

## FACULTY COUNCIL MEETING MINUTES: 9/14/09

**MEMBERS ATTENDING:** Jack Lazerson (Vice-Chair), Amy Ellwood, Gerald Ackerman, Gale Craviso, David Antonuccio, Gina Sella, Nidhi Mehta, Michael Nasiak, David Fiore, Terry Henner, Alison Netski, Nathan Mason, Roger Ritzlin

**MEMBERS ABSENT (#)-indicates consecutive meetings missed:** Trudy Larson (Chair), Greg Pari(17), Marsha Kirgan(2), Christine Cremo, Dennis Uken

**EX-OFFICIO ATTENDING:** Dean Thienhaus, Mimi Bar-on, Jennifer Kimmel, Peggy Dupey, Melissa Piasecki, Jean Regan, President Glick and Provost Johnson

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The meeting was called to order at 4pm by Vice-Chair, Jack Lazerson

**Minutes** from the August 3rd Faculty Council meeting were unanimously approved as submitted.

**Dean's Update:** Dean Thienhaus reported that:

Nevada Cancer Institute is expanding in GME programs and will get involved in cancer care at UMC, but also will locate very soon at a hospital in Henderson, St. Rose. They are anxious to jump into GME with a variety of sub-specialties that we don't currently have and most of which we have an interest in developing. How many will come off is not clear ... but a favorite list of about 12 GME programs has been made including pathology, radiology dermatology, etc. This is a way of diversifying our GME base and we will be doing this in a very open manner along with the UMC and the VA both being aware. Both institutions will be much more invested in our GME expansion in the future and the SOM is conducting highly intense monthly meetings with them which should also help in building our relationships.

LCME: Continuing to work very hard; Dr. Kimmel has been in meetings with Dean Glick, and both Glick and the Provost will be heavily involved with this site visit that will occur in approximately five weeks.

Dean's Search: This will be a combined position of Dean of Medicine and V.P. of Health Sciences which means both he and Dr. McDonald will be out of a job as of July 1<sup>st</sup>. Dr. Thienhaus is very seriously considering applying for this position, but will wait to see what the actual search includes as there as things he is not willing to give up.

Search for Assoc. Dean for Admissions and Student Affairs: Is in its final stages and should finally wrap up at the end of the month.

Search for Assoc. Dean of Medical Education: Is getting under way; however, we don't want another ASA situation where it will take six months to fill the position. The Dean invited Feride McAlpine to let him know if she would need Dr. Kimmel to join her in any of these meetings.

**Financial Update:** Jean Regan reported the results for the FY 2009 where they thought we would end the year in the black or at breakeven; unfortunately, we did not, but we vastly improved over the previous year. The year ended with a \$2.9 Million loss (18% better than we did last year). MSAN improved almost 50% over last year and MSAS showed a slight improvement.

What happened will appear in our external audit report...in Las Vegas our billing area was not following policies and procedures as they should have been, therefore a significant amount of charges were not being followed up on in a timely manner. Fortunately we found what was going on prior to the end of the FY and were able to discover the error and report corrected financials (there was a significant loss in June). Firm plans are now in place that have been shared with everyone for a three-phase training: 1) Training of billing staff within Las Vegas Practice Plan: 2) Change in reporting relationship -- the Director of billing will report to our controller; 3) Have all policies and procedures consistent throughout the entire Practice Plan.

Good things that have come from this are to be able to follow-up with the self-paid billings from our partner hospital, UMC. We have worked with them over the last few weeks wherein we can develop a system where all self-pays that physicians handle within the hospital will be followed up through collections with us. Although it's an unfortunate situation, we are improving each year, and we need to remain focused on making improvements. The amount of self-pays from UMC during the last FY amounted to \$9 Million; If we even touched on 10% it would mean another \$1 Million to the Practice Plan. Ms. Regan noted that UMC has an even more archaic accounting system than we do.

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Dr. Bar-on asked about the State budget. Ms. Regan said rumors are going around there is potentially another budget reduction in the works; however, her inquiries have found there is no definite ruling on that. There has been no special session called and if there are further reductions, it will be in salaries or programs. Ms. Regan thinks we've done a great job in working within our 14% reduction and have worked hard to protect ourselves from further reductions; however, this protection reserve has gone down a bit. She also pointed out despite our reductions; we have been able to put into place an excellent Simulation Center in Las Vegas, which shows we can even do something extra while being cut drastically.

