Board to consider authorizing bonds for renovation of Mizzou's Lafferre Hall

By Alex Stuckey astuckey@post-dispatch.com 573-556-6186

JEFFERSON CITY • Renovating an engineering building on the University of Missouri-Columbia campus might happen sooner than anticipated.

During the 2014 Legislative session, lawmakers approved a capital improvements bill that included $38.5 million to renovate and repair Lafferre Hall, along with a bill authorizing the Board of Public Buildings to issue $600 million of bonds for the repair and maintenance of existing state and public higher education facilities.

Nixon signed the bonding bill, but withheld the $38.5 million for Lafferre Hall, which houses the College of Engineering, as part of $1.1 billion worth of budget cuts for the fiscal year that began July 1.

A meeting of the Board of Public Buildings on Thursday could change that, however.

Nixon announced today that the board -- made up of the governor, lieutenant governor and attorney general -- will tour Lafferre Hall on Thursday and consider a resolution authorizing the bonds for the project.

Lafferre Hall likely is one of the only bonding projects in the $220 million capital improvements bill that would qualify under the $600 million bonding bill because it is a deferred maintenance project. Other projects on the list, such as two projects for the Cortex Innovation Community probably would not fit that stipulation.

Cortex is a collaboration of educational, research and health care institutions redeveloping an old industrial area as residences, stores and a research park. The Legislature approved $11 million in bonds to build a MetroLink station between Duncan and Clayton avenues and $8 million of bonds for a new business incubator at Cortex. Nixon withheld that funding as well.
Interim dean of MU medical school accepts jobs in South Carolina

By Ashley Jost

Wednesday, October 15, 2014 at 10:11 am

After 15 years with the University of Missouri Health System in multiple capacities, Les Hall is leaving for another job.

Hall, interim dean of the MU School of Medicine, has accepted positions as executive dean of the University of South Carolina School of Medicine and CEO of the Palmetto Health-USC Medical Group.

Hall has served as interim dean of the MU medical school since November 2012. He starts his new jobs Feb. 1, according to a news release.

In July, the University of Missouri announced that Patrice “Patrick” Delafontaine would become dean of the medical school starting Dec. 1.

In his new roles, Hall will oversee the merger of Palmetto Health’s physician practices and the South Carolina School of Medicine’s clinical departments under a new not-for-profit, according to a news release. The merged medical group is expected to begin operations next year.

Similar to the dean’s role at MU, Hall will be responsible for leading the education, research and clinical missions at South Carolina.

“Throughout the search process, Palmetto Health and the University of South Carolina shared a common goal — to find a physician leader who will more closely align our organizations through the integration of our health care delivery services,” Charles Beaman Jr., CEO of Palmetto Health, said in a news release.

Hall said he is excited about the challenge of leading the merger. “I wouldn’t take this position if I didn’t believe the leadership was there to make this successful,” he said.

Hall joked that MU took a chance in hiring a health care provider from rural Arkansas with a “sparse” resume. Leaving MU might be the biggest challenge ahead, he said.

“Professional development here has been spectacular,” Hall said. “I am very much looking forward to the opportunity in South Carolina, but in no way is it a reflection that I haven’t enjoyed my time here in Missouri. I will always have an intense amount of gratitude.”

According to a notice of Hall’s appointment to MU Health employees, Hall has agreed to assist with the transition of the incoming dean during December and January before he leaves.
Loftin: 'I'm not interested' in SEC commissioner position

By Ashley Jost | Wednesday, October 15, 2014 at 4:01 pm

Google alerts are great. In addition to notifying you of newsworthy stuff, like Les Hall’s move to the University of South Carolina, you also get some pretty solid rumors in your inbox daily, like R. Bowen “Loftin should totally be the next SEC commissioner,” written by a commenter in a sports forum online.

The University of Missouri Chancellor tells me he's not interested, for what it's worth.

In case you missed it, the rumor I just allowed to lead my blog (yeah, I know), came about yesterday after current commissioner Mike Slive announced his retirement effective July 31, 2015 because of health issues.

Loftin is no stranger to the Southeastern Conference, so perhaps it makes sense that the rumors came about. He indicated to me that many of the rumors are probably coming from people at his past employer, Texas A&M University.

While at Texas A&M, Loftin organized the university’s move into the SEC. In fact, his book on the subject, titled "The 100 Year Decision: Texas A&M and the SEC," is now available for purchase.

During our chat this morning, Loftin said that whoever does take the commissioner spot will be in for a challenge, filling the shoes of Slive who has been there for 13 years.

Not-for-profit appeals syllabi case against university

By Ashley Jost | Wednesday, October 15, 2014 at 10:38 am Comments (5)

The National Council on Teacher Quality asked the Missouri Supreme Court on Wednesday to overturn an earlier ruling that University of Missouri course syllabi are closed records protected by federal copyright law.
In August, a panel of judges from the Missouri Court of Appeals Western District upheld a Boone County court’s decision in the university’s favor, determining that course syllabi are exempted from Missouri’s open records law because they are ultimately the intellectual property of faculty members.

In its petition to the state’s high court, the Washington, D.C.-based education group argues the appeals ruling failed to acknowledge a section of the federal copyright law that establishes a fair use exception for when copies are for “nonprofit educational purposes.” The council is a not-for-profit organization.

