# Dean's Newsletter January 22, 2002

#### Table of Contents

- Respect in Our Workplace
- Chair of the Leadership Council for BioX Appointed
- Appointments and Reappointments of Department Chairs
- School of Medicine Strategic Planning Initiatives
- Medical School Faculty Senate on Clinical Curriculum
- Conference on Preventive Health Care for Women
- Stanford Blood Center Urges Donations
- Dedication of the Freidenrich Auditorium at the Lucile Packard Children's Hospital
- Appointments and Promotions

### **Respect in Our Workplace**

With the beginning of the New Year and the exciting prospects for our individual and collective futures that will emerge through our School-wide Strategic Planning efforts and other important initiatives, it is important that we take stock of how responsive our workplace is to handling the additional burdens of challenge and change and, even more importantly, that we assure that it our workplace is respectful to all who work on behalf of the School and Medical Center.

First, I am cognizant that our students, faculty and staff are all working very hard. I am also aware that the burden of responsibility and workload has increased during the past years and that we must acknowledge the limits of our mutual limitations. This is especially the case when new expectations are initiated without altering or decreasing those already being performed. Accordingly, I have asked the senior administrative leaders within the School of Medicine to address current workflow and related expectations, and to seek creative ways of reducing or eliminating unnecessary or redundant work efforts or procedures. I would encourage all members of our staff to review what they are now doing and bring forward suggestions to their respective DFAs and administrative leaders about better ways to get our work done. An important part of this is to find ways to improve the work/personal balance for all members of our Medical School community.

In addition to the workload challenges we all face, I want to underscore how importantly the Senior Deans and I view the respect and integrity in our workplace and its relationship to our missions and our School. The statement currently contained in the Faculty Handbook captures these principles and is noted immediately below:

Stanford University School of Medicine is committed to providing a work environment that is conducive to teaching and learning, research, the practice of medicine and patient care. Stanford's special purposes in this regard depend on a

shared commitment among all members of the community to respect each person's worth and dignity. Because of their roles within the School of Medicine, faculty members, in particular, are expected to treat all members of the Stanford community with civility, respect and courtesy and with an awareness of the potential impact of their behavior on staff, students and other faculty members.

Despite what has been written, I am well aware that Stanford Medical School has not always been viewed as a "respectful workplace" as it should be. Since arriving last April, I and the Senior Deans have done as much as we could to make clear that we would have zero-tolerance for inappropriate behavior, including sexual harassment or any form of discrimination. I want to underscore that commitment. Should you have concerns please contact a member of the Dean's Office or our Ombudsperson, Ms. Martha McKee.

A respectful workplace is something we all want and that we all deserve. It is up to each of us to make that happen. It is also up to our leadership to address any concerns that arise. I am committed to doing so.

#### Chair of the Leadership Council for BioX Appointed

On January 28<sup>th</sup>, Dr. Matt Scott, Professor of Developmental Biology and of Genetics was named the Chair of the Leadership Council of the BioX program. This is a new position, which reports to the Dean of Research in coordination with the Deans of the Schools involved with BioX and the Clark Center. A Search Committee consisting of members from the Schools of Medicine, H&S, Engineering and SLAC recommended Dr. Scott for this position. In virtually everyone's opinion, Dr. Scott is uniquely qualified to Chair the Leadership Council for BioX. He will also remain a member of the Howard Hughes Medical Institute while assuming these new responsibilities.

Dr. Scott's appointment and the new Leadership Council represents further evolution in the maturity and development of the BioX program, including those that will reside in the Clark Center. In considering this position, Dr. Scott notes that "I am grateful to all the people who have worked, and are working, so hard to build this Program. Jim Spudich, Steve Chu, Channing Robertson, and other faculty, and the University leadership, deserve enormous credit for undertaking a challenging and exciting new approach to bringing disciplines together. The two great gifts, from Jim Clark and the anonymous donor, have brought the Program to life."

I know that I and others throughout the School and University also want to add our thanks and appreciation to Jim Spudich and Channing Robertson and many other faculty for their important leadership during the past several years.

In conjunction with the Deans from the Schools engaged in BioX, several programmatic areas are being considered for the Clark Center, including Biocomputation, Biophysics, Biodesign, Bioengineering, Chemical Biology, Genomics/Proteomics and Regenerative Medicine (including stem cells). The Clark Center will also be a gathering place where people who are not residents of the building and will include visiting

scientists and engineers from campus and beyond. That way the BioX and Clark Center programs can maintain flexibility and accommodate and support new ideas for interdisciplinary efforts.

