## **MINUTES**

Meeting of the Board of Trustees of the Medical University of South Carolina

April 11, 2008

It Is Understood that the Minutes Herein Recorded Have Not as Yet Been Approved and Cannot be Considered as Official Action of the Board Until Such Approval Has Been Given

> Colcock Hall Medical University of South Carolina Charleston, South Carolina

# MINUTES <u>MEDICAL UNIVERSITY OF SOUTH CAROLINA</u> BOARD OF TRUSTEES MEETING April 11, 2008

The Board of Trustees of the Medical University of South Carolina convened Friday, April 11, 2008, with the following members present: Dr. Charles B. Thomas, Jr., Chairman; Dr. Stanley C. Baker, Jr.; Mr. Melvyn Berlinsky; Mr. William H. Bingham, Sr.; Mr. William B. Hewitt; Dr. Donald R. Johnson II; Dr. E. Conyers O'Bryan, Jr.; Dr. Paula E. Orr; Dr. Thomas C. Rowland, Jr.; Mr. Charles W. Schulze; The Honorable Robin M. Tallon; Dr. James E. Wiseman, Jr.; Mrs. Claudia Peeples, Emeritus; The Honorable Phillip D. Sasser, Emeritus. Absent: Dr. Cotesworth P. Fishburne, Jr.; Thomas L. Stephenson, Esquire.

The following administrative officials were present: Dr. Raymond S. Greenberg, President; Dr. John Raymond, Vice President for Academic Affairs and Provost; Dr. Jerry Reves, Vice President for Medical Affairs, and Dean, College of Medicine; Mr. Stuart Smith, Vice President for Clinical Operations and Executive Director, MUHA; Ms. Lisa Montgomery, Vice President for Finance and Administration and Dr. Frank Clark, Vice President for Information Technology and CIO.

The following deans were present: Dr. John Sanders, College of Dental Medicine; Dr. Mark Sothmann, College of Health Professions; Dr. Gail Stuart, College of Nursing; Dr. Arnold Karig, College of Pharmacy; Dr. Joseph DiPiro, South Carolina College of Pharmacy.

#### Item 1. Call to Order-Roll Call.

There being a quorum present, Chairman Thomas called the meeting to order at 9:45 a.m. Ms. Celeste Jordan called the roll.

#### <u>Item 2.</u> <u>Secretary to Report Date of Next Meeting.</u>

The date of the next regularly scheduled meeting is Thursday, May 15, 2008. Commencement will be held Friday, May 16, 2008.

## <u>Approval of Minutes of the Regular Meeting of the Medical University of South Carolina Board of Trustees of February 8, 2008.</u>

Board Action: It was moved that the Minutes be approved. The motion was seconded, voted on and unanimously carried.

RECOMMENDATIONS AND INFORMATIONAL REPORTS OF THE PRESIDENT.

**OLD BUSINESS:** None

**NEW BUSINESS:** 

## Item 4. General Informational Report of the President.

Dr. Greenberg distributed a list of his activities since the last board meeting. He noted a substantial portion of the time was spent meeting with public officials during the legislative session. There are challenges with the state budget but he thanked Bo, Mark and Lisa for their work in this area. Due to the Capital Campaign, much of Dr. Greenberg's time has been spent with development activity and as Jim Fisher reported, the Campaign is well ahead of schedule. Dr. Greenberg thanked the Board for their support of the Capital Campaign.

Secretary Peake, newly appointed Secretary of the Veterans Administration, will be on campus for a meeting with MUSC. As an update on progress with the VA, Dr. Greenberg said the shared tomotherapy equipment that the VA purchased has been located within the University's facility and is up and running. The VA is looking for more opportunities to share equipment. There has been a joint working group looking at building a connector between the existing VA Hospital and the MUSC facility. There remains hope that in the future more facilities will be shared.

The leadership of the Medical Society of South Carolina, the private physician group which owns the majority interest in Roper-St. Francis Hospital, asked for a meeting to discuss their physicians being more involved in supervising medical students and providing mentorship opportunities to them. Also discussed were opportunities for collaboration including scholarship support for students. There was a continuation of the discussion about the possibility of sharing of patient medical records. Dr. Frank Clark led the effort to write a grant for the Duke Endowment which would help fund this effort.

Dr. Greenberg said the Board of Architectural Review approved the plans of the Bioengineering Building so the first step of that external review process has been very positive.

Dr. Raymond introduced Dr. Carolyn Jenkins, who holds the Ann Edwards Endowed Chair. She has won numerous recognitions for her scholarship, community outreach, service, teaching and clinical care.

Dean Gail Stuart said Dr. Jenkins has been at MUSC since 1979, and holds degrees from MUSC, University of Georgia and USC, School of Public Health. She has leveraged over \$10 million in funding primarily for reducing health care disparities as well as engaging academic and community partnerships.

Dr. Jenkins shared with the Board her work done in decreasing disparities and health care costs for African-Americans with diabetes. The work has helped to establish the newly approved Center for Community Health Partnerships at MUSC.

Dr. Greenberg commented that this is very difficult work to earn the trust of the community and he congratulated Dr. Jenkins for her success in this area.

Dr. Greenberg reminded the Board that immediately following the meeting, there is a dedication of the Healing Garden at Hollings Cancer Center.

Recommendations of Administration: That the report be received as information.

Board Action: Received as information.

## <u>Items 5.</u> 2008 Commencement Status Report.

<u>Statement:</u> Dr. Greenberg stated the honorary degree recipients have accepted. He said that the presentation to Dr. Sorensen at the dinner last evening meant a great deal to Dr. Sorensen. The speaker for graduation will be Dr. Ken Kizer, the father of the revolution that transformed the VA Hospital in the 1990's.

Recommendation of Administration: That the report be received as information.

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Board Action: Received as information.

#### <u>Item 6.</u> <u>Other Business.</u> None

RESEARCH AND INSTITUTIONAL ADVANCEMENT COMMITTEE. CHAIRMAN: DR. COTESWORTH P. FISHBURNE, JR. (Detailed committee minutes are attached to these minutes).

**OLD BUSINESS:** None.

**NEW BUSINESS:** 

Mr. Tallon chaired the Committee in Dr. Fishburne's absence.

## <u>Item 7.</u> <u>General Report of the Associate Provost for Research.</u>

Statement: Mr. Tallon said Dr. Lanier presented a report on research activities to the Committee. Through March, MUSC received \$128 million in grants and contracts. MUSC anticipates breaking ground for the Drug Discovery Building this summer and that the design of the Bioengineering Building is on the fast track. Dr. Greenberg noted that endowed chairs at MUSC have grown from 14 in 2000 to more than 40 today.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

#### Item 8. General Report of the Vice President for Development.

<u>Statement:</u> Mr. Tallon stated Mr. Jim Fisher reported that MUSC has received more than \$43.6 million in new gifts and pledges representing a 16% increase over last year this time. The Capital Campaign has generated more than \$205 million in new gifts and pledges toward the goal of \$300 million. Mr. Fisher commended the Board of Trustees as well as the UMA for very generous support to the Capital Campaign.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

#### Item 9. MUSC/MUSC Foundation Affiliation Agreement.

<u>Statement:</u> Mr. Tallon asked for approval of the MUSC/MUSC Foundation Affiliation Agreement.

Recommendation of Administration: That the Agreement be approved.

Recommendation of Committee: That the Agreement be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the MUSC/MUSC Foundation Affiliation Agreement.

## Item 10. General Report of the Executive Director of the MUSC Foundation for Research Development.

<u>Statement:</u> Mr. Tallon said Mr. Chip Hood reported on the activities of the MUSC Foundation for Research Development. He said the MUSC FRD had recently negotiated a term sheet with a multinational company which has a major presence in South Carolina to develop and launch a new diagnostic product. Mr. Hood also talked about two representative deals that had very good potential that would involve diagnostic or screening devices.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

## Item 11. MUSC Foundation for Research Development Board Membership.

<u>Statement:</u> Mr. Tallon asked for approval of Dr. Harold E. Chappelear and Dr. Charles D. Smith as new members of the MUSC Foundation for Research Development Board.

Recommendation of Administration: That the new memberships be approved.

Recommendation of Committee: That the new memberships be approved.

Board Action: A motion was made, seconded and unanimously voted to approve Dr. Harold E. Chappelear and Dr. Charles D. Smith as members of the MUSC Foundation for Research Development Board.

#### Item 12. Other Committee Business. None

EDUCATION, FACULTY AND STUDENT AFFAIRS COMMITTEE. CHAIRMAN: MR. MELVYN BERLINSKY. (Detailed committee minutes are attached to these minutes).

**OLD BUSINESS:** None.

#### **NEW BUSINESS:**

## Item 13. General Report of the Vice President for Academic Affairs and Provost.

<u>Statement:</u> Mr. Berlinsky asked Dr. Raymond for a report. Dr. Raymond reported that the Committee had received a presentation by Dr. Mary Mauldin on her Trustee Leadership Academy capstone experience. There were also discussions of the admissions processes in the COM and CODM.

Recommendation of Administration: That these reports be received as information.

Recommendation of Committee: That these reports be received as information.

Board Action: Received as information.

### Item 14. Other Committee Business.

#### **Endowed Professor Designation**

<u>Statement:</u> At the request of the Dean of the College of Medicine, administration presented as information, the following named Endowed Chair, effective April 11, 2008.

William P. Moran, M.D., M.S., as the McKnight Endowed Chair in Geriatrics

Recommendation of Administration: That this named Endowed Chair be received as information.

Recommendation of Committee: That this named Endowed Chair be received as information.

Board Action: Received as information.

## <u>Item 15.</u> <u>Doctor of Nursing Practice Degree Program Proposal (Consent Item).</u>

<u>Statement:</u> A Doctor of Nursing Practice Degree Program was presented for approval.

Recommendation of Administration: That the Program be approved.

Recommendation of Committee: That the Program be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the Doctor of Nursing Practice Degree Program.

