CU-SOM Faculty Senate Meeting Minutes (9/15/2020)
as noted by Merlin Ariefdjohan (Secretary 2020-2021)

The minutes from the June meeting were unanimously approved.

Next Faculty Senate Meeting has been scheduled on Oct 20, 2020; 4:30 to 5:30 pm.

• Faculty Senate
  o Introduction of 2020-2021 Faculty Senate Officers:
    ▪ President: Jaime Arruda, MD (Obstetrics and Gynecology)
    ▪ President Elect: Gregary Bocsi, PhD (Pathology)
    ▪ Secretary: Merlin Ariefdjohan, PhD, MPH (Psychiatry)
  o A reminder that Faculty Senate provides oversight to educational, clinical, scholarly, and designated administrative decisions. It is not a forum for discussion related to disciplinary actions, and student promotions/honors.
  o Meeting structure:
    ▪ Once a month, except July and August (i.e., 10 times/year)
    ▪ Meeting schedules of the year shall be distributed a year in advance → 3rd Tues at 4:30 to 5:30 pm for 2020-2021 cycle
    ▪ Appoint alternates to attend when needed
    ▪ Only elected senators present at the meeting may vote on matters that are brought up to the Senate, unless another form of voting is authorized by the majority of attendees at the meeting
  o Senate responsibilities:
    ▪ All committees draft an annual written report of their activities → relay to the Dean, Executive Committee, Faculty Senate
    ▪ Report information back to respective departments → share feedback receive from departments
    ▪ As President, Jaime will attend the Executive Committee meetings to represent the Faculty Senate and share the information at the Faculty Senate/Officers meetings.

• Dean’s updates:
  o It is the responsibility of Faculty Senate members to share information discussed during this meeting to respective departments and to solicit inputs that can be further discussed at Faculty Senate meetings.
  o Voting is important and results influence future healthcare and advances in sciences. But there may be faculty who do not share this opinion. UCH administration also does not seem to agree with personnel reaching out to patients to encourage them to vote. Expect push back when sharing information about voting (Suzanne Brandenburg’s presentation).
  o CU Medicine Board of Directors approved $1M funding for student healthcare for upcoming year. This is renewal of commitment they made last year.
  o Current Chief Financial Officer of Denver Health has retired, and the replacement will be named shortly.
Clinical volume of CHCO and UCH are reaching numbers similar to last year’s trends. Slight reduction in volume by urgent care and inpatient, but not significant. Hopefully, these trends are preserved in Fall.

Reminders for everyone to get flu shot.

There is a need to establish a better working relationship between VA and SOM. Leaders from both organizations are thinking of ways to create better partnership, one that does not focus only on crisis management (as it is currently done).

Department Chair search:
- Good progress for Family Medicine: candidate coming to visit campus soon
- Department of Physiology and Biophysics: a search committee is currently being planned. Invitation to be a part of this search committee will be sent out soon.

Q & A: None

Voting Initiatives (Suzanne Brandenburg; see slides for details)

- A reminder that voting is part of civic responsibility to achieve the ultimate goal of having healthier patients, healthier communities, social determinants of health, and stronger health professions. This has become especially crucial as the nation faces pandemic, systemic racism, and other societal issues.
- Several groups affiliated with our campus have been involved with the Get Out and Vote initiative:
  - Medical students (including dental, nursing, physical therapy, physician assistant) created video and magnet. Video was shown to Health Profession students, and magnets given to students entering the program. QR code created to facilitate voting.
    - Text “Vote Colorado” to 34444
    - https://voter.org/Colorado/
    - https://turbovote.org/
  - Residents brought up the initiative to Housestaff Association and bringing it up to GMEC
  - Clinical affiliates: Denver Health has rolled out a robust campaign including Spanish/English flyers explaining the importance of voting and how-to-guide; VA using the materials developed by the medical students above and planning to use these as national campaign to help vets register; CHCO has developed their own campaign and materials that may be launched shortly and also considering to push the campaign to primary care network

Those working on shift or new residents to Colorado/campus may not know where to submit their ballot. Thus, at campus level, there is a need to address the challenge in people working on campus returning their ballots. Currently, the box is located near the Wellness Center and this should be relocated to a more central location at CU Anschutz.

Please email Suzanne or Cheryl Welch if any Faculty Senate members are interested in getting more involved in this initiative. See presentation slides for more info.

Q & A: None
• Pandemic Workplace Accommodations (Carolyn Brownawell, Doug Kasyon; see slides for details)
  o A Working Group was formed to formulate recommendations to campus leadership to address the needs of faculty, staff, and students in caring for family while being professionally accountable during this challenging time.
  o The Working Group is in the work of formalizing a partnership with a vendor that provides services in locating child care, adult care, and back-up care. Contracts are being reviewed by legal teams, and logistics being looked into by OIT and Procurement.
  o 2 things to be put in place by end of Sept (target live: Sept 21, 2020; otherwise by Sept 28, 2020):
    ▪ Online care search: University will pay the membership fee of eligible faculty, staff, students to the vendor ($150/person) so that they can access the on-line care search. This platform allows members to access self-service tool for locating planned/continuous care for child, senior, pet, household care, tutoring, shared, spousal, etc. In addition to locating for caregivers, members can also post a job and receive 10% discount on day care (at participating child care centers). Eligibility: all paid employees at CU Anschutz and full-time students. Students may also sign up to be caregivers for $14.99/hr to earn additional income while in school
    ▪ Back-up care: Members receive fully vetted assistance when there are unexpected changes with current care plans (e.g., in-home or in-center care for children or adult/seniors on short notice, etc). With University subsidies, rate will be $6/hr for in-home care and $20/day for in-center care. Available for maximum of 10 days per year. Eligibility: Faculty and staff with at least 0.5 FTE appointment (benefits eligible), including residents and post-doc fellow.
  o Current contract is for 1-year but HR will monitor utilization. If it is popularly used then there would be discussion for extension.
  o Look out for announcements in COVID weekly update, SOM Dean’s message, CU Anschutz Today, communications from HR, etc
  o Alternative Work Arrangement Policy has been temporarily amended to allow care of dependents during work hours. Employees should work closely with their supervisors to set professional expectations while managing care obligations. See guidance in: https://www1.ucdenver.edu/docs/librariesprovider188/covid-19/interim-remote-alternative-work-arrangements-9-1-20.pdf?sfvrsn=8d83d9b9_0#::<text=Interim%20Remote%20Alternative%20Work%20Arrangements%2C%20as%20Defined%20Below%2C%20Which%2C%20And%20For%20The%20Appointing%20Authority
  o Q&A:
    ▪ Does vendor support transportation service? For example, public schools canceled bus services. Can we find ride/bus option through the vendor? → Not sure. Carolyn will check with vendor to get clarification.
    ▪ Are there policies in place to protect students/preceptor relationships in the event the students become caregivers to physician mentors? → Process and COI policy already in place at university level that can apply to this situation.
    ▪ Does back-up care include caring for sick child who can’t go to daycare? → Yes.
Are graduate students who are paid eligible for back-up care? Eligibility depends on their FTE.

Is back-up care only for daytime coverage or include weekends/night for on-call providers? Service is 24/7, 365 days/year.

Does this include spousal care? Yes, this is part of the adult care.

Care obligations during this time may affect academic productivity. Has any consideration to the promotion process been given?

Dean Reilly’s comment: All faculty have been given a 1-year extension to promotion clock if they wish to take that on. However, if they are ready to be promoted, then they can opt to stay on course instead of waiting for the next year. Please discuss it further with respective Department Chairs. This arrangement has been approved by the Provost.

Continuing Medical Education Update (Brenda Bucklin; see slides for details)

- Current activities/accomplishments:
  - Diverse modules delivered via live courses, RSS, and online materials have been well attended by learners on campus and nationally (more than 50,000 attendees, over 2,500 hours of instructions of 105 learning activities). Positive evaluation results on relevant metrics as shown in aggregate course data collected annually (see slide).
  - Comparing CUSOM vs Stanford (CME Live): CU CME office exceeded Stanford in number of instructions and learners (MD and non-MD/DO learners), with much fewer staff highlight the ‘lean-ness’ of CU operation and resourcefulness of the staff in maintaining the program.
  - Family Medicine Review FMR is the only course developed and managed by CME office with approximately 300 attendees annually (including participants nationwide). 2020 summer course has been cancelled; but Oct session has been moved to zoom (Oct 26 to 30) [https://ucdenver.zoom.us/j/98014963883](https://ucdenver.zoom.us/j/98014963883)

- Response to COVID:
  - Expedited process for activity application, certified courses moving from in-person to live-virtual and enduring materials
  - Partnership with SOM to provide ongoing certification of grand round activities (a total of 11 activities for 972 learners have been performed), CCTSI provided 300 credits for 60 learners, new podcast series from Dept of Psychiatry (Mind the Brain; no outcome data yet)

- Accreditation 2021 (see slide for timeline of activities): CME team is actively reviewing, revising, and developing content to submit by end of Nov 2020. Several innovative approaches have been implemented in CME office including converting application and claiming credit to electronic process, etc.

- Future of CME: Continues to be valuable to school, faculty, practice, among others as it focuses on patient centeredness and longitudinal interventions as part of its promoting lifelong learning mission. However, many components have to be moved to virtual classroom/hybrid learning/online materials due to pandemic. Additionally, CME office is planning to revamp website to make it easier for faculty to develop online content.

