



School of Medicine Faculty Assembly  
February 8, 2023 at 4pm  
Zoom

In attendance: J Calandria; S Alahari; B Siggins; C Taylor; S Primeaux; H Scott; J Gardner; R Thylur Puttaling; L Marrero; J D'Souza; K Gajewski; N Skill; A Farge; A Augustus-Wallace; A Abreo; L Stuke; B Lochlann McGee; L Del Valle; E McDonough; J Hart; W Backes; F Hossain; L Simon; J Cameron; C Leblanc; S Tang; J West; E Trapido; Q Yu; E Wisner; S Kamboj; A Mansouri; L Miele; D Yalcin; D Mandal; A Smith; S McKinney; B Boulmay; K Reiss; M Reinoso; M Hagensee

Proxies: B Lochlann McGee proxy for S Holman; C Leblanc proxy for P Prasad; A Abreo proxy for Michelle Korah-Sedgwick

Guest: Dr. Joe Ramos

1. Call to Order 1600
2. Guest Speaker, Dr. Joe Ramos, CEO/Director of LCRC
  - a. Previously was in Hawaii for 18 years and helped maintain NCI designation
  - b. Recruited to LCRC- corporation between LSU and Tulane. Ochsner and Tulane then joined over the years.
  - c. Governor Edwards and 1<sup>st</sup> Lady Biden came to the campus
  - d. Created 4 programs
    - i. Population sciences
    - ii. Translational oncology
    - iii. Genes/environment
    - iv. Cancer biology
  - e. Created Office of Community outreach and engagement, very important for NCI designation
  - f. Created an Education Committee- had first cohort for the summer program 2023
  - g. Need strong shared resources across the Health Sciences
  - h. Structural challenges: previously, Dr. Ramos had no real standing to move forward; director needs authority at the Dean's level and that was missing
  - i. Problems with LCRC: need to have single director not co-director; need to have a singular applicant
  - j. CEA- moved Dr. Ramos to an LSU professor and LCMC oncology director. Now Dr. Ramos can go in as NCI designation
  - k. Why do we need NCI designation?
    - i. A grant for cancer research
    - ii. The measure: not competing with other centers

- iii. What are you doing for you community with high quality care and research to reduce the high cancer burden? Are you making a change? Must structure self as a multifactorial center that is attacking cancer that works.
- iv. Is there advocacy happening in your state?
- v. It gets renewed every 5 years. After you are designated, you have to fight to keep the designation.
- vi. NCI designation: what you get- bring lots of things to state; clinical trials; additional funding; 2 phases- only NCI centers can get V foundation grants; high quality cancer center with high quality work and people- environmental score is high
  - 1. NCI becomes a funding amplifier
  - 2. Economic impact- recruitment, more trials, improved community
- vii. NCI wants a cancer center in Louisiana- the NCI director has made this very clear; they believe that LA will be ready to apply in 3-5 years
- viii. LSU
  - 1. Viral oncology is a global program
    - a. HIV related oncology
    - b. Work in Africa
    - c. This is unusual and special
    - d. HIV malignancy is also a major issue here in the state and that work will translate
  - 2. NCORP- brings clinical trials around the state
    - a. A hallmark programs
    - b. Next level- virtual resource
    - c. This is one of the reasons the 1<sup>st</sup> lady came to visit, as well as the viral oncology program
    - d. Will grow this out of UMC
  - 3. SEER registry
    - a. One of top tumor registries in the country
  - 4. Pennington
    - a. Amazing work with nutrition/ metabolism/ obesity
  - 5. Vet school
    - a. Comparative oncology
    - b. This will be part of the LSU application
- ix. We need all these areas and departments to be strong and collaborative to get the NCI designation. Nursing, IRB, infrastructure, graduate school, etc.
- x. Belief: 5-7 years from now until we receive NCI designation
- I. Answers from Dr. Ramos
  - i. Is the 25 million from the state secure funding? It was in excess of 25 million; yes; also get the cigarette tax to LCRC
  - ii. Will there be problems with the change in the legislature? Unknown; however, we are in line with what the state wants. Dr. Ramos is working to

have a meeting with the governor to discuss goals and objectives for the Cancer center for the state with a focus on the rural communities; hopeful to gain momentum to move this forward