“Was it proper to interpret basic copyright law while ignoring the fair use doctrine where there was undisputed evidence of fair use?” the group asked in the petition.

National Council on Teacher Quality leaders filed a motion in October 2012 requesting the university disclose course syllabi under Missouri’s Open Meetings and Records Law, also known as the Sunshine Law.

The Missouri Court of Appeals Western District’s August ruling upheld a Boone County Circuit Court decision that “faculty members hold copyright ownership in their syllabi and, thus, that the syllabi’s disclosure was protected by the Federal Copyright Act,” according to the ruling.

The council, in partnership with U.S. News & World Report, is working on a college evaluation project that includes an analysis of course syllabi, which are documents professors prepare for their students to indicate what the expectations are for their class, as well as topics covered.

“We’ve run this up the flagpole with a number of legal minds we think know this area of law well. They’re pretty confident we can prevail,” National Council on Teacher Quality President Kate Walsh said. “At this point, it’s not even a matter of getting the materials — we can get them from students and faculty. At this point, it’s principle. It establishes a terrible precedent.”

The organization had to hire lawyers in nine of the 50 states while attempting to acquire syllabi for the evaluation project, Walsh said.

In six of the nine states, Walsh said lawyers to writing letters to universities got administrators to comply with the records requests.

In Wisconsin, a lawsuit was settled out of court in favor of the council.

The organization won a Minnesota case at the district court and appeals level.

“Missouri is the only place we lost,” Walsh said. “It’s unique and generally concerning for anyone who believes in the freedom of the press and public transparency.”

UM System spokesman John Fougere said the university is pleased with the court rulings so far.

“In responding to the NCTQ’s request for course syllabi, we felt it was important to respect the rights of the faculty members who created the syllabi,” he said in an email. “We are pleased that both courts to review the matter thus far have concluded that we acted lawfully.”
COLUMBIA — Ten years ago, MU's fraternities and sororities found themselves in the spotlight for tactics they were using to garner the most points in the spring Greek Week blood drive.

To win, some chapter leaders were encouraging members to give blood even if they were not fit to do so. In one instance, members were being pressured to lie to nurses and on the blood donation form.

Since then, the spring blood drive has cleaned up its act, said Janna Basler, MU's director of Greek life and leadership. The rules no longer require 100 percent participation by members. Instead, chapters that have up to 100 people sign up to donate blood earn bonus points, she said.

Meanwhile, the pressure for students to give in the Homecoming blood drive has stayed relatively the same.

The drive, which began Monday and ends Thursday, is one of the largest in the country each year, according to the Mizzou Alumni Association, which oversees it. Although the entire Columbia community is invited to donate blood at Hearnes Center, a majority of the thousands of units collected are from students who are part of the Greek community.

Some donate even though they don't want to.

For this story, eight people who said they didn't want to give blood because of health concerns or who had expressed disapproval of the drive were unwilling to speak on the record. The students are members of five Greek organizations; all said they feared their chapters or the Greek system as a whole might be cast in a negative light by their comments. One cited her chapter's bylaws that forbid members from speaking to the media.
One hundred percent participation is still the golden rule of the Homecoming blood drive, and confusion persists about "deferrals" and whether a chapter can earn points for members who want to give but can't.

The disclosures in 2004 about the Greek Week blood drive did not prompt changes to the Homecoming drive, said Todd McCubbin, executive director of the Mizzou Alumni Association.

McCubbin and the association's coordinator of student programs Aly Friend oversee all Homecoming activities, and both said they weren't aware of the 2004 Greek Week blood drive problems.

McCubbin said without hearing about any concerns from members of the Greek community or the American Red Cross, the association wouldn't have any reason to change the Homecoming blood drive rules.

**A history of hot competition**

In both the Greek Week and Homecoming blood drive competitions, chapters are awarded points for members who attempt to donate blood. The competition's intensity was highlighted in 2004, when a Greek Week blood drive liaison explicitly encouraged the members of her chapter to lie about imminent health risks in order to receive points for their blood donations.

"I don't care if you got a tattoo last week — LIE," the liaison wrote in a 2004 email to her sorority chapter. "I don't care if you have a cold. Suck it up. We all do. LIE."

The alternative — telling the truth — might result in a deferral or being excused from giving blood. For the Red Cross, that means one fewer unit of blood. For a Greek chapter, that could mean losing points.

The liaison and two other chapter leaders at the time said their sorority was by no means the only Greek group pressuring members to give blood, according to previous Missourian reporting.

Publicity about the email resulted in a shift of focus for the Greek Week drive, and all blood donated by that sorority in the 2004 drive was destroyed.

"Immediately, we decided how we were going to change things," Basler said.
Vice Chancellor of Student Affairs Cathy Scroggs convened a task force to identify problems with the blood drive, Basler said. The task force found that many students felt overwhelming pressure to donate blood, Basler said.

"Regardless of what you tell them about deferrals, students feel so pressured to donate," Basler said.

That resulted in changes to the Greek Week blood drive rules. Chapters no longer earn points for individual donations. Instead, they earn bonus points for soliciting other Greek students and community members to sign up for the blood drive, according to the 2014 Greek Week rulebook. Basler said it's part of the shift to using the Greek community to market the blood drive.

