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Dr. William D. Sawyer interview (4) conducted on January 11, 1985 about the Boonshoft School of Medicine at Wright State University

William D. Sawyer

James St. Peter

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WRIGHT STATE UNIVERSITY
School of Medicine Oral History Project

Interview date: January 11, 1985

Interviewer: James St. Peter

Interviewee: William D. Sawyer, M.D.
Second Dean, WSU School of Medicine
Interview 4

JSP	<p>My name is James St. Peter and this is the third in a series of interviews [<i>correction: this is the fourth interview</i>] with Dr. William D. Sawyer, Dean of the Wright State University School of Medicine. The date is January 11, 1985. The time is 9:00 AM and the dean and I are in his office in the Medical Sciences Building at Wright State University. Dean Sawyer in our last interview we had gotten up to the point where you first arrived at Wright State as Dean. What was your impression when you first got here, finally on the job as Dean?</p>
WS	<p>I was lost. I'd set out through the tunnel system and I'd have to have a string behind me so I could find my way back. No matter how much you think you know your way around a place from visits, you suddenly have a feeling of I don't know where anything is. The overwhelming impression from moving from an established place you'd been working to a new place is I don't remember everybody's name, I don't know where things are, I don't know the system and the structures, and the informal working system that works in an institution. I think one gets overwhelmed by that feeling of everything is new, and clearly when one comes there's a temptation to say 'We didn't do it this way', wherever you were [in the] past, and that's unavoidable. You can't suppress it completely. But in fact that's not an appropriate way to act, and to work into a place and how to temper, in my case, the Indiana way or the Rockefeller way with the Wright State way, and that mixture is always hard wherever I've gone. So my reaction is the feeling of here I am, I'm supposed to be in charge, but I'm lost.</p>
JSP	<p>When you assume a new position, are there things that you automatically do to kind of orient yourself towards your new location? Things that you automatically fall into the habit of doing just to get started?</p>
WS	<p>I'm sure there are but I don't think I could articulate them as one, two, three, four. Coming here I think I probably would say that I looked for two or three people with whom I felt comfortable with very quickly in the institutional existence at Wright State, and very heavily relied on them for, 'Yes, that's fine but that isn't the way it works here', or 'Maybe we ought to try this' or 'Maybe we ought to try that'.</p>

JSP	In other words, a transition team.
WS	I don't do it formally, but yes. Or a 'kitchen cabinet', if you will, which would probably be my descriptor. And I don't know that those people necessarily remain one's kitchen cabinet for a long time, but I think you need one to work your way through how it's done locally.
JSP	Who were those people?
WS	I would say that I was very fortunate in that Susan Williams who agreed to stay on in the office and she had been working for Dr. Beljan, not as his principle assistant but in his office for a number of years, and she agreed to stay on and became my assistant, and was and is and continues through today and I hope for the rest of my time here, and is just an absolute jewel. She knows where everything I might ever dream of needing is in the files, she had done a lot of the correspondence over the years, she knew who needed to get copies of what, she's very capable, so she was a very major help to me. Bob Jewett, who was then the Senior Associate Dean and sort of did academic affairs, was a second who was a major help. I also found Brian Hutchings, the Dean of Science and Engineering, though not on a day to day operational basis, but in a general university sense was very helpful. Several of the people who had been key in the medical school moved to Health Affairs with John Beljan. For example, Ed Spanier, who had been doing the administration and finance, moved. So we had to recruit someone, Dean Nogle [sp?], as business manager, so it was a lot of sampling and asking and testing. But I think probably Brian Hutchings, Bob Jewett, and Susan were each in a different way that kitchen cabinet. I don't think we met as a formal body, but they were my-
JSP	It seems like there was one person at each different distinct level.
WS	I think that's probably true.
JSP	What were your first priorities when you came here?
WS	I think the first priority was probably to get the lay of the land, so to speak. To really try to find out what was going on, what things were the style of my predecessor, what things were essential ingredients of the operation of the school, both within the institution, within the state, and within the community contexts of this institution. And to find one, two or three things that needed to be done, that could be done fairly quickly and easily, and that would seem to have an important impact. I think I probably told you that's the way I approached a new job about everywhere I'd been and I think I did the same sort of thing here.
JSF	What were those three things?
WS	We looked very hard early on at some aspects of academic standards and of promotion and of process in that whole student progress, evaluation, and