## Item 16. Faculty Promotions (Consent Item).

<u>Statement:</u> At the request of the Deans of the Colleges of Health Professions, Medicine, and Nursing, and their respective AP&T Committees, administration presented for approval the following faculty promotions, effective July 1, 2008:

#### College of Health Professions

From Assistant Professor to Associate Professor

Reamer Loren Bushardt, Pharm.D., Department of Clinical Services

#### College of Medicine

<u>From Associate Professor to Professor: Academic Investigator Track (already tenured)</u>

**Harold D. May, Ph.D.,** Department of Microbiology and Immunology; Joint: Stomatology

Michael I. Nishimura, Ph.D., Department of Surgery, Division of General Surgery

**Ling Wei, M.D.,** Department of Pathology and Laboratory Medicine; Dual: Neurosciences, Division of Neurology

<u>From Associate Professor to Professor: Academic Clinician Track (already tenured)</u> **Bonnie J. Martin-Harris, Ph.D.,** Department of Otolaryngology; Joint: Stomatology, College of Dental Medicine; Joint: Rehabilitative Sciences, College of Health Professions

<u>From Associate Professor to Professor: Academic Clinician Track (without tenure)</u> **Uwe O.P. Joseph Schoepf, M.D.,** Department of Radiology; Dual: Medicine, Division of Cardiology

<u>From Associate Professor to Professor: Clinician Educator Track (already tenured)</u>

Marcy B. Bolster, M.D., Department of Medicine, Division of Rheumatology

Joel Cook, M.D., Department of Dermatology; Dual: Otolaryngology – Head and Neck Surgery

<u>From Associate Professor to Professor: Clinician Educator Track (without tenure)</u> **Eric S. Rovner, M.D.,** Department of Urology

<u>From Assistant Professor to Associate Professor: Academic Investigator Track</u> **Laura M. Goetzl, M.D., M.P.H.**, Department of Obstetrics and Gynecology **Dieter Haemmerich, Ph.D., Dr. Sci.**, Department of Pediatrics, Division of Pediatric Cardiology

Ashli J. Sheidow, Ph.D., Department of Psychiatry and Behavioral Sciences

<u>From Assistant Professor to Associate Professor: Academic Clinician Track</u> **Bruce M. Frankel, M.D.,** Department of Neurosciences, Division of Neurological Surgery; Dual: Radiation Oncology

Vanessa K. Hinson, M.D., Ph.D., Neurosciences, Division of Neurology Xinghua Lu, Ph.D., Department of Biostatistics, Bioinformatics, and Epidemiology Aimee L. McRae, Pharm.D., Department of Psychiatry and Behavioral Sciences Kenneth J. Ruggiero, Ph.D., Department of Psychiatry and Behavioral Sciences

<u>From Research Assistant Professor to Associate Professor: Academic Investigator Track</u>

Robin C. Muise-Helmericks, Ph.D., Department of Cell Biology and Anatomy

From Assistant Professor to Associate Professor: Clinician Educator Track

Harry A. Demos, M.D., Department of Orthopaedic Surgery

Kristin B. Highland, M.D., M.S.C.R., Department of Medicine, Division of Pulmonary and Critical Care Medicine

**Denise L. Quigley, Ph.D.,** Department of Pathology and Laboratory Medicine **Cassandra D. Salgado, M.D., M.S.**, Department of Medicine, Division of Infectious Disease

Andrea P. Summer, M.D., Department of Pediatrics, Division of General Pediatrics

<u>From Research Assistant Professor to Research Associate Professor</u> **Valerie L. Durkalski, Ph.D.,** Department of Biostatistics, Bioinformatics and Epidemiology

<u>From Adjunct Assistant Professor to Adjunct Associate Professor</u> **Ann F. Ramsdell, Ph.D.,** Department of Cell Biology and Anatomy

<u>From Clinical Assistant Professor to Clinical Associate Professor</u> **John C. Maize, Jr., M.D.,** Department of Dermatology

#### College of Nursing

<u>From Assistant Professor to Associate Professor on the Educator Clinician track</u> **Robin L. Bissinger, Ph.D.**, Department of Nursing

<u>From Associate Professor to Professor on the Educator Clinician track</u> **Janet A. Grossman, DNSc.**, Department of Nursing

#### **SC AHEC**

**Scott S. Counts, M.D.**, from Assistant Professor to MUSC AHEC Associate Professor (Anderson)

T. Edwin Evans, M.D., from Assistant Professor to MUSC AHEC Associate Professor (Seneca)

**Gregory T. Valainis, M.D.**, from Associate Professor to MUSC AHEC Professor (Spartanburg)

Recommendation of Administration: That these faculty promotions be approved.

Recommendation of Committee: That these faculty promotions be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the Faculty Promotions.

## <u>Item 17.</u> <u>Faculty Appointments (Consent Item).</u>

<u>Statement:</u>. At the request of the Deans of the Colleges of Dental Medicine, Medicine, Pharmacy and Nursing, their respective Appointments, Promotions and Tenure Committees, and the University Tenure Committee, administration presented for approval the following faculty appointments:

## College of Dental Medicine and Medicine

Jack Yang, M.D., as Associate Professor, on the Clinician Educator track, in the Department of Pathology and Laboratory Medicine, effective March 1, 2008.

### College of Medicine

Marc I. Chimowitz, M.B., Ch.B., as Professor with tenure, on the Academic Clinician track, in the Department of Neurosciences, Division of Neurology, effective March 1, 2008.

Dr. Chimowitz will hold an Eminent Scholar in Stroke designation and serve as the Associate Dean of Faculty Development in the College of Medicine.

**Harold J. Fallon, M.D.**, as Clinical Professor, in the Department of Medicine, Division of Gastroenterology, effective January 1, 2008.

Edward C. Jauch, M.D., as Associate Professor, on the Clinician Educator track, in the Department of Medicine, Division of Emergency Medicine, effective July 1, 2008.

**Lynn M. Manfred, M.D.**, as Associate Professor on the Clinician Educator track, in the Department of Medicine, Division of General Internal Medicine and Geriatrics, effective March 1, 2008.

#### College of Nursing

Cynthia K. Russell, Ph.D., R.N., as Adjunct Professor in the Department of Nursing, effective January 15, 2008.

#### South Carolina College of Pharmacy

Joli D. Fermo, Pharm.D., as Associate Professor in the Department of Clinical Pharmacy and Outcomes Sciences, effective April 1, 2008

Recommendation of Administration: That these faculty appointments be approved.

Recommendation of Committee: That these faculty appointments be approved.

<u>Board Action: A motion was made, seconded and unanimously voted to approve the faculty appointments.</u>

### Item 18. Changes in Faculty Status (Consent Item).

<u>Statement:</u> At the request of the Dean of the College of Medicine, and its respective Appointments, Promotions and Tenure Committee, administration presented for approval the following change in faculty status.

#### College of Medicine

**Thomas C. Rowland, M.D.** from Professor Emeritus to Professor in the Department of Obstetrics and Gynecology, retroactive to October 1, 2007.

Recommendation of Administration: That this recommendation for change in faculty status be approved.

Recommendation of Committee: That this recommendation for change in faculty status be approved.

Board Action: A motion was made, seconded and unanimously voted to approve the change in faculty status.

## Item 19. Department of Radiology Name Change (Consent Item).

<u>Statement:</u> At the request of the Dean of the College of Medicine, administration presented as information the name change of the Department of Radiology to the Department of Radiology and Radiological Science, effective April 11, 2008.

Recommendation of Administration: That the name change of the Department of Radiology to the Department of Radiology and Radiological Science be received as information.

Recommendation of Committee: That the name change of the Department of

Radiology to the Department of Radiology and Radiological Science be received as information.

Board Action: Received as information.

FINANCE AND ADMINISTRATION COMMITTEE. CHAIRMAN: MR. CHARLES W. SCHULZE. (Detailed committee minutes are attached to these minutes).

**OLD BUSINESS:** None.

**NEW BUSINESS:** 

#### Item 20. Major Purchases

Statement: Mr. Schulze asked for approval for the following major purchases:

- Consultant services to provide a procurement business and technology assessment for MUSC. Estimated cost of purchase: \$125,000
- Consultant services as liaison with federal agencies and government and legislative activities. Estimated cost of purchase: \$124,800.

Recommendation of Administration: That the purchases be approved.

Recommendation of Committee: That these purchases be approved.

<u>Board Action:</u> A motion was made, seconded and unanimously voted to approve the purchase as presented.

## Item 21. Financial Status Report of the Medical University of South Carolina.

<u>Statement:</u> Mr. Schulze said a positive report had been provided to committee by Mr. Wamsley on the financial status of the University.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

## Item 22. Financial Status Report of University Medical Associates.

<u>Statement:</u> Mr. Schulze said Mr. Mike Keels reported on the financial results of UMA and they were also positive.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

## Item 23. Financial Status Report of the MUSC Foundation for Research Development.

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<u>Statement:</u> Mr. Schulze said Ms. Janet Scarborough provided a report on the financial status of the MUSC Foundation for Research Development.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

#### Item 24. Other Committee Business.

<u>Statement</u>: Mr. Schulze said Ms. Montgomery and Mr. Faulkner had provided the Committee information on legislative matters and Ms. Barnhart had provided a report on Enterprise Risk Management.

Recommendation of Administration: That the reports be received as information.

Recommendation of Committee: That the reports be received as information.

Board Action: Received as information.

UNIVERSITY PHYSICAL FACILITIES COMMITTEE. CHAIRMAN: MR. WILLIAM H. BINGHAM, SR. (Detailed committee minutes are attached to these minutes).

**OLD BUSINESS:** None.

#### **NEW BUSINESS:**

#### Item 25. Update on Projects.

<u>Statement</u>: Mr. Bingham stated that Mr. Malmrose had provided an update to the Committee on various University projects. Mr. Bingham said there were many projects in progress and he thanked Mr. Malmrose, his staff and administration for their efforts in all these projects.

Recommendation of Administration: That this be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: The report was received as information.

#### <u>Item 26.</u> <u>Other Committee Business.</u> None

## Item 27. Facilities Contracts Awarded (consent item).

<u>Statement:</u> Facilities contracts awarded since the last meeting were presented for information.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

Board Action: Received as information.

UNIVERSITY AUDIT COMMITTEE. CHAIRMAN: THOMAS L. STEPEHENSON, ESQUIRE. (Detailed committee minutes are attached to these minutes).

**OLD BUSINESS:** None.

#### **NEW BUSINESS:**

Dr. Thomas chaired the Committee in Mr. Stephenson's absence.

## Item 28. MUSC Compliance Update.

Statement: No report was given.

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

Board Action: Received as information.

## Item 29. UMA Compliance Update.

Statement: No report was given.

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

Board Action: Received as information.

#### Item 30. Report of Legal Counsel.

<u>Statement:</u> Dr. Thomas stated a report was received by the Committee in Executive Session from Mr. Joe Good on various legal matters.

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

Board Action: Received as information.

#### Item 31. Report of Internal Auditor.

<u>Statement:</u> Dr. Thomas stated a report was received by the Committee from Ms. Susan Barnhart.

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

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Board Action: Received as information.

Item 32. Other Business. None

## OTHER BUSINESS FOR THE BOARD OF TRUSTEES:

#### Item 33. Approval of Consent Agenda.

Statement: Approval of the University Consent Agenda was requested.

Recommendation of Administration: That the Consent Agenda be approved.

Board Action: It was moved, seconded and unanimously voted that the Consent Agenda be approved.

## Item 34. Biennial Review of the MUSC Bylaws of the Board of Trustees.

<u>Statement:</u> Dr. Thomas asked for approval of the changes to the MUSC Bylaws of the Board of Trustees as presented.

Board Action: A motion was made, seconded and unanimously voted to approve the changes to the MUSC Bylaws as presented.

#### Item 35. New Business for the Board of Trustees.

Dr. Thomas said that due to time constraints, Mr. Stephenson has withdrawn from the MUSC Foundation Board so anyone interested in service on that Board, contact Dr. Thomas or Dr. Greenberg.

The Board will hold a retreat in Charleston June 19 and 20.

#### Item 36. Report from the Chairman.

There being no further business, the meeting of the University Board of Trustees was adjourned.

Respectfully submitted,

Hugh B. Faulkner III

Secretary

/wcj

Attachments

#### Medical University of South Carolina

## RESEARCH AND INSTITUTIONAL ADVANCEMENT COMMITTEE

#### **MINUTES**

#### April 10, 2008

Committee Members Present: Mr. William H. Bingham, Sr., Dr. Cotesworth P. Fishburne, Jr. (Chair), Mr. William B. Hewitt, Dr. Donald R. Johnson II, Dr. Paula E. Orr, Dr. Thomas C. Rowland, Jr., The Honorable Robin Tallon, Dr. James E. Wiseman, Jr.