**Deferral confusion**

Although Greek chapters compete in multiple ways during Homecoming, the proportion of points awarded in the blood drive category makes it a major focus.

The difference between first and second place can be a matter of a few points, Friend said.

And that's why deferrals become important.

A person can get a deferral for health reasons. Having recently traveled to certain countries, getting tattoos and engaging in some sexual acts can all prompt a deferral, according to the Red Cross.

Other deferrals are more unexpected. Some students have to wait for the results of the required finger-prick test administered by a Red Cross nurse at the drive to find out if they're healthy enough to give blood.

About 22 percent of the students who come to donate at the Homecoming drive are deferred, according to Craig Jackson, donor recruitment representative for the Red Cross.

In any case, a student must "attempt" a donation in order to receive points for Homecoming, according to the 2014 rulebook.
Friend said an attempted donation means that someone came to the blood drive and actively went through the process of donation. This includes both people who were deferred and those who successfully donated.

"If you went on vacation, you got a tattoo or you've been sick or not feeling well, that's OK," Friend said. Students receive points regardless of the reason for their deferral, she said.

"If that is the policy, we thought it was the complete opposite," FarmHouse president John Middleton said. "I think they tell us that if you know you'll get deferred, it doesn't count."

Only one of the five presidents of MU sorority and fraternity chapters interviewed for this story understood that deferrals earn points, as explained by Friend and Jeremy Essner, the student director of Homecoming who oversees the blood drive. That president, Hunter Holman of Sigma Chi, was his chapter's blood drive liaison during last year's Homecoming.

Alpha Tau Omega president Carter Patton said he was under the impression that all deferrals had previously been worth the same number of points but said, "I believe they're changing it this year so that people actually have to donate to get points."

Middleton said he thought that even unexpected conditions were not an adequate deferral. He thought that even people who had begun feeling sick the day of their donation would still have to give blood in order to get points.

When told about the discrepancies and confusion among Greek leaders and even a member of the Homecoming steering committee, Friend and Essner said they were surprised.

"Since this is the first we're hearing of it, those are steps that we can take in making things a little bit more clear and explaining things, especially at (the blood drive) information nights," Friend said.

The Homecoming steering committee held a blood drive information night Oct. 8. The information night, an annual requirement for all Greek chapter members, outlines the important health topics and major points of information about the drive.
The session was held more than a week after the interview with Friend and Essner. There was no mention of deferrals during the information night, according to Brad Hagen, a member of Theta Chi. The 2014 Homecoming Greek rulebook also has no mention of deferrals.

**Forcing participation**

The 2014 Homecoming rulebook states that 100 percent of the members in a sorority and fraternity group competing together must attempt donation to receive the maximum points possible.

"When I went to the liaison meetings, (the steering committee) would say, 'It's really important that you make sure everyone goes,'" Holman said. "If one guy can't make it, it's like you automatically fail."

At the same time, the rulebook also forbids chapters from requiring their members, in any way, to participate in the blood drive.

"It's bad for people who can't give blood. Some people have disabilities and can't even donate," Middleton said. "I would say that standard is a little high."

Regardless of this rule, most chapters still require members to attempt donation, according to several chapter presidents.

"I wouldn't be able to count on them to do things if it weren't required," one chapter president said.

According to several Greek presidents, most chapters require members to either donate blood themselves or find a replacement donor who is not Greek. Chapters implement fines, threaten social privileges and revoke incentives for members who fail to meet the expectation.

"That's just being in a fraternity — people need the kick in the butt," another chapter president said. "You've got the people who are very driven, but then there are the people who will do everything they can to get out of it."

**Relying on Greek students**

According to the Mizzou Alumni Association's website, 6,237 total units of blood were collected during MU’s 2013 Homecoming blood drive, making it one of the largest
multiday drives in the nation. By contrast, in the 2014 spring Greek Week drive, 1,797 units of blood were donated, Basler said.

The goal of this year's Homecoming drive is 5,250 units, and the Red Cross is on pace to meet that, Jackson said Tuesday afternoon.

The Homecoming drive "puts a lot of pressure on Mizzou kids because we're the biggest blood drive every year, and we have to keep making sure Mizzou looks good," Holman said. "They put so much emphasis on it."

Each year before the blood drive, one impressive fact is often cited: "All of the blood from the drive is actually used before the kickoff of the (Homecoming) football game," Essner said.

More accurately, all of the blood from the drive is "expired" around the time of the football game's kickoff. Jackson said that assertion is only based on the expiration date of the blood donated, not whether it is actually used. "It's just a general rule of thumb based on the expiration dates of the blood," Jackson said. "Those are the talking points we get."

Although the number of units collected at the MU drive increases each year, the need for blood is decreasing because of decreasing demand for transfusions. Jackson confirmed that the demand for blood from local hospitals has declined. The local Red Cross has begun distributing blood to more hospitals in the region so the blood is not wasted, Jackson said.

According to Jackson, about 75 percent of the units donated in last year's drive were from Greek students. About 25 percent of the student body is in Greek life. Without blood from Greek students last year, the Red Cross might have come away with about 1,500 units.

The drive inspires a mixture of pride and resentment.

"I love the Mizzou blood drive because I love being forced to do things that I don't want to do against my own will," one fraternity member tweeted Monday.

