain and immobility after breast cancer surgery: A community-based RCT of myofascial massage Tx”

MetroHealth
Devoted to Hope, Health, and Humanity
Cancer Research: 2020

- New Director of Division of Hematology/Oncology
- University of Louisville
  - World renowned physician investigator with expertise in cellular therapy (CAR T-cell therapy)
  - Chief, Division of Blood and Marrow Transplantation
  - Medical Director, Cellular GMP Facility
- Charge:
  - Revive and grow hematology/oncology clinical and teaching services
  - Full membership in the Comprehensive Cancer Center
    - Grant criterion
    - Therapeutic cancer trial enrollment criterion

William Tse, MD, FACP, MBA
Professor of Medicine*
Hematology & Oncology
*Pending CAPT
Cancer Research: 2021

- **Chengfeng Yang, PhD**
  - University of Kentucky, Professor of Medicine (Cancer Biology)
  - Two R01s: Chemical carcinogenesis, triple negative breast CA, anti-cancer drug discovery

- **Zhishan Wang, MD, PhD**
  - University of Kentucky, Associate Professor of Medicine (Cancer Biology)
  - Two R01s: Environmental mixture exposure carcinogenesis, pathophysiology of lung CA

- **Xiaonan Han, PhD**
  - University of Cincinnati, Cincinnati Children’s, Assistant Professor of Medicine (GI)
  - R01: Role of intestinal stem cells during IBD, infectious GI diseases and Colon CA
Cancer Research: 2021

- Additional System Investment:
  - April, 2021
  - Board approval of GMP facilities in Rammelkamp

- Basic sciences:
  - 2017: Many wet lab vacancies
  - 2021:
    - No more room at the inn!
    - May, 2021: membership in Case NCRM
    - Bingcheng Wang, PhD: Director of Basic Sciences, MetroHealth Research Institute
2020: Population Health Research Institute (PHRI)

PHRI Advisory Council
(CWRU, VA, UH, CCF, BHP, Community Partner, MHS)

Collaborating Faculty

Center for Clinical Informatics, Research and Education (CCIRE) - 2011
Director: Dr. Kaelber

PHRI - 2020
Director: Dr. Bolen
Admin: Ms. Zebrowski

MHS Operations (PHII/I4Hope; Service Lines, Academic Departments)

Co-Directors of Education:
Drs. Thornton and Caron

Division of Biostatistics and Data Sciences
Director: Dr. Love

Center for Health Care Research and Policy (CHRP) - 1994
Director: Dr. Bolen

Center for Reducing Health Disparities (CRHD) - 2004
Directors: Drs. Sehgal and Thornton

Division of Biostatistics and Data Sciences
Director: Dr. Love

Co-Directors of Education:
Drs. Thornton and Caron

I4HOPE Director of Research and Evaluation (50%)
PHRI Mission and Vision

• **Vision:** The MetroHealth PHRI will be trusted and renowned for innovation and discovery that foster thriving, healthy equitable communities.

• **Mission:** Leading the way to a healthy, thriving, equitable community and nation through actionable research, education and collaboration.
National Leaders in Population Health

- Produce actionable knowledge to understand complex clinical, environmental, social, behavioral, and genetic factors that drive population health
- Address the leading causes of death and disability in diverse subgroups
- Address disparities in care and outcomes
- Collaboration with others in the region, state and nationally
- Develop a new generation of population health researchers
- Disseminate our work broadly
PHRI Strategic Plan

