2005-2006 Medicine

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

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

Goals and Objectives

- Accountability for use of research resources.

  - Adopt mission based management (3D) principles to track the sources and monitor the uses of research related funds.

  Campus Planning Theme: Research, Scholarship and Creative Activity

  Secondary Goals:

  Sub Unit:

  Time Frame: FY 2006 and ongoing.

Actions taken for 2005-2006:

As part of the 3D process, in the spring 2005 budget and planning sessions with academic department chairs, the deans reviewed the 3D reports, space data, and other
research productivity information. In addition, the Executive Associate Dean for Research has begun making research space allocation decisions based upon research productivity data and informing department chairs and faculty alike that there is an expectation that each square foot of research space generate $100 of indirect cost recoveries and up to $400 or more of total external funding per year.

Evidence of Progress for 2005-2006:

A 3D budget allocation model is currently being developed. In this model 75% or more of the indirect cost recoveries generated by an academic department would be returned to it as part of its general fund allocation. Therefore, the more ICR a department generates, the larger its general fund budget would be. A second component of this model is a space rent charge to every department for the space it occupies. If implemented it is expected that this will incentivize departments to utilize space more efficiently and not retain space that is not generating revenue.

Activities planned for 2006-2007:

Ongoing.

- Adopt mission-based management principles to track sources and uses of resources for each of IUSM’s missions.

- Develop a mission-based management system that will work for IUSM.
  
  **Campus Planning Theme:** Best Practices
  
  **Secondary Goals:**
  
  **Sub Unit:**
  
  **Time Frame:** Ongoing.

Actions taken for 2005-2006:

In the summer, fall, and winter of 2004 IUSM’s Data Driven Decisions (3D) design team completed much of its work developing the metrics and models to be used to measure faculty effort and productivity. These models were then populated with actual data for FY 2004, although much of it was collected from the faculty and department chairs using self-reporting methods because tools for collection of objective data on several aspects of teaching and clinical effort had not been developed. Reports were developed from the completed models that were then used for discussion purposes in the departmental budget and planning sessions in the spring of 2005 for FY 2006. There was general concern about skewed data, particularly in education, due to the self-reported data. By looking at all departments side by side, it became apparent where skewing was occurring, however, there were trends in the data across departments that made sense and so the data were considered by the deans, along with many other factors, in making budget allocations for FY 2006.

Evidence of Progress for 2005-2006:

We are currently completing the second full year of 3D reporting. Weaknesses in some
We are currently completing the second full year of 3D reporting. Weaknesses in some of the metrics and have been addressed, and the 3D project team is developing objective tools for the collection of faculty effort in education and clinical areas. One example of this is the collection of data from surgery and other clinical scheduling systems that reflect actual time spent by faculty in operating rooms and clinics to replace self-reporting of this information.

Much of the initial fear and furor expressed by the faculty over implementation of 3D has died down and been replaced by a grudging acceptance of it. Many department chairs are beginning to embrace 3D as a tool that will directly benefit them in running their departments more efficiently and effectively.

Budget allocation models are currently being developed based on the 3D faculty effort data to reward departments for outstanding productivity in education, research, and service/administration. One of these models may replace the existing historical incremental approach to budget allocations used within IUSM. If approved by the Dean, the new 3D budget allocation model could be used as part of the FY 2007 budget construction process in spring 2006, although it would likely not be the only factor used to make budget allocation decisions.

Activities planned for 2006-2007:

Continuation of 3D.

- Collaboration (internal and external) and technology transfer.
- Develop partnerships with industry through expanded relationships with ARTI and others.

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

Actions taken for 2005-2006:

In 2002 academic, business, civil, and economic organizations formed the Central Indiana Life Sciences Initiative (CILSI), now called BioCrossroads. Also in 2002 IU, Purdue, and Eli Lilly and Company formed a research partnership called Inproteo to discover new proteomic methods. In 2004 INCAPS, the Indiana Centers for Applied Protein Sciences, was established in the IU Emerging Technology Center at IUPUI. Also created in 2004 was the Indiana Health Information Exchange, a collaboration between the academic and private sectors to spawn new life sciences businesses in Indiana. Inproteo created two new companies this year, Prosolia and Tienta.

Evidence of Progress for 2005-2006:

In October 2004, $9.3 million in funding from the U.S. Department of Health and Human Services’ Agency for Healthcare Research came to IUSM to promote the use of information technology in health care. Part of this, $6.5 million, was to support the
development, implementation, and assessment of health information exchange in Indiana through the Indiana Health Information Exchange headed up by J. Marc Overhage, MD, PhD.

A $2 million 21st Century Research and Technology Fund award from the state of Indiana established the Center of Excellence in Computational Diagnostics which incorporates the talents of faculty at IU-Bloomington, IUPUI and Regenstrief Institute. This program is led by Susanne Ragg, MD, PhD, assistant professor of pediatrics and a specialist in oncology.