Q & A:
Can you comment on CME/MOC accreditation for providers/attendees outside SOM? Collaboration across providers at UCHealth could benefit from being able to offer credits to SOM and non-SOM attendees. This depends on the course, type of course (e.g., RSS, etc), affiliations, faculty vs. non-faculty role (e.g., RSS is developed by and are made available for faculty), etc. Should also look into other opportunities from various CME offices (e.g., Colorado Springs, etc) if need CME credits.
The minutes from the September meeting were unanimously approved.

Next Faculty Senate Meeting has been scheduled on Nov 17, 2020; 4:30 to 5:30 pm.

Please bring your questions to Jaime Arruda (Jaime.arruda@cuanschutz.edu; Faculty Senate President) so that they can be vetted and discussed at the next meeting.

• Dean's updates:
  
  o Department Chair search:
    ▪ Department of Physiology and Biophysics → search committee chaired by Paco Herson; remains as work-in-progress
    ▪ Family Medicine chair → search committee chaired by Gerald Dodd, MD (Chair of radiology); remains as work-in-progress
    ▪ Department of Pharmacology chair → search committee chaired by Wendy Macklin, PhD; remains as work-in-progress
    ▪ Casey Greene, PhD, has been hired as the director of a new Center for Health Artificial Intelligence. Dr. Greene is scheduled to start on Nov. 16, 2020.
  
  o Recent outbreak of COVID among students in Physical Therapy program (7 students tested positive)
    ▪ No significant exposure on campus during candidates’ visits
    ▪ There is a need to reinforce the message of wearing mask while on-campus and to reduce frequency and size of off-campus gatherings
  
  o Progress for Health Sciences building is on track for completion in June/July 2021, with potential move-in date approximately a year from now.
  
  o Q & A: None

• Department of Anesthesiology: Review of New Division and Approval (Thomas Majcher, Vesna Jevtovic-Todorovic; see slides for details)
  
  o Department of Anesthesiology is seeking approval to change the Section of Pediatric Anesthesiology to Division of Pediatric Anesthesiology
    ▪ The change was approved by the Faculty Senate (as polled through the chat feature in zoom; no one expressed disapproval)
  
  o This arrangement has been discussed for the past 3 years through close partnership between Department leaders. The Section maintains its own operating budget, has a robust fellowship program, and has a large pool of staff/faculty/trainees. Due to these reasons, it seems to have outgrown its current classification as Section, while concurrently it also meets SOM guidelines to be classified as a Division.
  
  o Q & A:
    ▪ What effect if any would this change in classification have on pediatric anesthesiology faculty at Denver Health? → None. The Division would
remain a part of Department of Anesthesiology with shared training mission and operating platforms.

- Can you briefly educate the new Senate members on the significance, requirements, costs and benefits of being classified as a Section vs. Division?
  - The change does not matter much in terms of faculty development since the investment in this area remains the same regardless of classification. However, a Division typically is more independent in terms of operations than a Section (e.g., budgetary, etc). Although in this case, the Section of Pediatric Anesthesiology was already independently functioning and thus fulfill the requirement of being a Division. Thus, this arrangement is perceived as a way to formalize the title more than making structural/operational changes.

- Proposal for a CU SOM Junior Faculty Committee (Adam Green; see slides for details)
  - This proposal was developed with inputs from Steve Lowenstein and Chery Welch
  - With this presentation, Adam is seeking feedback and soliciting faculty members to join the group. Please contact adam.green@cuanschutz.edu or Hana.Smith@childrenscolorado.org to sign up and/or discuss further.
  - This impetus for this initiative is the Junior Faculty Interest Group (JFIG) that is operating at the Department of Pediatrics. This group has been active in implementing faculty development-related activities for junior faculty (assistant professor, senior instructor) such as i) planning events focused on career/personal development (e.g., networking, finance, diversity and inclusion, dealing with challenges associated with pandemic, etc); ii) advocacy (e.g., childcare, salary equity, etc) and bringing up these issues to campus leadership. JFIG committee is made up of diverse pool of faculty with Adam as the current chair.
  - The idea with this proposal is to expand JFIG to include junior faculty across SOM, particularly to use it as a platform to improve communication and to foster connections across departments. This is a unique initiative that is rarely being implemented in academic medicine setting but could potentially be an effective platform to promote collaborations among colleagues and to have a stronger voice when advocating for issues. The expansion can also be beneficial to highlight other issues and concerns beyond what is being experienced in Department of Pediatrics.
  - Proposed ideas for the advocacy group: Junior Faculty across departments in SOM are eligible to join in and sign up to be part of the leadership committee, senior faculty will serve in advisory capacity, the committees will meet quarterly to plan faculty development-related events and discuss ideas for advocacy.
    - Estimated timeline: to collect nomination for committee members and finalize the initiative by Fall 2020, with committee meeting to start in early 2021
  - Q & A:
    - What is the obligation from departments across SOM? None at this time. Junior faculty are encouraged to join in and participate as committee members; senior faculty might want to serve as advisors. The group may
request for minimal monetary support from SOM or individual departments in the future to cover costs of events and luncheons.

- How many departments are there in SOM and how many representatives are expected to be in the committee? ➔ Currently, there are 23 departments in SOM. The plan is to have approximately 15 junior faculty in the committee.

- To what extent are you coordinating with other programs that have similar missions/activities? ➔ The intent is not to duplicate current initiatives but to fill in the gap. But the work to coordinate the group’s activities and current events on campus is still a work in progress.

- Senior Clinical Instructors may be perceived as Junior or Senior Faculty. You may want to structure the group such that you are supporting professor and instructor tracks in different ways. ➔ This is a good feedback and will be considered as the structure of the group is being further refined. Perhaps, an interest sub-group for senior instructors could be created.

- Other departments, including Anesthesiology, are developing program for faculty development as part of their overall mission. Collaboration would be valuable between departments and this group. ➔ This is a good feedback since part of the goal of this group is to improve connection across campus.

- Campus COVID-19 Guidelines (Ethan Carter, Cody Coburn; please contact Ethan and Cody if you have additional questions or concerns ➔ ethan.carter@cuanschutz.edu; cody.coburn@cuanschutz.edu OR occupational.health@ucdenver.edu)
  - Currently, there are different policies and guidelines being implemented at various sites on campus at affiliate sites (CHCO, DH, VA, etc). The Faculty Senate has invited Ethan and Cody from Occupational Health Division/ Environmental Health and Safety to provide the latest information:
    - Standardization of policies and guidelines across campus and affiliate sites is not possible due to different populations, leadership structure, and other site-specific concerns.
    - What to do at time of exposure (*Refer to attached informational flyers and process flowcharts for more details):
      - Self-report (CU Anschutz COVID website) ➔ self-isolate until contacted and received clearance to return to campus by EHS (an email notification from Cody).
      - Those who want to get tested can pursue on-campus testing (Wed and Fri; by appt only) with 24-48 hr results turn around, or at other drive-through UCH locations (in front of Inpatient Pavilion at UCH, Smoky Hill, Highland Ranch location, Fort Collins, Colorado Springs, and Keystone) for after-hours/weekend testing (48-72 hour results turn around). Getting tested is mostly for getting peace of mind, but does not release the person from being quarantined.
      - Contact tracing is being implemented for on-campus exposure. EHS has 9 staff to contact cases that have been exposed on-campus.
County Health Department deals with contact tracing for cases that are exposed off-campus.

- **Check out the latest information and guidelines on the campus main Coronavirus website:** [https://www.cuanschutz.edu/coronavirus](https://www.cuanschutz.edu/coronavirus)
- **Self-report positive result via this link:** [https://ucdenverdata.formstack.com/forms/covid_form_copy](https://ucdenverdata.formstack.com/forms/covid_form_copy)

**Q&A:**

- In a lab situation, if a lab member is positive, what happens to co-workers and lab activity? → Determination will be on case-by-case/situational basis. Exposure doesn’t automatically translate to infection. Having 1 person to be a positive case doesn’t necessarily lead to the lab being shut down. The PI, lab members, and EHS will be review and make determination.

- How many positive cases on a floor warrant notifying that floor’s COVID official of an “outbreak”? → Outbreak is defined as having 2 individuals tested positive, but they must have a clear route of transmission between them (e.g., having prolonged interactions at less than 6 feet away, not wearing masks, etc). That’s why we need to watch out for gatherings on campus (e.g., conducting focus groups, orientation, etc).

- Is there a preference between self-reporting vs. answering the entry questionnaire? → There is no preference as long as it gets done. All the reports will be reviewed by Cody. As a reminder, please do not come to campus at the slightest chance of feeling unwell.

- For faculty that don’t routinely work in a university building and don’t routinely complete the university questionnaire, should they navigate issues of whether they may work with EHS or defer to the COVID hotline at the facility where they work? → Should do both options. Personnel needs to self-report through the UC Anschutz form to abide by University’s policies because that is their primary affiliations and so that they can be on EHS radar. At the same time, personnel should also abide to the policies and reporting requirements of the affiliate site where they practice.

