
ANNUAL REPORT TO THE FACULTY
Academic Year 2015-2016

With campuses in Chicago, Peoria, Rockford, and Urbana-Champaign, the College of Medicine (COM) is one of the largest medical schools in the country, offering a rich curriculum to a diverse student body. The COM's statewide presence affords our students and residents the rare opportunity for a full spectrum of rotations through federal, county, state, community, and private clinical sites in both rural and urban settings. Equally important is the COM's membership in the University of Illinois Hospital and Health Science System in Chicago, which is one of the few medical centers in the nation with seven health science colleges (Allied Health, Dentistry, Medicine, Nursing, Pharmacy, Public Health, and Social Work) strategically aligned to work toward disease prevention, treatment, and cure in our primary service areas and beyond. The AY 2015-16 annual report contains an overview of College-wide activities as well as highlights and important developments from the Chicago campus; separate reports have been provided by the three regional deans for highlights and developments at their respective sites.

I. Education

A. Undergraduate Medical Education

Accreditation:

At its February 2016 meeting, the Liaison Committee on Medical Education (LCME) approved our plans for expansion of the MD program at Peoria and Rockford to include the M1 year, as well as our notification of the intent to substantially revise the curriculum. A progress report specific to these two issues is due August 1, 2016. In the meantime we continue to be considered by the LCME to be in full compliance with all accreditation standards, and are scheduled for our next full accreditation review in April 2018. The institutional self-study that forms the basis for that review will be launched in fall 2016.

Curriculum Renewal:

Substantial progress was made toward the comprehensive curriculum renewal, scheduled to be introduced with the M1 entering class in Fall of 2017. At that time, our campuses at Peoria and Rockford will begin teaching students in their M1 year and will become four-year campuses with 55-60 students in each of the four years. Concomitant with adoption of this new campus structure, we are taking the opportunity to introduce an entirely new curricular structure. There will be a uniform curriculum for Chicago, Peoria and Rockford, with alignment of all major aspects of course and clerkship structure, scheduling, and assessment across the three campuses.

Major developments during AY 2015-2016 toward the realization of this new curriculum have included:

- College of Medicine Executive Committee approval for a plan to have grades for pre-clerkship courses recorded on students' transcript as Pass or Fail, following upon the recommendation of the Assessment Task Force of the College Committee on Instruction and Appraisal (CCIA). This grading structure is being implemented to facilitate the active, cooperative learning instructional approach planned for the curriculum transformation.

- A 1.5 day college-wide curriculum retreat was held in February 2016. Over 120 faculty, students and staff worked in groups to generate recommendations for the Phase 1 curriculum structure, themes, and content. The retreat resulted in consensus on five overall curricular content themes (Foundational Knowledge, Clinical Practice, Professional Development, Health Illness and Society, and Health Care Systems); duration of the Phase 1 curriculum (approximately 1 ¾ academic years); and a structure for the Phase 1 curriculum (sequential, integrated organ-system based blocks, together with longitudinal courses in clinical skills and professional development). These proposals were formally approved at the College of Medicine Executive Committee on April 4, 2016.
- Faculty leaders have been appointed to develop learning outcomes, content, and assessment approaches for each of the five themes and to work with course directors to ensure appropriate integration of the themes into each course and eventually into the Phase 2 and 3 clerkships and courses.
- The course structure and calendar are near completion. Discussions are well underway with University-level registration and financial aid officials, for planning necessary alterations in credit hours and registration parameters, ensuring compliance with federal financial aid regulations, and preparing for approval of these administrative details at the University Senate Committee on Educational Policy this fall.
- The infrastructure has been built for a College-wide Education Data Warehouse, linking student performance data that had, to some degree, been previously segregated by campus. This central data warehouse will facilitate unification of the curriculum across campuses with respect to curriculum delivery, student assessment, and program evaluation.
- A second retreat, scheduled for October 10-11 in Peoria, will focus on plans for Phase 2 and Phase 3 of the new curriculum.

Other Advances in Educational Programs

The “I-MED,” or Innovation in Medicine, special curricular program attracted 28 applicants from those students accepted to the college for fall 2015, and twelve were accepted as the first cohort of I-Med students. This new program joins the established Urban Medicine (U-MED), Global Medicine (G-MED) and Rural Medicine (R-MED) programs currently available to MD students.

In addition to these ongoing and successful programs, the College of Medicine will be starting a new program for students entering in the fall of 2017 called the “CE-MED” program. This will be our Clinician Executive Medicine program, a four-year longitudinal curriculum providing insights into the clinician executive skills and knowledge essential to addressing the complex leadership challenges resulting from healthcare organizational and health policy changes that impact the way clinicians provide care. It emphasizes the importance of collaboration among clinician leaders and non-clinician administrative leaders in healthcare delivery organizations today and in the future. The program will provide six weeks of longitudinal credit for 8-12 students each year for maximum of 48 students in the program at a time.

