

Faculty Senate Meeting Minutes
September 9, 2008
4:30-6:00 p.m.

Anschutz Medical Campus, Academic Office 1 Building, Room #7000

Call to order and welcome:

President: Vikram Durairaj (Oculoplastics)
President Elect: Bob Low (Pathology)
Secretary: Shandra Wilson (Urology)
Past President "Emeritus": Colleen Conry (Family Medicine)

The priorities for Faculty Senate meetings are:

Pharma Policy
Professionalism
Smoking Ban
Task Force for promotion

Introduction and welcome of new senators

Discussion: Conflict of Interest – Angela Wishon (Assistant Vice Chancellor, Regulatory Compliance)

A Question and Answer Sheet for Faculty and Representatives has been verified and distributed widely. On Sept. 23rd, 4-5 p.m, a forum will be held at the Ben Nighthorse Campbell Auditorium. Faculty can come and help work out a detailed policy. We may have an amnesty day where supplies are donated to those in need. Ms. Wishon is willing to take phone calls from pharma or other docs regarding the policy. Health fares for patients we serve are still thought to be reasonable. With regard to the upcoming School of Medicine Gala showcasing University departments, funding from industry for tables will be okay. Clarification: gift giving is not to be to individuals to influence practice patterns. Unrestricted grants to the department or the school are reasonable. Text books to residents are not allowed. Residents in academic settings are under the same policy. Support and gift giving is still reasonable, just not to influence practice. For specific questions, email Angela Wishon.

Presentation: Medical Student Applicants Norma Wagoner (Associate Dean for Student Admissions)

CU applicants 2008: 41,467 applied, which is down for the first time from 42,315 in 2006. Medical school slots, meanwhile, are increasing 18,059 in 2007 up from 17,758 in 2006. CU specifically has increased from 134 to 144 to 154 slots over the last few years. Grand Junction may open medical school as well. 11,500 slots are available in osteopathy as well.

Statistics for the University of Colorado SOM 2008 class are as follows:

156 student class
3520 applicants
566 came for interviews
76% come from Universities in Colorado

50% men, 50% women
Median MCAT 32 (national average is 30)
Median GPR 3.7 (national average is 3.5)

Student Debt:

Cost of resident/year at CU: \$48,000
Cost of non-resident: \$72,831
84% of students have debt over \$100,000 on graduation
20% of students strongly choose fellowship based on debt on graduation
30% of students moderately choose fellowship based on debt on graduation

Some students from Colorado choose other places to go to medical school.
University of Colorado does not have a rich scholarship program (77/77 in nation for outside funding).

Dean's Update: Associate Dean Steven Lowenstein

Neurology and Ob-Gyn chair searches continue.
Cancer Center Director search continues – Second visit for David Carbone soon.
Associate Dean for Alumni Affairs and Diversity search continues.
Farewell to Regina Kilkenny – last day Oct. 3rd

What's new in your department?

New addition to senate meetings: 5 minute segments from the senators outlining what is going on in their departments. Ophthalmology, Orthopedics, and ENT will be next meeting.

The meeting was adjourned at 5:30 p.m.

Faculty Senate Meeting Minutes
October 14, 2008
4:30-6:00 p.m.
Anschutz Medical Campus,
Academic Office 1 Building, Room #7000

I. Greetings – President Vikram Durairaj

II. Discussion Items

- A. The minutes from the September 9, 2008, meeting, were unanimously approved.
- B. **Dean's Comments –**
- Status of searches and affiliations
 - The Neurology Chair search committee has been charged.
 - The Ob/Gyn Chair search are now inviting candidates to come to campus.
 - The Pharmacology Chair, Dr. Tabakoff, has announced that he will step down. An interim chair has not yet been selected.
 - The Associate Dean for Diversity and Inclusion search is continuing. Two finalists have been selected, and they are in the process of interviewing with constituency groups.
 - The Associate Dean for Alumni Affairs search is in process.
 - The search for Regina Kilkenny's replacement is in the final stages and will be wrapped up by the first of next week.
 - The Cancer Center Director search is still underway. An RFP will be sent out for a search firm to conduct this search. Normally a search firm is not used, but the difficulty of this search has made it necessary to use a search firm. This will be the first use of a search firm for a chair or director in 18 years.
 - The search for the UPI Medical Director is still in process.
 - With regard to the VA, a \$560 million appropriation will be put through Congress. There is no news on whether or not VA research will be joined to the University utilizing 40,000 square feet in the next research building, but the economy and outcome of the support package is causing many to worry about the projection to build Research 3. As soon as the last person moves into Research 2, they will be doing an assessment of productivity of research space that we are currently using. They will take a look at productivity of space and decide then on how big of a

building we will need. It is not yet clear if Amendment 59 passes, what will happen with the budget. In many ways, it is a good time to build a new building, as was seen by the work to build the new UPI building. We are holding a portion of the general fund in case we have a rescission of funds.

- With regard to the Gala, it was terrific and received a lot of good press. The exhibits were fabulous, and the day that was devoted to high school students was a “treasure.” There have been discussions regarding possibly having a weekend where high school pre-med students can come and view the exhibits. The excitement regarding the exhibits was huge.