Clement McDonald, MD, received $1.9 million from the 21st Century Center Research and Technology Fund to establish a Center of Excellence in Medical Informatics at IUSM. Partners on the grant include IU-Bloomington, Purdue, Regenstrief Institute, Indiana Health Information Exchange, COOK Group, Eli Lilly & Company, Roche Diagnostics and Med Institute.

A pilot program to promote biomedical research collaboration has been formed by IUSM and Purdue. The program provides $350,000 per fiscal year in grants to enable researchers from the two schools to team up on work that is likely to spawn larger ongoing programs and attract outside funding.

Activities planned for 2006-2007:

Continued partnership opportunities.

- Conduct world-class research, scholarship, and creative activities relevant to Indianapolis, the state, and beyond.
- Increase NIH funding to IUSM faculty and increase industry funding of patient trials.

**Campus Planning Theme:** Research, Scholarship and Creative Activity

**Secondary Goals:**

**Sub Unit:**

**Time Frame:** Ongoing.

Actions taken for 2005-2006:

Grant proposals submitted to compete for these funds.

Evidence of Progress for 2005-2006:

IN FY 2004-05 NIH awards grew by 3.2%, due largely to inflationary adjustments. Other federal awards grew by 8.3% although commercial awards, primarily industry funded patient trials, fell by 7.6%.

Activities planned for 2006-2007:

Continued efforts.
Ongoing activities.

- Enhance civic activities, partnerships, and patient and client services.
- Enhance the Indiana University-Moi University partnership.
  
  **Campus Planning Theme:** Teaching and Learning, Civic Engagement, Collaboration
  
  **Secondary Goals:**
  
  **Sub Unit:**
  
  **Time Frame:** Ongoing.

Actions taken for 2005-2006:

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.

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Evidence of Progress for 2005-2006:

Construction of the Outpatient HIV Clinic, begun in FY 2004, was completed and the building became fully operational in June 2005. This is the first facility of its kind in all of East Africa much less Kenya and was funded completely by contributions solicited by the IUSM Department of Medicine. This building will support the Academic Model for Prevention and Treatment of HIV/AIDS (AMPATH) outpatient services. As of July 2005, there were over 14,000 HIV positive people participating and benefiting from the programs offered by AMPATH, and over 6,300 of these patients are on retroviral drugs. In July alone 1,166 new patients enrolled in the program – an average of 58 per day. This building finally gives AMPATH the space and resources necessary to care for all of its patients.

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Activities planned for 2006-2007:

Ongoing activities.

- High Quality, Diverse Students

  - Develop and implement recruitment plans for all students to achieve a diverse and highly qualified student population

  **Campus Planning Theme:** Teaching and Learning, Campus Climate for Diversity

  **Secondary Goals:**

  **Sub Unit:**

  **Time Frame:** Ongoing

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Actions taken for 2005-2006:

1. The Bridges to the Doctorate program is funded through an NIH grant and partners IUSM basic science departments with an historically-black institution, Jackson State University in Jackson, Mississippi. The goal of the grant is to increase the numbers of underrepresented ethnic minorities on the faculty at medical schools across the country.
2. IUSM’s NIH T35 Training Grant, Short-Term Training For Minority Students Program, was renewed for 5/1/05 through 4/30/06, with potential future funding for four additional years. This grant funds a summer laboratory research program designed to interest under-represented college students in careers in science and medicine.

3. The position of Director of IU School of Medicine Diversity Programs was created.

4. The Masters of Science in Medical Sciences continues to be one of IUSM’s chief programs for preparing under-represented students for entrance into medical school.

5. IUMG-Primary Care has pledged to contribute $1 as a match for every $2 contributed to the Wishard Memorial Foundation to benefit the Rawles Scholars Program. This program provides scholarships to under-represented medical students. IUMG-PC has pledged up to $2 million to this match.

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**Evidence of Progress for 2005-2006:**

1. After one year, two students from the program have matriculated into the IU graduate program (Department of Microbiology and Immunology).

2. In the summer of 2005, five undergraduate college students from around the country had the opportunity to work in a research laboratory and better understand whether a career in science or medicine was in their future.

3. Effective January 1, 2006, Robert W. Scott, M.D. will become Associate Dean and Director of IUSM Diversity Programs.

4. Eight students who matriculated in the first year during the 2004 - 2005 academic year gained medical school admission. IUSM offered 5 of the 8 admission letters. Three students gained admission at other medical institutions. Nine students who were not admitted to medical schools, but remained in good academic standing advanced to the second year in the program.

Three of the nine second year MSMS students gained admission to medical schools. IUSM offered admission letters to all of them. One of the students who did not gain admission instead gained admission to the Ph.D. program in Biochemistry at IUSM. Another graduate is teaching in his former high school in Texas. The remaining graduates are taking additional graduate courses and planning to reapply for medical school admission. These figures are consistent with the statistics for this program over the past several years.