But when contacted for this story, the student who posted the tweet said via email: "While I don't enjoy the blood drive, it is still for a good cause and I do not want to say anything that puts the Greek community in bad light on such a large platform."
"I definitely think it could all be simplified — instead of putting pressure on everyone, we could just encourage people to donate," Holman said. "I think we would get the same numbers no matter what — we could just get them differently."

Columbia hospitals preparing staff, updating plans after Dallas Ebola reports

By Jodie Jackson Jr.

Wednesday, October 15, 2014 at 11:00 am

Boone Hospital Center and University of Missouri Health Care are updating infection-control plans this week as the Centers for Disease Control and Prevention confirmed a second health care worker in Dallas has tested positive for the Ebola virus.

Local health officials also emphasized that the virus is difficult to transmit and that other diseases such as influenza pose more of an immediate threat.

The key is to be aware but not paralyzed,” said Michelle Crumby, manager of clinical quality, patient safety and infection prevention at Boone Hospital Center. She said influenza, enterovirus and MRSA, a highly contagious staph infection, are “thousands of times more common and can also be deadly.”

On Wednesday at University Hospital, nurses were receiving new personal protective gear that is reportedly more comfortable when worn for long periods of time. CDC officials have said that improper techniques used in removing contaminated gowns, gloves or masks likely contributed to the infection of two health workers in Dallas, where one patient died from Ebola on Oct. 8.

Stevan Whitt, chief medical officer at the University of Missouri Health System and associate dean for clinical affairs, said Wednesday morning that the system’s operational plan will be updated Thursday with recommendations made by health care workers who treated two Americans last month at Emory University Hospital in Atlanta.

Crumby said BJC HealthCare, which operates Boone Hospital Center through a lease with the Boone County Commission, is finalizing a systemwide preparedness plan to include Ebola protocol and response.

“We learn new information every day to make our response to this potentially devastating disease better,” she said. Specifically, as MU Health is doing, Boone Hospital and BJC are also focusing on proper procedures to remove potentially-contaminated personal protective gear.

Boone Hospital is also performing a “table top” exercise this week by going through the steps needed to care for a patient with symptoms or confirmed Ebola. Boone has posted signs requesting that anyone with possible Ebola symptoms disclose travel from West African countries. Nurses and other admission staff have been trained to screen immediately for travel history.
“We are prepared and capable,” Crumby said. “We have all of the facilities and equipment needed to care for patients with a variety of infectious diseases such as Ebola.”

Whitt said University Hospital as well as Women’s and Children’s Hospital have dedicated intensive care units “where we take care of serious and dangerous infections routinely.” Those ICUs would be used if either hospital has a patient with the Ebola virus. He said the MU Health system was “absolutely” prepared to treat Ebola patients.

He also said that the United States does not have a “natural reservoir” of Ebola and that the virus won’t likely gain a permanent foothold here.

Ebola spreads through direct contact with bodily fluids from an infected person showing symptoms. The World Health Organization said that the virus can survive for several hours on surfaces, so any object contaminated with bodily fluids can spread the disease.

“This is a very scary infection,” Crumby said, “but it is also limited in transmission possibilities.”

Stephen Gaither, public information officer at Truman Memorial Veterans Hospital, said the hospital has a work group of staff members from throughout the organization that has been meeting for two weeks to devise a plan for treating possible Ebola patients.

Gaither said the Veterans Health Administration will offer additional staff training “in the very near future.”

**COLUMBIA MISSOURIAN**

Grant to fund MU research about learning elementary mathematics

Wednesday, October 15, 2014 | 5:28 p.m. CDT; updated 5:37 p.m. CDT, Wednesday, October 15, 2014

BY SARAH KLOEPPLE

COLUMBIA — **MU will receive a $2.3 million grant to research how elementary school students learn mathematics based on teaching expertise.**

The grant comes from the National Science Foundation, and MU will receive the funds over the next four years. Barbara Reys, a curators' professor and Lois Knowles Faculty Fellow at the College of Education, said she hopes the study will address the problem of how to ensure that elementary school students have access to high quality mathematics instruction.

"I think there's been a lot of criticism of poor performance in mathematics, although it's risen over the last decade," she said. "But we're still not where we want to be."

Reys said elementary school teachers must be prepared to teach all subjects. The Missouri State Board of Education approved an Elementary Mathematics Specialist certificate in 2012.
"I think the research is clear that teachers who know mathematics well and understand how children learn mathematics promote the best learning," Reys said. "So it's important that elementary teachers have opportunities to deepen their understanding."

Currently, 100 teachers are training through the EMS program in Missouri, 13 of them at MU. Five of those 13 teachers work in Columbia Public Schools.

Tara Rucker, a second-grade teacher at Paxton Keeley Elementary School, has been teaching for eight years. She is in the EMS program at MU and plans to finish this summer.

"I think there are many layers and real-life applications to mathematics," Rucker said. "Often the focus of math instruction is learning facts or learning procedures to get the correct answer rather than sense-making. The EMS program has urged me to think more about how to help students make sense of mathematical ideas and concepts."

Reys and her research team are recruiting schools in Missouri, ones that have EMS-certified teachers and ones that are working toward it, to participate in the study, which will be carried out during the 2015-16 and 2016-17 school years.