- C. **LCME Updates** – Sr. Associate Dean Robert Feinstein introduced Dr. Celia Kaye, who provided an update on the LCME site visit. It’s important that faculty be present on campus during the site visit as LCME may want to speak with different faculty. Dr. Kaye provided an update today about the Curriculum Committee, which had the responsibility of outlining the process, content and how the new curriculum is doing. The curriculum is no longer department based, with blocks instead of courses. Essentially, the new curriculum was put in place because at the last LCME site visit, we were told to put a new curriculum in place. The committee went through educational standards, with a huge amount of outcome data. Dr. Kaye will not go into the outcome data today as her intent is to only discuss the process.

The first eight standards were about broad goals; Standards 10-23 were about specific curricular content; Standards 24-25 were about residents and faculty as teachers; Standards 26-32 were about the evaluation of students; Standards 33-38 were about institutional responsibility, which is the central structure that looks at the whole curriculum; and Standards 46-47 were about outcome data, including student evaluations. They looked at all of the standards and made a report. They then went through everything to find strengths, weaknesses and areas of transition. Comparing today to where we were in 2002, which was the last site visit, the following were noted as strengths:

1. The Dean is stable in his position
2. Research
3. Students and faculty
4. Practice plan

Areas of concern from 2002 included:

1. Lack of objectives, which is now a strength
2. Life-long learning, which is now an area of transition, with full implementation of the curriculum in May 2009

3. Lack of oversight in resident teaching, which is now an area of transition
4. Responsibility for curriculum oversight, which is now a strength
5. Evaluation and outcomes, which is now a strength

Now, in 2008, additional strengths include:

1. Central oversight
2. The curriculum now provides a general professional education
3. LCME now notified of major modifications. The curriculum now includes electives, the teaching of medical ethics, and evaluation.

Items that are considered in transition in 2008, which are not considered a weakness or a concern, include:

1. Everyone must be aware of the objectives, which are on-line, and should be disseminated to faculty and new students.
2. There should be a comparable educational experience at all sites, which is still in transition.
3. The curriculum must include behavioral and socioeconomic subjects.
4. Students must be prepared to address common societal problems, and this is still an area of transition.
5. Students must be evaluated in the middle of the course, and we are very close to accomplishing this.

Dr. Kaye concluded that, overall, curriculum reform has been very successful, as has been reported by faculty and administrators, but we are bound to have a few citations during the site visit.

- D. **Faculty Development Seminar Website Update** – Associate Dean Steven Lowenstein provided information regarding the new Faculty Development Seminar Website, which was developed to provide a way to promote informational seminars, as well as a way to easily sign up for multiple seminars. There are currently three seminars to sign up for, but many more will be added in the future. The website is located at: <http://som-dev.uchsc.edu/faculty/>.
- E. **AAMC Faculty Satisfaction Survey Information** – Associate Dean Steven Lowenstein provided information regarding a Faculty Satisfaction Survey, called Faculty Forward. AAMC is looking for 30 medical schools to pilot this survey, which was developed from the identification of attrition information, which would cost \$25,000 per year for three years to participate. The first year would entail

participation in the Job Satisfaction Survey. Years two and three would involve additional benchmarking reports and include workshops for chairs. In addition, they would pay for attendance at the GFA Annual Conference. They would provide customized on-site visits. We are looking for feedback from faculty about whether they would participate in the surveys (which would be essential), and whether they felt it was worth our time and money to participate. One senator asked what we would have to gain by participation? Dr. Lowenstein responded that in the first year, we could utilize the survey; during the second and third years, it was still “murky” as to what we would gain from it. He added that unless the majority of faculty are interested in participation, the Dean would not be interested in investing in the project. The question was asked whether other institutions have found participation valuable? Dr. Lowenstein was unsure whether any other institutions had agreed to do it, but added that one advantage of the program would be that for \$75,000 we could find out where we were falling short within the institution. Senators were asked to take this information back to their departments, and if they felt positively about this project, to send Dr. Lowenstein an email.

F. Departmental Updates –

- Otolaryngology – Dr. John Song provided an update of the Department of Otolaryngology, which included detailed information about current faculty that practice at TCH, DHMC, VA, Kaiser/St. Joe’s, and UCH. The total work RVUs for 2008 were 75,631. Recruitment of research faculty from the University of Oregon has boosted their research productivity. Dr. Song provided detailed information about their ongoing research projects, and added that they have the most successful mid-winter meeting in the country, which has 200 participants and is very important for education and training.
- Orthopedics – Dr. Michelle Wolcott provided an update of the Department of Orthopedics, commenting that they will be moving their Sports Medicine Center to I-25 and Colorado Boulevard, which should be an exciting move. In addition, the North Ambulatory Center will have a sports ambulatory site. Dr. Frank Chang was awarded the Gait Society Award, and will be president of the Gait Society.

The meeting adjourned at 6:00 p.m.

Faculty Senate Meeting Minutes
November 11, 2008
4:30-6:00 p.m.
Anschutz Medical Campus,
Academic Office 1 Building, Room #7000

- I. The meeting was called to order at 4:30 p.m. by President-Elect Robert Low.

