

Academic Affairs Subcommittee of the
Board of Directors

February 2, 2009

Minutes

Attendees: Dr. Jacobs, Dr. Klobutcher, Dr. Koeppen, Dr. Laurencin, Dr. MacNeil,
Dr. Maxwell, Dr. McNally, Dr. Mina, Dr. Nichols

Dr. Lenworth Jacobs called the meeting to order at 9:00 a.m.

1. Public Comment

None.

2. Approval of November 3, 2008 and November 24, 2008 Minutes

The minutes of the November 3, 2008 meeting were unanimously approved with one revision. The minutes of the November 24, 2008 meeting were unanimously approved.

3. Dr. L. Jacobs noted the importance of the Academic Affairs Subcommittee and the significant influence it can have on the goals and directions of the Schools and in enhancing health care education, delivery, and research.

Dr. Laurencin was unable to attend the full meeting because of another commitment, but he provided a brief update on the partnership with Hartford Hospital. The partnership is progressing well on a number of fronts, and the plan has received support from the Medical School leadership. A basic framework has been created as well as approximately 10 sub-plans. The agreement provides funding for the academic enterprise over the first five years and at a variable rate over the next five years to ensure its ability to thrive. He noted that the Connecticut Academy of Science and Engineering (CASE) will present its report on the status of the proposed affiliation with Hartford Hospital to members of the Connecticut General Assembly on Tuesday. Governor Rell will present her proposed biennial State budget to the legislature on Wednesday. Both issues will be presented at a faculty forum this week. Finally, he noted that, in addition to the collaborative Dr. Koeppen will be talking about, another collaborative has been formed to address issues of quality, safety, and physician professionalism, which will be chaired by Dr. Koeppen and Dean Bavier from the School of Nursing.

4. Business Items

a. School of Medicine Bylaws Revision, Appendix B

Dr. Casey Jacob presented proposed revisions to the School of Medicine Bylaws which include criteria for promotion and/or tenure for collaborative investigators. She explained that under the current Bylaws, the emphasis on independence for investigators and clinician investigators makes it difficult for faculty who work collaboratively to achieve promotion. The School of Medicine's Oversight Committee was asked to propose changes to the criteria, and they suggested modifications to the existing Investigator and Clinician-Investigator professional categories. Dr. Jacob explained that the criteria were created to recognize the significant contributions of individuals whose major activities are to make unique contributions to the research of multiple research teams, and who make independent contributions to their own professional field. A motion was made, seconded, and unanimously approved to endorse the Bylaws changes. The final step is approval by the Board of Directors.

b. Connecticut Health Education and Research Consortium

Dr. Koeppen provided an overview of the Connecticut Health Education and Research Consortium, known as The Collaborative. He explained that when discussions regarding the partnership began, a number of committees were formed, and he was asked to chair the group on academic issues. Initially, the committee was comprised of individuals from the School of Medicine and Hartford Hospital, but there was agreement at the first meeting that representatives from the Dental School and other community hospitals should be involved. In addition to those representing the Health Center and Hartford Hospital, the membership now includes representatives from Bristol Hospital, Connecticut Children's Medical Center, the Hospital of Central Connecticut, and St. Francis Hospital and Medical Center. The charge to the committee is to develop relationships and structures among the collaborative institutions to enhance and strengthen the educational and research missions of all of the collaborative institutions. Agreement has been reached among the members on principles and strategies in the following areas: issues related to the physician workforce needs of the State (i.e. class sizes and graduate medical education program size and complement); ways to improve the educational program; research collaboration and support; public health; and non-physician health professionals. He then explained ways in which the Collaborative hopes to achieve their goals in each of these areas. The Collaborative has been well

received by the regional medical community. The next step is to begin work on the details. The existing governance structures of the collaborative institutions will be reviewed and specific recommendations for changes made. This will necessitate redrafting all of the School's affiliation agreements with the community hospitals. Dr. Koeppen hopes this will be completed by early August 2009.

It was noted that one of the plans to improve the educational program is elimination of all freestanding residency programs and bringing them under the sponsorship of the School, as well as integrating duplicate graduate medical education programs into a single program. Dr. Koeppen was asked whether this would reduce the number of residents. He explained that centralization of the residencies would reduce the number of programs, but the number of residents would not decline and may actually increase in certain programs. The specific programs noted in his presentation (Primary Care, Family Medicine, Internal Medicine, Pediatrics, and Advanced Education in General Dentistry) were the initial programs discussed at this stage, but others may be included. He was then asked about consolidation of technology transfer services. Dr. Koeppen explained that Dr. Laurencin has offered the services of the Health Center's technology transfer entity to the other hospitals. In addition, a template agreement is currently being developed which will be offered to the other institutions. A question was raised from the audience about whether there were plans to institute a program for pediatric cardiac surgeons, an area currently lacking expertise. Dr. Koeppen explained that clinical needs will become more obvious as the process continues. Currently, each institution has expressed a need for more primary care physicians, but needs within the subspecialty areas will not be ignored. Dr. L. Jacobs added that this concern will be taken under advisement.

5. Consent Items

The recommendations for School of Medicine appointments, promotions, and emeritus appointment were unanimously approved.

There being no further business, the meeting was adjourned at 10:02 a.m.

Respectfully submitted,

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