- **Core Strategy #1**: Develop and foster trusted interdisciplinary population health researchers committed to health equity, community partnership, and advancing learning health systems
- **Core Strategy #2**: Build and nurture a coalition of internal and external stakeholders who collaborate to inform, influence and advance the PHRI mission
- **Core Strategy #3**: Disseminate and implement research findings into practice and policy
- **Core Strategy #4**: Secure a diverse portfolio of funding which aligns with the PHRI mission
<table>
<thead>
<tr>
<th>Collaborating Faculty (42)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Don Allensworth-Davies</td>
</tr>
<tr>
<td>• Agnieszka Ardelt</td>
</tr>
<tr>
<td>• Dave Aron</td>
</tr>
<tr>
<td>• Ann Avery</td>
</tr>
<tr>
<td>• Jennifer Bailit</td>
</tr>
<tr>
<td>• Nazleen Bharmal</td>
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<tr>
<td>• Alfred Connors</td>
</tr>
<tr>
<td>• Randall Cebul</td>
</tr>
<tr>
<td>• Johnbuck Creamer</td>
</tr>
<tr>
<td>• Jennifer Cullen</td>
</tr>
<tr>
<td>• Jarrod Dalton</td>
</tr>
<tr>
<td>• Neal Dawson</td>
</tr>
<tr>
<td>• Mary Dolansky</td>
</tr>
<tr>
<td>• Mark Dunlap</td>
</tr>
<tr>
<td>• Darcy Freedman</td>
</tr>
<tr>
<td>• Sarah Hendrickson</td>
</tr>
<tr>
<td>• Ronald Hickman</td>
</tr>
<tr>
<td>• Vanessa Ho</td>
</tr>
<tr>
<td>• Ewald Horwath</td>
</tr>
<tr>
<td>• Rita Horwitz</td>
</tr>
<tr>
<td>• Sumita Khatri</td>
</tr>
<tr>
<td>• Yael Klionsky</td>
</tr>
<tr>
<td>• Siran Koroukian</td>
</tr>
<tr>
<td>• Gabriel Labbad</td>
</tr>
<tr>
<td>• Vanessa Maier</td>
</tr>
<tr>
<td>• Dave Margolius</td>
</tr>
<tr>
<td>• Dick McCormick</td>
</tr>
<tr>
<td>• Laura Mintz</td>
</tr>
<tr>
<td>• Jim Misak</td>
</tr>
<tr>
<td>• Anita Misra-Hebert</td>
</tr>
<tr>
<td>• Suchitra Nelson</td>
</tr>
<tr>
<td>• Joan Papp</td>
</tr>
<tr>
<td>• Mahboob Rahman</td>
</tr>
<tr>
<td>• Sarah Ronis</td>
</tr>
<tr>
<td>• Anup Salgia</td>
</tr>
<tr>
<td>• Martha Sajatovic</td>
</tr>
<tr>
<td>• Mimi Singh</td>
</tr>
<tr>
<td>• Kurt Stange</td>
</tr>
<tr>
<td>• Joseph Sudano</td>
</tr>
<tr>
<td>• Glen Taksler</td>
</tr>
<tr>
<td>• Erika Trapl</td>
</tr>
<tr>
<td>• Laura Voith</td>
</tr>
<tr>
<td>• Brook Watts</td>
</tr>
</tbody>
</table>
PHRI Status

- Established the Population Health Research Advisory Council

- Recruitment:
  - Completed joint recruitment with Center for Community Health Integration (Kurt Stange, MD): Ann Gaglioti, MD
  - Completed recruitment of a second faculty member: Susan DeLuca, PhD
  - Completed joint hire with the MetroHealth Population Health Innovations Institute
  - Recruited one post-doctoral fellow; second posted

- Pilot Grant Projects: Launch Jan, 2021, $75,000/year

- Fellowship: July, 2021
  - Education Co-Directors: Daryl Thornton, MD and Aleece Caron, PhD
  - 2 Fellows per year (2 year fellowship)

- Major engagement with Case CTSC for next cycle
  - Community and stake holder engagement
  - Health informatics
  - Diverse work force development
These Three Strategic Alignment Opportunities Cover The Full Breadth Of Research Activities Performed By MetroHealth

1. Focused & Integrated Basic and Clinical Research
   - Initial Foci:
     - Center for Rehabilitation Research
     - Center for Cancer Research

2. Advance Population Health Strategy

3. Exploit & Explore Informatics & Data Sciences Research Capabilities

Population Health Research Institute
Nominations and Elections Committee

N. Scott Howard MD MBA FACS
Chair, NEC
New Business

• Monthly Meetings Scheduled
  – First 3 months directed to understanding our committees.