- II. **Discussion Items**
 - A. The minutes from the October 14, 2008, meeting were unanimously approved.
 - B. Comments from Dean Krugman
 - For the most part, the status is the same for most of the searches that are underway.
 - A budget has been released, which is certain to be ignored by the JBC. It's not yet clear how the economic turndown will affect next year's budget. There may be a rescission of state funds.
 - Representative Bernie Buescher's defeat in Mesa County will probably have a negative effect on our plans to open a Western Slope Clinical Branch Campus in Grand Junction as he served as chair of the JBC and was an advocate for the new campus. Dean Krugman will be meeting with individuals on the Western Slope this Thursday and Friday and will have a better idea of the impact.
 - There was only one applicant for the Associate Dean for Alumni Affairs, who is a terrific person. The candidate is a physician in the community and has been supporting the School for years. An offer has been extended, and it is hoped that he will start January 1st. His name will be released if he accepts the offer.
 - It is hoped that we will have final interviews for the Associate Dean for Diversity and Inclusion position in the next several weeks.
 - With regard to the Pharmacology Chair search, the dean has spoken with Andrew Thorburn about serving as interim chair. They will not be starting a search committee until later on in the academic year.
 - C. **LCME Summary**
 1. A brief summary was provided about the strengths and problems of our medical school from our review in 2002.

2. General strengths included quality of graduate students, the dean's role in the medical school, organ-based curriculum, core competency documentation, office of affairs, tenure track for faculty with well-published promotion criteria, and the new AMC campus facilities.

3. General problems which are being addressed include student indebtedness, lack of immediate feedback for students, lack of mentorship, inadequate student study space, professionalism of medical professionals/student mistreatment (a committee may be formed to formalize evaluation of this in the future per Dr. Feinstein), lack of diversity, long-term financial stability

A motion to accept LCME self study report was made and seconded. The Faculty Senate then voted unanimously in favor of approving the LCME Executive Summary.

- D. The decision was made to postpone the smoking ban discussion until next month.
- E. Departmental updates were provided by senate members Bob Evans (pathology) and Scott Oliver (Ophthalmology)
1. Pathology continues to grow and has recruited multiple, talented, funded new clinical researchers and has had a recent member honored as "Pathologist of the Year" (Ron Lepoff).
 2. Ophthalmology was named one of the top 10 programs in the country this year for the first time. The department continues to grow in terms of faculty, and last year the department logged over 40,000 visits. With the rapid and expected continued growth of this clinical and research enterprise, the facilities will need to expand either in the Lion's Eye Building or in satellite centers.
 3. Emergency Medicine and Microbiology were elected for next month's update.
- F. The SOM strategic plan reviewed. The plan includes clinical care, research, community service, and education, with an emphasis on improving in national recognition and fund donation. The plan will be slowly implemented from the "top down."
A motion to accept the SOM Strategic Plan was made and seconded. The Faculty Senate then voted unanimously in favor of approving the SOM Strategic Plan.
- G. The meeting was adjourned at 5:45 p.m.

**FACULTY SENATE
SCHOOL OF MEDICINE
Meeting Minutes
December 9, 2008**

I. Greetings – President Vikram Durairaj

II. Discussion Items

- Minutes from the November 11, 2008, meeting were approved
- Dean's Comments –
 - Reminder: State of the School address is this Thursday
 - OB/Gyn chair search continues
 - One could not move
 - Second took a job at Pittsburg
 - Interviews with third are ongoing
 - Search firm has been hired
 - The chair of pharmacology has stepped down and Bob Murphy will be interim chair
 - Internal appointments in dean office continue
 - With regard to the recruitment of the Linda Crnic Center director, the top candidate is currently chair of Neurology at Stanford. Administratively there have been some hitches, but things appear to be on track for starting in February, 2009. He has a subspecialty interest in Down's Syndrome. He wishes to have tenure, as he does at Stanford, which would need to go through the Regents.
- New Post-Doc Policy Discussion – Dr. John Freed
 - AAMC Recommendations reviewed
 - Previously UCD had post-docs and fellows who did same job but for different pay and benefits, and they did not have formal regulation of performance, both of which were labor code violations. Thus we discussed the framework for the postdoctoral research.
 - This new policy applies to the Denver campus as well.
 - Guidelines have been approved by the executive committee. The goal is to make UCD faculty aware of the new policy.
 - The policy will defer to GME guidelines for those who are both doing clinical research as well as basic science research.
 - Exceptions will be made on a case-by-case basis.
- Smoking Ban Discussion – President Vikram Durairaj
 - UCH and Children's Hospital have smoking ban, consideration is for the entire campus to adopt policy as well; specific point is in the outside environment.
 - The chancellor has asked the senate to discuss the issue as the Regents would like to consider a campus-wide ban.
 - The issue of insurance coverage was brought up, which is variable, but covered by the 3 largest carriers in Colorado. Colorado Quit Line with access to nicotine patches is available to all Colorado residents.
 - Dr. Arnold Levinson in Public Health reminds us that the average smoker needs to quit 7-14 times before being successfully and points out

that to make a completely smoke-free campus helps a smoker to quit and improves the overall health of the employees. He also pointed out that smoking is a privilege, not necessarily a right. He pointed out that the Department of Public Health eliminated tobacco inside and out since this was part of their overall mission. He also included the concept of designated quitting areas which may be intertwined with the smoking areas as 70% of quitters are ambivalent about smoking and might be amenable to quitting. He described kiosks or booths that could be manned where referrals could be made to the quit line which provides 5 counseling sessions with free nicotine patches and has the 2nd highest level in the country (9% of smokers are drawn in Colorado each year). He also mentioned that smoking is more than an addiction. There are 14 other dimensions of dependence besides nicotine dependence, and points out that 90% of people who quit, do so without the aids to mitigate nicotine addiction.

