

Dean's Newsletter

May 25, 2009

Table of Contents

- Continuing Economic Challenges and Their Impact on Our Medical School Community
- Updated Website on Stanford Industry Interactions Policy (SIIP)
- Senior Transitions Website Goes Live
- Update on NIH Funding
- Interdisciplinary Research Planning Activities
- AAMC Faculty Forward Program Survey Awards and Honors
- Awards & Honors
- Appointments and Promotions

Continuing Economic Challenges and Their Impact on the Medical School Community.

In my newsletter of March 30, 2009, I outlined many of the significant financial actions we have taken to preserve the School's key programs and positions, while at the same time acknowledging the need to reduce our overall expenses. At that time, I indicated some layoffs within our administrative areas would be necessary to bring our expenditures into balance with our resources.

With that in mind, our administrative units, Institutes and Centers were asked to accelerate the budget preparation process for FY10 and to propose further budget reductions, including potential reductions in workforce. Those decisions have now been made - as difficult as they were - and budget decisions for those units have been finalized. As a result, we have had to make some very hard decisions to reduce our administrative workforce. A total of 40 staff will be affected either through layoff or reductions in time. This is approximately 7% of our administrative staff workforce in the Dean's Office units. These administrative layoffs, due to budgetary constraints, are being formally communicated to all affected individuals early this week and will become effective June 1st. Individuals whose positions have been eliminated will receive the University's enhanced layoff benefits, which will provide some additional support and resources during this challenging time.

I am saddened that we are in the midst of an economic situation that leads us to eliminating staff positions. Reducing staff through layoffs has a profound impact on all of us and these decisions were not made lightly. As I have underscored before, the School is most fortunate to have a very hard-working, talented and dedicated staff who have given many years of their career to supporting our missions. The elimination of these positions not only affects the individual employee and his/her family, but also deeply affects the morale and engagement of the staff who remain in their positions. Accordingly, I ask that all managers and supervisors work closely with those entrusted to

your leadership, acknowledge the contributions made by all of your employees, make them feel heard and valued and encourage their continued efforts in support of our important missions.

As we continue to experience unprecedented fiscal challenges, we cannot guarantee that this marks the end of staff reductions, the need to place critical programs on hold or delays in some of our capital expansion plans. While we are doing our best to support our faculty, students and staff, financial challenges may cause us to make further unwelcome but necessary choices. In the meantime, every effort is being made to keep the school financially stable, identify new revenue streams and shore up our financial resources.

I appreciate your support and dedication, and I know that together we will weather this storm and continue as a world-class institution for years to come.

Updated Website on Stanford Industry Interactions Policy (SIIP)

I have communicated frequently about industry relations and conflict of interest. Over the last several years a number of organizations have proposed conflict of interest policies, the most recent and comprehensive being the Institute of Medicine of the National Academy of Sciences. While the IOM document that was released on April 28, 2009 is quite detailed (see: <http://www.iom.edu/CMS/3740/47464/65721.aspx>) a helpful synopsis is available in the May 21st New England Journal of Medicine (2009;360: 2160 – see: <http://content.nejm.org/cgi/content/full/360/21/2160>). While the IOM report and those from other organizations (including the Association of American Medical Colleges [AAMC]) chart a path toward regaining the public trust, Stanford has provided a number of directional signals over the past several years and has helped to stimulate a number of these important changes. To that regard, I want to bring to your attention the updated Stanford Industry Interactions Policy (SIIP), which has been posted on the School's web site at <http://med.stanford.edu/coi/siip/policy.html>.

As many of you know, we implemented this policy in October 2006. It governs interactions, largely in the clinical and educational arenas, with the pharmaceutical, biotech, medical device, and hospital and research equipment and supplies industries. The policy includes provisions regarding, among other issues, gifts from industry, access of sales and marketing representatives to our campus, and industry support of education.

In recent months, the policy has been updated to include, among other changes, our CME Commercial Support Policy (http://cme.stanford.edu/commercial_support.html), which was introduced in 2008. Greater clarity concerning participation in meetings or conferences supported by industry has also been provided, including an explicit provision that participation by Stanford faculty in so-called speakers bureaus is contrary to the policy.

SIIP continues to be the defining document for our interactions with industry in the clinical care and educational areas. Policies covering interactions with

industry in the research area can be found at the School's Conflict of Interest web site (<http://med.stanford.edu/coi/overview.html>). Given the prominence of these issues in the public domain and the changing landscape of conflict of interest, it is important that we maintain the currency of these policies and that all of us assure that our own interactions with industry comply with their provisions. Thank you for your continuing attention to this important area.

