

Faculty Council
Meeting Specifics

Purpose	Cadence	Executive Sponsor
Regularly Scheduled	Third Tuesday of the Month	Dean DiPaola
Date	Time	Location
Tuesday, April 20, 2021	5:00-6:30 p.m.	Zoom

Committee Chair(s) and Members

Basic Science Members	Clinical Science Members
<input checked="" type="checkbox"/> Campbell, Kenneth	<input checked="" type="checkbox"/> Ballard, Hubert (Chair)
<input checked="" type="checkbox"/> Clark, Claire	<input checked="" type="checkbox"/> Beck, Sandra
<input checked="" type="checkbox"/> Hatcher, April R.	<input checked="" type="checkbox"/> Hays, Lon R.
<input checked="" type="checkbox"/> Mellon, Isabel	<input checked="" type="checkbox"/> Kapoor, Siddharth
<input type="checkbox"/> Nikolajczyk, Barbara	<input checked="" type="checkbox"/> Neltner, Janna
<input checked="" type="checkbox"/> Spear, Brett (Chair-Elect)	<input checked="" type="checkbox"/> Stevens, Julia C.
	<input checked="" type="checkbox"/> Toney, Dale

Standing Guests

<input checked="" type="checkbox"/> DiPaola, Robert	<input type="checkbox"/> Huddleston, Alyssa	<input checked="" type="checkbox"/> Sanger, Matthew
<input checked="" type="checkbox"/> Geddes, Jim	<input checked="" type="checkbox"/> Rogers, Cassandra	<input checked="" type="checkbox"/> Tannock, Lisa
<input checked="" type="checkbox"/> Greathouse, Lauren	<input checked="" type="checkbox"/> Ross, Shavonna	<input checked="" type="checkbox"/> White, Stephanie
<input type="checkbox"/> Harris, Kim	<input type="checkbox"/> Rowland, Michael	

Visitors

<input checked="" type="checkbox"/> Bernard, Philip	<input checked="" type="checkbox"/> Bennett, Lynda	
<input checked="" type="checkbox"/> Garvy, Beth	<input checked="" type="checkbox"/> Zachman, Fred	
<input checked="" type="checkbox"/> Jones, Davy	<input checked="" type="checkbox"/> Adkins, Channon	

Agenda Item	Presenter/Facilitator
Call to Order	H. Ballard
Declaration of Quorum	H. Ballard
Approval of Minutes – Action <ul style="list-style-type: none"> March 15, 2021 – General Faculty Meeting March 16, 2021 – Regularly Scheduled Faculty Council Meeting March 26, 2021 – Specially Called Faculty Council Meeting 	H. Ballard
Review PhD Program Change Proposal – Action <ul style="list-style-type: none"> Change in Nutritional Sciences PhD Program Curriculum 	H. Ballard/B. Garvy
Rules of the Faculty and Administration of the College Update (10 minutes)	M. Sanger
Review UK HealthCare Clinician Personal Cell Phone Policy (20 minutes)	F. Zachman/P. Bernard
Committee Update: (15 minutes) <ul style="list-style-type: none"> Admissions 	J. Neltner
Associate Dean for Wellness and Well-Being (30 minutes)	R. DiPaola
Next Meeting <ul style="list-style-type: none"> May 18, 2021 	H. Ballard