- Are there guidelines for when we might need to dial down the percentage of personnel allowed on the floor at a given time? → Currently, floor occupancy is set 50% but we have not met this limit. This limit is good as long as personnel on each floor can keep up with current policies and guidelines. We are on Stage 2 but may move to Stage 3 soon due conditions at Adams County where the campus is located (as being monitored by County Health Department). If we move to Stage 3, academic programs may be affected but we will try to preserve research activities (e.g., having fewer numbers of visitors coming to campus to preserve the occupancy limit per floor especially at research buildings).

- If a lab member is symptomatic but is in the process of receiving test results should other lab members be informed before the test results are received? → Test results and other personnel-related EHS information are considered HIPAA. These are not released automatically. Also, exposure doesn’t automatically lead to inspection. Suspected case would be required to self-report, will be asked to
identify their contacts, and to self-quarantine especially if showing symptoms within 14 days of initial exposure.

- Now that temperature is dropping, are people taking temperature at health check stations using lower cut-off for what constitutes “feverish”? Sometimes, temperature readings are taken from the wrist in addition to forehead. Temperature is not a good indicator of infection but could still be a relevant basic indicator. Loss of taste and smell are more definitive indicator of infection but these are not something we can monitor on-site.

- Some colleagues are still focused on cold/respiratory symptoms and ignoring other COVID symptoms. Campus personnel may need more education and leadership to have better means to disseminate information. Brian Montague is working with Ethan and Cody on this area which remains a work-in-progress. Based on the data so far, there is a lot of noise in terms of COVID-19 symptoms reporting, especially due to recent wildfires that are causing respiratory symptoms.
CU-SOM Faculty Senate Meeting Minutes (11/17/2020)
as noted by Merlin Ariefdjohan (Secretary 2020-2021)

The minutes from the October meeting were unanimously approved.

Next Faculty Senate Meeting has been scheduled on Dec 15, 2020; 4:30 to 5:30 pm.

Please bring your questions to Jaime Arruda (Jaime.arruda@cuanschutz.edu; Faculty Senate President) so that they can be vetted and discussed at the next meeting.

- Dean’s updates:
  - Department Chair search:
    - Department of Physiology and Biophysics → search is on-going
    - Family Medicine chair → search is on-going
    - Department of Pharmacology chair → search is on-going
    - Department of Radiology chair → in planning stage
    - Casey Greene, PhD, has accepted the position to lead Center for Health Artificial Intelligence. Dr. Greene is scheduled to start on Nov. 16, 2020.
    - Other recruitment to fill positions related to bioinformatics remain in progress.
  - COVID-19:
    - Increasing number of COVID cases throughout Colorado, including number of patients in our hospitals (approx. 125 at UCH at this time and increasing). Elective surgeries are deferred to bring more staff to care for patients with COVID. If trend continues, there is possibility for resident programs to return to emergency status.
    - A reminder for all of us to observe COVID guidelines with regards to in-state/out-of-state traveling plans for the holidays, holding in-person gathering, wearing mask, washing hand, and other points already mandated.
    - Please refer to Chancellor’s recent message about free COVID testing on campus, as well as CU Anschutz COVID resources in this website: https://www.cuanschutz.edu/coronavirus
  - Progress for Health Sciences building is on track for completion in June/July 2021, with potential move-in date approximately by summer or August 2021.
  - Q & A:
    - What are the current guidelines for those teaching small, hybrid-format class? Can in-person classes occur or must it be completely online? These classes typically consist of 3-4 students per class and have modules delivered via zoom (for lectures) and in-person (for key educational activities such as lab, learning to do physical exam, etc.). → Guidelines should follow Tri County policies at that time. Educational activities must meet the definition and to remain as hybrid. Some of the guidelines include 1st and 2nd year not returning to campus during Thanksgiving to Christmas, in-person in CAPE
might be allowed starting Jan 5, 2021, and currently to assume that small groups remain allowed to meet on campus starting early 2021. These guidelines depend on the situation in the next 6 weeks and may be changed accordingly.

- Research activities on campus remain to follow current guidelines already established. Again, these may be revised depending on the situation in the coming months. Please look out for communication from the Chancellor, the Dean, and the Vice Chancellor for Research.
- Do we have a plan for vaccine distribution on campus? → None at the moment. We will monitor the situation and plan accordingly

- Presentation on Gender Equity Study (Judy Regensteiner, Professor of Medicine and Director of the Center for Women’s Health Research, and Director of the Office of Women in Medicine and Science; Angie Riberia, Professor and Chair of the Department of Physiology; please refer to presentation slides for further details)
  - AAMC put out a Call for Action for Gender Equity, which focuses on workforce, leadership and compensation, research, and recognition. In response to this call, Dean Reilly formed a Task Force being led by Dr. Regensteiner to work on two of these areas, namely leadership, and recognition.
  - A few key findings from the study that was conducted by Dr. Riberia based on data gathered from SOM faculty:
    - Leadership: The pool of potential female leaders is limited since the fraction of female faculty decreases as rank increases. Some departments have developed practices to increase the number of female leaders in their units, but this is not consistently practiced throughout all departments in SOM yet.
    - Recognition: There is little to no historical data related to this, except for 1 case as a Distinguished Professor.
    - Side notes: Currently, there are 2 female SOM Professors in this rank, but none have clinical appointment. Also, there is a need to recognize non-binary gender as part of the evaluation and data collection.
  - Data is reported in the following link:
    https://medschool.cuanschutz.edu/docs/librariesprovider31/dean's-office/communications/ge-task-force-recommendations---oct-12-2020.pdf?Status=Temp&sfvrsn=ad47b0b9_2
  - Several recommendations to address Leadership were suggested including:
    - Encouraging Associate Professors not to view this as a terminal rank. Thus, a path should be created to mentor associate professors towards professorship. Subsequently, this would increase the leadership pool.
    - Revising promotion criteria to recognize all activities, including service.
    - Having Department Chairs to identify and share best practices.
    - Querying faculty of all genders and ranks to identify potential obstacles to achieving academic success.
Several recommendations to address Recognition were suggested including:

- Actively soliciting nominations for female CU SOM faculty for Distinguished Professorships
- Creating databases to track faculty achievements
- Creating a position in the Dean’s Office to actively nominate faculty for local and national awards, as well as to assist with preparation of documents.

Other points for consideration included:

- For the university administration and task force to evaluate the impact of COVID on academic productivity of female faculty.
- For Faculty Affairs to consider revising promotion criteria by appropriately weighing committee service.
- For SOM Dean to continue supporting the Doris Duke Award for Assistant Professor, which recently has been expanded to include Associate Professor.
- As part of this effort, the Task Force will be submitting an application for the NIH Prize for Enhancing Faculty Gender Diversity

Q & A:

- How does CU compare to similar institutions? → Our statistics are comparable to AAMC but we can certainly do better. For example, the frequency of female professors at US Medical Schools/AAMC is approximately 25.7%, but CU Anschutz is at 31%.
- Has there been a move to create reporting on a periodic basis (e.g., annually) by each department chair to assess how respective department operates? This could be an eye-opening experience especially when the statistics and trends are presented based on their specific environment. → This initiative resonates with several department chairs in SOM and they already seek this info as part of their conversation with the Dean. However, it hasn’t been consistently implemented across the departments.

Presentation on Legislative Update (Jerry Johnson, CU Contract Lobbyist; and Heather Retzko, Director of State Relations, CU Office of Government Relations; please refer to presentation slides for further details)

- Please take note of the people who are part of the Office and the legislation:
  - The new Office of Government Relation is as follows:
    - Jerry Johnson as contract lobbyist and lead on CU Anschutz issues and engagement
    - Heather Retzko as the Associate VP of State Relations, and lead on Nursing and Higher Ed policy
    - Todd Saliman replaced Tanya Kelly Bowry as the new VP of Government Relations
  - State Leadership includes:
    - Sen. Leroy Garcia (D-Pueblo; Senate President)
Sen. Steve Fenberg (D-Boulder; Majority Leader)
Sen. Rhonda Fields (D-Arapahoe; Assistant Majority Leader)
Rep. Alec Garnett (D-Denver; Speaker of the House)
Rep. Daneya Esgar (D-Pueblo; Majority Leader)
Rep. Serena Gonzales-Gutierrez (D-Denver; Assistant Majority Leader)

$200M has been earmarked by Govt Polis to fund certain issues but many of these remain in discussion. Several issues identified by Jerry’s office to be of importance for SOM includes:

- Peer Assistance Fix and DORA (scope expansion) faculty to refer to petition outlined in Steve Lowenstein’s recent email
- DORA is authorizing a workforce scope expansion while the emergency order for COVID is in place. However, not all physicians deal with infectious disease. Operating outside specialty may lead to medical errors. Thus, we would like to protect our physicians when this occurs.
- Telehealth pushback
  - Telehealth is considering reimbursement for non-person visit, which may have adverse consequences for financial aspect of clinics in terms of billable in-person visits.
- Mental Health legislation
  - Continues to be contentious since mental health is one of the top priorities for lobbyists, although there is no concrete idea yet on the general climate. There may be structural changes in the future in the form of appointing a designated person at the cabinet level to deal with a range of mental health issues.
- Phase I – Governor’s Behavioral Task Force
  - All the above remains under discussion.
  - Budget for the next fiscal year remains under discussion. There are plans for up to 30% budget cut, but campus leadership has been in communication with other campuses to advocate to the government for budget restoration. Budget is expected to be flat while concurrently monitoring how COVID impacts operations. There are concerns about activities in spring, student enrollment, etc that may further impact (and get impacted) by budgetary issues, but these remain in discussion.
  - Q&A:
    - Are there any medical providers in the legislature? Yes, Rep. Caraveo https://leg.colorado.gov/legislators/yadira-caraveo; Sen. Leroy García (D-Pueblo; Senate President) is a paramedic.
The minutes from the November meeting were unanimously approved.

