

Faculty Council Meeting Meeting Minutes Marh 24, 2025

Timing	Agenda Item	Presenter	Summary of discussion	Action items/Motions/ Votes
4:02-4:12PM	Chair's Remarks and Announcements	Alan Levine Chair of Faculty Council	To date, Faculty Council meetings have been held at the CCLCM, MHS, and the VA with UH scheduled for April 28. Dr. Levine hoped that they continue this practice in the 2025-2026 Faculty Council schedule.	
			The modified strategic plan has been drafted and is now available in BOX. Dr. Levine has been taking recommendations directly so he can receive, collate and then share them with the dean as one document. He encouraged everyone to review the strategic plan. It may be again modified once we have a clearer idea of forthcoming changes. The AAMC is contacting our faculty colleagues across the country asking them to provide stories of how the new NIH policies (in flux or happening right now) are impacting you, as a scientist, professor, clinician. Please share your stories with Dr. Levine.	
			Dr. Levine learned in an email today that the Co-Director of the Center for Aids Research, joining alliance with the University of Pittsburgh, just found out that colleagues (leadership) he knows well had their R01 cancelled. Non-compete with the University renewal, competing renewal and funding are not happening – it was canceled midstream. He stressed that faculty need to stand together and be strong in their stance. He stressed again the importance of Faculty Council reps bringing what we do in Faculty Council to their constituents, and constituents input back to Faculty Council.	
4:12-4:13PM	Approval of February 17 Faculty Council Meeting Minutes	Alan Levine	When polled, there were no edits to the February 17 Faculty Council Meeting minutes as posted in BOX.	With no objections, the February Faculty Council Meeting Minutes were approved by general consensus.

4:13-4:21PM	Faculty Council Steering Committee Report	Anastasia Rowland- Seymour	Dr. Rowland-Seymour provided a summary of topics covered at the March 10 Faculty Council Steering Committee Meeting. When reviewing the emeritus applications, the committee was specifically looking for definition or designation that the faculty member had meritorious service to CWRU, and should be included in future applications. Discussion on whether or not faculty should compose a statement on the White House decisions and how we might improve that engagement and level of discussion. Would a task force be appropriate, moving forward, to consider specific actions, or should the proposal come first. The committee considered reaching out to department chairs to encourage more engagement with Faculty Council and faculty engagement and promotion criteria and the need for clarification of areas of excellence.	
			The APT document should be introduced into bylaws by April 2025 at the latest. Dr. Levine suggested meeting with research leadership of the four affiliate hospitals to determine their criterial for promotion making sure the APT document reflects all of us. The survey coming out of the ad hoc FACE committee has been postponed for two weeks.	
4:21-4:24PM	Senate/ExCom Report	Matthias Buck	There has been progress at the Faculty Senate ad hoc committee on merging and splitting departments. They have formulated a policy document, based on policies that exist in the SOM, which will be coming shortly before the Senate. A special meeting of the ExCom (privileged and confidential) on recent government actions and talking points will be put in BOX. Post doc healthcare coverage has been turned over to the Graduate Education Committee	
4:24-4:48PM	Presentation of Research at Cleveland Clinic	Donna Driscoll	Dr. Driscoll (representing Dr. Erzurum) provided an overview of current research at the Cleveland Clinic; most is done on heart and vascular disease. They have added new positions (four new research associate chief positions) to enhance system sustainability as they move into new markets. CCLCM has a long history of partnership with CWRU. They recently celebrated the 20-year anniversary of CCLCM.	
			The Ohio Discovery Corridor was launched last year facilitated	

	Presentation of Research at Cleveland Clinic (continued)		by a large number of investments from state and partner institutions as well as Jobs Ohio, allowing them to make connections that drive their shared goals of cutting-edge research, educating the next scientists and providing jobs in the communities. Two new buildings will open in January of 2026. The discovery accelerator accelerates the pace of science. Last year they started a program in Denmark as a fellowship exchange program for quantum and AI in biomedical and clinical applications. Ten years ago, they started the young investigator mentoring/ coaching program where assistant staff assisted setting up labs and networking. They will have a coach for 6 years and many continue beyond that time. Career development workshops have been implemented and now have 4 faculty that assist.	
4:48-4:56PM	Government actions, the Dean notedwill be forthcoming, referring councilors to statements of the University president"	Stan Gerson	The Dean was on his way to a symposium in Taipei, and has recently visited the Florida site and Abu Dhabi where they are beginning their first class of fellows and clinical investigation. He stated that our faculty extend worldwide and Cleveland Clinic has major activity in that regard. These are tumultuous times and he is spending a considerable amount of time in focusing on how to manage it all. He is concerned at the NIH level that study sections slow down, council slowed down, and competitive renewals slowed down which could have a major impact resourcing our science. We all need to pay attention to that. When looking at the grant portfolio where can our internal funding come from. The Dean chatted with the chairs, John Chae, and Faculty Council requesting them to please bring this information back to their departments enabling a unified approach and help us to appreciate the individual issues all of us must pursue in this complex terrain. We know how to educate, publish, write grants and conduct research which needs to continue. The classic R01 could become the mainstay for our existence. Please continue to write that R01 and keep ourselves funded at the individual faculty level in business. Regarding recent government actions, the Dean noted that no statement has come from him and none will be forthcoming, referring councilors to statements of the University President.	The Dean noted that while a town hall was held a couple of weeks ago, another one could be beneficial.

4:56-5:06PM	Agenda Items for the Dean's Third Meeting of Faculty		Faculty Council considered seven topics suggested as agenda items for the Dean's Third Meeting of Faculty. Faculty Council voted on all seven and the top three were forwarded to the Dean. They were: SOM strategic planning regarding the potential impact of DEI and FA reimbursement; compensation policy regarding base, merit, and incentive. Strategy and philosophy; and overall evaluation of leadership accountability and transparency with faculty in these rapidly changing times.	A motion was made by a Faculty Council member and seconded by a Faculty Council member to vote on the seven suggested topics for the Dean's Third Meeting of Faculty. The top three votes were: 1) Strategic Planning – DEI & F&A – 25/45 2) Compensation Policy – 19/45 3) Leadership Accountability and Transparency – 23/45
5:06-5:15PM	Bioethics CET-CT: Clinical Ethics, Graduate Certificate Program	Eileen Anderson Mark Aulisio	The proposal for the creation of a Bioethics CET-CT: Clinical Ethics, Graduate Certificate Program was presented to Faculty Council for review and approval. There being no further discussion, the motion was put to a vote.	A motion was made by a Faculty Council representative and seconded by a Faculty Council member to approve the Bioethics CET-CT: Clinical Ethics, Graduate Certificate Program. Vote: 33 were in favor, 0 was against, and 2 abstained. The motion is approved.
5:15-5:33PM	Annual Report for the Committee on Biomedical Research	Susann Brady-Kalnay	Dr. Brady-Kalnay presented the annual report of the Committee on Biomedical Research. She noted that the Dean had asked them to assess what is being done with artificial intelligence in the SOM, and what can be done to improve the CWRU and affiliates IRB. She then presented an overview of the CBR meetings held in 2024. AI will be a large part of medicine in the future and needs to be approached correctly at the educational level. She explained how they plan to build generative AI-powered applications that will create tools that enhance teaching, learning, and clinical training. This approach would eliminate the need for individual student accounts and instead incur costs based on token usage. Resources were requested for a dedicated AI programmer at 50% FTE initially, to develop, refine, and maintain these applications.	

	Annual Report for the Committee on Biomedical Research (continued)		A course was developed, IBMS450 Data Science and AI in Biomedicine: Introduction and Applications which will prepare students for the evolving landscape of computational biology and its applications in molecular and biomedical research. Challenges include dealing with the large part of money that came from the NIH which is not flowing very quickly and how this will be handled. It is vital, and in everyone's interest, to coordinate quickly and not give back to the federal government funds they worked so hard to accrue. It is imperative to spend down their grants. Grace McComsey is tackling the issue of the IRB which she feels is vital to continue that research. They are working on models which will help them navigate this in a way that would explain why we think something is exempt, to be expedited or requires a full review, and then offer appropriate people to review.	
5:33-5:51PM	Annual Report for the Committee on Women and Minority Faculty	Amy Hise	Dr. Hise provided an overview of the composition of the committee and their activities and topics of discussion over the past year. Recently the committee had met with Dean Gerson and Cynthia Kubu, the Vice Dean for Faculty. Anti-DEI legislative efforts and plans of the SOM were meeting topics along with the DEI activities of the Faculty Senate committees CWRU ODEIE, SOM offices, the visibility of the LGBTQIA and their activities/resources. Salary equity, the Professional Conduct Committee, the climate survey, faculty development activities and opportunities, and services and resources for students with disabilities were discussed. The committee is currently revising their charge and are considering a proposed new name for their committee – the Committee on Faculty Community and Representation. Their ongoing meetings with chairs have been informative. Recurring themes included the importance of mentoring in one's personal leadership journey and having support of SOM leadership to support faculty from varied backgrounds. The upcoming report on salary equity will be discussed at their May meeting. The ad hoc FACE Committee is looking at similar questions and Dr. Hise will reach out to coordinate efforts with Matthias Buck.	Dr. Levine suggested that a 1–2-hour open forum, organized by her committee, could be beneficial for those who could be affected due to diversity or gender in their title. How do we bring an accounting, with that level of risk, together to come up with an approach so that everyone is hearing the same story and whatever available ideas you come up with disseminate across campus.

