2001-2002 Medicine

Section	Document Name

Mission

MISSION

It is the mission of the Indiana University School of Medicine to advance health in the State of Indiana and beyond by promoting innovation and excellence in education, research, and patient care.

Education

The School of Medicine strives to produce outstanding educators, physicians and scientists. We will do so by providing quality education to students, residents, post-doctoral trainees, practicing physicians and the public that integrates the latest research advances with the best clinical practices.

Research

The research mission of the Indiana University School of Medicine is to advance knowledge about health and behavior and to make discoveries leading to improved prevention and treatment of disease, including the education of caregivers and the delivery of health services. Research is the foundation of both medical education and clinical care.

Clinical Care

The School of Medicine will provide outstanding clinical care that incorporates the latest advances in scientific knowledge, to all of our patients and the citizens of the State of Indiana. The quality care we provide will be done in a manner that supports and advances education and research.

VISION

VISION

The Indiana University School of Medicine will be one of the nation's premier medical schools based on our education, scientific investigation, and health care delivery by 2005.

Goals and Objectives

Adequate, appropriately allocated educational resources.

1. Develop an educational relative value unit (RVU) system that tracks and rewards faculty time spent in the teaching mission by measuring outcomes, weighting the relative values of outcomes and allocating educational funds to Units accordingly.

Campus Planning Theme: Teaching and Learning
Secondary Goals:
Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

Debra K. Litzelman, M.D., appointed Associate Dean for MECA, assigned goal of developing and implementing educational RVU system.

Evidence of Progress for 2001-2002:

In fall 2002 IUSM Office of Technology completed phase one of a three or four phase information systems project to replace existing IUSM student registration and curriculum systems with a new system that will capture and track the detailed education and faculty data necessary to develop such an RVU system.

Activities planned for 2002-2003:

Ongoing Activities

Attract and support a better prepared and a more diverse student population.

2. Develop and implement student mentoring program.

Campus Planning Theme: Teaching and Learning
Secondary Goals:
Sub Unit: n/a
Time Frame: 2001-02 and 2002-03

Actions taken for 2001-2002:

Vertical advising program implemented to break down very large student body into smaller cohesive groups, called pods.

Evidence of Progress for 2001-2002:

Mentoring pods are creating opportunities for professional socialization by improving channels of communication between faculty, students, and administration. Mentoring program provides a support system for academic, social, fiscal, or other student problems, and encourages team building and problem solving.

Activities planned for 2002-2003:

Ongoing Activities

Become a Top Ten Medical School as measured by NIH Research Grant Awards.

3. Increase NIH funding to IUSM faculty.

Campus Planning Theme: Research, Scholarship and Creative Activity
Secondary Goals:
Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

Faculty being strongly encouraged to compete for NIH grants.

Evidence of Progress for 2001-2002:

NIH funding for IUSM faculty research increased from $76,905,995 in 2000-01 to $93,098,400 in 2001-02, a 21% increase.

Activities planned for 2002-2003:

Ongoing Activities

Conduct world-class research, scholarship, and creative activities relevant to Indianapolis, the state and beyond.

4. Increase industry funding of patient trials.

Campus Planning Theme: Research, Scholarship and Creative Activity
Secondary Goals:
Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

Grant proposals submitted to compete for these funds.

Evidence of Progress for 2001-2002:

Industry support increased from $20,414,216 in 2000-01 to $23,630,567 in 2001-02. Additional Comments: Overall, extramural funding increased from $148,600,599 in 2000-01 to $169,510,043 in 2001-02.

Activities planned for 2002-2003:

Ongoing Activities

Enhance civic activities, partnerships, and patient & client services.

5. Enhance the Indiana University-Moi University Partnership.

Campus Planning Theme: Civic Engagement
Secondary Goals:
Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

This partnership continues to be one of the strongest, longest running collaborations between medical schools in post-industrial and emerging societies. It provides a model that other institutions have begun to emulate.

