Faculty Council Minutes
7-27-2011

Attendees: Babak Khabiri, Douglas Gould, Jordi Torrelles, James O’Brien, Charles Bell, Georgia Bishop, Mona Prasad, Rebecca Kuennen, James Lang, Hugh Allen, Andrej Rotter, William Pease, Michael Tweedle, Alan Harzman, Michael Firstenberg

Guests: Catherine Lucey, Robert Ruberg and Dale Vandre

1. Dr. Rotter noted that Dr. Robert Small has volunteered to continue to advise and assist with the FC website that he was instrumental in implementing.

2. Dr. Rotter posed discussion item – how do the members of the FC think the small groups will work in the new curriculum (LSI)? Concerns were voiced regarding the perceived labor (faculty) intensive nature of the LSI – without appropriate recognition, release time or reward. There is more concern from clinical faculty in particular, regarding the emphasis on RVU generation and outcomes over education, faculty recruitment, promotion and the new residency hour requirements. There was also discussion regarding a lack of information at the department level about the LSI and how it will affect individual units. Dr. Rotter suggested that perhaps clinical departments could hire ‘teaching’ faculty – responses indicated that these would most likely be too costly and difficult to schedule.

3. Drs. Ruberg, Lucey and Vandre provided an overview of the class and the LSI and explained how the new ‘super-sized’ class would affect issues mentioned above in item #2 and overall with regard to the LSI.
   • the new large class is due primarily to a new admissions policy that assumes we will accept students prior to interview and to an accounting error
   • currently have 271 students (7 repeats); 52% out of state, therefore will generate out-of-state tuition
   • there will be an increase in preceptors, clerkship sites and will drop the # of incoming students for the next two years to under 200 to compensate for large bolus this year
   • Dr. Lucey emphasized the need to ‘re-educate’ chairs that education is a priority; the entire medical ctr. budget is $2.4 billion, with only $40-50 million for medical education, however tuition, indireks, and the state provide $100 million – the outstanding $50-60 million is used to fund chair packages
   • the ‘old curriculum’ only took 65 fte’s to teach, the new curriculum will require 72 fte’s – spread over 1,300 faculty members
   • it was suggested that a ‘cap and trade’ system could be used by chairs to transfer teaching to other units
   • overall the LSI focuses on transferring the learning burden to students to maximize faculty contact time, students will necessarily be more independent and there will be more clinical and basic science integration
   • Dr. Ruberg (or a representative) will visit every department starting in Dec. and Jan. to address specific concerns and to answer questions regarding the large class and the LSI