

Faculty Senate Meeting Minutes  
September 8, 2009

**I. Welcome by President Robert Low** – Dr. Low welcomed the Faculty Senate to the first meeting of the year. He encouraged Senators to email him with any suggestions they had for meeting topics, as well as any issues they may have. He discussed a recent issue that has come to his attention, which involves the new policy that is being implemented that will require all University laptops to be encrypted to ensure that information on the laptops cannot be accessed by unauthorized individuals if the laptop is lost or stolen. The issue that was brought to Dr. Low’s attention was whether a waiver of this policy could be applied to laptops that do not contain any private or sensitive information. Aaron Wishon, Assistant Vice Chancellor for IT Services, will be invited to attend the next Faculty Senate meeting to discuss this issue. The current deadline for this implementation of this policy is December 31, 2009.

**II. Dean’s Comments - Associate Dean Steven Lowenstein (in Dean Krugman’s absence)**

Dr. Lowenstein provided the Dean’s Comments in Dean Krugman’s absence.  
Search Updates:

- The Neurology Chair search is in its second round of interviews.
- The Cancer Center Director search has recently completed its second round of interviews.
- Interviews are currently being scheduled in the second round of interviews for the Pharmacology Chair search.
- The Crnic Institute Director search is in its first round of interviews, which should be completed by the end of September.
- Dr. Nanette Santoro has accepted the Ob/Gyn Chair position. She began in this role on September 1, and will be coming to this campus one week per month during the transition from her other position through at least the end of this year.

Legislative Updates:

- Joel Levine, MD, and Liz Kissick, MBA, briefed Representatives Ed Perlmutter and Diana DeGette on physician workforce shortages and private health insurance practices.
- There is still no word on what the SOM portion of the most recent budget cuts will be. There is a sense that the one-time stimulus money will be used for any new cuts in the current fiscal year and 2010-2011. After that, new sources of funding will need to be identified.

Institutional Updates:

- The third of three UPI Open House meetings will take place on September 22 from 5:00-7:00 p.m. These meetings have proven to be very informative and helpful with regard to answering questions about UPI.

- There is a plan for new Phase III blocks in Emergency Medicine, the Care of the Hospitalized Patient and Psychiatry in Grand Junction starting in January 2010.
- As of August 31, 2009, UCD had submitted 571 federal stimulus proposals and have received 51 awards totaling \$19 million.
- More than 800 people attended the white coat ceremony for the Class of 2013.
- The deadline for the President's Teaching Scholarship Program has been extended until December 4, 2009. Dr. Cohen commented that the SOM is underrepresented with regard to this award, and it is hoped that more SOM faculty will apply for this scholarship program.

### **III. Nominations for Professionalism Task Force – President Robert Low**

The Professionalism Task Force Committee was charged with crafting a policy for professionalism. The impetus for the creation of this policy was the responses from the student climate survey, which indicated that a few faculty were repeat violators of unprofessionalism. The Task Force created a policy, which includes a plan to identify unprofessional behavior and reward exemplary behavior. This Task Force is led by Celia Kaye and includes Associate Dean Steven Lowenstein, six or seven additional faculty, and two students. The Task Force is currently attempting to develop a mechanism for students to anonymously report unprofessional behavior. It is hoped that this mechanism will also be able to identify patterns of unprofessional behavior. Since faculty are involved in this issue, it is important to have Faculty Senate input. Two nominations from the Senate are needed, and Senators were encouraged to email Dr. Low if they are interested in serving on this committee. The Task Force meets once a month in Building 500. The question was asked whether this is only related to faculty and students, or if non-academic personnel are also included in the policy? Dr. Low responded that right now, the focus is on the student aspect. A leading recommendation has been to use New Innovations in the process, which is limited to medical students and residents.

### **IV. GME Annual Report – Associate Dean Carol Rumack**

Associate Dean Carol Rumack provided an update of Graduate Medical Education (GME).

- Salaries for residents have not yet plateaued – they have continued to increase, with the increase this past year being 2%.
- Enrollment has also increased, even though there are caps at each of the hospitals.
- The percent of under-represented minorities enrolled in GME programs decreased to 4.2% (from 4.4%), and gender percentages have maintained at 50%/50%.
- Positions in Specialty programs increased this past year, with positions in primary care programs remaining the same.

- Residents categorizing their overall satisfaction with the training program as “very satisfied” increased this past year.
- Medical education financial debt has continued to rise, with the percentage of residents with over \$100,000 in debt rising from 49% to 52%, with 18% having debt more than \$200,000.

**V. LCME Update and Diversity Scholarship Funding Update – Sr. Associate Dean Robert Feinstein**

- Dr. Feinstein provided an update of the LCME site visit, which occurred March 1-4. The feedback from the site visit was very positive, with 7 areas of excellence being identified, including UME staff responsiveness to students and highly productive teaching faculty, among others. There were three areas of critique which were identified, which included diversity of students, faculty and staff; insufficient support to lower student debt, and not having all of the signed affiliation agreements for affiliated hospitals. All of the affiliation agreements have now been signed. There were four areas of transition identified, including timeliness of clerkship evaluations (which have now been reduced from 8 weeks to 6 weeks), clarification of the UME organizational structure, the lack of a mechanism for reporting unprofessional behavior, and state funding.

