

## Rules, Practices and Policies Committee Minutes January 25, 2022

Circulated: February 21, 2022 Approved: January 25, 2022

Present: Gant, Freeman, Kahn, Maitra, Maxim, Pasquale, Schultz

Absent: Barald, Kazerooni, Verhey

Guests: Howard Bromberg, Clinical Professor, Michigan Law; Phil Rodgers, Clinical

Professor, Michigan Medicine

9:58 Co-Chair Bill Schultz called the meeting to order and welcomed guest Clinical Faculty Working Group (CFWG) co-chair Howard Bromberg, Clinical Professor, Michigan Law.

Professor Bromberg began the presentation of slides about the CFWG's work.

Professor Bromberg confirmed that all members of the CFWG are clinical faculty, with the exception of the SACUA Liaison Donald Freeman. All members are senior clinical faculty with appointments as either associate or full professors.

Professor Bromberg noted the range of schools represented, and that 85% of clinical faculty are in the Medical School. Three members of the group are from the Medical School, including Phil Rodgers, Jayapalli Rajiv (Rajiv) Bapuraj, and Terrill (Terry) Bravender.

The CFWG has collected a lot of data for the long term project of assessing clinical faculty across the university and documents describing promotion, retention, and appointment of clinical faculty, and data to compare clinical faculty in the 18 entities that employ clinical faculty.

The Reference Group includes a broader selection of clinical faculty. The Reference Group met with the CFWG 4 or 5 times. The Reference Group provided input and helped shape the report. The Reference Group includes clinical faculty with a mix of ranks.

10:05 Phil Rodgers, Clinical Professor and CFWG co-chair arrived and introduced himself. Professor Rodgers presented some of the group's slides. He noted that the group received information from the provost's office, from the Faculty Senate Office, and and information about big ten universities.

Professor Rodgers ran through preliminary findings. He noted that there is a lack of clarity, and there is a lot of variability in promotion criteria. Workloads are inequitable in some units. There is a strong consensus that clinical faculty need representation. UM stands alone among big 10 universities in not having clinical faculty represented.



Professor Rodgers covered three guiding principles:

- 1. Clinical faculty need to be represented in faculty governance.
- 2. Diversity Equity and Inclusion women and faculty of color are substantially represented in the clinical faculty
- 3. Need to maintain balance among schools and colleges represented balance of representation needs to be maintained.

Professor Rodgers requested questions from the committee.

## Questions

A member requested clarification concerning balance. Professor Rodgers explained that incorporating all clinical faculty in Senate Assembly could shift representation toward the Medical School. The CFWG does not wish to substantially shift the balance of representation.

In response to a question about DEI interests, Professor Rodgers noted that the CFWG used self-reported gender and ethnicity data from the Medical School. The group is in the process of requesting this information from other schools also.

Professor Rodgers noted that of faculty who report gender, 60% of those are on the clinical track and 2/3 are clinical assistant professors. Numbers were similar for faculty who report as black, Hispanic or Native American.<sup>1</sup>

10:16 Professor Bromberg left the meeting to teach a class.

MaryJo Banasik agreed to share the recording with the CFWG.

Professor Rodgers addressed additional questions. It was asked whether U-M's numbers are out of alignment with peer institutions. Professor Rodgers noted that SACUA Chair Allen Liu provided data of compositions of faculty senates, including who in included, and how people are included. Of other big 10 universities who appoint clinical faculty, they all include them in faculty senates. Some are included as full voting members and some at different proportions.

<sup>1</sup> The Clinical Faculty Working Group Report was revised (dated February 7, 2022) to state the following: "Including clinical faculty at all ranks is also essential to advancing diversity, equity, and inclusion. Using data from the Medical School (see Appendix 3), 69% of all faculty full-time equivalents (FTE) who report female gender are on the Clinical Track, and 54% of Clinical Track faculty FTE who report female gender are at the rank of Clinical Assistant Professor[1]. In contrast, 52% of all faculty FTE who report male gender are appointed on the Clinical Track, 44% of whom are Clinical Assistant Professors. These data underscore the importance of including clinical track faculty at all ranks in the Senate to improve equity in representation.

Of all medical school faculty FTE who report as Black, Hispanic, or Native American, a majority (53%) are appointed on the Clinical Track, 78% of whom are Clinical Assistant Professors. A majority (61%) of all faculty who report as White are appointed on the clinical track, just 49% of whom are Clinical Assistant Professors. 41% of all faculty on all tracks who report as Black, Hispanic or Native American are Clinical Assistant Professors, while only 30% of all faculty who report as White are Clinical Assistant Professors. These data further underscore the importance of including clinical faculty at all ranks to improve equity in representation."



Professor Rodgers noted that many universities frame their senates as a university senate rather than a faculty senate, so staff and students may be included.

A member inquired about a timeline for how long it will take to have standardized criteria for evaluating individuals in terms of promotion. Professor Rodgers stated that CFWG has a timeline, but it will not be able to fix this. This will take time to fix. This is a reason why it's important to have clinical faculty represented.

It was noted that criteria for promotion are applied unevenly. Member Maxim noted that Dearborn voted on a core document for promotion criteria, and that Ann Arbor doesn't have a set standard for promotion of tenure track faculty.

Professor Rodgers noted that until the Medical School redid its promotion guidelines, it was thought that promotion to clinical full professor was out of reach for clinical faculty. Clinical track faculty are meant to spend 80% of their time in clinical care and education, which makes research difficult. Tenure track faculty have about 20% clinical responsibilities and 80% dedicated to scholarship. Four or five years ago, the Medical School codified its promotion criteria for clinical faculty. This has made a big difference.

It was noted that promotion criteria should be written down.

Member Kahn compared librarians to clinical faculty and noted that it is in the institution's best interest to publish clear guidelines and clarity around appointments, promotions, and workload standards.

The committee discussed lack of representation in faculty governance by clinical faculty, even though clinical faculty can participate and even chair a Senate Assembly committee.

It was noted that clinical faculty numbers have increased greatly, and allowing representation of clinical faculty would better mirror faculty numbers.

It was asked whether a clinical faculty member can switch to the tenure track. Professor Rodgers responded said this can happen, but it requires significant extramural research funding. He noted that the only think clinical faculty often lack is a large R01 grant from the NIH. People are leading in important places in teaching and service.

Professor Rodgers stated that the CFWG has submitted its interim report to SACUA. Ms. Banasik stated that SACUA would be reviewing the report at its next meeting, and that after SACUA reviews it, it should be made available to the committee. SACUA will develop next steps.

A member asked whether in the Medical School equal representation is desired in faculty governance even though clinical faculty outnumber tenure track faculty.

Professor Rodgers responded that the faculty senate ought to reflect the current makeup of the faculty. Clinical faculty represent about 30% of all faculty. In the Senate Assembly, adding a large number of faculty could move Assembly seats from schools and colleges. The various proposals are modeled in the report. Each school would determine who is eligible to run in their own elections, and individual schools and



colleges could create their own balance internally. Professor Rodgers gave an example of seats being available on the executive committee for research track faculty.

10:45 Professor Rodgers left the meeting. He offered to come back at a later date.

The recording was stopped.

Member Maxim discouraged segmenting seats and noted that schools should decide this themselves.

Chair Schultz asked committee members to review the four charge documents.

The minutes from the December 16 meeting were approved.

10:58 the meeting was adjourned.

Respectfully submitted by,

MaryJo Banasik Faculty Senate Office

**Next Meeting:** 

Tuesday, March 22, 2022, 10 am-11 am