

Academic Affairs Subcommittee  
of the Board of Directors

November 1, 2004

**Minutes**

Attendees: R. Berlin, G. Burrow, P. Deckers, J. Goldberg, L. Jacobs, B. Koeppen, C. Leonardi, M. MacNeil, G. Maxwell, M. Mina, P. Robinson, P. Setlow, J. Shanley, L. Spangberg, B. Carlson, J. Comerford, A. Ferris, M. Freedman, I. Goldschneider, L. Klobutcher, L. Lefrancois, D. Peterson, P. Srivastava, E. Storey, S. Strongwater, H. Tennen, D. Upton, J. Walter, S. Wetstone, S. Wikel

Dr. Burrow called the meeting to order at 9:00 a.m.

1. Public Comment

None.

2. The minutes of the August 16, 2004 meeting were unanimously approved.

3. Business Items

a. Approval of Tuition and Fee Recommendation for the 2005/06 Academic Year

The Academic Affairs Subcommittee unanimously approved the following recommendation: **That the Board of Directors approve the proposed tuition and fee increases for the School of Medicine and School of Dental Medicine for the 2005/06 and 2006/07 academic years.**

Drs. Koeppen and MacNeil presented the proposed increase in tuition and fees to the medical and dental students. In order to be in compliance with the tuition policy of the Board of Governors of Higher Education, 15 percent increases in tuition and fees are proposed for the next two years. Dr. Koeppen noted that although the medical students are not happy with this increase, they do understand why the proposal is being made. One suggestion made by the students was to consider developing a policy whereby tuition is set for all four years upon admission. It was noted that this would require approval by the Board of Trustees and consultation with the Department of Higher Education to see if this would require a change in their policy. The students also asked whether some of the loan money could be placed in scholarship funds. He noted that students in primary care felt they would be the most impacted by these increases because they would have more difficulty paying it back.

Dr. MacNeil noted that the dental students comments paralleled those of the medical students. When asked whether these increases will affect our ability to recruit quality students, Dr. Koeppen responded that while this is a concern, all public and private schools have had to do the same. However, the School of Medicine is still at the 53<sup>rd</sup> percentile for medical schools, and our dental students graduate with a lower debt than most graduates from other dental schools.

b. Update on Reorganization of the School of Dental Medicine

At the August 16, 2004 meeting of the Academic Affairs Subcommittee, a proposal to reorganize the School of Dental Medicine into three new departments was approved with the proviso that it be brought back in November 2004 to allow the School of Dental Medicine Council time for further discussion and review. Dr. Robinson reported that the Council held two meetings in October 2004. At the first meeting, they approved a motion to reorganize the School. At the second meeting, they approved a motion to advise Dean Robinson that they were comfortable with either a two or three-department model. Dr. Robinson recommended that the Subcommittee take no further action on this issue and that they proceed with the three-department model. As requested at the August 16 meeting, Ms. Leonardi again asked that Dr. Robinson report back by December 31, 2004 with details regarding the full departmental internal structure.

Dr. Spangberg outlined the concerns of Dental Council. While Council does not object to reorganization, there is still significant unease about the three-department model. They also find it difficult to discuss the plan without more details. He indicated that Council is requesting an additional six months for further deliberation pending more details. Dr. Burrow verified that Council did agree that reorganization should occur, that they were comfortable with either a two or three-department model, and that no further vote was taken. He therefore saw no reason why the three-department model should not go forward. Dr. Spangberg noted that the Dental School By-Laws would have to be drastically changed because of this reorganization, as well as the Senior Appointments and Promotions Committee Guidelines. However, it was again pointed out that these details would have to be completed by December 31, 2004 and that Council would have an opportunity to participate in that process. Dr. Robinson added that everyone, including staff, will be involved in the development of the new plan. He further noted that the centers that will be created within the three new departments will fall between Type I and Type II centers and will report to the Dean on some issues and to the departments on others.