Educational Scholarship and Extramural Collaborative Projects:

The College faculty continue to be deeply involved in educational scholarship, much of it originating from and/or facilitated by the Department of Medical Education. The College is now in year three of a five-year project sponsored by the Association of American Medical Colleges, developing the concept of “Entrustable Professional Activities” as a means of assessment of trainee competence. We are one of

ten schools, chosen by competitive application participating in the project, and are represented by a team composed of faculty from all four College campuses.

B. Admissions

The Class of 2019 entered the University of Illinois College of Medicine in August 2015, with a total of 315 new students beginning their medical education at Chicago and Urbana-Champaign. The yield of matriculants to offers this year was 46% (315 of 677). The yield rate decreased from prior years as we made a number of late offers to further shape the incoming class; we continue to compete for top candidates with medical schools in Illinois and elsewhere. For the Class of 2019, the proportion of women in the entering class was 44% (nationally, women comprised 48%); underrepresented minority students constituted 28% (this is not currently being reported nationally); and 68% of the students were under 25 years of age. Out-of-state students comprised 22% of the incoming class. Matriculants from rural areas comprised 9% of the incoming class.

The COM continues to maintain its leadership status in providing opportunities for students from throughout the state of Illinois. In 2015, 2,294 Illinois residents applied to medical school and 1,962 of them (85.5%) applied to the University of Illinois College of Medicine. Of those applicants, 445 (22.6%) were offered admission and 246 (55.2% of those admitted) actually matriculated with us. Of the 543 Illinois residents who matriculated at one of the seven medical schools in Illinois, 45% of them are attending the UI College of Medicine.

C. Match Results

The Class of 2016 had an overall 95.5% match rate to residency positions in this year's national residency match as compared to the national average for allopathic medical school seniors of 93.8%. These numbers include positions obtained through the Supplemental Offer and Acceptance Program (SOAP).

Students from the COM will be undertaking residency training in virtually all medical specialties at 113 different clinical training sites in 36 states and the District of Columbia. The top 5 specialties (in rank order) for number of students matching were Internal Medicine, Family Medicine, Pediatrics, Anesthesiology and Obstetrics and Gynecology. Of the matched students, 33% will stay in Illinois for their entire residency.

D. Student Debt and Affordability

The College continues to moderate the increase in its MD tuition rate. In the nine years prior to 2012, the annual increase in the tuition rate averaged over 6.6%. Since then, the average annual increase has averaged just over 2%, with the specific amounts detailed below:

- FY 2012...3.0%
- FY 2013...3.0%
- FY 2014...1.7%
- FY 2015...2.5%
- FY 2016...0.0%
- FY 2017...2.5%

Student scholarships are also a priority of our fund-raising efforts, and one in which we have achieved some measure of success. The total amount of admissions-related institutional scholarships awarded last year was \$1,372,386; this is an increase of 9.7% over last year's amount.

Unfortunately, student indebtedness continues to rise. Shown below is the average amount of debt for students graduating over the past four years:

FY 2012...\$181,601
FY 2013...\$186,506
FY 2014...\$186,878
FY 2015...\$187,679
FY 2016...\$189,639

These data indicate that we have more work to do in providing an affordable education for our students.

E. Graduate Medical Education (GME)

Each of our 55 residency and fellowship programs subject to accreditation by the Accreditation Council on Graduate Medical Education (ACGME) continues to enjoy full accreditation. The 2014-2015 academic year had marked the first time in a number of years without any programs on probation or under some threat of adverse action; this status has now been maintained for the second year in a row.

In addition, the College, as Institutional Sponsor for all ACGME accredited programs conducted at UI Health and our other major affiliates, was awarded full ACGME Institutional Accreditation in June 2016, with commendation and no citations.

No new residency or fellowship programs were approved during AY 2015-2016. The Clinical Informatics program, granted initial ACGME accreditation effective July 2015, successfully recruited its first trainee.

The residency Match in March 2016 was quite successful. All positions offered were filled, with the exception of four preliminary surgery one-year positions, each of which was later filled post-Match.

At the end of 2013 we began making monetary awards to residents who publish research in scholarly journals. In FY 2016 we gave out 63 such awards totaling over \$20,000.

F. Graduate and Doctoral Education

The Department of Physiology is introducing a new Master of Science in Medical Physiology degree program, now approved by the IL Board of Higher Education and with the first students scheduled to matriculate in fall 2016.

We replaced the primary administrative contact for the Chicago MD/PhD program following the retirement of previous program coordinator.