"I think elementary teachers consider their most important subject to be reading, so often they specialize in reading instruction," Reys said. "I think the second most important is mathematics."

MU gets nearly $2.3M grant to study math education

THE ASSOCIATED PRESS

COLUMBIA, MO. - The University of Missouri is using a four-year grant of nearly $2.3 million to study elementary school math education.

The grant to the Columbia campus comes from the National Science Foundation.
In 2012, the Missouri State Board of Education approved a certificate that recognizes elementary school teachers who have received extra math training. The University of Missouri and four other Missouri institutions began offering the 24-credit program in 2013.

The research will assign teachers with the math certificates to different classroom settings and study the effects. Some teachers will be assigned two or more sections of mathematics, while others will remain in self-contained classrooms and teach all subjects to their students.

The researchers currently are recruiting school districts and teachers to participate.

Read more here: http://www.kansascity.com/news/state/missouri/article2893973.html#storylink=cpy

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Medical breakthrough

Maybe the twain shall meet after all

By Henry J. Waters III

Wednesday, October 15, 2014 at 11:30 am Comments (2)

On Monday, the University of Missouri Health System and Columbia Surgical Associates announced a collaboration that eventually could become a pattern for broader merging of local health care delivery.

For a number of years, some of us have imagined an integrated local health care delivery system more able to compete with larger medical centers. We have the makings here with MU Health and a robust private sector built around Boone Hospital Center. Two large, high-quality hospitals, hundreds of practicing physicians and, to boot, MU’s School of Medicine. The best of private and public practice plus academic medicine.

Why not collaborate instead of competing internally? Why not strengthen our health delivery apparatus instead of weakening it with internecine warfare?

This proposition makes sense on paper, but separate operators each seeking independent success always wanted to go it alone, succeeding competitively rather than submitting to some sort of blended arrangement. But now, changes in the nature of the health care system make providers think again — at least in small ways at the beginning.

Columbia Surgical Associates is an independent group of physicians operating primarily in Boone Hospital. Neither CSA nor MU Health has the resources to employ certain specialty practitioners, so they decided it makes sense to share.

CSA is careful to retain its own “brand” on the theory it does not want to confuse patients. The beginnings of collaboration will be as small as possible while still gaining the advantage of scale, but the very idea makes potential sense in other aspects of delivery.

Does it make sense for local hospitals to have separate laundry operations and duplicate expensive high-tech testing machines, to name only two areas of possible collaboration? Well, no, but as long as the parties could operate separately and still make money, one can see why they resisted merger.

MU and CSA principals think it might be better to work through physicians than facility managers. Docs can and do choose where they want to operate. MU docs work at Boone and vice versa. Some local private doctors teach at the medical center. But this interaction only scratches the surface.

With more active collaboration, facilities could be better used and costs could be shaved. A blended operation could present a stronger counter to nearby cities, where too many cases must be sent now.

One day more advanced merger will occur, and we will look back on this week as a little breakthrough moment.
MU Health Care and Columbia Surgical Associates to affiliate

October 15, 2014  BY Carolin Lehmann

Columbia Surgical Associates and the University of Missouri Health System will affiliate to expand access to health care for patients in central Missouri, effective Jan. 1, 2015.

MU Health Care employs more than 500 university physicians, including approximately 140 specialty surgeons. Columbia Surgical Associates is comprised of 10 surgeons specializing in general, bariatric, vascular, colorectal and breast cancer surgery, along with 35 other health professionals, support and administrative staff.

“Health care today requires collaboration across multiple hospitals and clinics, medical specialists and geographic boundaries,” said Mitch Wasden, MU Health Care chief executive officer and chief operating officer. “During the past 18 months, Columbia Surgical Associates and the MU Health System have been discussing ways we could work together to advance health care in central Missouri.”

Columbia Surgical Associates has provided surgical care in central Missouri for more than 50 years. Its founder, E.J. “Jack” Schewe Jr., completed his surgical training at Ellis Fischel State Cancer Hospital and served as chief surgeon at Ellis from 1956 to 1961.

“Columbia Surgical Associates and MU Health Care share a common mission of providing world-class, patient-centered care,” said Walter Peters, president and senior partner of Columbia Surgical Associates. “In this new affiliation, Columbia Surgical Associates and MU Health Care will be collaborating on patient-centered care across patient populations and surgical specialties.” CSA physicians perform many surgical procedures at Boone Hospital Center. The new affiliation means they will also have privileges at University Hospital, MU Women’s and Children’s Hospital and other MU Health Care facilities.

“For years, Columbia’s health care community has discussed ways to build bridges between community and university physicians and strengthen Columbia’s position as a destination for excellent surgical care,” Peters said. “Today’s announcement is historic because of this groundbreaking ‘town-gown’ affiliation. It will benefit CSA patients, who will now have more choices about where they want to receive care.”
UPDATE: Missouri men's basketball freshmen expected to be charged

Wednesday, October 15, 2014 | 6:43 p.m. CDT
BY MITCHELL FERMAN

COLUMBIA – Missouri men's basketball freshmen D'Angelo Allen and Jakeenan Gant are expected to be charged this week after a September arrest in Columbia, according to Boone County assistant prosecutor Jessica Meredith.