The next Faculty Senate Meeting has been scheduled on Jan 19, 2020; 4:30 to 5:30 pm.

Please bring your questions to Jaime Arruda (Jaime.arruda@cuanschutz.edu; Faculty Senate President) so that they can be vetted and discussed at the next meeting.

Dean's updates:

- COVID-19 Vaccine:
  - Vaccine has been delivered to CU Anschutz campus. Under current Emergency Use Authorization, Pfizer vaccine will be made available at UCHealth starting 12/17/2020 onwards; CHCO follows a similar timeline. It is anticipated that Moderna vaccine will receive a similar EUA and will be made available when that happens. Both are mRNA-based vaccine, requiring 2 doses (Pfizer at 21 days apart; Moderna 28 days).
  - Priority will be given to those in tier 1A (i.e., healthcare workers who have more than 15 minutes a day of contact time with COVID+ patients). UCHealth and CHCO will have sufficient vaccines to inoculate those in this Tier.
  - Remaining supply will be given to those in Tier 1B (i.e., healthcare workers providing direct care to patients who are not COVID+). The supply that has been allocated to us can cover approximately 60% of this group. Recipients will be randomly selected through a lottery system, and then to set up appointment via MyHealthConnection. Please look out for the invitation and further instructions in email inbox.
  - Vaccination for residents will be determined based on their role and unit during their clinical rotation. Current plan is to vaccinate all residents in Emergency Department and Denver Health. However, all residents are being considered for vaccination. The plan is to provide vaccine for all by January 2021.
  - Jaime Arruda will reach out to Dr. Richard Zane (Chair of Emergency Medicine; Chief Innovation Officer at UCHealth) to present to the Senate on vaccination strategies and challenges at the upcoming meeting.
  - Q&A:
    - Is there any info on tier level for spouses who work in healthcare but outside of the UCHealth system? Guideline is determined by the organization that they work at. UCHealth and CHCO vaccines will be given only to their employees and residents.
    - Govt Medical Advisory Group recommended strategies to prioritize vaccine allocation to people at higher risk (e.g., age, underlying medical conditions, etc). Denver Health may be practising this instead of random allocation. Is CU Anschutz considering this approach rather than using the random allocation method? Vaccination prioritization scheme is directed at the state-level (not by campus leadership). But, the situation continues to evolve.
    - How do we know which tier we fall under (e.g., are pathologists in tier 1B? How about pathology residents?) Guidelines will be sent out by email soon.
• How about non UCH clinical staff and faculty? What about teaching/research faculty - will the university provide vaccines or is that through their health care? --> Guidelines will be sent out by email soon.
• Is it mandatory? --> The vaccines received emergency approval to meet unprecedented circumstances. Due to this, it is neither ethical nor legal to require all employees to be vaccinated. We can recommend and provide data on efficacy and safety, but we cannot require all UC employees to get vaccinated.

• Department Chair search:
  o Department of Physiology and Biophysics → in progress
  o Family Medicine chair → in progress
  o Department of Pharmacology chair → starting out
  o Department of Radiology chair → in planning stage

• The construction of the Health Sciences building is on track and on budget. Construction to be completed by August 2021, with potential move-in date by late August to early October 2021.
• We received a record number of applicants for medical school 2021 cohort (approx. 40,000 applicants). All interviews will be conducted virtually.
• We will motion for the state to restore our funding to 2019 level at the upcoming legislature session on January 2021. However, we have built-in funding mechanism to support UPL projects so that they will continue to receive funding at the current level.

Overview of the Faculty Senate and the role of Faculty Senator
(Jaime Arruda, Faculty Senate President; please refer to presentation slides for further details)

• Structure of representation:
  o Each department in SOM is represented by at least 1 Senator for every 40 faculty members
  o Senators are elected by peers and have > 0.5 FTE; term duration is 2 years
  o ¼ of the Faculty Senate must be comprised of representatives from basic science

• Duties of Senators:
  o Attend Faculty Senate meetings and participate in discussions such as below:
    ▪ Receive updates from SOM policy committees
    ▪ Approve SOM rule changes
    ▪ Review and approve changes to SOM curriculum
    ▪ Officers consult with the Dean and Chief of Staff on search committees
    ▪ Officers represent the Faculty Senate as voting members of the SOM Executive Committee
  o Relay information to respective department, as well as bring faculty departmental issues to the Senate for further discussion → please inform Jaime Arruda and Cheryl Welch of these items

• Challenges to the Faculty Senate:
  o Having a clear 2-way communication mechanism between Faculty Senate to Senators to department vs. department to Senator to Faculty Senate
  o Identifying important issues and finding appropriate time for discussion, as well as inviting pertinent personnel to outline the information
  o Getting Senators to actively participate at the Senate meetings → Senators need to speak up since Dean Reilly attends these meetings and he listens carefully to the discussions.

• Q & A: None
A discussion on CPHP Letter
(Jaime Arruda, Faculty Senate President; please refer to presentation slides for further details)

- Reviewed the draft of the letter addressed to the CO Medical Board (Jaime Arruda); a shout out to Tyler Anstett for assisting in drafting the letter. Main content is to request for reinstatement of CPHP as a service to the community.
- Faculty Senators who support this request to please inform Jaime Arruda and Cheryl Welch to have their name to be included in this letter to support the cause → this was completed at the meeting via chat (see Q&A below).
- Q&A:
  - Could the Faculty Senate indicate support of this letter and COVID-19 vaccination initiative? Can this be done via email or via chat? --> (Steve Lowenstein) this is reasonable and either way is acceptable.
    - Faculty senators expressed their support in chat for one or both of these initiatives (silence means neither).

Presentation on changes to committee structure for the oversight of the new curriculum
(Shanta Zimmer, Sr. Associate Dean for Education, Associate Dean for Diversity and Inclusion)

- Mission and Vision remain as to provide a longitudinally integrated curriculum to prepare graduates to serve as physician leaders capable of transforming the health of diverse communities.
- However, training structure needs to be reevaluated to accommodate for rapidly changing environment (e.g., rapid translation of science to bedside, transformation of delivery of care due to advances in technology and data acquisition, interdisciplinary approach becomes more crucial, changing national trend and needs in terms of health systems science, characteristics of student population has also changed to one that care more about social justice, technology, etc) that has created new challenges.
- CU Trail Curriculum will be revamped and categorized as follows (see slides for details):
  - Plains: Foundational module covering preclerkship integrated curriculum, clinical skills training, preceptorship, and coaching
  - Foothills: Foundational module covering longitudinal integrated clerkships
  - Alpine Ascent: Advanced and individualized module covering science courses, USMLE 1 and 2, CU Trail courses, and CU Clinical concentrations.
  - Summit: Individualized module on residency preparatory courses and post-match activities.
- Mentored Scholar Activity remains in current format.
- Several oversight requirements that should be considered:
  - Enhancement in Learning Management System and Curriculum Management System
  - Interwoven structure of oversight: Clinical, Science, Health and Society; Phases 1, 2, 3; Technology, Student Committee, Student Life
  - Curriculum Steering Committee as a central structure (Stu Linas as chair) → Faculty Senate interested to serve as a representative to please inform Jaime Arruda and/or Shanta Zimmer.

An update from the Office of Diversity and Inclusion
(Shanta Zimmer, Sr. Associate Dean for Education, Associate Dean for Diversity and Inclusion)
- This presentation has been shelved to the next meeting since we ran out of time.
The minutes from the December meeting were unanimously approved.

The next Faculty Senate Meeting has been scheduled on Feb 16, 2021; 4:30 to 5:30 pm.

Please bring your questions to Jaime Arruda (Jaime.arruda@cuanschutz.edu; Faculty Senate President) so that they can be vetted and discussed at the next meeting.