In June, LCME representatives returned for an additional site visit to discuss diversity. They were concerned that there had been little movement regarding this issue since 1994. The School was given a period of time to develop a diversity plan, with a report due August 15<sup>th</sup>. Approximately 30 faculty were convened to work on the response and a plan. They wanted to see the amount of support that would be received from the School. Of note is that within two weeks, the President gave \$10 million towards recruitment of more diverse students. Dr. Feinstein added that the follow up regarding the diversity issue will move to the SOM Office of Diversity, which is now fully staffed. A five-point strategy will be developed, including creation of an environment of support for diversity and inclusion, development of a diversity plan specific to medical students, development of a retention plan for diverse students, and a fundraising plan. In addition, the definition of diversity has now been expanded to include rural students, as well as traditional ethnic minorities and socioeconomic disadvantaged students. There will also be a program developed for scholarships. Pipeline programs will also be developed, starting with a new BS/MD program at UCD, as well as an urban scholars program, and a post-bac program.

**VI. Student Admissions Committee Report – Associate Dean Norma Wagoner**

Associate Dean Norma Wagoner provided an update from the Student Admissions Committee. US Medical School applications were down from 41,467 last year to 40,779 this year, with the average number of applications that each student submitted remaining at 13. The median number of applications received per school was 4,155, with the median class size at 144. The applicant pool for the University of Colorado SOM remained steady from last year at 3,660. 649 applicants were invited for interviews, with 573 actually coming for interviews. 268 students were made offers, with 161 of those accepting offers elsewhere. The current class size is 160, with 120 of those being from Colorado and 40 from outside of Colorado. Of note, 39% of the students who chose to come to Colorado also had offers elsewhere. 80 colleges and universities are represented in the Class of 2013. The question was raised whether the Colorado/non-Colorado ratio is fixed? Dr. Wagoner answered that the number of Colorado slots usually remains between 118 and 120, but this year the Dean requested that 120 slots be filled by Colorado residents.

Dr. Wagoner provided an overview of Colorado students. Sixteen Colorado students did not apply to CU and matriculated elsewhere – their grades and MCAT scores were not available. There were 18 Colorado applicants that withdrew after acceptance to the University of Colorado SOM, and their average GPA was 3.90, with a median MCAT score of 11.67. The schools that they chose to attend instead include Mayo, Johns Hopkins, Washington U, and others. There were 95 Colorado students who were not accepted and matriculated elsewhere, and they had an average GPA of 3.68 and a median MCAT score of 30.99. Colorado students who chose to attend SOM here, n=120, had an average GPA of 3.73 and a median MCAT score of 31.5.

With regard to diversity, a new definition of diversity was drafted and approved in July 2009, which expands the definition to include rural and economically disadvantaged students, as well as other variables, including sexual orientation, religious and spiritual values, political viewpoints and attitudes toward patients who are poor and non-English speaking. This new definition of diversity is considered holistic, taking into account the entire background of applicants. Dr. Wagoner stressed that there is not a “quota” to be filled.

The Class of 2013 is made up of 71 women, (44%) and 89 men (56%). The median MCAT score is 32.0, with a median GPA of 3.71. The age range of the students is 21 to 49, with a median age of 24 years and 3 months. The majority of students from Colorado colleges and universities (n=120) in this class are coming from the University of Colorado Boulder (23%). The remaining states (n=24) include California (n=9), Montana (n=5), Washington (n=3), Arizona (n=2), Missouri (n=2), and Virginia (n=2). A handful of others states are represented by 1 student.



**Faculty Senate Meeting Minutes**  
**October 13, 2009**  
**4:30-6:00 p.m.**

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

**Call to order and welcome:**

President: Robert Low  
President Elect: Chesney Thompson  
Secretary: Fadi Nasrallah  
Past President "Emeritus": Vikram Durairaj

**September 8, 2009, meeting minutes were approved.**

**Dean's comments**

Status of searches:

- 1) Department of Neurology: A letter of agreement has been signed and the start date is November 1<sup>st</sup>.
- 2) The Cancer Center: Mr. Schroeffel and Dean Krugman are in the early parts of the discussion with final closure next month.
- 3) Pharmacology: There are 3 candidates who are going through the interview process.
- 4) The Crnic Institute: There are 2 candidates who are returning for 2<sup>nd</sup> visits.

Other Updates:

Jim Spencer from the Denver Post will be leaving to Minneapolis to pursue his career in newspaper. The Dean thanked him for his services and his help in educating the public about the School of Medicine and its missions.

**Overview of the new expense system**

Lisa Vallad and Lisa Stanford, the SOM Procurement Liaison, discussed the new expense system. The new system will be implemented on November 18<sup>th</sup> for the School of Medicine. The aim is to provide for faster reimbursement of expenses, decrease errors, improve documentation, and decrease the use of paper. Access will be through my.cu.edu. under the MY.TOOLS tab. Under that tab, you will be able to review the expense report, certify and submit it electronically. Help will be provided by the department liaison, onsite trainer, and by phone. A postcard will be distributed to explain the process as well.

**Discussion regarding the new laptop encryption policy**

Aaron Wishon, Assistant Vice Chancellor for IT services, discussed the reasons for encrypting laptops that access or store university information. Five IT Security policies implemented in January 2007 mandate how university IT assets and information should

be protected. The approach for protecting mobile devices was vetted and approved by the Chancellor, Vice Chancellors and Joint Deans as part of the FY08-09 UC Denver IT Security Initiatives. As well, recent HIPAA revisions state that any device lost or information transmitted without encryption is now considered a HIPAA violation and triggers notifications and penalties including media events. As well, the encryption software will provide assurance that the stolen device will become a stolen asset issue instead of a security breach. Alternatives to encryption were discussed and included centralized logging, storage, or remote computing.