• Tina Lining : Director of DEI
  – Workshop: “Strategies for addressing diversity and inclusion within our standing committees”

• Planned discussions on our process
  – Discuss recent Bylaws Committee recommendations

Oct 26: 2-3 (Tuesday) *
Nov 15: 1-2 (Monday) *
Dec 9: 3-4 (Thursday) *
Jan 13: 3-4 pm (Thursday)
Jan 20: 3-4pm (Thursday)
Feb 7: 1-2 (Monday)
Mar 7: 1-2 (Monday)
Mar 21: 12-1 (Monday)
April 8: 3-4 (Friday)
End of season report out:
May 2: 1-2 (Monday) *

If needed:
May 10 12-1 (Tuesday)
Jun 13 - 1-2 (Monday)
Committee Introductions

• Introduce the committee and the work you do
• Current composition: Copy of membership list with years of service on committee/when member will rotate off service
• Anticipated vacancies
• Copy of charge
• Pertinent bylaws as they pertain to nominations or elections
• Eligibility requirements/Ideal Candidates

• Note: expect this should take about 5-10 minutes of your time to present and answer questions. Thanks in advance for your participation.
Committee Name

- brief introduction of the committee/work that you do
- how often do you meet?
Members of Committee

• 11 members
  – 3: Dean, Chair of Faculty Council, Vice-Chair of Faculty Council
  – 5 Faculty: CWRU Basic Science, CCLCM, MHMC, UHCMC, VAMC – serve for a 3 year term
  – 3 Faculty Council Members (at large): serve for duration of time on FC

• A Chair (elected annually by the NEC Committee) serves 1 year.
Anticipated Vacancies

• number of vacancies expected next year
Committee Charge

• go over the charge – identify specific areas that are critical to success or to the nominations and election process
Bylaws

• Pertinent bylaws as they pertain to your primary role
• Pertinent bylaws as they pertain to nominations or elections to your committee
Ideal Nominees

- Eligibility requirements
- key features/requirements for the nomination/election of individuals to your committee
My Goals

• Ensure a stable/reproducible process
  – Includes identification of candidates and voting
  – Mindful of bias and considerate of privacy
  – Video guide to the SOM Elections-ranked choice voting

• Ask all candidates to address diversity in their statement of interest
Core Facility Steering Committee

December 6, 2020
Core Facility Steering Committee

- Chris Flask - Chair
- Matt DeVries
- Mark Cameron
- Craig Hodges
- Zhenghong Lee
- Alan Levine
- Alexander Miron
- John Pounardjian
- Arne Rietsch
- Danie Schlatzer
- Martina Veigl
CFSC Roles / History

- Started in 2013
- Core Organization (~30 in SOM) and Strategy
- Implemented iLab (2017)
- Fast-track Service Contract
  - Revised in 2020
- Annual Cores Retreat
- Cores Investment
  - 4 x RFI’s completed (2016, 2018, 2019, 2021)
Additional CFSC Roles for 2019-2021

• Ad Hoc Core Support
  – Microscopy: New Core Director - Mike Jenkins
  – CryoEM: Additional Oversight
  – NMR: Revised Operational / Business Plans

• Scientific Strategy Papers
  – NextGen Sequencing: Soliciting White Paper
  – If/When/How to Invest in Genomics

• NIH S10 Support
Cores RFI Summary

• RFI Process
  – 2016: 27 total proposals
  – 2018: 11 proposals
  – 2019: 17 total proposals
  – 2021: 12 proposal, $4.8M

• Institutional Support
  – NIH S10 matching funds
  – Direct support for purchases
NIH S10 Success