Updates from the Dean:
- Department Chair search as listed below remain underway:
  - Department of Physiology and Biophysics
  - Family Medicine chair
  - Department of Pharmacology chair
  - Department of Radiology chair
- New job posting for associate dean for graduate school
- The construction of the Health Sciences building remains on track and on budget. Construction to be completed by August 2021, with potential move-in within 2 months of completion. This is a major milestone in CU Anschutz since it allows expansion of the vivarium, clinical and research facility, as well as site for personalized medicine.
- Q&A: None

Updates from Jaime Arruda:
- Request to CO Medical Board to reinstate CPHP as a service to the community was approved. Thank you to Senators who supported the letter.
- Jaime plans to draft a letter on behalf of the Faculty Senate that will be addressed to the general public outlining our support for COVID-19 vaccination. The draft of the letter will be sent to the Senators for review prior to dissemination. Those who support the motion can attach their names to the letter.
- Tyler Anstett (a hospitalist in the Division of Hospital Medicine at the University of Colorado) has been appointed as Faculty Senate representative to the Curriculum Steering Committee for the upcoming academic year.
- Q&A: None

Updates from the Office of Diversity and Inclusion (ODI)
(Shanta Zimmer, Sr. Associate Dean for Education, Associate Dean for Diversity and Inclusion; please refer to presentation slides for further details)
- ODI is open to all students, staff, residents and faculty. It focuses on efforts related to pipeline (K-College) to practice (faculty and community) programs. Medical Student Programming includes a diverse offering such as support and advising for URM students, training on implicit bias, community engagement opportunities, and many others.
- In addition to Shanta, the team consists of Christy Angerhofer (Program Coordinator), Regina Richards (Associate Vice Chancellor of Diversity, Inclusion, Equity, and Community Engagement), Janet Meredith (Director of Student Programs, CSTAHR faculty advisor, Community Liaison).
• ODI is active in integrating diversity and inclusion practices in various faculty initiatives, GME initiatives, and student focused initiatives (refer to presentation slides for examples of activities in respective initiatives). The main objective is to be more inclusive in all training, mentorship, recruitment, and hiring practices at all levels.

• Results from recent ODI survey indicated that among matriculants in 2020, approximately 17% identified as coming from families with low SES. This has implications on financial aid, support programs, etc. Overall, diversity of student applicants, faculty, and those in various faculty ranks remain low but ODI strive to increase diversity through the various initiatives and programs that they do. Please refer to presentation slides for details of key findings.

• In terms of pipeline programs, ODI will continue to focus on recruiting black men and to provide financial support. This is to meet a recent AAMC report that observed a significant reduction in enrollment among black men.

• In addition to pipeline programs, ODI is actively involved in student recruitment efforts, and community engagement initiatives (refer to presentation slides for a list of these activities). Concerted efforts are being placed to track impact of various engagements, improving public relations (e.g., highlighting activities, disseminating information on efforts related to diversity, equity and inclusion; DEI).

• ODI is asking for Faculty Senate to help with the following:
  o Inform ODI if anyone has ideas on speakers of minority background that can be invited to speak at events organized by the pipeline programs
  o Participate in implicit bias trainings to increase our DEI awareness
  o Serve as an equity representative at meetings
  o Provide feedback to ODI about their processes and when DEI issues come up
  o Be prepared to deliberately speak about our DEI values as member of the CUSOM
  o Continue to expand our personal understanding of DEI and anti-racist views

• Food for thought: https://thenocturnists.com/the-nocturnists-black-voices-in-healthcare

• Q&A:
  o If there are ideas or issues that come up who is the best contact person? → Please directly contact Shanta Zimmer shanta.zimmer@cuanschutz.edu
  o Meaningful research experience for undergraduates is essential for their success in graduate school applications (including med school). 2 summers without having undergraduates experience our campuses will be a huge impact on their success in graduate applications. This will of course disproportionately affect minority students. So, can we have regulated access of undergraduates to Anschutz campus similar to other researchers? → We have support to open labs and research activities for undergraduates to accommodate this.

Updates on COVID-19 Vaccination at CHCO (David Brumbaugh, CHCO Chief Medical Officer; Jerrod Milton, CHCO Chief Clinical Officer was not able to attend)

• At current estimates, CHCO has vaccinated 10,500 individuals with 1st dose and 5,000 individuals has received both doses (either as Pfizer or Moderna vaccine). The number includes health profession students.

• Vaccination efforts remain to focus on personnel in Tier 1A and 1B. However, this has been expanded to include providers in the community, clinical staff, those in pediatric dentistry, and others. CHCO also has initiated partnership with community agencies to further expand vaccine delivery (e.g., Ronald McDonald House, early learning daycare programs on-campus that care for
children of frontline workers, etc), with Tri County Health (e.g., home healthcare setting, hospice, etc), and Denver public schools (e.g., therapists, etc).

- Challenges remain as attributed to inconsistent vaccine supply, continuous changes in CDC guidelines related to side effects, reliance on nursing staff to support vaccination efforts that is stretching direct care clinical capacity and maintaining staff bandwidth to meet vaccination demands.

- Q&A:
  - Any update on safety trials for kids under 16? → It’s more challenging to find clinical trial volunteers for children than adults. As the sample size gets smaller, the study could possibly get completed faster than those with adult participants. However, there hasn’t been much news on the progress. The aim of most pediatric trials is to look at immunologic response. Trials involving children under 12 are still identifying study sites.
  - How are you dealing with the uncertainty around the vaccine supply? Is there enough on hand to give round 2 of the vaccine to everyone who has received round 1? → The situation remains influx. CHCO plans day-by-day and the operational flow remains as a work in progress (also due to continued challenges as outlined above).

Updates on COVID-19 Vaccination at UCHealth (Brian Montague, Infectious disease physician and Medical Director for UC Health)

- Hospital affiliates (e.g., clinical staff) remain as priority. There is a separate distribution track for campus staff (e.g., research, administrative, students; those that are not included in the hospital system); however, it is currently being negotiated.

- UCHealth is authorized to order vaccine but the allowable quota changes day-by-day, which complicates the logistics. UCHealth is also considering Anschutz Wellness Center and Education Building as additional vaccination sites.

- A large portion of the plan remains under the discussion. More information to follow shortly.

- Q&A:
  - Who identifies who gets vaccinated on campus on the research/teaching/core side of things? → There is a core working group that has been set up consisting of Tom Flaig, Terri Carrothers, and others who are creating a list of campus personnel who might be eligible. They are also working on the logistics to ensure efficient delivery. Many things are currently being planned. Please be patient and information should be shared in a few weeks.
  - Curious if anyone knows where some of the many other vaccine candidates are in the pipeline? Astra/Zeneca, J&J etc. Any EUA’s on the horizon for those? → Another vaccine trial that might be completed soon is Janssen/J&J. Astra Zeneca has 70% efficacy rate which may not be sufficient for EUA since there are other alternatives with a better rate. Clinical trial for Novavax (for pediatric) is ongoing. Many things remain in flux and we need to see what unfolds in the coming weeks.
CU-SOM Faculty Senate Meeting Minutes (02/16/2021)
as noted by Merlin Ariefdjohan (Secretary 2020-2021)

The minutes from the January meeting were unanimously approved.

The next Faculty Senate Meeting has been scheduled on March 16, 2021; 4:30 to 5:30 pm.

Please bring your questions to Jaime Arruda (Jaime.arruda@cuanschutz.edu; Faculty Senate President) so that they can be vetted and discussed at the next meeting.

Updates from the Dean:
• Department Chair search listed below are in various stages of recruitment: Department of Physiology and Biophysics, Family Medicine, Department of Pharmacology, Department of Radiology chair
• Two positions at Denver Health (DH) are open for recruitment (Director of Service for Anesthesiology, and Director of Service for Pediatrics/Inpatient)
• COVID-19 vaccination program continues through UCH, CHCO, VA, and DH. The University has applied for the campus as distribution site but has not received supply.
• The construction of the Health Sciences building remains on track. Building cranes have been removed and we are approximately 6 months away from taking possession.
• Discussion with Salud about Aurora Community Health is in-progress
• Q&A: None

Updates on Graduate Program reorganization in SOM (Peter Buttrick, MD; Senior Associate Dean, Academic Affairs; please refer to presentation slides for further details)
• The program structure of the SOM has not changed despite the robust growth in student body. There are 13 separate multi-disciplinary programs including “umbrella program” that channels into others. There is considerable overlap of faculty serving in the various programs (e.g., participation in two or more programs within the same time period), and programmatic focus. Approximately 50% of the programs are supported by T32 grant support. Further, the process of matching students into programs has not been updated, which creates additional challenges with recruitment. All the programs have their own administrators (some shared) with their own costs and structures; all of which may lead to potentially costly inefficiencies.
• Considering all the above challenges, several initiatives are being launched to reassess the current programmatic structure (chaired by Dave Engelke and Leslie Berg), including the possibility of consolidating some of the programs (i.e., do we need 13 separate programs?). However, all programs have unique features and thus makes it challenging to select, especially in the absence of objective data on impact.
• Current thoughts on this situation:
  o There is a general agreement that overall graduate school administration should be restructured but continue to live within SOM. New position for Associate Dean of Graduate Studies has been posted (position reports to Dr. Shanta Zimmer and Dean of Education). This is an internal search. Applicants are currently being reviewed and interviews are in progress.
  o Part of this restructuring should involve creating a centralized, best practices guidelines that can be shared among the programs (e.g., T32 tables and program descriptions instead of individual write-ups, coordinating recruitment, best practices on mentorship training, funding support for trainees, etc).
  o SOM committed to gradually increase the number of supported graduate students from 50 to 75. It’s a big investment so it will be done in phases. Dean Reilly has approved and supported an increase from 50 to 55 positions and will continue up to 75 at a pace that is fiscally responsible.
• Several issues being considered:
  o Programs are requested to report on objective programmatic data (e.g., GPA of applicant pool, success in recruiting URM candidates vs. retention, profiles of training faculty, scholarly outcomes, etc).
Reports will be reviewed by a committee (internal and external). This initiative is a way to delineate the impacts of various programs and to justify program upkeep as part of recommendations to be made to the Dean. Recommendations on program consolidation, restructuring, and other opportunities will also be made.