### **Diversity Office Update**

Dr. Ann-Christine Nyquist, Associate Dean for Diversity and Inclusion, introduced Regina Richards. The issue of diversity was discussed and was broadened to include health equity as well. Regina discussed the efforts that the diversity office is pursuing including a website construction and recruitment and retention issues. Regina will attend the SNMA and LNMA meetings next year to step up the recruitment efforts of diverse medical students and residents.

### **Faculty Promotions Committee Report**

Dr. Tod Sloan, past Chairman of the Faculty Promotions Committee, updated the Faculty Senate on the committee's activities and accomplishments during 2008 and 2009. The committee met 14 times during that fiscal year. The committee reviewed and made recommendations on promotion applications for associate professor (68), professor (44), tenure (15), and promotion in the research professor series (3). The success rate for promotion was found to be around 90%. As well, the committee recommended a periodic update of the criteria for promotion and tenure and for the materials which assist faculty in applying for promotion and tenure. A discussion ensued as to why it is more difficult to get tenured as a PhD versus as an MD. Other faculty stated that the opposite is true and the issue will be looked into. The tenure process deserves reexamination as our policies act as a big barrier to pursuing that route. As well, tenure applications have decreased due to the increased number of physician educators.

There was then discussion regarding the current method of distributing the Faculty Senate agenda and attachments, and it was agreed that the agenda and attachments would only be emailed to Senators and not also mailed in hard copy form beginning next meeting.

The meeting was adjourned at 6:00 pm.

**Faculty Senate Meeting Minutes**  
**November 10, 2009**  
**4:30-6:00 p.m.**

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

**Call to order and welcome:**

President: Robert Low  
President Elect: Chesney Thompson  
Secretary: Fadi Nasrallah

**October 13, 2009, meeting minutes were approved.**

I. Dean's comments

Status of searches:

- 1) Department of Neurology: Dr. Ken Tyler started November 1<sup>st</sup> as the Neurology Chair.
- 2) The Cancer Center: Mr. Schroeffel and Dean Krugman are in the early parts of the discussion with final closure next month.
- 3) Pharmacology: Still underway. 2<sup>nd</sup> round visits complete for 2 candidates; all interviews should be complete by the end of November.
- 4) The Crnic Institute: There are 2 candidates who are returning for 2<sup>nd</sup> visits.

Jim Spencer's replacement, Dan Meyers, will begin next week.

- II. Upcoming Regional Re-Accreditation Visit – Provost Nairn attended the meeting to provide information regarding the upcoming reaccreditation visit. University Planning and Accreditation Committee (UPAC) has been working on this project for a while now; Terry Potter, Tom Beresford, Terri Carrothers, and Carol Hodgson are representatives from the SOM that have been assisting. This is a required University-wide accreditation, which will verify that we meet set standards. The reaccreditation occurs every 10 years, and the site visit is scheduled for April 4-6, 2011. This is an opportunity for introspection, building off of the strategic plan. Provost Nairn asked for help, input and involvement regarding the crosscutting themes which will be developed. The four themes are: (1) Emergent; (2) Learning-Driven; (3) Collaborative; (4) Responsible. Provost Nairn asked that faculty senators work with the SOM representatives to come up with examples for the crosscutting themes. There will be 25-30 groups that will be giving examples, and the UPAC will make the decision on which to use.
- III. CME Report – Associate Dean Ronald Gibbs attended the meeting and provided a report from the Office of CME. Over the last two years, the CME Office has gone through a transformation, and Associate Dean Gibbs provided an overview of the current function of CME, which includes the two components of live courses and interactive formats. An attempt is made to highlight Colorado and the School of Medicine with the courses. Regularly scheduled series provide



internal education, mainly in lecture format; currently, only 10 departments or divisions currently provide these types of series.

Associate Dean Gibbs then provided additional information regarding the traditional CME “landscape,” and compared that to the newly defined purposes of CME, which were defined in 2006. CME now focuses on health care quality gaps, supports maintenance of certification and licensure, fosters collaboration to address quality improvement, addresses interdisciplinary team practice, and is independent of commercial interest. They are no longer a stand-alone activity, but are linked to licensure, PI and QA. The needs assessments that are provided are rigorous, based on measurable gaps in competence, performance, and outcomes.

In July 2009, the UCD SOM received full accreditation from the ACCME, fulfilling 21 of the 22 criteria. They were invited to submit a voluntary progress report, which was submitted in September 2009. They will hear back in December 2009 about the report.

Additional focus for the current CME office includes reduced or eliminated pharmacy support, improved patient outcomes, and more focus on quality education and less event planning.

Associate Dean Gibbs asked of the Faculty Senators that they commit their department to the new CME to: meet faculty and department needs; obtain CME accreditation for grand rounds, M&Ms and journal clubs; assure live courses provide quality effective education with sustainable budgets; and assure MD directors and staff coordinators of CME activities get trained. The cost for departmental accreditation with CME is \$500 per year, which would provide up to three course accreditations per year per department, which could include grand rounds, journal clubs or M&M conferences.