Allen, Gant and a 22-year-old man were arrested by MU police on suspicion of third-degree assault for a fight on Sept. 14 near Eighth and Elm streets by Peace Park, according to police.

They were issued tickets shortly after being arrested Sept. 14 and not charged. Meredith said charges of peace disturbance for fighting are expected to be filed this week. Peace disturbance is a class B misdemeanor.

Allen and Gant were initially suspended from team activities, but coach Kim Anderson said on Oct. 1 that the players returned to team workouts after they completed community service, character development and conditioning for the program. Both players competed in Missouri's Black and Gold game Tuesday night.

U. of I. revamping admissions date after record deferrals

The University of Illinois at Urbana-Champaign has changed its admissions system with the hope that no more students will feel like B-list applicants, invited to join the class only after getting a second look.

In an effort to make students from Illinois feel more welcomed, the U. of I. has moved to a single admissions date after last year deferring thousands of early applicants until a later time. While some high school seniors may be disappointed not to get a decision until February, the university says the system will be better overall.
"We hope this is a more humane admissions process that doesn't create frustration or anxiety," said Keith Marshall, the U. of I.'s interim director of enrollment management. "The belief is that it will send this clear message that you are wanted."

The message is crucial because more Illinois students who apply to the state's flagship public university are choosing to go elsewhere, school officials said. Only about 42 percent of the applicants from Illinois who were admitted to the U. of I. last year decided to attend — a record low yield. The university's overall yield, which includes nonresident and international students, was 35 percent.

Many of the students who ultimately rejected Illinois had an admissions circumstance similar to that of Naperville resident James Steimle, who applied to the U. of I. College of Business last fall with a 3.9 grade-point average, a stellar ACT score and a long list of extracurricular activities.

But in December, Steimle, 18, learned that his application had been deferred. By the time the university accepted him in February to the general studies program and in April to the College of Business, it was too little, too late.

Steimle told the U. of I. he had accepted an offer from Indiana University's business school, which had admitted him within weeks of receiving his application. The emails and phone call from the U. of I. didn't change his mind.

In an effort to enroll students such as Steimle, the U. of I. won't defer any applicants this year. Instead of having two admissions periods, the university will have one application deadline — Dec. 1 — and one universal notification date — Feb. 13. The goal: No students will feel like second-tier applicants, and more Illinois students will choose Illinois.

"If U. of I. took this long, why should I go for them if I was a last choice?" said Steimle, who graduated from Naperville Central High School. "It definitely made me feel second-class. That is the similar opinion of a lot of people."

Last fall, the U. of I. deferred about 6,000 applicants from the first applicant pool, the most ever. It ultimately accepted more than half of them.

"It was causing confusion among them and also sending an unintended message that they weren't as valued," Marshall said. "We were worried that as the number of deferrals increased, we weren't sending the message that we want them here at the university."

While some students and their families who had hoped for an admissions decision before the end of the year might be disappointed, Marshall said he thinks the new system will be better overall.

In the face of declining in-state enrollment, the U. of I. this year is focusing its efforts on making applicants from Illinois feel wanted, Marshall said. The number of Illinois freshmen at the state's flagship public university has dropped precipitously in recent years — to 4,974 this fall, from 6,385 in 2006.

Some of the decline has been deliberate, as the university has enrolled more international students. But the drop in state students also has been steeper than intended.

While the university has received a consistent number of applications from Illinois students (roughly 17,000) and has admitted about the same number of them (11,000 to 12,000), the number choosing to enroll has declined in recent years as students are lured out of state, in large part by better financial aid packages. At the University of Missouri, for example, about 20 percent of the freshman class is from Illinois.

Admissions policies vary by university. Highly competitive schools typically have two application deadlines, with students who apply early finding out by the end of the year and other students learning of a decision by mid-March or April. Less competitive institutions have rolling admissions and admit or deny students as they apply.
or example, early decision applicants to Northwestern University get an answer Dec. 15, while later applicants find out in early April. Applicants to the University of Iowa learn of a decision within two days of the school receiving the completed application. The University of Michigan gives applicants who apply by Nov. 1 a decision by Dec. 24 (admit, deny or defer), and then admits others on a rolling basis until April.

In past years, U. of I. applicants had two options: Students who applied in November got a decision in mid-December, while those who applied by Jan. 1 got a decision in mid-February. In most of the past five years, more students applied by the first deadline than the second, according to data provided by the university.

Starting this year, all students will get a decision on the same day in February. To receive priority for the honors program, students must apply by Nov. 1.

Marshall said the U. of I.'s two-stage admissions system became challenging as applications increased to more than 35,000 last year, driven in large part by international students. Moving to a single admissions deadline, he said, will give the university time "for a thoughtful, thorough review of the entire applicant pool."

"When we did it in two bunches, you didn't get to see the entire pool at once," Marshall said.

As a result, the university deferred many applicants, such as Steimle, until it had a broader picture of its applicant pool. The U. of I. deferred 5,971 early applicants last year, up from 3,018 in 2010, according to the university.

About 55 percent of the deferred applicants were eventually admitted, data show.

Marshall said that deferrals led to confusion, with 2,000 to 2,500 students calling the university when they got one last year.

"Almost all had the same question: 'What does this mean?'" he said. "We feel this will eliminate that confusion."

Some college consultants and high school guidance counselors, however, are concerned that it will create other problems.