advancement arena. It seemed to me that there was a lot of uncertainty. It was not that the standards were bad, but there was a lack of clarity as to what the standards really were, how they were applied. It was a fuzzy, mushy process. You couldn't go in and say to a student this is the way it is and this is the way it is for everybody, because there was always it seemed to be an exception or where it didn't work that way for Sam or Shirley or what have you. So we spent a lot of time, several of us- Dr. Suriano, and I, people involved in the student promotions process- in talking it out, back and forth, and coming to a sense of let's develop some guidelines, let's begin to apply them in a way that's consistent and that a student may know in advance how it is going to be and let's set those standards, let's try to articulate them. That was a transition. This doesn't imply there weren't standards before, because there were. But it was to codify and organize a whole set of events. How our student promotions committee worked, how even our faculty development committee worked, for promotion and continuance decisions. How our ethical standards committee functioned, how our student affairs office documented counseling or remediation. We ultimately, over the course of a couple of years, changed the grading system of the school. I think there was a series of actions that put some real meaning behind an expectation of integrity. All of which it was timely to do in the development of the school as it moved along over a three or a four year period of getting started. It was then time to re-look at the original ideas, and as we'd gotten bigger, a very personal dealing with- when you only had thirty students you could deal with that in a very personal way. When you've got 400 it begins to be more complicated. So that was one whole enterprise, and it involved nearly the entire fabric of the school. I think the second one was to begin what took much longer than I expected it to. I completely underestimated the time it would take. That was to convert what had been a highly centralized administrative, management, and even operational structure- which was functional, it was working very well, but it was very centralized- into a more decentralized system. We moved from a dean's school to a departmental and a unit school. Now, I won't swear that that progress has been complete. But we have moved much more towards a decentralized model, and I expected that to go much more rapidly than it has, but I think it has gone where I think it is now being recognized and appreciated. So that was the second priority. I was going much faster than I think people understood or were ready to in that transfer towards different levels of management. That is, every decision and every piece of paper doesn't get made in this office, but instead I expect department chairmen to run departments and to be responsible, not only to have the authority to do what they want to do but to be responsible for the consequences of their decisions. So that was an unstated priority, it was high on my list because of my belief in the way schools get to be good and function, and I think I've expressed why I feel that way in our previous discussion. That went very slowly. To my impatience, it went slowly. But the last four years it went very quickly. I don't know.

JSP

Why do you feel it went slowly?

<p>WS</p>	<p>I think that when you have a group of people who've worked two, three, four, five years under a very central system who probably had an element of selection or were told that's the way it works, and most of whom had never had chairmanship experience, probably didn't think of any other way to do it. The difference between turning them loose totally and gradually bringing along, perhaps I'd do it differently again if I set out to do it. And this was complicated very much by the fiscal pressures and some of the things that were going on in the rest of the university and in the state, concurrently. I think if we started with today's fiscal situation in the School of Medicine, to do that same process were we to start again to decentralize, it could be done much more quickly today. You must also remember that as many of these people were new to me, I very was new to them, and who is this fellow coming in here who wanted to do some things differently. Why do we need to do it any differently? Aren't we the greatest as it is? A little bit of what does he mean by that, and if I do what I think he means will I get my head chopped off next week.</p>
<p>JSP</p>	<p>In other words, is there a hesitancy in making decisions on your own when you don't know what's permitted from the dean?</p>
<p>WS</p>	<p>I think my style and John Beljan's are different. I'm not sure we had different objectives and I wouldn't make any suggestion about it, they're different. And when you've been working in one structured environment, the transition to a new one is probably one that you're very cautious about, simply because you're not sure that the signal to go ahead and do what you want really means to go ahead and do what you want, and it doesn't mean 'I'm telling you to go ahead and do what you want, but it damn well better be what I want it to be'. There's a difference there, and that's something, from below looking down is that signal really there, where you think from up looking down you think you've given a very clear signal. I'm not sure it's always perceived from the other direction, and I think that's an understandable thing that will go on over a couple of [<i>brief recording skip</i>] – I would expect it to happen about a third of the time it takes. So that was the second one. A third one was [<i>pauses</i>] really forced upon us, very quickly. I think I formally started the 1st of January of 1981, and dates elude me now, but it was probably the 11th of January or the 10th, the first rollback of funding occurred. I didn't even know what the budget was and how we calculated it and hadn't figured out the state formula yet, and all of a sudden we were hit with a 5% now and- again, there were so many rollbacks and threatened rollbacks during that time, I guess I said I think I made out 13 different budgets during my first 11 months here. I'm not sure that's precise, but that was the concept I had. It seemed like we'd make up a budget and before anyone had gotten around to implement it we had another budget to make out because of another contingency of the state fiscal situation, and that went on for nearly two years. So, almost an overriding priority were the morale issues associated with it, and from time to time, occasional threats that could have dealt with the ability of the school to survive as a useful, functional, quality institution in those early days, purely for fiscal reasons. And inherent with that was something going on at the same time, it</p>