- The new administrative leadership is also tasked with making recommendations about the oversight of biomedical program structure (instead of applying a general approach).

All works are in-progress and Dr. Buttrick will provide other updates in the near future. In the meantime, please contact peter.buttrick@cuanschutz.edu if you have questions, concerns, and comments.

Q&A:

- Q: What is the timeline for program consolidation and what might this look like?
  A: The process starts concurrently with recruiting season. We are in the midst of coordinating the process and plan to open a forum for discussion soon.

- Q: With regards to the merger, how will this be done especially for a program that is already funded by T32 grant? Will it remain as individual program or combined with others? T32 is not an easy grant to achieve and indicates only one metric of quality. For example, Immunology is one of the programs that has been identified where graduate students can be effectively trained. It can be concerning whether program consolidation will be done based on sound discussion (or not), especially for programs that have overlapping focus.
  A: Decision may depend on whether the program exists in one department/site or multiple departments/sites. The workgroup is doing evaluations on the existing programs but not making any decisions at the moment.

- Q: When will input be collected? Who will be solicited - Faculty, students?
  A: Inputs have already been gathered. Today’s updates are based on 3rd analysis of the data.

- Q: How does this impact training of faculty and programs with training faculty across school like SOP and School of Dentistry?
  A: They should not feel excluded from the thematic program, as long as the faculty are deemed as appropriate trainers. Essentially, existence outside SOM should not matter in terms of ability of providing training. The intent of moving the administrative to SOM is to centralize the management of biomedical programs, instead of being overseen by CU Denver (Downtown campus).

- Q: Which graduate school programs are getting an increase in their student enrollment?
  A: Immunology, neuroscience, computational biology.

Updates on CU Medicine Branding (Elizabeth Kissick, Vice President and Chief Business Development Officer, CU Medicine; Brian T. Smith unable to attend; please refer to presentation slides for further details)

- CU Medicine has launched a branding initiative to enhance visibility of the work that we do in healthcare. Several branding activities have been launched including outdoor (billboards, light rail), radio (radio scripts are to drive traffic to the website; 5 local stations, Pandora, NPR), digital display, patient facing (My Health Connection, email), referring providers (email, Physician Relations), social media (Facebook, Instagram), as well as labcoats and uniforms.

- Current slogan: “We CU”. Website: Cumedicine.us

- Website provides information about faculty and services. Faculty profiles on the website are fed in from FIM. Please make sure your information is updated.

- As part of this initiative, the office also tracks volume of new patient visits and website traffic. We received 150,000 website hits in Feb 2021, which is a significant increase from 80,000 hits at a similar time last year.

- Please contact elizabeth.kissick@cumedicine.us if you have additional questions, concerns, and other comments.

Q&A:

- Q: How long are we keeping up with this campaign?
  A: For another 6 months. This has been included in the CU Medicine budget since it is seen as an investment. Current intent is to continue investing in this campaign.
February meeting minutes were unanimously approved.

The next Faculty Senate Meeting is on April 20, 2021; 4:30 to 5:30 pm.

Please bring your questions to Jaime Arruda (jaime.arruda@cuanschutz.edu; Faculty Senate President) so that they can be vetted and discussed at the next meeting.

Updates from the Dean:

- Melissa Haendel, PhD has been appointed as Chief Research Informatics Officer (CRIO). This is a newly created position at CU Anschutz responsible for leading efforts in transforming the campus use of information and systems to accelerate biomedical discoveries, streamline health system operations, and improve patient care.
- Senior Assistant Dean of Faculty Development is another position that has been recently created. The candidate will be responsible for developing opportunities to support professional development and wellness of faculty members. The search committee is chaired by Julia Cooper, PhD (Chair of Biochemistry and Molecular Genetics). Currently, the committee is about to embark on conducting a national search. Please inform Dr. Reilly or Dr. Cooper immediately if you have a candidate in mind or need more information about this posting.
- The 4 chair positions that we have discussed in previous meetings remain in-progress, with interview sessions starting soon.
- The new building remained on track, on budget, and scheduled to open in Aug 2021. No significance delay has been reported despite minor flooding issue due to the recent snowstorms.
- VA is revamping their onboarding procedures to ensure a smoother process.
- Candidate search for various director of services positions (e.g., Anesthesia, Inpatient Pediatrics, etc) at Denver Health remains on-going.
- Q&A: None

Updates on Curriculum Steering Committee (Tyler Anstett, Assistant Professor, Department of Medicine, Faculty Senate representative on Curriculum Steering Committee; please refer to presentation slide at the end of this document)

- CU-SOM Trek curriculum is on track. As planned, all students will go through Foundational, LIC starting at Yr 2, individualized curriculum at Year 3 onwards, and then transition to residency courses at Yr 4.
- At Phase 3 LIC (Clerkship) placement, 80% of students were matched with one of their top two preferences (both in the lottery and overall matching). Additionally, any students not matched with their top choice were called for coaching to improve future applications. Students who listed only Fort Collins branch LIC as their top choice were matched to the site, which prevents relocation of those who were not interested in this site. Overall, these are satisfactory results.
- The Plains curriculum is starting in July 2021. Faculty planning to present talks/lectures/didactics may need to revamp their schedule so that these sessions fit on Phase I schedule.
- Please contact tyler.anstett@cuanschutz.edu if you have questions, concerns, and comments so that he can relay these to the steering committee.
- Q&A:
  - I cannot tell from your slides when would students learn basic science materials?
    - The materials will be incorporated throughout all four phases, but will be concentrated in the Foundational Yr, and in Advanced Integrated Science Course portion of training
  - When do students take Step 1?
    - This will be done in the middle of Yr 3 (instead of Yr 1, Yr 2 then take Step 1 as being done in the previous curriculum). There will not much changes in terms of acting internship.
Updates on SOM Financials (Brian T. Smith, Senior Associate Dean, Administration and Finance, Dean’s Office; please refer to presentation slides for further details)

- **Overall 2020 trends:**
  - Growth in grant applications and research dollars continue in an upward trend, similar to previous years. Notably, remote work arrangement has actually increased the number of applications submitted, which hopefully translates to expansion of research portfolio. Donors remain supportive and generous.
  - CU Medicine patient payments typically grow by 10% annually. However, this rate was not observed in 2020 with a major dip in revenue observed in March 2020 and several months afterwards. This was mostly attributed to the suspension of elective surgery and ambulatory services, and moving select services to telehealth to accommodate restrictions due to the pandemic.

- **2021 trends:**
  - Adult health: Most of clinical volumes have reverted to trends observed before the pandemic (approximately 5 to 7% growth). Telehealth services will remain as part of clinical care.
  - Child health: There is reduction in overall volume of pediatric patients (e.g., fewer cases with respiratory illness, fewer injury, and fewer walk-in patients). However, this reflects national trends and not CO-specific. Overall, it’s not a good trend from financial perspectives. Leadership at Child continues to find ways to ensure clinical growth in order to maintain revenue, including strategies to increase accessibility to services, among others.

- In summary, we need to remain resilient and adapt to the new culture of operating on virtual platforms, while continue to look for opportunities to stay ahead the curve.

- **Q&A:** None

Discussion on Faculty Council questions regarding online digital education (Cindy O’Bryant, Professor, Department of Clinical Pharmacy, Skaggs School of Pharmacy and Pharmaceutical Sciences)

- The Office of Digital Education (ODE) was set up at CU Downtown campus and has been around for several years. Its purpose is to support programs (or departments) that are trying to transition from offering in-person degree to offering online degrees, or those interested in creating new online degree programs.

- Mark Kennedy (CU President) wants to create a larger presence for CU Online, which largely has been overshadowed by other online programs in the state (e.g., CSU Global, CU Boulder, etc). To support this effort, he plans to expand and develop ODE to be a university-wide initiative operating as a centralized infrastructure, instead of operating at limited capacity at CU Downtown campus. External consultants were hired to advice on infrastructure and operationalizing ODE.

- Current sentiments seem to suggest that having a centralized ODE will have bigger impact and repercussions on undergraduate programs (than graduate or medical education), and for programs that offer online degrees. This effort generated many concerns: What is the overarching function of ODE? Any possibilities of duplication of efforts between online and in-person programs? Will this effort create inequitable support for each track, whereby more support be given to online programs at the expense of in-person programs?

- Faculty Council has summarized these questions and other comments gathered from faculty campus-wide into a letter to be sent to Mark Kennedy, the consultants, and leadership at ODE for consideration.

- **Q&A:**
  - Tuition is a big source of revenue for the University, can you please speak about the demand for online programs? I’m concerned at the amount of money being channeled into ODE, which may be at the expense of supporting in-person programs, especially if the demand for online programs turns out not to be significantly large. And who will provide oversight for the quality of these online programs/degrees?
    - The demand for online programs has grown at a rate of 10-20% over the past 5 years. Considering this, channeling funding for ODE expansion is perceived as a good investment in order to remain competitive in the education field. In their recent discussion, the Board of Regents have expressed that opportunities and support for on-campus programs will not be taken away in lieu of providing
support for ODE and especially in light of the pandemic. Programming quality (e.g., satisfaction rating, student evaluations, etc.) remains to be the responsibility of the respective programs and will be monitored by the program leadership (e.g., as part of accreditation).