Laurie Weingarten, a private consultant with One-Stop College Counseling in New Jersey, called the change "a bad thing" both for students who want a decision earlier and for the U. of I., since some students will pick another school before February.

"Because students will be hearing from those other schools first, those schools will have an advantage," Weingarten said. "Two months later, when Illinois decides to let them in, they have already been marketed to by other colleges where they got in. Some kids will apply and wait until February, but by the time February rolls around, many will have accepted at another school."

ames Conroy, a college counselor at New Trier Township High School in Winnetka, also said he wishes students could find out earlier than February. With the later date, students will likely apply to additional schools.

"If kids want U. of I. for their first choice, if they can hear earlier, we don't have to go through other applications," Conroy said. "Now they are applying to other schools."

However, Conroy said he understands why the U. of I. made the change.

"What happened last year was that when they deferred so many kids, the kids lost interest in U. of I. and found other places," he said.
That's what happened with Steimle, the Naperville student who is now a freshman at Indiana. Not only did he get accepted quickly to Indiana, he also received a $5,000 merit scholarship, he said. By the time the U. of I. accepted him, he had already submitted a housing deposit to Indiana.

Steimle said the new system is better than deferring so many applicants.

"It is a step in the right direction," he said. "I was flabbergasted they waited so long to let me in."

*Daily Mail*

**Why you should eat bacon and eggs for breakfast: Starting the day with a high-protein meal reduces cravings later on**

Good news for fans of a fry up. Eating a full English breakfast can stop you piling on the pounds, according to new research.

Experts say a breakfast rich in protein such as bacon, sausages, beans and eggs boosts levels of a chemical in the brain which regulates foot intake and cravings.

But people who skip breakfast have lower levels of the chemical, which can lead to overeating and weight gain.

A study by U.S. researchers found teenagers who skipped breakfast were prone to obesity.

But those who ate a protein-rich breakfast were found to have less food cravings and were less likely to overeat later in the day.

They said eating breakfast, particularly a high-protein one, increases levels of the brain chemical dopamine, the 'feel-good' messenger which is associated with feelings of reward.

Understanding the brain chemical and its role in food cravings could lead to improvements in obesity prevention and treatment, they added.

*The study's leader, Professor Heather Leidy, of the University of Missouri-Columbia, said:*

'Our research showed people experience a dramatic decline in cravings for sweet foods when they eat breakfast.'

'However, breakfasts that are high in protein also reduced cravings for savoury - or high-fat - foods.'
'On the other hand, if breakfast is skipped, these cravings continue to rise throughout the day.'

Professor Leidy studied the effects of different breakfasts on participants' levels of dopamine, which moderates impulses and reward, including food cravings.

Eating initiates a release of dopamine, which stimulates feelings of reward.

The reward response is an important part of eating because it helps to regulate how much food the person eats, researchers said.

Professor Leidy explained: 'Dopamine levels are blunted in individuals who are overweight or obese, which means it takes much more stimulation - or food - to elicit feelings of reward; we saw similar responses within breakfast-skippers.

To counteract the tendencies to overeat and to prevent weight gain that occurs as a result of overeating, we tried to identify dietary behaviours that provide these feelings of reward while reducing cravings for high-fat foods.

'Eating breakfast, particularly a breakfast high in protein, seems to do that.'

Participants in the study were young women with an average age of 19, but the researchers said the findings would apply to most adults.

Professor Leidy said: 'People are skipping breakfast more frequently, which is associated with food cravings, overeating and obesity.

'It used to be that nearly 100 percent of American adults, kids and teens were eating breakfast, but over the last 50 years, we have seen a decrease in eating frequency and an increase in obesity.'

The findings are published in the Nutrition Journal.

Ebola highlights the link between human, wildlife health

7 hours ago • by Dr. Sharon Deem and Lise Saffran

Dr. Sharon Deem is director of the St. Louis Zoo Institute for Conservation Medicine. She is an epidemiologist and veterinarian with experience working on One Health projects in over 30 countries. Lise Saffran is director of the University of Missouri Master of Public Health Program and holds master’s degrees in public health and fine arts.
The news of Ebola in Dallas has crystallized fears of this deadly infectious disease. Ebola has decimated communities in West Africa, killing over 4,000 of the 8,000 infected and bringing overburdened health systems to the brink of collapse. Though the international response was slow, U.S. soldiers, doctors and nurses are now rushing to help fight what the World Health Organization calls the largest and most complex Ebola outbreak in history. In the U.S., misinformation is widespread, provoking fears. Even before the news from Dallas, one in four Americans worried about a large outbreak in the U.S. How realistic are these fears? Should we in Missouri be concerned?

Ebola is hardly as unpredictable or mysterious as it may seem to those just now hearing about it. The first known outbreak occurred in 1976 near the Ebola River in the Democratic Republic of the Congo. After a 15-year absence, Ebola re-emerged in 1994 when an anthropologist became ill after performing a necropsy (the animal equivalent to an autopsy) on a chimpanzee. Following this first case, other people handling animal carcasses also became ill with Ebola.