5:51-5:52PM	New Business		None.		
5:52PM	Good and Welfare		Postponed in favor of time.		
5:52PM	Adjourn		There being no further agenda items to address, the chair adjourned the meeting at 5:52PM.		
<u>Present</u>					
Joshua Arbesi	man Lisa C	Gelles	Bret Lashner	Rebecca Obeng	Hemalatha Senthilkumar
Stephanie Bar	rnes Stan G	Gerson	Alan Levine	Ruben Olivares	Simran Singh
Elvera L. Bar	on Kesha	ava Gowda	Jennifer Li	Monica Montano	Paul Shaniuk
Maura Berkel	hamer Andre	ew Harris	Susan Linder	Nona Nichols	Matthew Sikora
Kavita Bhatt	Amy	Hise	Lia Logio	Elizabeth Painter	Bryan Singelyn

David Ludlow

Janice Lyons

Tani Malhotra

Nona Nichols

Claudio Milstein

Hung-Ying Kao

Gaby Khoury

Sadashiva Karnik

Camilla Kilbane

Qingzhong Kong

Andy Chen

Marta Couce

Matthias Buck

Thomas Collins

Adrienne Callahan

Nadim El Chakhtoura

Not Present				
Robert Abouassaly	Mackenzie Deighen	Maeve Hopkins	James Martin	Deven Reddy
Mohammad Ansari	Jeremiah Escajeda	Sheronica James	Raman Marwaha	Ann Rivera
Blaine (Todd) Bafus	Jessica Fesler	Eric W. Kaler	Amy McDonald	Tamer Said
Corinne Bazella	Calen Frolkis	Venkatesh Kambhampati	Christopher McFarland	Demitre Serletis
Melissa Bonner	Ramy Ghayda	Sandeep Khanna	Gillian Michaelson	Simran Singh
Hulya Bukulmez	Rachael Gowen	Christina Krudy	Michael Moffitt	James (Jim) Strainic
Francis Caputo	Bahar Bassiri Gharb	Stephen Leb	Sarah Ondrejka	Nami Tajima
Wayne Cohen-Levy	Emily Hamburg-Shields	Ang Li	Neal Peachey	Patricia Taylor
Patrick Collier	Jason Ho	Shawn Li	Cyrus Rabbani	Gregory Videtic
Meelie DebRoy	Vanessa Ho	Dan Ma		

Others Present

Eileen Anderson	Susann Brady-Kalnay	Jimmy Efird	Cynthia Kubu	Lila Robinson
Shane Angus	Nicole Deming	Joyce Helton	William Merrick	Jiri Safar
Mark Aulisio	Donna Driscoll	Joey Kass (BGSO)	Karen Mulloy	Xiaomei Song

Michael Staudt

Phoebe Stewart

Scott Williams

Raed Zuhour

Saba Valadkhkan

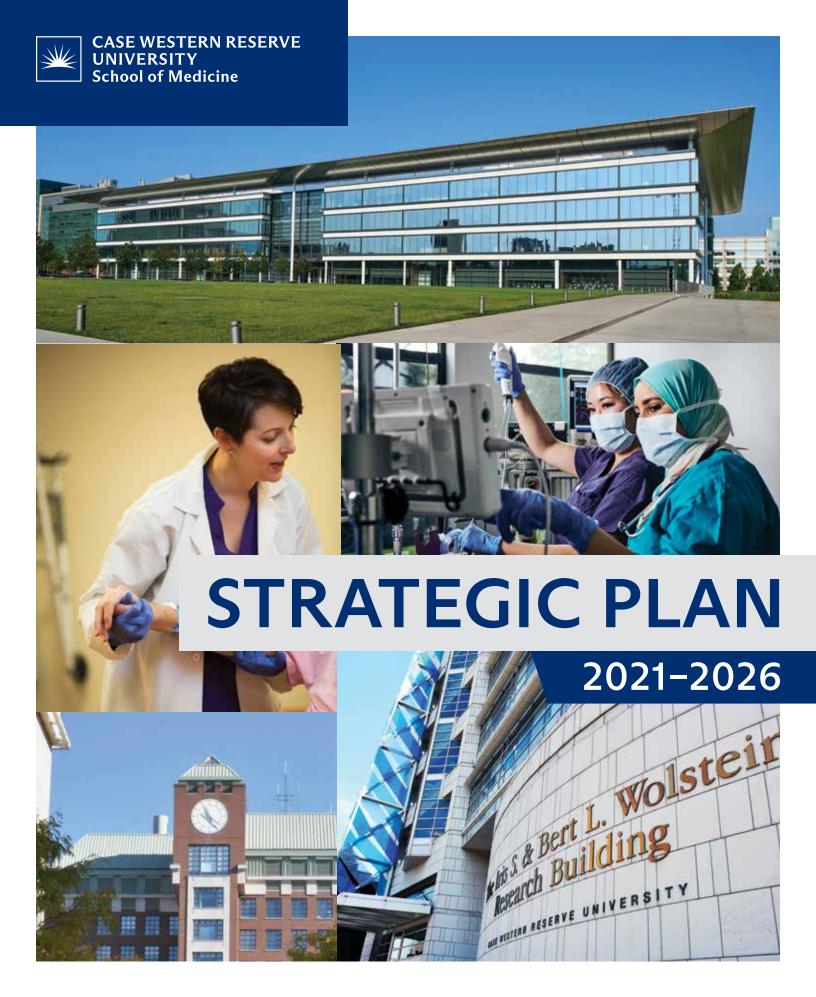
Abigaill Raffner (Basson)

Anastasia Rowland-Seymour

Elizabeth Rainbolt

Ben Schwan

Rania Rayes-Danan



Case Western Reserve University School of Medicine



It all starts with a plan—and I'm pleased to present an update of the Case Western Reserve University School of Medicine's strategic plan encompassing 2021-2026.

While first posted in mid-2021, our update now adds elements focused on academic community engagement and advancement. This pervades all that we do in recruitment, education, research, community engagement and impact. The plan reflects the interests of our faculty across our five campuses at Case Western Reserve University School of Medicine, Cleveland Clinic, Louis Stokes Cleveland VA Medical Center, MetroHealth System and University Hospitals, our plan encourages interdisciplinarity and a focus on health benefits.

In January 2023, I noted our initiation of three broad interdisciplinary research and education efforts that bring together our faculty of medicine and other CWRU Schools:

- Institute for Population and Community Health
- Artificial Intelligence and Machine Learning in Medical Science, Education and Practice
- Therapeutic Discovery and Development

Each aligns with our research and education programs, mindful of our healthcare environment and attentive to impact on our communities. Our strategic plan links together our academic priorities towards our mission:

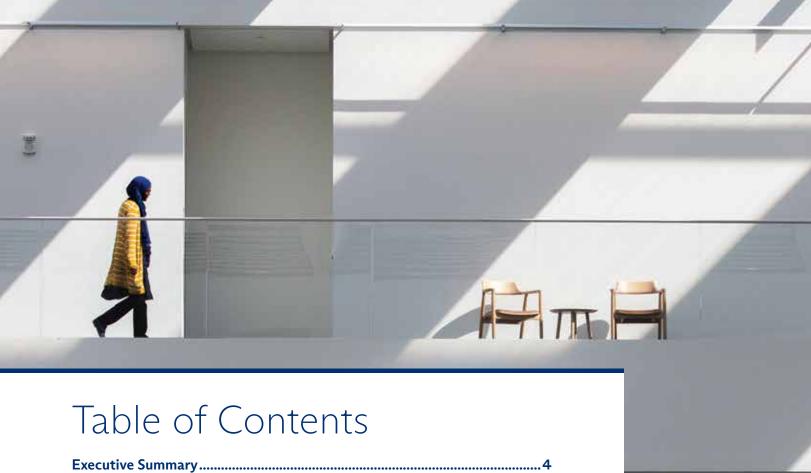
To improve global health by linking research to populations in a superb educational environment.

This outline of our goals and aspirations focuses our planning and evaluation for each element of our research, education and academic community. These guide our programs, investments and scholarly discourse.

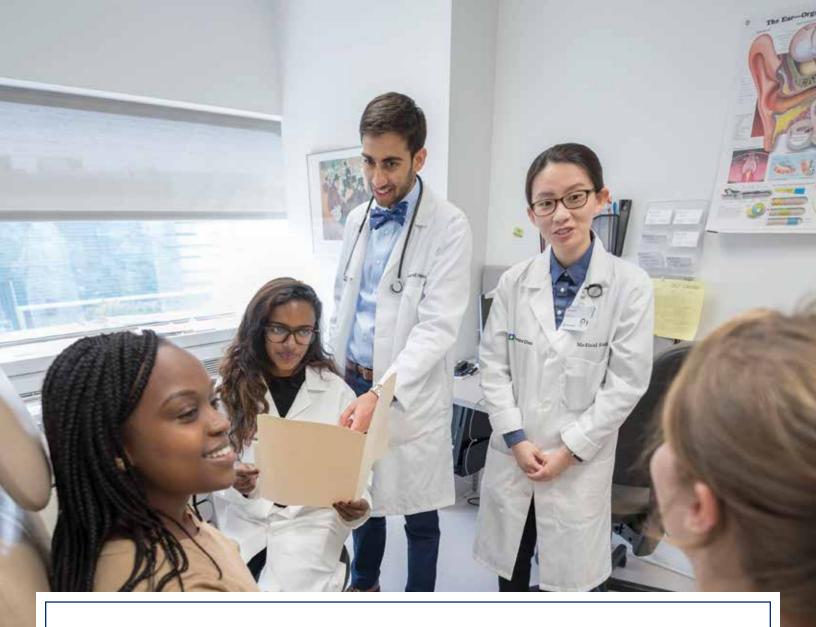
Welcome to the School of Medicine's roadmap!

Stan Gerson, MD

Dean, Case Western Reserve University School of Medicine



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Executive Summary

In July 2020, Case Western Reserve University (CWRU) School of Medicine embarked on a journey to develop a five-year strategic plan encompassing 2021 through 2026. This update showcases our nine fundamental elements/areas that provide trajectory for the school's overall performance and outcomes:

- Research
- Medical Education
- Graduate Education
- Transdisciplinary Research
- Clinical and Translational Research
- Regional and National Community
- Academic Community Engagement
 Advancement
- Faculty
- Philanthropy



Key to building a successful plan was ensuring faculty and staff felt engagement with and ownership of the plan. Once the school's leadership team built the draft in 2021, we shared it with the basic science chairs, presented it to the clinical chairs in each department and held town halls with the entire faculty including our hospital affiliate partners and staff.

Annually, we review the plan with each group, asking them to evaluate the contents and share their comments with the dean's leadership team. After gathering and analyzing the data received from the town halls, we update strategy, objectives and measurable results for each of these areas and improve the strategic plan.





About the School of Medicine

Founded in 1843, Case Western Reserve University School of Medicine has been at the forefront of medical education and world-class biomedical research, combining its faculty across Cleveland's preeminent healthcare network to educate students, develop breakthrough discoveries and treatments for diseases, and work toward eliminating health disparities around the world. The school boasts over two dozen program and degree options and consistently ranks in the top tier of medical schools for National Institutes of Health (NIH) research funding.

Focused on interdisciplinarity, the School of Medicine nurtures and promotes collaborative education and research efforts through its faculty at five campuses: Case Western Reserve University School of Medicine, Cleveland Clinic, Louis Stokes Cleveland VA Medical Center, MetroHealth System and University Hospitals. Our 477,000-square-foot Health Education Campus with Cleveland Clinic opened in 2019, bringing together medicine, nursing, dental, physician assistant and social work students from across the university under one roof to promote interprofessional education (IPE) and synergistic practice.