A key to the success of the BioX Program and the Clark Center will be to make it easier for students and fellows to undertake projects that take advantage of knowledge from multiple fields. As Dr. Scott notes: "Much remains to be done to make it easy for teams from different fields to work effectively together on a biological problem. Simply putting people from different fields near each other is not nearly enough. We will need to create new curricula, alter the usual single student-single mentor structure, and find ways to overcome the language and conceptual barriers that prevent useful collaboration. In industry it is routine to form multi-disciplinary teams, but that model is only useful to an extent since their goals are often short-term and highly defined. We need to create such teams, or really create a way for such teams to continuously form, but with the long-term triple goals of education, discovery, and invention. As we continue to build the Program, we will be asking faculty, students, and fellows to identify specific mechanisms for creating diverse and functional teams."

"Education is the key to successful interdisciplinary research. I think that BioX will become recognized as an important educational initiative. BioX should be very exciting for undergraduate students, graduate students, medical students, postdoctoral fellows, and clinical scientists."

Although the concept of interdisciplinary research and education has become a goal for many institutions around the country, Stanford remains the pacesetter in this exciting new domain. With Dr. Scott's appointment, the role that Stanford will play in opening new research and educational pathways seems assured – and very exciting.

### **Appointments and Reappointments of Department Chairs**

During the past months a number of transitions, appointments and reappointments of basic and clinical science chairs has occurred. Among these are the following:

- Dr. David Botstein, who has served as Chair of the Department of Genetics for the past decade, will step down on January 31<sup>st</sup> and be succeeded by Dr. Rick Myers. We all owe a great debt of gratitude to Dr. Botstein for building one of the finest Genetics departments in the world.
- Dr. Helen Blau stepped down as Chair of the Department of Molecular Pharmacology on January 1<sup>st</sup> to assume directorship of the Baxter Laboratory. We are currently working the Department to appoint its next leader and have every expectation for an outstanding future for molecular pharmacology and chemical biology in the years ahead.
- Dr. Gary Glazer was reappointed Chair of the Department of Radiology and will continue to develop the outstanding program he has helped put into place during the past decade.

- Dr. Roeland Nusse will serve for an additional year (thanks to special permission from HHMI) as Chair of the Department of Developmental Biology.
- Dr. Gary Steinberg has been reappointed Chair of he Department of Neurosurgery. Under his leadership Dr. Steinberg has built an outstanding clinical and research program in neurosurgery and neuroscience.
- Dr. Judy Swain has been reappointed Chair of the Department of Medicine and will also continue her work in further developing the outstanding clinical and research programs that have been initiated during the past five years.

I am enormously pleased and honored to be able to work with these outstanding leaders and colleagues.

### **School of Medicine Strategic Planning Initiatives**

As you know, we are continuing our working groups in anticipation of the Strategic Planning Retreat that will be held on February 8-10<sup>th</sup>. Seventy-two participants will be engaged to review the School's evolving strategic initiatives in medical student education, graduate student education, postdoctoral training, research, clinical care and the professoriate necessary to carry out these missions. These will be complemented by examining how to achieve our goals through current and future approaches to finance and administration as well as through communications, information technology, advocacy, public policy and philanthropy.

Participants at the Strategic Planning Retreat will include senior leaders from the Office of the Dean, University Officers, Trustees, Department Chairs and selected senior faculty, Hospital CEOs, students, trainees and staff. It is our hope that we will emerge with a shared understanding of the Medical School's mission and goals and a compelling vision for its future. I also hope that this Retreat, which I view as a beginning rather than a conclusion, will help us establish a process for continuous planning and resource allocations based on critical evaluation and prioritization so that we can fulfill our mission.

Having gone through several reviews and iterations, our current working Mission Statement is "to be a premier research-intensive School of Medicine that improves health in the 21<sup>st</sup> century through discoveries, leadership and innovations in education, patient care, and biomedical and clinical research."

In anticipation of the discussions that will unfold at the Retreat and thereafter, presentations of Working Group discussions are being made to the School's Executive Committee, Faculty Senate, Town Hall meetings and the University Board of Trustees Committee on the Medical Center. I anticipate a working summary of our plans and initiatives by April. These will serve as the basic "floor plans" for defining the next decade of programmatic and capital initiatives that will help us assure our goal as a global model of a premier research intensive medical school for the 21<sup>st</sup> century.

#### **Medical School Faculty Senate on Clinical Curriculum**

On Wednesday, January 16<sup>th</sup> the Medical School Faculty Senate passed the second phase of the clinical clerkship reform. The first phase of the reforms was passed last year and mandated that four of the six required core rotations must be taken during the first 12 months of clinical rotations, with two of these being Medicine and Surgery.

In the new recommendations, the minimum amount of time for clinical clerkships remains the same (15.5 months) and the cores remain unchanged. However, the distribution of the clerkships will be changed. These will now also include one month of Neurology, a one month rotation in Critical Care Medicine (choices include Adult Medical ICU (either at SHC or the VA) or Surgical ICU (SHC) or the Pediatric ICU or Neonatology (both at LPCH). In addition, there will be a one month clinical elective. Whether this clinical rotation will include non-direct patient care experiences (e.g., pathology or radiology), will be determined at the March meeting.

