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Probes of noose ends; no charges

By Jimmy Ryals
The Daily Reflector

Authorities will file no
criminal charges over a noose
found at East Carolina Uni-
versity last month.

An investigation of the in-
cident uncovered too little
evidence to pursue charges,
the university announced
Wednesday. ECU officials
have taken internal actions
to address the matter. Spokes-
man John Durham declined to
discuss those actions, citing
state law that protects person-
nel information.

Reported to the campus po-
lice on Jan. 11, the noose was
hanging on the rearview mir-
or of a car parked outside
ECU's Building 172 on East
14th Street. The noose was
hung by the car's owner, said
Assistant District Attorney
Darth Akins, who reviewed
evidence from ECU's investi-
gation. It had been hanging in
the car "for some time," Dur-
ham said. Someone saw it and
reported it to police, he said.

There was no indication
that the noose constituted a
threat to anyone, Akins said.

"The mere fact that this was
present in somebody's vehicle
without more, there was no
crime," Akins said. "That was
basically it."

Police furnished prosecu-
tors with a photo of the foot-
long noose hanging in the
car and described interviews
with the person who owned it,
Akins said. Prosecutors
considered the matter in light
of North Carolina's ethnic in-
timidation statute, he said.
Under that law, any assault,
vandalism or threat based on
race, religion or nationality is
a class I misdemeanor.

As police investigated the
incident, the university host-
ed a forum on campus race rel-
ations. Panelists at the event
included the Rev. William
Barber, N.C. chapter president
of the National Association for
the Advancement of Colored

See NOOSE, A9
Duke given $20 million for foreign student aid

The Associated Press

DURHAM — A Duke University trustee and his wife have given the university $20 million to help undergraduate students from other countries.

University officials said Wednesday the gift from Bruce and Martha Karsh is the largest donation in the school's history devoted to helping international undergraduates. The couple committed $12 million principally in 2005 to support need-based financial aid for domestic students.

The gift announced Wednesday is a permanent endowment that includes $15 million for financial aid.

The balance will support several programs for international students, including financial assistance to travel home and pursue research.
Hospital to-do list saves lives

By Jane E. Brody
New York Times News Service

This is a call to arms for everyone who may someday be hospitalized, or who has a relative who may someday be hospitalized — which is to say everyone.

These days, to spend time in the hospital is to be at risk of contracting a hospital-acquired infection. Some of these infections can be life-threatening. But there is a simple way to make that hospital stay safer, devised by Dr. Peter J. Pronovost, a physician-researcher at Johns Hopkins.

The method — a five-item checklist to assure that proper precautions are taken to prevent infection — has been thoroughly tested, first at Johns Hopkins and later in 106 intensive-care units in Michigan, where it succeeded beyond anyone’s wildest dreams in saving lives and reducing costs for patients who received the major fluid tube called a central venous catheter.

According to Dr. Pronovost, whose findings in Michigan were published in The New England Journal of Medicine on Dec. 28, 2006, about half of intensive-care patients receive these catheters; about 80,000 a year become infected and 28,000 die, with an economic cost of $23 billion.

Infection prevention

Using the checklist, in 18 months the average I.C.U. at these diverse hospitals reduced its catheter-related infection rate to zero, from 4 percent. All told, the checklist saved more than 1,500 lives and nearly $200 million. The program itself cost only $500,000.

Dr. Pronovost, a professor of anesthesiology and critical care medicine, said in an interview that he distilled the five steps from a 64-page federal document on controlling hospital-acquired infections.

When inserting a central venous catheter, doctors should do the following:
1. Wash their hands with soap.
2. Clean the patient’s skin with chlorhexidine antiseptic.
3. Put sterile drapes over the entire patient.
4. Wear a sterile mask, hat, gown and gloves.
5. Put a sterile dressing over the catheter site.

To someone on the outside, this list may seem like a no-brainer. But in the crush of crisis medicine, one or more of these steps is often neglected, sometimes with disastrous results.

What made the program work in Michigan was continuous — and anonymous — collection of data. The hospitals were monitored on their use of the list, their rates of infection and their feedback to medical personnel to show what was working and where gaps remained in quality care.