Associate Dean Gibbs was asked what the one criterion was that was not met in the accreditation – Associate Dean Gibbs answered that it was regarding implementation of the strategies for improvement, which was partially met by the survey. When the self-study was submitted, it was shown that progress had been made.

A faculty senator asked about whether there was going to be a change to the current system whereby the national organizations require accreditation with the School’s CME, which results in charges at the SOM level and the national organization level. Associate Dean Gibbs appreciated the issue, and while the policy could not be changed at present, it would be on the table in the future.

- IV. Research Retreat – Associate Dean Richard Johnston provided information regarding the research retreat, which will be held on November 13 and 14 in the Education 2 South Building Auditorium. Approximately 300 faculty have

registered for the event. It has been 8 years since the last research retreat, and idea came about to hold another retreat after the Dean asked the RAC to give him ideas of where we might need to invest future research programs. Three topics were chosen, and then the question went out to the faculty at large, and from that 6 topics were chosen. The retreat has been 6-9 months in preparation. During the retreat, which will consist of 3 paired formal presentations, there will be ample time for discussion amongst faculty, with break-out groups being formed. The schedule will be very relaxed. He emphasized that they will need good input in the discussion periods.

Associate Dean Johnston then discussed the process for SIRC awards. Since the Fall of 2003, there have been 40 awards funded. The proposals that are submitted need to have a strong user group, with a plan outlined that will provide support after 3 years. In 2006 when NIH funding began tightening, the program was used to provide bridge funding. The proposals are reviewed in 6-month intervals, with 8 reviews now having been completed. Fifty faculty awards have been given, totaling \$2.8 million. Four of those faculty have received a second award. Associate Dean Johnston asked that if faculty have any questions about these awards to please contact him.

- IV. H1N1 Update – Dr. Charles Little provided an update on the H1N1 virus. There has been a downward trend in the last few weeks, and he believes we are past the initial wave of H1N1. Cases have dropped off in the last few weeks. Those that are presenting to the hospital have very severe symptoms, and 30% are then admitted to ICU. The majority are self-treating. He added that it's anticipated that there might be another wave of cases as the seasonal flu season kicks in. The availability of the H1N1 vaccine will get better.
- V. Cell Phone Coverage on Campus – Assistant Vice Chancellor Aaron Wishon provided information about the current cellular coverage problems on campus. Because the new buildings on the campus were built with energy efficient windows and because of the building designs, performance of cell phones, pagers and other devices that rely on external signals is reduced. In order to improve signal performance, antenna “repeaters” will need to be placed in buildings, and the coordinating cell and wireless carriers will need to “plug in” to the signal. Many of the buildings have been completed, and an additional \$1 million will be needed to complete the buildings on campus. In addition, a similar coverage issue at the University of Colorado Hospital will require an additional \$1 million to improve performance, but that funding decision has not yet been made. Most of the carriers have agreed to plug in to the antennas, except for Nextel. IT personnel are currently being trained to install the new technology.
- VI. Day Care Facility Update – Dr. Karen King provided an update on the proposal to build a day care center on campus. Based on information received at a meeting with Teresa Berryman and Jeff Parker, TCH initiated the original proposal, and concessions are being made for TCH because they will provide the most funding.

TCH will purchase the land, but no public announcement will be made. TCH will hire the architect, and it is unsure yet how many slots will be available. The target audience will be infants and toddlers, including those with disabilities. The rates for service will be competitive. It is anticipated that the time frame from groundbreaking to business will be 12-14 months. It is unclear where the building will be located, but it will be on campus.

Note: December 2009 meeting was cancelled.

## **Faculty Senate Meeting Minutes**

**January 12, 2010**

**4:30-6:00 p.m.**

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

### **Call to order and welcome:**

President: Robert Low

Secretary: Fadi Nasrallah

**November 10, 2009, meeting minutes were approved.**

### **Dean's comments**

Status of searches:

- 1) Pharmacology: Peter Kalivas from South Carolina is a finalist for the Pharmacology chair position.
- 2) The Cancer Center: Dean Krugman stated that Dan Theodorescu will be assuming the role of the Cancer Center Director.
- 3) The Linda Crnic Institute: Michael Friedlander from Baylor is one of the final candidates and will participate in a conference call tomorrow.

Other Updates:

The search for Medicine is in its early stages with visits beginning in February. Other discussions included the reorganization of the clinical enterprise to cater the increase in patients with commercial insurance. As well, a meeting with Denver Health will be held to discuss the affiliation. This includes orientation of Chairs and Directors and informing them about this affiliation, as Denver Health Faculty have clinical appointments with us. The VA budget is up and is bucking the trend of other hospitals. As well, there are discussions with National Jewish regarding a clinical collaboration with UCH and TCH.

### **New Faculty Professionalism Reporting System**

Dr. Celia Kaye and Associate Dean Steven Lowenstein discussed this topic. DR.

Lowenstein discussed the history of the proposal and noted the following.

**Students ask:** Why is there no honor code for faculty? Where is the reporting system?

Are faculty members held accountable for professional behaviors at any time?