**Faculty Furlough Update:** Feride McAlpine reported that we asked for an exemption from furlough for clinical faculty and this is to be discussed at the Board of Regents meeting. It is up to them to make a decision; staff's furlough will remain the same. Jean Regan explained that she and Drs. Lupan and Sanders met with Marsha Read concerning this exemption to include researchers as well.

**Faculty Council Representation:** Dr. Lazerson welcomed back Dennis Uken as the representative from Speech Pathology and Audiology and new representatives, Gina Sella from Admissions & Student Affairs, Roger Ritzlin from Pathology and Nathan Mason from Psychiatry, Reno. Representatives from Physiology & Cell Biology as well as Surgery remain to be appointed. A request for a representative to Emergency Medicine will be made. Council believes that 'administratively' representation has been complied with as outlined in the By-laws. It was noted that CASAT is not a part of the School of Medicine.

**Executive Faculty:** Dr. Lazerson read from the written report that Dr. Larson submitted:

- LCME: Practice sessions will be held in Sept; many meetings with site visitors will be held via Pictel
- Dr. Kimmel is requesting the need for chairs to support the clerkship coordinators (25-30% of their salary should be paid for this work)
- GME institutional review will take place next year and will be very similar to LCME
- Ms. Regan reported a loss for the FY although it is less than last year; no news re state support
- The Health Sciences Education building has been funded and major donor to be announced. Foundation dinner is September 24<sup>th</sup> and will honor the SOM 40<sup>th</sup> Anniversary
- The Dean reported that Dr. Barsky, Pathology, has arrived and officially starts as chair on Sep. 1<sup>st</sup>. Education space in LV is progressing, skills lab is ready for use. Deans from UNR have committed to utilizing Digital Measures for faculty. With advent of smart classrooms in Las Vegas, it will be possible to have the LV Interdisciplinary Grand Rounds shared statewide.
- Dr. Piasecki reported that Faculty Development will host two meetings via pictel to discuss Digital Measures (Sept. 8 and 21) and a New Faculty Orientation will be held on Sept. 29<sup>th</sup>. With respect to Digital Measures, Duncan Aldrich will be conducting training sessions starting in October; faculty's annual evaluation will be included in DM. OFAD will video-tape one of Duncan's sessions and it will be made available on the OFAD website.

**Dean's Review (Faculty / Staff):** Dr. Piasecki informed Council that Faculty Affairs & Development had been asked by the Dean to conduct his evaluation with staff and faculty input. The proposed process is that OFAD draft a survey and have Council review it as well as H.R. This survey will be sent to Academic, Administrative and UNSOM staff and once data is analyzed it will be sent to the Provost. The evaluation needs to be submitted by March, as such, the survey is scheduled to go out and back in January. This is a tool for the Provost's office to use in their evaluation of all the Deans. All schools are being requested to do this and it has nothing to do with the UNSOM Dean's Search.

### **Emerging Faculty Issues:**

By-law Committee Volunteers: It was reported the committee is fairly well set; just waiting on confirmation from three. Dr. Larson will give them their charge at the first meeting.

Faculty Development: There is a *New Faculty Orientation* on September 29<sup>th</sup>. Dr. Piasecki will be in Las Vegas with pictel to Reno and she asked Council if they know of any new faculty in the last six months that may not have attended an orientation to please let them know they are all welcome.

Women in Medicine: Their next 'brown bag' mtg. will be October 5<sup>th</sup>, 12n-1pm. This will be expanding to Women in Medicine and Health Sciences, and there is a special presentation in Reno (Dec. 7) and Las Vegas (Dec. 8) with special speaker, Elizabeth Travis, from M.D. Anderson to talk on "Achieving Work-Life Balance".

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If you know of any women who are not receiving notice of WIM activities, please contact OFAD's office (ofad@medicine.nevada.edu) and the list serve will be corrected.

Interdisciplinary Grand Rounds Using Pictel: Dr. Bar-on said in the last GME meeting it was proposed to program directors in the south to consider moving to the Sim Center. She found it interesting that departments that rarely send residents were all in favor of moving to the Sim Center; however, the group that sends residents regularly (Pediatrics and Internal Medicine) were all against moving it as they think there would be a huge attrition as it's further for the residents to walk. For anyone attending from an off-site location, there is the added problem of no parking. If they have a Honeywell card to get into the doctor's lot it's still a New York block; this would add an additional 10-20 minutes to their schedules. Drs. Bar-on and Piasecki are thinking about other types of pilots they can do educationally between the north and south. For now Interdisciplinary Grand Rounds will remain where it is.