Minutes	
Topic	Discussion
Opening Remarks	<ul style="list-style-type: none"> • Meeting called to order by H. Ballard. • Quorum declared at 5:01 p.m. (10 (of 13) members present.) • Meeting Minutes Approval <ul style="list-style-type: none"> - March 15, 2021 – General Faculty Meeting <ul style="list-style-type: none"> ▪ Moved by L. Hays and seconded by K. Campbell. Minutes approved. - March 16, 2021 – Regularly Scheduled Faculty Council Meeting <ul style="list-style-type: none"> ▪ Moved by D. Toney and second by L. Hayes. Minutes approved. - March 26, 2021 – Specially Called Faculty Council Meeting <ul style="list-style-type: none"> ▪ Moved by D. Toney and second by S. Kapoor. Minutes approved.
Review PhD Program Change Proposal – Change in Nutritional Sciences PhD Program Curriculum	<ul style="list-style-type: none"> • PhD Program Change Proposal <ul style="list-style-type: none"> - Change in Nutritional Sciences PhD Program curriculum - Drop IBS 603, Cell Biology and Signaling - Add the requirement of two or more credit hours of elective course(s) - Add PHS 711, Responsible Conduct of Research, as an alternative to CNU/NS609, Ethics in Clinical Research, or TOX 600, Ethics in Scientific Research • B. Garvy discussed the Nutritional Sciences Direct Admit program and suggested curriculum changes. The programs students take their Nutritional Sciences curriculum. Proposal is to drop IBS 603, Cell Biology and Signaling, to make way for added electives. • The department committee wanted to include Conduct of Research courses among others that students want to take in the educational community. They also want to add PHS 711 and help with redundancy. The committee had no problems with the changes and approved within their department. • Moved by D. Toney and seconded by B. Spear. Change endorsed.
Rules of the Faculty and Administration of the College Update	<ul style="list-style-type: none"> • M. Sanger shared that the proposed changes to the Rules of Faculty and Administration of the College (Rules) were sent to the Office of the Provost and have been approved. The Dean’s office sent a college-wide communication that the Rules have been revised, approved, and shared to the external site and The Loop. Committee governing documents will be updated accordingly per process. • Voting-eligible faculty as defined in the Rules of the Faculty and Administration of the College (“Rules”) <ul style="list-style-type: none"> - 3.1.1.1. <i>The voting faculty consist of the following: 1) the Dean, all Assistant, Associate and Vice Deans; and 2) full-time Professors, Associate Professors, Assistant Professors, Lecturers, Senior Lecturers, and those Instructors who are not enrolled as students in the M.D. program or Graduate School</i> - 3.1.1.2. <i>Faculty listed in CR 3.1.1, who hold joint appointments where one (1) of the departments is outside of the College of Medicine, must have</i>

	<p><i>their primary academic appointment in the College of Medicine in order to have voting status</i></p> <ul style="list-style-type: none"> • Number of Voting-Eligible Faculty: 1,139 • Of the 1,139 Voting-Eligible Faculty, 180 voted (16%) <ul style="list-style-type: none"> - 93% (167) voted YES - 7% (13) voted NO • Faculty Type <ul style="list-style-type: none"> - Clinical Faculty: 136 (76%) - Basic Science Faculty: 44 (24%)
<p>Review UK HealthCare Clinician Personal Cell Phone Policy</p>	<ul style="list-style-type: none"> • F. Zachman, President Medical Staff Affairs, and P. Bernard, UK HealthCare’s Chief Medical Information Officer, discussed Unified Communications on Clinician Personal Cell Phone Policy and the impact it will have on faculty. • H. Ballard shared that questions brought to him are what prompted this agenda topic to help with clarification and concerns from faculty. • F. Zachman stated that he understands this information should be sensitive and considered private for faculty reassurance. The issue of concern is how best to use this for good and not evil. • P. Bernard and institutional leadership want to ensure that this is done correctly and that the medical staff are available online when needed. It was noted that medical staff want to be able to separate work and home. <ul style="list-style-type: none"> - P. Bernard wanted to reiterate that Lightning Bolt (Bolt) was not made to replace pagers but to help inform those working on who the attending is and providing cell phone numbers. The purpose is to help with escalation policies of reaching physicians. Faculty have voiced concerns about secure chats versus calls. - There has been a reported ratio of one call versus 65 texts. Texts are preferred from the nursing staff/hospital staff. - <i>Goal: Get the right message, at the right time, with the right person via the right way to communicate.</i> - C. Adkins and the communication committee evaluated many aspects of the enterprise. There is a video that shares how Epic conducts secure chat. There is a way to override certain aspects of the text/call of the implementation of the policy and a correct way to use the text/call feature. - How does this work? P. Bernard said that with Bolt, you can immediately reach the physician. Using chat will be the most efficient way to talk with the provider. It is much easier to text in the application than to call. • Frequently asked questions in regards to Bolt: <ul style="list-style-type: none"> - Work Life Balance is extremely important and faculty would like to know if there is a way to step away from the application?