Senior Transitions Website Goes Live

In previous Newsletters I have reported on the work of the Senior Faculty Transitions Task Force, which was chaired by Dr. Gary Schoolnik, Professor of Medicine and now Associate Dean for Senior Faculty Transitions. This group developed recommendations about policies, procedures and resources through which advice and guidance could be provided to senior faculty about career and life planning. A key recommendation of the Task Force was the development of a web site to be a readily accessible, centralized information source related to senior faculty transitions. I am very pleased to report that the initial phase of this web site is launching today, at: <http://med.stanford.edu/academicaffairs/senior-faculty>

In addition to providing information about the work of the Task Force, including the results of a survey of all School of Medicine active and emeriti faculty age 50 and above, the site provides information about retirement as well as financial planning resources available at Stanford. Additional information will be added over the coming months. In the meantime, I hope you will find the information assembled on this web site to be helpful and informative. Special thanks to Kristin Goldthorpe, Project Manager in the Dean's Office, for her efforts in bringing the site to fruition.

Update on NIH Funding

On Tuesday, May 19th, Dr. Raynard Kington, Acting Director of the NIH, gave an update to the Board of Directors Meeting of the Foundation for the NIH (of which I am a member). He commented on the 1.4% (\$443M) increase in the NIH budget proposed by the Administration for FY10 as well as the status of the \$10.4 billion allocated to the NIH through the American Recovery and Reinvestment Act (ARRA) of 2009.

As proposed, the FY10 NIH budget would fund 9,849 new Research Project Grants (RPG) and would bring the total number of RPG's to 38,042. A success rate of 20 percent is currently projected. This is independent of the ARRA funding – of which \$8.2 billion is allocated for research. I previously commented on Stanford submissions for the NIH Challenge grants, which totaled over 200 in number. While that is impressive, Dr. Kington noted that NIH received over 22,000 applications for these Challenge Grants (of which 200 are to be awarded – although he noted that the number of these grants may be increased). Clearly this is an amazing response and while it makes the probability of achieving a successful application quite low, it underscores the vast wellspring of ideas that have been waiting to come forward and that have been “stimulated” by the renewed interest in science and technology from the Obama Administration.

Interdisciplinary Research Planning Activities

Over the past two weeks a number of faculty-initiated interdisciplinary planning activities have taken place to promote research interactions and opportunities. Three events have occurred (there are likely others I am not familiar with) that brought faculty from across the university together to share ideas and forge new collaborations. These kinds of activities are what make Stanford such a unique environment. They included:

- ***A Panoramic Collaborative: Broad Look at Multidisciplinary Vision Science at Stanford*** sponsored by the Stanford Center for Vision and the Prevention of Blindness, the Department of Ophthalmology, and the Stanford Institute for Neuro-Innovation and Translational Neurosciences.
- ***The Stanford Clinical Genomics Retreat*** organized by Euan Ashley, Assistant Professor of Medicine (Cardiology) in conjunction with the Center for Genomics and Personalized Medicine, which will be led by Dr. Mike Snyder after he arrives this summer to lead the Department of Genetics. More than 50 faculty attended this Retreat and focused on issues ranging from technology development and deployment to informatics and opportunities for translational research at Stanford.
- ***The Global Health Symposium*** organized by Dr. Julie Parsonnet, George DeForest Barnett Professor in Medicine and Professor of Health Research and Policy (Epidemiology), which featured interactive sessions on ethics in global health research and on overcoming obstacles to healthcare implementation. The Symposium also introduced Dr. Michele Barry, who joined Stanford on May 1st as Senior Associate Dean for Global Health.

My thanks to the faculty who initiated these activities and to all who participated in them. I am confident that new insights, interactions and discoveries will ensue!

AAMC Faculty Forward Program Survey

Back in March, we announced Stanford's participation in the AAMC initiative, *Faculty Forward*. The centerpiece of this initiative is a faculty satisfaction survey developed by the AAMC and the Collaborative on Academic Careers in Higher Education (COACHE) at the Harvard Graduate School of Education. By now all faculty should have received one or more emails from AAMC/COACHE with a link to participate in the survey. Some of you may remember completing a similar survey in 2007 and might wonder what the advantage is of completing yet another survey on faculty satisfaction. We take the results from each survey very seriously and use them to make specific improvements that will positively impact all faculty.

For example, the 2007 survey alerted us to the need for a better process of providing faculty with career feedback. In response to this need, we are currently piloting a new feedback process through the Faculty Fellows program. After refining this process, we

will implement it more widely around Stanford. In addition, results on the 2007 survey told us that many faculty feel that their teaching and clinical activities are not adequately recognized and rewarded. This led to a detailed discussion at the past Dean's leadership retreat on how to put in place reward systems that fully recognize the value of teaching and clinical activities. We developed a focused plan that will be implemented over the next year; in addition, we have worked with Faculty Affairs to revise the current criteria for advancement and promotions in order to place additional value on teaching and clinical activities. We plan to revise the criteria further in order to place greater value on interdisciplinary work.

