

Academic Affairs Subcommittee of the
Board of Directors

November 6, 2006

Minutes

Attendees: P. Deckers, J. Goldberg, J. Hepworth, L. Jacobs, B. Koeppen, L. Kosowicz,
G. Maxwell, M. Mina, F. Nichols, P. Robinson, A. Slaughter

In Dr. Galvin's absence, the meeting was chaired by Dr. Jacobs. Dr. Jacobs called the meeting to order at 9:02 a.m. Dr. Koeppen introduced Dr. Lynn Kosowicz, who is the new faculty member at-large representative from the School of Medicine.

1. Approval of Minutes - August 22, 2006

The minutes of the August 22, 2006 meeting were unanimously approved.

2. Public Comment

Dr. David Dorsky addressed the Academic Affairs Subcommittee regarding their decision at their November 11, 2005 meeting to act on his promotion to the rank of Associate Professor and to remand his nomination to the Senior Appointments and Promotions Committee (SAPC) for reconsideration. The SAPC, which originally approved Dr. Dorsky's promotion, re-reviewed the nomination and voted against promotion. Dr. Dorsky then appealed the negative decision to the Faculty Review Board mainly on the grounds that the testimony provided by Drs. Garibaldi and Shanley contained false evidence. The FRB ruled in Dr. Dorsky's favor (the letter containing their decision was distributed to the members). In light of the FRB's findings, Dr. Dorsky asked the Academic Affairs Subcommittee to take appropriate action against Drs. Garibaldi and Shanley for their misconduct, and to rescind their November 11, 2005 decision to deny his promotion. Dr. Jacobs noted that Dr. Dorsky's comments will be recorded in the minutes for further consideration.

3. Business Items

a. Update on Masters Program in Clinical and Translational Research

Dr. Kenny provided an update on the Masters Program in Clinical and Translational Research. She explained that the program was started to fulfill the requirement of a degree granting program in clinical and translational research in order to be eligible for a Clinical and Translational Science Award (CTSA). The program was developed over the past 8-10 months and is now going through the Board of Higher Education's approval process. It focuses on people with terminal

degrees in a health related field to prepare them to conduct independent research in translation of information from the basic sciences to the clinic and from the clinic to the community. When asked why this program was not instituted previously, she explained that the Health Center has applied for K30 awards for clinical scientists in the past but has been unsuccessful in obtaining such funding. Regarding the cost of the program, she noted that 54 faculty members have agreed to teach in the course or act as mentors within their current positions. The four directors of the course will require some general fund support. If the CTSA is approved, the cost of the program will be folded into the award. Dr. Koeppen noted that we have received a planning grant to develop the full application for the CTSA.

b. Education Compliance Monitor Plan

Dr. Adams, Executive Director of Compliance, explained that the Office of Audit, Compliance, and Ethics reports to the Joint Audit and Compliance Committee of the Board of Trustees. Two overviews would be presented today on the Education Compliance Monitor Plan and the Research Compliance Monitor Plan.

Ms. Pack, Associate Compliance Officer, provided a brief overview of the monitoring programs in general, and then focused on the Education Compliance Monitor Plan. She explained the structure of the compliance program, which is divided into five domains -- finance, education, administration, research, and clinical. Each domain is assigned a compliance officer that oversees the compliance activities for that particular domain. Two key purposes for the development of a monitoring process are to identify and manage areas of institutional risk and to encourage and assist programs to comply with laws, regulations, and standards. Monitor development is an ongoing process that involves drawing upon departmental expertise with regard to compliance activities within their purview, and identifying risk areas. She explained the process for sampling and reporting, which involves identifying the risk area, determining the sample size, identifying how the sample is selected, establishing the criteria for measurement, identifying the responsible party, determining reporting frequency, and taking corrective action as necessary which will hopefully reduce institutional risk. She explained that the Education Compliance Monitor Plan encompasses the Schools of Medicine and Dental Medicine, the Graduate School, and affiliated programs. The process for identifying and prioritizing risks includes utilizing the Office of Inspector General's (OIG) work plan in addition to University policies to be sure they are being followed. Two of the key risk areas in the education domain are student and resident mandatory

training requirements and maintenance of student records. One of the keys of the monitoring program is to identify teaching opportunities and conduct appropriate education programs. The goal is to promote individual and institutional awareness at all levels, verify the processes we have in place, and improve those processes.