	<p>was something that was probably known to everybody but never really quite accepted, that the school had gone through a very rapid growth phase. When you start from zero and you go to 100 faculty in three years, that's very rapid growth. Everything looks like every month I can hire someone new. Well that had to, as you reach mature size that had to slow down anyway. Well, we were at that point where the growth wasn't quite finished but for some people it was finished, there was already the heady sense of 'I can always have more' was going to come to an end and it was going to slow down, and suddenly it was abruptly turned off. I think that was very difficult for people. So they were confronted with someone new for whom they had no reason to have inherently high confidence that I was going to be a good manager or a bad one. They had hope, but no experience with how I would deal with this. They were confronted with a transition that had to begin anyway, and then they were confronted with having to do all of this in the face of the state's very real fiscal limitations. So that became an important priority. I guess the other one was, that was about the time also that the boom of community enthusiasm was beginning to change from this is this new thing for the community, it's wonderful, to people beginning to say, hey, you know, here we've got this and now the warts and the misshapeness were starting to show up. So a fair man of attention had to be given, on my part I thought, to try to understand some of the community reactions and really to get to know who the players in the community were, etcetera. I suspect, James, those were really my principle things of some initial activities. Two or three of those were chosen, and one was thrust upon us.</p>
JSP	<p>Let's go back to the first one, the academics. When you tightened up the academic requirements or altered the academics requirements to fit the new period the new period that the school was going towards-</p>
WS	<p>Or maybe better define them, in part.</p>
JSP	<p>How did that affect several areas? The first one was, did these changes in the academic stance of the university filter down to the hospitals, and affect the way the hospitals interacted with the school?</p>
WS	<p>No, I don't think so, fundamentally, because that interaction is more of an administrative, organizational interaction rather than is this student performing properly. As long as they aren't messing up the hospital or breaking hospital rules, whether they pass or fail or get an A or a C is not a principal concern at the level of the hospital.</p>
JSP	<p>What about the Department of Post-Graduate Medicine and Continuing Medical Education? Did they have to re-look at the way they were looking at a student, the evaluation process, and continuing education for the faculty?</p>
WS	<p>Again, our dealing at the undergraduate level probably has relatively little direct impact on continuing education, for a period of 10 or 15 years. The pipeline is a</p>

	<p>very long one because it's four years of medical school, it is three to seven years of graduate training, and it's then getting started in practice for two or three years, before the continuing education really begins to be a thing you think about very much. You've been so immersed in it. So if we make a change in the first year, or some other schools do, it's 10, 12, 15 years before that ever really would get to impact on needs for post-graduate or continuing education.</p>
JSP	<p>Did you change the teaching structures and methodology requirements for voluntary clinical faculty? To alter or emphasize other things or some things over others?</p>
WS	<p>That was not an initial goal in terms of the school as an agency or this office as a responsible party. That I think is dealt with at the level of the individual departments and teaching programs. I suspect that there have been changes over four years. I don't think that I am in a position to see directly to know whether this changed or that changed. I do know, for example, in the Department of Medicine, when the time came to recruit a new chairman, bringing in a new chairman has materially changed the approach to teaching, but I think that was the event of the whole nature of the selection process and the person that was picked. The same thing has happened everywhere we brought in a new chairman. That will change things.</p>
JSP	<p>What was the student input on curriculum changes? I know medical schools have a heavy involvement with constantly taking things back and forth between the students for violations.</p>
WS	<p>We haven't done a heck of a lot of curriculum change since I've been here. It wasn't the curriculum that needed changed, it was fine tuning that needed to be done, in my judgement. We are right now engaged in a very thorough review and there is going to be a substantial modification of the first two years. It was my impression when I got here that if anything needed to be done about curriculum it was to stop fiddling with it. The curriculum committee that helped put it together had gotten into such a proactive role in trying to get it in place that it was hard for them to step back and say, 'Hey, let's let this thing run for five years'. It was fiddle, fiddle, fiddle. My feeling was we had to distract- this is going to be terribly candid- I think we had to distract the leaders of the curriculum committee into other things so they had to stop fiddling with the curriculum and let it run for four or five years. Now, this year, the curriculum committee I asked to do a complete review of the first two years and to do several specific things- which we may get to in time as we go on here- and that's being done now. So the first two years is being looked, at all over in toto, this year. But what we tried to do was get them to quit fiddling with it, in honesty. And that was very painful for some of those people. They always wanted to fiddle. Could we move this an hour here, and juggle a week there, and we had to let it go for awhile and see how it went. Well, we've done that and now it's time to look at [it], but it's time to look at it in a totality and not fiddle with little bits and pieces. So we looked more at, I think</p>