School and Faculty Innovations

- 2nd woman in the U.S. to earn a Doctor of Medicine (MD) degree, Emily Blackwell, graduated from Western Reserve in 1852.
- Initiated the most advanced medical curriculum in the country in 1952, pioneering integrated education, a focus on organ systems and team teaching in the preclinical curriculum—an approach that transformed into the Western Reserve2 curriculum, based on small group, student-based learning that's now in use.
- 11 Nobel Prize holders with ties to the School of Medicine.

- 1st MD/PhD dual-degree program in the country, upon which the NIH and others modeled their programs, with one of the longest-standing MD/PhD NIH-supported programs in the country.
- 1st successful defibrillation of the human heart.
- 1st stool DNA tests for early detection of colon cancer and another for esophageal cancer.
- Developed Magnetic Resonance Fingerprinting.



Learn more about the School of Medicine's notable people, scientific advancements and institutional events at: case.edu/medicine/about/history.



Strategic Vision

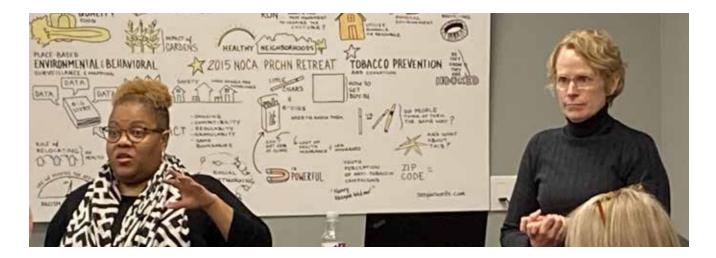
Case Western Reserve University School of Medicine is the intellectual glue for health education and research faculty across Cleveland's academic medical centers—Cleveland Clinic, Louis Stokes Cleveland VA Medical Center, MetroHealth System and University Hospitals—coordinating a network of transdisciplinary effort that touches a myriad of diseases and environmental backgrounds and risks.

Our Mission

To improve global health by linking research to populations in a superb educational environment.

Approach

We utilize an extraordinary consortium of medical school faculty across all Cleveland medical institutions to create integrated teams of experts to educate our trainees, link disciplines to discover the mysteries and treatment of serious diseases in Cleveland and across the world. Our mission guides us to provide excellence in medical education through our unique curriculum, advance discoveries from our laboratories to patients and improve the health of our community.



Strategic Principles

We seek excellence in scholarship and impact in all endeavors of research & training, with cross-institutional, transdisciplinary efforts that move discoveries to health, policy changes and societal benefit.

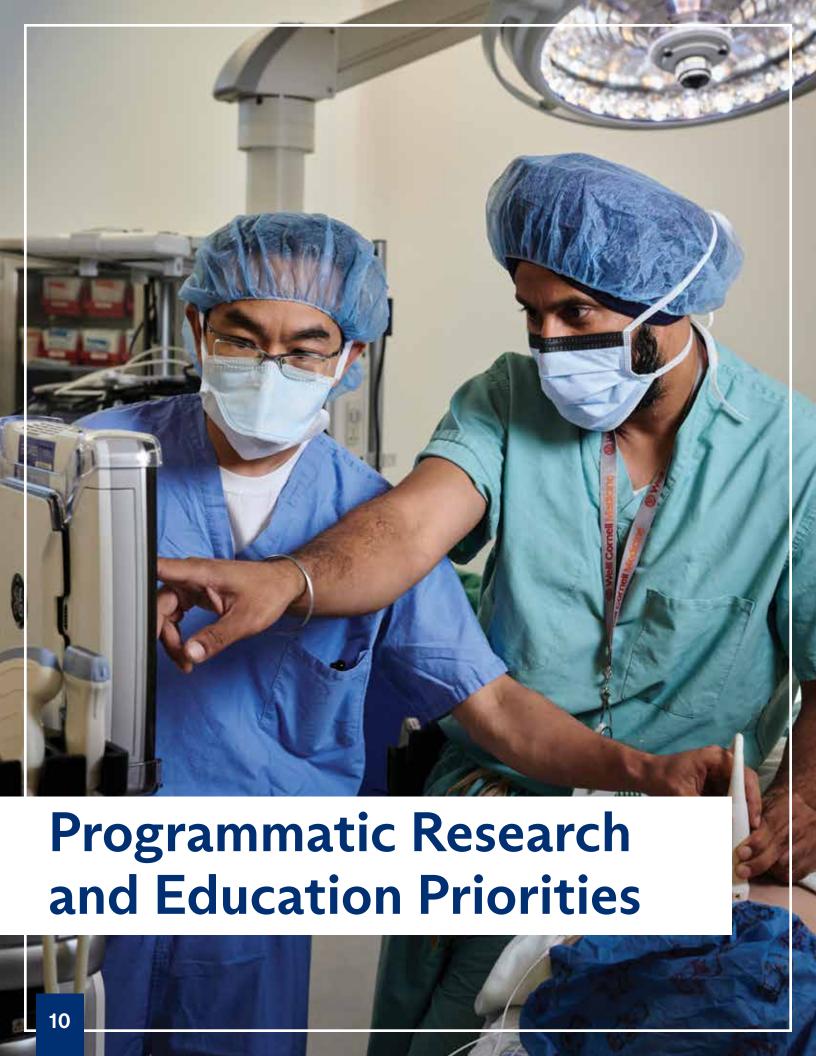
Our departments maintain excellence in their specialty area while promoting cross-discipline research centers to maximize impact.

Our efforts will be focused through critical choices and selective investments.

Our policies and actions will emphasize excellence in research, education, and implementation, and we will excel in recruitment, career development and retention, while remaining attentive to the social, cultural, and financial needs of our community of learners.

We recognize that health benefits of biomedical discoveries are tied to their impact on the social determinants of health and to our ability to engage our local and global community in their health needs.







Research

- Cancer
- Immunity, Immunotherapy, Infectious Diseases, Emerging Infection and Global Health
- Theraputic Discovery and Development— Small Molecules, Gene Therapies, Nanotherapeutics, Cell Therapies, & Drug Delivery
- Neurological and Psychiatric Disorders
- Genomics, Human Genetics

- Physiologic Basis of Disease— Molecular Structure, Signaling & Metabolic Pathways
- Population & Community Health— Social Determinants of Health, Health Policy and Implementation
- Artifical Intelligence and Machine Learning in Medicine

Education

- Foster innovation in curricular design for educational programs and joint degrees by encouraging experiential learning with Al and competency-based education.
- Cultivate a welcoming learning environment for our students, faculty and staff.
- Engage our community in partnerships that train and retain highly talented individuals in Northeast Ohio.
- Establish a continuum of training—
 from high school to post-doctoral education—
 that emphasizes mentoring and broad
 career advancement.
- Increase regional and national recognition of graduate education through faculty involvement in national groups and scholarship.
- Provide a supportive environment to train leaders in education.

New Education Programmatic Priorities

- Master of Science in Regulatory Science
- Master of Science in Biotechnology

• Master of Science in Aerospace Physiology



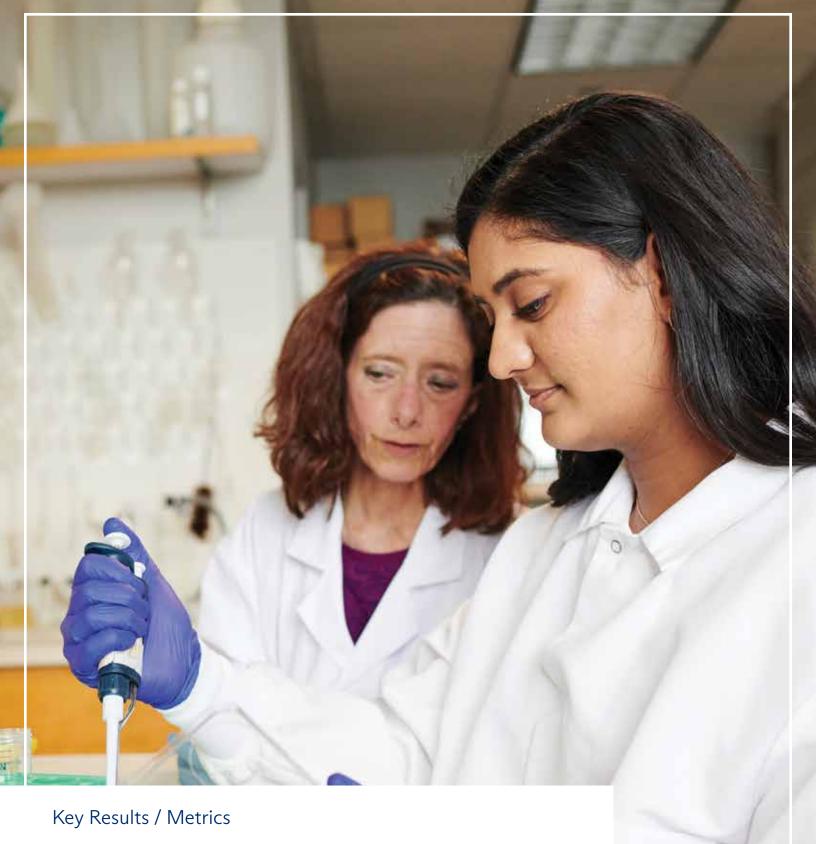


Increase national reputation as a research-intensive school of medicine while supporting top faculty to promote innovation

- Increase publications in high-impact journals (IF>10) from 13% to 17%
- Increase research expenditures per faculty member by 15% over 3 years, and increase salary coverage by 4% of NIH salary cap
- Increase multi-investigator and transdisciplinary grants by 20% (P, U other)
- Increase faculty participation on national study sections, leading medical societies, and elected societies such as American Society for Clinical Investigation and the American Association of Physicians, receipt of national and societal awards
- Increase faculty members on health, community and patient organization boards
- 2. Increase net basic science faculty member count by 10% over five years, increasing hires from groups who are Underrepresented in Medicine (URiM)
- 10% increase in each category: tenure track and non-tenure track
- Target: 15-18 per year TT and 3-7 NTT
- 3. Increase discovery-based patent applications, licenses, startups and commercialization income
- Target 15% increase per year
- · Return on Investment (ROI) as licenses, venture funding
- 4. Support research Centers of Excellence across departments with interdisciplinary focused research space
- Establish program-clustered research space for teams
- Add 50,000 square feet in additional research space over
 5-7 years to accommodate incremental faculty
- Increase investments in existing faculty through bridge grants and program expansion and pilot funding initiatives
- Focus investments for Centers, new research and grant initiatives that are linked to departmental and strategic plan priorities that provide impact and ROI linked to grants and publications
- 6. Invest in enabling and emerging technologies, including AI, that support the school's research priorities with cost-effective shared resources
- Match investments to grants and impact, increase S10 grant applications, and increase philanthropy for technology acquisition