In addition, a two-month ambulatory rotation will be required. During this time the students will be exposed to a number of medical and surgical subspecialities which provide experience in a number of different disciplines (examples include ENT, Ophthalmology, Urology, Rheumatology, Pain Management, Anesthesiology, etc).

Recognizing the value of these modifications and changes in the clinical curriculum, it is important to note that the overall medical student curriculum is a major topic of our School-wide Strategic Planning efforts and that other even more substantial changes and recommendations are likely to unfold during the months ahead.

#### **Conference on Preventive Health Care for Women**

On Tuesday January 29<sup>th</sup>, Women's Health @ Stanford will present "Preventive Health Care for Women: Global Attitudes & Access," a conference to share knowledge and raise awareness of issues related to women's preventive health. Its purpose is to educate and to act as a catalyst for changing attitudes about and access to preventive health care for women on a global scale. This conference will take place from 1:30 to 7:00 p.m., at Kresge Auditorium, Stanford University, and is free and open to the public. The conference will include panels on:

- 1. Global Implications of Women's Health
- 2. The Importance of Prevention for Women
- 3. Improving Access: What We Can Do to Make Preventive Care Accessible for all Women.

The conference will conclude following the Plenary Speaker, RADM Susan J. Blumenthal, M.D., M.P.A., U.S. Assistant Surgeon General, Rear Admiral and Science Advisor, U.S. Department of Health and Human Services.

Women's Health @ Stanford is a multidisciplinary initiative that serves as an umbrella for integrating all women's health activities at Stanford. The mission of WH@S is to provide comprehensive health services for women across their lifespan through cutting-edge research, patient and provider education, high quality patient care, and influencing health policy. Women's Health @ Stanford is led by Dr. Linda Giudice, Director, and Ellen Lovelace, Executive Director.

#### **Stanford Blood Center Urges Donations**

With National Volunteer Blood Donor Month lasting through January, Stanford Blood Center has joined forces with the American Association of Blood Banks to urge every eligible person to donate. Throughout the first month of the year, new donors are needed to ensure a safe and plentiful blood supply.

Stanford Blood Center supplies blood products to Stanford Hospital & Clinics and Lucile Packard Children's Hospital. Both hospitals carry out advanced state-of-the-art organ transplantation and surgical procedures for which blood availability is essential. A unique feature of the Stanford Blood Center is its integration with research programs that concentrate on causes, prevention and treatment of blood diseases and blood-borne disorders.

More than 34,000 blood donations are made annually through the center. Each donation is separated into platelets, plasma and red cells, potentially helping up to three different patients. Donors should be in good health with no cold or flu symptoms. They should also eat well prior to donation, drink fluids and present photo identification at the time of donation. The donation process takes about one hour. Donors are urged to call (650) 723-7831 or toll-free, (888) 723-7831, to make an appointment, learn hours of operation and get directions. For more information, please visit http://bloodcenter.stanford.edu.

## Dedication of the Freidenrich Auditorium at the Lucile Packard Children's Hospital

On Wednesday, January 16<sup>th</sup>, the Freidenrich Auditorium was dedicated to recognize the tremendous contributions of Jill and John Freidenrich to the care of children and families at the Lucile Packard Children's Hospital and, by extension, throughout the world.

Dr. Harvey Cohen, Chair of Pediatrics and the Arline and Peter Harman Professor of Pediatrics, noted that the Freidenrich Auditorium would be used for lectures, faculty meetings, conferences and that it would provide an opportunity for teaching and learning about advances in pediatrics, now and in the future. Giving evidence to this, Dr. Michael Link, Chief of the Division of Hematology, Oncology and Stem Cell Transplantation and Professor of Pediatrics, reviewed the incredible progress that has been made in the treatment of childhood malignancies and the prospects for future accomplishments that will unfold in the decades ahead. Stanford faculty has played a significant role in these

discoveries and clinical innovations that have led these outcomes. Future successes, along with those from other research programs, will also be shared in the Freidenrich Auditorium during the years ahead.

Thanks to the Freidenrich family for making this auditorium a part of our Medical Center.

## **Appointments and Promotions**

I am most pleased to announce the following appointments, promotions and reappointments to the professoriate

- **Dr. Thomas Clandinin** to has been appointed Assistant Professor of Neurobiology, 2/1/02-1/31/05
- **Dr. James Ford** has been reappointed Assistant Professor of Medicine (Oncology) and of Genetics, 2/1/02-8/31/05
- **Dr. Kate Lorig** to has been promoted to Professor of Medicine (Immunology & Rheumatology) (Research), 2/1/2002 to 1/31/2008
- **Dr**. **Gil Chu** has been promoted to Professor of Medicine (Oncology) and Biochemistry, effective 2/1/2002

Congratulations to all.