	<p>during that initial phase, the overall flow of how students are assessed, what is the appropriate way to assess students, how do we communicate what they are expected to do, and how do we deal with those who fail to achieve those expectations. That process had been very, very loose. Understandably, I think as I've said, because it was a small, very personal thing and we'd gotten beyond that.</p>
JSP	<p>The remedial nature and the way the school's curriculum was initially set up was very distinctive, and a very outstanding feature of the school's nature. Did you alter that?</p>
WS	<p>Very little, actually, in concept. I think we've altered it substantially in execution. Don't let me get away, you asked me the student involvement in this sort of thing and let me come back to that in a moment, but let me stick with the remediation. What was going on at the time I began to look at this was an almost freewheeling. Students believed remediation was their right and they could just remediate until it pleased them, and there was no context or no set of standards as to what remediation really meant. Did you just sort of spend a couple of weeks after the end of the course hanging around the department office and that was remediation? Could you remediate if you hadn't been to class all semester and hadn't passed an exam? That was all very loose. When did you remediate was still very loose. Could you be remediating three courses from the previous quarter while you were trying to take courses in the new quarter? It seemed to be loose. So we took the idea that remediation was a good idea, the notion that it was a good idea, but we asked who is it intended for, what is it intended to accomplish, when should it occur, and how should it be structured or controlled. Well, to give you an example of some of the conclusions. Remediation was never intended when we got into it to replace a course of instruction. It was intended for that student for whatever reason had a specific deficiency. For example, in physiology, a student basically knew physiology but for some reason was messed up on adrenal physiology, the kidney, and therefore, in the judgement of the Department of Physiology involved in teaching that faculty that with a couple of weeks of intensive study of renal physiology, guided study, the student would be upped a snuff in renal physiology, and that coupled with his existing knowledge would enable him to pass physiology. That's an example in where a brief period of focused study would remediate an isolated deficiency. Another example. A student who for whatever reason was just off of a satisfactory performance. Not grossly different, but off just a little. Again, a couple of weeks of focused study would enable him to perform at a satisfactory level. That was the purpose of remediation, so we simply codified that and defined it. We also said it was inconsistent to take a student who was demonstrably having some sort of academic trouble, otherwise they wouldn't be remediating, and allow them to remediate while they were in the next quarter or taking courses. All that would do would be to complicate their academic difficulties in other courses. So we said remediation must, not may, but must occur in our interval between quarters and it must be accomplishable in that two week time, or it won't occur.</p>