As you can see, we use your feedback on our faculty satisfaction surveys to develop concrete strategies for creating a supportive culture for all faculty. However, your continued participation is essential in helping us achieve this goal. This is why I encourage your participation in the 2009 survey. As added thanks, we will give away ten \$50.00 gift certificates at random to faculty who complete the survey. The last day to complete the survey is June 30, 2009.

To complete the survey, look for an email in your inbox that originates from "Faculty Forward" <coache@gse.harvard.edu>. The subject line for this email is "AAMC-COACHE Medical School Faculty Job Satisfaction Survey."

Awards and Honors

- Dr. John Cooke, Professor of Cardiovascular Medicine, was awarded the designation of Master of the Society for Vascular Medicine in recognition of extraordinary service, selfless dedication and enlightened leadership to the SVM and the field of vascular medicine" on May 14, 2009. Congratulations, Dr. Cooke.
- Bikul Das, a postdoctoral scholar in the Department of Medicine, recently received a grant from the Bill and Melinda Gates Foundation to explore the role of stem cells in the management of tuberculosis. Congratulations, Dr. Das.
- Dr. Renee Reijo Pera, Professor of Obstetrics and Gynecology and Director of the Center for Human Embryonic Stem Cell Research and Education, received an honorary degree at the University of Wisconsin-Superior, her alma mater. She was recognized for her accomplishments involving the study of human development and reproduction, and her pursuit of knowledge that could make fertility treatments safer for women and prevent birth defects.

Appointments and Promotions

Rebecca Bernard has been promoted to Clinical Assistant Professor of Psychiatry and Behavioral Sciences (Child Psychiatry), effective 6/01/09.

Darrell Brooks has been promoted to Clinical Assistant Professor (Affiliated) of Surgery (Plastic and Reconstructive Surgery), effective 6/01/09.

Michelle Brown has been promoted to Clinical Associate Professor of Psychiatry and Behavioral Sciences (Child Psychiatry), effective 3/01/09.

Michael Joshua Cisco has been appointed as Clinical Assistant Professor of Pediatrics (Pediatric Cardiology), effective 7/01/09.

Stephen D. Coleman has been appointed as Clinical Assistant Professor of Anesthesia (Pain Management), effective 7/01/09.

John Dani has been appointed as Clinical Assistant Professor (Affiliated) of Surgery (Emergency Medicine), effective 5/01/09.

Gail Gullickson has been reappointed as Clinical Associate Professor (Affiliated) of Medicine (General Internal Medicine), effective 9/01/08.

Dora Ho has been reappointed as Clinical Assistant Professor of Medicine (Infectious Diseases), effective 8/01/09.

Meghan Imrie has been appointed as Clinical Assistant Professor of Orthopaedic Surgery, effective 9/01/09.

Peter Henry Johannet has been reappointed as Clinical Assistant Professor (Affiliated) of Surgery (Plastic and Reconstructive Surgery), effective 6/01/09.

Kenneth K. Kim has been reappointed as Clinical Assistant Professor (Affiliated) of Surgery (Plastic and Reconstructive Surgery), effective 6/01/09.

Abha Barry Kumar has been reappointed Clinical Assistant Professor (Affiliated) of Ophthalmology, effective 4/01/09.

Robert M. Menard has been reappointed Clinical Assistant Professor (Affiliated) of Surgery (Plastic and Reconstructive Surgery), effective 6/01/09.

Kelly Murphy has been promoted to Clinical Associate Professor of Surgery (Emergency Medicine), effective 12/01/08.

Chad D. Pritts has been appointed as Clinical Assistant Professor of Anesthesia (Critical Care Medicine), effective 7/01/09.

Daryn Reicherter has been promoted to Clinical Assistant Professor of Psychiatry and Behavioral Sciences (Child Psychiatry, Psychopharmacology and Mood Disorders), effective 6/01/09.

Monica Stemmler has been promoted to Clinical Assistant Professor (Affiliated) of Pediatrics (Ambulatory Pediatrics), effective 7/01/09.

Joyce Tenover has been appointed as Clinical Professor of Medicine (Gerontology and Geriatric Medicine), effective 1/20/09.

Arthur Traum has been reappointed as Clinical Associate Professor (Affiliated) of Medicine (General Internal Medicine), effective 9/01/08.

George Triadafilopoulos has been reappointed as Clinical Professor of Medicine (Gastroenterology and Hepatology), effective 9/01/08.

Mirjana Vustar has been appointed as Clinical Assistant Professor of Anesthesia (Pediatric Anesthesia), effective 7/01/09.

Katherine Warner has been reappointed as Clinical Assistant Professor of Ophthalmology, effective 4/10/09.

Justin Yeh has been appointed as Clinical Assistant Professor of Pediatrics (Pediatric Cardiology), effective 7/01/09.