2 more in review with favorable scores
## iLab Performance

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>#Faculty/Customer Labs</th>
<th>#Grants</th>
<th>#Depts</th>
<th>#Sponsors</th>
<th>#Institutions</th>
<th>#Cores Operating</th>
<th>Sum of Total Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>2018</td>
<td>303</td>
<td>403</td>
<td>53</td>
<td>136</td>
<td>17</td>
<td>16</td>
<td>$2,909,667</td>
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<tr>
<td>2019</td>
<td>394</td>
<td>463</td>
<td>61</td>
<td>151</td>
<td>33</td>
<td>22</td>
<td>$3,925,760</td>
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<tr>
<td>2020</td>
<td>389</td>
<td>454</td>
<td>54</td>
<td>152</td>
<td>43</td>
<td>26</td>
<td>$3,958,226</td>
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<tr>
<td>2021</td>
<td>388</td>
<td>396</td>
<td>52</td>
<td>130</td>
<td>50</td>
<td>26</td>
<td>$4,213,574</td>
</tr>
</tbody>
</table>
Recommendations of the Bylaws Committee

Petition submitted by faculty on June 17, 2021, regarding modifications to Article 3.6b (Nomination and Elections Committee)

Elected members
Darin Croft, Ph.D. (Anatomy), Chair
Piet de Boer, Ph.D. (Molecular Biology & Microbiology)
George Dubyak, Ph.D. (Physiology & Biophysics)
Stephen Fink, Ph.D. (Case Comprehensive Cancer Center)
Peter Harte, Ph.D. (Genetics & Genome Sciences)
Mamta Singh, M.D. (Medicine, Louis Stokes Cleveland VA Med. Center)

Ex officio member
Nicole Deming, J.D. (Assistant Dean, Faculty Affairs & Human Resources)
Faculty-sponsored petition

Rationale:

“The proposed amendments clarify the complementary roles of the Nomination and Elections Committee to:

i) adhere to specific eligibility requirements stated in the School of Medicine Bylaws and committee charges

ii) promote diversity, equity, and inclusion by producing a diverse slate of nominees by seeking to find additional candidates, as is necessary.”

Proposal:

Article 3.6 Committees of the Faculty Council

b. Nomination and Elections Committee.

"In addition, the Nomination and Elections Committee shall adhere to the eligibility requirements for service on specific committees as stated elsewhere in these Bylaws and committee charges and nominate (1) candidates for the at-large representatives to the Faculty Council, (2) candidates for the representatives of the special faculty whose titles are modified by the adjective adjunct or clinical to the Faculty Council, (3) candidates for standing committees of the Faculty of Medicine, and (4) candidates for the University Faculty Senate. In the case of at-large representatives, senators, or members of the Committee on Appointments, Promotions, and Tenure, the number of candidates shall be at least twice the number of positions to be filled."
Faculty-sponsored petition

Proposal:

Article 3.6 Committees of the Faculty Council
   b. Nomination and Elections Committee.

In recruiting faculty for these aforementioned ballots, the Nomination and Elections Committee shall adhere to the specific eligibility requirements stated elsewhere in these Bylaws and committee charges and strive to produce a diverse slate of nominees, considering gender, race, institutional affiliation and representation of basic and clinical departments by finding additional candidates, as is necessary. A nominee may not be put on the ballot if in winning the election they would serve on more than two standing committees of the Faculty of Medicine or Faculty Council (ad hoc committees are not included in this count).

Furthermore, a nominee may not be put on the ballot for the election of Senators if in winning the election they would serve on more than two standing committees of the Faculty Senate (ad hoc committees are not included in this count). Exceptions will be made only if no other candidates come forward to fill a committee vacancy. Elections shall be conducted by email or other electronic means, using a preferential voting system.”
Faculty-sponsored petition

Bylaws Committee assessment:

• Ambiguous phrasing
  > NEC already adheres to criteria when nominating candidates
• Redundant
  > inserts text including “adhere to eligibility requirements…” twice
• Oversteps in one regard
  > SOM does not have the authority to limit faculty service on university (i.e., Faculty Senate) committees
Bylaws Committee Proposal:

Article 3.6 Committees of the Faculty Council
   b. Nomination and Elections Committee.