Though it is still uncertain how Ebola was first transmitted to humans in the current outbreak, we do know that Ebola is a zoonotic disease — a disease transmitted between animals and humans. We also know what is driving the increase in zoonotic diseases, like Ebola. Humans are moving into wilderness areas and eating wild animals at an unsustainable level. The current Ebola outbreak, for instance, most likely began with someone infected during the hunting, butchering or eating of a fruit bat carrying the virus.

The interaction between animals and humans — increasingly in stressed environments — raises the stakes across the animal kingdom in regard to health impacts associated with environmental damage. The more we expand into terrestrial and aquatic environments, the more we alter natural habitats to extract resources, intensify food production and move people and their animals, the greater the potential for the spread of deadly diseases.

Indeed, Ebola itself has been disastrous for some wild animal populations during the past decades. A new study shows that it will kill up to 80 percent of all gorillas in its path; Ebola, along with illegal hunting, is driving these animals toward extinction. In fact, tens of thousands of primates are believed to have died from the disease in recent decades. We can no longer afford to think of human health as separate from animal and environmental health. We need a comprehensive approach if we are to effectively manage emerging wildlife and human health issues.

That approach is One Health. This is a concept that integrates human, animal and environmental health with multidisciplinary teams working together to better understand the causes and consequences of environmental change. An example is the case of West Nile virus: Zoo veterinarians helped to first isolate the virus, opening the door to work with public health scientists to develop effective prevention programs for both humans and animals alike. Environmental, human and animal health care providers on the local, state and national levels comprise a public health infrastructure that, when working well, can seem invisible.
Invisible or not, a holistic approach, like One Health, is as necessary as bridges and water treatment plants. Like these structures, it requires maintenance. So are we maintaining this crucial public health infrastructure? All over the U.S., public health budgets are being drastically cut. Federal funding has remained flat. Missouri is dead last in the nation for per capita public health spending. According to Trust for America’s Health, Missouri spends only $5.86 per resident, far below the national median of $27.49.

The Ebola crisis offers an opportunity to raise awareness about the ways humans and wildlife share changing ecosystems. While we need to better understand zoonotic diseases, we also must accept and address the role of humans in their development. Emerging infectious diseases, like Ebola, increasingly challenge wildlife conservation efforts and public health capabilities. Now that Ebola has entered the U.S., it is imperative that we all work together to deal with Ebola if it does arrive in Missouri. At the very least, we must be prepared to manage the consequences should prevention fail.

COLUMBIA MISSOURIAN

Allies for Inclusion promotes an awareness of disability issues

Wednesday, October 15, 2014 | 9:22 p.m. CDT; updated 6:52 a.m. CDT, Thursday, October 16, 2014

BY MEGAN BEDFORD

COLUMBIA — What do Donald Trump, David Beckham and Cameron Diaz all have in common?

**Obsessive compulsive disorder**, according to an interactive computer quiz at Allies for Inclusion: The Ability Exhibit, the centerpiece for MU's Celebrate Ability Week held Wednesday through Thursday at Memorial Student Union.

**OCD is one of the many disabilities or disorders represented at the exhibit, which focuses on educating the public on how to include, respect and comfort those with disabilities while promoting the awareness of disability issues, according to the MU events website.**

"People still function with a lot of misunderstandings, and so an exhibit like this, I think, helps to shake some of those concepts and helps people to rethink what they understand," said Barbara Hammer, the director of the MU Disability Center. "I love the fact that the exhibit gives examples of people with disabilities who really do not represent what you think of when you think of disability."
Some of those people include Aimee Mullins, an athlete, actor and activist for people with disabilities, whose TED Talk about living with prosthetic limbs is presented as part of the exhibit, and Allison Galoob, an Olympic soccer player who is featured in a video talking about her team's gold medal win at the 2009 Deaflympics in Taipei, Taiwan. The traveling exhibit started as a project by graduate students at Saint Louis University in the course disability in higher education and society, taught by Karen Myers. The exhibit debuted at SLU on Oct. 27, 2010, to celebrate the 20th anniversary of the Americans with Disabilities Act.

Visitors to the exhibit can choose from a variety of activities intended to draw awareness to the ways in which disabilities are experienced and discussed. In one activity, a table is set up with signs that are labeled with an array of disabilities. In front of each sign is a bowl in which guests can place a bead if they know someone who has the disability labeled on the sign.

Another activity involves panels that have the incorrect labeling terms on them for people with certain disabilities.

Brad Jacobson participated in this activity Wednesday morning. He saw a panel that had the word "crippled" on it, lifted the panel and revealed the term "person who uses a prosthetic."

Jacobson said he used to work with students with disabilities in Columbia and thinks knowing the correct terminology when talking to someone with a disability is essential.

"Just having an awareness for the community is really important," Jacobson said.

When volunteer Gerald Morgan, first started working as an architect at MU in the early '90s, he said he didn't really know how to talk to people with disabilities. Today, as a construction manager for MU Campus Facilities, his job is to bring MU facilities into compliance with the Americans with Disabilities Act by making them more accessible for people with disabilities. The job taught him how to interact with people with disabilities.

"My interaction needed to be the same with everybody — not look at people with disabilities differently than people who don’t have disabilities," Morgan said.

He thinks that MU students could learn a lot from attending Allies for Inclusion.

"There's so much information here that you wouldn't get on a normal basis," Morgan said. "There is that opportunity now for a student to learn and become a little more comfortable dealing with individuals that may be a little bit different than them."