- Complaints will increase, as they have already.
 - Dr. Vikram Durairaj points out that nicotine addiction is as strong as opiate addiction and that there are personal liberties at stake.
 - Dr. Pat Bosque mentioned that it is difficult to know how far this would go and where this would be stopped and that there is little data that smoking outside is strongly harmful to others.
 - Enforcement was discussed briefly and if accepted will need to be discussed further by the Regents as it will become a campus-wide issue, although Dr. Levinson states that this largely becomes policed by the people of the campus.
 - A comment was made about this being less of a personal view, but being more of leadership issue about healthcare and education as well as a message about the mission of our campus to promote good health. An emphasis was made on helping smokers to quit during transition
 - Comment made by a medical student representative that this is already strongly accepted by the School of Medicine students.
 - Steve Lowenstein drafted and presented a resolution for support of a smoke-free campus, and an informal “straw-poll” vote found 29 for and 2 against and 3 abstaining.
 - Email poll of senators will take place this week
- Departmental Updates – Due to the length of the meeting, the departmental updates were postponed until next month.

The meeting was adjourned at 5:45 p.m.

**FACULTY SENATE
SCHOOL OF MEDICINE
Meeting Minutes
January 13, 2009**

- I. Approval of minutes from prior meeting
- II. Comments from the Dean
 - a. Budget cuts from the state due to general deficit, 20-30% of appropriations expected to be lost. High indebtedness of current medical students and downstream effects of this debt at this public University noted. Tobacco funds may also be at risk. Prior budget crises reviewed where salary freezes were in order for 3 years. Salary freezes not expected this year.
 - b. OB chair search continues. Three additional candidates visiting soon.
 - c. Neurology chair search continues as well. Candidates are applying.
 - d. Pharmacology search committee has been formed to move forward in this department.
 - e. Cancer Center Director search is underway as well
 - f. Linda Crnic Institute candidate withdrew and new search will commence in near future.
- III. Questions
 - a. Will there be a hiring freeze?
No.
 - b. How will this affect hospital and/or UPI?
UH and TCH are profitable and full, but interest on debt is increasing during this time.
UPI is ahead of earnings from last year, and last year was the best year for them in history.
 - c. How would privatization affect the school?
Not a good idea. It would cost \$10 million just to fund malpractice insurance for faculty.
 - d. How would this affect student tuition?
Do not expect tuition would be flat, but will try to avoid steep increases in tuition.
- IV. Conflict of Interest (No gift policy)
(recent email is about research and conflict of interest)
 - a. No items without anything in return in clinic: no pens, mugs etc.
Certainly no gifts greater than \$50
 - b. Going to a meeting and being given a pen is thought to be reasonable.
 - c. The policy applies to faculty/housestaff/student, but not necessarily to staff.
 - d. The hospital policy is separate, but is similar.
 - e. There is an ethics line for reporting peers, which is current policing mechanism.
 - f. Pharma will also create list of those physicians accepting gifts as they also have similar rules of ethics at this time.

- V. Athletics Task Force Update
 - a. Chancellor has requested analysis if intercollegiate athletics would be of interest to our campus.
 - b. Task force is clearly in preliminary steps of feasibility study. Budget analysis will need to be carefully performed. If approval is made, application will be made and then fulfillment takes 3-4 years

- VI. Division of Emergency Medicine Update, Todd Larabee
 - a. 4 Professors, 8 Associate Professors
 - b. 19% of patients are admitted, 34% of these go to ICU/step down
 - c. JAHCO-approved stroke center
 - d. Level II Trauma center
 - e. Many administrative positions by faculty
 - f. Altitude Research Center
 - g. Resuscitation Laboratory
 - h. Many grants, abstracts, book chapters etc.
 - i. Division has applied for Departmental Status and is hopeful senate will approve if approved by other committees

- VII. Microbiology Update- Michael Schurr
 - a. Daily work: teaching, creating PhD program, obtaining grants
 - b. 13 Full-time faculty
 - c. New additions annually since 2006
 - d. The faculty is well funded by the NIH and has a consistent upward trend since 1994 and is now near \$4 million

- VIII. Department of Immunology – Chair, John Cambier
 - a. History of department: Microbiology and Immunology separate departments after concern about chair in distant past.
 - b. Space was limited due to new campus construction, so National Jewish facility was used. This space is still used today and collaboration with the University continues.
 - c. 8 new faculty have now been hired and all have good funding, total faculty membership is 24.
 - d. Annual funding is approximately \$12 million.
 - e. Research interests are wide and varied.

**FACULTY SENATE
SCHOOL OF MEDICINE
Meeting Minutes
February 10, 2009**

I. Minutes from the January 13, 2009, meeting were approved.

II. **Discussion Items –**

- A. Dean's Comments – The Dean provided updates on the current department chair searches.
- Ob/Gyn – the final 1 or 2 candidates are coming in for their first visits by next week. Dr. Henthorn is the chair of the search, and anyone interested in providing input or interviewing the candidates should contact his office.
 - Neurology – the search committee has begun its work and is currently reviewing CVs. They will soon be inviting candidates for visits. Dr. Norris is the chair of that search, and anyone interested in providing input or interviewing the candidates should contact his office.
 - Pharmacology – the search committee has been charged and will begin their work soon. Dr. Freedman is the chair of that search committee.
 - Cancer Center – we will be meeting in the next several weeks with the search firm that is conducting this search. Once the search firm has identified a number of candidates, they will be brought to the search committee.