Committee Members Absent: Mr. Thomas L. Stephenson, Esq.,

Other Trustees Present: Dr. Stanley C. Baker, Jr., Mr. Melvyn Berlinsky, Dr. E. Conyers O'Bryan, Jr., Mr. Charles W. Schulze, Dr. Charles B. Thomas, Jr.

Other Participants: Mr. Thomas P. Anderson, Ms. Susan H. Barnhart, Dr. John R. Feussner, Mr. Jim Fisher, Mr. Joseph Good, Dr. Raymond S. Greenberg, Ms. Jeannie Grooms, Mr. William C. Hood, Dr. Mark Kindy, Dr. Stephen M. Lanier, Ms. Leigh Manzi, Dr. John R. Raymond, Dr. J.G. Reves, Ms. Janet Scarborough, Ms. Margaret P. Schachte

#### Regular Agenda

#### Call to Order and Approval of Minutes

Dr. Fishburne called the meeting to order at 12:30 PM in the Colcock Hall Board Room. The minutes of the previous meeting were approved as distributed.

## <u>Item 7.</u> <u>General Report of the Associate Provost for Research</u>

Dr. Lanier presented the research activities report. Through March, MUSC has received \$128 million in extramural grants and contracts in FY2008. The extramural funding pace is running slightly behind last year at this date. However, proposals submitted to date are significantly higher than last year and the year-to-date awards from the National Institutes of Health are up slightly, despite federal budgetary pressures. Dr. Lanier said MUSC anticipates breaking ground for the Drug Discovery Building (DDB) during this summer and has put the design of the Bioengineering Building on the fast track. The prospect of two new research buildings along with progress in the Foundation for Research Development and increased entrepreneurial spirit among the faculty will stimulate future research growth. Dr. Lanier introduced Rick G. Schnellmann, PhD, Professor and Chair of the Department of Pharmaceutical Sciences.

FACULTY PRESENTATION. Dr. Schnellman gave an overview of the design, programmatic development and expected impact of the Drug Discovery Building, including the site plan, floor plans, and examples of personnel and programs that will occupy it. The Bioengineering Building will adjoin the Drug Discovery Building and will house research programs and teams that complement and interact with those in the DDB. Dr. Schnellmann highlighted the importance of discovering new targets as a key factor in the overall drug discovery process; target discovery is an emerging strength at MUSC. As a result of building the Drug Discovery Building, MUSC can expect a range of beneficial outcomes, including increased infrastructure for drug discovery, increased visibility in the field of experimental therapeutics, new patents, grants and publications, and increased opportunities for research funding, out-licensing, and business startups. In the discussion following the presentation, Dr. Greenberg noted that endowed chairs at MUSC have grown from 14 in 2000 to more than 40 today. The productive bioengineering partnership between Clemson and MUSC and increasing interactions with the University of South Carolina in this and other fields were also noted.

Recommendation of Administration: That the report be received as information.

Recommendation of Committee: That the report be received as information.

#### **Board Action:**

## Item 8. General Report of the Vice President for Development

Mr. Fisher presented the institutional advancement activities report. Through March 31, 2008, MUSC has received more than \$43.6 million in new gifts and pledges, representing a 16% increase over last year at this time. The Capital Campaign, A Partnership of Promise, has generated more than \$205 million in new gifts and pledges toward the goal of \$300 million. The Board of Trustees has provided exemplary leadership, giving more than \$2,537,000 to date to the Capital Campaign. UMA support for the Campaign is also phenomenal. To date, UMA has contributed more \$9 million. The most recent gifts are \$1 million to endow a diversity scholarship and to endow a chair in anesthesiology research. Both funds will be named in honor of Dr. Jerry Reves. and both will be matched. The departments of the College of Medicine will match the diversity scholarship and the Department of Anesthesiology will match the chair. Thus, UMA has provided more than \$11 million to the Capital Campaign. The Kickoff Ceremony for the Capital Campaign will be Thursday, May 1, 6:00-8:00 PM in the Horseshoe. Mr. Bob Sywolski, a member of both the MUSC Foundation Board and the MUSC Heart and Vascular Board, has agreed to serve as Master of Ceremonies for the event. Mr. Fisher referred to a detailed list in the meeting booklet summarizing major gifts and activities since the February board meeting, and highlighted several including:

- A gift commitment of \$1 million from Wally and Bev Seinsheimer to establish the Seinsheimer Clinic for Cardiovascular Disease Prevention.
- A cash gift of \$250,000 from Bob and Karen Sywolski for the Center of Economic Excellence Program for Cardiovascular Disease.
- A big band concert with Darius Rucker in Charleston at the Music Hall sponsored by BB&T along with Blackbaud and West Ashley Toyota, which netted \$115,000 for the Charles P. Darby Children's Research Institute.
- A planned gift valued at \$300,000-500,000 from Mr. Brian Poplin, a current student in the College of Health Profession's Doctorate in Health Administration program. Mr. Poplin is a Vice President with Aramark and has agreed to serve on the College's Public Advisory Board.
- Participation by ~400 College of Medicine alumni and guests during the College's first all-alumni campus homecoming, March 14-15. As a result of the expanded format and additional activities, 17 new medical alumni joined the Society of 1824

Mr. Fisher noted that the MUSC Board of Visitors Meeting the next day is concurrent with the Board of Trustees meeting. The agenda includes updates from Dr. Gail Stuart, Dean, College of Nursing; Dr. Jack Sanders, Dean, College of Dental Medicine; Dr. Paul Underwood, who directs the College of Medicine admissions process; Dr. Tom Uhde, Chair of the Department of Psychiatry; and Dr. Terry Day, leader of the MUSC Head and Neck Cancer Program. The MUSC Board of Visitors will join the Board of Trustees for the dedication of the Pearlstine Healing Garden at the Hollings Cancer Center.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

**Board Action:** 

## Item 9. MUSC/MUHA/MUSC Foundation Affiliation Agreement

The 2008-09 MUSC/MUHA Foundation Affiliation Agreement was presented and approved as recommended by MUSC General Counsel and as required by MUSC Foundation bylaws at least 60 days prior to the beginning of the new fiscal year.

Recommendation of Administration: That the MUSC/MUHA/MUSC Foundation Affiliation Agreement be approved.

Recommendation of Committee: That the MUSC/MUHA/MUSC Foundation Affiliation Agreement be approved.

#### **Board Action:**

## Item 10. General Report of the Executive Director of the MUSC Foundation for Research Development

Mr. Hood reported on the recent activities of the MUSC Foundation for Research Development (FRD). FRD recently negotiated a term sheet with a multinational company with a major presence in South Carolina to develop and launch a new diagnostic product. In the current fiscal year, FRD has received 41 invention disclosures and executed one new option, two new exclusive licenses, and several non-exclusive licenses. A number of new patent applications have been initiated. Mr. Hood noted that FRD's current strategy is to file fewer, better patents with deeper coverage. In closing, he characterized the valuation of two representative deals – one that could generate \$40 million for MUSC over a 9-yr period starting four or five years from now, if all goes well; the other potentially generating \$30 million to \$300 million in approximately the same time period. Both of these examples involve diagnostic or screening device. The valuation for a drug discovery "hit" could be much higher. Mr. Hood emphasized the points that technology transfer is a long-term investment that can generate exceptional returns over the long-term, and that MUSC could begin seeing technology-based streams of royalties and revenues in about five years.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

#### **Board Action:**

Mr. Chip Hood asked for approval of Dr. Harold E. Chappelear and Dr. Charles D. Smith as new members of the MUSC Foundation for Research Development Board. The Committee unanimously passed a motion to recommend for approval.

Recommendation of Administration: That Dr. Chappelear and Dr. Smith be approved as new MUSC FRD Board members.

Recommendation of Committee: That Dr. Chappelear and Dr. Smith be approved as new MUSC FRD Board members

#### **Board Action:**

#### Item 12. Other Committee Business

Chairman Fishburne announced that Mr. Tallon would give the committee report at the Board of Trustees meeting the next day. There being no further business, the meeting was adjourned at 1:30 PM.

## EDUCATION, FACULTY AND STUDENT AFFAIRS COMMITTEE. CHAIRMAN: MR. MELVYN BERLINSKY

April 10, 2008 Minutes

Members Present: Mr. Melvyn Berlinsky; Dr. Stanley Baker; Mr. William Bingham; Dr. Cotesworth Fishburne; Mr. William B. Hewitt; Dr. Conyers O'Brien; Dr. Paula Orr; The Honorable Robin Tallon; Dr. Thomas Rowland; Mr. Charles Schulze; Dr. Charles Thomas: Dr. James E. Wiseman, Jr.

Other Participants: Ms. Susan Barnhart; Dr. Frank Clark; Dr. Deborah Deas; Dr. Joe DiPiro; Dr. Jack Feussner; Mr. Joe Good; Dr. Ray Greenberg; Dr. Perry Halushka; Ms. Sarah King; Dr. Steve Lanier; Dr. Walter Limehouse; Dr. John Raymond; Dr. Jerry Reves; Dr. Jack Sanders; Dr. Sabra Slaughter; Mr. Maurice Snook; Dr. Mark Sothmann; Dr. Gail Stuart; Mr. Mark Sweatman; Ms. Wanda Taylor; Mr. Donald Tyner; Dr. Paul Underwood; Mr. Steve Valerio

#### **REGULAR AGENDA**

#### Item 13. General Report of the Vice President for Academic Affairs

#### Statement:

Dr. Mary Mauldin briefly summarized her collaboration with the University of Fort Hare in South Africa, which was an outgrowth of her Trustees Leadership Academy capstone experience. She discussed many ideas about ways to collaborate with our colleagues in South Africa. Potential areas of collaboration include speech pathology, the Physician Assistant Program, Nursing and student alcohol abuse. She will be working with the Academic Deans to discuss other potential opportunities.

Dr. Jack Sanders, Dean of the College of Dental Medicine, and Dr. Paul Underwood, Associate Dean of Admissions in the College of Medicine, provided the Board with slide presentations of their respective College's admissions process.

Recommendation of Administration: That this report be received as information.

Recommendation of Committee: That this report be received as information.

#### **Board Action:**

#### Item 14. Other Committee Business.

## A. Endowed Professor Designation (Information)

<u>Statement:</u> At the request of the Dean of the College of Medicine, administration presented as information, the following named Endowed Chair, effective April 11, 2008.

William P. Moran, M.D., M.S., as the McKnight Endowed Chair in Geriatrics

Recommendation of Administration: That this named Endowed Chair be received as information.

<u>Recommendation of Committee</u>: That this named Endowed Chair be received as information.

#### **Board Action:**

## EDUCATION, FACULTY AND STUDENT AFFAIRS COMMITTEE. CHAIRMAN: MR. MELVYN BERLINSKY

April 10, 2008

#### CONSENT AGENDA

## <u>Item 15.</u> <u>Doctor of Nursing Practice Degree Program Proposal</u>

<u>Statement:</u> At the request of the Dean of the College of Nursing, administration presented for approval the Doctor of Nursing Practice Degree Program Proposal, effective April 11, 2008. This proposal will be submitted to the South Carolina Commission on Higher Education.

<u>Recommendation of Administration:</u> That the Doctor of Nursing Practice Degree Program Proposal be approved.

Recommendation of the Committee: That the Doctor of Nursing Practice Degree Program Proposal be approved.

