THE UNIVERSITY OF MICHIGAN
Senate Advisory Committee on University Affairs (SACUA)
Monday, January 29, 2018 3:15 pm
Med Sci I, Room 3114

Present: Atzmon, Carlos, Beatty, Ortega (chair), Malek, Marsh, Schultz, Szymanski, Wright, Potter (via skype), Schneider, Snyder

Absent:

Guests: Carol R. Bradford, MD. Executive Vice Dean for Academic Affairs, University of Michigan Medical School; Professor Zora Djuric; Professor Ted Skolarus

3:13 Chair Ortega called the meeting to order and asked for approval of the agenda
The agenda was approved
Professor Carlos greeted Dean Bradford, saying that SACUA is trying to reach out to different units to gain a better understanding of their issues and the way that they intersect with the University as a whole.

Dean Bradford introduced herself, saying she has experienced the University at every level. She received her bachelor’s degree in cellular and molecular biology in 1978, her M.D. and a master’s degree in microbiology/immunology. She completed her residency training in otolaryngology (head and neck surgery at U-M), which included an 18-month research fellowship. Her late father was a Michigan BA with further degrees in Business and Law; she met her husband as a student. Her older son took his BA in engineering, her daughter is a Division 3 gymnast.

Dean Bradford observed that the Medical School is the campus’ largest unit, and her position as Dean is a new one, created last year. Her role as Executive Dean for Academic Affairs she reports at the same level as Dr. Bishr Omary, Executive Vice Dean for Research, and Dr. David Spahlinger, Executive Vice Dean for Clinical Affairs, to Marschall Runge, Dean of the Medical School and Executive Vice President for Medical Affairs. Her role is oversight of faculty and other learners (a term that Dean Bradford prefers to “students” as it better reflects the Medical School’s population, including Residents, Medical Students, Masters Students and Post-Doctoral Fellows as well as faculty).

Dean Bradford said her priorities are to oversee educational activities that the University is doing and should be doing, that the Medical School’s mission is to transform health through bold and innovative education, discovery, and service. The program based on five areas, or pillars, including “People,” “Discovery,” “Education,” “Care,” and “Service.” The guiding principle in the case of people is to recruit, develop, and retain the best faculty, staff, and learners. In the case of “Discovery,” the goal is to create transformative knowledge that advances science and improves health. The goal for “Education” is to cultivate a learning community that engages all its members for the advancement of science, health and healthcare delivery; “Care” is directed towards the delivery of outstanding patient care and the improvement of health for local, national, and global populations; the goal for “Service” is to engage and collaborate with institutional,
local, state, national, and global communities to advance health and science. Dean Bradford invited questions

Professor Wright asked how many students there are.

Dean Bradford said there are 170 Medical Students, over 1000 Residents and 90 Graduate Students (up from 75) in Biomedical Science.

Professor Carlos asked how the medical school engages with the University’s programs to promote diversity.

Dean Bradford said the diversity effort at the medical school is led by David Brown (https://medicine.umich.edu/medschool/about/key-initiatives/health-equity-inclusion), the programs exist at the pre-college and undergraduate as well as the graduate student and faculty levels. Given the size of the Medical School, responsibility to achieve the school’s goals devolves to the department level, with each department having a member responsible for diversity efforts. In the case of searches, the Medical School provides guidelines to ensure that search committees are aware of diversity goals.

Professor Carlos asked about accountability.

Dean Bradford said there are many initiatives to enhance the diversity of the learning community and that there is a checklist of expectations for search committees which has to be completed at the end of each search, stress is that faculty should hold themselves responsible for reaching diversity goals.

Professor Schultz recalled that Dean Runge had met with SACUA last year who expressed concern about the complexity of managing academic and health care issues, one of those issues being promotion and tenure. Professor Schultz asked if that process was now under her direction.

Dean Bradford said that, while she thought she was busy when she was chair of Otolaryngology, she has found that she is vastly busier in her present position, which she had just entered upon when SACUA met with Dean Runge. She then drew attention to the Wellness and Civility Task Force (https://medicine.umich.edu/medschool/dr-bradfords-message-michigan-medicine-community#june-2017-why-civility-and-wellness-matter). The purpose of this initiative is to foster an environment in which individuals are empowered to solve problems, bring out the best in each other, and thrive to promote a healthy and civil work environment. The Task Force recognizes that the complexities and stress of healthcare environment compromise the well-being of a workforce; that faculty, clinicians, and learners are subjected to increasingly time-consuming administrative activities which make it more difficult to maintain healthy work/life balance, that the stress can lead to burnout along with other mental and physical problems. The aims of this program are to improve the overall workplace experience for entire workforce. The program will make the health and well-being of healthcare professionals and learners a core value and cultural norm; implement changes to improve clinical work flow and reduce clerical burden; create an on-site wellness office to provide day-to-day support; use a standardized benchmarking instrument to longitudinally measure well-being; conduct regular check-ins on well-being of faculty, staff, and learners; implement changes to address work/life balance requirements; remove obstacles to, and improve, access to mental health care.

