I. Approval of Minutes Action

A. December 15, 2005

B. December 16, 2005

C. January 31, 2006

II. Oral Health Resolution Action

III. Health Sciences Division — Dr Michael Lewis Discussion

A. Oral Health Update

B. ECCVI Update

C. ECG Consultants

D. MFPP Information

E. Indigent Care

IV. Health Sciences Divisional Updates Information

A. Laupus Library

B. School of Nursing

V. PCMH/UHS – Mr. David McRae/Mr. Steve Lawler Discussion
Dr. Lewis initiated the meeting to order at 12:25 pm.

Oral Health Update:

Dr. Lewis reported that dental school initiative is healthy and progress is being made. He welcomed Dr. Greg Chadwick, Associate Vice Chancellor for Oral Health, to the meeting.

Dr. Chadwick noted that the feasibility team chaired by Dr. Howard Bailitt visited ECU in late October to evaluate for an early planning study. Review of the financial feasibility of oral health continues and should be completed in approximately two months. Dr. Bailitt has expressed enthusiasm for the opportunities which exist at ECU. A dental school will mesh well with the philosophy of the medical school. The medical school will provide a tremendous amount of resources. Dr. Chadwick mentioned that a meeting was held during on December 1 with Chancellor Ballard, Chancellor Moeser, Dean Williams (UNC Dental School), Provost Shelton, Ms. Workman, and himself to discuss oral health. Dr. Williams has communicated with all legislators in North Carolina voicing his opposition to the dental school at ECU. According to Dr. Chadwick, there is a 50/50 chance that UNC may not support our quest for a dental school.

Mr. Brody noted that it may be beneficial to attend area dental study groups. Dr. Lewis reported that he had already been invited to attend several.

Dr. Lewis mentioned that the mission of the medical school was to offer medical education to minorities and that ECU had graduated more minority students in the nation with the exception of minority schools.
Dr. Chadwick stated that all the arguments appear to be on our side and the politics will be the issue. Dr. Chadwick indicated that a resolution would probably be forthcoming at the February BOT meeting. Mr. Showfety agreed that the political argument appeared to be the most vulnerable and that the Board of Visitors and the Board of Governors should be engaged as soon as possible.

*ECG Consultants*

Mr. Earl Brigham and Mr. Chris Collins from ECG Consultants were invited to the meeting to present the report on issues related to the BSOM and UHS. The presentation had already been received by the UHS Board at their retreat in early December. Mr. Brigham indicated that this was the most significant level of involvement with senior leadership that he had experienced with universities and he was very appreciative.

*Physician Recruitment, Separate Incorporation of Medical Faculty Practice Plan; enhancement of clinical research enterprise:* All of the joint ventures presented in the document were fully endorsed by the steering committee (4 from ECU and 4 from UHS).

*Physician Recruitment:* UHS has recently completed a needs physician basis for the 29 county area. The existing physician community cannot address the substantial growth alone. UHS/PCMH, ECU/BSOM and the private practice community will benefit from joint physician recruitment. The current infrastructure and process will be inadequate to meet future competitive market. The UHS study estimates that more than 200 physicians will be needed within the next 5 years. ECG recommends that UHS develop an internal recruiting function as well as the BSOM.

Mr. Brody noted that two orthopedic surgeons from Wake Med will be associated with Lenoir Memorial in the near future. He suggested that perhaps it would be beneficial if ECU placed surgeons at Lenoir Memorial rather than Wake.

Mr. Brigham indicated that members of the steering committee were aware that there were a number of long standing traditions which would have to be challenged if recruitment of specialist physicians were to be viable. UHS has noted that additional specialists will be needed. He reported that UHS would not endorse the SOM recruiting specialists due to creation of political issues with the private physicians. Mr. Brigham stated that changes to the practice plan would need to be incorporated to make it more viable. Dr. Johnson stated that she felt that this could be done so that the community realizes that we are not abandoning primary care. Mr. Brody stated that we may be underestimating the response from private practice.