Cultivate and foster a welcoming learning environment where all students can flourish	 Increase pathway training curriculum for MD cohort to 10 students per year Mitigate bias in admissions, curriculum, clerkships Provide real-time assessments and responsive education Train residents and faculty in identifying and mitigating bias, harassment and mistreatment
Promote curricular innovation across competency-based medical education	 Customize curriculum including student early career exploration Enhance ways to report high performance of students in clinical space Explore optimal strategies for incorporating Al to deepen learning and prepare students for future state of healthcare delivery
3. Provide exceptional mentorship and research experiences for students	 Provide mentoring skill training to at least 50% of MD thesis mentors
4. Expand our simulation programs and educational technologies	 Augment education with AR/VR/MR technologies Create simulation expertise to share city-wide with hospital affiliates Expand simulations to include faculty development programs for clinicians
5. Manage the cost of medical education	 Reduce relative tuition in AAMC private medical school rankings Create revenue stream for medical education Increase donor scholarship support by greater than 10% a year, target \$10M in annual support
6. Engage with the local stakeholders to enhance community partnerships	 Link Pathways Programs and interprofessional education of MD, PA and MSA students to community health needs Create opportunities for students in Midtown Institute for Population & Community Health Center Expand geriatric education program across Cleveland Increase capacity for students in Student Run Health Clinics
7. Elevate national recognition of education excellence	 Increase faculty education-focused publications to 10 per year Create brand awareness for Continuing Medical Education and innovative education (Simulation Center, HoloLens) Recognition for innovation in education activities in promotion process Train and support medical educators across the five campuses
8. Invest in applications of artificial intelligence including large language models & generative AI to advance learning while preserving the core tenets of health professionals	Increase awareness of data science as it relates to healthcare



Graduate Education

1. Improve student experience	
in career development	

- Promote and expand participation of trainers on training grant and fellowship study sections, and on national committees
- Improve student satisfaction with graduate education to > 80%
- Implement mentor training for thesis advisors in trainee career development, a conducive learning environment and mental health support
- Support non-academic biomedical science careers for PhD and Master's students
- Embed career exploration opportunities into programs
- Implement PhD alumni seminars on their career paths
- Use "Alumni Connect" to link students to alumni coaches
- Expand the translational fellows program and track placement
- Metric: Achieve 50% trainee participation in career development activities
- 3. Career guidance for PhD students and postdoctoral fellows interested in academic career
- Expand career development program focused on teaching, mentoring and leadership
- Implement structured grant writing courses in the PhD program in year 2 to encourage > 50% fellowship grant submission
- Develop support for postdoctoral fellow career development awards that lead to independent investigator careers
- Offer postdoctoral fellows students paths to faculty positions
- Continue Dean's Scholars Program Pathway to Faculty Program
- Train faculty mentors and establish career mentoring
- Admit 1-2 post-doctoral students each year
- Evaluate continuity toward independence at year four
- 5. Increase master's programs matriculation and add offerings
- Continue regulatory science, pharmacology, aerospace physiology and entrepreneurship programs
- Monitor placement and career progression for graduates
- Renew the post-baccalaureate programs leading to admission to PhD and MD programs
- 6. Increase opportunities for graduate students of diverse backgrounds
- Recruit from historically Black colleges and universities (HBCUs) and develop a pipeline from Cleveland Metropolitan School District, Cleveland State University and CWRU students
- Participate in CWRU's North Star program to draw in candidates from HCBUs and other minority-serving institutions
- Recruit PhD students from CWRU's North Star initiative, Postbaccalaureate Research Education Program



- Expand collaborative efforts across the faculty members of medicine at our five institutions (Case Western Reserve, Cleveland Clinic, Louis Stokes Cleveland VA Medical Center, MetroHealth System, University Hospitals)
- Increase interdisciplinarity of the faculty members of medicine with faculty of other schools within the university

- Promote Centers and Institutes to expand transdisciplinary investigations with a translational focus
- Develop the Institute for Population and Community Health
- Develop Strategic Leadership groups
- Pursue Multi-Pl grants in priority areas of health outcomes and disparities
- Leverage institutional competencies: genomics, tissue, EHR data, populations
- Broaden cross-school links: patents & social justice with the School of Law; populations with the Jack, Joseph and Morton Mandel School of Applied Social Sciences; technology with the Case School of Engineering; discovery and environment with the College of Arts and Sciences
- Provide opportunities for faculty to engage in scholarship to expand interdisciplinary perspectives

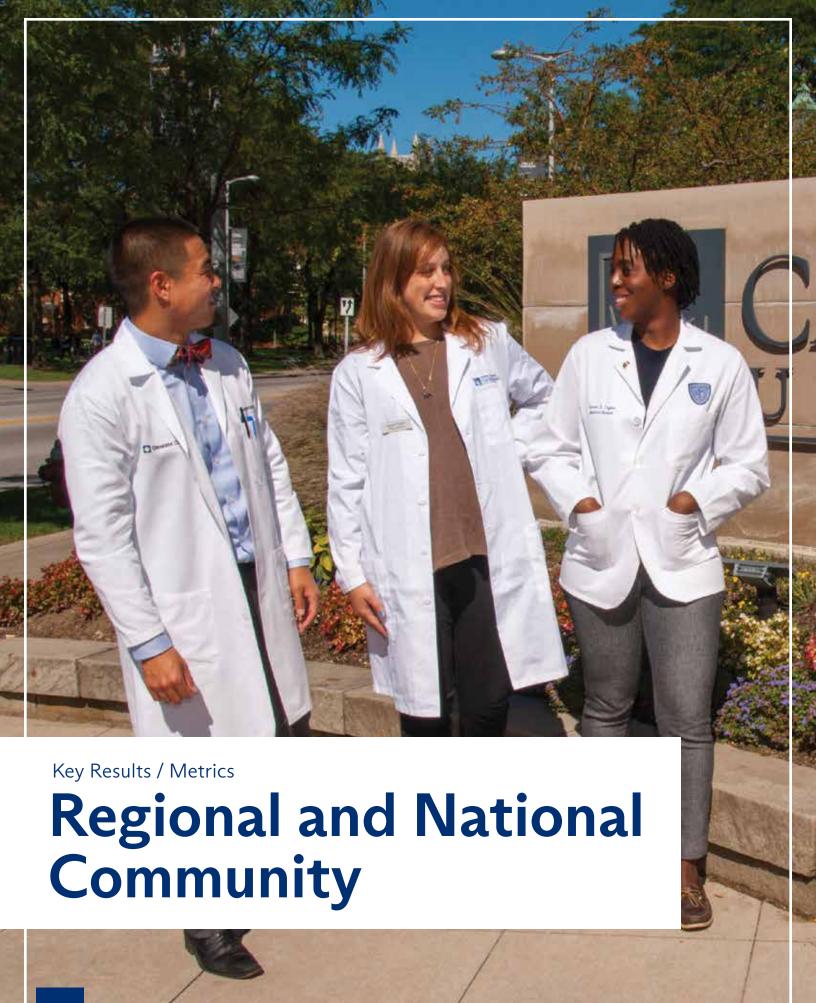




Key Results / Metrics

Clinical and Translational Research

- 1. Expand education about clinical and translational research
- Build medical research education modules for all CWRU faculty, including regulatory and compliance requirements
- 2. Plan timely dissemination of validated translational research findings from project inception to magnify impact
- Increase multi-site academic and community collaborations
- Create harmonized standard operating procedures and best practices
- · Improve access to health interventions that aim to promote health
- Expand Tech Transfer through JobsOhio to commercialization of Cleveland Innovation District
- Train a robust and community representative workforce at all levels (including community-based liaisons) who represent the community and academia
- Establish high impact educational and training programs of all disciplines and levels, both in clinical and community settings with new pathways to recruit a diverse research workforce
- Promote early research experience and mentoring for (HS, UG) students without prior health experience
- 4. Develop innovative methods for clinical and translational research to increase the participation of a cross section of community members locally and across the US in pivotal national clinical trials
- Build database of resources to support health research, including faculty, community organizations, publications, funding opportunities
- Implement locally established models for research into a regional, national or international public health or research environment
- Streamline regulatory and operations to facilitate participation of CWRU faculty in clinical and population trials
- Increase state and federal funding to demonstrate scalable implementation across the country
- 5. Establish and expand a community engagement network for clinical and translational research to position CWRU as the preferred academic collaborator with local and national community organizations
- Expand a robust and sustained community engagement network spanning emerging priority research communities (4) per year
- Create brand awareness for the CWRU CTSI as a trusted source for scientific information and opportunities
- Invest inresources for researchers, clinicians and community members/ organizations to co-lead projects, compete for research funding, disseminate and implement findings

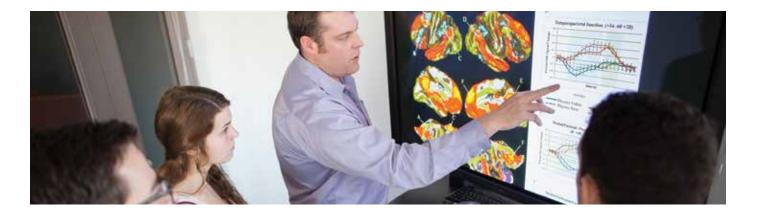




Develop Institute for Population and Community Health with CWRU-wide programs in education, research and policy change with national impact

- 2. Expand school-linked community outreach engagements to Boards of Health, schools and nonprofit groups focused on improving health of our region
- 3. Develop partnered programs in education, research and policy change for community benefit

- Link Population Health and Health Policy initiative (with MetroHealth, VA) to Urban Health Center of Cleveland State University and Cleveland Clinic
- Increase direct faculty participation in community programs and policy and guideline committees
- Engage the advice and input of the local community in large research projects
- Develop community health initiatives and implementation programs
- Create community education efforts for public health
- Establish school-wide Community Advisory Board to develop awareness of community health needs and potential interventions