c. Research Compliance Monitor Plan

Dr. Caron, Director of the Office of Research Compliance, provided an update on the Research Compliance Monitor Plan. She introduced Dr. Gustavo Fernandez, who works with her in the Research Compliance Office. The primary goal of the Research Compliance Monitor Plan is to protect employees, students, volunteers, human subjects, patients, visitors, and community members from harm related to research activities at the Health Center, and to protect the integrity of research at the Health Center while not putting an excess burden on investigators. The office has a database of over 1100 investigators and oversees the following areas -- research safety, human subjects, human subjects adverse event reporting, conflict of interest in research, time and effort reporting, human embryonic stem cell research (HESC), and research with animals. Both HESC and research with animals are considered high risk areas. All areas have working monitoring plans with the exception of HESC, which is in preparation. She noted that their monitoring plan for human subjects adverse event reporting is considered the best in the country, and they are close to 100 percent compliance in the area of time and effort reporting. Two suggestions were made -- to establish a plan that ensures the office is user friendly and provides assistance to investigators, and to create a central registry that covers all areas of compliance for everyone at the institution which can easily verify completion of training.

d. Ph.D. Program in Public Health

Dr. Koeppen noted that this item was being presented for action. Dr. Warren presented the proposal to approve a Ph.D. in Public Health with a concentration in Occupational and Environmental Health, which complements the existing Ph.D. in Public Health with a concentration in Social and Behavioral Health Sciences. He explained that one of the basic assumptions for creating the Ph.D. in Public Health was the need for doctoral training in this area. In fulfilling that need, synergies between the campuses were identified, and the programs were based on existing capacity. He noted that this particular concentration has brought together about five different departments between the two campuses. The intent is to begin recruiting students in the spring of 2007 for matriculation the following fall.

Requirements for admission include a demonstrated commitment to public health; a baccalaureate degree, although a masters degree is preferred; completion of graduate courses in at least three of the five core areas of public health; a career GPA of at least 3.0 or for the last two years of graduate school, plus evidence of accomplishment and competence; strong statistical background; GRE scores. He briefly explained the curriculum, which totals 47-50 credits. Dr. Warren acknowledged that in order to entice graduates to remain in the State of Connecticut, additional funds to support public health would need to be sought from the legislature. Dr. Deckers also noted that Vision 2020 included a significant commitment to public health. When asked whether the program could be completed with fewer credits by someone who is highly qualified or had a high level of course work, Dr. Warren was unsure, but Dr. Jacobs stated that this should be a very high quality Ph.D. program.

Following discussion, the Academic Affairs Subcommittee unanimously approved the following recommendation: **That the Board of Directors recommends that the Board of Trustees approve the establishment of a Ph.D. Program in Public Health with a Concentration in Occupational and Environmental Health Sciences.**

e. Update on Stem Cell Initiative

Dr. Lalande provided a brief update on the stem cell initiative. UConn created a core facility where human embryonic stem cells can be grown. A senior scientist and lab manager arrived here in the summer. There are now five people working in the lab, and two stem cell lines are currently growing in the lab. This is the first laboratory in Connecticut where human embryonic stem cells that are not NIH approved are being grown. They are now beginning to work with the cells to do different analyses. He noted that this facility is an extremely helpful tool in recruiting faculty and students interested in this area. The State of Connecticut stem cell fund now has \$20 million in it. Peer review is complete, the scores are in, and the Stem Cell Advisory Committee will make a decision on funding on November 20 and 21. The long-term vision is to move the lab into a new facility across the street and to recruit a director for the institute who has an interest in therapy. Dr. Lalande was asked whether there were any plans to translate this into a human application. He noted that the plan is to continue to do more research, and that translational research is a mid to long-term vision.

f. Institutional Research Policy Advisory Committee (IRPAC)

Dr. Koeppen explained that several years ago, faculty expressed a desire to have input into the development of the research policies of the Health Center, and President Austin asked that IRPAC be developed. With the establishment of the new governance system within the School of Medicine, which has a Research Council comprised of elected faculty, Drs. Lalande and Koeppen saw a potential to have two separate committees perhaps working at cross purposes. Therefore, it was agreed that the functions of IRPAC will be combined with the Research Council, and when issues related to institutional research policies arise, the Research Council will be augmented with members of the School of Dental Medicine and other research constituents.