Mr. Brigham drew attention to the topic of separate incorporation of the practice plan. Increased flexibility to respond to market forces; alignment of the economic incentives of faculty clinical practices and positioning of faculty practices as a better “business partner” for UHS/PCMH would allow the practice plan to become more strategically and financial self-sufficient over time. Dr. Johnson stated that this was a
critical issue and would allow us to manage the plan correctly. Dr. Lewis indicated that it was hard to provide good customer service with the plan currently utilized. UHS has indicated that they are supportive of this change at all board levels. Mr. Grecyzn asked that a list of ramifications of these changes be generated as well as how to deal with them. Mr. Showfety asked how ECU would avoid “dumping” of non paying patients. The members agreed to retain ECG consultants for assistance with MFPP issues.

Enhanced Clinical Research: Mr. Brigham reported that UHS had voted to endorse supporting clinical research. Expansion of inpatient clinical research; growth of research in centers of excellence; engagement in region-wide research related to chronic disease were suggested on areas to enhance clinical research. Investments could be initiated by providing for funding of infrastructure development, institutional support of disease-specific research, as well as assistance in recruitment and retention of talented physician researchers. Dr. Lewis noted that the majority of research is generated from the SOM as well as Allied health. The key will be for us to develop an infrastructure and progress is being made.

The following motion to go into closed session was made by Mr. Redwine at approximately 1:20 p.m.

**MOTION**

*MR. CHAIR. I MOVE THAT THE COMMITTEE GO INTO CLOSED SESSION UNDER NORTH CAROLINA GENERAL STATUTE 143-318.11(a) TO PREVENT THE DISCLOSURE OF CONFIDENTIAL COMPETITIVE HEALTHCARE INFORMATION AS SUCH INFORMATION IS CONFIDENTIAL UNDER NORTH CAROLINA GENERAL STATUTES 131E-97.3(a) and (c).*

The motion was seconded by Mr. Hill and approved unanimously by the committee.

Chancellor Ballard presented a motion to end closed session at 2:00 p.m. and return to the meeting. The motion was seconded and approved unanimously.

Chancellor Ballard suggested that the group use the recommendations, develop a plan, and move forward. Dr. Lewis asked if ECU should engage ECG to help with the forward thrust. Dr. Johnson agreed that we should move forward on those issues which we can knowing that significant costs may be incurred as well as potential political issues. It was suggested that a road map with benchmarks be established prior to the next meeting. Mr. Showfety inquired as to political vulnerability with the flow of funds and the dental school proposal. The members agreed that ECG consultants should be retained by ECU to enhance the move forward.

There being no further business, the meeting adjourned at 2:15 pm.
Discussion was held related to the flow of funds between ECU and UHS. Several suggestions were brought forward to the group and how to implement recommended changes.
Mr. Hill called the meeting to order at 12:20 PM. He reported that the committee also met yesterday. He invited all Trustee members to attend the committee meetings if possible.

As there were no changes to the minutes of the September 30, 2005, Health Sciences Committee, the board approved the minutes unanimously.

**Oral Health Update:**

Dr. Lewis reported that Dr. Greg Chadwick, Associate Vice Chancellor for Oral Health had asked Dr. Howard Bailitt, chair of the dental feasibility study conducted four years ago to chair the current study. Dr. Bailitt has shown enthusiasm for the current proposal. The final report looks very promising and would be based on the same principle as the Brody School of Medicine. An action item in support of the dental school is anticipated for the February Board meeting. Conversations with UNC Chapel Hill have been mostly positive and a cooperative process is expected.

**ECCVI Update:**

Dr. Lewis stated that a business plan should be in place soon. Resources have been devoted to that issue and progress is being made.

**ECG Consultants:**

The final report from the consultants has been received and was presented at the Health Sciences Committee meeting on Thursday, 12/15/05. Dr. Lewis indicated that the Health Sciences Division is very excited about the proposals being brought forward.
Research: The Institutional Review Board received one of the strongest reviews from the Review Board. UHS has provided significant funding which helped the IRB receive this high review.

MFPP Information:
Documents pertaining to the Medical Faculty Practice Plan have been included in your materials. Dr. Lewis noted that continual improvement is being made and that the results have been on a positive note. The challenge of uncompensated patient care remains. Dr. Lewis commended Dr. Johnson and the BSOM finance team for their fine work.