5. This generous contribution will greatly enhance IUSM’s ability to attract and retain top-flight under-represented medical students, enhancing the program’s diversity.

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**Activities planned for 2006-2007:**

Continuation of activities.
increase number and funding of scholarships.

**Campus Planning Theme:** Teaching and Learning, Campus Climate for Diversity

**Secondary Goals:**

**Sub Unit:**

**Time Frame:** Ongoing

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**Actions taken for 2005-2006:**

IUSM’s goal of being a top medical school includes attracting the best and brightest medical school candidates and offering them a top flight educational experience. There is a good deal of competition among medical schools for these candidates, who are often given full ride scholarships at well endowed schools. In order for IUSM to compete, it must have ample scholarship funds available. For this reason IUSM has increased the priority of scholarship fundraising among its many development priorities.

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**Evidence of Progress for 2005-2006:**

Eight new named scholarship funds were established in FY 2005. Scholarship gifts received totaled $2,104,809 and total ending market value of scholarship funds was $29,328,496 at June 30, 2005, up from $26,344,967 at July 1, 2004 and up from $16,476,915 since July 1, 2000. That is up $12,851,581 or 78% in five years; an average annual increase of 15.6%. There are 133 named scholarships.

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**Activities planned for 2006-2007:**

**Ongoing Activities**

- Improve educational programs/processes AND high quality outcomes.
- Improve educational programs/processes.

**Campus Planning Theme:** Teaching and Learning

**Secondary Goals:**

**Sub Unit:**

**Time Frame:** Ongoing

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**Actions taken for 2005-2006:**

In 2003 IUSM began a 3 year process of self-study and organizational development known as the Relationship Centered Care Initiative (RCCI). The project is supported by a 3 year grant from the Fetzer Institute. The focus of RCCI is the so-called informal curriculum of the medical school; namely, how people interact with one another including patients. IUSM is studying how to transform the informal curriculum of a medical school to foster relationship - attentiveness to human interactions - in all aspects of medical school and practice. The desired outcome is a social environment that consistently reflects and reinforces the moral, ethical, professional, and humane values expressed in the School’s formal curriculum.
Evidence of Progress for 2005-2006:

RCCI began with a small administrative workgroup and a discovery team consisting of competency directors, students, and two external consultants. The discovery team now has over 100 members, representing the entire IUSM community, and continues to grow. Using the process of appreciative inquiry the team has collected over 180 interview stories of the system at its best. Core strengths and values of the IUSM community have been identified. Inspired by these findings, participants are engaged in fostering these core strengths through various activities including campus publications and forums, training opportunities, departmental partnerships, and faculty committees.

One outcome of the RCCI process has been the establishment of a School of Medicine Honor Code. The purpose of the Honor Code is to create an atmosphere of honesty, a culture of respect, and an environment of trust among students, residents, faculty, and staff at IUSM. It is our expectation that students and faculty alike will not only commit to abide by the guidelines set forth in the honor code, but that they will also incorporate those ideals into their belief systems, both now and throughout their careers. In order to develop the skills required to operate in a self-governing profession, it is imperative that students and faculty learn to work together to resolve problems, and are held accountable for addressing any unethical behavior of their peers.

Activities planned for 2006-2007:

Ongoing Activities

- Infrastructure to support research mission.
- Develop IUSM research business plan

  **Campus Planning Theme:** Research, Scholarship and Creative Activity
  **Secondary Goals:**
  **Sub Unit:**
  **Time Frame:** FY 2003-04 and ongoing

Actions taken for 2005-2006:

Research business plan completed and approved by IUSM deans in December 2003. Annual progress reports and updates to the business plan were written in September 2004 and December 2005. The position of Assistant Dean for Clinical Research was created based on the analysis of needs and opportunities in this area by a task force. The position has been filled by Rafat Abonour, MD (see below).

Evidence of Progress for 2005-2006:

The December 2005 update projects that IUSM can still achieve its goal of doubling research funding despite very limited growth in NIH budget; however, the timeline for
Research funding has always been very limited in many budgets, however, the timeline for doubling must be extended by one year. In addition, success is increasingly contingent upon the future growth of the NIH budget, state approval and state funding for construction and operating costs of new IUSM facilities, and funding of new faculty start-up packages.

Activities planned for 2006-2007:

Annual update of business plan.

- Infrastructure to support research mission.

- Create Office of Clinical Research Support.
  
  **Campus Planning Theme:** Research, Scholarship and Creative Activity  
  **Secondary Goals:**  
  **Sub Unit:**  
  **Time Frame:** FY 2003-04 and ongoing.

Actions taken for 2005-2006:

In FY 2003-04 a committee of clinically oriented research faculty and staff was established to analyze and make recommendations as to how to enhance clinical research opportunities. One key recommendation was to establish a new administrative unit with a goal of greatly increasing the schools clinical research efforts.