	<ul style="list-style-type: none"> - P. Bernard shared the applications have many ways for you to turn on or off the notifications and wants those used. He stated that the group also wants Epic designed to direct people to the proper attending physician or medical staff. • Will patients have access to Physicians' cell numbers? <ul style="list-style-type: none"> - Patients will NEVER have access to a physician's phone number. This is for internal use only. • D. Toney asked if the decision to implement this process has already been made? <ul style="list-style-type: none"> - P. Bernard stated that a final decision has not been made and there is a build in Epic that needs to be finalized. 80% of the physicians' numbers are already listed. He stated that they will need buy-in. • During the discussion, several members shared that they have many concerns about the use of personal cell phone numbers and have heard from others the same concerns as some get calls erroneously when on vacation or in the middle of the night when not on-call. • P. Bernard is supportive of concerns about any inappropriate use of personal phone numbers. Making personal overtures could be a fireable offense. • F. Zachman confirmed the policy encompasses inappropriate use. • The policy is currently drafted and will not be put forward until approved appropriately. It was stated that usability functions need to be fixed and tested before full implementation of this program occurs. • S. Kapoor stated he has thoughts to get a second number. He has no objection to people having his number but wants it used appropriately. • L. Tannock via Zoom Chat: Will the policy still escalate to the chief/chair if the "on-call" doesn't answer? That is a common issue now (and often due to reading the wrong person/wrong line, etc. So not a true non-response. <ul style="list-style-type: none"> - F. Zachman stated that the escalation still stands. • L. Tannock asked how do we ensure reassurance of coverage during time away. <ul style="list-style-type: none"> - P. Bernard said there has to be vitality with the on-call schedule before we can push through the implementation • H. Ballard requested questions be emailed to P. Bernard and F. Zachman. H. Ballard is open to advocating for other faculty for discussion with F. Zachman and P. Bernard with concerns and questions.
<p>Committee Update: Admissions</p>	<ul style="list-style-type: none"> • J. Neltner was welcomed by H. Ballard to discuss the Admissions Committee update. • She stated the importance of the committees, their mission, what they do and how they process applications. The Admissions Committees vote to accept, reject or send medical school applicants to an alternate pool.

- Each committee meets about twice a month. They go through Mission Statement, Current Class Makeup, All Campuses, Administrative Housekeeping, Screening Reject Ballot, and Candidate Reviews. The committees review every candidate who is interview.
- UK College of Medicine Admissions Committee: Background
 - Subcommittees:
 - Screening: Three members (Chair and Vice Chair of Admissions Committee and one additional member from the committee)
 - Alternate Pool: Five Members (Chair of Admissions Committee and five members from the committee)
 - Scholarships: Organized by the scholarship committee-separate from Admissions Committee; scholarship application incorporated into the secondary application
 - The mission of the College of Medicine is to promote a diverse and inclusive environment that provides excellence in education, equitable health care and transformative research to improve the health and wellness of Kentuckians and beyond.
- Prior to the review meetings, candidates have two, 30-minute interviews with at least one committee member. Then a formal assessment is written by both interviewers and they lead the discussion at the meeting. At that time, the committee debates/comments, and votes to admit or reject. If admit, then to admit now or alternate pool.
- Across the four campuses, applications increased by over 1,000 in 2021.
- 2021 Early Assurance Program Campus Table (slide 31) shows the tremendous luck had this year. The committee strives to try to lock in students during undergrad. All campuses have early assurance spots. We had 36 applicants for the UK campus this year. Each campus has their own committee that recommends to the main committee and discusses other items that impacted this past year's applications.
- The meeting style was changed to virtual. We switched from TurningPoint to Zoom for polling efficiency. The committee members started a scholarship fund.
- The 2021-2022 incoming class makeup is 80% in-state, 20% out-of-state. Preference is 10% out-of-state. The demographics (slide 33) are tracked because they are the categories that must be reported to LCME.
- L. Hays via Zoom Chat: Hats off to Dr. Neltner and her committee; having been on this in the past, it is the most time intensive committee of any in the Medical School and very worthy!
- D. Toney asked with the shortage of physicians in Kentucky, is there a way or system for higher potential candidates and how can we assess if they stay after they are done with medical school.