In the coming year we will conduct a deliberative exercise to assess the curriculum for PhD students, with an eye toward recruiting a national leader who would then lead a comprehensive review and renewal of that curriculum, similar to the effort underway with the MD curriculum.

II. Research

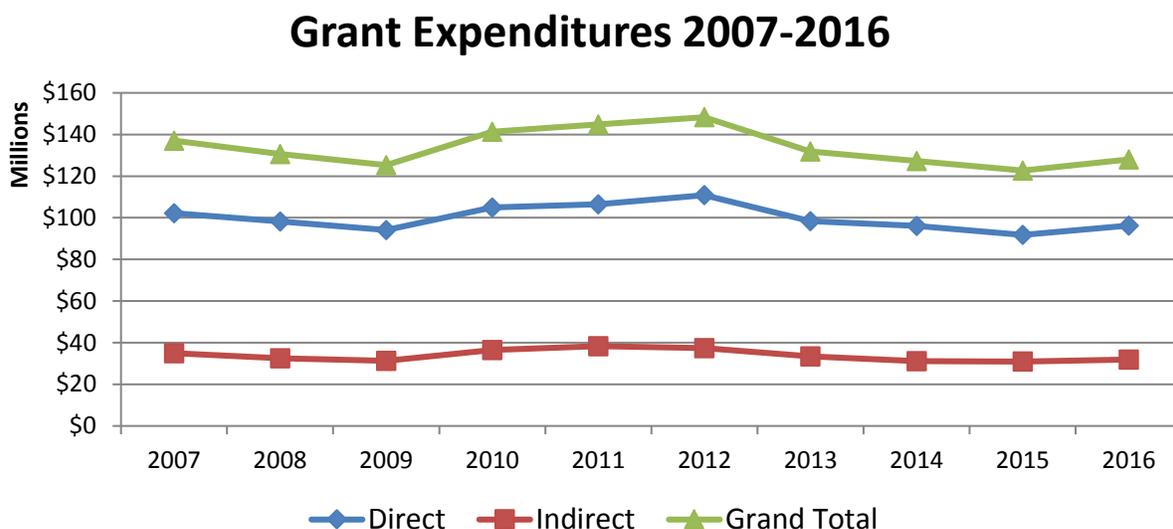
The University of Illinois College of Medicine boasts several thriving biomedical discovery programs in basic science and clinical departments. Our research goals center on fostering interdisciplinary research collaborations and translating our strengths in biomedical and behavioral discoveries into clinical and other applications, including addressing unmet medical needs.

The annual College of Medicine Research Forum, in which students, trainees and other COM investigators are invited to present posters on their biomedical research of all types, from basic to clinical to community, was again an unqualified success. Held in Chicago on December 4, 2015, there were 750 total participants: 219 poster entries from 215 COM researchers, 500 co-authors, and 44 COM faculty judges. Highly competitive honors were given to a select group of investigator-presenters with

seven prize winners – only one of every 31 abstracts won a prize.

A. Externally-Sponsored Research

The COM's FY 2016 annual research expenditures total over \$128 million for all four campuses, approximately 4% higher than last year's total of \$122.7 million.