Evidence of Progress for 2005-2006:

In June 2005 Rafat Abonour, MD became Associate Dean for Clinical Research at IUSM. Dr. Abonour will oversee the new clinical research support office that will provide business services, marketing to enhance patient recruitment, services to study coordinators and education to new and existing investigators and other study personnel. Clinical research activities will now be consolidated under one administrative office. The goal is to significantly expand translational and clinical research at IUSM, an effort that parallels the NIH Roadmaps emphasis on clinical and translational research.

Activities planned for 2006-2007:

- Creation of a new administrative unit.

  - Increase funding available to support administrative and facilities infrastructure of IUSMs research mission.  
    **Campus Planning Theme:** Research, Scholarship and Creative Activity  
    **Secondary Goals:**  
    **Sub Unit:**  
    **Time Frame:** FY 2003-04 and ongoing.
Actions taken for 2005-2006:

State legislators invited to IUSM for tours, presentations, and discussions regarding school's missions and importance to the State's health and economy. In the FY 2003-05 biennial budget bill, the state legislature approved an operating appropriation of $3.2 million over the biennium for the IUPUI campus directed at strengthening its research infrastructure. IUSM received $2.57 million of this total.

Evidence of Progress for 2005-2006:

Funding from the 2003-05 biennial budget was used to expand funding available for biostatistical services that are a critical aspect of developing research to the point of being able to submit grant proposals. In addition, funding was expanded for laboratory animal research center operations, HIPAA research compliance, data security, research facilities maintenance, repair, and rental, the creation of a research fiscal compliance officer position, and the creation of a base budget for the new clinical research support office and budget enhancement for other central research administration functions.

In the FY 2005-07 biennial budget bill the state legislature approved additional research support appropriations of $4,895,799 for health sciences. Of this total IUSM has now received $2 million of new general funds base budget for FY 2006 and anticipates receiving an additional $2 million of base funds for FY 2007, bringing the total state research support appropriations in its base budget to $6.57 million. The downside of the 2005-07 appropriation is that these funds will be needed to fund new research building operating costs for MISB and Research institute III if the legislature does not appropriate plant expansion funds for this purpose in the next (2007-09) biennial budget bill.

Activities planned for 2006-2007:

Continued communication planned with critical constituents.

Intensify commitment to the community.

Continue and expand the Office of Medical Service Learning.

Campus Planning Theme: Teaching and Learning, Civic Engagement
Secondary Goals:
Sub Unit:
Time Frame: Ongoing.

Actions taken for 2005-2006:

Program implemented.
Evidence of Progress for 2005-2006:

IUSM medical students participate annually in the Spring House Calls program. This is a day-long activity that teams students with homeowners in the Haughville and Blackburn areas who have requested assistance to help clean up their yards and properties. In the past seven years, over 600 students have volunteered thousands of 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, doctor camp, Super Shot Saturday, and Alternative Spring Break.

Activities planned for 2006-2007:

Ongoing activities.

- Quality faculty enthusiastic about their role as educators.
- Create a faculty development program for IUSM that will provide education and support for teaching career development, teaching methods, peer review, and other career issues.

  **Campus Planning Theme:** Teaching and Learning
  **Secondary Goals:**
  **Sub Unit:**
  **Time Frame:** 2002-03 and ongoing.

Actions taken for 2005-2006:

The Leadership in Academic Medicine Program (LAMP) was developed in FY 2002-03 and implemented in FY 2003-04. Two faculty groups have successfully completed the LAMP program and given it very positive evaluations.

Evidence of Progress for 2005-2006:

Owing to the importance of faculty and personnel development, the position responsible for this activity was increased in stature from Associate to Executive Associate Dean. In FY 2005 Dr. Stephen Bogdewic, Executive Associate Dean for Faculty Affairs and Professional Development engaged Executive Development Group, LLC to assist in establishment of a new, additional faculty development program for mid-career faculty that will be focused on leadership development at both the department and school levels. The goals of this new program are to expand and enhance IUSM’s faculty development initiative, offer faculty more opportunities, insights, and tools to develop their careers, and grow the next generation of academic and administrative leadership for IUSM.

Activities planned for 2006-2007:

Ongoing Activities
Fiscal Health

* Fiscal health report for 2006-07 is attached as PDF file.


General Fund Sources:

Student Fees
Student fees increased 12.78% from $27,184,820 in FY 2005 to $30,660,349 in FY 2006 or $3,475,529. IUSM increased resident M.D. program tuition 11.5% from $18,713 in FY 2005 to $20,864 for FY 2006, or $2,152. The fee rate is the second lowest rate within the Big Ten public schools and is $2,234 below the mean. The non resident rate increased $2,250 or 5.9%. The non resident rate is the forth highest out of the nine Big Ten public schools. Total professional fees increased 14.58%, while the graduate fees increased 8.84% and undergraduate increase was 4.82%. The School of Public Health experienced a growth in the graduate fees by 17.7%. In FY 2007 IUSM increased the resident M.D. tuition rate from $20,864 to $23,276 per student per year, a jump of $2,412 or 11.6%. This maintains IUSM’s rank as the second lowest of the Big Ten public schools.