- 1. Enhance the overall climate to reflect, promote and welcome excellence at every level
- Benchmark progress through a regularly scheduled climate/culture/engagement survey
- Implement and support employee education and engagement activities
- Create interactions between and among faculty and student groups to network
- 2. Improve and expand content and format of interpersonal and intrapersonal engagement of faculty, staff and students in the context of professionalism
- Enhance best practice professional development and training for search, promotion, tenure and student-facing committees
- Expand current career development and academic pathway programs
- Advocate a speak-up culture where trainees and junior faculty feel safe
- Promote the SOM Professional Code of Conduct through training and coaching
- 3. Encourage excellence in scholarship using strategies to recruit, develop, promote and retain a broad range of faculty, staff and students and academic advancement
- Promote an environment of academic advancement for all
- Provide career support from staff, trainees, faculty and leaders attentive to the academic needs
- · Review curriculum for bias
- · Unconscious bias training for all incoming trainees and faculty
- Mentor and thesis student faculty committee training in inclusivity and professionalism





- 1. Increase faculty engagement in the SOM across all five campuses
- Regularly meet with and recognize faculty contributions across all five campuses
- Increase number of faculty appointment and promotion applications across all five sites
- Increase faculty involvement in SOM governance and professional service across all five sites
- 2. Support the professional and personal development of all faculty across their career span with specific attention to individual differences
- Provide efficient and customer-centered support for faculty to ensure compliance with SOM and University guidelines
- Refine existing and develop new curricula to address the professional development needs of faculty at different stages of their careers
- Facilitate the development of safe, cohort communities for faculty
- Provide training opportunities to all faculty on best practices for establishing and maintaining a culture of inclusive excellence
- 3. Expand Faculty Development offerings
- · Expand number of faculty participating
- · Develop an emerging leaders curriculum





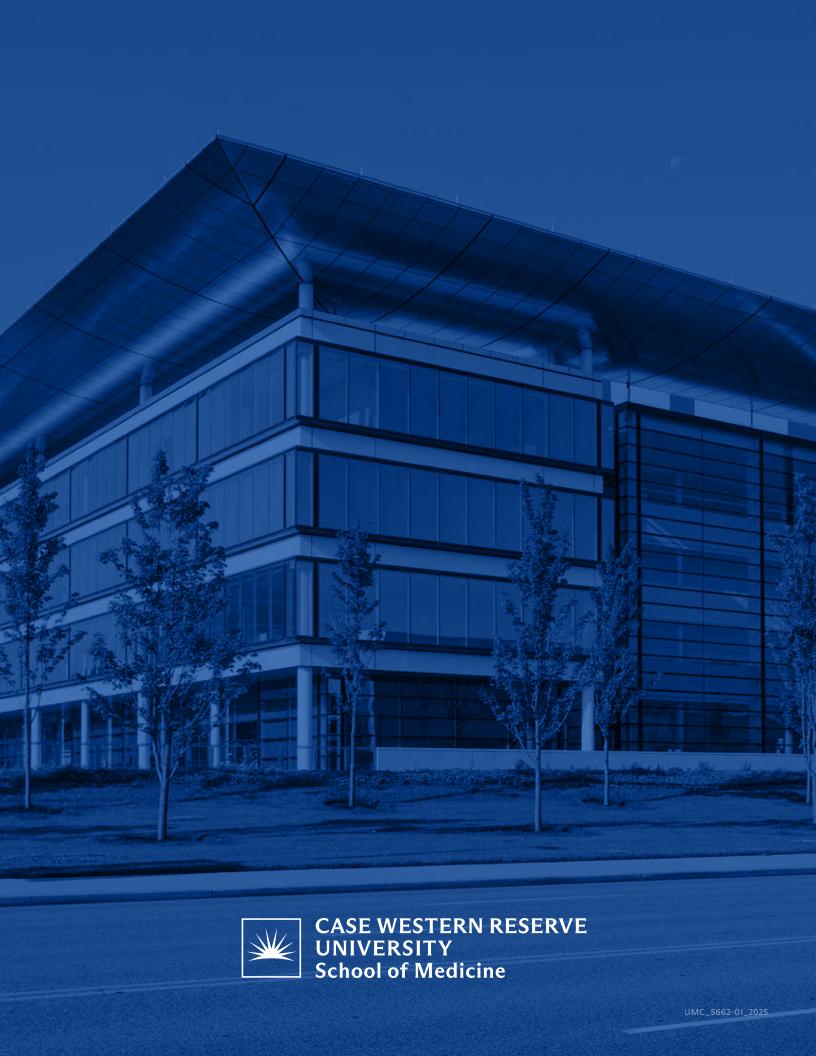
1. Align philanthropy to each research strategic priority

Raise scholarships and research support for the school's MD and graduate student programs and for transition to faculty

3. Expand school-based community outreach with focus on population and urban health

- Expand faculty and faculty through endowed professorships, including the Dean's Scholars Program
- Support growing research activities into funded centers
- Provide topical support for priority new initiatives
- Increase scholarship support per year to medical and graduate students through philanthropy
- Increase support for Pathway programs including stipend and student project support
- Scholarships for graduate education and masters to offset student stipends
- Endow the Dean's Scholars Program
- Establish the Institute for Population and Community Health







Faculty Council Meeting Draft Meeting Minutes February 17, 2025

Timing	Agenda Item	Presenter	Summary of discussion	Action items/Motions/ Votes
4:02-4:17PM	Chair's Remarks and Announcements	Alan Levine Chair of Faculty Council	The chair called the meeting to order at 4:02PM. Dr. Levine welcomed everyone to today's hybrid Faculty Council Meeting – in person at CCLCM and via Zoom. He noted that Dr. James Stoller will hold a Fireside Chat on February 18 from 5:00-6:30PM in the Wolstein Auditorium and Lobby (flyer is included in the Faculty Council BOX folder).	
			Dr. Levine reminded the council members that it is their responsibility to take what we do at Faculty Council and transfer it back to their appropriate constituents. Conversely, members are to gather information, beliefs, and concerns from their constituents and bring them forward to him and the FCSC, and when appropriate to address the topic at Faculty Council.	
			A town hall will be held on Thursday, February 20, organized by Faculty Council in conjunction with Dean Gerson, in the Wolstein Auditorium from 10:00-11:00AM (Livestream option available), to discuss how the university should respond. This is a private conversation among faculty of CWRU SOM (nothing is being recorded). The dean has requested a list of topics we would like to be covered on Thursday. Today's conversations will cover how should we respond, who should we reach out to, how are our partner institutions managing this and how will this impact the finances of the affiliates?	
4:17-4:18PM	Approval of January 27 Faculty Council Meeting Minutes	Alan Levine	When polled, there were no edits to the January 27 Faculty Council Meeting minutes as posted in BOX.	With no objections, the January Faculty Council Meeting Minutes were approved by general consensus.
4:18-4:22PM	Faculty Council Steering Committee Report	Anastasia Rowland- Seymour	Dr. Rowland-Seymour attended the Faculty Council Steering Committee Meeting on February 3, and provided a summary of the topics covered at that meeting.	

4:22-4:24PM	Senate/ExCom Report	Matthias Buck	Matthias Buck noted that the campus master plan includes building projects totaling \$135million which are currently in play. The ExCom, led by past chair, Maureen McEnery, has voted to create an ad hoc committee to formulate procedures for merging, dividing and naming departments. Dr. Buck stated that insurance for post docs is on the Senate ExCom's agenda.	
4:24-4:32PM	Acknowledgment/Vote on NEC Charge	Alan Levine	Everything on our website needs to be accurate and up-to date for the LCME review. The NEC charge was brought forward to the NEC members to see if the charge was appropriate and to Bylaws to make sure it was consistent with the bylaws. Currently there is no NEC Chair; Dr. Rowland-Seymour will represent the NEC. At the NEC meeting the charge was approved and is moving forward. Tom Collins, Chair of the Bylaws Committee, stated that the Bylaws Committee deemed the charge consistent with what is in the bylaws and updated language on the web page. The date of the new charge will be February 17, 2025.	A motion was made by a Faculty Council representative and seconded by a Faculty Council representative to accept the updated NEC charge. Vote: 47 were in favor, 1 was against, and 15 abstained. The motion is approved.
4:32-4:37PM	SOM CAPT Annual Report	Siran Koroukian and Mamta Singh (Co-Chairs)	Drs. Koroukian and Singh presented the SOM CAPT Annual Report with a summary of activities for the academic year 2023-2024. Seven tenured candidates were considered for promotion to professor with 7 positive recommendations from the CAPT, dean and Provost. Twenty-three were nominated to professor NTT (13 female and 10 male) with 23 receiving positive recommendations from the CAPT, dean and provost. Five candidates (all women) received positive recommendations from the CAPT, dean and provost for award of tenure. There was one candidate for promotion to assistant professor in the tenure track with positive recommendations from the CAPT, dean and provost. The largest category for promotion was to associate professor NTT (31 female and 30 male applicants) with 53 initial CAPT recommendations. Eight appeals were all successful with 61 final positive recommendations from the CAPT, dean and provost. There were 97 total promotions with a 100% success rate. Dr. Koroukian credited the high success rate to the very stringent vetting process at the department level making it ready for review by the time it reaches the CAPT. She thanked the committee members for their tremendous amount of work and dedication required to evaluate each application.	