Evidence of Progress for 2001-2002:

The IU-Moi partnership has received a $1 million grant from the Bill and Melinda Gates Foundation. The grant is for HIV prevention work in Kenya. This is the first Gates grant awarded to an IU medical program.

Activities planned for 2002-2003:

Ongoing Activities

Enhance civic activities, partnerships, and patient and client services.

6. Expand outreach of IU National Center of Excellence in Women's Health

Campus Planning Theme: Civic Engagement
Secondary Goals:
Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

CoE has greatly increased its outreach activities to the rapidly growing Hispanic community of Central Indiana during FY 2001-02. Its bilingual coordinator has been very active in providing educational programs to this population regarding breast health and disease with emphasis on screening and prevention. CoE produced a video in Spanish on this subject.

Evidence of Progress for 2001-2002:

More minority women with access to health education, information, and healthcare services.

Activities planned for 2002-2003:

CoE is about to embark on educational outreach to young minority women on HIV/STDs, including a CD-ROM on the subject.

Enhance infrastructure for scholarly activity.

7. Contemporary laboratory and classroom space for students, improved learning experience for students, and improved student and faculty morale.

Campus Planning Theme: Research, Scholarship and Creative Activity
Secondary Goals:
Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

Renovate and improve existing classrooms and teaching laboratories on the Indianapolis campus and construct new medical education facilities on the Indianapolis and regional campuses.

Evidence of Progress for 2001-2002:

Renovation of Van Nuys Medical Sciences building at Indianapolis continues. Wireless technology has been deployed in some areas of this building to test new educational technologies. At the Terre Haute Center for Medical Education, the renovation of Holmstedt Hall nears completion and the new center building will be ready for occupancy in January 2003. Progress continues at the South Bend Medical Education Center on its new facility, and discussions continue for the new Fairbanks Hall Medical Education and Administration building in Indianapolis.

Activities planned for 2002-2003:

Radically improve classroom environments on the Indianapolis campus and provide state-of-the-art teaching technology to faculty and students (new education building).

Enhance Physical Infrastructure for scholarly activity.

8. Create technology infrastructure necessary to support the teaching, research, and clinical missions of IUSM.

Campus Planning Theme: Best Practices
Secondary Goals:
Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

In FY 2001-02 an Information Technology (I/T) strategic planning project was undertaken to identify IUSM's critical I/T needs now and in the future, to support its tripartite academic mission and enable it to become a top ten medical school.

Evidence of Progress for 2001-2002:

The IUSM I/T Strategic Plan was approved by the I/T Plan Executive Committee and the plan was published in the fall 2002. The top priority of the plan is to establish a school-wide organizational structure that will oversee all I/T matters at IUSM. Vincent J. Sheehan was named to the newly created role of Associate Dean for Information Technology in fall 2002 as the first step in creating this organization.

Activities planned for 2002-2003:

Ongoing Activities

Enhance Student Learning and Success.

9. High quality educational programs/processes.
Campus Planning Theme: Teaching and Learning
Secondary Goals:
Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

Implementation of competency based curriculum. Implementation of statewide exams. Implementation of OSCEs.

Evidence of Progress for 2001-2002:

In FY 2001-02 implementation of competency based curriculum was completed and all four years of the medical school curriculum at all centers and Indianapolis now include competency based education and assessment. Also in FY 2001-02, Objective Structured Clinical Exams (OSCEs) became a requirement for graduation.

Activities planned for 2002-2003:

Ongoing Activities

Improve organizational or management policies, programs and procedures.

10. Create technology infrastructure necessary to support the teaching, research, and clinical missions of IUSM.
Campus Planning Theme: Best Practices
Secondary Goals:
Sub Unit: n/a

Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

In FY 2001-02 an Information Technology (I/T) strategic planning project was undertaken to identify IUSM's critical I/T needs now and in the future, to support its tripartite academic mission and enable it to become a top ten medical school.