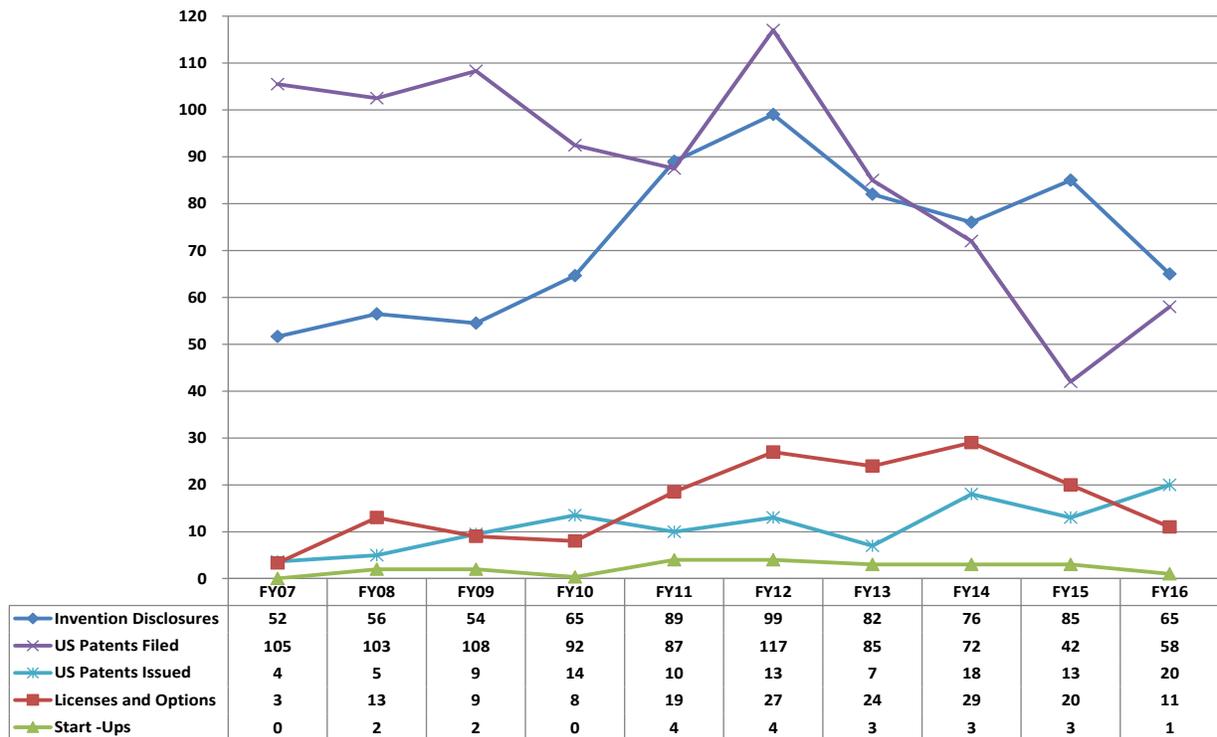


Research studies concern all aspects of biomedical science, from basic, to translational, to clinical, to community. The largest sponsor of research funding remains the National Institutes of Health (NIH). Based on 2015 data (since 2016 comparative data are not yet available), five COM Chicago departments ranked in the top 25 of NIH funding nationally when compared to their respective academic peer groups (Pharmacology, Ophthalmology, Urology, Psychiatry, and Emergency Medicine).

We have continuously been enhancing clinically-relevant translational research by recruiting, mentoring and retaining NIH-funded clinician-scientists, and expanding the research infrastructure provided by our NIH-funded Center for Clinical & Translational Science, Cancer Center and other research centers. The recruitment of clinician-scientist department heads will enhance our ability to grow our research portfolio. The COM accounts for more than 50% of UIC's total NIH expenditures. We rank in the top one-third nationally, compared with all other universities, public and private, in total NIH research rankings.

B. Intellectual Property and Technology Commercialization

Innovation in Research: The COM has a robust innovation environment which resulted in 65 new invention disclosures during FY 2016. Fifty eight disclosures have been converted into patent applications. Additionally, during FY 2016, the COM received 20 new patents and 11 of its discoveries were either licensed or optioned out. One of the licenses was issued to a start-up company named RetMap Inc. This company was founded by John Hetling, Tamas Ban, and Safa Rahmani from the UIC Department of Bioengineering and will advance healthcare through the development and commercialization of novel diagnostic devices for the early detection of ocular diseases. Historical metrics on the College's intellectual property portfolio are shown below.



Venture Philanthropy: The COM has taken advantage of the venture philanthropy opportunities that are made available by the development office. Some donors prefer to donate their philanthropic dollars directly to the investigators in the hopes that the discoveries that may emanate from those projects will eventually lead to successful commercialization and thus generate higher amounts of endowments to the College. In the first of its kind, a long-term donor screened 20 inventions and selected 5 of those for further consideration. After extensive discussions with each of the five inventors, the donor selected the most promising one for funding. A similar program is being implemented within the COM in return for a small equity stake in the company.

Innovation in Education: The COM launched the Innovation Medicine (I-MED) Track during FY 2016 with the successful recruitment of 12 highly qualified medical students who have aptitude for medicine as well as bioengineering. These students have been attending special lectures focused on Engineering-Medicine concepts, and have initiated innovative projects with guidance from a designated physician scientist and a bioengineer. These projects are expected to result in new inventions, disclosures, and patents with higher commercial potential.

Wearable devices are being increasingly deployed in higher education and training. UI-COM has taken the lead in deploying wearable glasses to provide early exposure to clinical concepts to our M1 and M2 students. In addition these devices are also extremely useful in enhancing clinical experiences in surgical specialties. Given the limited time available for each specialty rotation for medical students as well as trainees in surgical specialties, the glasses will provide real time visualization of various procedures without having to be in the OR. Similarly, this device is being deployed in emergency medicine to provide specialty consultation in real time to the EM physicians attending to patients in the ER. Incoming

medical students will be introduced to this technology during their orientation in August and integrated into the medical school curriculum.

III. Clinical

Given the scale of our clinical enterprise and its importance in supporting the academic mission of the College, we have focused a lot of time and attention on improving the billing and collections of fees for physician services.