Discussion on Workers’ United (Jaime Arruda, Faculty Senate President)

- Recently, CU Anschutz employees received an invitation to join the United Campus Workers of Colorado (UCWC). This is a newly established union made up of undergraduate and graduate student workers, faculty, and staff. Recipients found this email (sent by CU Boulder chapter) concerning since the format gave the impression that it was an official communication from CU leadership. The matter was discussed at a recent Executive Committee meeting to recognize the source, cause, and its potential impact on our campus.

- Dean's comment:
  - Colorado holds the open records act. Since CU employees are considered as state employees, they are allowed to request for any information under this regulation. Consequently, the University will have to supply any information (e.g., emails, documents, etc.) upon request to comply with the law. This is the reason how the UCWC managed to get an email list of our faculty/staff/trainees for their email campaign. **Reminder to Faculty Senate to be mindful when writing emails and its content since these are considered as publicly shareable, publishable formal documents.**
  - CU state legislature passed legislation last session enabling union to represent state employee and facilitate contract negotiation. The union can solicit employees to sign various petitions and once it reaches certain number of signatures, the employer can hold ballot to get union to represent. If the majority wants to push the agenda item, then the union can proceed to negotiate for representation. However, Denver Health and UC Health Hospitals have different status, whereby they are exempt from National Labor Act. Thus, this arrangement does not apply for us. Denver Health is quasi-government entity, hence minutes of board meetings are publicly available. For the past 6 months, unionization has been included as part of agenda item in board meetings. Similarly at UC Health. However, we are not moving towards unionization at this time. **If there are themes concerning dissatisfaction (e.g., salary, benefits, patient:nursing ratio, etc), please have dialogue with the employees and address their concerns to avoid creating unhealthy professional dynamic.**

- Q&A:
  - A Faculty Senator’s (FS) comment: Union serves a bigger purpose than arranging strikes. It is an organization that has been set up to ensure employees’ concerns are being heard when issues arise. Overall, it should not be viewed negatively. However, agreed with Dean Reilly’s comment that employees’ concerns should not be dismissed and to make sure that their concerns are addressed.
    - Dean's redirect: It is still the responsibility of respective management unit to address concerns brought up by the team members or the workforce (regardless of whether it is University, hospital system, etc), instead of turning to the union as the first option.
  - FS comment: This could be an opportunity for us as a representative body to serve the larger population on campus by reaching out to members of our departments to see if they have any concerns that can be further discussed together.
  - FS comment: How do we do this formally without creating the impression that we are adversarial? Sometimes, people may prefer to hold internal discussion with their own groups before bringing it up to the leadership. Notably, the absence of complains does not mean that there is no problem.
    - FS comment: Dean Reilly’s comments about soliciting inputs, actively listening, and acknowledging issues is a good place to start.
  - FS question: To whom do researchers (postdocs for example) bring up their issues?
    - Dean's comment: PIs that they work for, Human Resource office, leadership at the Graduate School, and the Ombuds office (especially if you need help with mediation).
  - FS comment: Are nurses in our clinics typically considered as hospital employees? Employees’ affiliation may complicate matters, but that should not prevent us from being allies for listening and advocating as a group.
- Dean’s comment: Yes, they are considered UC Health employees.

### Weekly Schedule

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<th>WEDNESDAY</th>
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<td>8:00 AM</td>
<td>Chief Concern Presentation</td>
<td>Medical Sciences</td>
<td>Clinical Skills or Preceptorship/Service Learning/Independent Study</td>
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<td>End of Week Assessment</td>
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Facilitated Review
CU-SOM Faculty Senate Meeting Minutes (04/20/2021)
as noted by Merlin Ariefdjohan (Secretary 2020-2021)

March meeting minutes were unanimously approved.

The next Faculty Senate Meeting is on May 18, 2021; 4:30 to 5:30 pm.

Please bring your questions to Jaime Arruda (Jaime.arruda@cuanschutz.edu; Faculty Senate President) so that they can be vetted and discussed at the next meeting.

Updates from the Dean:
• Job position for Senior Assistant Dean of Faculty Development has been posted. The candidate will be responsible for developing opportunities to support professional development and wellness of faculty members. The search committee is chaired by Julia Cooper, PhD (Chair of Biochemistry and Molecular Genetics). Please inform Dr. Reilly or Dr. Cooper immediately if you have a candidate in mind or need more information about this posting.
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• Q&A:
  o Since some of our affiliates have taken a strong stance, have you heard whether the University will be taking a stand on public option bill?
    ▪ We have not but a number of organizations have opposed (e.g., CO Health Association, Denver Metro Chamber of Commerce, etc.). Other organizations have also expressed concerns but have not voted. Negotiations on amendment to the bill is in-progress but nothing has been decided yet. The bill will affect reimbursement rates for physicians and provider groups, among other implications. Although currently, there is no clarity on the content of the bill and issues that will be voted on, please educate yourself on this bill.

Updates on Curriculum Steering Committee (Tyler Anstett, Assistant Professor, Department of Medicine, Faculty Senate representative on Curriculum Steering Committee; Please contact tyler.anstett@cuanschutz.edu if you have questions, concerns, and comments)
• Curriculum reform is on-going, including efforts associated with assessment and evaluation strategy. Dr. Shanta Zimmer has outlined the evaluation strategy in previous meeting. Summary of
assessment results will be shared with faculty and course directors so that they can learn students’ satisfaction rating and use the feedback to refine the program.

- Bob Eckel will provide an informational presentation in the near future.
- 2021 Match Day is coming up. Interviews were done virtually, and applicants were expressing pandemic-related anxiety.
- Q&A:
  - How does the trend differ to previous years due to pandemic?
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  - Does OVBH include behavioral health?
    - Yes, behavioral health is supported by OVBH. Please contact Lisa at the general email above or at lisa.schilling@cuanschutz.edu for more information about this.

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- Mandy has shared a lot of pertinent information on how to recognize signs up mental health distress and burnout in yourself/team members, and strategies to mitigate that. Please refer to the presentation slides for more detailed information.
- It is important to be cognizant that we are still dealing with the pandemic. Its repercussions are not limited to disruption of workflow but are also related to trauma from other stressors (e.g., health,
work from home arrangement, politics, race issues, and many others). The pandemic is an unprecedented event and that we are starting 2021 already in an exhausted state while dealing with more things to come. Feeling stressed out is normal but having symptoms of depression and suicide ideation are not normal. Thus, it is important that you conduct self-check throughout the day to determine where you/team members are in the Stress Continuum and noticing the changes in you/team members (e.g., are you pushing yourself too hard?; when was the last time you took a break?; have you had any food?; are you using substances to cope?; etc), as well as determining if it is time to get support from others.

- When assessing your state in the Stress Continuum, understand that you cannot be in the Green State for 100% of the time. Sometimes, you start the day in Green State and then as the day progresses you gradually move towards the Red State. This is normal but you have to discern where are you in the continuum vs. where do you want to be. For example, if you are already in the Orange State, is there a way for you to go back to Yellow State instead of trending towards the Red. The sooner you can identify where you are at in the continuum, the faster you can move towards recovery. All types of stressors create trauma to the body. You need to be aware what’s going on with yourself.

- Pertinent strategies you can implement to mitigate stress and burnout:
  - Do not ignore the signs!
  - Increase communication and collaborative capacity with team members and others around you. Most importantly don't get isolated.
  - Do “battery snapshot” exercise (see presentation slide). Learn what drains your battery (e.g., continuous zoom meetings) vs. what recharge you (e.g., build breaks between meetings, have a good sleep, etc). Different people operate differently so this has to be tailored for you. Most importantly, your battery needs to get recharged to build more capacity in order to deal with the impact of stress injury.
  - Discern whether you are doing a certain activity as self-care vs. numbing approach.
  - Acknowledge that you are stressed out and give yourself permission to take a pause, recognize the struggles, and re-center.
  - Do a self-assessment towards the scenario presented to you. Is this within my control?
  - Be flexible with yourself. Make mitigation plan in case the original changes at the last minute and don’t be too hard on yourself if you can’t follow through. Manage your expectations and re-center.
  - Recognize work stressors vs. home stressors. Be reflective and recognized what variables go into each column so that you can develop management and survival tools accordingly.
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- Other resources from Mandy:
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Q&A:
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  - (From another faculty): If the nightmares are new (or are occurring more often than one usually experiences them), it could be a sign of acute stress (may or may not be a reactivation of past "traumatic stress"). Nightmares are also highly stressful and can increase during highly stressful times. It is vital to stabilize your sleep quantity and quality. If anyone is having nightmares, the Department of Psychiatry is here to help since the department has opened a program to support faculty and staff mental health (for more info https://medschool.cuanschutz.edu/psychiatry/programs/faculty-and-staff-mental-health).

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- Longer version of Talk (60 min; https://www.youtube.com/watch?v=TuRrtMj0zh8 )
  
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CU-SOM Faculty Senate Meeting Minutes (06/15/2021)
as noted by Merlin Ariefdjohan (Secretary 2020-2021)

May meeting minutes were unanimously approved.

June meeting concludes Faculty Senate meeting sessions for 2020-2021 academic cycle. Meeting for the next cycle will resume in September, 2021.