Evidence of Progress for 2001-2002:

The IUSM I/T Strategic Plan was approved by the I/T Plan Executive Committee and the plan was published in the fall 2002. The top priority of the plan is to establish a school-wide organizational structure that will oversee all I/T matters at IUSM. Vincent J. Sheehan was named to the newly created role of Associate Dean for Information Technology in fall 2002 as the first step in creating this organization.

Activities planned for 2002-2003:

Ongoing Activities

11. Prepare for the implementation of HIPAA

Campus Planning Theme: Best Practices
Secondary Goals:
Sub Unit: n/a
Time Frame: Prior to April, 2003 and ongoing.

Actions taken for 2001-2002:

Federal mandates of the Privacy Regulations under the Health Insurance Portability and Accountability Act of 1996 (HIPAA) require that all covered entities, including physician practices and the School of Medicine, must ensure that their workforce, i.e., employees (full or part-time) volunteers, trainees (students and residents), and others under direct control of the covered entity, must receive HIPAA awareness training by the effective date of April 14, 2003. A HIPAA Security Officer position has been established as part of the I/T Strategic Plan. Audits have been completed at IUSM to identify the existence of person data records (patient, student, employee, grant study participant, etc.) containing social security number that should be eliminated or secured as part of HIPAA compliance efforts.

Evidence of Progress for 2001-2002:

School wide readiness for HIPAA implementation date and ongoing compliance monitoring.

Activities planned for 2002-2003:

An Information Technology Subcommittee will be established as part of the HIPAA Task Force process. This subcommittee will be chaired by the IUSM Security Officer and will serve as a resource for all other HIPAA task forces.

12. Prepare for the implementation of HRMS.

Campus Planning Theme: Best Practices
Secondary Goals:
Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

An IUSM HRMS Task Force was created in the summer of 2002 to identify critical needs relating to the implementation of the new University human resources system, HRMS/PeopleSoft. Purpose of task force is to enhance communication with department personnel, ensure training is available, and determine if IUSM HR policies and procedures are adequate to ensure that internal controls will be maintained in the new system.

Evidence of Progress for 2001-2002:

The task force completed the task of identifying current human resources policies and practices within departments of school. The process redesign work group currently evaluating internal control needs of "personnel requisition/pre-eDoc" processes within IUSM. A comprehensive web-site of HRMS resources is now in service and an electronic document "eDoc" tracking mechanism is being implemented.

Activities planned for 2002-2003:

Ongoing Activities

Improve organizational or management policies, programs and procedures.

13. Develop and implement a consolidated reporting and planning mechanism for use by IUSM departments that will combine the myriad of information requests made by the Dean's Offices and central University into one comprehensive annual information request, eliminating duplicative requests of the same data in different formats for use by different entities.

Campus Planning Theme: Best Practices
Secondary Goals:
Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

In FY 2001-02 and 2002-03 the School of Engineering and Technology's web-based Faculty Annual Summary Report (ASR) was adopted and modified by IUSM to replace a very cumbersome spreadsheet-based tool. This new database application was used to populate much of the faculty section of IUSM's Department Review Report.

Evidence of Progress for 2001-2002:

Included in the web-based ASR is a bibliography section. This information can be cut and pasted by the faculty member

for multiple purposes, such as grant proposals. This will eliminate much duplicate entry.

Activities planned for 2002-2003:

Ongoing Activities

Intensify commitment to the community.

14. Establish a Medical Service Learning Program.
Campus Planning Theme: Civic Engagement
Secondary Goals:
Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

Program implemented

Evidence of Progress for 2001-2002:

IUSM medical students participated in Spring House Calls on April 13, 2002. This was a day-long activity that teamed students with homeowners in the Haughville and Blackburn areas who have requested assistance to help clean up their yards and properties. Since 1996, nearly 500 students have volunteered about 5,000 hours of service to the near-westside community bordering on the IU Medical Center. Other programs and initiatives of the Office of Medical Service Learning include the Calnali medical mission, the community leadership mentor program, and doctor camp.