JSP	In other words, during the period where a lot of students take their selectives.
WS	<p>There's where remediation will occur. We also said it wasn't the student's right to remediate. The faculty would decide whether remediation was appropriate, or whether repeating the course or a failing grade was appropriate. And at the same time, we did something else. I detest the grade, 'D'. It seems to me if you say 'C' is passing, then anything below a C is not passing, and we collectively worked out the disappearance of 'D'. I think there was a giving in to the Dean, because he's stubborn on that one. I'm not sure. They gave that one to me. So we got rid of 'D'. The school said you must have a C average to graduate, and 'D' wasn't satisfactory but it wasn't failing, and I don't want a doctor who is almost good in cardiology taking care of me if I've got heart disease. I don't want a borderline doctor. So we got rid of 'D' and we said that so 'D' was a grade that had been used when you weren't good enough to pass but you weren't bad enough to fail, and if you want to remediate you can and maybe get a C, but if you don't want to you don't have to, as long as you make an hour of 'B' to match an hour of 'D', and I didn't like that, and I still don't. So I persevered. We got rid of 'D', we went to A, B, C, F with a grade of 'R', and if 'R' means eligible to remediate, that means the faculty thinks that two weeks of work would let you get a C, or if not, you get an F. So if they give you a C, go ahead, and if they give you an F, you can't remediate. They've said your performance was so insufficient that you couldn't possibly make it up in two weeks. They give you an R, you either remediate it over a two week period and get a C, or it becomes an F. So that was another example. The third thing that was going on was the students were at the same time remediating two or three courses. Well, now that struck me as being peculiar as well, and that somewhere in there each course had said he or she could remediate this course, but they didn't know that the second course at the same time had said they could remediate that. So we brought remediation also back under the thorough control of the promotion committee and they've set guidelines that they aren't going to allow a student to remediate two or three courses. If the performance in two or three courses in a quarter is so bad in each of them that they've got three R's, the promotion committee is going to look at that and say, hey, wait a minute. Yes, each one was borderline, but overall that's a totally unsatisfactory performance and that student is going to have to repeat. So that's what I'm talking about that we did. We also got some codification into how we would deal with national board exam results. The promotion committee worked together with the curriculum committee, we referred these things through the student organization. We also have student members on curriculum [and] on student promotions who are full voting members of those committees. Probably, I underestimated the lack of communication among students. Even though they have representatives on these committees, those representatives tend not to communicate necessarily back to the students, and sometimes our students are pretty scattered. One of the early lessons we learned, not over this grading business but in another enterprise, was that because there's student reps on those committees doesn't mean that the students are well informed. So we've tried to involve the students with regularity, although in issues such as grades and</p>

	standards, I firmly believe that is a faculty responsibility and we're charged with it and we've got to exercise it. So we consult with the students, but they aren't going to set the rules for academic standards. That's our responsibility.
JSP	With the changes in the remedial policies, has the number of grade appeals and the grade appeals policy also changed?
WS	We fundamentally don't have a grade appeals policy, because our student promotions committee actively reviews the results in every course at the end of every quarter, and reviews the records of students automatically who get R's, after remediates, or who get F's, or who have accumulated grade average below a C. That's all reviewed with great regularity, and I believe we have to comply with university rules of mechanism the student wishes to appeal a grade in a given course that they can do it. To the best of my knowledge, it hasn't functioned since I've been here. We pretty much believe the departments and the students can work that out. We hope not to quarrel with the department about a course grade, and the student promotion committee in a school as tight, in a professional school as tight as we are really deals with individual students and their total record with great frequency. So I don't think we have that same kind of setting that goes on in the big undergraduate program.
JSP	How does the liaison committee for medical education view two things: the first, the arrival of a new dean, what aspects does it touch upon their review of the school, and how did your academic fine tuning affect the LCME?
WS	Really two ways, and I'm going to speak both as a site visitor, because I do site visits for the LCME, and as I think it's gone on in Dayton. Until our recent site visit, the previous site visit had been after it was announced that John Beljan was going to give up the deanship and there would be a new dean. Obviously that site visit team expressed concern- not dismay, but concern- that there was going to be a transition in the leadership of the school and a reorganization of the overall university administration as it affected the school, and since 20-30% of all medical school deanships in the US turn over every year, this is not an unusual thing for the LCME. I've finished four years, I'm into my fifth and I'm well past the median of medical school deans, I'm in the upper half, so the turnover is big. What they do, simply, is specify that there shall be a written report to the LCME on the selection of a new dean and so forth, and so- I'd have to get the records- I think it was in the fall of my first year, the school had to give a written report to the LCME on progress since the last visit and clearly one of those was who the new dean is and how the new organization of the university is functioning, as well as some specific concerns that we were going to deal with. That report was submitted, they canceled an interim site visit that was scheduled, and they apparently were pleased with the nature of that report. We also have an obligation to the liaison committee that upon any major change of the status of the institution, they must be notified. Regardless of the requirement of an interim report we were expected to tell them when something changes. So we do that with some