State Appropriations
State operating appropriations base budget decrease by 4.16% or $3,672,797 from FY2005 ($88,370,302) to FY 2006 ($84,697,505). The decrease was due to three main factors. A Hold Harmless Adjustment $404,620 is one cause of the decrease, add are increase in un-avoidable pass-through and the 1% pullback. The decrease would have been more if not for the $500,000 received from the Chancellor’s Reallocation Fund. The State Appropriations Base Budget was adjusted within FY 2006 for $2,864,044. Additional state research support was increased by $2,000,000. Campus awards for two Chancellor Professor ($10,000) and one Glen Irwin Award ($3,000) were added to the schools state appropriations. $55,000 of appropriations for Bio-Medical Engineering was removed from the school. The full funding for Bio-Medical Engineering has now been fully removed from the School’s state appropriations. The other changes to the base budget was the hold harmless adjustment of $906,044. The hold harmless adjustment has an offsetting adjustment in Campus Assessment which equates to no additional funds.

Indirect Cost Recoveries
Indirect cost recoveries fell 1.61% from FY2005 ($35,912,849 to FY 2006 ($35,333,880) by $578,969. This amount was higher than budget by $158,880, or the school was within .45% of the budgeted projection. IUSM is anticipating less indirect cost recovery for FY 2007, or a decrease of $600,000 (FY 2006-$35,175,000 to FY 2007 -$34,575,000) or 1.7% decrease. At present this trend is anticipated to continue for FY 2008 with the possible decrease of 10% to 12%. Most of the decrease is due to the National trend, however the School is working on identify possible internal causes and corrective action.

Other Revenues
Other revenue contains educational support from Clarian Health partners. Clarian is contractually committed to providing $8 million annually, but will provide up to $2 million of additional support based upon their financial operating results of the previous fiscal year (1/1 through 12/31). In FY 2005-06 IUSM received the full $10 million of educational support for the fourth straight year. In the FY 2004-05 annual report to the campus, IUSM predicted a lower probability of receiving the full $10 million for the ensuing few years, due to the openings of the Clarian West and Clarian North hospitals. Although the full amount was received last fiscal year, IUSM feels it is wiser to be conservative.
and budget only $8 million of educational support for the next few years.

Other Fund Sources:

Philanthropy

IUSM received 18,604 new gifts from 13,919 donors totaling $26,070,566 during FY 2005-06. Major gifts of $10,000 or more represent 78%, or $20,329,548 of total giving. Gifts from 2,015 alumni accounted for $2.7 million. The 3-year annual average of total gifts received was $31.8 million, excluding grants from the Lilly Endowment. New planned gift commitments were received from fifteen donors with a known value of $2,508,925. As of June 30, 2006 the known value of all planned gift commitments for IUSM totaled over $83.1 million.

The Lance Armstrong Foundation Chair in Oncology and the Jean A. Creek Professorship, the Manwaring Professorship in Pathology and Laboratory Medicine, and the James A. Norton Senior Professorship in Medical and Molecular Genetics were all established in FY 2005-06. Eighteen new named research funds, along with two new named lectureships, one named fellowship, and seven named student scholarships were all newly established in FY 2005-06.

Sponsored Program Sources

In FY 2005-06 sponsored program awards from all sponsors and categories totaled $216,933,634, a 3.9% increase over the previous fiscal year. NIH awards grew 4.0% in FY 2005-06, to $108,922,164, or 50% of total awards for the year. The increase is somewhat reflective of the annual inflationary adjustment in these grants. Other federal awards decreased by 4.7%, commercial awards increased by 10.0%, non-profit awards decreased by 11.8%, higher education awards increased by 29.1%, State of Indiana awards decreased by 12.5%, and foundation awards increased by 54.7%. Grant highlights are included in the IUSM FY 2005-06 Accomplishments, Notable Grants and Awards section of this document.

Reallocation Plan

IUSM received $513,000 of campus reallocation funds in FY 2005-06 and $513,000 in FY 2006-07 as shown in the fiscal health report. These funds continued the creation of general fund base budgets for the Center for Computational Biology and Bioinformatics and the Stark Neurosciences Research Institute, both of which were instituted in FY 2002-03.

The Center for Computational Biology and Bioinformatics (CCBB) was established with support from the Indiana Genomics Initiative. The center is home to scientists who use software to analyze biological information - the experiments run on computers rather than in traditional laboratories. CCBB received $75,000 of new general fund base budget in FY 2005-06.