Other updates:

- Bill Maniatis has joined the School of Medicine as Associate Dean for Alumni Affairs. It is anticipated that he will help build the alumni infrastructure for the future.
 - With regard to the Diversity Associate Dean search, the search is being finalized and we will be reporting the selection at the next Faculty Senate meeting.
 - University Hospital – their strategic plan activities are proceeding.
 - The Children's Hospital – TCH has a desire to have a separate Pediatric Surgery Cost Center, and there is a meeting tonight to discuss this issue. Hopefully it will be brought to resolution in the next couple of weeks.
 - Denver Health – we are currently having conversations with Denver Health regarding the potential for a Department of Emergency Medicine. Maintaining this affiliation has become increasingly difficult because we are now six miles further away. We need to make a special effort to keep the affiliation engaged now.
- B. Emergency Medicine Departmental Status Discussion – The Emergency Medicine Departmental Consideration Committee has met and talked with numerous individuals and looked at several documents pertaining to the possibility of Emergency Medicine becoming a department. The Committee voted 6 in favor, none opposed, and 1 abstention to recommend departmental status for Emergency Medicine, and their final report is attached to the agenda. As history, several divisions within the School of Medicine have become departments, including Neurology (from Medicine), Dermatology (from Medicine), Family Medicine (from Medicine), Immunology (from Microbiology and Immunology) and Neurosurgery (from Surgery). They all went through the same process, and in all cases the conversations were straightforward. Emergency Medicine is a little more complex in that the Emergency Medicine department within Denver Health is the base for the residency program. Those faculty are employed by that hospital and do not participate in the practice plan, unless they see patients here. Currently, the School of Medicine has a Division of Emergency Medicine, and both the SOM Emergency Medicine Division and the Department of Emergency Medicine at Denver Health are nearly entirely funded by two hospitals, University of Colorado Hospital and Denver Health. This structure creates "interesting issues." The Dean has begun meetings with Patti Gabow and Vince Markovchick, Bruce Schroffel, Ben Honigman, Lilly Marks, and Steve Lowenstein. The purpose of these meetings is to

figure out if this arrangement would really work, to create a Department of Emergency Medicine that is funded by two hospitals. Questions that have come up include,

- “What would happen if either hospital were to “get into trouble financially”?”
- “Can we have a long-term commitment that would ensure that the academic faculty could continue to work?”
- “Since Denver Health does not have an AEF tax, and the School of Medicine does, is there any way that the faculty at Denver Health could contribute to the Dean's tax?”

The Dean then questioned the Senators about whether they would be in favor of this proposal. One Senator asked where the impetus for this proposal came from? Dr. Ben Honigman answered that there was a combined task force that was formed with University of Colorado Hospital and the Division of Emergency Medicine, which looked at the three criteria that are necessary for departmental status, which include: (1) an established residency program; (2) a national precedence for departmental status; and (3) departmental status would benefit the School and the community. In response to these requirements, Dr. Honigman commented that the current Emergency Medicine residency program is nationally renowned. The residency program is administered at Denver Health, but the faculty at the University of Colorado Hospital share in 50% of the education and financing. In addition, there is a national precedence for a Department of Emergency Medicine as 75% of all medical schools have an Emergency Medicine academic department. The issues that have been identified which it is believed departmental status would help with include recruitment of mid-level faculty, retention of good faculty, and a dedicated department head. Currently, without departmental status, it is difficult to compete with colleagues around the country.

Another question was raised, How would departmental status affect Level 2 Trauma status at University of Colorado Hospital? Dr. Honigman commented that, since we have moved out to the Aurora area, it has been more difficult to transport patients to Denver Health. But, ultimately, the decision to move to Level 1 Trauma status rests with the University of Colorado Hospital. He added that that is one of the concerns that Denver Health has, the fact that there might be another Level 1 Trauma Center in the area.

Dr. Honigman was then asked whether the current division head would become the Department Chair, if departmental status was granted? Dr. Honigman answered that Vince Markovchick is the current Emergency Medicine Service Chief at Denver Health, but if departmental status is granted, there would be a national search for a department chair.

The question was then asked, What is the minimum criteria for financing? The Dean answered that it is up to the hospitals, but there are many steps to go through before that point. There needs to be enough agreement and goodwill between the hospitals in order to have a successful department.

The question asked was whether growth would be anticipated with departmental status? Dr. Honigman answered yes, in all spheres: growth from a research standpoint, growth in education.

The Dean will update the Faculty Senate each month as to the status of this proposal.

- C. LCME Update, UME & Curriculum Oversight Changes – Sr. Associate Dean Feinstein provided an update on the UME and Curriculum Oversight Committee. Back in 2002, two committees were formed, the Curriculum Oversight Committee and the Evaluation and Oversight Committee. These committees drove to develop a new curriculum. This year, the renovation of the curriculum will be complete. The Curriculum Oversight Committee has been restructured, and a new committee was formed on July 21, 2008,

titled the VOICE committee, which stands for Vision, Oversight, Innovation, Competencies and Evaluation, which replaced the EOC committee. Sr. Associate Dean Feinstein asked for a vote of the Faculty Senate to approve formation of that committee. ***The Faculty Senate voted unanimously in favor of the formation of the VOICE committee.***

Sr. Associate Dean Robert Feinstein then provided an update on the LCME Mock Site Visit last month. The actual site visit will occur March 1-4, 2009, and in preparation for that visit a mock site visit was held, which was performed by a consulting firm. The consulting group was impressed with the University and identified as strengths the revision of the curriculum, the Mentored Scholarly Activities group, and the threads. They added that they believed the curriculum is terrific, and the Schools and departments appear to be stable. They were also impressed with research, the faculty and students, and the new campus. Of the 115 standards, there were 9 areas of concern that were identified. Those nine areas include: (1) timeliness of clerkship evaluation period; (2) the diversity of the faculty; (3) the diversity of the student body; (4) amount of student debt, which includes the lack of scholarships and financial aid that is offered to students; (5) lack of student health services; (6) faculty and student boundary issues, namely that faculty should not be caring for and also evaluating students; (7) reports of student mistreatment by faculty members, (8) lack of adequate resources in the hospitals, which include lockers, etc.; (9) lack of hospital affiliated agreements. Many of these areas will be addressed before the site visit, but there are several that cannot be addressed before the site visit.