Confidential survey of students (2008) sought to identify problems and concerns with respect to diversity and inclusiveness and whether students have witnessed or experienced behaviors that are offensive, insulting or intimidating. This survey showed that students need to have an anonymous reporting system to deal with issues that improve professionalism without being fearful of retaliation. Dr. Kaye then proceeded to discuss the Faculty Professionalism form which is an online form with a check off system and a narrative explanation of events. The form is then reviewed by a Faculty Professionalism Committee. This committee will be composed of Faculty Senate, 8

faculty members (4 basic science, 4 clinical) appointed by the Dean in consultation with Faculty Officers. They will have 3 year terms with re-appointment. The Chair is designated by the Dean in consultation with Faculty Officers. Unprofessional behavior will be divided into minor and major lapses and will be dealt with accordingly. In addition, exemplary professionalism will be reported.

At the end of the discussion, a vote was put in motion to adopt the proposal and ended with overwhelming support from the Faculty Senate. There were 30 yeay votes, 1 abstention and no nay votes.

### **New Building Updates**

Lilly Marks, Executive Director of UPI, Inc, revealed that the new UPI building is scheduled for completion in the Fall of 2010 (started construction in Spring 2009) with a total Building Size of 196,000 GSF / 184,705 RSF (typical floor plate 30,000).

Mr. Schroffel then discussed the expansion plans of UCH. It requires a \$642 million dollar investment that will encompass the following: Building of a new inpatient tower, expansion of the Cancer Pavilion and the Rocky Mountain Lions Eye Institute, and additional improvements in infrastructure of the existing buildings. The vision will include Service Line Prioritization where the Clinical enterprise should advance research in areas that will drive future clinical differentiation and brand distinction. As well, the Clinical enterprise should prioritize three service lines for initial focus: Cancer; Neurosciences and Spine; and Cardiovascular Services. As for the Multi-Specialty Group, there will be full commitment to clinical medicine in every clinical Department and Division and increased clinical capacity and availability to ensure access and high service to patients and referring physicians. As for Network Development, we will aim for an increase tertiary/quaternary referrals, we will penetrate new service areas, improve referring physician relations and reposition Clinical Enterprise as the high quality and service provider.

Lastly, Jim Shmerling discussed the future expansion of TCH including building office to the South side od Colfax and connecting to TCH with bridges. He discussed the Child Care project that will support 250 infants and toddlers and those with special needs.

The meeting was adjourned at 6:00 pm.

Thank you

Fadi Nasrallah, MD, MBA

## Faculty Senate Meeting Minutes March 9, 2010

The minutes from the January 12, 2010, meeting were approved.

Dean Krugman provided an update on Department Chair searches that are still underway:

- Pharmacology – the position has been offered to the 1<sup>st</sup> choice, but it is anticipated that that individual will be accepting another position. If that is the case, there will be discussion regarding how to proceed with the search.
- Medicine – the committee recently conducted airport interviews of 12 candidates, and they will be recommending 5 of those candidates for 2<sup>nd</sup> visits.
- Linda Crnick Center – they are in the process of the third attempt to recruit a director, and a search firm is conducting the search.

Dean Krugman provided the following updates on our affiliate institutes:

- NJH – National Jewish Hospital has begun discussions regarding partnering with UCH for space in their proposed new tower. The Dean commented that it would be a very positive thing.
- UCH/TCH – planning for and development of an MFM hospital is ongoing with UCH and TCH.
- VAMC – the anticipated move date for the VA Hospital is Spring 2014.

Dean Krugman began discussion regarding current budget issues. The President's Office has warned that this will be a "bad general fund year." The Dean then provided background on budget issues in the past in order to provide context for our current budget. In 2001/2002, state appropriations were \$19.6 million. Three years of Tabor cuts after 9/11, state appropriations were down to \$11.4 million. Gradually, state funds increased during the years 2005-2009, totaling \$15.3 million in 2008/2009. In addition, \$4.8 million of tobacco settlement money was allocated to the SOM. In the past year we have lost \$2.5 million in state funds, bringing the total appropriations down to \$12.3 million. The tobacco settlement money was reduced by \$4 million. The money that was lost was backfilled by stimulus dollars which were allocated by the Governor to higher education. These funds will end next year. The imminent loss of these backfill funds will lead to problems, as state appropriations are likely to drop below \$10 million. In addition, it's not clear whether that will be the extent of the loss.

An article that appeared in the February 28, 2010, *Denver Post*, "Extracurricular Costs," was distributed to the senators, which reported on expenses that were being incurred by local school districts on food, travel and other discretionary items, without much oversight while the school districts were preparing for deep budget cuts. Dean Krugman was concerned that there is the potential for that level of scrutiny of our institution, and emphasized that it will be important going forward to limit discretionary spending on food, etc. Guidelines are being prepared in the Dean's Office to address this issue. Dean Krugman suggested that we should collectively think about where to reduce expenditures

in order to protect the core faculty, students and programs. Dean Krugman added that the Given Institute has been closed and is currently for sale.

The question was raised regarding whether the budget cuts that will need to be made will be across the board or by department? Dean Krugman answered that they will not be across the board; we will be talking with departments about funding for the education core, as well as trying to protect basic science departments as they will be the hardest hit by the cuts. There will be a need for increases for promotions and retention efforts, and those must be accounted for. Dean Krugman added that there has been talk about the President's office possibly providing bridge funding for this campus, and he will keep the Senate updated on those efforts.