"In addition, the Nomination and Elections Committee nominate (1) candidates for the at-large representatives to the Faculty Council, (2) candidates for the representatives of the special faculty whose titles are modified by the adjective adjunct or clinical to the Faculty Council, (3) candidates for standing committees of the Faculty of Medicine, and (4) candidates for the University Faculty Senate. In the case of at-large representatives, senators, or members of the Committee on Appointments, Promotions, and Tenure, the number of candidates shall be at least twice the number of positions to be filled."
Faculty-sponsored petition

Bylaws Committee Proposal:

• Clearly states that any candidate who meets the eligibility requirements will be placed on the ballot

The Nomination and Elections Committee shall place on the ballot any self- or peer-nominated candidate who consents to run and meets the eligibility requirements for service, as specified in these Bylaws or in the charge of the corresponding committee. The Nomination and Elections Committee shall also actively recruit candidates and strive to produce a diverse slate of nominees, considering gender, race, institutional affiliation and representation of basic science and clinical departments. However, a nominee may not be put on the ballot if in winning the election they would serve on more than two standing committees of the Faculty of Medicine or Faculty Council. Service as a Faculty Council representative or on an ad hoc committee of the Faculty Council or of the dean is not included in this count. Furthermore, a candidate may not be put on the ballot for the election of Senators if they already serve on two standing committees of the Faculty of Medicine or of Faculty Council. Exceptions may be made only if the Nominations and Elections Committee is unable to recruit a sufficient number of no other candidates come forward to fill a committee vacancy. Elections shall be conducted by email or other electronic means, using a preferential ranked choice voting system.”
Faculty-sponsored petition

Bylaws Committee Proposal:

- Emphasizes role of NEC recruitment in creating diverse ballot

The Nomination and Elections Committee shall place on the ballot any self- or peer-nominated candidate who consents to run and meets the eligibility requirements for service, as specified in these Bylaws or in the charge of the corresponding committee. The Nomination and Elections Committee shall also actively recruit candidates and strive to produce a diverse slate of nominees, considering gender, race, institutional affiliation and representation of basic science and clinical departments. However, a nominee may not be put on the ballot if in winning the election they would serve on more than two standing committees of the Faculty of Medicine or Faculty Council. Service as a Faculty Council representative or on an ad hoc committee of the Faculty Council or of the dean is not included in this count. Furthermore, a candidate may not be put on the ballot for the election of Senators if they already serve on two standing committees of the Faculty of Medicine or of Faculty Council. Exceptions may be made only if the Nominations and Elections Committee is unable to recruit a sufficient number of no other candidates come forward to fill a committee vacancy. Elections shall be conducted by email or other electronic means, using a preferential ranked choice voting system.
Bylaws Committee Proposal:

- Clarifies what types of service “count” toward two-committee rule

The Nomination and Elections Committee shall place on the ballot any self- or peer-nominated candidate who consents to run and meets the eligibility requirements for service, as specified in these Bylaws or in the charge of the corresponding committee. The Nomination and Elections Committee shall also actively recruit candidates and strive to produce a diverse slate of nominees, considering gender, race, institutional affiliation and representation of basic science and clinical departments. However, a nominee may not be put on the ballot if in winning the election they would serve on more than two standing committees of the Faculty of Medicine or Faculty Council. Service as a Faculty Council representative or on an ad hoc committee of the Faculty Council or of the dean is not included in this count). Furthermore, a candidate may not be put on the ballot for the election of Senators if they already serve on two standing committees of the Faculty of Medicine or of Faculty Council. Exceptions may be made only if the Nominations and Elections Committee is unable to recruit a sufficient number of no other candidates come forward to fill a committee vacancy. Elections shall be conducted by email or other electronic means, using a preferential ranked choice voting system.”
Bylaws Committee Proposal:

- Adds that being a SOM senator “counts” toward two-committee rule

The Nomination and Elections Committee shall place on the ballot any self- or peer-nominated candidate who consents to run and meets the eligibility requirements for service, as specified in these Bylaws or in the charge of the corresponding committee. The Nomination and Elections Committee shall also actively recruit candidates and strive to produce a diverse slate of nominees, considering gender, race, institutional affiliation and representation of basic science and clinical departments. However, a nominee may not be put on the ballot if in winning the election they would serve on more than two standing committees of the Faculty of Medicine or Faculty Council. Service as a Faculty Council representative or on an ad hoc committee of the Faculty Council or of the dean is not included in this count). Furthermore, a candidate may not be put on the ballot for the election of Senators if they already serve on two standing committees of the Faculty of Medicine or of Faculty Council. Exceptions may be made only if the Nominations and Elections Committee is unable to recruit a sufficient number of no other candidates come forward to fill a committee vacancy. Elections shall be conducted by email or other electronic means, using a preferential ranked choice voting system.”
Faculty-sponsored petition

Bylaws Committee Proposal:

• Makes two minor text corrections

The Nomination and Elections Committee shall place on the ballot any self- or peer-nominated candidate who consents to run and meets the eligibility requirements for service, as specified in these Bylaws or in the charge of the corresponding committee. The Nomination and Elections Committee shall also actively recruit candidates and strive to produce a diverse slate of nominees, considering gender, race, institutional affiliation and representation of basic science and clinical departments. However, a nominee may not be put on the ballot if in winning the election they would serve on more than two standing committees of the Faculty of Medicine or Faculty Council. Service as a Faculty Council representative or on an ad hoc committee of the Faculty Council or of the dean is not included in this count. Furthermore, a candidate may not be put on the ballot for the election of Senators if they already serve on two standing committees of the Faculty of Medicine or of Faculty Council. Exceptions may be made only if the Nominations and Elections Committee is unable to recruit a sufficient number of no other candidates come forward to fill a committee vacancy. Elections shall be conducted by email or other electronic means, using a preferential ranked choice voting system.
Faculty-sponsored petition

Bylaws Committee Recommendations:

• For future consideration:
  
  • that the Nominations and Elections committee create a charge separate from the Bylaws that describes their process for recruiting a diverse ballot and educating the faculty on the importance of participating in faculty governance.

  • that all committees critically examine their eligibility requirements for service (as detailed in their charge) to balance term limits (which allow more faculty to serve) with the benefits of having experienced committee members (which limits the number of faculty who can serve).
Recommendations of the SOM Bylaws Committee Regarding Faculty-Proposed Amendments to Article 3.6b of the School of Medicine Bylaws (submitted June 17, 2021)

ORIGINAL AMENDMENT

3.6 Committees of the Faculty Council

b. Nomination and Elections Committee.

"In addition, the Nomination and Elections Committee shall 

adhere to the eligibility requirements for service on specific committees as stated elsewhere in these Bylaws and committee charges and nominate (1) candidates for the at-large representatives to the Faculty Council, (2) candidates for the representatives of the special faculty whose titles are modified by the adjective adjunct or clinical to the Faculty Council, (3) candidates for standing committees of the Faculty of Medicine, and (4) candidates for the University Faculty Senate. In the case of at-large representatives, senators, or members of the Committee on Appointments, Promotions, and Tenure, the number of candidates shall be at least twice the number of positions to be filled.

In recruiting faculty for these aforementioned ballots, the Nomination and Elections Committee shall adhere to the specific eligibility requirements stated elsewhere in these Bylaws and committee charges and strive to produce a diverse slate of nominees, considering gender, race, institutional affiliation and representation of basic and clinical departments by finding additional candidates, as is necessary. A nominee may not be put on the ballot if in winning the election they would serve on more than two standing committees of the Faculty of Medicine or Faculty Council (ad hoc committees are not included in this count).