The transition of ambulatory professional fee billing from the Hospital to WWT was put on hold for a period of time as a joint College of Medicine and Hospital taskforce worked through a protocol designed to ensure that once the transition takes place, the Physicians Group will collect the maximum amount that is allowable. The transition has now restarted with the expectation that all clinics will be billing through WWT by the end of calendar 2016. The Director of Coding for the Physicians Group has taken a position as Director of Revenue Integrity for UI Health where she will oversee a coordinated coding operations focused on Ambulatory visit coding for the Group and the outpatient clinics. We have also successfully secured incentive payments from various programs designed to reorient healthcare in specific ways (e.g., the Federal program to demonstrate meaningful use of the electronic health record, and programs with various payers to demonstrate improvement in the quality of care).

We continue to have robust programs in Compliance and Malpractice Action. A new venture with the hospital is being developed to focus on quality in the ambulatory programs and coordinating our efforts with the expectations from various health plans and governmental payers.

A. MSP Financial Performance

Preliminary results indicate that the overall MSP financial performance declined in FY 2016 compared to the prior year. Final results will be presented at the MSP Board of Directors meeting in October 2016.

The MSP continues to benefit from enhanced reimbursement for services to Medicaid patients. Since they make up a large portion of our patient population, the reimbursement level has a significant impact on the overall financial performance of the faculty practice plan. In FY 2015, we distributed \$22.7 million for claims processed in CY 2013; these funds had been received from the State in FY 2014. In FY 2015, we received enhanced reimbursement payments for 12 months of claims (for CY 2014). These payments totaled \$18.8 million over our three sites (Chicago, Rockford, and Peoria) and were distributed to departments in FY 2016. As a result of the decline in fee-for-service Medicaid, to a degree offset by increased payments for newly eligible Medicaid recipients resulting from the ACA, the amount of money available for distribution in FY 2017 will be \$15.6 million.

After months of negotiation, we are close to agreement with IDHFS about cost-based reimbursements to physicians for services provided to Medicaid patients through Managed Care Organizations (MCOs), retroactive to January 1, 2016. This mechanism would replace the so-called "Patla" funds, under which we received a supplemental reimbursement for Medicaid-insured patients.

B. Medical Malpractice Liability Insurance

After spiking in FY 2010 at \$22.9 million, our annual medical malpractice expense has consistently dropped in each succeeding year. This is attributable to several factors, including good practice by our physicians, a sound risk management program, and general softening in the insurance market. This dynamic continued into FY 2016, where the total malpractice expense for the 17 clinical departments in Chicago totaled \$12.0 million. Active engagement with the Offices of University Counsel and Risk Management in these processes has come from the Physician's Group (MSP).

C. Meaningful Use of the Electronic Health Record (EHR)

The Medicaid and Medicare EHR Meaningful Use Incentive Programs provide an opportunity for increased revenues to continue into future fiscal years, by Eligible Providers (EPs) successfully completing enrollment and attestation in both programs. One hundred percent (100%) or 401 EPs successfully enrolled by March 31, 2016. Through June 30, 2016, the MSP received \$4.0 million for the enrollment and attestation work performed between January 1 and March 31, 2016. This additional money adds to the \$17 million that the MSP already received in previous years. The total received since the program's inception in FY 2012 equals \$21 million.

In addition, the Physicians Group successfully reported its performance to the CMS Physicians Quality Reporting System (PQRS). Scores on all measures were high and well above national benchmarks. Later this year we will find out whether these scores were high enough to make the Group eligible for incentive payments on our Medicare billings.

D. Quality Measures

For the second year in a row, we will receive four out of five possible "stars" for the 2016 Blue Cross/Blue Shield Blue Star Medical Group/IPA Report, the most recent version of which should be published soon.

We are also pleased to report that the UI Hospital has increased its ranking (according to *US News & World Report*) from #23 in the Chicago area to #8, and also to #8 in the State of Illinois.

These improvements in our rankings more accurately describes the quality of care within our clinical enterprise and reflects the hard work of many people.

E. Ambulatory Space

A new clinic in Pilsen, on Ashland south of Roosevelt is set to open in August and will be managed by Family Medicine with UI Hospital support. Additional clinical space in University Village with seven additional exam rooms opened this spring on Maxwell Street beneath the current space occupied by Family Medicine. This opened much needed expansion space in the OCC for Orthopedics. Leasing of additional space on the south campus, in the University Village area, is currently being explored in concert with the Hospital.

We continue to explore other opportunities and an external consultant has been engaged to assist. An Ambulatory Surgical Center continues to be discussed.

IV. Faculty Affairs

Recruiting and retaining an excellent faculty is a hallmark of every strong college.

A. Faculty Promotions & Appointments

Nineteen tenure-track and 37 non-tenure track faculty promotions were submitted to the College of Medicine in the AY15-16 salaried promotion cycle. All 56 cases were approved at every level and will go to the BOT for final approval in July.

