

General Medical Faculty Meeting Agenda

Tuesday, February 6, 2024 5:00 p.m.

Main Auditorium of the Hutchinson Building

1430 Tulane Avenue

And via ZOOM

I. Welcoming and Opening Remarks – *Nakeisha Pierre, M.D., GMF Chair*

Meeting called to order at 5:01pm.

Thank you to everyone for being here and joining via zoom. Honored to have President Fitts here this evening. This transition has been wonderful and vivid reminder to all of us about all of the things that make the Tulane community valuable and strong. Without exception, those chance encounters with colleagues. Selflessness, compassion, connection – all of those things that make Tulane great. Call to action to all of us and reminder to us to recreate and rekindle in this new environment to recreate our Tulane community.

II. Approval of minutes from General Faculty Meeting: November 21, 2023 – *Kristin Bateman, M.D., Secretary-Treasurer of the General Medical Faculty*

Minutes were distributed by email and in person today. If you have any discussion or amendments – please let us know. Minutes approved.

III. Address – *Michael A. Fitts, J.D., President of Tulane University*

This is an incredible moment at the medical school. Huge change and transition. Heart of these changes are the downtown campus, expansion of the medical school in terms of clinical and research. Incredible moment in higher education. Hoping to see downtown transformed over next 5 years.

University Update:

Research: we are in transition over last decade in becoming recognized as premier research university. People in medical school are at forefront. Results have been extraordinary. Funding up 70% over past 5 years. Med school funding has doubled over past 6 years – one of the highest in the country. Many critical grants, including NIH \$9.2 million for vaccine research – Dr

Norton. Fundamentally bringing faculty across the university and across the globe – being recognized by funding agencies.

Always the Audacious campaign: very focused on growing university resources. Raised ~ \$1.5 billion. Ended last July 1st. Increase alumni and support of university. One of best years of fundraising – at \$111 million. Testament to what SOM, university doing – alumni are supporting university.

Uptown campus: transformed. Bringing all undergraduates (freshmen, sophomores, juniors) back on campus – village will encompass all juniors and bring back on campus -> transformative. Phase 1 brought back 1000 students. Over next 1.5 years will launch the village. Stephen and Jan Paul Hall – science and engineering building – larger than the commons – expanded lab space, space for classes, activities; brings students and research together. Richardson Hall – where school of architecture is; real estate development, coastal design (where SOM originated). Built TUPD substation across the street from the Boot. Newcomb hall to start complete renovation this summer. Built a lot on uptown campus. Fundamentally no more room.

All of the changes have had amazing impact in selectivity and interest in Tulane undergrad. Up 21% applications in comparison to 20-25 similar schools. 3rd Marshall scholarship in past 5 years. Mitchell scholar (for Ireland).

Faculty: Have been extraordinary. Selections into National Academy of Medicine. National Academy of Sciences. National Academy of Inventors. USPTF. Dean Hamm traveled to FL to pick up Nobel Prize – to be displayed.

EDI: A great university is diverse university and inclusive, attracts from all over the world and supports them. Bennetta Horne has led great initiatives. LA Promise initiated few years ago at undergrad level – no loan attendance at Tulane for those making < 100k, merit scholarships, numerous pipeline programs throughout LA. Under Louisiana Promise, we received 85% yield on our offers – keeping and attracting the best and the brightest from LA. 1st black med school reunion last weekend - ~200 in attendance.

Athletic director and coach search. David Harris – new athletic director, brought N. Iowa 20+ championships. In 4 days of new job, recruited new football coach John Sumrall – extraordinary recruitment. Tulane has been successful across the board, including athletics.

SOM: Core of the University. Center of our explosion in research. You cannot have a great university in the 21st century without a great medical school and school of engineering. We are expanding in both areas. Research has exploded. Extraordinary clinical platform. The partnership with LCMC has amazing potential – nonprofit, large presence in LA – builds synergies across system, important to have larger clinical profile to expand care and perform more clinical trials. EJ doubles the space. Lakeview, Lakeside, Children's, UMC, Touro. Increase basic and clinical research and clinical platform. TMC building will be redeveloped into multi-purpose center of cutting edge research, innovation, education clinical care– will be LBC of downtown – place for people to gather, nursing program, college track, ER, clinical platform, clinical and basic

research. We have more employees downtown than uptown. Ultimately looking at downtown investment.

Downtown is repositioning the university. Research universities have ability to transform cities. Major city + research university + investment = transformation. We can drive growth and innovation downtown. Develop innovation district – make it walkable, need people to live/eat/play there. We are the anchor to that.

Charity hospital building – committed to transform 400,000 sq ft. Charity is 1 million sq ft = 17 football fields.

Tulane is committed to the future of New Orleans. We are New Orleans' largest private employer, contribute billions to LA economy, 40% students stay in New Orleans for the 1st 3 years, – we want to create community here to support our enterpreneurial creations (rather than students moving away).

Questions:

What is plan for shuttles? To connect downtown, uptown, East Jeff. Need increase in frequency and timing. For students particularly, but also faculty.