The Stark Neurosciences Research Institute (SNRI) is an interdisciplinary research center that enhances collaboration among scientists who share the goal of understanding the basis of central nervous system diseases. SNRI received $100,000 of new general fund base budget in FY 2005-06.
In FY 2005-06 $325,000 was allocated to the Department of Biochemistry and Molecular Biology for program development and to begin building a base budget for the chemical genomics core. Finally, in FY 2005-06 Richard Schreiner, MD, received the Glenn W. Irwin award of $3,000. In that fiscal year Janice Froelich, PhD, and William Bosron, PhD, each received Chancellor’s Professorships of $5,000.

In FY 2006-07 CCBB received its final increment of $50,000 of new general fund base budget and SNRI received its final increment of $25,000 of new general fund base budget. The Department of Biochemistry received an additional $50,000 of new general fund base budget for program enhancement and $100,000 of new base to continue creation of a general fund base budget for the chemical genomics core.

$150,000 of new FY 2006-07 base was allocated to begin building a general fund base budget for the newly established Center for Environmental Health which will focus on the human health effects of the environment, which influences the initiation and progression of many chronic diseases such as cancer, neurodegenerative diseases, heart disease, asthma and diabetes.

$125,000 of new FY 2006-07 base from the campus reallocation fund was earmarked to establish the Clinical Translational Research Institute. A total of $420,000 of general fund base budget was set aside in FY 2006-07 for this purpose.

Finally, $13,000 was awarded by the campus for Chancellor’s Professors and Distinguished Professors awards in FY 2006-07.

Other Question(s)

1) Doubling goals: In what ways has and will your responsibility center contribute to the Chancellor’s doubling goals for enrollment (retention and graduation rates and degree conferrals), research and scholarship (grants and contracts), and civic engagement (service learning, internships, community collaborations)?

Enrollment

In CY 2006 IUSM undertook a physician workforce study to project future demand for physician services in the State of Indiana. The study found that Indiana could face up to a 30% shortfall in physicians, particularly in rural areas of the state. The study results reinforced earlier findings of the Association of American Medical Colleges (AAMC) regarding projected physician shortages and a call by the AAMC for medical schools across the country to increase medical school enrollments by between 15% and 30%. As a result, IUSM has developed a plan to increase medical school class size 30% over a six year period beginning with the August 2007 entering class. Class size will expand by approximately 14 new students per year over the six year period, from 280 students per class year to 364 students per class year in FY 2012-13, for a total enrollment of 1,456 medical students. Even though this is a significant increase in enrollment for the medical school, this increase will not appreciably contribute to the enrollment growth of IUPUI.

The IUSM open enrollment PhD program will enroll its first students in fall 2007. This program is the culmination of two years of labor redesigning the curricula of IUSM’s decentralized departmental PhD programs into a consolidated program in which first year students take a common curriculum before selecting a major discipline for specialized study. This common first year should create more of a sense of community and cohesiveness among the graduate students than has previously been possible and should increase student satisfaction. These factors, as well as the enhanced curriculum and increased research opportunities that will result from the life sciences initiative should enable IUSM to expand the class size of the PhD program and attract top quality students from around the nation and the world. As with the expansion of the medical school class, however, this will not substantially impact IUPUI’s enrollment totals.

Research and Scholarship

In FY 2005-06 Indiana University launched its Life Sciences Initiative (LSI). Dean D. Craig Brater, MD, along with Interim Bloomington Provost Michael McRobbie, and President Adam Herbert were at the forefront of this...
In 2005-06 the Office of Medical Student Learning (OMSL) continued to expand its mission of ... by adding two new community service projects to its already impressive roster of civic engagement projects. Medical student Melissa Spurr founded a chapter of BestBuddies at IUSM. BestBuddies is a non-profit dedicated to enhancing the lives of people with intellectual disabilities. Medical students will be paired with and spend time with individuals from this community, many of whom are residents of group homes. A second new program begun in 2005-06 was Helping Habitat, established by J.T. Gripe. Through this program, medical students participate in a variety of Habitat for Humanity projects. OMSL also continued its highly successful programs, such as Rock for Riley, Doctor Camp, Alternative Spring Break, Evening of the Arts, and many others. These programs provide medical students with invaluable teaching and learning experiences, both within Indianapolis and around the globe, enhance the quality of their education, make them more culturally sensitive doctors, and allow them to give something to the communities in which they learn and serve.

Dr. Javier Sevilla Martin joined the Indiana University Department of Family Medicine in 2002 where he completed a one year faculty development fellowship in underserved medicine and leadership and now he offers elective rotations in Underserved Medicine to medical students and residents with emphasis on quality of care, cultural competence and medical Spanish. He was appointed Director of International Medicine and Hispanic Health within the department in 2005. Dr. Sevilla is faculty advisor for the Society of Latino SOL medical students and the International medicine and global health medical students interest group, providing support and guidance in the development of educational and service activities in the community and Latin America.