Furthermore, a nominee may not be put on the ballot for the election of Senators if in winning the election they would serve on more than two standing committees of the Faculty Senate (ad hoc committees are not included in this count). Exceptions will be made only if no other candidates come forward to fill a committee vacancy. Elections shall be conducted by email or other electronic means, using a preferential voting system."

Rationale: To clarify the complementary roles of the Nomination and Elections Committee to: i) adhere to specific eligibility requirements stated in the School of Medicine Bylaws and committee charges; and ii) promote diversity, equity, and inclusion by producing a diverse slate of nominees by seeking additional candidates, as necessary.

BYLAWS COMMITTEE RECOMMENDATION

The School of Medicine Bylaws Committees recommends that Faculty Council support a modified version of this amendment. Our suggested modifications and justifications are detailed below (using tracked changes and comments).

3.6 Committees of the Faculty Council

b. Nomination and Elections Committee.

"In addition, the Nomination and Elections Committee shall nominate (1) candidates for the at-large representatives to the Faculty Council, (2) candidates for the representatives of the special faculty whose titles are modified by the adjective adjunct or clinical to the Faculty Council, (3) candidates for standing committees of the Faculty of Medicine, and (4) candidates for the University Faculty Senate. In the case of at-large representatives, senators, or members of the
Committee on Appointments, Promotions, and Tenure, the number of candidates shall be at least twice the number of positions to be filled.

The Nomination and Elections Committee shall place on the ballot any self- or peer-nominated candidate who consents to run and meets the eligibility requirements for service, as specified in these Bylaws or in the charge of the corresponding committee. The Nomination and Elections Committee shall also actively recruit candidates and strive to produce a diverse slate of nominees, considering gender, race, institutional affiliation and representation of basic science and clinical departments. However, a nominee may not be put on the ballot if in winning the election they would serve on more than two standing committees of the Faculty of Medicine or Faculty Council. Service as a Faculty Council representative or on an ad hoc committee of the Faculty Council or of the dean is not included in this count. Furthermore, a candidate may not be put on the ballot for the election of Senators if they already serve on two standing committees of the Faculty of Medicine or of Faculty Council. Exceptions may be made only if the Nominations and Elections Committee is unable to recruit a sufficient number of candidates to fill a committee vacancy. Elections shall be conducted by email or other electronic means, using a ranked choice voting system.

These suggested modifications include all procedural changes in the faculty-proposed petition except limiting service of School of Medicine faculty on committees of the Faculty Senate. Since the School of Medicine is a constituent faculty of the University Faculty (see Faculty Handbook, Chapter 2, Article VII, Section A), and the Faculty Senate exercises all powers of the University Faculty not reserved to the University Faculty itself or delegated elsewhere by the University Faculty (Faculty Handbook, Chapter 2, Article 4, Section A), the School of Medicine does not have the authority to limit service of School of Medicine faculty on Faculty Senate committees.

To further promote equity, diversity, and inclusion in School of Medicine elections, as stated in the rationale for the faculty-proposed amendment, we recommend that the Nominations and Elections committee create a charge separate from the Bylaws that describes their process for recruiting a diverse ballot and educating the faculty on the importance of participating in faculty governance. We also recommend that all committees critically examine their eligibility requirements for service (as detailed in their charge) to balance term limits (which allow more faculty to serve) with the benefits of having experienced committee members (which limits the number of faculty who can serve).