Other Business:
In regards to the dental school issue, Mr. Hill noted that there are people in the state who will oppose the establishment of a dental school at ECU. He indicated that their opposition would be based on political grounds. This school would be based on the BSOM model and would provide basic dentistry to a section of the population who can’t afford dental care. Mr. Brody noted that the hospital and ECU had worked jointly in the placement of physicians in rural areas of eastern North Carolina. Dr. Lewis mentioned that an article would be published in the North Carolina Medical Journal shortly which would address these issues.

Dr. Lewis expressed sympathy upon the death of Dr. Andrew Best, who was instrumental in the establishment of the medical school and who provided patient care for the indigent care population of eastern North Carolina over his career. Donations in memory of Dr. Best should be made to the Medical Foundation of East Carolina University.

There being no further business, the meeting adjourned at 12:35 pm.
Members Present:
Robert Hill, Chair
Robert Greczyn
David Brody
Terri Workman
Mike Lewis (by phone)
Brian Floyd (by phone)
Steve Showfety (by phone)

Recorder: Ellen Finch

Naming of Cardiovascular Institute
Mr. Hill called the meeting to order at 1:05 pm. Mr. Hill began the meeting by stating that a broader insight into the thought process as to the hospital board and their members was needed in regards to the naming of the CV Institute. He stressed the need for uniform support for the chosen name of the ECU portion. Mr. Brody stated that PCMH had elected to name their component, Heart Hospital at PCMH. Mr. Floyd noted that this was the chosen name by PCMH. Mr. Brody inquired as to the marketing aspects for ECU and that our marketing should be “cranked up”. Dr. Lewis indicated that the overall name will be marketed by the hospital. Mr. Floyd reported that in the original agreement between the university and the hospital that there would be one overall name for the institute and that the individual components would be named separately. Thereby PCMH can utilize Heart Hospital at PCMH and the ECU component could have a different name. Mr. Brody expressed concern that PCMH will be out front in the marketing realm for the institute and stressed that ECU needed an integrated strategy. It was mentioned that ECU has exclusive rights for heart surgery at PCMH but not on cardiovascular procedures. Cardiovascular procedures can be performed by competing cardiology groups at the institute. Mr. Floyd also mentioned that the contract specifies that when PCMH markets the Heart Hospital, it will also market the ECU program as well. Dr. Lewis stated that currently a marketing program at ECU does not exist. Mr. Floyd indicated that Dr. Chitwood had spent considerable time with Mr. McRae discussing the name and both had agreed that East Carolina Heart Institute would be the best overall name. He also reported that any time the school or hospital references the name, either institute must be reference the overall name. Once a logo for the institute has been marketed (usually about 5 years), the logo may act as the reference. Mr. Hill expressed concern that ECU would not have the same results as PCMH due to their marketing monies. Mr. Brody replied that ECU must execute a marketing plan. Dr. Lewis agreed. Mr. Greczyn raised the issue of services provided by community cardiologists and marketing. Mr. Floyd reported that it was in the contract that involvement by community cardiologists would be allowed. It was noted that the private group refers more patients than ECU. Perhaps this situation could be used jointly among the groups to purchase specialized equipment for the institute.
Mr. Showfety inquired as to the unacceptability of the use of East Carolina University Heart Institute at PCMH. It was noted that the hospital would not agree to the use of University in the overall name. Mr. Brody reported that the hospital was locked in on Heart Hospital at PCMH and that their frustration was that we haven’t selected a global name for the institute. Mr. Brody stated that he had been asked about the naming of the institute by a PCMH Board member. His reply was that the Health Sciences Committee had not formerly discussed the issue. Mr. Brody suggested that a marketing company be hired so that protocols could be established for both sides. Mr. Floyd indicated that language was specified in the contract on the use of the name. Lippincott was brought in as a consultant for approximately 6-7 months to work on the naming issue. Their initial findings were discussed with Dr. Lewis, Dr. Chitwood, and Mr. McRae. Dr. Chitwood was not supportive of the 600-700 names they brought forward. Agreement was reached on East Carolina Heart Institute. When PCMH breaks ground for the hospital portion, they will use East Carolina Heart Institute.