Shuttles need to be quick and predictable. President Fitts to talk to Randy to address.

During this transition period, many of us taking hits with money, patient care. Any way to get support transiently during this transition period? None of us getting QOL raises and so on.

Money from campaign not for general resources, but given to specific reasons. We are looking at all of the components to ensure no decline. We continue to publicize the transition to continue patient recruitment. Being covered by SOM.

As a native New Orleanian, perception is that Tulane has abandoned downtown. East Jefferson is LCMC. LCMC looks at us at their employers. No Tulane visible signage. Plea is don't lose your brand.

We as a medical center are vastly better off with relationship with LCMC vs HCA. Move occurred 2-3 weeks ago – signs are set to go up for branding. We closed inpatient downtown, but we will still have clinics and ER. We are 4 blocks from UMC. Keeping so much medical care – VA, UMC, Tulane ER, clinics – in same place. Old system with HCA was not going to work – not going to grow medical platform, not going to grow medical school, not investing in program or medical school; we had been contracting in terms of patient care. This is an amazing opportunity for medical school. We have to look forward – this gives us an opportunity to grow as a medical school.

Changes are difficult, but this gives us opportunity to grow – reputation, patient care, research.

IV. Dean's Report – *L. Lee Hamm, M.D., Senior Vice President and Dean*

Budget – University as a whole has been supporting SOM, and continues to do so. We are trying to balance a lot of things in what we are doing. Salary increases are coming in July. Revenue has been down – clinical income, master's program, increase in residency program finances.

Downtown clinics – not all are temporary. Important to provide service in addition to UMC. I've heard some reports of patients being dropped off with poor signage – working to correct it. We need to address problems constructively. I applaud the work done in the transition, in getting the millions of tasks done, now finding the 1000s we overlooked. We need to continue to push the people running the clinics to promote the branding/signage. Clinics will be rebranded. LCMC didn't realize the importance of the branding – we, our patients, and are performance will continue to remind them.

Big story is what we're trying to do long term. Our message that we need to deliver on – we are not abandoning the people of New Orleans. We increased services at UMC. Transfers of patients from Tulane ED to EJ are working well. Continue to provide feedback in right way – they won't know about the issues unless we point them out.

Hutchinson renovation – is quite disruptive. Move to EJ is perfect illustration that shows to make progress you have to go through some pain. People have performed straight through it. I worry about morale and how things are going – need to step back and think about all the great things you are accomplishing. The plans we made are good, and we will continue to adjust them. A lot of really good things going on. We are doing phenomenally well in research, education – great recruitment. We are off of warning, IM is off of warning – only 1 program on accreditation with warning. Clinical going well. A lot of leaders being better recognized as we are in more places. Our physicians are doing their work well and constructively – being increasingly recognized.

Residents are getting raise retrospective to Jan 1.

How to rebuild community? Brought up at FAC. If you have ideas, please submit your ideas to our GMF so we can recenter ourselves and build our community.

V. Research and Scholarly Activities - *Patrice Delafontaine, M.D., Executive Dean*

Tremendous year in research – nearly \$85million in terms of rewards for SOM last year. We're at \$30 million this year YTD (~20% lower this year) – likely lag in some large grants coming.

AAU looks at yearly research expenditures – we have grown over past 3 years. This year, we are ahead YTD. We continue on this really great trajectory. Kudos to all working in research realm.

VI. Administrative Updates:

1. Office of Faculty Affairs – *Marie Krousel-Wood, M.D., MSPH Senior Associate Dean for*

Faculty Affairs

Continue to grow. Quick updates – reinitiating PSPP, CV workshop for promotion, Annual Faculty evaluations, TU Learn

2. Office of Academic Affairs – *Chayan Chakraborti, M.D., Associate Dean for Education and Academic Affairs*

Doing well.

3. Office of Admissions & Student Affairs – *Elma LeDoux, M.D., Associate Dean for Admissions and Student Affairs*

3/15 – senior students finding out where they will be doing residency.

Our students are very involved in community engagement. 865 students – nearly 2/3rd during training volunteer at student-run clinics. A lot of downtown activity will remain, regardless of where academic medical center is located.

4. Office of Graduate Medical Education – *Paul Gladden, M.D., Associate Dean for Graduate Medical Education*

Dean Hamm and President Fitts – trusted us to get better, and still work to be done. Dr. Dola, Dr. Murina, and Rhonda Coignet – are the reason we're getting better.

5. Office of Multicultural Affairs – *Bennetta C. Horne, Ph.D., Assistant Dean for Diversity, Equity, and Inclusion*

Immersive experience for health equity scholars – 3/1

IM resident poverty sims

Dashboard for recruitment of URIM

Inaugural black med reunion last weekend – 1973-2023 alum. 1st black male and female present. Inaugurated 6 alum. Went really well.

Planning diversity grand rounds for SOM.

Offer training to any departments who want it.

VII. New Business and Discussion VIII. Adjournment

Professionalism project – they have separate program B-SAFE at EJGH. We are working with them to collaborate with our program.

Adjourned at 6:09pm.