4:37-4:56PM	Remarks by Dean Gerson	Stan Gerson	Dean Gerson stated that a public announcement will soon be	
1.57 1.501 111	Termanic of Dean Gerson	2 0015011	made announcing the selection of one chair and two interim	
			chairs. The announcement is being delayed because notification	
			just took place today. The university has been quite preoccupied	
			with the federal executive orders and while they have been	
			responding to them effectively, he didn't think any of them could	
			review if we are in status quo. Members should work through	
			Faculty Council, collectively, to come up with whatever	
			questions they would like addressed at Thursday's meeting.	
			There is a variety of incredibly sensitive touchpoints; one being	
			the area of DEI. The Dean stated that our plan has been adjusted	
			appropriately and he didn't think we are losing anything in the	
			process. There will be a response by the university in the next	
			day or so regarding the colleague letter received by many over	
			the weekend and commented on extensively in the press. We	
			feel we are fully compliant with the additional realm of	
			responsibility that was attempted to be stated in the colleague	
			letter, but not necessarily 100% aligned with the language as it	
			speaks to different perspectives on judicial departments.	
			speaks to different perspectives on judicial departments.	
			The gap might prove to be as much as \$40-80 million and one	
			can speculate on the impact on the NIH budget final resolution	
			of IDC, of conversation about what to do about it, and the	
			appropriateness of what a reasonable resolution in the IDC ought	
			to be. Taxing and endowments are being discussed. There are	
			incredibly thoughtful responses, perspectives and contingency	
			plans taking place in the university.	
			The Dean felt that responding to unfair attacks against Cleveland	
			Clinic is not productive. Extrapolating to the bigger picture,	
			individuals that approach within the umbrella of executive	
			orders have created a very clear perspective to the ability to	
			pursue such approaches within the confines of administration	
			approval and therefore they come close to the law of the land,	
			unless the judicial system prevents them from doing so. Aligning	
			and maintaining our values is doable.	
			There could be situations where the recently initiated NIH grants	
			are withdrawn, but the Dean thinks it is fair to say that funded	
			awarded grants should be spent appropriately, and in a timeline	
			which will completely run through the annual award by the	
				2

	Remarks by Dean Gerson (continued)		renewal date of that particular grant. There is no reason to not spend a current grant. The double message here is to spend grants while being conscientious and careful with expenditures that are not grant-funded in the research. Grant-funded positions should be posted open and completed while making sure HR appreciates your need to have the position filled. Dr. Levine will collect and forward to the dean any questions for the meeting on Thursday, at 10:00AM at Wolstein Auditorium.	
4:56-5:18PM	Discussion of Budget Concerns	Craig Hodges	As Craig Hodges has only recently become chair of the Committee on Budget, Finance and Compensation, the committee's annual report will be postponed to May or June. Dr. Hodges also serves on the Finance Committee of the Senate and will provide a summary of the last meeting. He is soliciting questions and issues that should be addressed by the committee in the next few months. Case has been operating on a \$9 million surplus with endowments currently at \$2.5 billion. \$46 Million in withdrawals have been made in the last six months of 2024 with \$30 Million in returns. Some investments are doing quite well. The master's programs are the big reason for the reduction in our income in the SOM. Dipping into the endowments could be the answer, however it could affect generational investments. These discussions may be quite different after IDC cuts come through. Keeping on top of salary equity, gender and minority status continues to be looked at by the committee. Dr. Hodges will speak with past chairs about professors who have received generous packages, while associate professors continue to be the least rewarded. In the past, progression from assistant, associate, and to full professor was looked at for the limited promotion increases which made it difficult to keep track with the AAMC for those three positions. Faculty Council reps should feel free to disseminate AAMC information with their department members. Dr. Merrick noted it was released only a month ago and that basically the numbers are going to be two years behind faculty salaries that begin July 1.	
5:18 –5:36PM	Conversation about NIH Policy and How Faculty Council Can or Should Respond		This topic came up twice at the FCSC. The two-prong question is what concerns should we articulate; and if we do, who do we direct it to (internally with suggestions to the dean, to the provost, to the BOT, or externally to newspapers, politicians /	

	Conversation about NIH Policy and How Faculty Council Can or Should Respond (continued)	lobbyists)? It was suggested that Faculty Council (considered a safe place for this type of discussion) could have one session where people only discuss this particular issue and formulate a combined response which can be put into action. The best chance could be to work via a mix of the governor and politicians in power to promote the concept that cutting healthcare research is not beneficial to anyone, employing the best strategy and empowering any voice coming from academia and healthcare research. Suggestions were made to make appointments with representatives and senators in Cleveland with 2-3 members of Faculty Council for an open discussion, working via the governor or RFK, Jr. in a way we, in healthcare, not just Case, speak more broadly as the NIH funded community. Hearing what the various universities have to say will be the best chance of opening channels of communication and promoting understanding of the great value of biomedical research and how it affects the fringes of society with these cuts. The return on investment for the State of Ohio is 2.6% and there is an economic impact to the State of Ohio and the country as a whole. https://www.unitedformedicalresearch.org/nih-in-your-state/
5:36-5:37PM	New Business	Passed in favor of time.
5:37-5:38PM	Good and Welfare	The Faculty Council meetings have already been hosted by MHMC and VA. Today's meeting is hosted by CCLCM and the April 28 Faculty Council Meeting will be hosted by UH.
5:38PM	Adjourn	There being no further agenda items to address, the chair adjourned the meeting at 5:38PM.

Present

Blaine (Todd) Bafus Calen Frolkis Qingzhong Kong **Ruben Olivares** Paul Shaniuk Stephanie Barnes Lisa Gelles **Bret Lashner** Monica Montano **Emily Hamburg-Shields** Kavita Bhatt Stan Gerson Stephen Leb Nona Nichols Ben Schwan Ramy Ghayda **Matthias Buck** Alan Levine Elizabeth Painter Bryan Singelyn

Hulya Bukulmez Adrienne Callahan Wayne Cohen-Levy	Keshava Gowda Andrew Harris Sheronica James	David Ludlow Janice Lyons Claudio Milstein	Abigaill Raffner (Basson) Elizabeth Rainbolt Rania Rayes-Danan	Michael Staudt Phoebe Stewart Nami Tajima
Thomas Collins	Venkatesh Kambhampati	Michael Moffitt	Anastasia Rowland-Seymour	Patricia Taylor
Marta Couce	Hung-Ying Kao	Nona Nichols	Ben Schwan	Gregory Videtic
Nadim El Chakhtoura	Sadu Karnik	Rebecca Obeng	Hemalatha Senthilkumar	Scott Williams
Jeremiah Escajeda	Camilla Kilbane	Sarah Ondrejka	Demitre Serletis	Raed Zuhour
Jessica Fesler				
Not Present				
Robert Abouassaly	Patrick Collier	Eric W. Kaler	Susan Linder	Neal Peachey
Joshua Arbesman	Meelie DebRoy	Gaby Khoury	Dan Ma	Cyrus Rabbani
Mohammad Ansari	Mackenzie Deighen	Sadashiva Karnik	Tani Malhotra	Deven Reddy
Elvera L. Baron	Rachael Gowen	Sandeep Khanna	James Martin	Ann Rivera
Corinne Bazella	Bahar Bassiri Gharb	Christina Krudy	Raman Marwaha	Tamer Said
Maura Berkelhamer	Amy Hise	Ang Li	Amy McDonald	Matthew Sikora
Melissa Bonner	Jason Ho	Jennifer Li	Christopher McFarland	Simi Singh
Francis Caputo	Vanessa Ho	Shawn Li	Gillian Michaelson	James (Jim) Strainic
Andy Chen	Maeve Hopkins			
Othora Duocout				
Others Present	Nicolo Domina	Counties Kode	Milliams Manusials	Cinavan Cinah
Shane Angus	Nicole Deming	Cynthia Kubu	William Merrick	Simran Singh
Sarah Augustine	Adrianne Fletcher	Lia Logio	Charlene Pan	Madelyn Stevens
Robert Bonomo	Trish Gallagher	Donald Mann	Ashwini Pandit	Usha Stiefel

Lina Mehta

Fred Schumacher

Joyce Helton

Rui Cao

Cleveland Clinic Research

March 24, 2025

Donna Driscoll, PhD Associate Chief, Research Faculty Affairs



Research

Researching for health.

- > **\$520M** research funding
- > 3,655 research projects
- > 5,669 active IRB studies
- > **235** labs



New Research Associate Chiefs



Kurt Spindler, MD

Clinical Research



Jae Jung, PhD

Emerging Science & Technology



Chris Moravec, PhD

Research Training



Donna Driscoll, PhD

Research Faculty
Affairs

Cleveland Clinic + Case Western: Partners in Research and Medicine

- Cleveland Clinic Lerner College of Medicine
- Molecular Medicine PhD program
- Research faculty appointments in Department of Molecular Medicine, School of Medicine
- Case Comprehensive Cancer Center



Jonathan Smith, PhD
Director, Molecular Medicine
PhD Program

Ohio Discovery Corridor + Cleveland Innovation District







Cleveland Clinic | Canon

- Innovative imaging research partnership
- Collaborative projects on cardiology, neurology and musculoskeletal imaging



Cleveland Clinic | IBM Discovery Accelerator





Discovery Accelerator University Partnership

Free 3-month pilot access to quantum computer

Access to education modules

Access to investigators

Joint research projects

Have a project idea?
CWRU Contact: Vipin Chaudhary
vipin.chaudhary@case.edu

More information: ComputationalLifeSci@ccf.org



Cleveland Clinic BioRepository



Storing 1.2M biospecimens from 64 studies



220K biospecimens from **18K** patients readily available for research

Shared Laboratory Resources

Providing advanced technologies, equipment and expertise to support laboratory, translational and clinical research

Learn more: www.lerner.ccf.org/cores



Shared Laboratory Resources

Ohio

Cell Culture

Center for Therapeutics Discovery

Cleveland Clinic BioRepository

Clinical Research Unit*

Computing Services*

Flow Cytometry

Genomic Medicine BioRepository*

Genomics

Glassware*

Hybridoma**

Laboratory Diagnostic

Media Preparation

Microbial Culturing & Engineering

Microbial Sequencing & Analytics

Molecular Biotechnology
Proteomics & Metabolomics

Center for Immunotherapy & Precision Immuno-Oncology

Computational Immunology Platform

Discovery Lab

Immunomonitoring Lab

Imaging

Electron Microscopy

Histology

Immunohistochemistry

Light Microscopy

Medical Device Solutions

BioRobotics

Electronics

Engineering (3D Printing, Nitinol)

Instrument Refurbishing & Repair

Mechanical Prototyping

Polymer

Florida

Bioinformatics

Flow Cytometry

Imaging

BSL-3

^{*}Cleveland Clinic clients only **Inquire

Global Research, Education + Innovations







Cleveland Clinic

Every life deserves world class care.