	<p>regularity. That means if we have a department chairman resign and he is replaced, we don't have to write a letter, we'll once a year catch them up on anything like that. Again, if we were in a position of having to declare fiscal exigency in the school, they would need to be informed of that. So it's a mixture of scout's honor and knowing the requirements. You know they are going to come to visit, and there's no way to hide in this country what's going on in changes in medical school administration. They look then for the credentials, why a new dean was picked, also there was no great mystery in our circuit as to who people are. You can pick up the phone if you're on the LCME, and call Steve Beering at Indiana and say 'Tell me about this guy Bill Sawyer' or what not. Also there's a relatively select group of people who really get seriously looked at for any dean's job that is open. And probably most people that have become deans have looked at several deanships, so they know. And then they come at look at what you've done on their next visit.</p>
JSJ	<p>How did the academic fine tuning affect the LCME? Were there any specific outcomes-</p>
WS	<p>The specific aspects of the original letter report dealt with specific programs, and they were pretty pleased. As I say, they cancelled an interim visit and actually extended the accreditation functionally for a year beyond what had been originally proposed. And the site visitors this last time and the LCME I think could not have been more flattering about the academic standards, the evaluations, the follow up, they liked a lot of things that were done with the curriculum. There were a couple of curricular arrangements that we were already changing because we didn't like them, and I must confess without hubris or pride that a couple of curricular recommendations that appeared in the LCME site visit report were written by me because we knew that some things needed to be done and they agreed with that assessment so we together put those in. There were no recommendations in this site visit report that I didn't support fully and I suspect had a major part in selecting what they were.</p>
JSJ	<p>How much did your experiences as an LCME site visitor yourself affect the changes that you made? Were you able to bring in-</p>
WS	<p>Okay, I'm going to answer that in two ways. One, I wouldn't change a darn thing that I didn't believe was important to do just for the LCME. I would take the position that I could convey to the site visitors and to the LCME the wisdom of what we were doing, if we were convinced it was the right thing to do, collectively. So, nothing just to please the LCME, okay? However, the great virtue for medical school leaders in making visits is you see how other people do the same things. It's great. It's a learning experience, and you can sort out, 'Hey, that's a good idea, why don't we try that.' I think I told you before, I take ideas anywhere I can find them. They are precious commodities and if somebody else has a good idea, wonderful, let's us use it. So I think the process of really seeing how other schools work is a very valuable one, although the LCME site visits to</p>

	<p>do them are very hard work. It's a hard week, or even several weeks if you've got a big document to go through. It's very rewarding in there in what you learn. I've never made one that I didn't learn something that I thought was important. Sometimes negative, 'Don't do it that way'. Sometimes positive, 'Hey, that's a neat idea'. Also, visiting other schools as a candidate for positions is another way of learning. You again get some don'ts and dos. I think the more you sample what other people do, the better it is. The Association of American Medical Colleges, the AAMC in our lingo, runs a management advancement program, and their courses for deans that are marvelous. A small group of new deans meet for a week at a very nice place out in the country outside of Boston, and have a very intensive exposure to management. It's run by the Sloan School of M.I.T. in their health management program, they use experienced deans plus management experts, and it's really marvelous. But it also forms a camaraderie of other deans, because every class that goes through are sort of the new deans for that year, and you begin to have a built in network, somebody you know better because you've lived with them for a year and you call them up when you need help. But also the AAMC Council of Deans has a spring meeting each year, and they get away, deans and often their wives for three or four days, and there are meetings but it's also a retreat-type setting where you can talk to somebody who might have knowledge about this or that and the other and we do an awful lot of formal and informal information exchanging. Similarly at the fall meeting, it's a little more structured. So there's an informal network of exchanging information, and all of us really do pirate a great deal what we see that's good and it's shared very freely among schools.</p>
JSJ	<p>Is there a periodic academic fine tuning that takes place at all medical schools every certain amount of time, or does it take place with changes in administration? How does that work at medical schools?</p>
WS	<p>I'd like to believe it goes on constantly. Fine tuning. Both at the overall level and at the individual course and departmental level. I'd like to believe that we're all constantly looking at what we've done and how that needs to be changed, and that we're willing to make changes. I'm a firm believer in trial, experimentation, in education. I'm glad if we've got people who want to try to do it differently, as long as they will ask what was the result, what was the meaning, and as long as they do it in a context that is not going to harm students' education, and I happen to believe that there is very little you can do to prevent good students from learning. Also, there's very little you can do to make students learn if they don't want to or are unable to. So I'm an advocate of trying things. I think you don't try too many things at the same time, but I'd love to have a department come in and say, 'We want to try a whole new way of teaching our subject matter, and it's going to be so different it's going to look like nothing that's been done in this school before. Can we try it?' We'll listen to them and if it looks like it's not going to be distractive, we'll say, 'Heck yes, let's try it. But let's look at the results so we can know whether it was good'. I'm so interested in this kind of innovative trial that we've created a special program in the school in which I've</p>