Activities planned for 2002-2003:

Ongoing Activities

Provide effective professional and graduate programs and support for graduate students and post-doctoral fellows.

15. Establish a Masters of Public Health degree program and become accredited.
Campus Planning Theme: Teaching and Learning
Secondary Goals:
Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

In FY 2001-02, IUSM Department of Public Health completed CEPH accreditation self-study and hosted CEPH accreditation site-visit.

Evidence of Progress for 2001-2002:

Evidence of Progress for 2001-2002:

In fall 2002 the IUSM Masters in Public Health program became fully accredited.

Activities planned for 2002-2003:

Ongoing Activities

Support and enhance effective teaching.

16. Organization to facilitate excellence in education.
Campus Planning Theme: Teaching and Learning
Secondary Goals:
Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

The Office(s) of Education and Student Services was created in FY 2000-01 and Stephen B. Leapman, M.D. was named Executive Associate Dean for Educational Affairs. The Office of Medical Education and Curricular Affairs (MECA) established under Education and Student Services in FY 2001-02, and Debra K. Litzelman, M.D. named Associate Dean for MECA. In FY 2002-03 existing educational programs (Ruth Lilly Medical Library, Office of Medical Illustrations, Medical Educational Resources Program (MERP), and Continuing Medical Education) substantially reorganized to eliminate duplicative and competing functionality, to improve quality and delivery of services, and to focus on state of the art educational technologies. Resulting organizations are Information Resources and Educational Technologies (IRET) and Continuing Medical Education (CME).

Evidence of Progress for 2001-2002:

Julie McGowan, Ph.D., Director of Ruth Lilly Medical Library and Assistant. Dean, named Associate Dean for IRET. Charles Clark, M.D. named Associate Dean for CME.

Activities planned for 2002-2003:

Ongoing Activities

17. Organization to facilitate excellence in education.
Campus Planning Theme: Teaching and Learning
Secondary Goals:
Sub Unit: n/a
Time Frame: Ongoing

Actions taken for 2001-2002:

The Office(s) of Education and Student Services was created in FY 2000-01 and Stephen B. Leapman, M.D. was named Executive Associate Dean for Educational Affairs. The Office of Medical Education and Curricular Affairs

named Executive Associate Dean for Educational Affairs. The Office of Medical Education and Curricular Affairs (MECA) established under Education and Student Services in FY 2001-02, and Debra K. Litzelman, M.D. named Associate Dean for MECA. In FY 2002-03 existing educational programs (Ruth Lilly Medical Library, Office of Medical Illustrations, Medical Educational Resources Program (MERP), and Continuing Medical Education) substantially reorganized to eliminate duplicative and competing functionality, to improve quality and delivery of services, and to focus on state of the art educational technologies. Resulting organizations are Information Resources and Educational Technologies (IRET) and Continuing Medical Education (CME).

Evidence of Progress for 2001-2002:

Julie McGowan, Ph.D., Director of Ruth Lilly Medical Library and Assistant. Dean, named Associate Dean for IRET. Charles Clark, M.D. named Associate Dean for CME.

Activities planned for 2002-2003:

Ongoing Activities

Fiscal Health

The School of Medicine continues to maintain tenuous fiscal health in 2002-03.
As reported in the 2001-02 annual planning and budget report, concern remains regarding the economic forecast for the State of Indiana and its potential impact on the School of Medicine, as well as the University as a whole. In 2001-02 $1,273,003 of the current budget was returned to the University as part of the State budget deficit coverage plan. In July 2002, as part of 2002-03, an additional $344,153 was returned to the University for this purpose. Additional current budget returns or base budget cuts will erode the School's ability to deliver top quality medical education to our students around the state.