- iii. Community education and outreach, how will they resolve concerns and gain trust with LSU to avoid another Tuskegee experiment? To inform the communities and show that the research is beneficial to them. They will trust their neighbors. There is also trust on the ground with Louisiana outreach employees.
  1. Looking to build programs in the committee
  2. Help those advocates in the community that they know and can trust for cancer screenings, know dangers of smoking etc.
  3. Creating Health Summits- Ruston, next is Grambling
  4. Understanding the issues in the communities
  5. Working with established advocates in the communities
  6. Will establish community outreach programs
  7. Dr. Williams and Dr. Robins are available for further inquiry
- iv. Where does Ochsner fit in?
  1. A partner
  2. Run some NCORP trials
  3. Community outreach and engagement is brought in through Ochsner
  4. The cancer center is looking for partnership throughout Louisiana
- v. Clinical issues from LSU- there has been a lot of turnover in the Oncology dept. Is the current leadership supportive at UMC and LCMC?
  1. Dr. Ramos meets regular with leadership; need to know better what is going on at UMC and improve areas. Some areas are very difficult. Need improve clarity and improve workflows, so patients don't have to come back 3-4 times, but get everything done in 1 visit. Plan is to meet with UMC Onc. Dept to work on these issues.
  2. Invited to schedule a specific meeting to work on these issues directly with Dr. Boulmay and Onc. Dept
  3. NCI designation helps to rally people and make things better
  4. This will make the cancer center stronger, and make LA a healthier place
- vi. LCMC/ CHNOLA- clinical trials, how will they be included or affected by NCI?
  1. Yes, want to capture and support what is happening at Children's Hospital
- vii. Those not on campus often feel out of the loop with what is going on at LSU.
  1. Plan is to tighten relationships with other campuses, like Baton Rouge and Shreveport
  2. Have retreats, etc.
- viii. Cancer treatment, screening and prevention

1. Community outreach- very important to focus on prevention through health measures and vaccines, for example
2. Focus on bringing care to the patient in an up to date model
- ix. Does Shreveport fall into the NCI designation and their cancer research
  1. There are 7 members that are active members in the LCRC as of now
  2. Getting viral oncology involved as well
  3. Working on engagement, going to them, will do a health summit in the next year or so
  4. They are essential to what we are doing
  5. Also find new collaborations
- m. Dr. Ramos was invited again for a future update, TBD
3. Review of the minutes
  - a. Motion to approve, 1<sup>st</sup> S Alahari and 2<sup>nd</sup> J Gardner
4. Executive Committee Report with Dr. DiCarlo, presented by Dr. H Scott
  - a. Chancellor search
    - i. interviews completed, and LSU was led to believe that a decision would be made during January of 2024. President Tate did not have Dr. Nelson as top choice. Dr. DiCarlo disagrees and stated that Dr. Nelson was a good choice. There is reluctance to name Dr. Nelson as Chancellor; the other candidate who withdrew did not have enough experience.
    - ii. Pres. Tate may be reopening the search
    - iii. Dept heads and others from LSU feel this would be problematic since the search has been open 2.5 years and ill-timed since it would likely take a year
    - iv. Several issues were addressed by Dr. Nelson in his role as interim: clinical issues; major reno; research planning.
    - v. Clinical chairs, Senate, and Basic Science heads drafted a letter and sent it to President Tate and board of supervisors
    - vi. Faculty Senate- not unanimous- gave an overview of the sentiment, but some people did not support the letter and felt they were too rushed. However, there was a vote, 2/3s voted yes and a letter was sent to President Tate.
    - vii. These meetings and letters were written over the past 2 weeks
    - viii. If Nelson were named, would that cause problems with trust and ability to get things done? No, not in Dr. DiCarlo's opinion, because it changes to permanence and we could move forward
    - ix. LCMC- where do they stand, support Dr. Nelson
  - b. Teaching infrastructure:
    - i. Brought up issues that were sent to us by Dr. Siggins
    - ii. Stefany Primeaux has more details and will share
  - c. Demolition updates
    - i. MEB- Finished 5<sup>th</sup>, onto 6<sup>th</sup>, possibly onto 7<sup>th</sup>; will be complete by end of march