CET-CT: CLINICAL ETHICS, GRADUATE CERTIFICATE

In Workflow

- 1. University Registrar Review (jpn30@case.edu; rgs111@case.edu)
- 2. Graduate Studies Dean Review (lxh5@case.edu; mxn83@case.edu)
- 3. BETH Chair (mpa5@case.edu)
- 4. MED Library Review (jed115@case.edu; twh7@case.edu)
- 5. MED UTech/International Affairs Review Vote (mxr854@case.edu; tmo13@case.edu; exa313@case.edu)
- 6. MED Graduate Education Office Review (mcb19@case.edu; mwj7@case.edu)
- 7. MED Graduate Education Committee (npz@case.edu)
- 8. MED Faculty Committee (nmd11@case.edu)
- 9. MED Dean (slg5@case.edu; sxr406@case.edu)
- 10. Graduate Studies Dean Review (lxh5@case.edu; mxn83@case.edu)
- 11. Faculty Senate Graduate Studies Committee (lxh5@case.edu; hdb@case.edu)
- 12. Faculty Senate Executive Committee (krm78@case.edu)
- 13. Faculty Senate (krm78@case.edu)
- 14. President's Office (krm78@case.edu)
- 15. Board of Trustees (krm78@case.edu)
- 16. Provost Office ODHE (Graduate) (lxh5@case.edu; mxn83@case.edu)
- 17. Provost Office HLC (dlf4@case.edu)
- 18. University Registrar SIS Updates (hle@case.edu; ysd1@case.edu; jpn30@case.edu; rgs111@case.edu)
- 19. GRAD Updates (lxh5@case.edu; wtc22@case.edu)
- 20. Bulletin Updates Univ Registrar (jpn30@case.edu; rgs111@case.edu)

Approval Path

 Mon, 22 Apr 2024 18:00:00 GMT Jeremy Naab (jpn30): Approved for University Registrar Review

2. Mon, 22 Apr 2024 18:17:26 GMT

Lynmarie Hamel (lxh5): Approved for Graduate Studies Dean Review

3. Mon, 22 Apr 2024 22:16:16 GMT

Mark Aulisio (mpa5): Approved for BETH Chair

4. Wed, 08 May 2024 19:40:23 GMT

Thomas Hayes (twh7): Approved for MED Library Review

5. Wed, 29 May 2024 09:51:29 GMT

2/3 votes cast. Yes: 100% No: 0%

Approved for MED UTech/International Affairs Review Vote

6. Fri, 22 Nov 2024 23:44:08 GMT

Malana Bey (mcb19): Approved for MED Graduate Education Office Review

7. Mon, 25 Nov 2024 18:28:03 GMT

Nicholas Ziats (npz): Approved for MED Graduate Education Committee

New Program Proposal

Date Submitted: Mon, 22 Apr 2024 17:33:31 GMT

Viewing: CET-CT: Clinical Ethics, Graduate Certificate

Last edit: Thu, 31 Oct 2024 17:40:44 GMT Changes proposed by: Olubukunola Dwyer (omt3)

Reviewer Comments

Jeremy Naab (jpn30) (Thu, 17 Oct 2024 16:03:48 GMT): For any questions, please contact Mark Aulisio

Requestor Information

Name

Olubukunola Dwyer

E-mail

omt3@case.edu

Network ID

omt3

Department

Bioethics

School

School of Medicine

Are you completing this form on behalf of someone?

Yes

Contacts

Name	E-mail	Network ID
Mark Aulisio	mpa5@case.edu	mpa5

Effective Date Information

Effective Term

Fall

Effective Year

2024

Program Information

Program Type

Degree/Program/Major/Certificate

Program School

School of Medicine

Program Department

Bioethics

Does the proposal involve instruction, coursework or any resources from other departments or schools?

DUE:

Academic Level

Graduate

Degree/Credential

Graduate Certificate

I have consulted with the CWRU representative to the Ohio Department of Higher Education (ODHE) prior to submitting this form

Yes

Program Title

Clinical Ethics, Graduate Certificate

Minimum credit hours required for completion

15

Completion Time (years)

1

Will the proposed program follow standard academic calendar for your school?

Yes

Program Location

Main campus/Cleveland

Does this program follow the standard academic load for your school?

Yes

Academic Technology

Which academic and/or research technology resources will be used in this program (both online and in the classroom)?

The recordings of these lectures will be made available to students so that they can view them whenever they need to. Canvas will be used for the management of all courses.

Will any course in this program be offered online?

Yes

Is it possible for a student to take over half of the courses online?

Yes

Please provide additional details about online content

Live online courses will be offered via an online platform such as Zoom.

Will there be computing resources or data storage resources needed in this program beyond faculty and students' personal computers?

No

Will this program require applications not currently available through the university or the Software Center?

No

Do you anticipate needing additional technologies beyond what is already available in our Technology Enhanced Classrooms (TECs) and online (e.g., Canvas, Zoom, Echo360)?

No

Will this program require technical support beyond what is available through the Help Desk?

No

Program Rationale

Program Description

The graduate certificate in Clinical Ethics (CE) is a program geared towards providing professionals from various health care disciplines with foundational knowledge of clinical ethics or to enhance the backgrounds of those already working with this field. The objectives of this program include providing the skills necessary to describe and apply essential ethical theories and methodology, participate in clinical ethics consults, recognize ethical quandaries and the various advisory functions that can be performed, gain knowledge about current bioethical controversies and how to manage them.

Justification

This certificate program is uniquely geared towards existing health professionals who want to initiate or augment knowledge within the field of clinical ethics. The Department of Bioethics is solely qualified to provide such a program. The department houses the Bioethics Phd, Masters in Bioethics and Medical Humanities, and four centers that address issues and topics related to clinical ethics. The majority of the current faculty in the DOB train graduate students and healthcare professionals in the core concepts of clinical ethics. Because we anticipate that the majority of the students interested in this program will be working part or full time, we anticipate that the majority of our students will be taking this program on a part-time basis. Although the program can be completed in one year by a full-time student, part time students could take one course per semester and complete the program in 2-3 academic years (6 semesters).

Program Requirements (will appear in General Bulletin)

Program Requirements

The Certificate in Clinical Ethics will be available to students who have completed doctoral or relevant terminal degree programs (e.g. MD, PhD, JD, EdD, MDiv, MSW, MFA, MSN, DNP). All courses will be offered in a live, lecture/small group format with recorded sessions which will be available over the internet, with the exceptions of BETH 428, BETH 4XX Practicum/Capstone, and elective courses. This certificate program in Clinical Ethics will require 15 credit hours of coursework completed with a final GPA greater than 3.0 in 15 hours of graduate coursework.

Sample Plan of Study

Full time students will follow the Plan of Study listed below to complete the program in two semesters. Part-time students can complete the program by taking as few as one 3 credit hour course each semester over six semesters. All students must begin the program in a fall semester by taking Foundations in Bioethics and Medical Humanities, followed by Foundations in Bioethics and Medical Humanities II in the spring semester.

	Total Credit Hours	15
	Credit Hours	6
ELECTIVE	Course ELECTIVE Not Found (Select from list of approved electives.)	3
BETH 4XX	Course BETH 4XX Not Found (Ethics Consultation Shadowing Practicum/ Capstone)	1.5
BETH 428	Clinical Ethics Consultation Simulation Course *	1.5
Spring		
	Credit Hours	9
BETH 422	Clinical Ethics: Theory & Practice	3
BETH 401	Foundations in Bioethics and Medical Humanities I	6
Fall		Credit Hours
First Year		

^{*} May be waived depending on clinical background and availability.

Approved Electives:

Code Title C	ours
BETH 409 Aging, Ageism, and Embodiment	3
BETH 412 Ethical Issues in Genetics/Genomics	3
BETH 420 Disability Bioethics	3
BETH 423 Neuroethics	3
BETH 429 Mental Health Ethics and Society	3

Or equivalent course approved by advisor and certificate director.

Concentration/Track/Field of Study

Does this program have any concentrations?

No

Program Learning Outcomes

Program Learning Outcomes

Learning Outcome

Outcome 1

A graduate of the Certificate in Clinical Ethics program would be able to enhance their existing health care professional background so that they can more effectively fulfill their clinical ethics related responsibilities. At the end of this program, students will have obtained the foundational knowledge and skills identified in the Core Competencies of Health Care Ethics Consultation and necessary to pass the healthcare ethics consultant certified exam set by the American Society for Bioethics and Humanities (additional qualifications for the certification are required). The competencies and exam focus on moral reasoning and ethical theory, common health care ethics issues and concepts, ethical assessment skills, process skills related to clinical research design and methodologies, health care law, and ethical research and practice. Additional competencies in the assessment of factual information about healthcare ethics concerns, social and cultural contextual factors impacting cases, analysis of ethical issues and conflicts to be resolved, process alignment with health care ethics competencies, and the evaluation of outcomes and implications of ethics consults will need to be demonstrated.

Attachments

Attach File (optional)

Resource_Review_Ethics.docx CE_ClinicalEthics.xlsx Resource_Review_Ethics_Commentary.docx

End of Initiator Submission (save or submit at bottom of form)

Library Resources

Library Review

To be completed by Library staff

Report prepared by [librarian]

Thomas W. Hayes, MLS

Minimum additional resources

Current staffing is adequate

Yes

Library Technology resources

Fully Adequate

Library Content resources

Partially Adequate

Adequacy of current content resources

Books

Partially adequate

Additional resources required

Doody Core Titles

One-time Costs (\$)

\$1,393.75

Recurring Costs (\$)

\$500

Journals

Partially adequate

Additional resources required

Scopus Ranked Journals

One-time Costs (\$)

\$2,338

Recurring Costs (\$)

\$500

Databases

Fully adequate

Media

Fully adequate

Total One-time Costs (\$)

\$3,731.75

Total Annual Recurring Costs (\$)

\$1,000

Do you support this proposal?

Yes

Administrative Information

Effective Bulletin Edition

To Be Determined

CIM Program Code

CET-CT

Key: 464

CET-CT: Clinical Ethics, Graduate Certificate Department of Bioethics

Goal: The graduate certificate in Clinical Ethics (CE) is a program geared towards providing professionals from various health care disciplines with **foundational knowledge of clinical ethics** or to **enhance the backgrounds** of those already working with this field. The objectives of this program include providing the **skills necessary to describe and apply essential ethical theories and methodology**, **participate in clinical ethics consults**, recognize **ethical quandaries and the various advisory functions** that can be performed, gain knowledge about current bioethical controversies and how to manage them.

Approvals: 04/22/2024 Approved for University Registrar Review

04/22/2024 Approved for Graduate Studies Dean Review

04/22/2024 Approved for BETH Chair

05/08/2024 Approved for MED Library Review

05/29/2024 Approved for MED UTech/International Affairs Review Vote

11/22/2024 Approved for MED Graduate Education Office Review 11/25/2024 Approved for MED Graduate Education Committee

Timeline: Aim to enroll the first class in Fall 2025.