A motion was made and seconded to rescind approval of the plan and remand it back to the Board of Directors. The motion was defeated by a vote of 2 in favor, 3 opposed, and 2 abstentions.

c. Review of a Proposed Policy on Base Salary for Tenured Faculty and Post-Tenure Review

Dr. Deckers distributed the “Tenured Faculty Minimum Guaranteed Salary Policy” which was implemented in May 2004. Some faculty felt they could create a policy which is more responsive to the needs of the institution and to the needs of the faculty. Dr. Deckers agreed to give them the opportunity to develop an alternate policy and only asked that the stop-loss policy not be eliminated and that they integrate a post-tenure review policy. Like the original policy, this proposal, if approved, will apply to School of Medicine and Dental Medicine faculty.

Dr. Klobutcher presented the plan developed by the Tenure and Compensation Subcommittee of Medical Council. He explained the Subcommittee’s approach in developing the proposal, which included reviewing various reports and documents, including the CSC Consultants’ report, meeting with a number of people, and reviewing data from other medical schools. He noted that there were a number of inaccuracies in the consultant’s report, one of which was the statement that 3 percent of medical schools guarantee full salary for tenured faculty. The Subcommittee found that 22-40 percent of medical schools guarantee essentially full salary, but there is a clear trend in moving away from full salary support and moving towards a guarantee of base salary less than 100 percent. He noted that in developing the proposed policy, the Subcommittee was mindful of the need to conform to University By-Laws and to provide a salary level that would allow faculty the ability to continue to do their work.

Dr. Tennen presented the post-tenure review proposal, which is comprised of a post-tenure review procedure, salary reduction for poor performance, and changes to the tenure review process. The proposal creates a new category in the Academic Merit Plan, which is “marginally meets expectations.” This was created because there has been a reluctance on the part of some department chairs to give faculty a rating of “does not meet expectations.” All tenured faculty would be reviewed for post-tenure review every five years. Post-tenure review would be conducted by the Senior Appointments and Promotions Committee (SAPC), and would occur only if a faculty member received one “fails to meet

expectations” or two “marginally meets expectations” in a five year period. If performance is considered unsatisfactory, the faculty member and department chair would prepare a development plan aimed at returning the faculty member to satisfactory performance. The progress would be monitored by the SAPC. Faculty judged by the SAPC to have unsatisfactory performance would receive a salary reduction to 75 percent of the UCHC average for rank and track or 75 percent of current salary, whichever is lower. For faculty awarded tenure prior to January 1, 2005, their salaries would not be reduced below their base salary as of January 1, 2005. It was pointed out that salary reduction applies to all faculty in this proposal, whereas in the current plan, it only applies to faculty receiving tenure after May 11, 2004. Initiation of the post-tenure review process could begin one year after approval of the plan.

Dr. Tennen then explained four changes to the tenure award policies that are being recommended in this proposal. The first is to allow assistant professors to be considered for tenure after 5-7 years instead of after five years. It is felt that this would enable the SAPC to make the very best tenure decisions. Another change is to allow letters of evaluation from peers to remain confidential, and to be able to access student evaluations of faculty with full confidentiality for the student. The final recommended change to tenure award policies is to allow faculty to stop the tenure clock for up to two years for life altering events such as the birth of a child, illness, etc.

Finally, the proposal recommends that non-performance of academic duty be considered a reasonable cause for dismissal. This recommendation received strong support from Council.

Some members expressed concern regarding the inaccurate data contained in the consultants’ report. Dr. Robinson asked that the dental faculty be brought into this process and discussion. Dr. Tennen indicated that that would occur and noted that the proposal has been supported in principle by a subcommittee of the Dental Council.

There was overall support for the proposal. It will now be discussed with President Austin and brought back to the Academic Affairs Subcommittee at a future meeting.

d. Creation of the Department of Immunology

This issue was presented for information only. Dr. Deckers noted that the School of Medicine has undergone a redesign of the basic science departments towards themes that will be relevant in medicine and research over the next two decades. One of those themes is immunology, and Dr. Wikel presented a proposal to create a Department of Immunology. Approximately 20 faculty have expressed an interest in joining the new department. These faculty currently have appointments in the Departments of Medicine and Pathology. Others expressed an interest in having secondary appointments in the department. Dr. Wikel noted that the Health Center has a rich tradition in immunology with a strong faculty in this area. However, they are dispersed among various departments and centers, and it is believed that creation of the new department would enhance our stature nationally and internationally. It is also believed that it will improve faculty and student recruitment and enhance grant funding. A number of faculty in the new department are doing translational related research, which will provide more interaction with the signature programs.