General Fund Sources:
The strategic plan of the Indiana University School of Medicine (IUSM) that was completed in 1999 and that was accepted enthusiastically by the faculty as a whole, is to become one of the top ten public medical schools in the nation. As one measure of progress toward this goal, the fall 2002 fiscal analysis report shows projected ***indirect cost recovery (ICR) revenues*** for 2002-03 of $32.5 million. This is 18.3% over 2001-02 actual ICR. It is also an average annual increase of 14.23% for the four year period represented by the fiscal health report (see pages 12-13), and a total increase of 56.9% for the four year period. In addition to being a measure of progress toward the Dean's goal, it is also reflective of the fact that the NIH budget doubled in the five year period ended October 31, 2002. It is anticipated that the NIH budget may grow at a more modest annual rate for the next few years, perhaps 3.0% to 3.5%. This will have a direct and corresponding impact on the growth of School's ICR revenues over the same period, unless we can dramatically increase our research laboratory space as well as our number of research focused faculty.

State appropriations increased from $72,374,614 in 2001-02 to $74,036,047 in 2002-03. This increase includes $1,582,923 of appropriation funding for associates and bachelors degree allied health sciences technology programs. These programs were transferred from the School of Allied Health Sciences to School of Medicine as part of the transition of the School of Allied Health Sciences to a graduate school. The programs that were transferred to IUSM departments were the Clinical Laboratory Sciences, Histotechnology, and Cytotechnology programs to the Department of Pathology, Paramedic Sciences to the Department of Emergency Medicine, Radiologic Sciences to the Department of Radiology, and Radiation Therapy to the Department of Radiation Oncology. The other major increase in appropriated funds was $500,000 from the reallocation fund for 2002-03. These funds were used to implement aspects of IUSM's newly approved Information Technology Strategic Plan, specifically, creation of a Chief Information Officer position, a Chief Technology Officer position, a database administrator, and a systems developer position. The purpose of these positions, as well as the I/T Strategic Plan, is to

enhance the School's technology infrastructure in order to maximize the School's potential in achieving its educational, research, and service missions. It's purpose is also to make maximum use of the University's new information systems, meet the School's needs not otherwise met by University systems, and enable greater communication, cooperation, and efficiencies with our affiliated health partners.

Student fees increased from $19,870,940 in 2000-01 to $20,380,048 in 2001-02. This increase was primarily attributable to a 10.00% increase in medical student fees, since the number of medical students stays relatively constant. The total number of medical students enrolled for 2002-03 is 1,116, up from 1,084 the previous year. A 12.00% increase in medical student fees for 2002-03, along with inclusion of the allied health sciences undergraduate program student fees for the first time, results in projected student fee revenues of $21,949,993. The increase in undergraduate credit hours in the 2002-2003 budget shown in the fiscal health report on page 12, reflects the transfer of the associates and bachelors degree allied health sciences technology programs to the School of Medicine from the School of Allied Health Sciences, as stated above. The drop in professional credit hours between budget and actual in 2001-2002, as well as the 2002-2003 budget, is due to a realignment of course credit hours among the various centers for medical education and the Indianapolis campus.

In 2001-02 Clarian Health Partners support ***(Other Revenue)*** contained the contractual amount of $8 million committed to educational program support and, for the second straight year, included a $2 million bonus payment based upon Clarian's overall financial performance for the previous year. These additional funds were earmarked to fund new chair recruitment commitments made by Dean Brater to several of the new department chairs, center/institute directors, and deans recruited in fiscal years 2001-02 and 2002-03.

General fund net operating margin for 2001-02 was negative for the first time in several years, reflecting a net use, or reduction, of fund balance. This net use of fund balance funded new chair recruitment packages, and equipment and furnishings costs related to new construction and renovation projects, such as the Van Nuys Medical Sciences Phase II renovation.