**Old Business:** None

**New Business:** Request for Faculty Senate representatives to give regular reports at Faculty Council meetings. After several suggestions, it was determined that if there's something relevant to the med school, we should ask all five of our Senate Representatives to please let Faculty Council know about this immediately. Dr. Lazerson suggested that Dr. Larson send each of them an email requesting this procedure be put into place. Council agreed.

In other new business, Jean Regan brought up the subject of protected time for participation on UNSOM committees. This had been mentioned at an Executive Faculty meeting and was also discussed in a LCME report. Since her name keeps coming up (Regan's) and no one has come to talk to her about it, she thought she should bring this up. This is an important issue to be dealt with; however, Ms. Regan said in all honesty this should be something we address in another fiscal year (2011) as it would be difficult to do in this FY. Questions were asked, "Do we think it should be incentivized?" and Dr. Kimmel asked "...why it couldn't be just something you get credit for? It seems to her in the academic community it is part of the job..."

The issue before Faculty Council is do they think it should be part of faculty's routine academic position. The question was asked if this situation has changed or been changing over time? Dr. Lazerson said that it absolutely has changed and, it's his belief that in clinical departments more people are hired as clinicians that have to earn their own salary and it's become worse. Over the last ten years that trend has increased and faculty hasn't received a substantial amount of dollars to offset this. Dr. Bar-on also added that "it's a generational component in that it's become a 'job' and not a 'career' so when they're done, they're done and out of here". It was mentioned that nationally there are problems recruiting younger faculty to participate and work beyond their regular hours; they are not participating in extra-curricular activities. Dr. Fiore also added there are a lot of people who have been here a long time that used to be involved but have become withdrawn from engagement of the University aspect of their jobs, and expectations of faculty are different now. Dr. Lazerson generalized that faculty have lost their sense of ownership and now just look at it as a "job".

### **Recruitment of Dean's Position – Provost Johnson and President Glick**

President Glick began by saying that successful communication will be critical to successful recruitment of the Dean. Dr. Thienhaus was appointed as interim dean for two years and to see us through accreditation process, which he is doing. A decision has been made that we will go back to the model initially created, when we brought the Health Sciences area in, and we will be recruiting for a VP/Dean of Health Sciences. "With his Dean's hat, he will be responsible for UNSOM, and with her Vice President's hat, she will be responsible for Health Sciences." Of appointments made since Dr. Glick's arrival, this is the single most critical appointment we will make. It is the plan to expand the size of all Health Sciences, but most particularly the School of Medicine and Orvis School of Nursing.

Our two-site medical school has created a complexity and hurt identification of the school. We will be opening the new Center for Molecular Medicine on the Reno campus (110,000 s.f.) and officially announcing next week that we will break ground with the new Health Sciences Education Bldg. This is thanks to the legislature who came up with \$31 Million and private donations with another \$15 Million. This is the only new building on schedule to be built; however, the next step is the ACTC Bldg. in Las Vegas (will be 1/3 SOM the rest is for the School of Nursing in LV). They are also looking to consolidate leases in LV to create a more hospitable setting for the SOM in Las Vegas.

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Dr. Glick thinks there are good opportunities and the new dean will come in with the knowledge there are two new buildings opening under his/her watch, and that we're committed to new facilities in LV; they will be looked to help us get funded for other building.

The state is under-manned in health care professionals, and we need to build clinical research space in Las Vegas, and we are excited we have the space to increase our students to 100 and double the number of nurses. In Reno he feels it is critical to integrate the education of nurses and M.D.s together in order to fulfill our mission and meet the needs of the state and nation.

They are planning to have a head hunter on campus in Reno and in Las Vegas in the next few weeks (two days each) to meet with faculty and staff and hear their views. They are also planning to have some open forums for the medical and health science community in both cities to talk about their issues, hopes/aspirations and concerns with the medical school. This will give them a chance for them to put their views on the table so we can write a "challenge profile" (as headhunters will do) that accurately describes both the opportunities for a new Dean/VP and challenges they will face.

Marc Johnson then joined the meeting and added that it is well within our strategic plan that a system was set up for a unified umbrella health science system previously, and we're just implementing that plan. Dr. Glick said Provost Johnson will be sending out a memo in the next few days describing the search process and the search committee make-up and asking you for nominations for members of the search committee.

Dr. Glick answered a question that there will not be a separate dean for the Health Sciences. When the new Dean takes over that person may want to put a sub-structure in place, but in the end Dr. Glick wants to give them as much room to shape the administrative structure as possible.