Associate Dean Lowenstein provided an update on the DOMINO database. As background, the database was created 5 years ago by David West. It is a web platform, containing demographic information, and information regarding appointments, clinical and research interests. It was developed by the Department of Medicine to aid in conducting and tracking mid-course and annual reviews. Before the recent approval of the proposal to adopt the database throughout the departments in the School of Medicine, five additional departments had adopted the database, with 1200 School of Medicine faculty included in the database at that time. The School of Medicine Executive Committee recently approved a proposal for all departments in the School of Medicine to adopt this database under a two-year project. The first year of the project would be the initial rollout of DOMINO to all remaining departments by December 31, 2010. Currently, 8 department administrators have been trained on DOMINO and have agreed to input their faculty and implement the database this year. During the second year, the core models of DOMINO would be refined, with customization possible. There is an agreement to add an electronic promotion and tenure dossier builder; enhance the research database; connect with PeopleSoft, if possible; tracking teaching evaluations; include affiliate faculty; provide a tool for generation of reports. In addition, the current UPI Provider Profile project will eventually be linked to DOMINO, with information that's provided in DOMINO being downloaded to the provider profile database. Each department will pay a \$3,000 initiation fee, and department administrators will enter the initial 17 fields for each faculty member, after which the faculty member will complete the remaining fields. The servers are currently offsite, but they will be moving to a COHO server. There was then discussion regarding implementation of the database. Dr. Freed commented that the initial entry of data was time consuming, but the database works very well and is extremely valuable during annual evaluations. Dr. Cohen added that the potential for being able to find someone in the School of Medicine who is currently doing specific research will be valuable. There were questions regarding privacy issues, and Dr. Lowenstein stated that he would look into those issues, but the reports that will be generated will be for general information requests.

Sr. Associate Dean Ridgway provided an update on the recent Research Retreat, which took place November 13<sup>th</sup>. The RAC has asked the campus for proposals, and 15 proposals were submitted, with 8 proposals then reviewed. Those 8 proposals were presented to the RAC, and 6 were chosen for further consideration. The criteria for

exclusion included if a project was only about a single subject; the proposal had to be broad and multidisciplinary. The 6 proposals include:

1. Neuroscience Program, requesting to become a center (Diego Restrepo and Ken Tyler);
2. CTRIC Imaging – this proposal was the most expensive and is linked to ARRA funding (Gerald Dodd and Gary Fullerton);
3. Microscopy – (Moshe Levi, Bill Betz)
4. Translational Genomics (David Schwarz and Matt Taylor)
5. Vascular Biology (Jane Reusch and Kurt Stenmark)
6. Obesity – (Jim Hill)

Dean Krugman decided that he didn't want to exclude any of the outstanding proposals, and the presenters were asked to put together a proposal for SIRC, and they would be graded on their integrity and financial promise. They are currently in the process of second round evaluations. It was added that the SIRC review is the most rigorous review on campus. In summary, two of the proposals (Microscopy and Vascular Biology) have received funding, and it is anticipated that the other four will also receive funding. The CTRIC proposal received \$2 million in funding that had been left over from the GCRC, and NIH allowed reassignment of those funds.

Sr. Associate Dean Ridgway provided an update on space, beginning with background on the current space allocation process. The process was developed when the Chancellor's Office asked for information regarding space. The space allocation process that was then developed was approved by the Chairs. The process provided an understanding of all of the research space and dollars associated with the space. The process provided for an analysis of productivity. A database was created, which included all of this information.

With regard to the Research 3 building, which was to be built west of Research 2, the original intent of the building was to be a mixture of wet and dry research. The architects are now addressing how to accomplish that. Clearly, due to budgetary constraints, they can't afford the building right now. There was discussion regarding a smaller Research 3 building, but it was decided that that also couldn't be accomplished. The project is on hold for an anticipated 5 years. Dr. Ridgway emphasized that we must be judicious in how we use our space for current and future programs. The question was asked whether the VA plans to build any research space. Dr. Ridgway answered that they were going to build a 40,000 square foot building for research located on the far SE corner of the campus, but due to funding, that is now in question. Dr. Cohen asked whether the census of space that was provided included the School of Pharmacy space that will be vacated when their building is finished? Dr. Ridgway answered that it does not, and it is unclear what will happen to that space. It is thought that the Chancellor will assign that space to the SOM, but that is not clear. If it is assigned to the SOM, the Dean will use a list of priorities to allocate the space.

The meeting concluded at 5:30 p.m.



# Faculty Senate Meeting Minutes

**April 13, 2010**

The minutes from the March 09, 2010 meeting were approved.

Dean Krugman provided an update on Department Chair searches that are still underway:

- Pharmacology – the position has been offered to the 1<sup>st</sup> choice, but that individual will be accepting another position. Dr. Krugman met with the department and 2 options were discussed, an interim for one year or a 2<sup>nd</sup> internal candidate.
- Medicine – the committee recently conducted airport interviews of 12 candidates, and they recommended 5 of those candidates for 2<sup>nd</sup> visits.
- Linda Crnick Center – they are in the process of the third attempt to recruit a director, and a search firm is conducting the search. Two of these candidates will be here next week for the visits.

Dean Krugman provided an overview of the Dean's Office structure:

The immediate people are the Assistant Dean and Chief of Staff, the Communications Director, the Associate Deans for Health Affairs, the Endowed Chair in Rural Health, and the Associate Dean of Diversity and Inclusion. The next tier includes the Senior Associate Deans of academic affairs, Administration and Finance, Clinical Affairs, and Education. In turn, these departments are divided into smaller focused areas to be able to efficiently deal with their respective areas of expertise.