The Department of Family Medicine's Center of Excellence for Hispanic and Latino Health has made a clear commitment to improving the quality of life for Indiana's Hispanic and Latino community. We believe that models developed and tested in Indiana will prove effective in other communities. Notably, the community is not simply a target of our program—they are partners in our shared mission. Department of Family Medicine faculty collaborate with numerous community organizations and agencies in programs and projects that focus on clinical care, education, or research to improve the quality of medical care available to Indiana's growing Hispanic/Latino population. These partners include the Indiana Latino Institute, Indiana Primary Health Care Association, Indiana Minority Health Coalition, Center of Excellence for Women's Health and Indiana State Department of Health among others.

The Center of Excellence for Women's Health was named an Ambassador for Change (the next phase of the Center of Excellence) by the Office of Women’s Health, Department of Health and Human Services (HHS) for helping to develop models and tools that could be used to incorporate gender health into national health promotion efforts.
Excellence program) by the Office on Women's Health of the Department of Health and Human Services (DHHS). The Center helped organize over 30 community-based events at which women's health issues were highlighted. In addition, approximately 65 health care providers attended the Center's 4th annual Women's Health Symposium for Primary Care Providers. The 2006 patient census for women's health services at the Center's primary site on the Wishard Hospital campus was over 55,000. Plans are underway to create satellite clinics at local area IUMG sites, specifically Clarian West. The Center is in the process of creating an IU Center for Family Violence Education, Research, and Prevention.

2) Diversity: What actions have you taken and what results have you achieved in retaining and graduating a diverse student body; enhancing diversity in research, scholarship, and creative activity; and recruiting, developing, and supporting diverse faculty and staff?

The "Bridges to the Doctorate" program continues through July 2009. This NIH grant partners IUSM with Jackson State University in Mississippi, an historically-black institution for the purpose of increasing the numbers of underrepresented ethnic minorities on the faculty at medical schools around the country. Participating students complete master's degrees at Jackson State and continue their thesis research at IUSM during summers.

The Masters of Science in Medical Sciences (MSMS) program is in its twelfth year. Its purpose is to attract students from backgrounds that are disadvantaged and underrepresented in medicine and to prepare them for success in a medical curriculum and in medical practice. 72% of former MSMS students (1995-2004) have matriculated into US medical schools.

In January 2006 IUSM held its fourth annual Diversity Week celebration. Health-care professionals from across the country met January 15 through 20, 2006 and focused on health-care disparities, a growing problem in the minority community. Speakers discuss these issues and proposed solutions to be integrated in health-care training and delivery. Presentations included:

- "Health Care Disparities for Women" 
  Haywood Brown, MD, chair, Duke University Department of OB/GYN

- "Medical Injustice" 
  America Baracho, MD, Los Angeles Latino community leader

- "Access to Health Care" 
  Sandra Gadson, MD, president, National Medical Association, and

- "Access to Health Care-A Patient's Perspective" 
  Kem Moore, HIV/AIDS activist

The week began with the IUPUI 36th Annual Martin Luther King, Jr. Dinner. The keynote speaker was Mae C. Jemison, MD, the first African-American female astronaut.

In January 2006 Robert W. Scott, MD was named Director of IUSM Diversity Programs and Associate Dean. Unfortunately, early in the year DR. Scott became ill and passed away. IUSM is currently recruiting to fill this position. In 2006, IUSM developed a strategic plan for the Office of Faculty Affairs and Professional Development that includes strategic plans for diversity issues. The strategic objective of diversity affairs at IUSM is to foster "an environment in which diversity is valued and sought - a civil learning and work environment free from discrimination and intolerance so that each member of the School of Medicine can succeed to the highest level of their potential", and to foster "an environment in which all women faculty and students have ample opportunities for development and growth." This strategic plan is being finalized currently, including an accompanying budget request.

3) Campus collaboration: In what ways has your unit collaborated with other units to enhance teaching and learning and/or research and scholarship? What plans do you have to strengthen collaborative activities in coming years?
IUSM has historically collaborated extensively in the research and teaching arenas with other schools on the IUPUI and Bloomington campuses, as well as with Purdue University. The School of Science at IUPUI will occupy space in the Medical Sciences and MISB buildings in an effort to bring together researchers with common research interests. The Life Sciences Initiative (LSI) is designed this collaboration to the next level.

4) *International scholarship:* How extensively are faculty in your school involved in research on international topics or in collaborations with international colleagues? Please cite some examples.

In April 2006, IUSM scientists Mark Pescovitz, M.D., professor of surgery and of microbiology and immunology, and Henry Rodriguez, M.D., assistant professor of pediatric endocrinology, began leading an international study to test the drug rhuixinab’s potential to preserve insulin production in newly diagnosed type 1 diabetics.

Hugh C. Hendrie, MB, ChB, DSc. Professor of Psychiatry in the IUSM Department of Psychiatry, was honored for his dedication to Alzheimer’s research by the Alzheimer’s Association on May 7, 2005 in Chicago. The association noted “Dr. Hendrie’s professional accomplishments span several decades as a practitioner, researcher, scholar, teacher and mentor. His extensive international research on epidemiology and risk factors for Alzheimer’s disease and related disorders in cross-cultural populations earned Dr. Hendrie worldwide recognition as a pioneer in identifying modifiable risk factors for age-related brain diseases.”