The task now is to expand the checklist concept to other procedures and to get hospitals throughout the country to adopt it. New Jersey and Rhode Island are already planning to use it. And following a report on the checklist in the Dec. 10, 2007, issue of The New Yorker by
Cofidentially, a report
in the Jan. 15 issue of Clinical Infectious Diseases by Dr. Sanjay Saint
and colleagues
at the Veterans Affairs Ann Arbor Healthcare System and
the University of Michigan stated that 1 percent of hospital patients
fitted with a urinary catheter developed a urinary tract infection.

Dr. Saint's national study
"found no strategy that appeared to be widely used to prevent hospital-acquired urinary tract infections." Nearly half of hospitals had
no system telling them which patients had a catheter, and three-fourths had no system
to show how long the catheter was in place or whether it
had been removed. Furthermore, fewer than 10 percent of hospitals used any system
to remind doctors to check daily on whether a patient's catheter was necessary; the
longer one is in, the greater the likelihood of infection.

A nationally imposed checklist for safe urinary catheter insertion and removal could sharply reduce the risk to patients and the costs of hospital care.

But checklists need not be limited to reducing the risk of hospital-acquired infections.

As Dr. Gawande and Dr. Pronovost explained, they could be used to enhance the safety of surgery and anesthesia, the treatment of patients with heart disease, diabetes, pulmonary diseases like asthma and a host of other conditions where certain approaches to care have been scientifically established as most effective but are still often neglected.

What You Can Do
The federal Office for Human Research Protections recently ruled that because this quality-control program constituted research on human subjects, every participating hospital must first get approval from its institutional review board. That ruling did not halt the use of checklists in the Michigan hospitals where they had become part of routine care. But it did stop the collection of data based on the lists, which Dr. Gawande described as "the driving force behind the effectiveness of the program," until each hospital's institutional review board approved it.

These boards meet monthly, bimonthly or quarterly.

Sam Watson, director of the Michigan Hospital Association's Keystone Center for Patient Safety and Quality, a sponsor of the Michigan checklist program, said the need for their approval could seriously delay the use of checklists for other aspects of medical care, like preventing hospital-acquired urinary infections — something his center has been working on with Dr. Saint.

Dr. Gawande suggested that consumers write to their members of Congress and the Department of Health and Human Services, asking that the ruling be reversed.

Dr. Pronovost suggested that consumers let Congress know that checklist programs "could have a profound impact on their health," ask local hospitals whether they are using checklists to reduce infections, and write to state hospital associations asking for a statewide effort to reduce infections.

In addition, Dr. Pronovost said, hospital patients should be their own advocates, armed with their own checklist and asking medical personnel whether they are using it "to help assure that I don't get an infection" or asking, "Do I still need this catheter?"
PCMH presses infection prevention

*The Daily Reflector*

Pitt County Memorial Hospital already applies the checklist devised by Dr. Peter J. Pronovost, according to public relations director Barbara Dunn. "But PCMH also goes beyond this list of five easy steps," she said. "In conjunction with the Brody School of Medicine, we have been training our doctors to put these central line catheters in areas of the body that are less likely to become infected, such as the upper chest area."

PCMH also has been testing all patients for the presence of MRSA (methicillin-resistant *staphylococcus aureus*), a type of staph infection that is resistant to most antibiotics. Dunn said that since PCMH began the testing and treatment program a year ago, the hospital has seen a 20 percent decrease in MRSA pneumonia cases associated with ventilators, and a 60 percent decrease in MRSA urinary tract infections.
10-story dorm near NCSU on drawing board

By Josh Shaffer, Staff Writer

RALEIGH – A 10-story private dormitory could soon rise west of N.C. State University, helping to house a growing student population and rebuild a sagging end of Hillsborough Street.

Stanhope Village would hold 291 units with 1,000 beds and fill a gravel parking lot neighbors call unsightly and take down several boarded-up houses along Stanhope Avenue. It would stand near where self-publishing firm Lulu is moving into the “yellow bulldozer” building on Hillsborough Street.

The plans coincide with the largest freshman class in NCSU’s history: 4,750 students started last fall.

Housing has consistently topped Wolfpack concerns as nearly three-quarters of its 30,000-plus students live off-campus. With enrollment expected to grow, dormitories make a tempting proposition for developers, especially with students scattered across the city.