Mr. Hill asked if we were satisfied that this name would identify the University more than anything else. Dr. Lewis mentioned that Anissa Davenport had pointed out to Mr. McRae that Dr. Chitwood was known in the heart circles as being at ECU. Mr. Greczyn stated that he was convinced that this name is as close as we will get on the overall name. Next issue will be what to call ECU’s component. Mr. Hill stated that he anticipated that groundbreaking for ECU’s component would occur during Founders’ Week in late March.

Mr. Hill indicated that he had a comfortable feeling with East Carolina Heart Institute. Mr. Brody inquired if Lippincott examined only the umbrella name. Mr. Floyd responded affirmatively and that private physicians generated approximately 50% of the business. Dr. Lewis stated that plans are underway for privatization of the medical practice plan and this would encourage private physicians to join the university. Mr. Brody indicated that East Carolina Heart Institute would allow for flexibility in the naming of ECU’s component. He also mentioned that members of the Health Sciences Committee were not aware of Lippincott’s involvement over the past 6 months and asked that the members be kept informed of ongoing activities. Dr. Lewis indicated that the issue had gone back and forth between the institutions but nothing had evolved. Mr. Floyd responded that this had been held up more on PCMH side than ECU. Mr. Greczyn stated that it was not their intent for anyone to be defensive only a suggestion to advise the trustees.

Mr. Showfety commented that the major value of this will be in the marketing value of each component of the institute. Mr. Brody mentioned that protocols should be established between ECU and PCMH for consistency. Mr. Floyd indicated that this will occur and that Lippincott is currently working on the protocols.

Dr. Lewis indicated that the full Board of Trustees should have input on the name. Mr. Hill stated that the hospital would like to use the name during their ground breaking ceremonies in February. Mr. Brody suggested that the Health Sciences Committee
meet several times during the year so that they can generate greater service to the university and that information is freely exchanged. Dr. Lewis responded that he would work with Chancellor Ballard to make sure that information was kept flowing.

**MOTION**

*Mr. Greczyn made the motion to approve the name of East Carolina Heart Institute, which was seconded by Mr. Brody. The motion was passed unanimously by the members.*

Mr. Hill requested that the motion be sent to the full Board for this approval. Ms. Workman will work with Mr. Hassler, Associate University Attorney, in the preparation of the motion indicating full support of the committee for forwarding to Mr. Durham, Secretary for the Board.

Ms. Workman indicated that she would ensure that the contract as well as the legislation was amended to reflect the correct name. Dr. Lewis stated that he would speak with Chancellor Ballard.

A brief discussion ensued regarding the naming of ECU's component. Mr. Brody inquired as to a deadline for selection of the name. Mr. Hill indicated that we had a little time before groundbreaking. Mr. Brody responded that the Health Sciences Committee should be involved in the process. Dr. Lewis responded that perhaps potential names could be exchanged by email. Mr. Hill commented that the name should be approved by the time of groundbreaking which will be held during Founders' Week late March.

There being no further business, the meeting adjourned at 2:00 p.m.
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<thead>
<tr>
<th>Category</th>
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<tbody>
<tr>
<td>Patient Visits per Business Day</td>
<td>Up</td>
<td>4.3%*</td>
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<tr>
<td># Credentialed Faculty</td>
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<td>wRVUs (Relative Work Value Units)</td>
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<tr>
<td>Total Expenses</td>
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*1.5 Fewer Business Days in 2005 due to ECU closing for Hurricane Ophelia
### ECU Physicians MFPP

**Fiscal Year-to-Date Results**  
For the Period July 1, 2005 through December, 2005  
(Results Reported in Millions)

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<th>Jul '05 - Dec '05 Actual (Modified)</th>
<th>Jul '04 - Dec '04 Actual</th>
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<td><strong>Total Revenues</strong></td>
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<td><strong>Expenditures</strong></td>
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<td>Personnel</td>
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<td>Operating/non operating expenses</td>
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<td>Capital</td>
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<tr>
<td><strong>Total Expenditures</strong></td>
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<td>54.25</td>
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<tr>
<td><strong>Net Results from Operations + / (-)</strong></td>
<td>(1.70)</td>
<td>(3.82)</td>
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<tr>
<td><strong>Net Transfers In / (Out) (2)</strong></td>
<td>(0.80)</td>
<td>(1.53)</td>
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<tr>
<td><strong>Net Results Operations &amp; Transfers + / (-)</strong></td>
<td>(2.50)</td>
<td>(5.35)</td>
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</table>