- ii. Build out will be over next 2 years
- iii. Cals
  - 1. AV issues on 1<sup>st</sup> floor
  - 2. Update room reservation system about 1 year away from that software
  - 3. Would like to give the depts first opportunity on reserving the rooms; Dept heads feel that these classrooms should be screened with resident conferences have first opportunity
  - 4. Possibly someone to screen room reservations, like Dr. Peter DeBlieux, the Asst. Dean for Simulated Learning and Director of the Simulation Laboratories in the CALS Building.
- iv. Walkways to CALS-
  - 1. Original CSRB to CALS 2<sup>nd</sup> flr, go out to bid this spring, about 1 year away from having a walkway
  - 2. May be able to connect walkway with external stairwell through a stairwell through a parking garage, maybe in the next year
- d. SOM
  - i. LCMC self-study
  - ii. Robin English is working on the SOM 2025 accreditation
  - iii. Preplanning meetings going on now
  - iv. Will start meeting with faculty and stakeholders soon
  - v. Delays due to uncertainty with chancellor have affected strategic planning for SOM, but we need to move forward to receive accreditation
  - vi. Health Science center strategic planning is wrapping up now
- 5. SOM Admin council report, Dr. Augustus-Wallace
  - a. Camp Tiger purpose and the upcoming Auction coming up in March 8<sup>th</sup>
  - b. Dr. Taylor will be out of the country from mid Feb to early March. Send in any letters before she leaves for Africa
  - c. Excellent well-attended workshop for resident feedback workshop; more workshops to come at other campuses as well, no zoom option planned, rather in person
  - d. Dr. English
    - i. LCME Accreditation updates- 93 elements, 12 standards
    - ii. Creating teams and organizational chart
    - iii. Date of visit, Fall 2025, requested for October, not yet confirmed
    - iv. Structure of the review is different than 2017
      - 1. Realigned standards
      - 2. Better able to capture information
      - 3. Smaller teams to improve communication and do work more effectively
    - v. Workshops will be offered to allow faculty to be part of the process
  - e. Dr. DiCarlo
    - i. There will be mock LCME visits so people know what to expect and be prepared

- ii. Discussed Chancellor search, see above, ongoing search and reopened; no conclusion yet
  - iii. Demolition updates and walkway, see above
  - iv. Strategic planning, initially held off but now moving forward even as he and Dr. Nelson are in interim positions
    - 1. Emerging Methods- firm has been named
    - 2. Will begin in early March
    - 3. There is an advisory committee
    - 4. 6-7-month process
- 6. Faculty Senate Report presented by Dr. Augustus-Wallace and Dr. Primeaux
  - a. Moodle
    - i. Pushed forward to have LSU main campus manage all of Moodle for about \$300-400,000 per year; that would include total migration and support by LSU main campus; this was not a commitment, but their vote on what the faculty would like; admin has the final say
    - ii. Dr. Nelson stated he needed to think about it before moving forward, consider possibly getting more support here
    - iii. Currently LSU has 1 person supporting Moodle at LSU NO
    - iv. Polling from the past:
      - 1. SOM- did not want to update Moodle, they thought it was OK for them
      - 2. School of Public Health and Nursing felt they needed to be updated
    - v. Baton Rouge campus was invited to talk to New Orleans and discuss options; they presented different options to New Orleans
    - vi. General consensus is that LSU New Orleans wants more support
  - b. Nonpartisan voter registration
    - i. Vote ER- nonpartisan, legal, can promote on campus
    - ii. Would provide the information to students and colleagues to self-register
    - iii. This was passed by the Senate
  - c. Faculty Handbook revision
    - i. If you have suggestion, email to Dr. Augustus-Wallace
    - ii. Need to receive everything by early March
    - iii. These will be presented to Dr. Sutherland
  - d. Letter of Faculty Senate sent to President Tate that was not unanimous
    - i. Those who voted not to send the letter was due to
      - 1. Rushed meeting
      - 2. Hear-say, not concrete information
      - 3. Felt bullied into signing the letter
      - 4. It was not if the faculty did or did not support Dr. Nelson
      - 5. It was a difficult situation for some of the other schools
- 7. Old Business
  - a. none
- 8. New business:

- a. Hybrid meeting in March, at 6233 CALS building
    - i. Will honor former 2 Presidents and Secretary of FAD
  - b. Nominations for FAD awards have been sent out, please encourage people to nominate
9. Motion to adjourn: Stephany Primeaux. 1730