CU SOM Faculty Senate Meeting 10/18/22

Lisa Marie Babayan, Faculty Secretary, 2022-2023

September meeting minutes were unanimously approved

Next meeting is November 15, 2022.

Updates from Dean Reilly

- New chair for Physiology and Biophysics, David DiGregorio from Pasteur Institute in Paris, starting January 1, 2023. Formal announcement to follow.
- Negotiating with finalist for Radiology and Center for Personalized Medicine.
- Dermatology – Town Hall for two finalist candidates and considering next steps.
- Otolaryngology – Narrowing down our search for candidates.
- UCH partnering with ParkView in Pueblo, CO in mid-2023.
    - Questions – What impact does this have on our campus?
        - Going to be part of the system rather than part of on-campus faculty, so should be minimal.
- First patient in third tower is June 2023.

Curriculum Steering Committee Updates – Tyler Anstett, DO

2023 Matriculant Class

- Applicants (52815) down 12% from 2021 Nation-wide.
- Applicants (10897) down 23% from 2021 at CUSOM.
- Average GPA 3.62 national, 3.67 CUSOM.
- 89% of applicants are out of state (9738).
- 5593 completed applications, 723 interviews, >300 offers, 184 matriculants.
    - 94 CO residents
    - 41 reapplicants.
    - 93 different undergrads.
    - 54% female, 45% male, 1% non-binary.
    - 27% URM.
    - 17% first generation college students.
    - 22 outside of US birth.
    - Average age 25 years (21-37 range).
    - 10 MD/PHD program.
- Experiences, Attributes, Metrics.
- LCME 2025 – accrediting body for medical schools.
- Areas of focus – finances, diversity, student debt, student mistreatment, new curriculum, affiliation agreements, accessibility, advising, and student health.
- 12 Different standards – lead by Bonnie Kaplan.

Unified communications collaborative initiative - Tyler Anstett, DO

- Pagers will be going away on July 1, 2023 – NHS replaces pagers with "dedicated clinical facing communication and tasks management tools."
- Coming from the Office of Information Technology – not enough staffing, non-HIPAA compliant.
- Coming functionality to the EHR – platform connected to the patients EHR to identify the correct recipient, minimize disruptions, and minimize errors/miscommunications.
- Role based communications – players rotate in and out, team is in constant contac.t
- UCH, DH, Childrens – Already on EPIC.
- VA – Vocera.
- EPIC Unified Communications – functionality is already built into EPIC.
    - Set availability for receiving messages – do not disturb or offline.
    - Forward and auto-forward messages – can accept all or only high-profile messages.
    - Emojis are coming.
- Providers will need smart phones.
- CUSOM will provide them to providers however:
    - No biometrics.
    - Phones are audited.
    - Harder to personalize.
- Contingency planning for issues with smartphones.
- Logistics – training – go live – follow up.
- Questions:
    - Are we returning the pagers?
        - Unclear currently
    - Is this also for patients to page the provider?
        - No, it will be through MHC
    - Backup for EPIC downtime?
        - Will work during downtime, application features continue to work (unless Wi-Fi goes out)

Staff Compensation Review – Olawunmi Ogunwo, JD, PHR, SOM Human Resources Director, and John Moore, Associate Dean of Administration and Finance

CU AMC Compression Pool

- Investment in our people is a critical priority.
- In April 2022 a merit increase pool was approved as well as a retention pool – implementing in Jan 2023.
- Salary Compression – Little difference in pay despite differences in skills, experiences, performance, seniority, position level, or tenure.
    - Salaries cluster near lower portion of ranges.
    - Little differentiation based on experience levels.
    - Little difference between team members and their supervisors.
    - This can be due to cost of market increases, inconsistencies in pay practices, tight labor markets, inflation, minimum wage increases, departmental differences in salary increases/adjustments/promotions.
- Exit Interview – 25% of employees leaving for better base pay.

    - Also leaving due to conflicts with others, promotion, relocation, career changes, better benefits, unique opportunities, and then commute.
- High cost to attrition – replacing an employee can cost between 50-60% of the employee's salary with overall costs ranging from 90-200%.
- Compensation Calibration
    - Planned incremental steps towards addressing concerns.
    - Recent compensations initiatives.
        - Research Personnel Initiative- April 2022.
        - Market Eval and Adjustment of University staff salary ranges - April 2022.
        - Labor planning and merit increase process - July 2022.
    - By the end of December this will go to DFAs for consideration and review.
- Questions
    - What group are we talking about?
        - University and Classified Staff.
    - Is this staff or does it also include faculty?
        - Faculty have bi-yearly reviews which allow for salary adjustments.
    - Will this be a recurring process?
        - Last happened in 2017, no expectations that this will be a recurring event.
    - Will this be applied to those who practice at other sites?
        - Will be for staff and not faculty.
    - Is there a budget for this?
        - Did not provide a budget but did approve a 3% pool for this.
    - How does this differ from April increases?
        - The model is similar looking at total qualification factor and points for highest level relevant education; however, it is different and is a campus initiative and there is more flexibility in the implementation of this initiative.
    - Will research be included in this?
        - Not anticipated to see significant adjustments for research participants based on a recent April initiative implementation with this group.
    - Is it planned that faculty will be considered in the near future?
        - Faculty are part of this consideration and will be effective Jan 1, 2022. Faculty are eligible every January and July. They are considered every time the Board of Reagents approves a merit increase.