- D. Departmental Updates – Dr. Carl Edwards provided a very thorough update of the Department of Dermatology. He described the current faculty, which total 26, and where they are located, adding that the Anschutz Cancer Pavilion is now the home base for Dermatology. He added that the addition of Dennis Roop in January 2007 has provided a very valuable expertise in stem cell research.

There being no further business, the meeting concluded at 5:40 p.m.

University of Colorado Denver
School of Medicine Faculty Senate Meeting Minutes
March 10, 2009

Comments from Chancellor Wilson

-emphasis on open communication from his department

-tobacco policy

April 6th will start last 6 months of tobacco on this campus. After that will be campus-wide ban (pending final approval from regents). Workers will have “shack” for smoking for these last 6 months and will be asked to enroll in quitting program during this time as well.

-diversity

Chancellor was recently at Columbia University and noted wider diversity and larger scholarship activity. As for faculty, Chancellor would like wider pool of applicants for positions of power and is going to strongly recommend this improve over time.

-budget

Chancellor anticipated 30% cut for UCD budget. Using medicare funds from stimulus package, cut looks like cut is closer to 5-6% (pending final review on March 20th). In general, this is far better than other states like Florida, Arizona, and California. Some parts of the school are taking cuts now, some are slowly integrating cuts over time. Task force is carefully examining how we may better benefit from stimulus package

Comments by Provost Nairn

-athletics

Task force (with many members from sports medicine) evaluating feasibility of Division 2 student athletics. Evaluation of budget and facilities is a bit earlier than planned. This is due to current possibility of land on Colfax that is available now, but may not be available in the future. The budget is anticipated to be relatively small. Sports would likely include track and field, soccer, basketball, etc., and would likely total 12 sports for participation in Rocky Mountain Conference. The benefit of an athletics program may be an increased attraction of well-funded, dedicated, international students to the program. Additional goal is to help create identity and solidarity of campuses. Recommendation from the task force is forthcoming. Comment made that primary goal of the institution is academics. Clarification made that \$250,000 would need to be made available for scholarships, and comment was made this would likely be separate from other academic scholarships.

Comments again by Chancellor Wilson

-congratulations on successful LCME evaluation

-status of consolidation re-evaluation

The decision was made to keep the evaluation of this work local (not outsourced) given budget concerns. The President was not in favor of this in the past and branding efforts were put on hold. Issue is now up for objective review by the

Regents and the Chancellor feels positive about outcome. He is somewhat concerned with the length of time required to make this decision. UCDenver name appears to be likely to stay based on question.

Comments by Dean Krugman:

- 12-14 cancer center members found for through search firm
- OB and Pharmacology chair search continues
- New Dean of Diversity and Inclusion has been appointed
- Pediatric call center being re-evaluated
- Again, LCME site visit went extremely well

Minutes approved from February.

Words from Senior Associate Dean, Medical Education, Robert Feinstein:

- LCME congratulatory lunch after recent site visit
- Final report from visit due 6/2009
- Multiple strengths of program reviewed
- Anticipated 9 areas of non-compliance and had only 4... 5 areas of transition were identified as well.
- The next LCME site visit will be in 8 years

Grading process

- IF and IW (incomplete fail and incomplete withdrawal) were removed
- High Pass was added as an official grade on the transcript for medical school after approval by faculty senate
- PR (pass with remediation – or passed after several attempts) also added after senate vote as this is less harsh than a fail and then a pass when the student re-took the class
- Increased communication of curriculum steering committee to faculty senate
- Vote was approximately 20 to 5 with those in favor outweighing those who opposed

Proposal for a Joint MD/MPH between the UDC School of Medicine and Colorado School of Public Health – discussion by Dr. J Jackson Barnette, Associate Dean for Education and Student Affairs

- Credit from medical school classes could overlap with needed credits in MPH program, particularly elective courses
- Plan is similar to that of other schools
- Degree would likely take five years, as in other schools
- Enrollment would likely start this summer
- Senate voted to approve program

Meeting adjourned at 6:00 p.m.

Faculty Senate Meeting Minutes April 14, 2009

Comments from Dean

Searches:

- The search for the Ob/Gyn chair is down to 2 candidates and will hopefully be wrapped up by June 30.
- The Neurology search is down to 5 candidates.
- The Pharmacology search is just starting.
- The Cancer Center Director search continues as well.