**Board Action:** 

#### Item 16. Faculty Promotions.

<u>Statement:</u> At the request of the Deans of the Colleges of Health Professions, Medicine, and Nursing, and their respective AP&T Committees, administration presented for approval the following faculty promotions, effective July 1, 2008:

#### College of Health Professions

<u>From Assistant Professor to Associate Professor</u>

Reamer Loren Bushardt, Pharm.D., Department of Clinical Services

## College of Medicine

<u>From Associate Professor to Professor: Academic Investigator Track (already tenured)</u>

**Harold D. May, Ph.D.,** Department of Microbiology and Immunology; Joint: Stomatology

**Michael I. Nishimura, Ph.D.,** Department of Surgery, Division of General Surgery **Ling Wei, M.D.,** Department of Pathology and Laboratory Medicine; Dual: Neurosciences, Division of Neurology

From Associate Professor to Professor: Academic Clinician Track (already tenured)

Bonnie J. Martin-Harris, Ph.D., Department of Otolaryngology; Joint: Stomatology,
College of Dental Medicine; Joint: Rehabilitative Sciences, College of Health
Professions

From Associate Professor to Professor: Academic Clinician Track (without tenure) **Uwe O.P. Joseph Schoepf, M.D.,** Department of Radiology; Dual: Medicine,

Division of Cardiology

<u>From Associate Professor to Professor: Clinician Educator Track (already tenured)</u>

Marcy B. Bolster, M.D., Department of Medicine, Division of Rheumatology

**Joel Cook, M.D.,** Department of Dermatology; Dual: Otolaryngology – Head and Neck Surgery

<u>From Associate Professor to Professor: Clinician Educator Track (without tenure)</u> **Eric S. Rovner, M.D.,** Department of Urology

From Assistant Professor to Associate Professor: Academic Investigator Track

Laura M. Goetzl, M.D., M.P.H., Department of Obstetrics and Gynecology

Dieter Haemmerich, Ph.D., Dr. Sci., Department of Pediatrics, Division of Pediatric

Cardiology

Ashli J. Sheidow, Ph.D., Department of Psychiatry and Behavioral Sciences

From Assistant Professor to Associate Professor: Academic Clinician Track

Bruce M. Frankel, M.D., Department of Neurosciences, Division of Neurological Surgery; Dual: Radiation Oncology

Vanessa K. Hinson, M.D., Ph.D., Neurosciences, Division of Neurology Xinghua Lu, Ph.D., Department of Biostatistics, Bioinformatics, and Epidemiology Aimee L. McRae, Pharm.D., Department of Psychiatry and Behavioral Sciences Kenneth J. Ruggiero, Ph.D., Department of Psychiatry and Behavioral Sciences

<u>From Research Assistant Professor to Associate Professor: Academic Investigator Track</u>

Robin C. Muise-Helmericks, Ph.D., Department of Cell Biology and Anatomy

From Assistant Professor to Associate Professor: Clinician Educator Track Harry A. Demos, M.D., Department of Orthopaedic Surgery Kristin B. Highland, M.D., M.S.C.R., Department of Medicine, Division of Pulmonary and Critical Care Medicine

**Denise L. Quigley, Ph.D.,** Department of Pathology and Laboratory Medicine **Cassandra D. Salgado, M.D., M.S.**, Department of Medicine, Division of Infectious Disease

Andrea P. Summer, M.D., Department of Pediatrics, Division of General Pediatrics

From Research Assistant Professor to Research Associate Professor

Valerie L. Durkalski, Ph.D., Department of Biostatistics, Bioinformatics and
Epidemiology

<u>From Adjunct Assistant Professor to Adjunct Associate Professor</u> **Ann F. Ramsdell, Ph.D.,** Department of Cell Biology and Anatomy

From Clinical Assistant Professor to Clinical Associate Professor John C. Maize, Jr., M.D., Department of Dermatology

#### College of Nursing

<u>From Assistant Professor to Associate Professor on the Educator Clinician track</u> **Robin L. Bissinger, Ph.D.**, Department of Nursing

<u>From Associate Professor to Professor on the Educator Clinician track</u> **Janet A. Grossman, DNSc.**, Department of Nursing

#### SC AHEC

**Scott S. Counts, M.D.**, from Assistant Professor to MUSC AHEC Associate Professor (Anderson)

T. Edwin Evans, M.D., from Assistant Professor to MUSC AHEC Associate Professor (Seneca)

**Gregory T. Valainis, M.D.**, from Associate Professor to MUSC AHEC Professor (Spartanburg)

Recommendation of Administration: That these faculty promotions be approved.

Recommendation of Committee: That these faculty promotions be approved.

**Board Action** 

#### Item 17. Faculty Appointments.

<u>Statement:</u>. At the request of the Deans of the Colleges of Dental Medicine, Medicine, Pharmacy and Nursing, their respective Appointments, Promotions and Tenure Committees, and the University Tenure Committee, administration presented for approval the following faculty appointments:

#### College of Dental Medicine and Medicine

**Jack Yang, M.D.**, as Associate Professor, on the Clinician Educator track, in the Department of Pathology and Laboratory Medicine, effective March 1, 2008.

#### College of Medicine

Marc I. Chimowitz, M.B., Ch.B., as Professor with tenure, on the Academic Clinician track, in the Department of Neurosciences, Division of Neurology, effective March 1, 2008.

Dr. Chimowitz will hold an Eminent Scholar in Stroke designation and serve as the Associate Dean of Faculty Development in the College of Medicine.

**Harold J. Fallon, M.D.**, as Clinical Professor, in the Department of Medicine, Division of Gastroenterology, effective January 1, 2008.

Edward C. Jauch, M.D., as Associate Professor, on the Clinician Educator track, in the Department of Medicine, Division of Emergency Medicine, effective July 1, 2008.

**Lynn M. Manfred, M.D.**, as Associate Professor on the Clinician Educator track, in the Department of Medicine, Division of General Internal Medicine and Geriatrics, effective March 1, 2008.

#### College of Nursing

Cynthia K. Russell, Ph.D., R.N., as Adjunct Professor in the Department of Nursing, effective January 15, 2008.

#### South Carolina College of Pharmacy

Joli D. Fermo, Pharm.D., as Associate Professor in the Department of Clinical Pharmacy and Outcomes Sciences, effective April 1, 2008

Recommendation of Administration: That these faculty appointments be approved.

Recommendation of Committee: That these faculty appointments be approved.

#### **Board Action:**

## Item 18. Changes in Faculty Status

<u>Statement:</u> At the request of the Dean of the College of Medicine, and its respective Appointments, Promotions and Tenure Committee, administration presented for approval the following change in faculty status.

#### College of Medicine

**Thomas C. Rowland, M.D.** from Professor Emeritus to Professor in the Department of Obstetrics and Gynecology, retroactive to October 1, 2007.

<u>Recommendation of Administration:</u> That this recommendation for change in faculty status be approved.

Recommendation of Committee: That this recommendation for change in faculty status be approved.

**Board Action:** 

#### (INFORMATION ITEMS)

## <u>Item 19.</u> <u>Department of Radiology Name Change</u>

<u>Statement:</u> At the request of the Dean of the College of Medicine, administration presented as information the name change of the Department of Radiology to the Department of Radiology and Radiological Science, effective April 11, 2008.

Recommendation of Administration: That the name change of the Department of Radiology to the Department of Radiology and Radiological Science be received as information.

<u>Recommendation of Committee:</u> That the name change of the Department of Radiology to the Department of Radiology and Radiological Science be received as information.

Board Action:

# COMMITTEE ON FINANCE AND ADMINISTRATION April 10, 2008 Minutes

#### Attendees:

Mr. Charles Schulze, Chair

Dr. Stanley C. Baker, Jr.

Mr. William H. Bingham, Sr.

Mr. William B. Hewitt

Dr. Thomas C. Rowland, Jr.

Dr. Charles B. Thomas, Jr.

Mr. Hugh B. Faulkner, III

Dr. Raymond S. Greenberg

Mr. John Barilich

Ms. Susan H. Barnhart

Dr. Pat Cawley

Dr. Jack Feussner

Ms. Sarah King

Mr. Mike Keels

Dr. Steve Lanier

Mr. Stewart Mixon

Ms. Lisa McGill

Ms. Lisa Montgomery

Ms. Jody O'Donnell

Dr. John Raymond

Dr. Jerry Reves

Mr. Stuart Smith

Mr. Maurice Snook

Mr. Mark Sweatman

Mr. Patrick Wamsley

Mr. Schulze called the meeting to order.

### **REGULAR Items**

### Item 20 Major Purchases

Ms. Lisa Montgomery presented the following for approval:

- Consultant services to provide a procurement business and technology assessment for MUSC. Estimated cost of purchase: \$125,000
- Consultant services as liaison with federal agencies and government and legislative activities. Estimated cost of purchase: \$124,800.

Recommendation of Committee: That these purchases be approved.

## Item 21 Financial Status Report of the Medical University of South Carolina

Mr. Patrick Wamsley presented the financial status of the University as of February 2008. He reported operating cash of \$57.4 million compared to \$67.5 million last year. The University has an increase in net assets of \$23.9 million. The current funds show a positive variance of \$7.4 million. The University finances continue to remain stable.

Recommendation of Committee: That this report be received as information.

## <u>Item 22</u> <u>Financial Status Report of University Medical Associates</u>

Mr. Mike Keels reported UMA's bottom line as of February 2008 was \$2.9 million. There has been phenomenal growth in faculty members hence net clinical revenues are up as well as departmental expenses. Transfers to the MUSC Foundation and the

University have increased \$4.7 million over the same period last year.

Carolina Family Care does not show much change; however, some progress has been made.

Recommendation of Committee: That this report be received as information.

## <u>Item 23</u> <u>Financial Status Report of the MUSC Foundation for Research Development</u>

Ms. Janet Scarborough reported the financial results for the MUSC Foundation for Research Development were break-even through February 2008. License revenues in the amount of \$600,000 had been collected.

Recommendation of Committee: That this report be received as information

## <u>Item 24</u> <u>Other Committee Business</u>

Ms. Lisa Montgomery and Mr. Bo Faulkner provided information on the 2009 budget proposals being discussed in the legislature which would impact MUSC.

Recommendation of Committee: That this report be received as information.

Ms. Susan Barnhart provided a report on Enterprise Risk Management (ERM). She discussed why it is important to an organization; strategies for implementation as well as who is responsible for the process. Mr. Schulze stated the University should be proactive in identifying high risk areas and putting controls in place to mitigate the risks.

Recommendation of Committee: That this report be received as information.

CONSENT AGENDA

None.

There being no further business, the meeting was adjourned.

Respectfully submitted.

Celeste Jordan

## Medical University of South Carolina Physical Facilities Committee April 10, 2008 Minutes

#### Attendees:

Mr. William H. Bingham, Sr., Chair

Dr. Stanley C. Baker, Jr. Mr. Melvyn Berlinsky

Dr. Cotesworth P. Fishburne, Jr.

Mr. William B. Hewitt Dr. Paula E. Orr

Dr. Thomas C. Rowland, Jr.

Mr. Charles W. Schulze

The Honorable Robin M. Tallon

Dr. Charles B. Thomas, Jr.

Dr. James E. Wiseman, Jr.