Why consolidate this into one position? It's fairly simple; if we say this is a really important position and we recruit nationally to get a really strong person, he feels this person will want direct communication with the President and the Provost; they are trying to elevate that position to the highest level.

Dr. Lazerson asked about elevating the number of students as there has been much discussion since proposing more than 62 students. Right now there isn't adequate space to handle that number of students since there is no infrastructure in terms of faculty and teaching space. It is his perception in Las Vegas that it's an error to move to the 100 students because we don't have the infrastructure, and he asked why we are still putting this on the table instead of developing collaborative kinds of arrangements.

Dr. Glick said they will not increase class size unless we have the resources to do; however, they do believe a) we need to produce more physicians and b) equally important, is to build the critical mass to compete at the next level with other medical schools, we need a larger class size which will justify a larger faculty. Basically, we are in the lower decile in the size of our medical school's class; that is 90% of all the medical schools in the U.S. have larger class sizes than we do.

When you have a faculty large enough to have critical mass, especially on the research side, it is a limiting factor. If you look at what are really "leadership" medical schools about the only one he knows is that small is Mayo, but they have thousands of faculty and the Mayo Medical School is a little perturbation on the Mayo Clinic and not what drives it; what drives us is the Medical School. Dr. Glick doesn't see expansion to 100 students next year, but he thinks it is important that in the long run we need to have a larger medical school. This was certainly part of the argument for the new building in the north as this will give us the space (not necessarily the faculty) to handle a larger class. Clearly, without additional facilities and faculty in the south we will be limited.

He added that it needs to be worked out ... what will it take to actually do the expansion? This building in the north will be ready in two years; however, we won't be ready to expand the medical school class in two years, but if we don't start making plans for that, we'll never expand.

Dr. Lazerson noted that there is a problem in looking at the other medical schools and that is they own their own clinical facilities, as such, we can't compare ourselves to those institutions. Right now we're still guests in everybody's house from a clinical aspect, and have little control over the educational process. He also added that he feels fellowships are what keep physicians in the state. Even nationally they're relooking at

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primary care in terms of primary care doctors; the state and everyone needs people who deliver healthcare and that may not be primary care physicians, but rather, PA's or nurse practitioners, etc.

Dr. Glick strongly agreed as a non-practitioner, non-expert, the only way to get cost-effective expanded healthcare, is when non-physicians do those things. He's a strong believer that 90% of what his physician does could be done by a nurse practitioner at least as well, but he wants the physician to have time to be there when he's needed. He also believes strongly about training nurses and doctors in the same facility which will create better dynamics among them as they're being trained.

He added that it is not true that all good medical schools have their own hospital/facility; in fact some have spun them off. What is true is they have some involvement in the governance in the hospitals they use. In this regard, Provost Johnson will be spending a lot more time in Las Vegas and has begun a dialogue with Kathy Silver about what kind of relations we need to have if UMC is considered to be our primary partner there and about what the culture of UMC has to be to allow us all to succeed. In reality, there is no one besides UMC that is interested in or is capable of absorbing as much clinical care as we need to give. This is a watershed moment – one of the watersheds is, what is the relationship between UMC and the UNSOM; we need UMC to become more of an academic medical center.

From Dr. Glick's viewpoint, our greatest asset in Las Vegas should be the medical school, but politically it's been more a liability. That means we (UNSOM) need to try to find a way to be less focused on geography and more focused on what we are going to achieve. This is one of the important reasons for restructuring this position. It is made complex, but not impossible, by the Health Science System, because that confuses people too; it's part of our job to clarify.

Dr. Glick stated we are producing very good M.D.'s, but doesn't think we are producing the skill of research we could. There are schools, New Mexico, found about the same time as we were, progress they made, partly because of their founding Dean, Neapolitano, and partly because they don't deal with multi-site issues.

Dr. Lazerson pointed out that most people who came in the beginning came because they saw opportunities to really develop. Those opportunities have never been capitalized on and many moved on due to their frustration. There is a Golden Window which is still open and he thinks this re-organization is a very positive move. Glick restated that he needs to know from Council what is needed in order to shape and achieve what many of our faculty originally came here to do.

Terry Henner asked about when the VP/Dean position was originally combined, there had been concerns expressed from Nursing and Public Health re their willingness to report to a VP that was also Dean of a SOM and had this reporting relationship been discussed or smoothed over? Dr. Glick stated they have been discussed, but not smoothed over. Nursing and Public Health are very concerned. Believes that John MacDonald did an excellent job convincing them that an MD could help them in their first structure and even more in the second structure; however, Glick stated if Nursing, Social Work and Public Health were asked to vote, they would vote not to do this.