	<p>taken resources from one or another places and in essence created an incentive or an internal grant program for educational innovation, and we receive proposals in the form of basically a mini-grant format from departments, individuals, or programs for innovative or different educational enterprises. We have them peer review it, and we'll fund them, and they require a proposal that defines what it is they want to do. We don't insist it be new. Make it something somebody else is doing and you want to introduce it here. Maybe it's a completely new idea. We will fund those, if peer review is appropriate. There has to be evaluation, we want to know after it is done was it good, did it work, was it a failure, will it be good for other places or other departments, how can we make known the results. We do that in two aspects, one is for education generally, and the other is a similar notion but is focused on students who are having difficulty. Remediation, catching up and so forth. That's a wide open grant program for our faculty. I often hear people saying, 'I am a teacher, not a researcher, and therefore when I'm asked do I get any grants, I can't'. Well, now they can, and we'll do it. We have put in a program called locally 'The 13th Month' which is in essence a formal month of education at the beginning of the fourth year- it's called the 13th Month because it is a requirement, like the third year- which people have viewed with great skepticism at first, and the students hated it. That was one where we got a lot of student input and we overrode it. It's been very well received, the students have taken to it. I think it's positive, and it has been very well received by the LCME and other people who have looked at it, and that was done as an experiment, it had a two year lifespan and we have continued it.</p>
JSJ	<p>What happens during The 13th Month?</p>
WS	<p>It's a whole series of things in which we bring the class back after a year's clinical work, and at that time they've been in the clinics, they've seen patients, they've had their required clerkships, and we do things like clinical pharmacology. They have some more formal instruction in how some of the advances in basic science since they took biochemistry and impacts specifically on clinical activities, and it's a focus for some things like medical legal aspects, a lot of things which if given before their clinical work wouldn't have made sense. So it's a fairly formal, structured period to do some things that are of importance to them and it's done then as again a return to formal curriculum after the clerkships and before their senior electives, and there's a fair amount of radiology in it, we do some sub-specialty things like what is physical medicine and rehab about, when there is no required clerkship in rehab. What are the emergency and necessary EMT procedures and things for every physician when there isn't a required clerkship and so forth. So, we're doing innovation, we're doing fine tuning, if you will, we're modifying courses all the time. I think that you should not re-do a curriculum at intervals of less than five to ten years, unless you re-do one and you find out it's a disaster. Two years ago, I guess I'll say I was persuaded, I did not believe it would be effective. But nonetheless the curriculum committee was persuaded, the biennium one committee, and one of my associate deans was persuaded that we ought to decompress the time schedule of the first quarter by</p>

JSJ	<p>extending it a week and a half longer. No more material, but make it a week and a half longer. Okay, we put it in, and said the only thing that has got to happen is at the end of the first and the second years it has got to be evaluated. If extending it a week and a quarter just means a week and a quarter more material, that wasn't the purpose. If the results are the same when we get done, that wasn't the purpose. We've got to see some positive signs. I heard day before yesterday that the second year review of that has been done, and they have determined it has no advantage, and we're going to have a recommendation to put it right back where it was in the first place. Fine! My prediction, I don't care whether it came out the way I predicted it or the way somebody else did. I think it was fine to try it, but we've asked ourselves was it good, did it have a good effect, or didn't it, and we decided it didn't make any difference for why to extend the time, so we're going to go back. I'm all for that, Jim. That's what I mean by being for trial and error, and I'll support anybody vigorously who wants to do it, whether I agree that their idea is going to work or not. It's not important. I think that we've got to try, because if I'd been wrong, and had insisted that they not try it when it would have been a help, wouldn't that have been awful. And I don't know all there is to know, by any means.</p> <p>Well, thank you very much. This is just about our time up for this interview session. In our next one I'd like to go into the other impactful things that you did, and especially dealing with the structure, the financial exigency and the community mood once you got here as dean.</p>
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