Ms. Susan Barnhart

Dr. Pat Cawley Mr. John Cooper

Ms. Annette Drachman

Ms. Susie Edwards

Mr. Dennis Frazier

Mr. Joe Good

Mr. Steve Hargett

Dr. Sarah King

Mr. John Malmrose

Ms. Lisa McGill

Mr. Stewart Mixon

Ms. Lisa Montgomery

Ms. Jennifer Pearce

Mr. Stuart Smith

Mr. Maurice Snook

Mr. Mark Sweatman

Mr. Patrick Wamsley

Mr. Bingham called the meeting to order.

#### **REGULAR Items**

### <u>Item 25.</u> <u>Update on Projects</u>

Mr. John Malmrose provided an update on the following University projects: Drug Discovery Building, Bio-Engineering Building, Pharmacology Renovations, College of Dental Medicine Building, College of Nursing Clinical Simulation Lab and the Bee Street Parking Garage. He also provided updates on the Hazardous Weather Upgrades and the Energy Performance Contract. He reviewed results of the RecycleMania competition.

Recommendation of Committee: Received as information.

#### Item 26. Other Committee Business None.

#### **CONSENT Items for Information:**

#### <u>Item 27</u> <u>Facilities Contracts Awarded</u>

The facilities contracts since the last board meeting were presented for information.

Recommendation of Committee: That this report be received as information.

With no further business, the meeting was adjourned.

Respectfully submitted.

Celeste Jordan

## Medical University of South Carolina Audit Committee April 10, 2008 Minutes

#### Attendees:

Dr. Charles B. Thomas, Jr., Chair

Dr. Stanley C. Baker, Jr. Mr. Melvyn Berlinsky

Mr. William H. Bingham, Sr.

Dr. Cotesworth P. Fishburne, Jr.

Mr. William B. Hewitt

Dr. Paula E. Orr

Dr. E. Conyers O'Bryan, Jr. Dr. Thomas C. Rowland, Jr.

Mr. Charles W. Schulze

The Honorable Robin M. Tallon

Mr. Hugh B. Faulkner III

Dr. Raymond S. Greenberg

Ms. Julie Acker

Ms. Susan Barnhart

Ms. Annette Drachman

Mr. Joe Good

Dr. Steve Lanier

Ms. Lisa McGill

Ms. Lisa Montgomery

Ms. Jody O'Donnell

Ms. Reece Smith

Mr. Stuart Smith

In Mr. Stephenson's absence, the committee was chaired by Dr. Thomas. Dr. Thomas called the meeting to order.

#### **REGULAR Items**

## Item 28. MUSC Compliance Update

No report.

Recommendation of Committee: That this be received as information.

## Item 29. UMA Compliance Update

No report.

Recommendation of Committee: That this be received as information.

## <u>Item 30.</u> Report of Legal Counsel

Dr. Thomas made a motion for an executive session to receive a report from Mr. Joe Good, University Legal Counsel, on various legal issues. The motion was seconded and unanimously voted to go into executive session.

At the conclusion of the session, the Board went back into open session with no action taken.

Recommendation of Committee: That the report be received as information.

## Item 31. Report of Internal Auditor.

Ms. Susan Barnhart provided a report on the following audits: System Backup and Restoration Processes of OCIO-IS, ACL Analysis, Student Financial Aid, Department of Biostatistics, Bioinformatics and Epidemiology. This report was given during the Finance and Administration Committee meeting.

Recommendation of Committee: That the report be received as information.

### Item 32. Other Business.

Ms. Susan Barnhart presented changes to the MUSC Board of Trustees Bylaws for review and approval.

Recommendation of Committee: That the changes be approved as presented.

Respectfully submitted,

Celeste Jordan

STATE OF SOUTH CAROLINA	)	THE MEDICAL UNIVERSITY OF SOUTH
	)	CAROLINA - THE MEDICAL UNIVERSITY
COUNTY OF CHARLESTON	)	HOSPITAL AUTHORITY – THE MEDICAL
	)	UNIVERSITY OF SOUTH CAROLINA
		FOUNDATION

#### **AGREEMENT**

This Agreement entered into this \_\_\_\_ day of \_\_\_\_\_\_\_, 2008 by and among the Medical University of South Carolina, an educational institution and an agency of the State of South Carolina, hereinafter referred to as the "University", the Medical University Hospital Authority, an agency of the State of South Carolina, hereinafter referred to as the "Authority", and the Medical University of South Carolina Foundation, a private, nonprofit corporation, hereinafter referred to as the "Foundation";

#### WITNESSETH:

WHEREAS, the University, the Authority and the Foundation wish to reduce to writing their long-standing and mutually beneficial relationship and understanding; and

WHEREAS, the University and the Authority seek to maximize their responsibility to raise private funds; and

WHEREAS, the Foundation receives and manages private funds for the exclusive benefit and support of the University and the Authority; and

WHEREAS, in order to further its objectives for the benefit of the University and the Authority, the Foundation desires access to support personnel, office equipment certain administrative and support services from the University and the Authority; and

WHEREAS, the University and the Authority desire to furnish the Foundation said support personnel, office equipment and certain administrative and support services in accordance with the terms and conditions as set forth herein;

**NOW, THEREFORE**, in consideration of the relationship established between the parties and in consideration of the mutual covenants contained herein, the parties agree as follows:

#### 1. Laws Applicable

This Agreement is made and entered into in the County of Charleston, State of South Carolina, and is governed and construed in accordance with the laws of the State of South Carolina.

#### 2. Term

This Agreement is for a term commencing on July 1, 2008, and ending on June 30, 2009, and may be renewed for the subsequent fiscal year beginning on July 1, 2009, and ending on June 30, 2010, unless otherwise amended or cancelled as herein outlined.

#### 3. Duties of the University and the Authority

The University and the Authority agree to and shall:

3.1 Provide support personnel to assist the Chief Executive Officer of the Foundation to carry out the normal and regular administrative functions and operations of the Foundation's business, the cost of which shall be reimbursed as described in Section 5.5 of this Agreement. It is understood and agreed that said personnel will include, but not be limited to: clerical, accounting and reasonable administrative support, and the level of staffing and compensation of such personnel will be recommended jointly by the Vice President for Finance and Administration of the University, the Vice President for Finance and Administration of the Authority and the Chief Executive Officer of the Foundation and shall be submitted to the University President, the University Board of Trustees, the Authority Chief Executive Officer and the Authority Board of Trustees for prior approvals. Such personnel will retain their status as employees of the University or the Authority and will be governed by applicable University or Authority, as applicable, rules, regulations, policies and procedures, but will report to and be evaluated by the Chief Executive Officer of the Foundation.

- 3.2 Provide the Foundation access to office equipment and program services on an as needed basis, the cost of which shall be reimbursed as described in Section 5.5 of this Agreement.
- 3.3 Furnish to the Foundation telephone and computer line access and similar services required for use in normal Foundation business, the cost of which shall be reimbursed as described in Section 5.5 of this Agreement.
- 3.4 Provide the Foundation with normal custodial, security and grounds maintenance services, the cost of which shall be reimbursed as described in Section 5.5 of this Agreement.
- 3.5 Provide the Foundation with access, at the rates in effect for all University or Authority units, to printing, mail and other services provided by the University or the Authority and to day-to-day maintenance and technical support of the Foundation's offices and equipment located at 18 Bee Street, Charleston, South Carolina. These expenses and costs to be paid by the Foundation upon receipt of invoices from the University or the Authority, as applicable.

#### 4. Duties of the Foundation

The Foundation agrees to and shall:

- 4.1 Provide to or for the use of the University or University affiliated individuals and programs, the sole benefit of all gifts and gift income received by the Foundation for the benefit of the University.
- 4.2 Provide to or for the use of the Authority or Authority affiliated individuals and programs, the sole benefit of all gifts and gift income received by the Foundation for the benefit of the Authority.
- 4.2 Carry on independent activities and programs which support or benefit the University and the Authority.

4.3 Provide a portion of the annual budget for the University's and the Authority's Central Development Office in an amount to be determined by the Board of Directors of the Medical University of South Carolina Foundation.

#### 5. Agreement of Both Parties

The University, the Authority and the Foundation mutually agree as follows:

- 5.1 The Foundation shall continue to publish an annual report which shall account for the major activities of the Foundation and for the receipts and disbursements thereof.
- 5.2 The Foundation will provide to the University, upon request of the President of the University or the Board of Trustees of the University, or to the Authority, upon request of the Chief Executive Officer of the Authority or the Board of Trustees of the Authority, all such names of donors, prospective donors and all other related information, provided, however, that such information shall be kept in confidence and not disclosed to others.
- 5.3 All Foundation activities and records shall be subject to confidential inspection and review at any time by the South Carolina State Auditor's Office and the University's or the Authority's Internal Auditor.
- All proposed salary supplements or other salary payments by the Foundation to state employees at the University or the Authority shall be submitted to the University President and the University Board of Trustees, or to the Authority Chief Executive Officer and the Authority Board of Trustees, as appropriate, for prior approvals. Those payments which require reporting to the State Budget and Control Board, shall be reported by the University or the Authority, as appropriate, annually.
- 5.5 Within sixty (60) days after the conclusion of the fiscal year of the University, the Authority and the Foundation, the parties shall review the financial records of the Foundation and shall make an equitable, written accounting of the state property, personnel or resources used

  May, 2008

directly by the Foundation. The Foundation shall pay to the University or the Authority, as appropriate, the cost of such state resources upon receipt of such written accounting.

- 5.6 At all times, the President of the University shall be an ex-officio, non-voting member of the Foundation Board of Directors, and three (3) members of the University Board of Trustees, or other persons appointed by the University Board of Trustees (with the aggregate total of Trustee/appointee membership not to exceed three(3)), shall be members of the Foundation Board of Directors with full voting powers.
- 5.7 The Foundation's Board of Directors shall prepare an annual operating budget based on projected expenses and revenues from unrestricted funds and shall share this budget with the University's Board of Trustees and the Authority's Board of Trustees. (Unrestricted funds are funds which do not carry a donor designated restriction.)

#### 6. Tax Exempt Status

The Foundation shall maintain and observe all state and federal requirements of an Internal Revenue Code Section 501(c)(3) tax exempt non-profit organization.

#### 7. Notices

Any-notices or demands shall be given to the University in care of University Legal Counsel, 26 Bee Street, MSC 204, Charleston, South Carolina 29425-2040, to the Authority in care of Authority Legal Counsel, MSC 332, Charleston, South Carolina 29425-3320 and to the Foundation in care of the Foundation's Chief Executive Officer, 18 Bee Street, MSC 450, Charleston, South Carolina 29425-4500.

#### 8. Renewal

The University, the Authority and the Foundation may renew this Agreement in subsequent fiscal years. Notice or intent to decline renewal or extension of this Agreement and its contents

shall be given either by the Foundation, the University or the Authority at least sixty (60) days prior to June 30th of the close of the year in which the Agreement is in effect.

#### 9. Modifications

The University, the Authority and the Foundation agree to full and complete performance of the covenants herein and that this Agreement constitutes the sole, full, and complete Agreement by and between the parties; and no amendments, changes, additions, deletions, or modifications to or of this Agreement shall be valid unless reduced to writing, signed by the parties and attached hereto.

#### 10. Cancellation

Any party shall have the right at any time during this Agreement to cancel this Agreement with respect to its rights and obligations contained herein upon giving the other parties not less than sixty (60) days prior written notice of such cancellation. If such notice be given, this Agreement shall expire and terminate with respect to such party at the expiration of such period of sixty (60) days as fully and completely as if such date were the date herein specified for the expiration of the term of this Agreement.