Dean Bradford said issues connected with civility and wellness are seen as reaching crisis proportions in academic medical centers and there is widespread recognition that health care providers face a great deal of stress and find it difficult to achieve a healthy work/life balance or even to know when to take a break. It can be difficult to protect against burnout and to make everyone engaged in the process feel valued in the process of patient care. Hence the need for an on-site wellness office and need for an instrument to measure provider welfare to help guide the development of a proactive, holistic process to guide sustained change.

Professor Carlos asked about systems that are being developed to reduce stress.
Dean Bradford said that there is no single clear solution, but a wide variety of approaches that can be tried, while recognizing that people are working at the upper level of their profession. Professor Beatty asked for Dean Bradford’s definition of civility. Dean Bradford replied that civility is defined as the way that people treat each other and that the medical school is looking to develop one set of tactics to enhance wellness, another to enhance civility by leveraging knowledge available in the community. Professor Beatty asked how bullying is handled, especially given the demands that the system has traditionally put on its junior members (e.g., residents).

Dean Bradford said that there was growing awareness of the challenges that residents face.

Professor Syzmanski asked about tensions that arise around the criteria that are used to assess the value of individual contributions. Dean Bradford replied that different criteria are established around expectations for different jobs, noting that measuring faculty contribution to the educational mission has traditionally been harder to track, but that clarity about expectation is an antidote for people who feel that they make a positive difference even though they are not “super stars.” Her goal is to make every person feel that his/her role is valued.

Chair Ortega asked how faculty can develop different learning tactics. Dean Bradford said that all members of the faculty and staff are “learners” and contribute to the learning process.

Professor Marsh asked about the interaction of Basic Science and Clinical Departments. Dean Bradford said that there was no one model for interaction. She gave as a positive example of interaction the work that had taken place between the department of Otolaryngology (https://medicine.umich.edu/dept/otolaryngology) and the Kresge Hearing Institute (https://medicine.umich.edu/dept/khri/news/archive/201406/new-u-m-hearing-research-institute-director-named). In general terms, the Medical School has nine basic science departments and twenty clinical departments (https://medicine.umich.edu/medschool/about/departments-centers) and Dean Bradford is looking to develop better avenues for collaboration between basic scientists and clinical practitioners. She noted that there could be numerous obstacles to collaboration, including the simple fact that clinical practitioners worked were busy with their practices from 8:00am-5:00 pm every day meaning that basic science faculty would have to interact with them outside of their regular hours. She drew attention to M-Cubed as offering a framework with which to circumvent these obstacles, and to combinations of dry and wet appointments between departments. The development of new treatments is a tripartite process moving from basic scientific studies through clinical trials to clinical implementation.

Professor Marsh said that in his experience it was easier for individuals to develop collaboration than it was to develop cross-departmental collaborations given the strict philosophic divides between Basic Science and Clinical Science departments.

Dean Bradford agreed with Professor Marsh’s assessment.

Professor Marsh observed that the Medical School placed a high premium on research grants for promotion with the result that some faculty, who, for whatever reason, were having difficulty winning grants, were trapped at the associate professor level indefinitely. He wondered if the Medical School was looking at more effective ways to help people develop their careers. Dean Bradford suggested that this was best discussed in executive session.

4:03 Executive session.

4:55 Adjournment.
Respectfully submitted,
David S. Potter
Senate Secretary

University of Michigan Bylaws of the Board of Regents, Sec. 5.02:
Governing Bodies in Schools and Colleges
Sec. 4.01 The University Senate
"...[t]he Senate is authorized to consider any subject pertaining to the interests of the university, and to make recommendations to the Board of Regents in regard thereto. Decisions of the University Senate with respect to matters within its jurisdiction shall constitute the binding action of the university faculties. Jurisdiction over academic polices shall reside in the faculties of the various schools and colleges, but insofar as actions by the several faculties affect university policy as a whole, or schools and colleges other than the one in which they originate, they shall be brought before the University Senate."

Rules of the University Senate, the Senate Assembly and the Senate Advisory Committee on University Affairs:
Senate: “In all cases not covered by rules adopted by the Senate, the procedure in Robert's Rules of Order shall be followed.”
Assembly: “The Assembly may adopt rules for the transaction of its business. In appropriate cases not covered by rules of the Assembly, the rules of the University Senate shall apply.”
SACUA: “The committee may adopt rules for the transaction of its business.”