Additionally, the College approved nine new tenure-track appointments and eight non-tenure track appointments at the advanced rank of associate professor or professor. Three of the tenure offers have been approved, and the remaining five are progressing through the system for campus-level approval.

Lastly, this month the College will conclude the review process of 17 non-salaried promotions with the

expectation that these appointments will become effective at the start of the AY 2016-17 contract year.

B. Faculty Recruitment & Retention

Over the past year, 38 College of Medicine faculty members left the University (across all four sites, including resignations as well as retirements), and 61 new faculty members have been hired (counting only faculty who are at 50% FTE or greater, again across all four regional sites). The net gain in faculty this year offsets an equivalent net loss in AY 2014-2015.

C. Faculty Mentoring

Efforts towards faculty mentoring continued this year, including outreach to departments on promotion and tenure issues and working with units to assist them in matching new junior faculty hires with suitable mentors. The College continues to invest in the development of women faculty for senior leadership positions, successfully nominating Heather Prendergast from the Department of Emergency Medicine as a Fellow in the prestigious Executive Leadership in Academic Medicine (ELAM) program at Drexel University.

D. Faculty Honors and Awards

It is difficult to compile a comprehensive list of the many honors and awards afforded to our faculty. An illustrative list is included in Appendix A. We apologize in advance for any of those not listed.

V. Advancement

The Office of Advancement is on pace to achieve its four strategic goals:

- Increase the amount of baseline (annual) fundraising from \$14 million to \$24 million
- Develop the staffing infrastructure to support a fully integrated Advancement organization
- Assess and refine volunteer capacity to support a fully-integrated university-wide campaign
- Embark upon sequential, thematic annual campaigns bridging toward the University-wide campaign

Fiscal-year numbers through June 2016:

\$22M in new business attainment

\$27M in cash attainment

Annual giving through June 2016:

- 3269 total individual annual giving donors made 4266 commitments for a total of \$2.3M.
- 1089 alumni annual giving donors made 1454 commitments for a total of \$533K.
- 2180 non-alumni annual giving donors made 2812 commitments for a total of \$1.8M.

Top individual gifts:

- \$2M Dr. Ruth A. Seeler deferred gift to support scholarships.
- \$1.27M Mrs. Margaret R. Reeves unrestricted gift to College of Medicine Administration.
- \$1.2M Mr. Richard J. Portillo to support the Chicago Diabetes Project.
- \$217K Ms. Evelyn E. Cerny to support scholarships.
- \$200K Mr. Gerhard Cless to name the new wet lab facility in Ophthalmology.

Top corporate gifts/grants:

- \$1M W. K. Kellogg Foundation pilot grant to support the Cancer Center's work in Cuba.
- \$525K Pritzker Traubert Family Foundation gifts to support the Champions Program in Emergency Medicine and provide additional unrestricted support to College of Medicine Administration.
- \$500K Christopher Family Foundation gift to support the Chicago Diabetes Project.

- \$485K Dr. Ralph and Marian Falk Medical Research Trust grant to support corneal regeneration research in Ophthalmology.

VI. Space and Capital Planning

Several projects have been authorized or completed as part of our ongoing efforts to modernize the environment for teaching and learning and to support current pedagogy.

In the Fall of 2015, the Neuropsychiatric Institute's historic 50-seat lecture hall was renovated. The project restored and preserved architectural points of interest while incorporating modern furniture and a state-of-the-art audio/visual system for academic activities with a focus on clinical training (e.g., grand rounds).

The construction of the Simulation Institute in the new building at Roosevelt and Wood Streets is in the final design stages. The project is expected to go out to bid for construction this winter with substantial completion scheduled at the end of 2017. In addition, several departmentally-funded simulation projects were initiated this year including the Cless Center in Ophthalmology which opened in May, a burgeoning subspecialty training program run by the Department of Obstetrics & Gynecology, and the Surgical Simulation & Training Institute now in planning as a joint project between Surgery and Neurosurgery.

In the Spring of 2016, the new headquarters for Dr. Jerry Krishnan's population-based research program, Breathe Chicago, was completed and is now operational on the third floor of the new building at Roosevelt and Wood.

With the migration of the M1 curriculum from Urbana to Peoria and Rockford, classroom renovations are needed at both of the latter two sites. These projects have been formally established with the Office of Capital Programs and will provide laboratories for cadaveric dissection as part of the gross anatomy instruction, and specialized spaces to facilitate team-based learning. The projects will be underway during FY 2017 so the facilities are ready for new M1 students arriving in August 2017.