Respectfully submitted,

School of Medicine Bylaws Committee: Darin Croft (Chair), Piet de Boer, George Dubyak, Stephen Fink, Peter Harte, Mamta Singh, and Nicole Deming (ex officio)

Nov. 30, 2021
June 17, 2021

From: Maureen McEnery, PhD, MAT

To: Jennifer McBride, PhD, Chair of the Faculty Council
Nicole Deming, JD, MA, Secretary of the Faculty of Medicine
Darin Croft, PhD, Chair of the Bylaws Committee

RE: Amendments to School of Medicine Bylaws to promote equity and diversity in SOM elections

Please accept this written petition of 20 or more faculty members in accordance with the SOM Bylaws which state,

"An amendment of the bylaws may be proposed by majority vote of the Faculty Council, by the Dean, or by written petition of 20 or more faculty members or by the Bylaws Committee. The amendment must be accompanied by a rationale for the proposed change. All proposed amendments shall be submitted to the Chair of Faculty Council, the Secretary of the Faculty of Medicine and the Chair of the Bylaws Committee."

The rationale follows:

The proposed amendments clarify the complementary roles of the Nomination and Elections Committee to i) adhere to specific eligibility requirements stated in the School of Medicine Bylaws and committee charges and ii) promote diversity, equity, and inclusion by producing a diverse slate of nominees by seeking to find additional candidates, as is necessary.

The Bylaws are very specific with respect to eligibility requirements for service. The rules pertaining to sequential service and term limits on a given standing committee can be found in the committee’s charge. Here are excerpts from several of the relevant committee charges, downloaded from the SOM Faculty Affairs website (https://case.edu/medicine/faculty-staff/faculty-affairs-hr/faculty-governance):

- Admissions, which stipulates that "Members may serve consecutive terms without limit."
- Appointments, Promotion and Tenure, which stipulates that "Committee members may serve only two consecutive three-year terms but subsequently may be reelected or reappointed after an absence of one year."
- Bylaws, which stipulates that "Members may stand for re-election and serve at most two consecutive terms."
- Budget, Finance and Compensation, which stipulates that "All elected faculty members of this Committee may serve for a maximum of six consecutive years and thereafter shall be eligible for re-election to the Committee only after the lapse of at least one year."
- Committee on Women and Minority Faculty, which stipulates that "Members may stand for re-election and serve at most two consecutive terms."
- Faculty Council representatives. The SOM Bylaws specify the terms of office for Faculty Council representatives. In particular, Article 3.4 stipulates that "Representatives shall serve for a period of three years. Representatives may not serve consecutive terms but may stand for election after an absence of one year."
Additionally, the absence of parity between service on the Faculty Council and service on the Faculty Senate is a striking omission from the current Bylaws. The nominees for service to the SOM (Faculty Council and it’s committees) and service to the University (Faculty Senate and its committees) come from the same pool of individuals.

The proposed amendments are:

**Current text (black) with Proposed amendment (red)**

3.6 Committees of the Faculty Council b. Nomination and Elections Committee.

"In addition, the Nomination and Elections Committee shall adhere to the eligibility requirements for service on specific committees as stated elsewhere in these Bylaws and committee charges and nominate (1) candidates for the at-large representatives to the Faculty Council, (2) candidates for the representatives of the special faculty whose titles are modified by the adjective adjunct or clinical to the Faculty Council, (3) candidates for standing committees of the Faculty of Medicine, and (4) candidates for the University Faculty Senate. In the case of at-large representatives, senators, or members of the Committee on Appointments, Promotions, and Tenure, the number of candidates shall be at least twice the number of positions to be filled.

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Those who support the proposed amendments in this petition are listed in alphabetical order.

Christopher Bailey, PhD
Matthias Buck, PhD
Piet de Boer, PhD
Brian D’Anza, MD
Michael Devereaux, MD
Phil Fastenau, PhD
Jonatha Gott, PhD
Eckhard Jankowsky, PhD
Mahmoud Ghannoun, PhD
Qingzhong Kong, PhD
Hua Lou, PhD
Maureen McEnery, PhD, MAT
William Merrick, PhD
David Preston, MD
Scott Simpson, PhD
Neena Singh, MD, PhD
Corey Smith, PhD
Witold Surewicz, PhD
Johannes von Lintig, PhD
Jo Ann Wise, PhD
Richard Zigmond, PhD