Sponsored Program Sources (Contracts and Grants):

Overall grant awards to IUSM increased from $148,600,599 in 2000-01 to $169,510,043 in 2001-02, an 11.7% increase from the previous year. This follows an 11.5% increase in awards from 1999-00 to 2000-01, and a 16% increase from 1998-99 to 1999-00. As indicated above in the discussion of indirect cost recovery income (ICR), it is anticipated that future NIH budgets will grow at a slower rate than in the past several years. However, in January 2003 two new research facilities, Research Institute II and the Biotechnology Research and Training Center, will open. These buildings total 220,948 gross square feet of space and contain 80,822 net square feet of research lab and research support space. Four additional research facilities, potentially totaling 900,000 gross square feet, have been included in the ten year capital improvement plan submitted by the University to the State Budget Agency as part of the 2003-05 Indiana University capital appropriation request. This additional research space will expand IUSM's total research capacity, enabling us to compete for additional research awards and, hopefully, continue to experience accelerated growth in contract and grant awards and ICR.

Practice Plan Support:

In FY 2001-02, funding of IUSM departmental programs from clinical practice activities was $77,066,223, up 6.67% from the previous year's total of $72,249,197. This reflects a continued commitment of the clinical departments to fund departmental activities.

With regard to the practice funds' negative fund balance reflected on the fiscal health report (see pages 12-13), this fund as stated includes both IUSM departmental practice plan funded activities and activities reimbursed by IUSM's affiliated healthcare institutions. Most notable is the reimbursement from Clarian, Wishard, and the VA Hospital for House Staff Officers', or residents', compensation. This activity is invoiced on a current month basis, and accounts receivable are established monthly. The fund balance excludes accounts receivable.

Reallocation Plan

As mentioned in item 1 above, under state appropriations, IUSM received $500,000 of campus reallocation funds for 2002-03. These funds were used to create several positions necessary to implement the School's I/T Strategic Plan. The Strategic Plan is a comprehensive plan that will support the critical missions of the School and assist in reaching the goal of becoming a top ten medical school.

The Plan will further the campus planning theme/goal of teaching and learning by ensuring that the School will have the necessary technology infrastructure and tools to support distance learning and wireless network connectivity for student learning. The Plan will also support the campus planning theme of research, scholarship, and creative activity by developing support models that meet the unique needs of the research community and by developing or purchasing applications that can manage and analyze research data using database standards developed for IUSM.

The first guiding principle of the I/T Strategic Plan is to provide all IUSM constituents access to appropriate information through seamless and integrated mechanisms regardless of venue or geographic location. The second guiding principle is the need for a school-wide Information Services organization to assist the School and all constituent groups in achieving their missions and coordinating enhanced communications with our strategic partners.

The vision of this organization is not to control all aspects of technology, but rather to coordinate and facilitate the management of information technology throughout the School. The plan was approved by the IUSM I/T Strategic Plan Executive Committee, consisting of Dean D. Craig Brater, Chancellor Gerald Bepko, and Vice President Michael McRobbie in September 2002. The initial focus of the plan will be on establishing the new I/T organization from existing resources. The first step toward that goal was achieved when Vincent J. Sheehan was named Chief Information Officer for IUSM. The entire IUSM I/T Strategic Plan can be viewed on-line at http://www.medicine.iu.edu/technology/plan.

Uses of Student Technology Fees in 2001-02

In 2001-02 the School discontinued the modem pool/phone bank for internet dial-up service that it had provided to IUSM students since inception of the student technology fee program several years ago. This service was discontinued because the IUPUI campus dial-up modem pool had been expanded several times over this period and usage analysis provided by UITS indicated that sufficient dial-up line capacity existed within the campus modem pool to accommodate IUSM students without resulting in frequent busy signals.

At the time of this change, planning was undertaken by Dr. Stephen Leapman, Executive Associate Dean for Educational Affairs, Dr. Herb Cushing, Associate Dean for Medical Student Academic Affairs, Dr. Julie McGowan, Associate Dean for Information Resources and Educational Technologies, the Student Technology Fees Committee, and others to shift the focus of these resources into classroom technologies, such as wireless networking. To date, wireless network technology has been deployed in parts of the Van Nuys Medical Sciences building. Currently, discussions are underway regarding the use of PDAs for 3rd and 4th year medical students in clerkships and other settings.

Other Question(s)