1 Contract Income, Capital Expenses, and Campus Auxiliary Transfers reported on accrual basis

2 Net Transfers Out represent transfers made to cover University Auxiliary assessment and Banner implementation
Legislative Initiative

Indigent Care Funding
Indigent Care Summary
Brody School of Medicine (BSOM)

- Estimated Safety Net Costs to BSOM: $6.69 Million
  (Provided to uninsured patients through routine clinical operations)
  - Lost revenue (compared to break-even commercial insurance rates)
  - Expenses of providing Safety Net services to the uninsured

- Estimated Costs of Additional Services: $3.31 Million
  - Volunteer Physician Care
  - In-kind Services for High Risk Maternity Contract (State of NC)

- Total Request to UNC Board of Governors: $10 Million
  (as Legislative Initiative for 2006 Session of NC General Assembly)
February 24, 2006

Greetings from the faculty and staff of the Laupus Library and the Country Doctor Museum

Spring semester 2006 will include some important milestones and activities for both the William E. Laupus Health Sciences Library and the Country Doctor Museum.

**January** – The Country Doctor Museum launched its enhanced website; [www.countrydoctormuseum.org](http://www.countrydoctormuseum.org). New features of the website include the first digital images of selected artifacts from the collection, educational resources for use by teachers and an on-line museum shop page. The North Carolina museum community has already commented on the improved website and the increased number of visitors to the website clearly indicates that word of the museum is spreading.

**March, 2006** - A new Laupus Library newsletter, *The Umbrella*, will begin quarterly publication. Planned in conjunction with the move to the new library building, *The Umbrella* will include news and special features about how Laupus Library is “Covering Eastern North Carolina’s Academic Health Center” with the latest in quality health information resources and services. A special highlight of the new publication will be cartoons by ECU’s own talented Dr. Walter Pories.

Also in March, Director Dorothy A. Spencer and Assistant Director Donna W. McDonald will make a presentation to the Association of American Medical Colleges’ Group on Information Resources at their annual spring meeting being held this year in Charlotte, NC. The title of the presentation will be, “Creating a state-of-the-art academic health center for eastern North Carolina.”

**May 5, 2006 is MOVING DAY!**

Current plans call for staff and collections to move into the new building beginning on May 5 and continuing until not later than May 15. During this time, we are striving to provide continuous service throughout the move by offering services virtually. We anticipate that only access to the book and journal stacks and biological models will be impacted for any significant length of time. Access to the Virtual Library @ ECU, electronic reference via email and electronic classroom reserves will continue to be available. With extensive planning already in place and good luck with the physical move, we are striving to make this move as convenient to users as possible.

We are excited and proud of the wonderful new facility you have helped make possible and look forward to you visiting us soon after we have settled into our new home.
The School of Nursing is an academic unit of the Health Sciences Division of ECU. It serves as a center of excellence for leadership in Nursing, professional nursing education, research, service, and faculty practice within a multicultural, underserved and rural region. It offers baccalaureate and master's degree programs which have special program options for registered nurse and post-masters students.

MISSION
The School of Nursing is dedicated to educational excellence in the preparation of professional nursing leaders who provide expert clinical practice and management in dynamic, challenging and interdisciplinary health care environments. The school values diversity and community partnerships, supports academic freedom and shared governance, fosters creativity and technological innovation and provides an environment for advancement and dissemination of research.

VISION
The School of Nursing embraces East Carolina University's motto “Servire” meaning “to serve”. It reflects service through the following three interrelated components of the school:

To Serve through Education
The educational mission of the school of nursing is to provide nursing students with rich, distinctive undergraduate and graduate educational experiences.
- is committed to enhancing each learner's ability to discover, evaluate, and communicate knowledge; to make informed decisions; and to recognize a decision's ethical dimensions.
- is committed to imparting a sense of citizenship and personal responsibility, fostering lifelong learning, cultivating a commitment to service, and nurturing an understanding of the interdependencies of people and their environments.
- meets the educational needs of nurses in the region through: exemplary teaching, research, and service, progressive on-campus and off-campus programs, clinical partnerships with service agencies, distance learning, and technological integration in teaching and research.