The College has also initiated a capital project to redevelop 38,000 square feet of space in the Medical Sciences Building (MSB) into state of the art wet laboratories to accommodate innovative research programs and attract leading investigators. The Office of the Dean is currently assessing the needs of the existing MSB occupants in order to identify and provide appropriate surge space and resources so that sponsored research can continue during the renovation project. Parallel to these continuity planning efforts, the Office of Capital Programs is coordinating the selection process of an architectural/engineering design firm to conduct a master plan for the MSB and oversee the programmatic renovation of the fifth floor. The College's research productivity per FTE and per square foot continue to exceed campus averages, by a wide margin. So these projects to improve existing, non-functional space and to construct new space are essential to provide for expansion of our sponsored research activity.

All of these projects are part of the multi-year capital plan developed in conjunction with our overarching goals.

VII. Administration

Since my appointment as dean, one of my priorities has been to build and develop a top-notch leadership team in the Dean's office. During this past year, we have recruited the following leaders:

- Over the past year, I have appointed three new department heads (all in the basic sciences). So far during my tenure as Dean we have recruited 11 new department heads (of 24 total in Chicago). Basic science research provides the foundation of translational research, and the College of Medicine in Chicago recently has strengthened that foundation by welcoming new heads in three of its five basic science departments. These new leaders include Simon Alford, PhD, in the department of anatomy and cell biology, who assumed this role last Aug. 16; Susan Ross, PhD, in the department of microbiology and immunology, who arrived Dec. 1; and Jan Kitajewski, PhD, in the department of physiology and biophysics, who started Jan. 16. Highly accomplished researchers in their own right, these new leaders will guide the growth of their respective departments' research endeavors, which will be enhanced by the 30 new faculty members the college has committed to hiring in the coming years.
- A national search culminated in the hiring of Dr. Sandra Yingling as Associate Dean for Educational Planning & Quality Improvement in March 2016. She will be an invaluable asset in our curricular transformation, having been involved in a similar effort at New York University's medical school, and in our LCME re-accreditation Self-Study.
- Dr. Brian Layden has been recruited from Northwestern as chief of the endocrinology division in the Department of Medicine. Dr. Layden earned his undergraduate and PhD degrees at Loyola University and medical degree from the UI College of Medicine. He completed residency and endocrinology fellowship at Northwestern. Dr. Layden has a history of NIH funding and has received many honors, including an American Federation for Medical Research Award for Outstanding Research and Central Society for Clinical Research Career Development Award.
- Five year reviews were completed for two department heads: David Schwartz, MD, Head of Anesthesiology, and Craig Niederberger, head of Urology. Both were reappointed (and we subsequently successfully retained Dr. Schwartz after he received an offer from UCLA).
- Dr. Lawrence Chan recently decided to step down from his role as head of Dermatology, and focus on our efforts to better integrate engineering concepts into the medical education curriculum. Dr. M. "Lina" Tsoukas, MD has been appointed as the interim head.
- Five year reviews for Drs. Regan Thomas, Enrico Benedetti, Anand Kumar and Asrar Malik are nearing completion.
- The Peoria campus has appointed two assistant deans in education: Dr. Jessica Hanks, MD replaced the retiring assistant dean for preclinical education and Leslie Hammersmith was hired into a new position as assistant dean for technology enhanced instruction.
- The College of Medicine at Rockford hired Dr. Terri Blevins, EdD as assistant dean for student affairs and Dr. Sherry Falsetti, PhD as assistant dean for research. A new assistant dean for diversity & inclusion has been hired to start later this summer.
- In order to develop the next generation of physician leaders, the College has appointed Dr. Jay Noren as Associate Dean for Executive Development & Communication and we have invested in professional development opportunities, most notably sponsoring nine people for the Clinician Executive Masters in Healthcare Administration program.

VIII. Diversity & Inclusion

The Office of Diversity and Inclusion has been engaged with the curricular reform effort to ensure that diversity and inclusion is a fundamental piece of the new curriculum. One outcome of this will be the inclusion of diversity-specific sessions in the M1 orientation.

The hiring of Assistant Deans for Diversity and Inclusion at regional campuses has been completed with the hiring of an Assistant Dean at COM-Rockford this summer. The Assistant Deans at Peoria and Urbana attended AAMC-sponsored Unconscious Bias training and have started to implement courses and workshops on this topic at their campuses.

The Associate Dean for Diversity and Inclusion along with the Associate Dean for Faculty Affairs are meeting with Department Heads to review faculty diversity and equity issues. These will be annual meetings to monitor progress towards our diversity and equity goals.

The past year saw a change in leadership in the COM Urban Health Program. Dr. Gloria Elam, Associate Professor of Obstetrics and Gynecology, assumed the position of Director, bringing faculty leadership to the unit.