The department would be composed of three Type I centers. It would be governed by an Executive Committee in the formative stages, during which time there would be a search for a permanent chair. Each member of the Executive Committee would be assigned a particular area of responsibility during the first year. Each of the center directors, who are permanent members of the Executive Committee, will head the Executive Committee and represent the department on various committees on a one-year rotational basis.

A question was raised regarding how the department would collaborate with other campuses and the community. Although collaborative projects with Storrs have not been totally worked out, there have been some research interactions between the two campuses. In addition, some graduate students have been mentored both here and at Storrs, and we participate in some of their seminar series.

Dr. Shanley noted that creation of this department leaves very few investigators in the Department of Medicine. Dr. Garibaldi, Chairman of the Department of Medicine, also expressed this concern when the proposal was presented to the Dean's Advisory Committee (DAC) in October. Dr. Deckers noted that at that time, the DAC voted 9:5 in favor of creation of the department, but the School of Medicine Guidelines require a two-thirds majority of the DAC to carry the motion. While Dr. Deckers believes that creation of this department is in the best interest of the School of Medicine, he has agreed to defer further action until

Dr. Garibaldi has had an opportunity to present his concerns and opinions to the Executive Committee of the Department of Immunology.

e. Update on the Center for Public Health and Health Policy

The Center for Public Health and Health Policy was established in the spring of 2004 as a synergistic effort with the Storrs campus and was charged with integrating and consolidating resources across campuses, providing key additional resources, and establishing doctoral training programs in public health. The Center will also assess the feasibility of creating a School of Public Health. Drs. Storey and Ferris are Co-Directors of the Center. They have identified a Strategic Planning Team, which provides oversight to the Center. Five Task Forces have also been formed and assigned various responsibilities and will bring recommendations to the Strategic Planning Team. Drs. Storey and Ferris provided an update on the activities of the Center to date and who has been engaged in this process. They noted that one of the most exciting partnerships that is developing is with the Department of Public Health. Further updates on the activities of the Center will be provided to the Subcommittee in the spring. One suggestion was to add additional people to these various committees who can provide input regarding resources and assist in developing business plans.

f. Report on the Status of the Institutional Space Policy

Tabled.

g. Report of Research Services Enhancement Working Group/  
PricewaterhouseCoopers (PwC) Report

Dr. Deckers presented a brief summary of the report generated by PwC regarding our research domain. The purpose of engaging PwC was to help us get a better understanding of how much of the research side is subsidized, to determine whether that subsidy has a return on investment, and to look at economic modeling of research departments and centers. Also, since some felt that research administration has not worked well for many years, PwC was asked to address process improvements. The report generated by PwC primarily emphasized economic modeling rather than process improvements. Dr. Deckers noted that an Assistant Dean for Clinical Research has been appointed, who will review the clinical trials organization. The Health Center Research Advisory Committee (HCRAC) will be taking a comprehensive look at the research core facilities and

the allocation of funds to these facilities. In addition, we will be looking at all issues that impact the well being of our research scientists and working with the JURAN Institute to improve specific areas and processes. This issue will be presented in more detail at the February 2005 meeting.

4. Consents

a. Endowed Chairs - Annual Reports

The Academic Affairs Subcommittee unanimously approved the following recommendation: **That the Board of Trustees approves the Annual Reports for the following Endowed Chairs: (1) Infectious Diseases/AIDS Research; (2) Transfusion Medicine; (3) Human Genetics.**

b. School of Medicine - Promotions, Reappointments, Emeritus Appointments

The recommendations for School of Medicine promotions, reappointments, and emeritus appointments were unanimously approved.

There being no further business, the meeting was adjourned at 11:35 a.m.

Respectfully submitted,

Bruce M. Koeppen, M.D., Ph.D.