Updates from the Dean:

- Proposed rule changes to Faculty Handbook and promotion matrix were presented at the SOM Executive Committee meeting this morning. Dr. Steve Lowenstein led the discussion.
- The new building is on track for completion in August 2021. New occupants can move shortly after in a staged fashion over 10-week period. The move should be completed by 2nd week of November 2021.
- Dr. Angie Ribera is the new Associate Dean for Research and Education as of July 1, 2021. Within this role, she will expand and improve PhD biomedical programs under the umbrella of SOM.
- Active searches are in progress. These include:
  - Senior Associate Dean for Faculty Development (chaired by Dr. Julia Cooper - Chair of Biochemistry and Molecular Genetics). Initial interviews have been completed, recommendations have been forwarded to the Dean for consideration, and now moving towards 2nd phase of the selection process.
  - Department of Physiology and Biophysics (chaired by Dr. Paco Herson). Selected candidates will be invited for campus visit soon.
  - Department of Pharmacology (chaired by Dr. Wendy Macklin). Selected candidates will be invited for campus visit soon.
  - Department of Family Medicine. Campus visit has been completed. On final round of consideration; finalist should be announced soon.
- News from our affiliates:
  - Denver Health: Open searches for various director of services positions (e.g., Anesthesiology, Inpatient Pediatrics, Director of Services for Pediatrics, Otoralyngology, etc) remains on-going.
- Partnership with Salud has been formalized. A 9-member governing board will oversee this partnership.
- Govt. Polis has approved and signed budget for Upper Payment Limit (UPL) programs, including Aurora Health Commons. Funding for these programs support the care of Medicaid patients
- Q&A: None.

Special request from Nicole Draper, MD (Associate Medical Director, Transfusion Services)

- We are currently experiencing a severe blood shortage. Low donation attributed by fewer people donating blood, post-pandemic vacations, reservation due to COVID-19, having demand that outpaced supply, among other reasons.
- Please donate blood at various donor centers: Poudre Valleye, CHCO Blood Donor Center (720-777-5398), Vitalant. And go to AABB website to locate nearest donation site https://www.aabb.org/for-donors-patients/give-blood
- Q&A:
  - Are there any drive-in donation? → UCH is not allowing the mobile donation bus to be on-site at the moment due to COVID. However, there may be standing location at the VA.
Updates on Curriculum Steering Committee (Tyler Anstett, Assistant Professor, Department of Medicine, Faculty Senate representative on Curriculum Steering Committee; Please contact tyler.anstett@cuanschutz.edu if you have questions, concerns, and comments)

- Information and other details about the curriculum reform can be viewed via program website https://medschool.cuanschutz.edu/education/current-students/curriculum/curriculum-reform and newsletter https://tinyurl.com/CUReformMayNewsletter
- The newsletter also outlines various teaching opportunities for faculty.
- Trek Curriculum is having a informational mini-retreat for students, faculty, and staff on June 23, 2021 and July 8, 2021 from 8 am to noon. Sessions will be recorded for those unable to attend. Please sign up via this link https://app.smartsheet.com/b/form/7a91e87aa04c4f7088d4b3785eeddbf8
- Q&A: None

Presentation on changes in the SOM Rules and Promotion Matrix (Steven R. Lowenstein, Professor of Emergency Medicine and Medicine; Associate Dean for Faculty Affairs; please refer to attached slides and memo for details of changes)

- Changes have been discussed by various stakeholders and discussed at SOM Executive Committee meeting on 6/15/2021 (see attached slides). Documents and memos outlining these changes have been emailed prior to this meeting to members of the Faculty Senate. An electronic link for voting on these changes will be sent later in the summer. Please lookout for it in your inbox.
- Please send additional questions and concerns to Steve, Cheryl Welch, and Faculty Officers.
- Key points:
  - Changes mainly focused on a renewed commitment to diversity and professionalism.
  - Changes associated to rules and matrix guiding "Promotion and Tenure" mainly redefined rubric for "excellence in scholarship" where multi-disciplinary team science approach is better valued through a greater recognition to contributions by middle authors and co-PIs.
  - Rubric also placed a greater recognition for Clinical Excellence, and Teaching Scholars
  - Better definition for Service and recognizing the value of Service in the promotion rubric. These include any activities that support the mission of SOM in the context of teaching, clinical practice and scholarship (e.g., committee and program leadership, mentoring, community engagement, advocacy, promoting DEI, etc.). Service activities will be recognized for promotion as long as they demonstrate leadership and impact. However, there is no separate pathway to get promoted exclusively through Service.
- Discussion/Q&A on Service:
  - Why can't faculty be promoted on Service alone? [SL] has proposed this 17 years ago and once again this year to the Provost. Both requests were declined due to non-conforming towards traditionalist academic viewpoint whereby it doesn’t align academic pillars. Further, the clause also prevents faculty to get shunted to service in order compensate for under-performance in other areas. The current revision is a compromise to place a greater value to Service.
  - Is Service matrix now required for all submissions? [SL] No, it has never been required. You can include it but it is not required. Current revision have included all sorts of examples that are relevant, which are advantageous to faculty.
  - Faculty comments:
- You can be a great doctor and never of service in the community. This may 'water' down the value of Service. Leadership, curiosity and commitment as pillars of curriculum are actually Service. This is discordant with the service/clinical paradigm above. [SL] This is one of the reasons why we are recognizing Service officially in the Matrix. This wasn’t recognize in previous matrix so it is a win for faculty.
- Let’s add caution when tagging a greater emphasis on Service since it is an unpaid work. This can lead to burnout, and other issues. We don’t need to add on more on our schedule if we don’t want to.
- You should be in Committee because you want to, instead of have to for promotion sake.
- Service is already an expectation. This revision acknowledges and rewards it better, thus the basic expectation remains unchanged.
- But, if we are doing Service, then it should count and if possible as separate pathway. So that it is viewed as valuable as other tracks (e.g., Teaching, Scholarly, Clinical). (Refer to Steve’s earlier comment about this).
- Sometimes, Service doesn’t only constitute serving in a committee. Leading core facilities could be viewed as Service as well, but it may take more time and bandwidth to be in this role than being in a committee; which may seem inequitable in terms of commitment vs. value.

- Comment from a faculty for Steve/Faculty Affairs: “Thank you for all of your advocacy to evolve the matrices to represent work that is very important and valuable to fostering health and equity. I have struggled personally whether the work I prioritize on is actually valued by the university and this feels like a big win.”
- A question was raised about whether the matrix definitions of excellence in patient care adequately represents measures relevant to pathologists, radiologists and others with limited direct patient care activities. This didn’t get discussed during the meeting. Please connect with Steve, Cheryl, and Faculty Officers to discuss this further.
- Discussion/Q&A on Faculty Development (to meet the feedback from gender equity task force; clause: “Associate professors must receive mentoring and comprehensive performance reviews and develop a plan for promotion to full professor or continued academic advancement”):
  - Who takes on the burden of mentoring of Associate Professors? Is it on the faculty member? If so, that feels punitive. [SL] This is the responsibility of the Dept Chair or designee.
  - How is this going to be enforced? [SL] It'll be tracked in PRiSm but this field is currently optional for Associate to Professor. Hence, currently it is not enforced. It remains a loophole that should be addressed in near future.
- Discussion/Q&A on Professionalism (new clause: “The chair should also consider the faculty member's record of professionalism, as codified in the Faculty Promise, the Teacher-Learner Agreement and the Faculty Professionalism Code, before recommending promotion or tenure). With this clause, the Chair can delay promotion if faculty member has unresolved professionalism issue.
  - Faculty comments:
    - Attestation to professionalism at promotions every 6 to 7 years is a weak threshold. Is the annual review a more reasonable time/place to ask for this? [SL] agrees it should be done at PRIISM to encourage behaviors/reinforcement (i.e., not only to track but also to reinforce). DEI section will be added in PRIISM.
• What is the definition of "professionalism'? [SL] Detailed definition is included in the Handbook.

• Professionalism issue can arise due to being unpopular or personality that lead to repeated conflicts. In addition to attitude and behavioral, can there be a more concrete evaluation of performance (i.e., not only based on basic descriptive terms) [SL] It is the responsibility of the Chair to conduct a thoughtful and non-bias evaluation. But currently, we don't have any system to circumvent situation when faculty has conflict with the Chair (difficulty personality vs. circumstantial). [Anne Libby] Family Medicine creates definition on what "good standing in the department" means. [SL] we can provide guiding document to the Chair on evaluation criteria and action plans that could be beyond consulting with OPE and/or delaying promotion. Approaches that could lead to resolution and mediation could be supportive in this effort.

• What about situation where the faculty has difficult personality, while concurrently also experiencing conflict with the Chair? [SL] Faculty can petition and submit dossier regardless of Chair's evaluation. Dossier will be reviewed by Dean's promotion committee.

• If there are professionalism issues that get flagged during PRiSM, can OPE step in on behalf of the faculty? [SL] OPE may provide suggestions for resolution and mediation.

• Is there possibility if having attestation come from Departmental review committee (e.g., Chair of promotion committee) - someone other than the Chair? [SL] This could lead to other issues related to faculty peers knowing the details they should not know about their colleagues (i.e., Chair can be privy but not necessarily peers).