g. BS/MD and BS/DMD Programs

Dr. Sanford presented data on the BS/MD and BS/DMD Programs. In 1999, the University President and Health Center officials asked the two campuses to investigate whether a combined baccalaureate program that would lead to admission to the Medical and Dental Schools could be created. The program began in 2001 with four students admitted into the medical program and one student admitted to the dental program, who subsequently withdrew. To date, 42 students have been admitted into the medical program and 32 to the dental. These students are just now beginning to emerge into our classes (7 in the Medical School and two in Dental), and their progress will be monitored over the next few years. Some synergies created between the two campuses include an orientation session as they come into the program at Storrs, meeting with them annually to assess their progress, providing a senior research experience at the Health Center, arranging clinical shadowing opportunities, and working with our present students at South Park Inn. A very diverse group of students have been accepted into the program. Every student is in the Honors Program, and all students here currently are meeting the standards of the Schools. Dr. Sanford believes the program has increased the quality of students admitted to Storrs and the quality of students coming to us from Storrs. They currently expect to limit the number of students accepted into the program to approximately 10 percent of the medical and dental classes, but this number may be adjusted depending upon the success of the program.

h. School of Dental Medicine Attrition Rates

Dr. Robinson provided an update on the School of Dental Medicine attrition rate, which has decreased dramatically from last year. He explained that although the numbers are still higher than the national average, the Dental School includes students who repeat a year, whereas the national data only reflects students who leave dental school before graduation.

i. Academic Gap

Dr. Deckers presented data regarding the academic gap, which is the difference between academic revenues and academic expenses. Although the State subsidy to the institution is approximately \$102 million per year, it is not enough to fill the gap completely. One of the problems is that the State subsidy has not increased dramatically over the past five to six years and has not kept pace with the increase in academic expenses, or even the inflation rate. The Health Center's only other revenue sources are tuition, which is fixed by State law, and philanthropy, most of which is testamentary. As a result, the gap has been filled over the years by using hospital gains. Dr. Deckers feels this is a flawed economic model for both the School of Medicine and the hospital, and that the only way to close this gap is through additional State subsidy. The institution currently gets approximately 15.9 percent of its total revenue from the State. Dr. Deckers hopes to increase this to about 18.5-19 percent.

j. New Affiliation Agreement with St. Vincent's Hospital

Dr. Koeppen presented the affiliation agreement with St. Vincent's Hospital. He explained that the School of Medicine was approached by the leadership at St. Vincent's Hospital, who were in the process of looking at establishing an academic affiliation. After looking at institutions in New York, Yale, and UConn, they decided our institution offered the most in terms of an academic affiliation. The agreement is focused on medical student education. St. Vincent's has a primary care ambulatory clinic on their campus, where we have placed students. They also provide room and board for students who want to do a month long rotation there. St. Vincent's would like to expand the affiliation into graduate medical education, but we are not willing or able to do this at this point, but will keep an open mind as we go forward.

k. Department/Center Review Schedules

Dr. Jacob presented the School of Medicine department/center review schedule. The reviews of the Departments of Pharmacology and Cell Biology are completed. The Department of Family Medicine will be reviewed in December. Review reports are advisory to the Dean. Copies of the reports are provided to the department chair and to the Oversight Committee for faculty awareness and to ensure that process was observed. Dr. Deckers has asked the Dean's Council to also become involved in this process. They will receive reports and provide input on how to respond to recommendations made by the review team. The Dean's Council has also requested a written response to the report from the department chair.

l. School of Dental Medicine Governance Structure

Due to a number of concerns that have been raised regarding the proposed School of Dental Medicine Bylaws for a new Dental Senate which would replace the Dental Council, the following motion was made and seconded: That the issue be tabled pending review by an ad hoc body consisting of the authors of the document, Dr. Wetstone, Attorney Kleinman, the Chair of the Board of Directors, and the Chair of the Academic Affairs Subcommittee. The motion was approved by a vote of 4 in favor and 3 opposed.

m. Renaming of the Department of Oral Rehabilitation, Biomaterials and Skeletal Development

The Academic Affairs Subcommittee unanimously approved the following recommendation: **That the Academic Affairs Subcommittee recommend that the name of the School of Dental Medicine Department of Oral Rehabilitation, Biomaterials and Skeletal Development be changed to the Department of Reconstructive Sciences.**

4. School of Medicine/School of Dental Medicine Reappointments, Emeritus Appointment, Sabbatical Leave

The recommendations for School of Medicine/School of Dental Medicine reappointments, emeritus appointment, and sabbatical leave were unanimously approved.

5. Dr. Deckers announced that Dr. Monty MacNeil will become the Dean of the School Dental of Medicine replacing Dr. Robinson, who will be stepping down on December 31, 2006. Dr. Deckers thanked Dr. Robinson for nine years of excellent stewardship of the School of Dental Medicine and wished him success on his sabbatical leave.

There being no further business, the meeting was adjourned at 11:45 a.m.

Respectfully submitted,

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