The International Spinal Muscular Atrophy (SMA) Patient Registry was established at Indiana University in response to a recommendation from Families of SMA. Families of SMA is a patient driven group dedicated to advancing research and supporting Families. The International SMA Patient Registry is funded by this organization. This registry provides an important means of communication between investigators who are interested in SMA research and families who are interested in furthering this research. Investigators who are interested in SMA research need access to information concerning SMA patients and families. It is important to establish a system whereby scientists and SMA families can get in touch with each other. The International SMA Patient Registry makes this happen by collecting and maintaining information on SMA patients and families.

In September 2005, the European Union awarded the law school at IUPUI a grant to develop a Jean Monnet Module of Courses on Comparative EU and US Law, Public Policy and Ethics in the Regulation of Research and Development in the Life Sciences, funded by the European Union. This module is a collaboration with the law school’s Center on International and Comparative Law and the Indiana University Center for Bioethics, directed by Eric Meslin, PhD, Associate Dean of IUSM.

These are but a few of the many examples of research and collaboration between IUSM faculty and other investigators and scholars at institutions all across the globe.

5) *Internationalization of curriculum:* How extensive are international perspectives and content in curricula in your school? Are international perspectives present in the core requirements for undergraduate degrees? Are there degree or certificate programs with an international emphasis? Do you have study abroad programs?

The Department of Family Medicine’s Hispanic Health Initiative meets this demand by improving health issues and eliminating health disparities facing Indiana’s Hispanic population. The Hispanic Health
Initiative combines a systematic and methodical offering of educational, clinical, linguistic, service and research training and activities focused on medical students, public health students, and primary care residents.

The Department of Family Medicine also created the Global Health Honduras Project in 2003 to expand and diversify medical education under the department’s Hispanic Health Initiative. Global Health Honduras Project is a partnership between the Department and the Honduran medical school located in Tegucigalpa. This new exchange program allows students at Indiana University to broaden cross cultural medical and global health experience by spending one month in Honduras. Once a year students participate in a 4-week elective in Honduras where they work on a week-long medical brigade, rotate in local hospitals and clinics, practice Spanish and learn life in a developing country by living with host families. Additionally, during the first week of the rotation, others travel to Honduras to participate with the medical students in a one-week medical brigade and public health intervention. To date, 21 medical students, 7 master in public health students, 1 master in health sciences student, 1 public health faculty, 1 family practice resident, and 6 family medicine faculty have participated.

The IU-Kenya Partnership promotes bilateral exchange of students, post-graduate trainees, and faculty members. Since 1990, over 190 residents at IU have taken elective rotations in Kenya. Virtually all of these residents have rated their elective in Kenya as the premier experience of their residency training. While at the Moi University School of Medicine (MUSM), their responsibilities include patient care, teaching and clinical research activities. More than 180 senior students from IU have taken clinical electives at MUSM. A two month-long summer ambassadorship for freshman medical students was initiated in 1996 that enables two to four IUSM students to travel to Kenya each summer to take classes, participate in community-based projects and service, round in the hospital, and live with their Kenyan counterparts in the dorms.

Together with the other institutions in the ASANTE consortium, Indiana University has sponsored and hosted 14 Kenyan medical students each year for 2-month electives in the US. Most of the faculty members at MUSM have also visited Indiana University for the purpose of training, collaborative research, and program development. Fostering a spirit of interdisciplinary collaboration between the United States and Africa is an important priority for the IU-Kenya Partnership. Since its inception, the Partnership has involved personnel from the basic sciences, anesthesiology, pathology, laboratory technology, dermatology, toxicology, radiology, medicine, pediatrics, gynecology, surgery, psychiatry, orthopedics, public health, management and administration, medical and research ethics, research administration, informatics, biostatistics and epidemiology, nursing, dental health, allied sciences (physical therapy and occupational therapy), sociology, anthropology, physical education, and social work.

IUSM’s Office of Medical Service Learning (OMSL) sponsors Alternative Spring Break International, which offers up to 10 first- and second-year medical students an opportunity to participate in short-term community building projects and community health initiatives in Nicaragua during spring break. The participating students are accompanied by a physician from the surrounding area and work towards improvements in community health. OMSL also sponsors the Calnani Health Education Outreach program, which provides health care and education for a medically underserved village in Mexico. Each year at spring break, a team of Spanish-speaking medical students, nursing students, dental students, public health students, physicians, dentists, and nurses spend one week providing basic health care and education to the people of the village and surrounding villages.

Finally, IUSM has many international faculty, medical students, residents, and graduate students. These individuals bring their diverse cultural backgrounds and experiences with them to IUSM and this plays an informal, but important part in making the IUSM experience richer for all involved.