The Office of Graduate Diversity Programs (OGDP) continued in its efforts to ensure diversity in students in the COM PhD programs. OGDP helped to identify and recruit three new URM students into GEMS PhD programs for the 2015/16 academic year, and three for the 2016/17 academic year. The OGDP supported the successful completion of the first year of graduate study of three COM URM students, and transition to full PhD candidacy of two GEMS students through funding and activities in its NSF funded Bridge to the Doctorate program. We anticipate that an additional three URM students will transition to full PhD candidacy by the end of August 2016.

IX. Conclusion

I am committed to aligning the overarching goals of the College with those of the campus and the University. As we continue to implement our strategies and achieve our goals, we will be advancing the six overarching goals of UIC:

- Focus on our academic excellence, student access and student success
- Foster diversity and a global perspective
- Emphasize transformative impact and the social good
- Honor and partner with Chicago and the State to enhance the human condition of its citizens
- Grow our translation, entrepreneurial and engaged research and discovery
- Innovate within to build great efficiencies and future strengths

I started the job as Dean with the prospect that I will further enhance and support the work of the College that was already occurring. While the College of Medicine is an entity, most faculty and students primarily identify with their departments. Thus, I see my role as helping departments succeed in their uniqueness and strengths in a manner that will also further the mission of the COM and the University. My approach has been to facilitate this by being transparent, consistent, and objective in my decision-making and the distribution of limited resources. I believe we are making excellent progress toward these goals and will strive for the College to excel in its mission of education, patient care, research, and innovation as well as in advancing the greater interests of the campus and university.

Respectfully submitted,

Dimitri T. Azar, MD, MBA
Dean

Appendix A – Faculty Honors and Awards

John Davis from the Department of Psychiatry and Mark Hutchinson from the Department of Orthopaedics received this year's College of Medicine Distinguished Faculty Award.

William Mieler from the Department of Ophthalmology and Visual Sciences and Subhash Pandey from the Department of Psychiatry received the College of Medicine Faculty of the Year Award.

The following seventeen faculty received the 2016 Faculty of the Year Award from their departments:

- Department of Anatomy & Cell Biology - Ernesto Bongarzone
- Department of Anesthesiology - Richard Banchs
- Department of Bioengineering - Xincheng Yao
- Department of Emergency Medicine - Brad Bunney
- Department of Family Medicine - Abbas Hyderi
- Department of Medical Education - Tim Murphy
- Department of Medicine - Rachel Caskey
- Department of Ophthalmology & Visual Sciences- Elmer Tu
- Department of Orthopaedics - Farid Amirouche,
- Department of Otolaryngology – Head & Neck Surgery - Rahki Thambi
- Department of Pathology - Peter Gann
- Department of Pediatrics - George Hoganson
- Department of Pharmacology- Jalees Rehman
- Department of Physiology & Biophysics - Jonna Frasor
- Department of Psychiatry - Robert Marvin
- Department of Radiology - Edward Michals
- Department of Surgery - Mimis Cohen

The following fifteen faculty received the 2016 Rising Star Award from their departments:

- Department of Anesthesiology- Helen Lee
- Department of Emergency Medicine - Joseph Colla
- Department of Family Medicine - Richard Stringham
- Department of Medical Education - Laura Hirshfield
- Department of Medicine - Claudia Lora
- Department of Obstetrics and Gynecology- Gelila Goba
- Department of Ophthalmology & Visual Sciences - James McAnany
- Department of Orthopaedics - Melody Hrubes
- Department of Pathology - Michael Walsh
- Department of Pediatrics - Andrew Kreppel
- Department of Pharmacology - Alexai Karginov
- Department of Psychiatry - Amy Lasek
- Department of Radiology - Yang Lu
- Department of Surgery - Kirstie Danielson
- Department of Urology - Simone Crivellaro

All of the above thirty-two faculty were recognized at the College of Medicine Faculty Recognition Ceremony on June 3, 2016.

Earlier in the winter we nominated Nava Segev in the Department of Biochemistry and Molecular Genetics for the University Scholars Program, and Amelia Bartholomew in the Department of Surgery for the Award for Excellence in Teaching. Additionally, we nominated Larry Tobacman in the Department of Medicine and Bellur Prabhakar in the Department of Microbiology and Immunology for the UIC Distinguished Professorship.

This year, the College of Medicine was pleased to support emeritus recommendations for the following faculty members: Carl Bell, MD as Clinical Professor Emeritus of Psychiatry (Chicago); Norman Estes as Professor Emeritus of Surgery (Peoria); Roger Geiss as Professor Emeritus of Pathology (Peoria); Edward Sloan as Professor Emeritus of Emergency Medicine (Chicago); R. John Solaro as UIC Distinguished Professor Emeritus and Professor Emeritus of Physiology and Biophysics (Chicago); and John Zautcke as Associate Professor Emeritus of Emergency Medicine (Chicago).