	<ul style="list-style-type: none"> - J. Neltner stated that we really prefer the students in Kentucky and we track those numbers. • The diversity initiatives versus the in-state versus out-of-state are very supportive. • K. Campbell really likes the 60% of the class is women and wondered how many of that was in relation to the applicants. J. Neltner will check and follow up.
<p>Associate Dean for Wellness and Well-Being</p>	<p>Strategic Plan Alignment (See slides #36-37.) Faculty, trainees, and staff engagement</p> <ul style="list-style-type: none"> • Professional and staff development • Leadership development • Evaluation, recognition, and rewards • Communication <p>Resilience</p> <ul style="list-style-type: none"> • Faculty • Trainees • Staff • Workflow and support structure <p>College Community Well-Being Strategic Enabler Current Leadership and Membership (See slide #38.)</p> <ul style="list-style-type: none"> • Faculty Lead – Christopher Doty, MD • Student Lead – Angela Dearing, MD • Staff Lead – Bill Verble <p>Strategic Plan Alignment (See slide #39.)</p> <ul style="list-style-type: none"> • Scorecard – Total enabler progress as of March 26, 2021, is 81 percent. <p>Well-Being Resource Database (See slide #40.)</p> <ul style="list-style-type: none"> • A listing of all the opportunities to connect, with respect to well-being and inclusion. <p>College Community Well-Being Scorecard (See slide #41.)</p> <p>Chief Wellness Officer Proposal – Proposal Writing and Development Team (See slide #42.)</p> <ul style="list-style-type: none"> • Sara Police, PhD • Andrew Hoellein, MD • Christopher Doty, MD • Asha Sheno, MD • 42 individuals participated. <p>Key Responsibilities Overview (See slide #43.)</p>

	<p>Success Metric (See slides #44-46.)</p> <ul style="list-style-type: none"> • Vision and Planning • Assessment and Actions • Resources and Leadership <p>Proposed Structure for Success (See slide #47.)</p> <ul style="list-style-type: none"> • Associate Dean for Wellness and Well-Being • Administrative Coordinator II • Four liaison roles to be initiated on July 1, 2022 <p>Organizational Chart (See slide #48.)</p> <p>Connection to UK HealthCare (See slide #49.)</p> <ul style="list-style-type: none"> • Due to a natural alignment of duties between clinical faculty members and advance practice providers (APP), as well as their close proximal working relationships, APPs will be included in any programs established by this new office and role. • UK HealthCare will provide fifty percent (50%) salary support, including benefits, on a recurring basis to help support the Associate Dean for Wellness and Well-Being. • All associated support positions and other associated costs will be incurred by the College of Medicine. <p>Budget (See slide #50.)</p> <ul style="list-style-type: none"> • FY22: \$254,000 • FY23: \$315,200-\$335,200 <p>Discussion:</p> <p>H. Ballard shared that during the Executive Committee meeting on April 6, 2021, some were concerned with how the Chief Wellness Officer (CWO) would interact at the department level and facilitate alignment. He said that the position is much needed and is a great idea. D. Toney agreed that it is a great plan.</p> <p>B. Spear said given the cost associated with the plan it should be important to not duplicate efforts and avoid overlap. Dean DiPaola said the CWO will be charged with alleviating concerns like B. Spear’s, which in turn has savings and a return on investment (ROI), will help with morale, etc.</p> <p>K. Campbell stated ROI is a great concept but hard to measure if wRVU decreases and faculty left UK. Would this office be judged by such?</p> <p>L. Tannock said this position exists at many other institutions. She said retention is a measurement but should never be 100 percent because it would reflect faculty are not growing professionally. Survey data, e.g., Press Ganey, is one measurement tool.</p> <p>M. Sanger stated the proposal team compared UK HealthCare data to UK data to develop the metrics for the five-year plan.</p>
<p>Other Business</p>	<p>Meeting adjourned at 6:19 p.m.</p>