



School of Medicine Faculty Assembly
Agenda
December 7, 2023 at 4pm
Zoom

In attendance: A Augustus-Wallace; H Scott; M Korah-Sedgwich; G Athas; J Cameron; J Gardner; B Siggins; P Prasad; C Taylor; R Zambrano; A Abreo; C Leblanc; A Farge; L Tanner-Sanders; E Mathews; J D'Souza; T Castellano; J Hart; B McDonough; L Stuke; A Martin; E Wisner, S Primeaux; L Pelaez

Absent: M Clement; M Reinoso; L Simon; J Calandria; B Lochlann McGee K Happel; S Holman; L Marrero; k Gajewski; A Smith; E Mathews; T Castellano; J Simkin; S Alahari; S Kamboj

Proxies: J Gardner for S Kamboj

Guest: Dr. Michael Hagensee, Interim Director of Office of Research Services

1. Call to Order: 1608
2. Review of the minutes
 - a. Regarding access to CV's for the Chancellor candidates- an email was sent to Dr. O'Neal and Demetrius regarding a copy of the CV's
 - b. Motion to approve, 1st Jill D'Souza and 2nd J. Cameron
3. Executive Committee Report with Dr. DiCarlo, presented by Jason Gardner
 - a. Met with Dr. DiCarlo on 12/5
 - b. Demo updates, they continue demolition up until April of next year is the plan, with construction to start after which will last 2.5 years
 - c. Official ribbon cutting for the CALS bldg. on 12/5
 - d. Chancellor interviews will be over during the holidays, plan to have a new chancellor selected by January 2024
 - e. Cancer center: Dr. Ramos will join LSU faculty
 - f. Clinical trial recruitment- issues with trust in the community
 - i. Need to work on PR strategy, more intentional moving forward
 - ii. Can't advertise, but inform and promote LSU services, education, etc.
 - iii. Little detail was given, ongoing discussions with administration
 - iv. Phase 1 trials- plan to engage the community in a trusting way
 - g. Mental health services- CAP services
 - i. Consider changing from opt-in to an opt-out
 1. All students would be given an appt. and have a first point of contact; something to consider in the future
4. Admin Council- presented by Dr. Augustus-Wallace

- a. Dr. Taylor- wellness survey; basic sci is separate from the medical side of the survey
 - b. International travel- will be a presentation in 2024
 - c. Seminar events- how to use large databases, this is part of the ppt presentation that was sent by Dr. Augustus-Wallace
 - d. Promotions and tenure committee- revisions presented, biggest change was the tenure track; allows for greater contributions to the institution; the ppt she sent out outlines more details; some components, clinical, admin, teaching, education, and team science
 - i. Criteria with a rubric, being designed to incorporate the work that goes into the work that the faculty does
 - ii. More credit will be given to these activities
 - iii. This is not a final document yet, but continues to evolve
 - iv. Will be brought to APC
 - e. Acquire more regional and national and international recognition
 - f. Evaluation of medical students
 - i. Guidelines
 - ii. Partnership with UMC and student affairs
 - iii. Main change- go from 3 to 4 attempts to pass USMLE Step 1 and 2; requires a vote to move forward
 - iv. Reminder- continue to use pass/fail for sections; there are evaluations that determine readiness to take the exams
 - v. Percentage that have to take it 4 times is <1%
 - g. MEB
 - i. Asbestos is under completion
 - ii. Demo on 5th floor, should be done by April 2024
 - h. Cals
 - i. AV will be complete 2024
 - ii. Dr. Paz- interview was cancelled for chancellor search
5. Faculty Senate Report, by Dr. Jennifer Cameron
- a. Moodle- talking to LSU Baton Rouge campus with assistance
 - i. Talking to BR for better access, more plug ins, more updated, tech support
 - ii. Options for level of Support
 - 1. Basic- pay them to answer questions
 - 2. Mid-level- more Moodle advantages with support
 - 3. Highest level- take over entire Moodle and provide all support on their Moodle platform
 - iii. Need to discuss which level would be appropriate and at what cost
6. Dr. Hagensee, Guest speaker, Interim Director of Office of Research Services, presented a slide show of his work and his plan while in the office
- a. FDA Audit in July
 - i. Issues with Quali- continuing renewal, now resolved
 - ii. All FDA regulated studies have to be reviewed yearly