We know you cannot develop the solid Health Science programs we need without a strong medical school at its core. This requires that the dean embrace these other fields. There is a special problem with Public Health and that lies with the most anti-diluvian, regressive, rigid, unyielding accreditors on the face of the earth, and they will tell us you cannot have an accredited school if you report to a Dean of Medicine. If they [Public Health] get to the point where they have enough school and curriculum and can get accredited, we will look at it then, but that's a ways off. The Provost said they will be meeting with faculty from nursing and public health Tues/Wed of next week.

They are definitely looking for an M.D. for this new position and it would even be better if they had a PhD, but it's not required. This person will, however, have to embrace the broader mission. They don't think it will be an easy search, but Dr. Glick thinks what will sell the job is if faculty believes it can be accomplished. If prospects hear there are opportunities, we can probably sell this job. If they hear the challenges are too great, Glick said he wouldn't take the job. Faculty leadership has to sell this job as much as anyone else.

Jennifer Kimmel asked how faculty could give input into this process. Provost Johnson said that both he and President Glick, [glick@unr.edu](mailto:glick@unr.edu), or [marc@unr.edu](mailto:marc@unr.edu), will accept email input at anytime (this will be kept confidential if you so request) or if you choose to funnel information through your chairs that too is acceptable.

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Also, there is a search firm (consisting of three people) that will be on campus next week talking to people about their aspirations for the college. The firm will identify a profile on describing the job and will sit in on the conversations held with Public Health and Nursing so they can hear what's going on.

Dr. Lazerson said he is glad they will be coming to Las Vegas. It's critically important when you come that you talk to a lot of people, and not necessarily just Sr. or Jr. Faculty, but talk with a lot of people. There is an undercurrent in Las Vegas that deals with north/south issues. In spite of statements being made re what will be happening in Las Vegas, there is nothing substantive compared to development of the Reno campus. It's important to get the views of the people in Las Vegas. In response, Glick brought up that the ACTC building did not get funded in the south and the building in the north did get funded because we were able to raise the money in the north. We need to raise money in the south, but because of personalities and politics, so far we haven't been able to raise money in the south.

Dr. Glick stated that Dr. McDonald was committed to the north/south integration and spent half his life down there (250 trips in five years). There was one minor structural mistake made and that was creating a Vice Dean for Las Vegas, which made it appear that McDonald was the Dean of Reno and somebody else was Dean of Vegas. When we get a new Dean, we could have a Reno Vice Dean and Las Vegas Vice Dean or a Clinical Vice Dean and Basic Science Vice Dean. You cannot have the dean as dean of one campus. If we don't improve the "split cities" issue, we will not achieve the goals that all of us share. Gerald Ackerman, the "little rural guy for the SOM" made the point that we're a statewide medical school and there is another 3/4 of the state that relies on this school.

It was brought up that the timeline on this is ten months and the question was asked of Glick and Johnson how optimistic they are with this goal. Glick said he believes it's achievable; however, people will have to change their schedules to be available and be a little bit flexible. Having a search firm really helps with searches and pre-interviews. In fact, the firm they're using brought us Marc Johnson and also Susan Desmond Hellmann to the Chancellor's office at the USF campus. This firm has done several searches recently and have some names; however, they don't have a back-pocket list – they are looking at what we need. Glick went on to say that "a failed search is not when you fail to hire someone; a failed search is when you hire the wrong person". They feel strongly this can be done by July, but will not hire someone just because they ran out of time -- if they have to wait until the next January, they will.

Dr. Lazerson asked for any additional questions from faculty and then thanked the President and Provost for their input. Dr. Glick asked that faculty be encouraged to vocalize / express their opinions ...passive aggressiveness doesn't solve the problem and they need our input. This will require a certain amount of trust that what is said will live in a 'safe zone'. Glick said that's something he and Dr. Johnson have to live up to so you know it's safe to share your concerns in a constructive, positive way.

Dr. Kimmel added that they have just concluded a self-study for LCME that looked at strengths and weaknesses within the UNSOM and both Glick and Johnson asked that they be provided with this report so they can pass it on to the search firm. It's important that we share openly the opportunities and challenges as we don't want to bring in a dean that is misled, as they won't stay.

**Next Meeting:** October 5th

The meeting was adjourned at 5:55pm

Minutes prepared and submitted by Carol Mitchell