“If you can locate student housing within walking distance of the campus, that really is better for the students and the neighborhoods around campus,” said Jeff Jones, executive vice president of Capstone Development, the Alabama firm handling the project.

With 28 percent of students living on-campus, NCSU rates about average for schools its size, said Tim Luckadoo, associate vice chancellor for student affairs.

But off-campus students have spread to more far-flung neighborhoods as the school gets larger and land gets scarce. This development by a nationally known firm is different from the more local townhouse and apartment complexes along Avent Ferry Road or Gorman Street.

Developers press to build new student housing every year, Luckadoo said, but “they all want to build right across the street from campus and that piece of land doesn’t exist.”

The building would butt up against a set of CSX railroad tracks near where Stanhope Drive ends at Concord Street.

A similar project wound its way through Raleigh’s planning process in 2002, but this new plan comes with a few tweaks.

Six years ago, Stanhope developers envisioned new retail and office space along Hillsborough Street, along with a parking deck between them and the dormitory.

Now, plans call for putting a 40-foot parking deck along Stanhope Avenue and taking down single-family houses there, many of them boarded-up.

Neighbors nearby object to the deck’s new location fearing cut-through traffic on their small residential street.

Also, “replacing single-family housing with a parking deck is not much of an improvement,” said resident Caleb Smith.

The project will go to the Planning Commission in the next few months and then to the City Council for final approval.

The deck on Stanhope will likely just be for storage and not create much traffic as students walk to campus, he said.

“The students are going to want their cars to go out in the evenings or home for the weekends,” Jones said. “Most of the time, they’ll be walking to campus or to the businesses on Hillsborough Street.”

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Nursing program rebounds at NCCU

By Eric Ferreri
Staff Writer

DURHAM — A year after being forced to limit its enrollment due to poor performance by its graduates on the state's professional licensure exam, N.C. Central University's nursing program has rebounded impressively.

In 2007, 91 percent of NCCU's nursing program graduates passed the state exam, a nine-point improvement over the prior year. It was the first time in six years that NCCU's nursing graduates had reached the UNC system's 85 percent passage rate benchmark. Last year, the program's enrollment was docked 15 percent — or about 18 students — under a rule punishing UNC-system campuses whose nursing graduates don't hit the system's 85 percent passage standard two years in a row. That meant that this year it enrolled 18 fewer students than its 125-student maximum, a ceiling set by the state Board of Nursing.

The reduction was a blow to a program charged by the UNC system with doubling its number of graduates by 2010. But even last year, there were signs of a renaissance. The 82 percent passage rate in 2006 was a massive improvement over the 65 percent rate the prior year. The state board requires a 75 percent passage rate.

Lorna Harris, the program's director, attributed the improvement in part to a series of changes within the program, including a new emphasis on advising, the creation in 2006 of a student support office, and a change in admissions policy requiring applicants to have a 2.5 grade point average in the sciences.

Its enrollment shackles now off, the program has high hopes: a plan to continue adding students and faculty in the hopes of becoming a full-fledged professional school, Harris said.

According to the state board, 39 of 43 NCCU students passed the exam, accounting for the 91 percent passage rate. Durham Technical Community College's nursing grads posted a 93 percent passage rate; at UNC Chapel Hill, 93 percent passed, and at the Watta School of Nursing in Durham, 96 percent passed. Ninety percent of Duke's nursing grads passed the exam, according to the same data.

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Duke gets $20 million gift from trustee

BY JANE STANCELL
STAFF WRITER

Duke University has received a pledge of $20 million to support international undergraduates, the university announced Wednesday.

The gift, from trustee Bruce Karsh and his wife Martha, includes $15 million for scholarship grants. It is the largest gift for international undergraduates in Duke’s history.

Bruce Karsh, a 1977 Duke graduate, is president of Oaktree Capital Management in Los Angeles.

The money, which will be invested in a permanent endowment, means that Duke will be able to open its doors to more international students who would not otherwise be able to afford it. Duke estimates that the number of international undergraduates on financial aid will rise to 90 out of about 400.

The gift is the second from the Karshes to support financial aid. In 2005, the couple committed $12 million primarily to support Duke’s need-based financial aid endowment for U.S. students.

