

**School of Medicine Executive Committee**  
**Meeting Minutes**  
**Tuesday, October 15<sup>th</sup>, 2013**  
**AO1 Building, 7<sup>th</sup> Floor Boardroom**

ATTACHMENT 1

**Present**

**Members:** John Cambier, Timothy Crombleholme, Robert D'Ambrosia, Stephen Daniels, Chip Dodd, Laurie Gaspar, Tom Henthorn, Randall Holmes, Mark Johnston, Richard Krugman, Wendy Macklin, Naresh Mandava, Dennis Matthews, David Norris, Angie Ribera, Ches Thompson for Nanette Santoro, Richard Schulick, David Schwartz, Andrew Thorburn, John Sladek for Ken Tyler, Richard Zane

**Participants:** Brittney Bastow, Terri Carrothers (via phone), Mark Couch, Ben Honigman, Richard Johnston, Douglas Jones, Celia Kaye, Steven Lowenstein, Thomas Meyer (VA), William Neff, Chris Nyquist, Nichole Reisdorph, Carol Rumack, Jane Schumaker, Ron Sokol, Fred Suchy, Richard Traystman, Cheryl Welch, Nan LaFrance

**Guests:** Fred Grover, Mollie Young, Kim Benson, John Burtness

**I. Approval of the Minutes** – The September 17<sup>th</sup>, 2013 SOM Executive Committee Meeting minutes were approved unanimously.

**II. Dean's Update and Discussion Items**

**A. Discussion Items:**

**1. Status of Negotiations with UC Health** – approval for the contribution to the CU-SOM and the academic enterprise goes before the UCHealth board on October 22<sup>nd</sup>. The negotiation group consisted of Lilly Marks, Jane Schumaker, Richard Krugman, Douglas Jones, Anthony DeFurio, Bruce Schroffel, Rulon Stacy, Bill Neff and Dick Monfort. The contribution from the system to the SOM is linked to a certain percentage of the EBITDA of the health system. EBITDA is the acronym for Earnings before Interest, Depreciation, Taxes and Amortization. The current proposal is a percentage which is pegged to the budgeted EBIDTA for the year. A downside risk is if the EBIDTA should go down, the amount contributed to the SOM will also go down however as the EBIDTA rises so will the contribution. This program is similar to the model at the University of Pittsburgh Medical Campus where the hospital has provided this type of contribution for 10-15 years. If the UC Health Board approves this proposal, the SOM will receive a lump sum for this year with the percentage contribution beginning with the 2014-15 fiscal year. These contributions have the ability to significantly support SOM's strategic planning and academic enterprise. Dr. Neff stated that different formulas were reviewed, and he believes they have come up with the best formula. The success of the system linked in with the support of the school was well received. As the system grows, the SOM will receive more funds, and it also means that the SOM is invested in the success of the system. The funds are intended for the CU School of Medicine. There are discussions surrounding shared funding for CREW, Oncore, and other investments; however, these are viewed as capital investments by the system. The primary use of the funds is to support the academic enterprise of the school including the research and education programs. The most recent discussions about the reorganization of the basic science departments made it clear that the research enterprise in both basic sciences and clinical departments is significantly under-funded when it comes to base support. In the clinical arena, particularly the departments of medicine, pediatrics, psychiatry, surgery and a few others, there needs to be a discussion with a group of clinical department chairs on how these funds should be invested in the research enterprise and to determine which formula to use for these additional

- resources. Currently the basic sciences departments have between 30-50% of base funding supporting the salaries of the basic science faculty and without clinical revenue are unable to support higher bases. The departments of medicine, pediatrics, surgery, etc., have always used clinical dollars and have little base dollars to support their research programs. Principles need to be defined prior to deciding on how to use this funding. The Dean will put together a group to discuss principles to present to the SOM Executive Committee in either November or December. There is an opportunity to use some of the resources on some of the key core research centers at the school, i.e., the cancer center, COHO, etc. therefore some center directors need to be included in these discussions.
2. **Basic Science Reorganization** – there will be four departments and their research focus will be in Cell and Molecular Biology, Immunology and Microbiology, Neuroscience, and Pharmacology and Cancer Biology. The specific names will be decided by people in the departments later. The 12 faculty from the Immunology department located at National Jewish will move to the School of Medicine campus by July 2014. Dean Krugman asked for any major concerns prior to moving forward. He asked for volunteers to comprise a committee to discuss the space issue with Dr. Chip Ridgway. Dr. David Schwartz feels that the reorganization will enhance both the basic science and clinical research enterprises. Dr. Richard Schulick believes that the positive aspects of this move will far outweigh any problems it may cause. Dr. John Sladek expressed a concern about funding for the Center of Neurosciences in which the Dean assured him that with the reorganization the Neurosciences Center is not going to be affected. Dr. David Schwartz made the motion to endorse the planning stages of moving the basic science reorganization forward, Dr. Chip Dodd seconded it. The vote was unanimously approved.
  3. **Student Mistreatment and Code of Conduct** – Dr. Celia Kaye stated that the code of conduct is being worked on with various programs for faculty and the consequences for the code of conduct will be important for all faculty and students. The Dean said that the numbers for Student Mistreatment were worse last year than they were the prior year. Dr. David Norris stated that with such great collaboration among the leaders of the SOM, why is there such poor treatment of students? Dean Krugman stated that there are a small percentage of faculty, etc., who do not know how to treat people well. Some of the leaders tend to turn away from bad behavior and/or ignore it. Unless everyone puts a stop to it, it will not get any better.

Dean Krugman also announced that Dr. Celia Kaye announced her retirement effective December 31<sup>st</sup>, 2013. There will be an internal search for the position which is .5FTE. The job will be posted soon and Dr. Chip Ridgway will chair the committee. If you are interested or know someone who is, please contact Dean Krugman's office.

## **B. Affiliation Updates**

1. **VA Update** – Thomas Meyer, MD updated the committee on the progress of the new VA building. In spite of the past issues, the VA continues to be built however, it will not likely be done by 2015. The VA also hired their first Gynecologist, Dr. Magdy Nour and they have met the quota for CT surgery.

- C. **CU Development Office** – John Burtness from the CU Development Office updated the committee on the Faculty and Staff giving. In 2012, 230 faculty and staff gave \$715,000 and so far in 2013, 291 faculty and staff have given. Dr. Fred Grover will host several events in his home at the end of October and first part of November which will include a discussion on estate

planning/giving.. Wagner Schorr, MD (Alumni Class of '63) has become a self-appointed estate planner for his alumni and retired faculty and has offered to conduct these discussions.

- D. PRiSM** – This program is an enhancement and replacing Domino and Fido for faculty performance evaluations and is to promote conversations and face to face discussions. The integration of PRiSM – “Performance Reviews in the School of Medicine” is almost completed. This project was done without any outside consulting using current resources. The new enhancements include standard UCD log-ins, customized routing, and closer connections to promotions matrices. The software is mobile-friendly, has an automatic uploads of teaching evaluations, and includes Dean’s evaluations of department chairs and attestations.

## **EXECUTIVE SESSION**

### **III. Approval Items**

- a. All Senior Clinical Appointments and Promotion Committee actions were unanimously approved.

The meeting adjourned at 9:17am