#### 11. Entire Agreement

The foregoing is a complete written Agreement by and among the University, the Authority and the Foundation. There are no other agreements expressed or implied by or between the parties hereto.

**IN WITNESS WHEREOF**, the parties hereto have this day and year as above stated executed this Agreement.

WITNESSES:	THE MEDICAL UNIVERSITY OF SOUTH CAROLINA
	BY:RAYMOND S. GREENBERG, M.D., Ph.D. PRESIDENT
	THE MEDICAL UNIVERSITY HOSPITAL AUTHORITY
	BY: W. STUART SMITH ITS: EXECUTIVE DIRECTOR
	THE MEDICAL UNIVERSITY OF SOUTH CAROLINA FOUNDATION
	BY: THOMAS P. ANDERSON CHIEF EXECUTIVE OFFICER AND SECRETARY

## South Carolina Commission on Higher Education

## Proposal for a New Program

Submitted By

MEDICAL UNIVERSITY OF SOUTH CAROLINA College of Nursing

## Doctor of Nursing Practice Degree Program

Post-Baccalaureate Specializations:

Nurse Administrator

Nurse Educator

Adult Nurse Practitioner

Family Nurse Practitioner

Pediatric Nurse Practitioner

Post-Master's Option for Certified Advanced Practice Nurses

Raymond S. Greenberg, MD, PhD President, Medical University of South Carolina

#### Program contact:

Gail S. Stuart, PhD, RN, FAAN
Dean and Professor
Medical University of South Carolina
College of Nursing
99 Jonathan Lucas Street, MSC 160
Charleston, SC 29425-1600
843-792-3941
stuartg@musc.edu

## NEW PROGRAM PROPOSAL Doctor of Nursing Practice Degree Program

#### I. Classification

Program title: Doctor of Nursing Practice Degree Program

Specializations: Adult Nurse Practitioner Nurse Administrator

Family Nurse Practitioner Nurse Educator

Pediatric Nurse Practitioner Post-master's Option

Academic unit: College of Nursing, Medical University of South Carolina

Designation, type, level: DNP, Doctor of Nursing Practice, doctoral level

Proposed implementation: Fall 2009

CIP codes: 51.1605, 51.1608, 51.1699

Identification: New program

Site: Charleston, SC

Scholarship awards: Palmetto Fellows: No LIFE: No Delivery mode: Off-site via online educational methods

## II. Justification for Proposed Program

#### A. PURPOSES AND OBJECTIVES

The proposed Doctor of Nursing Practice Program at the Medical University of South Carolina (MUSC) College of Nursing is a practice-focused doctoral program in nursing that will award the Master of Science in Nursing degree and the terminal degree of Doctor of Nursing Practice (DNP). Graduates will be employed in primary care settings, hospitals, public health agencies, and schools of nursing. The purpose of the program is to prepare graduates who will practice nursing at the highest level. Upon completion of the DNP program, graduates will:

- 1. Demonstrate expertise in advanced nursing practice roles based on mastery of a specialized area of knowledge derived from a strong scientific foundation,
- 2. Use clinical scholarship and analytical methods to improve quality and safety in health care systems through organizational leadership, systems thinking, and practice management acumen,
- 3. Implement continuous quality improvement in patient care and provide leadership in practice and administrative decision-making through use of information systems and technology resources,
- 4. Foster interprofessional collaboration in the improvement of population health outcomes, and
- 5. Influence health care policy that determines the financing, regulation, access, and delivery of care.

## B. NEED FOR THE DNP PROGRAM IN SOUTH CAROLINA

## 1. Demand and Anticipated Employment Opportunities for Doctorally Prepared Advanced Practice Nurses and Faculty

Development of the DNP Program at the MUSC College of Nursing is a proactive response to the changing clinical environment and the context surrounding nursing education. By producing an increased number of *doctorally* prepared advanced practice nurses and nurse faculty, the DNP Program will lessen the magnitude of demand for highly skilled nurses in acute care hospitals, primary care settings in medically underserved areas such as rural South Carolina, and nursing academic programs.

This degree program will address critical aspects of health care including the rising incidence (94,000 per year) of patient deaths in hospitals (IOM, 2000), the disparities in health outcomes in South Carolina, and those aspects of health professional education identified by the Institute of Medicine as: delivering patient-centered care, working as part of interdisciplinary teams, practicing evidence-based medicine, focusing on quality improvement and using information technology (IOM, 2003).

The aging population not only increases the demand for care, but also decreases the supply of the predominantly female nursing profession. In the coming decade, the number of working age women will remain constant, while those over age 65 years will double. According to the U.S. General Accounting Office (2001), the mean age of registered nurses is 45 years, while the mean age of nurse educators is 52 years. The report predicted that 75% of current nursing faculty would retire before 2020.

In South Carolina, the proportion of nurses over 54 years has increased from 11% in 1991 to 17% in 2001 (South Carolina Office of Research & Statistics [SCORS], n.d.). The supply of nurses in South Carolina is expected to increase by 11% in the 20-year period between 2000 and 2020. But during that same period, the demand may increase by as much as 48%. In 2020 it is expected that the supply of nurses in South Carolina will meet 76% of the demand—a shortage of 8,200 registered nurses across the state (Bureau of Health Professions, 2004). In addition, with less than 1% of nurses in South Carolina holding a doctoral degree (SCORS, n.d.), it can be concluded that employment opportunities for doctorally prepared advanced practice nurses and faculty will be abundant in the foreseeable future.

In order to further assess anticipated need and demand, we conducted a mail survey of the heads of medical facilities and nursing programs in South Carolina in October 2007. Of the 43 respondents, half (58%) were chief nursing officers of medical facilities and one third (30%) were directors of nursing programs. Results indicated a positive attitude toward DNP preparation. At least half of respondents:

Rated the following characteristics as "most valuable" when hiring an advanced practice nurse with a DNP degree:

Advanced clinical nursing skills

Ability to translate research to practice for quality improvement, performance improvement, or evidence-based practice projects; and use statistical analyses to interpret data Advanced organizational leadership skills

Knowledge of program design, implementation ability and evaluation skills Teaching and curriculum development skills

Reported that the following DNP student capstone projects would be useful and available in their organization:

Quality or performance improvement project Evidence Based Practice implementation project Teaching-learning modules of study

Would support employees pursuing a DNP degree by providing:

Tuition reimbursement or education loan remission Preferential scheduling

#### 2. Anticipated Student Demand

An online survey regarding interest in DNP education was conducted from October to December 2007 on the College of Nursing Web site. Of the 308 respondents, 56% were interested in obtaining a DNP. Over half of respondents (54%) indicated that they would like to enter a DNP program within the next 2 years. More respondents preferred part-time study (44%) than full-time study (20%). Interest was highest for nurse practitioner specializations (58%), followed by education (22%), and leadership/management (12%). The large majority of respondents (79%) lived in South Carolina.

## 3. Increased Credentialing Requirements for Advanced Practice Nurses

Most importantly, professional credentialing standards for nursing and other health-related professions are changing to meet the demands of the current practice environment and the expectations of the public for the highest quality care, which includes increased patient safety. The delivery of care has increased in complexity over the past 15 years due to burgeoning growth in scientific knowledge, technological advances, increased demographic diversity, and the rise in the prevalence of chronic diseases and the incidence of emergent and re-emergent infectious diseases.

The American Association of Colleges of Nursing ([AACN] 2004) endorsed the DNP as the appropriate credential for all advanced practice nurses. After intensive study of the health care system and the findings and recommendations of national bodies, such as the Institute of Medicine (2000; 2001; 2003), AACN concluded that specialty nursing practice at the master's level must transition to the doctoral level by 2015 to adequately prepare advanced practice nurses. According to the AACN Position Statement on the Practice Doctorate in Nursing, "Nurses prepared at the doctoral level with a blend of clinical, organizational, economic and leadership skills are most likely to be able to critique nursing and other clinical scientific findings and design programs of care delivery that are locally acceptable, economically feasible, and which significantly impact health care outcomes" (p. 3). Thus programs that prepare nurse practitioners and other advanced practice nurses, should move to doctoral education within the next 7 years to maintain accreditation and ethical standing within the profession (AACN, 2006a). The DNP degree also has been supported by the major advanced practice nursing specialty organizations and the National Academy of Science. As of January 2007, there were 67 nursing schools across the country accepting students into DNP programs and more than 140 nursing schools starting a DNP program.

In the immediate future, master's-prepared nurse practitioners will continue to be recognized. They will be grandfathered into their positions and scope of practice, just as certificate-prepared nurse practitioners were in past years (Stanley, 2006, p. 211). However, the MUSC College of Nursing, as the only nursing program in the state that is part of an academic health sciences center, would be remiss if it did not provide its graduates with educational opportunities for evidence-based practice, translation of research to improve practice, and leadership in influencing health policy through a DNP degree program.

In the near future all nursing faculty in university settings will need a doctoral degree. A recent draft position paper by AACN (2007, p. 1) stated, "Faculty with primary responsibility for teaching didactic courses in baccalaureate, master's, and doctoral programs will have doctoral preparation that contributes to their productivity as a teacher, scholar, and clinician." If this position is adopted by AACN, it is likely to be an accreditation standard for the Commission on Collegiate Nursing Education (CCNE), an autonomous accrediting agency that accredits 520 schools of nursing in the United States. Currently five schools in South Carolina are accredited by CCNE and will be affected by the guideline when implemented. They are the University of South Carolina-Columbia, University of South Carolina-Upstate, Clemson University, South Carolina State University, and the Medical University of South Carolina. Graduates from these programs account for 70% of all BSN graduates in South Carolina. USC Beaufort is also applying for CCNE accreditation.

## C. CENTRALITY OF THE PROGRAM TO THE MISSION OF THE INSTITUTION

MUSC is a public institution of higher learning, the purpose of which is to preserve and optimize human life in South Carolina and beyond. The University provides an environment for learning and discovery through education of health care professionals and biomedical scientists, research in the health sciences, and provision of comprehensive health care. It is the only academic health sciences center in the state and is engaged in cutting-edge research and clinical practice.

The College of Nursing supports the mission of MUSC through its commitment to provide evidence-based nursing education; develop, test, and disseminate nursing knowledge; demonstrate excellence in nursing practice, share expertise and leadership through service to professional organizations and communities, and promote interprofessional teamwork in collaborative education, practice, and research settings in an environment that is accountable, respectful, adaptive, and innovative. As an integral part of the states only academic health sciences center, our vision is to educate nurses in a dynamic clinical and interprofessional environment to change lives, and to provide proactive leadership in the improvement of health outcomes, reduction of health disparities, and advancement of the nursing profession. Thus the DNP program is seen as central to our mission.

## D. RELATIONSHIP OF PROPOSED PROGRAM TO EXISTING PROGRAMS AT THE MEDICAL UNIVERSITY OF SOUTH CAROLINA

Implementation of the DNP Degree Program will be commensurate with practice doctorates offered by the College of Dentistry (DDS), College of Health Professions (DHA, DPT), College of Medicine (MD), and College of Pharmacy (PharmD). The DNP degree will be distinct from the PhD in Nursing offered through the College of Graduate Studies (Table 1).