Other issues:

- If Emergency Medicine becomes a department, how chair would be selected, and who he/she would report to is being discussed. The issue of department status is at executive committee
- Children's hospital surgical subspecialty area is undergoing some restructuring.
- Possible budget cuts of \$300 million for higher education for University Colorado is still being debated, and the Dean does not feel tobacco money will be withdrawn from health care/education

Carol Rumack, Associate Dean for GME: Graduate Medical Education Annual Report

- 895 trainees for 2008
- Many new ACGME-approved as well as non-accredited fellowships
- Duty hours inspected carefully, and 100% compliance required
 - o Limit shifts to 16 hours, longer than this tend to mimic alcohol intake
- Program directors need protected time
- Disaster policy planning in place
- Conflict-of-interest policy emerging
- Minority research and discussions continue (7% of our staff are "minorities")
- Most rate training as "highly satisfactory" on exit surveys
- 51% of trainees practice in Colorado
- Debt after residency is increasing, many over \$100,000/year
- Critical Issue: Handoffs
 - o Allow time for this for *safety for patient* recommended
- Issues of concern: decrease in peds and surgery board/ABSITE board scores, increase in surgery residents to fellows, decreases in surgical logs, more clerical work for fellows. The cost for the restructuring program at Harvard for compliance was \$3-5 million. In neurosurgery, residents now have a transition year where they are supervised before fully qualified to practice the discipline.
- General Surgery monitoring carefully as they will be on probation if no improvement by August 14th, 2009. Five additional prelim surgery residents added, taxi vouchers for sleepy residents at the end of shifts, 16-hour shifts starting in July, additional personnel to monitor hours (daily).
- Residents need less than 30 hour shifts with more than 10 hours off between shifts per GME guidelines. There are only a few residency divisions in surgery who are out of compliance at this time and these are being addressed

QUESTIONS:

- Will programs take more residents since more medical students are graduating now? Dr. Rumack answered, no, there will probably eventually (2012) be almost no slots for foreign medical grads, and then even difficulty for US grads to get residency positions (and thus remaining unmatched).
- The Dean commented that there will be a GME retreat soon, as we will likely need to address how to meet all of these needs safely and cost effectively. At this point no one is talking about more residents.
- One senator commented that it seems like the hand-off time is the most dangerous. Could there be a provider-extender who is consistently following patients? The Dean commented that physician extenders are expensive and don't like to take night float. Dr. Rumack commented that many are responding by hiring hospitalists to help cover patient care. Dr. Lowenstein commented that competency with limited hours can be a concern.
- Another senator asked, How much have board scores decreased? Dr. Rumack did not have those numbers.

Larry Hunter, Professor and Director: Open Access Publication Policy

- An appeal was made for scientists to send a copy of each of their papers to central UCD for free collaboration between scientists.
- The main advantage seems to be dissemination of knowledge.
- Comment was made that an intra-institutional library repository goes along with this concept.
- Dr. Lowenstein asked, Would there be difficulty getting a paper submitted if one doesn't sign over copyrights to a publisher? Dr. Hunter answered that, hopefully, all publishers would eventually be ok with this and would change their practice if they couldn't get publications from certain schools.
- Dr. Freed asked, Isn't this about money? Don't publishers make money by selling advertising in journals? Are they worried they will go the way of many newspapers? Dr. Hunter answered that this can survive without any money changing hands. Some publishers will not be able to survive with open-access to articles; some will likely be okay.
- A Senator asked, Would staff be unlikely to make money off of a book if it was available in open-access format? Are books included in "scholarly work?" Dr. Hunter answered that he was not sure. If this were true, there's a possibility that an exemption could be made.
- The question was asked, How would one search for an article? PubMed then Google? Dr. Hunter answered that open access actually makes searching easier.
- The Question was asked, In physics and mathematics, aren't all articles open access? Dr. Hunter answered yes.
- The question was asked, Does PubMed Central have open access to all articles now?
- Dr. Hunter answered, Yes, exactly. This is a big boon for researchers economically in disadvantaged countries.

Senators were asked to take this information back to their departments for discussion.

Ann-Christine Nyquist Assoc Dean for Diversity and Inclusion

- A director will be hired to help develop the program, and he/she will be full time.

William Maniatis, Associate Dean for Alumni Relations

- Appeal has been made to have members of senate and others who are alumni join the Alumni Association.
- He and the Dean are looking for mascot suggestions.

There being no further business, the meeting concluded at 6:00 p.m. The next meeting will be Tuesday, May 12.

Faculty Senate Meeting Minutes
May 12, 2009

Approval of Minutes – President Vik Durairaj

Comments/Update - Sr. Associate Dean Ridgway

- Pharmacology search - not started yet.
- Neurology search – underway.
- Gynecology - actively interviewing currently.
- Cancer Center – second list of good candidates under evaluation.

Brief Budget Overview – Sr. Associate Dean Lilly Marks:

- Budget for state: \$15 million.
- Change: \$2.87 million.
- 5.9% increase in tuition is required as well as \$740,000 in fees.
- The rest of the budget shortfall was made up by tobacco and stimulus money.
- Net reduction to the School of medicine – almost none.
- Important point: stimulus money will only be available for 2 years.
- Budget freeze for 2009-2010 (except promotions) holds.
- Cost reductions/efficiencies for budget 2 years from now is being evaluated.