- iii. Any lapse in a study- IRB now needs confirmation that no study activities took place
- b. Personal changes
 - i. Charles Steadman (IACUC) leaving, Kadie Rome (IRB, Kualii) leaving; Hiring of Holly Keenum (CTO Regulatory)
- c. Various Regulatory issues
 - i. IRB- continue to be open and transparent
 - ii. IACUC- outside business, but LSU will make sure that they will have room for their own animals before caring for other institutions' animals
- d. ORS- Background
 - i. 35-year history, a vital segment of LSUHSC
 - ii. Reviewed the past IRB directors
- e. Why have ORS?
 - i. All academic institutions conduct research thus need a dept for research services
 - ii. It is one of the pillars of academic institutions
 - iii. Benefits the institution and the people we serve
- f. What is ORS?
 - i. IRB- provides a core protection for human research participants
 - ii. IBC- required for use of recombinant nucleic acids, pathogens, and human derived materials
 - iii. IACUCU- oversight of animal care, PHS police
 - iv. COI- oversight of financial concerns- HHS regulation
 - v. Research
 - 1. Grants office- essential component of any research enterprise
 - 2. CTO- facilitate the conduct of sponsored clinical research trials
 - vi. ORS the numbers
 - 1. Peak in 2004 at 66 million
 - 2. Lowest 2018 39 million
 - 3. Recent trend is an increase in funds; mostly money is federal; money also comes from industry, the institution, and other
 - 4. He would like to see more funding come from the state which stopped in 2018
 - vii. Business plan
 - 1. Need more people in the office
 - 2. Active studies have increased over the last few years
 - 3. Personnel needs to increase
 - viii. Time Metrics
 - 1. Meeting the mark in most areas during each quarter
 - 2. Continue to work on targets
 - 3. IACUC- target is 40 days and has not been met; but director does not think 40 days is realistic
 - 4. There will be better tracking in the future
 - ix. LSU vs. National metrics

1. LSU needs more staff
 2. Active studies: 1001-2000, need 9.8 median number of staff, median budget \$621,000 (Currently LSU has 4 staff)
 3. Need more community members and they should be compensated (LSU no compensation)
 4. Most members of IRB (~65%) LSU does not compensate
- x. LSU vs. Others
1. Tulane, LSU-S, Mississippi, etc. comparatively, we are falling below the standard for the amount of staff, grant staff, etc.
 2. Clear need for additional personnel
 3. Justified by data, need to find the money for staff
- xi. Executive Director- 5-year plan
1. Reach out to all school at LSU
 - a. Majority of research is in school of medicine, but the other areas need bolstering, and the “how to”
 - b. Gradually increase the circle to the other hospitals like UMC, CHNOLA, EJ
 - c. Then extend to other institutions- LSU- Shreve, UAB, Xavier, etc.
 - d. Update Research/faculty database in a way that it does not add a burden to the researcher
 2. expand research
 3. target recruitment and new investigators
- xii. Regulatory office
1. Lynne Arnold is the manager
 2. If you go to the office, you will be sent to the right person
 3. Working to arrange financial compensation for those who volunteer their time in the IRB office
 4. Quali- open to suggestions and input; not user friendly; very challenging; contract is up in 2024, may be change coming soon
 5. Would like to add an IRB educator to the office
 6. Add 1 position to focus on audits and education
 7. Expand IBC/IACUC by 1 position
 8. Expand financial compensation for chairs and vice chairs and possibly all members
- xiii. Research Office
1. Created in 2021, staff hired in 2023
 - a. All clinical trial contracts go through this office or David Whaley in CC
 2. Needed to make sure that LSU was not in the red for research
 3. Clinical trials- adding 1 research nurse
 4. Biostatistician
 - a. Service oriented
 - b. Funded and unfunded projects

- c. Want to start a service core
 - 5. Search EPIC for appropriate patients for any given study
 - 6. Evaluate feasibility software for clinical and translational research
 - 7. Next few years
 - a. Add clinical coordinator
 - 8. Grow clinical trials stepwise
 - 9. Have a cancer side and a non-cancer side of the office (like LSU Shreveport, works well)
- xiv. Education
 - 1. Educate about medical students, committees, clinical trials, etc.
 - 2. Continue to expand education opportunities
- xv. Technology
 - 1. Would like an interactive device or billboard to inform people how to contact and interact with IRB
 - 2. Office is 2nd floor
 - 3. An idea- long hallway, place picture of current research, a picture of something interesting in your work, have a contest, Research Hall of Fame
- xvi. Summary of 5-year vision
 - 1. Reach highest level of funding ever seen at LSU, only need 10% growth per year
 - 2. Staff to adequate numbers to perform operations
 - 3. Increase interaction of the ORS with all schools at LSU, hospitals in the area, and regional institutions
 - 4. Research Business Office will be adequately staffed, provide cross coverage for all grants and contracts
 - 5. Research Info Services that will match funding opportunities with research faculty in an active process, provide pre and post study design and statistical support
 - 6. A clinical trial office that will be adequately staffed and available to all at LSU
- xvii. Questions addressed
 - 1. State money disappeared completely in 2018, will go back and see if there is more money from the state that is accessible
 - 2. There are more research studies- with Epic and tracking has allowed more research with little overhead
 - 3. Call or email for any questions, Dr. Hegensee
- 7. Old Business- Email sent relating to CV of candidates for Chancellor
- 8. New Business- none, next guest is Dr. Ramos in February
- 9. Motion to adjourn 1723: 1st S. Primeaux, 2nd A Augustus-Wallace