Committee for Biomedical Research

2024 Summary

CBR Meetings 2024

Thursday Decem	ber 14	
Time	Name	Center
3:00 - 3:30 pm	Rong Xu	Center for Artificial Intelligence in Drug Discovery
3:30 - 4:00 pm		Closed session for voting members of CBR
Thursday January	<i>t</i> 25	
Time	Name	Center
3:30 - 4:00 pm	Jason Mears	Center for Mitochondrial Research and Therapeutics
Thursday Februa	ry 22	
3:00 - 3:30 pm	Grace McComsey	IRB
Thursday March 2	28	
3:00 - 3:30 pm	John Wang	Genetics and Genome Sciences
3:30 - 4:00 pm	Peter Hovmand	Center for Community Health Integration
Thursday April 25	j	
3:00 - 3:30 pm	Michael Oakes	Research Administration
Thursday May 23		
3:00 - 3:30 pm	Robert Bonomo	Case VA CARES
3:30 - 4:00 pm	Erika Trapl	Prevention Research Center for Healthy Neighborhoods
Thursday Septem	nber 26	
3:00 - 3:30 pm	Sudha Chakrapani	Pharmacology
Thursday Octobe	or 24	
3:00 - 3:30 pm	Drew Adams	Drug Development Program
Thursday Novem		
3:00 - 3:30 pm	Derek Taylor	Core Facilities
Thursday Decem	ber 19	
3:00 - 3:30 pm		Al in the SOM

Major Issues Discussed

- Al in School of Medicine
- IRB

Generative AI in Medical Education

- Assessing how LLMs handle essay-type questions and evaluating whether faculty can distinguish LLM-generated responses from student submissions
- Student use of LLMs in essay-type assignments to enhance problem-solving and critical thinking skills
- Development of virtual patients for teaching communication skills and tutors for classroom preparation
- Generation of USMLE Step 1-style multiple-choice questions
- Chatbots to revise problem-based learning cases



Medical Education Gen Al Needs

- Google's NotebookLM activated for all faculty and students – ACCOMPLISHED
- ChatGPT accounts for use in medical education so students can benefit from custom GPTs specific to their learning needs
 - Two classes of 184 x 2 preclinical students
 - 4 student sharing per account?
 - 92 accounts
 - \$20/month = \$1840/month
 - Educational pricing?



Medical Education Gen Al Needs

Development of Generative AI-Driven Applications:

- Looking ahead, we envision building Generative AI-powered applications hosted within the university's secure environment. These applications would utilize APIs from platforms like ChatGPT or other Large Language Models (LLMs) to create tools that enhance teaching, learning, and clinical training.
- This approach would eliminate the need for individual student accounts and instead incur costs based on token usage. To support this initiative, we request resources for a dedicated AI programmer at 50% FTE initially, to develop, refine, and maintain these applications.
- Cost Considerations: The cost of token usage is difficult to estimate
- Based on regional data, a mid-level AI programmer in the Midwest USA earns an annual salary ranging from \$85,000 to \$130,000. A 50% FTE would therefore cost approximately \$42,500 to \$65,000 annually.
- 100 paid ChatGPT accounts for 12 months = \$22,080.



IBMS450 Data Science and AI in Biomedicine: Introduction and Applications

Leads: Jacob Scott, Satish Viswanath

• Focus:

- Cutting-edge computational methods in biomedical research. Moving beyond traditional biostats approaches, the curriculum emphasizes AI, machine learning, and state-of-the-art techniques in genomics and transcriptomics.
- Students will gain an appreciation of the kind of research questions that are pursued and the diversity of methods used to analyze large, complex, biological data.
- Aims to prepare students for the evolving landscape of computational biology and its applications in molecular and biomedical research.

• Learning Objectives: Provide students with a sense of the range of computational skills and knowledge necessary to analyze big complex biological data and to model their intricate biological processes, preparing them for the future of molecular and biomedical research.

Course Organization

- Fundamentals of bioinformatics: introduction to a range of bioinformatic approaches currently being used, from the techniques themselves, to analysis methods, to interpreting results.
- Coding bootcamp: 4 hands-on practical sessions using Google Collaboratory and markdown style coding notebooks.
 - Introduction and basics
 - Packages, functions, data/frames
 - Visualizing data, gplot / matplotlib / seaborn
 - Bioinformatics in practice, reconstruct a figure
- Special topics: applications of AI and machine learning to biomedicine.
 - Radiomics and medical imaging
 - Cancer epigenomics
 - Ethics and privacy issues
 - Mathematical modeling of tumor and pathogen growth and evolution
 - Sequencing bacteria and the microbiome

Thus far...

- First offered Fall 2024
 - 80 students, 1st year students from the BSTP program
 - Range of disciplines: SYBB, Biology, Chemistry, PQHS etc.
 - Course rating: 3.60
 - Feedback recommended more dedicated resources, better organization, and interactions with other courses

Needs + next steps

- Dedicated instructor funds + effort for course directors
- Expand Section 2 Bootcamp into a mini-course on Python & R
 - Also requested in course evaluations
- Course coordinator in order to...
 - Leverage IBMS 450 together with other introductory courses
 - Tie together cross-disciplinary AI courses across CWRU (BME, SYBB, PQHS, CSE) to form a comprehensive certificate program on "AI for Biomedicine"
 - Ensure sustainability of program through partial tuition cost recovery

2025 Agenda

- Tech Transfer changes-Dan Pendergast 1/23/25
- NIH Changes 2/7/25 and 3/27/25
- New/Junior Faculty?
- Major challenges at CWRU?

Committee for Biomedical Research

2024 Summary

CBR Meetings 2024

Thursday Decem	ber 14	
Time	Name	Center
3:00 - 3:30 pm	Rong Xu	Center for Artificial Intelligence in Drug Discovery
3:30 - 4:00 pm		Closed session for voting members of CBR
Thursday January	<i>t</i> 25	
Time	Name	Center
3:30 - 4:00 pm	Jason Mears	Center for Mitochondrial Research and Therapeutics
Thursday Februa	ry 22	
3:00 - 3:30 pm	Grace McComsey	IRB
Thursday March 2	28	
3:00 - 3:30 pm	John Wang	Genetics and Genome Sciences
3:30 - 4:00 pm	Peter Hovmand	Center for Community Health Integration
Thursday April 25	j	
3:00 - 3:30 pm	Michael Oakes	Research Administration
Thursday May 23		
3:00 - 3:30 pm	Robert Bonomo	Case VA CARES
3:30 - 4:00 pm	Erika Trapl	Prevention Research Center for Healthy Neighborhoods
Thursday Septem	nber 26	
3:00 - 3:30 pm	Sudha Chakrapani	Pharmacology
Thursday Octobe	or 24	
3:00 - 3:30 pm	Drew Adams	Drug Development Program
Thursday Novem		
3:00 - 3:30 pm	Derek Taylor	Core Facilities
Thursday Decem	ber 19	
3:00 - 3:30 pm		Al in the SOM

Major Issues Discussed

- Al in School of Medicine
- IRB

Generative AI in Medical Education

- Assessing how LLMs handle essay-type questions and evaluating whether faculty can distinguish LLM-generated responses from student submissions
- Student use of LLMs in essay-type assignments to enhance problem-solving and critical thinking skills
- Development of virtual patients for teaching communication skills and tutors for classroom preparation
- Generation of USMLE Step 1-style multiple-choice questions
- Chatbots to revise problem-based learning cases



Medical Education Gen Al Needs

- Google's NotebookLM activated for all faculty and students – ACCOMPLISHED
- ChatGPT accounts for use in medical education so students can benefit from custom GPTs specific to their learning needs
 - Two classes of 184 x 2 preclinical students
 - 4 student sharing per account?
 - 92 accounts
 - \$20/month = \$1840/month
 - Educational pricing?



Medical Education Gen Al Needs

Development of Generative AI-Driven Applications:

- Looking ahead, we envision building Generative AI-powered applications hosted within the university's secure environment. These applications would utilize APIs from platforms like ChatGPT or other Large Language Models (LLMs) to create tools that enhance teaching, learning, and clinical training.
- This approach would eliminate the need for individual student accounts and instead incur costs based on token usage. To support this initiative, we request resources for a dedicated AI programmer at 50% FTE initially, to develop, refine, and maintain these applications.
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SOM Committee on Women and Minority Faculty Council Update

March, 2025 Amy G. Hise, MD MPH (Chair)

SOM Committee on Women and Minority Faculty

2024-2025

Amy Hise, MD, MPH, Chair (2025) (Full prof)

Department of Pathology – SOM Department of Medicine - VA

Bushra Abdul Aleem (2025) (Assist prof)

Department of Anesthesia - Metrohealth

Katarina Greer, MD (2026) (Assoc Prof)

Department of Medicine – VA &UH

Julia Knopes, PhD (2027) (Instructor)

Department of Bioethics - SOM

Vanessa Maier, MD, MPH (2026) (Assist prof)

Department of Family Medicine - Metrohealth

Devashis Mukherjee, MD, MS (2025) (Assist prof)

Department of Pediatrics and Neonatology – UH Rainbow

Patrick Osei-Owusu, PhD (2026) (Assoc Prof)

Department of Physiology and Biophysics

Candis Platt-Houston, MD (2027)(Assist prof)

Department of Pediatrics - Metrohealth

Neena Singh, MD, PhD (2027) (Full Professor)

Department of Pathology, SOM

Mona Gupta, MD (ex officio)

Associate Professor, Medicine and Geriatrics, CWRU President, WFSOM

Cynthia Kubu, PhD (ex officio)

Professor, Department of Neurology – CCLCM Professor, Dept of Bioethics Vice Dean for Faculty

Adrianne Fletcher, PhD (ex officio)

Assistant Professor, Jack, Joseph and Morton Mandel School of Applied Social Sciences Vice Dean for Academic Community and Engagement

SOM Committee on Women and Minority Faculty

- Meetings 2024-25:
 - Once a month, 2nd Wed 5pm, zoom
- Activities/Topics of Discussion:
 - Meeting with Dean Gerson and VD Kubu
 - Discussed anti-DEI legislative efforts and plans of SOM
 - DEI activities of FS Committees, CWRU ODEIE, SOM Offices
 - Visibility of LGBTQIA+ activities/resources/OUTlist-AllyList
 - Meetings with chairs: Marie Crandall (Chair Surgery MetroHealth)
 - Salary equity
 - Professional Conduct Committee Activities
 - Climate Survey Results

SOM Committee on Women and Minority Faculty

- Activities/Topics of Discussion, cont:
 - Faculty Development activities and opportunities
 - Discussion with Eboni Porter, M.Ed., CWRU Associate Dean/Director of Disability Resources – Services and resources for students with disabilities, tips for faculty
 - Charge Edits/Changes
 - Proposed new name:
 - Committee on Faculty Community and Representation

amy.hise@case.edu