UPI Member Practice Agreement Discussion – Sr. Associate Dean Lilly:

- Non-compete member practice agreement was introduced in 1998 for new faculty.
- Honoraria described in 2003 – same as School of Medicine.
- Decision made to make all physicians sign same agreement since there were 3 different ones in use.
- New document describes non-compete clause for those hired after 1998, describes honoraria, and states “UPI may unilaterally change contract at any time.” Dean Lilly Marks reassured that these would be minor “housekeeping” changes that would not be substantive changes that would require changes in bylaws. Language will likely be changed here.
- 1982 agreement includes that money made on vacation will also be run through UPI.
- School of Medicine does not allow for clinical activity outside of academic practice, as this may be a legal issue (malpractice etc.).
 - This would include doing consulting research, clinical consulting.
 - Part time physicians (0.49 or less) are not under these guidelines but malpractice issues must be discussed (and may need to be covered by organization asking for outside professional participation).
 - Governmental Immunity Law: Nurses and Residents can moonlight without voiding their University malpractice (although they need malpractice), however, regular faculty physicians cannot.
 - UPI feels it adds a significant value by having money go through their office.

Review of Open Access Policy reviewed at earlier session (consideration of CU Denver to be first medical school to require all faculty to keep scholarly articles in a local biorepository upon submission to journal rather than allow Journals to own articles)

- Some departments reported that this may hamper publishing capabilities by staff, particularly junior faculty since authors have to sign away the usual copyright acquisition by the journal.
- Many felt that this would take a long deliberative period and a significant question and answer sessions to assess in further detail.
- Some felt concerned about the costs and maintenance occurring with this change.
- Library is making this information available electronically.
- Most seemed hesitant for significant change without data.
- Effect on other medical schools who have adopted the policy is unknown.
- Concern raised about quality of journals available, possibility of timely review, and quality of articles in general in open access forum.
- Clarification that this may eventually decrease costs to library for expensive journals.
- Proposal made to have a formal debate for the faculty senate in the near future or significantly increase education before voting.
- Urge for senators to share the concept with their departments.
- Question asked of why we need to act quickly and make a policy when this may evolve naturally over time. “Why make a policy for the sake of making a policy?”
- Thought is that there needs to be pushback to barriers that may limit access to information.
- Point is made that there are charges for access to information one way or the other.

Silver and Gold Closed Out – President Vik Durairaj

- This was due largely due to budgeted cuts.
- It has been in place since the 1970’s.
- There has been some concern that this was performed without input from the faculty and that it seemed to be a political move.
- Unbiased nature and utility of this paper was emphasized.
- Originally, it was thought that costs could be lowered by lowering the funding of the paper by 21%; it later got cut by 100%.
- It is unusual to have a paper like this funded by the president’s office; a different funding model might be helpful. Apparently, the newspaper was not offered that opportunity.
- Advertising in paper is another consideration.
- Senate voted to send formal resolution objecting to closure of newspaper, the way the closure was handled, and offering opportunity for president to come to Faculty Senate meeting, exploring other options for funding at this meeting.

Summary of the Student Promotions Committee – Sr. Associate Dean Robert Feinstein

- Professionalism is emphasized as both the student and the teacher understand that each can affect each others career
- A few minor changes in language were made and the document was voted to be accepted.
- A separate document is currently being created to specify guidelines on copyright of information of lecture (tape recording, video taping, etc.).

Faculty Senate Meeting Minutes
June 9, 2009

Greetings– Vik Durairaj, President

Approval of Minutes from May 12, 2009, meeting

Comments from Dean Krugman

- State funding for education down, made up by TARP funds so no net change
- Medical school tuition increase of 5.9% approved and implemented
- Approximately 25% of students out of state, this may increase over time
- Children’s Hospital looking at committee in the OR that answers to CEO rather than UPI. Dean Krugman is hopeful this could work as long as this committee becomes essentially a department as the department of Emergency Medicine has.
- Preview of Emergency Medicine department status: has passed through executive committee, will be discussed at the faculty senate meeting today, and then will go through Board of Regents in September.

Emergency Medicine Department Status

- Base funding difficult to obtain at this time but could continue when state increases support
- In the mean time, the University Hospital and Denver Health will help provide support for the Emergency Medicine department
- Unanimous approval vote for Departmental Status for Emergency Medicine

Open Access Issue Reviewed:

- Motion made and passed to monitor the situation for six months locally and nationally and re-evaluate the University’s position in 6 months

Faculty Development Seminar Website (Associate Dean Steve Lowenstein)

- www.uchsc.edu/som/faculty/seminars
- Introduction to this site which will be a posting place for career development opportunities

Family Medicine Departmental Update (Dr. Barbara Kelly)

- “Patient-centered medical home” – PCMH - new terminology for family practice
 - Take care of the patient not the disease
- 2nd largest family medicine department in the country
- 3rd in the country in 2009 in US News and World Report
- Work with all medical students, have 3 residencies, 5 fellowships and graduate 55 annually
 - Fellowships: Sports medicine, palliative care, geriatrics, research, rural
- 60,000 visits annually
- Inpatients, outpatients, sports medicine, psychiatry, cosmetic clinic
- P4 program: Preparing the personal physician for practice

- Dean Krugman: Remarkable growth since its creation in 1977

Cell and Developmental Biology Update (Dr. Mike Carry)

- Very good chair retired and Dr. Wendy Macklin now chair
 - 10-person lab and equipment will be at UCDHSC in July
 - Previously at Cleveland Clinic Foundation
 - Research is in myelin development and destruction
- 110 faculty, a mature group
- 39 active grants currently (\$5.4 Million)
- Teaching in all phase I and II blocks
- Future plans: Masters in Anatomy program, 5 new faculty
- Dean Krugman: Reminds us that this incredible department can also do great medical illustration as well

Meeting adjourned.