The second topic of discussion was the Student Climate Survey that was presented by Steven R. Lowenstein, Associate Dean for Faculty Affairs and Jasmeet Dhaliwal, medical student.

Dr. Lowenstein and Jasmeet Dhaliwal gave a Student Climate Survey presentation and discussed the following:

The objectives of the climate survey were to (1) identify current problems and concerns, as voiced by students, (2) collect baseline data for the evaluation of diversity efforts and (3) identify popular existing strategies and promising new strategies to strengthen the SOM's diversity programs.

With the aims in mind, they sought to measure student experience and attitudes in 6 principal domains:

1. The general environment and culture on campus
2. Witnessed disparaging remarks or behaviors
3. Barriers to reporting witnessed incidents
4. Isolation of minorities on campus

5. The value of diversity in the learning environment
6. The effectiveness of SOM Leadership with respect to diversity issues

The survey was web-based, administered via zoomerang in May of 2008. The survey targeted students in the MD, PA and PT programs. There were 24 questions with 3 primary formats: likert scale, short-answer, and open-ended. Where possible, the questions were derived from published validated surveys. Individual responses were anonymous and confidential. Of the 980 eligible students, 261 participated, equating to a response rate of 27%. 58% of the respondents were female, the majority were from the MD program, and there was an even distribution with respect to year of study. A small percentage of students view our campus as homophobic (9%), racist (6%) or sexist (7%). Moreover, the vast majority of students describe the School of Medicine as welcoming to members of minority groups (83%) and friendly (90%). Only 37% perceive the campus as diverse. In the witnessed behaviors domain, we asked the following question “Have you ever witnessed *fellow students or residents* make disparaging remarks or engage in offensive or intimidating behaviors toward members of the following minority groups?” Looking at the frequency of yes answers, people with strong religious beliefs were the most common targets with 43% of respondents having witnessed remarks or behaviors directed towards this group. Other groups were also frequently targets. People of low SES, those who speak English as Second Language, and Women were reported as targets by at least 30% of respondents. Likewise, Racial and ethnic minorities, GLBT individuals, and people with disabilities were identified as targets by 28%, 25%, and 17% respectively. Students were also asked about witnessing inappropriate faculty behavior toward minorities. While the distribution of frequencies across minority groups was nearly identical to the previous question, it is important to note that the magnitude of the frequencies were only half those seen for fellow students and residents. Barriers to reporting witnessed incidents was another domain of inquiry. When asked about the likelihood that they would report disparaging remarks or behaviors toward minorities, students were least likely to report the event if the perpetrator was a faculty member, versus a resident or fellow student. An open-ended question asked students to share the reasons why they were reluctant to report incidents. The medical hierarchy and concerns about grades were the most common reasons mentioned – there were 95 related comments. A lack of a reporting system and skepticism about whether any action will be taken were also common reasons – with 28 and 21 comments respectively. As Dr. Lowenstein mentioned earlier, the current legal basis for minority recruitment efforts is grounded in the idea that a diverse student body and faculty enhance education. With this in mind, we asked students whether they thought their learning was enhanced by having a diverse group of students and faculty around them. The response was overwhelmingly yes, with 91% of minority and 89% of non-minority students agreeing. Students were given a chance to offer comments on effective ways to improve diversity on campus. Comments were generally supportive of current efforts and emphasized the importance of pipeline activities. In summary, the major results of the survey were that students think the campus is friendly but not diverse. Students are exposed to disparaging remarks and behaviors toward minority groups in all settings.

Perhaps most surprisingly, people with strong religious beliefs or conservative viewpoints were most often targets. Other groups such as the GLBT population, women, low SES and non-English speakers were also targets. Substantial perceived barriers to incident reporting exist, especially when the perpetrator is a resident or faculty member. Concerns about retribution and the lack of an anonymous reporting system were most cited. Lastly, students see value in diversity and generally support the effort to improve diversity on campus.

The results of the survey support the following recommendations:

Continue efforts to improve diversity on campus, with a focus on pipeline activities. Implement an anonymous and confidential incident reporting system – action in this regard has already been taken as plans for such a reporting system were approved by the faculty senate on January 12, 2010.

There is a clear need for a broader definition of diversity that includes political values and religious beliefs – on an institutional level. This means that we should modify both the student-learner contract and diversity mission statement to reflect this.

Lastly, one of the intentions of the climate survey was to provide baseline data to evaluate ongoing diversity efforts. Thus there is a need to periodically reassess the campus climate.

The third topic of discussion was an update from the Radiation Oncology department by Dr. David Westerly. He presented an overview of his department and their mission:

Radiation oncology is a discipline of medicine that addresses the causes, prevention, and treatment of cancer with special emphasis on the role of ionizing radiation. It is estimated that 60% of all cancer patients receive radiation therapy as part of their treatment.

Rationale for radiation therapy is based on taking advantage of the therapeutic ratio. Advancements in RT technology on several fronts: Linear accelerator development, Pulsed accelerator, Beam shaping (MLCs), Rotational delivery, On-board image guidance, Computerized treatment planning, Inverse planning and optimization, Intensity modulated radiotherapy (IMRT), and Advanced imaging techniques including MRI, PET/CT, 4D-CT, etc.