Besides financial aid to cover tuition and living expenses, the money will be used for expanded orientation and travel home for the international students. And $2.5 million will go to the creation of the Karsh International Scholars Program, which will provide 20 students with money for summertime research or service projects.

“We expect the Karsh International Scholars Program to draw some of the most accomplished international students in the world to Duke,” university President Richard Brodhead said in a news release.

One of Brodhead’s goals at Duke has been to raise $300 million to support financial aid. The fundraising drive has raised $260 million so far.

In December, Duke announced expanded financial aid for students from lower and middle-income families.

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Starr preaches to law students

He says Jesus was an immigrant

BY CORI SUE MORRIS
CORRESPONDENT

BUIES CREEK — Kenneth Starr, the former special prosecutor known best for his investigation of President Clinton, told an auditorium of future lawyers on Wednesday to defend immigrants for religious reasons.

Speaking at the law school at Campbell University, a Baptist institution in rural Harnett County, Starr argued that Jesus was also an immigrant.

"You know our Lord was a refugee," he said. "The family fled to Egypt because of the horrible atrocities and gross violations of human rights."

In a two-hour speech peppered with references to his Christian faith, the attorney and law professor said government officials set the immigration bar too high. He encouraged law students to take on asylum cases.

"Whatever your views are on immigration policy, left, right, center, beat your swords into plowshares," he said.

He also said he supported commutation for people facing the death penalty because a "generosity of spirit" should be at the core of the legal profession.

Now a professor at Pepperdine University, Starr told a packed auditorium of about 100 first-year law students and others that his generation had betrayed the nobility of the legal profession and that it was their duty to reclaim it with diligence, integrity and civility.

Repeatedly quoting Sandra Day O'Connor and Abraham Lincoln, Starr said it was lawyers' duty to bring peace to U.S. citizens and communities. After receiving their diploma, the students should say "Praise be to God" followed by "I am now a peacemaker," Starr said.

He said it is the duty of a lawyer to serve the public, just as Jesus served the disciples by washing their feet.

When asked about his role in Whitewater investigation, which led to Clinton's impeachment, Starr said he was appointed to an unconstitutional position that lacked accountability. He said he is happy the position no longer exists.

"The whole apparatus of the independent counsel was unconstitutional and in violation of separation of powers," he said.

After the speech, he was asked about his recent work defending the Blackwater private security firm in a case related to the death of four contractors in Fallujah in 2004.

He said he decided to take on Blackwater as a client because "they came to the firm."
Ties to recruiter questioned

UNC-CH sees no conflict in admissions director being on AGOS Japan board

BY TIM SIMMONS
STAFF WRITER

Officials at UNC-Chapel Hill’s business school found themselves answering conflict of interest questions Wednesday involving the school’s admissions director.

Sherry Wallace, director of MBA admissions for Kenan-Flagler, is one of three officials from U.S. universities who serve on an advisory board for a Japanese company that recruits students for business programs.

UNC-CH received e-mail from someone in Japan on Sunday questioning whether the Japanese recruiting company — known as AGOS Japan — might enjoy an advantage over its competitors because of its American ties. The e-mail was also received by the online news site insidehighered.com, which published a story Wednesday saying at least one university official was paid to be on the board.

University leaders are extremely sensitive to charges of such conflicts following scandals last year involving kickbacks by student loan companies to universities in return for business.

But Allison Adams, media relations director at Kenan-Flagler, said Wallace’s participation at AGOS Japan was approved by the school’s dean before she agreed to be on the advisory board, and she is not paid by AGOS.

Wallace’s term began Jan. 1, and she is expected to attend one annual meeting in Japan. Her trip and expenses are reimbursed with AGOS agreeing to spend up to $3,000 for a round-trip ticket; four nights at a hotel and expenses of about $372 a day. AGOS also agreed to spend up to $4,000 on an alumni reception while Wallace is there. An admissions officer from the University of Pennsylvania’s Wharton School and an associate dean at Columbia University’s Teachers College are also on the advisory board.

The UNC-CH conflict of interest officer, Sherrie Settle, reviewed Wallace’s appointment after it was questioned and found no fault with it. Barmak Nassirian, associate executive director of the American Association of Collegiate Registrars and Admissions Officers, “in general, it would be best to avoid these kinds of entanglements.”

Staff writer Jane Stancill contributed to this report.

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