Table 1. Characteristics of the DNP and PhD in Nursing Programs

Characteristic	DNP Degree Program	PhD in Nursing Program
Objectives	The practice of clinical nursing at the highest level	The conduct of research for the advancement of nursing science
Curricular emphasis	Analytical methods for evidence-based practice, organizational and systems leadership and management, and the translation of research to improve practice	Theoretical, methodological, and analytic approaches to discovery, testing, application and dissemination of new knowledge
Program outcome	Nurse practitioner, nurse administrator, clinical nurse educator in practice or professional education settings; eligibility for national certification exam	Nurse scientist in an academic or research-intensive settings
Final scholarly product	Evidence-based, population-level practice, health, or policy improvement project	Original research project

## E. SIMILARITIES AND DIFFERENCES WITH EXISTING PROGRAMS

In state, only the University of South Carolina (2005) offers a Doctor of Nursing Practice (DNP) degree. All 16 areas of specialization require 83 semester hours of coursework. The program combines interactive television/videocassette course delivery with on-campus delivery of courses. A 3-semester-hour leadership residency is required at the end of the program. In contrast, MUSC will offer five specializations that require from 61 to 82 semester hours depending on the specialization. Courses will be provided entirely online. Performance-based assessments of student clinical competencies will be conducted in our simulation laboratory or one located near the student's residence. Depending on specialization, the end-of-program advanced practice residency will vary from 9 to 12 semester hours--405 to 540 clock hours over a period of 1 year. The residency will include implementation of a scholarly capstone project that addresses identified needs related to population health, models of care, health policy, leadership, informatics, education, integration of technology into care, and the like.

In neighboring states, the Medical College of Georgia offers a post-master's DNP degree with no specific areas of specialization. A search of the Academic Common Market identified only one online DNP program at the University of Tennessee, Health Science Center, at Memphis. This post-master's program offers eight specializations. One specialization, family nurse practitioner, is offered in common by MUSC and the University of Tennessee. However, there is no duplication. MUSC offers a post-baccalaureate curriculum while the University of Tennessee offers a post-master's curriculum.

AACN documented that the number of active DNP programs in the nation increased from 8 in 2005 to 67 in 2008. As of this year, 140 additional institutions are in the process of DNP program development (as cited in National Association of Neonatal Nurses, p. 4).

Our examination of post-baccalaureate DNP program descriptions published online revealed that required coursework to earn a DNP degree ranged from 71 semester hours (sh) at Catholic University of America (2007, ¶3) to 97 sh at University of Southern Maine (n.d., p. 8). The required coursework for the DNP degree at MUSC will vary by specialty:

Adult nurse practitioner	69 sh	Nurse administrator	62 sh	
Family nurse practitioner	82 sh	Nurse educator	76 sh	
Pediatric nurse practitioner	72 sh	Post-master's option*	42 sh	
		*Available to certified advanced	practice nurses only.	

We found that most DNP programs in the nation are post-master's programs. In contrast, we will offer a DNP with two entry points: post-BSN and post-MSN. Following implementation of the DNP degree as the appropriate credential for all advanced practice nurses in 2015, demand for the MSN degree is anticipated to decline. Implementation of the DNP Degree Program will occur by

consolidating existing resources, including faculty, staff and technology support. Core knowledge and competencies for specialized practice will be achieved in the first 2 years of a full-time plan of study. Additional competencies for knowledge dissemination and translation, organizational and systems leadership, use of information systems and technology resources, and implementation of evidence-based, population level practice, health, and policy improvements will be achieved in the third year of study.

#### III. Enrollment

#### A. ADMISSIONS CRITERIA

## 1. Post-Baccalaureate Entry

Bachelor of Science in Nursing degree from a nationally accredited program Cumulative grade point average (GPA) of 3.0 on a 4.0 scale for undergraduate coursework (official transcripts for all post-secondary school coursework are required)

Acceptable Graduate Record Examination (GRE) scores for verbal, quantitative, and analytical writing parts of the General Test

Undergraduate statistics course within the past 5 years

Unencumbered, active registered nurse (RN) license in state where practicums will conducted Three references from professionals knowledgeable about the applicant's academic and nursing leadership potential

Résumé

Statement of professional goals, including an indication of scholarly project to be undertaken in a 1-year residency at the end of the program of study (500 to 600 words typed on one page) Interview, if requested by the Admissions, Progression, and Graduation Committee

### 2. Post-Master's Entry

Master of Science in Nursing (MSN) degree from a nationally accredited program Cumulative grade point average (GPA) of 3.0 on a 4.0 scale for undergraduate and graduate coursework (official transcripts for all post-secondary school coursework are required) Unencumbered, active registered nurse (RN) license in state where practicums will be conducted Current certification as an advanced practice nurse

Three references from professionals knowledgeable about the applicant's academic and nursing leadership potential

Statement of professional goals, including an indication of scholarly project to be undertaken in a 1-year residency at the end of the program of study (500 to 600 words typed on one page) Résumé

Interview, if requested by the Admissions, Progression, and Graduation Committee

#### **B. PROJECTED ENROLLMENT**

Implementation of the DNP Degree Program is designed to maintain enrollment in College of Nursing graduate programs at the current level (140 students [75 FTE]), anticipating that 55 new students will be admitted annually to the DNP Degree Program.

Fall Semester		Spring Semester		Summer			
Year	Headcount	Semester Hours	Headcount	Semester Hours	Headcount	Semester Hours	Numbe Gradua per Ye
2009-2010	*140	1035	138	1016	100	585	50
2010-2011	**138	940	108	793	108	736	***45
2011-2012	152	1062	152	1048	152		<del> </del>
2012-2013	176	1205	176			902	25
2012 2211		1203	1/6	1191	174	966	30
2013-2014	195	1272	195	1251	183	993	49

Table 2. Projected Total Number of Graduate Students, College of Nursing, by Year, 2009-2014

## C. RATIONALE FOR PROJECTED TOTAL ENROLLMENT

<sup>\*</sup>Includes 55 newly admitted DNP students. \*\*Includes 55 newly admitted and 53 returning DNP students, all enrolled in the DNP Program (expected attrition rate is 10% per cohort or 2 students per year per cohort). \*\*\*Includes 7 graduates from the DNP Degree Program.

To project total enrollment figures for Table 1, the following assumptions were made:

- 1. Implementation of the DNP Degree Program is designed to maintain graduate program enrollment at the current level (140 [75 FTE]). Enrollment of 55 newly admitted students once per year to the DNP Degree Program will maintain current enrollment.
- 2. A graduation rate of 90% per cohort is expected (maximum loss of 6 students per cohort of 55 students). The current graduation rate for the MUSC College of Nursing is 95%.
- 3. It is projected that 60% of students will elect part-time enrollment each semester (less than 9 semester hours).

## D. NEW STUDENT ENROLLMENT

Table 3. Estimated Number of New Students, by Year, DNP Degree Program, 2009-2014

	Fall Semester		Spring Semester		Summer Semester		Number	
Year	Headcount	Semester Hours	Headcount	Semester Hours	Headcount	Semester Hours	Graduates per Year	
2009-2010	55	393	55	393	55	365	0	
2010-2011	*108	792	108	793	108	736	7	
2011-2012	152	1062	152	1048	152	902	25	
2012-2013	176	1205	176	1191	174	966	30	
2013-2014	195	1272	195	1251	183	993	49	

<sup>\*</sup>Includes 55 newly admitted and 53 returning DNP students (expected attrition rate is 10% per cohort or 2 students per year per cohort).

#### **IV. Curriculum**

The DNP Degree Program comprises a post-master's option for certified advanced practice nurses and five specializations: Nurse administrator, nurse educator, adult nurse practitioner, family nurse practitioner, and pediatric nurse practitioner. Full-time or part-time plans of study are available for post-baccalaureate students. The post-master's option is a part-time plan of study. All specializations share a required core of courses in scientific foundations for evidence based practice (12 sh) and organizational and systems leadership (18 sh). Coursework in scientific foundations for independent practice and specialty-focused competencies vary by specialization (Table 4).

**Table 4. Doctor of Nursing Practice Curriculum** 

Table 4: Doctor or Nurs	ing Frac	.cice curr	icuium			
	NA	NE	ANP	FNP	PNP	P-MSN
Course Title	SEMESTER HOURS					
Scientific Foundations fo	r Evidence	-Based Prac	ctice			
Biostatistics: Clinical Applications	3	3	3	3	3	3
Introduction to Social & Applied Epidemiology	3	3	3	3	3	3
Knowledge Dissemination and Translation*	3	3	3	3	3	3
Research Use & Evidence-Based Practice	3	3	3	3	3	3
Organizational & S	ystems Le	adership	I			1 3
Advanced Health Policy & Advocacy	3	3	3	3	3	3
Applied Health Care Economics & Finance	3	3	3	3	3	3
Frameworks for Leadership & Interprofessional Collaboration	3	3	3	3	3	3
Health Program Planning*	3	3	3	3	3	3
Informatics in Health Care Delivery*	3	3	3	3	3	3
Organizational Theory & Health Care Management*	3	3	3	3	3	3
Scientific Foundations for	or Indepen	dent Practi	ce		<u> </u>	
Advanced Clinical Assessment & Reasoning: Adult	,	3	3	3	3	
Advanced Clinical Assessment & Reasoning: Child		3		3	3	
Advanced Pathophysiology		3	3	3	3	
Advanced Pharmacotherapeutics	·····	3	3	3	3	
Behavioral Health Therapeutics	3	3	3	3	3	
Specialty-Focuse	d Compete	encies			<u> </u>	L
Primary Care Management A (Seminar & Practicum): Adult			4	4		
Primary Care Management B (Seminar & Practicum): Adult			4	4		
Primary Care Management C (Seminar & Practicum): Adult			4	4		
Primary Care Management A (Seminar & Practicum): Child			7	4		
Primary Care Management B (Seminar & Practicum): Child				4	4	
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Table 4. Doctor of Nursing Practice Curriculum

			· Cuiuiii			
	NA	NE	ANP	FNP	PNP	P-MSN
Course Title			SEMESTE	R Hours		
Primary Care Management C (Seminar & Practicum): Child				4	4	
Internship	4	4	4	4	4	
Advanced Specialty Practicums	4	6			7	
Cognates (administration or education)	9	9				
Synthesis &	Scholarsh	ip	1			L
Residency (includes implementation of capstone project)	12	12	11	9	11	12
Minimum coursework for DNP degree	62	76	69	82	72	42

<sup>\*</sup>Omitted from plans of study for students that exit with only an MSN degree.