The Department of Radiation Oncology was officially formed in 1992 and its stated mission is therapeutic applications of radiation at UC under purview of Radiology through the 1980's, to provide state-of-the-art radiation therapy services to the UCHSC and citizens of the Rocky Mountain region, to advance the knowledge of radiation oncology through basic science research, clinical studies, and education

Faculty members are actively engaged in teaching and education. They have a facilitated ACGME accredited radiation oncology residency program since 2003 and currently have 6 residents. They participate in the NRMP with an Educational curriculum that consists of three components: Core clinical, Radiation biology, Radiological physics and radiation safety.

Research includes Molecular Radiobiology Research, Clinical/Translational Research and a Special focus on Stereotactic Body Radiation Therapy and medical Physics Research.

Looking to the future their plans are the following:

- Equipment upgrades
  - 3 of our 5 treatment machines nearing the end of their life cycle
  - Proposal has been submitted to capital budget committee for replacement of 2 machines over the next 2 years
- New Personnel
  - Currently looking to add 1 radiation oncologist
  - Next year will expand residency program, bringing total to 8
- Cancer center expansion
  - Will add 1 additional treatment vault
  - Increased square footage will provide much needed clinical, research, and office space

In Summary, The department of radiation oncology is comprised of a diverse group of specialists who work to diagnose and treat disease with ionizing radiation. Advances in technology have led to more conformal treatment techniques which improves their ability to treat complex lesions while minimizing normal tissue toxicity. Research efforts aimed at better understanding the interactions of ionizing radiation with both tumor and normal tissues and using that information to improve patient care.

The meeting concluded at 6:00pm.

Fadi Nasrallah, MD  
Faculty Senate Secretary



## Attachment 1

### Faculty Senate Meeting Minutes May 11, 2010

The minutes from the April 13, 2010 meeting were approved.

Dean Krugman provided an update on Department Chair searches that are still underway:

- Pharmacology – interviews continue for both internal and external candidates.
- Medicine – the committee recently conducted airport interviews of 12 candidates, and they recommended 5 of those candidates for 2<sup>nd</sup> visits.
- Linda Crnic Center – One of the two of the candidates, Dr. Ed McCabe, the Pediatrics Chair from UCLA , will be offered the position.

Dean Krugman provided an update on Status of the Department of Pediatric Surgical Subspecialties Proposal:

The Committee assigned to evaluate the proposal did a fabulous job. They did not recommend a Pediatric Surgical Subspecialties Division but instead recommended a Center for these subspecialties. The other issue that came up is the lack of an academic culture and the resources to grow these academic programs. The CEO and the Board have not signed off on this project as of now.

Budget Update: Dean Krugman advocated to allow increases in salaries within the departments and the divisions without the inclusion of state funding. He mentioned that this is why BSI was created. The Regents were not on board, but the Dean made a convincing argument that 98% of the money is not from the State. We will receive \$10.3 million dollars from the state next year and we will be paying \$18million in state taxes. Thus, the increase in salaries will actually stimulate the economy and departments can offer whatever increases they can afford, as long as the funds for the increases are not from State funds.

Promotions: A suggestion to create a task force to evaluate and address promotion criteria was raised.

The other item on the agenda was a Question and Answer Session with Roy Wilson, the Chancellor of the University of Colorado Denver, and Roderick Nairn, the Vice Chancellor of the University of Colorado Denver.

There were no specific agenda items but the following were discussed by the Chancellor:

The Budget: The State March forecast was better than expected and the one year projection could optimistically be at \$300 million. The 2011 budget looks OK. The

concern is with the 2010 budget when the stimulus money dries up. The worst case scenario could be a significant deficit, and the best case scenario would be a positive for the downtown campus and a 'barely positive' for the Anschutz Medical Campus as there are not enough students in the latter. The budget shortfall is helped by a significant transfer of funds from the downtown to the Anschutz Medical Campus.

The Chancellor noted that he is very sensitive to the issue of freezing salary increases, and the Board of Regents approved a 0.3% salary increase. As well, he mentioned that most faculty are on BSI. BSI allows salary increases based on the source of funding, which is usually clinical. Administrators who are not on BSI will be compensated with incentives up to 10% of their salaries.

Strategic Plan for the University: With respect to diversity in the B.A., B.S., and M.D. programs, an initiative was put into place to accept the top 10 students from diverse backgrounds and offer them a scholarship, and they all accepted the positions offered to them. In addition, another six students accepted positions without financial support.

Other items that were discussed related to continuing building projects despite the economy, the search for a Graduate School Dean, and the professional accreditation that is scheduled in April of 2011.

In the Q&A session, the following items were brought up:

Shea Properties could not close on buying the 9<sup>th</sup> Avenue building even after extensions were granted. The agreement is being redrafted to alter the relationship between the two parties. As well, there is an interest from a donor to buy the building and change it to public offices in order to leave a legacy.

The Colorado Biosciences Park: The development is slow. Forest City was going to build Building T. However, the FRA board was divided on the issue since the prospective building is only 50% leased out. Thus, the board voted against the construction.

Fundraising: By the end of June, at least \$40 million was raised this year.

Concealed weapons: The decision not to allow concealed weapons on campus that is the Regents' policy has been overturned by the lower court. The SOM will file an appeal by claiming that this is a Regents' issue and not a State issue.

On another topic, Officer nominations are open till the end of May for the President-Elect and secretary positions.

The meeting concluded at 5:30pm.

Fadi Nasrallah, MD  
Faculty Senate Secretary