To Serve through Research and Creative Activity
The research mission of the School of Nursing is to advance the art and science of Nursing, to contribute to the solution of significant human health problems and to provide a foundation for professional practice and nursing leadership through the support of basic and applied research.
- is committed to integrating research and creative activities in the educational experiences of nursing students.
- is committed to enriching the knowledge base of culturally sensitive health care and being a leader in innovative research applications in the health care arena.

To serve through Leadership, Practice, and Partnership
The service mission of the School of Nursing is to provide leadership for exemplary nursing practice and to engage in partnerships supporting health care and human services, professional nursing, and community services.

STRATEGIC PLAN
2000-2005 GOALS
- Expand graduate programming to include the PhD in Nursing and MSN concentrations in identified areas of need.
- Increase intra/interdisciplinary collaboration which supports, encourages, and promotes excellence in teaching, research, service, and practice.
- Create an organizational infrastructure to support the development of a community of scholars within which research and scholarship will increase by 50%.
- Acquire the space, equipment, human resources, and infrastructure necessary for a state of the art information system that supports instruction, research and administration.
- Refine and implement the School's plan for systematic program evaluation and assessment of effectiveness and educational outcomes.
ENROLLMENT

<table>
<thead>
<tr>
<th>Program</th>
<th>Spring 2006 data</th>
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<td>Pre-clinical students</td>
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<td>439 clinical students</td>
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<td>Master of Science:</td>
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<td>RN-BSN Studies:</td>
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<td>80 students/24 pre-nursing</td>
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<tr>
<td>18 students</td>
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<tr>
<td>TOTAL:</td>
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<td>1603 students</td>
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PROGRAMS

Bachelor of Science in Nursing (BSN)

RN-BSN Studies

Master of Science in Nursing (MSN)

- Family Nurse Practitioner
- Neonatal Nurse Practitioner
- Nurse Midwifery
- Community Health Nursing
- Clinical Services Administration
- Clinical Nurse Specialist
- Nurse Anesthesia
- Nursing Education

Alternate Entry MSN

RN-MSN Studies

Doctorate of Philosophy in Nursing (PhD)

FACTS AND DISTINCTIONS

- The School of Nursing was established at ECU in 1959. The first students were admitted in 1960. The SON is ECU’s oldest professional school.
- The School of Nursing was first approved by the North Carolina Board of Nurse Registration and Nursing Education in March 1961 and received initial accreditation from the National League of Nursing in the fall of 1964. Accreditation has been maintained since that time.
- East Carolina University was authorized to offer a Master of Science degree in Nursing in 1977. In 1982, the National League for Nursing accredited the master’s program.
- The School of Nursing in 1991 received DHHS grant funds to establish a nurse-midwifery program. It is the only one in North Carolina.
- In May 2001, the school was granted permission by the University of North Carolina Board of Governors to establish a doctorate of philosophy in nursing degree.
- In January 2004, the school was granted permission by the North Carolina Board of Nursing to offer an Alternate Entry MSN option. This option is the only one in North Carolina. The first class began in Fall 2004.
- The SON holds active membership in the National League for Nursing Accrediting Commission, the American Association of Colleges of Nursing, and the Council on Collegiate Education in Nursing (CCEN).
- The SON has 88 faculty (71 full-time, 6 part-time, & 11 temporary part-time) and 29 staff members.
- The SON has grown beyond initial expectations and boasts more than 5000 alumni worldwide.
- The School is known for innovative outreach efforts designed to increase access to nursing education for place-bound nurses in rural areas. For over 25 years, the School has offered both the RN-BSN and the MSN program in off-campus sites. The RN-BSN and several MSN concentrations are now offered on-line.
- In October 2004, the School was listed in US News and World Report as number 5 in the USA in Distance Education in Nursing.
- In December 2004, the School of Nursing received the first national award from the American Assembly for Men in Nursing (AAMN) for having an environment receptive and supportive for men in Nursing.

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