#### A. SAMPLE PLAN OF STUDY

FAMILY NU	JRSE PRACTITIONER		
Post-BSN	Full-Time Plan of Study for the DNP Degree		
Year 1, Fall S			
NRDNP	Applied Health Care Economics and Finance	3 sh	(3,0,0)*
NRDNP	Advanced Pathophysiology	3 sh	(3,0,0)
NRDNP	Biostatistics: Clinical Applications	3 sh	(3,0,0)
Year 1, Sprin	Harris and the second s		
NRDNP	Introduction to Social and Applied Epidemiology	3 sh	(3,0,0)
NRDNP	Behavioral Health Therapeutics	3 sh	(3,0,0)
NRDNP	Advanced Clinical Assessment and Reasoning: Adult	3 sh	(2,0,1)
	ner Semester		
NRDNP	Research Use and Evidence-Based Practice	3 sh	(3,0,0)
NRDNP	Advanced Pharmacotherapeutics	3 sh	(3,0,0)
NRDNP	Advanced Clinical Assessment and Reasoning: Child	3 sh	(2,0,1)
Year 2, Fall S			
NRDNP	Advanced Care Management 1 Seminar: Adult	1 sh	(0,1,0)
NRDNP	Advanced Care Management 1 Practicum: Adult	3 sh	(0,0,3)
NRDNP	Advanced Care Management 1 Seminar: Child	1 sh	(0,1,0)
NRDNP	Advanced Care Management 1 Practicum: Child	3 sh	(0,0,3)
NRDNP	Frameworks for Leadership & Interprofessional Collaboration	3 sh	(3,0,0)
Year 2, Spring	) Semester		( , , - , - ,
NRDNP	Advanced Care Management 2 Seminar: Adult	1 sh	(0,1,0)
NRDNP	Advanced Care Management 2 Practicum: Adult	3 sh	(0,0,3)
NRDNP	Advanced Care Management 2 Seminar: Child	1 sh	(0,1,0)
NRDNP	Advanced Care Management 2 Practicum: Child	3 sh	(0,0,3)
NRDNP	Health Program Planning**	3 sh	(3,0,0)
rear 2, Summ	er Semester		
NRDNP	Advanced Care Management 3 Seminar: Adult	1 sh	(0,1,0)
NRDNP	Advanced Care Management 3 Practicum: Adult	3 sh	(0,0,3)
NRDNP	Advanced Care Management 3 Seminar: Child	1 sh	(0,1,0)
NRDNP	Advanced Care Management 3 Practicum: Child	3 sh	(0,0,3)
NRDNP	Internship	4 sh	(0,1,3)
ear 3, Fall Se	mester		
NRDNP	Residency	3 sh	(0,0,3)
NRDNP	Knowledge Dissemination and Translation	3 sh	(3,0,0)
NRDNP	Organizational Theory and Health Care Management	3 sh	(3,0,0)
ear 3, Spring			(0,0,0)
NRDNP	Residency	3 sh	(0,0,3)
NRDNP	Advanced Health Policy and Advocacy	3 sh	(3,0,0)
NRDNP	Informatics in Health Care Delivery	3 sh	(3,0,0)

#### **FAMILY NURSE PRACTITIONER** Post-BSN Full-Time Plan of Study for the DNP Degree Year 3, Summer Semester NRDNP Residency 3 sh (0,0,3)Minimum DNP coursework 82 sh (43,7,32)

Sh = semester hour. Semester hour to clock hour ratio: Didactic, 1:1; seminar, 1:2; practicum, 1:3.

\*3(3,0,0) = (3 sh didactic, 0 sh seminar, 0 sh practicum) = 3 sh total.

\*\*If student elects to exit with a Master of Science in Nursing Degree following completion of 2 years of full-time study, the Advanced Health Policy and Advocacy course will be taken instead of the Health Program Planning course to full-fill requirements for the Master of Science in Nursing degree.

## **B. ASSESSMENTS OF STUDENT LEARNING OUTCOMES**

Measures of student learning outcomes include:

Cumulative GPA of 3.0 required to progress from one full-time semester (9 sh) to the next semester

Satisfactory completion of Performance-Based Assessment at end of each clinical course to progress to the next clinical course

90% graduation rate per cohort

90% advanced practice certification rate for graduates taking the examination for the first time

#### C. COURSE DESCRIPTIONS

#### Table 5. Course Descriptions

Table 5. Cou	rise Descriptions
Course Title/Description	Semester Hours (Clock Hours)*
Scientific Foundations	for Evidence-Based Practice
BIOSTATISTICS: CLINICAL APPLICATIONS	3(45:0:0)
An overview of frequently used descriptive and inferential st of measurement and statistical inference to further impleme quality of care. The focus is on comprehension, critical appri computational skills. Prerequisite: Graduate standing. Fall.	ratistical methods in the biologic sciences. Application of theories

INTRODUCTION TO SOCIAL & APPLIED EPIDEMIOLOGY

3(45:0:0)

Study of concepts, principles, and methods in applied and social epidemiology. Application in public health surveillance, outbreak investigation, health planning, and research. Critical analysis of epidemiologic studies with regard to implications for practice and research, with a focus on the social and economic determinants of chronic and infectious diseases and other health-related events. Students will use the epidemiologic approach to explore a clinical or research interest in a population. Prerequisite: Biostatistics: Clinical Applications. Spring.

KNOWLEDGE DISSEMINATION & TRANSLATION

3(45:0:0)

Emerging knowledge from health care theory and research is analyzed from the perspective of strategies designed to reduce the burden of illness in society. Issues of research dissemination, innovation adoption, and behavior change are analyzed at the levels of the individual, family, community and health care system. Knowledge translation emanating from diverse disciplinary perspectives will be evaluated based on its impact on improving service delivery, changing patient/provider behavior, enhancing access to appropriate health care, and protecting and motivating treatment for vulnerable populations. Prerequisite: Graduate standing. Fall.

RESEARCH USE & EVIDENCE-BASED PRACTICE

3(45:0:0)

Study of research methods that generate evidence for nursing practice through collection of appropriate, accurate data and the prediction and analysis of outcomes. Focuses on knowledge application skills for translation of research findings in practice, evaluation of current practice, improvement in the reliability of nursing practice and outcomes, and participation in collaborative research. Emphasizes critical appraisal of existing literature and other evidence from a variety of sources and disciplines to determine best practices, solve practice problems, and improve health outcomes through dissemination and integration of new knowledge. Graduates will be prepared to provide leadership for evidence-based practice. Prerequisite: Biostatistics: Clinical Applications. Summer.

#### Organizational & Systems Leadership

ADVANCED HEALTH POLICY & ADVOCACY

3(45:0:0)

Focuses on skills necessary to develop, evaluate, and provide leadership in improving the health of the public through health policy development and education of policy makers regarding nursing and patient outcomes. Includes critical evaluation of current and historic policies, laws, and financial incentives that affect health care delivery and nursing

<sup>\* 3(45:0:0)</sup> indicates 3 semester hours credit, 45 didactic hours, 0 seminar hours, and 0 practicum hours. 1 semester hour of credit = 1 hour didactic per week for 15 weeks (15 hours), 2 hours seminar per week for 15 weeks (30 hours), or 3 hours simulation laboratory or clinical practice per week for 15 weeks (45 hours).

#### Table 5. Course Descriptions

Course Title/Description

Semester Hours (Clock Hours)

practice. Students will participate in a selected health policy-making process. Prerequisite: Graduate standing. Spring.

APPLIED HEALTH CARE ECONOMICS & FINANCE

3(45:0:0)

An introduction to the financial structures that support nursing practice. Focuses on economic principles, financial management methods, and business strategies that form the foundation for balancing productivity with quality of care and designing effective and realistic care delivery systems that optimize performance, minimize costs, and enhance outcomes. Examination of methods to evaluate costs and cost effectiveness of care. Provides graduates with the tools to plan, monitor, and evaluate the acquisition, use, and outcomes of fiscal resources for practice and program initiatives. Prerequisite: Graduate standing. Fall.

FRAMEWORKS FOR LEADERSHIP & INTERPROFESSIONAL COLLABORATION

3(45:0:0)

Study of knowledge and principles of organizational leadership and advanced communication skills that improve quality of care delivery, health outcomes, and safety of patient populations. Examination of consultative and leadership strategies that facilitate interprofessional collaboration toward common goals and outcomes. Analysis of effective strategies for the resolution of ethical and legal issues in the delivery of care. Knowledge from ethics and organizational, leadership, and communication theories will be integrated with nursing science as a framework for organizational assessment, diagnosis of systems issues, and facilitation of system-wide practice initiatives. Graduates will be prepared to assume leadership in addressing complex practice and organizational issues. Prerequisite: Graduate standing. Fall.

HEALTH PROGRAM PLANNING

3(45:0:0)

Study of the concepts and principles of the health program planning process from an ecological and participatory perspective. Application of a theoretical, evidence-based approach that integrates the health program planning cycle with behavioral and organizational theories, measurement science, and best practices to develop creative, responsive, and accountable interventions. Results in a capstone project proposal in own advanced practice specialization that will be conducted and evaluated in partnership with a selected agency or organization to address identified needs of a panel of patients, target population, or community. Prerequisites: Applied Health Care Economics & Finance, Biostatistics: Clinical Applications, Frameworks for Leadership & Interprofessional Collaboration, Introduction to Social & Applied Epidemiology, and Research Use & Evidence-Based Practice. Spring.

INFORMATICS IN HEALTH CARE DELIVERY

3(45:0:0)

Study of information science concepts, principles, and methods with application in the support, improvement, and evaluation of nursing interventions, outcomes of care, and delivery systems. Focuses on the development of knowledge and technical skills to use data management systems and technological resources for decision-making, implementation of quality improvement initiatives, and evaluation of patient care technologies. Includes use of systems analysis, decision theory, and consideration of ethical, regulatory, and legal issues. Clinical and administrative data sources will be used to evaluate the efficacy of patient care technology appropriate to a particular area of practice. Prerequisites: Biostatistics: Clinical Applications and Research Use & Evidence-Based Practice. Spring.

ORGANIZATIONAL THEORY & HEALTH CARE MANAGEMENT

3(45:0:0)

Study of organizational and management theories and evidence base that guide effective policy development and advanced practice. Emphasis is placed on the study of organization structures and processes in delivery of health care and programs. Major functions of management (planning, organizing, directing and controlling) are examined, including the principles and processes of risk management and continuous quality improvement for measurement and management of patient outcomes. Prerequisite: Graduate standing. Fall.

## Scientific Foundations for Advanced Practice

ADVANCED CLINICAL ASSESSMENT & REASONING: ADULT

3 (30:0:45)

Study of advanced clinical assessment and reasoning skills for adolescents and young, middle-age, and older adults with emphasis on differentiating normal from abnormal findings in the domains of physical and psychosocial assessment. Examination of age-appropriate developmental screening and anticipatory guidance for well child visits and health teaching for common illnesses. Students refine and strengthen increasingly complex skills in listening, history taking, screening, diagnostic testing, documentation, and clinical reasoning. The simulation laboratory will be used to practice and validate skill competencies. Prerequisite: Advanced Pathophysiology. Spring.

ADVANCED CLINICAL ASSESSMENT & REASONING: CHILD

Study of advanced clinical assessment and reasoning skills for the newborn, infant, toddler, preschool, and school-age child with emphasis on differentiating normal from abnormal findings in the domains of physical and psychosocial assessment. Examination of age-appropriate developmental screening and anticipatory guidance for well child visits and health teaching for common illnesses. Students refine and strengthen increasingly complex skills in listening, history taking, screening, diagnostic testing, documentation, and clinical reasoning. The simulation laboratory will be used to practice and validate skill competencies. Prerequisite: Advanced Pathophysiology. Summer.

ADVANCED PATHOPHYSIOLOGY

3(45:0:0)

In-depth study of normal physiologic and pathologic mechanisms of disease across the lifespan with implications for advanced clinical assessment and reasoning in management of common, episodic and chronic conditions. Emphasis on the interpretation of changes in normal function that result in symptoms of disease. Includes analysis of physiologic responses to treatment modalities. Prerequisite: Graduate standing. Fall.

ADVANCED PHARMACOTHERAPEUTICS

3(45:0:0)

Study of basic pharmacologic principles that include response at the cellular level. Includes both pharmocotherapeutics and