Faculty Senators present (see sign-in sheets)
Meeting Commenced: 5:05 pm.
Dr. Krukenkamp introduced meeting and Dr. Edelman

1. Dr. Krukenkamp introduced the meeting and reviewed the minutes of the March 18th meeting.
   a. There being no comments regarding the minutes, they were accepted.

2. Dean’s Report

   Overall, this has been a good year. Recruited good academic clinicians.

   A. Budget- “Optimistic”
      1. There has been belt-tightening by the departments.
         All budgets look good
         11.5% cut in state support, which was the “worst case scenario,”
         5-6% should be returned if the $1200.00 tuition increase is implemented (presently $950.00 expected).
         Recruitment plans proceed.
      2. 5-6% should return if 1,200 ____ increased implemented.
         (expect 950?)

      Encouraged by:
      - No additional cuts requested by President.
      - State Comptroller said state budget “in check.”

   B. LCME

      A. The report lists the strengths, then whether or not we are in compliance.

      The report noted a very good collegial atmosphere and coherence.

      B. Substantial non-compliance:

         1. Curriculum is deficient - “too decentralized”
Not enough monitoring of curriculum
Student advising must be integrated with increased resources.

Must identify students at risk earlier.
Counseling system is deficient due to the fact counseling is done by faculty.

Biohazards/biosafety course given too late (should be first year)

Faculty should get more regular feedback regarding academic performance and promotion

A) Dr. Jack Stern is stepping down as Chair of Curriculum Committee
-Peter Williams, will be the new Chair of Curriculum Committee.

Recruiting for an Education Specialist to review curriculum content.
Student advising – will be hiring a half-time MD to do career and academic advising in a more comprehensive manner

Faculty advisory/development – how to deal with it.

Transition issues and leadership changes
Need an educational center that includes Information Technology (IT), Manaquins, actors, patient simulators etc.
Increased student expenses
Financial pressures on the school
Facility upgrade

LCME will conduct a Focused revisit in the 2004/05 year

C. Dean Search
Dr. Peter Glass stepped down as Chair of the Search Committee
Dr. Christina Leske was appointed Chair of the Search Committee

President Kinney will first interview the candidates-if she believes they are acceptable, the candidates will then continue with the interview process.

An attempt will be made to bring in candidates with similar backgrounds/organizations as Stony Brook.
Dr. Kallus: Do any other schools have President interview first? Does this change the willingness of the candidates?

Dr. Edelman-uncertain

Dr. Priebe: Does the President understand the “economics” of what faculty concerned about
There was discussion about CPMP.

3. Committee Reports:

A. Curriculum Committee (Dr. Stern)

Need basic science - Stepped down and clinical science.
Two members step down in September – need to recruit 2 basic scientists/ 2 clinicians.

B. AP & T (Dr. Baumgart)

recruit at higher level

Review AP & T process – submission and review
Described Educator/Clinician tenure track
3 month goal from document completion to giving recommendation to the Dean.
Did well until now, but beginning to fall behind.

Packets reviewed:
99-2000 54
2000-2001 58
2001-2002 62 – 13 waiting
16 assigned – 7 are beyond 3 months

Plans to approach Chairs to find new members for committee

C. Academic Standing Committee (Dr. Schiavonne for Dr. Fischel)

Reviews student performance and status
Professional conduct and behavior
This year, recommended two (2) second year students and two (2) first year students to repeat their years due to difficulties
Working on a support system
12 members (no more than 3 from one dept.)
4 Basic science
4 Clinical
4 Mixture
2 member needed
Participants need to attend in order for committee to function properly.

Dr. Morrison - Unfortunately, faculty not privy to student performance in other courses. Without knowing what students are at risk when they enter your course, it is difficult to help early on.

**Agenda item for next Faculty Senate meeting: identifying students early – how do you do it and when.**

Vote passed for Ron Jasciwicz to join committee

Bill J. – Reviewed information in handout

7 ___ off: 4 identified to join

Les Kallos – faculty Association

Provided some history
Only one request in past three years since convened
Referrals from self, ___, Deans office.

Process ____ avenue _______ when to resolve issue (union, etc.) or hear it themselves.

Jack Stern – discussed the past year
Reviewed courses:

1. not content, which is what LCME recommended
2. delivery (manner of)

Approach for courses during the first two years divided by a basic ____ must have clinical co-director & vice versa

Curriculum Task Force

Other DT's

1. Nutrition – lectures ____ to be distributed though other courses.
2. 4 half-days of clinical exposure are to occur during first two years.
3. 2\textsuperscript{nd} year directors – all electronically and reduce number of exams, so two systems per exam/or two course/__years.
4. Pharm course will be dis____ to match along with systems starting in one year (stays it’s own course with own grading).

?LCME __ Task force and committee
Norm – Valid ____________ review contents.
Peter W – on agenda for July meeting.
Core of Educators
Norm – LCME doesn’t care how.
Peter W -? Jack to be on curriculum committee.