Minutes of the May 2012 Faculty Council Meeting Tuesday, May 1, 2012, 5 PM Hugh Hill Conference Room

Officers Present:

Past President – Frank Bova

Officers Absent:

President - Marilyn Dumont-Driscoll Treasurer - David Quillen

Department Representatives Present:

Steve Anton – Áging Sue McGorray – Biostatistics Robyn Hoelle – Emergency Med Kelli Komeo – HOP Gregory Murad – Neurological Surgery Susan Semple-Rowland – Neuroscience Sanford Boye – Ophthalmology Kevin Raisch – Otolaryngology Marguerite Hatch – Pathology Philipp Dahm – Urology

Absent:

Maria Zajac-Kaye – Anatomy James Resnick – MGM Tom Rowe – Pharmacology Psychiatry – James Byrd Scott Peterson – Radiology

Guests:

Michael Good, M.D., Dean, College of Medicine Joseph Fanton, M.D. R. Whit Curry, M.D.

Secretary - Leslie Gonzalez-Rothi

President Elect- David Quillen

Kevin Brown – Biochemistry & Molecular George Samraj – CHFM Epidemiology – Cindy Prins John Hiemenz – Medicine Jean Cibula – Neurology Nashat Moawad – OBGYN Robert Matthias – Orthopaedics Robert Bobilin – PA Program Saleem Islam – Surgery

Nicole Dobija - Anesthesiology Carolyn Carter – Pediatrics Peter Sayeski – Physiology Judith Lightsey – Radiation Oncology

- 1. Past President Bova called the meeting to order at approximately 5:01PM
- 2. Approval of the April minutes Dr. Bova

Motion to approve minutes was made, seconded, and approved unanimously.

3. Dean's report – Dr. Good

The COM received a facelift and also received the new space right across from the Dean's office front entrance, next to Community Health and Family Medicine. Dr. Free provided a large gift to the COM and in return the SVPHA designated the temporary home for the H. James Free, M.D., Center for Primary Care Education and Innovation.

The COM has also received verbal commitments of \$4-7 million dollars in additional gifts for the new Medical Education building.

For those of you who teach graduate students; last Friday, April 27th the COM had 19 students who received their Ph.D.'s

There is a 13% cut in state education funds and the college is in the process of trying to push the budget cut through the education mission and see how well it works out. The vast majority of the education dollars flows into the departments and pays for faculty coverage and faculty salaries that is assigned to the education mission—the COM is in the process of trying to sort this out. The biggest decision we have to make as a college is to figure out what to do with the 2.28% that the state, starting

in July will no longer contribute to our retirement programs. So the fringe cost for the college will go down; however, the problem is the state is taking credit for the 2.28% that we earn on research grants and for the clinical practice.

The COM is trying to figure out a way to create a vehicle that will allow us to have a differential fringe benefits packet that will allow the college to have a separate retirement plan with the funds the practice plan generates. Prior to 2000 UF COM faculty received two checks—one from the state and the other from the practice plan.

Both the practice plan and the hospital are doing well right now. The COM will start submitting budget numbers to the departments and at the moment the college does not anticipate any layoffs due to cuts.

The governor vetoed the legislation which would have allowed the University to offer GatorCare to the faculty and staff currently included in the state's health insurance plans. UF will now proceed to implement GatorCare for UF graduate assistants, employees on post-doctoral appointments, and other UF affiliates such as the Athletic Association, and the Shands Healthcare in Gainesville and Jacksonville. The COM Housestaff and physician's target date is July 2013.

- 4. Curriculum Update Joseph Fantone, M.D.
 - The curriculum revision process has been moving along rapidly– TEAMS and faulty have come together to put the fall term together and will move it to the winter term of next year.
 - Just as an update—the orientation is scheduled to begin on the 2nd and 3rd of August and then will move right into the educational program on August 6th.
 - The introduction to clinical medicine course is a multi-disciplinary course that now includes anatomy, development of practice base learning and improvement skills.
 - The first big module that will be added is entitled "Genetics and Health"
 - This summer about 90 students are participating in research activity and this has almost doubled since 4-5 years ago.
 - This new curriculum will construct a model for the higher level clinical experiences that are foundational for all graduating medical students.
 - The new curriculum model will also be more patient-centered and will include biomedical science, clinical science, social/behavioral science, and health outcomes and quality intermingled throughout the entire four years of medical school.
 - Hand-outs provided
- 5. Compensation Plan R. Whit Curry, M.D.
 - The changes in the compensation plan that is being proposed this next year are relatively minor—there is mainly clarifications to the current plan, another option added for RVU targets allowing a person to use MGMA or UHC benchmarks but mostly used to clarify wording and clarify areas that has been confusing.
 - The Business school has been consulted to look at the COM compensation plan. There are a couple of professors who were recommended to Dr. Good by the Business School who specialty is compensation and they are taking a hard look at our compensation plan. They are starting this month and will be interviewing members of the compensation committee, key financial people in the college, and do a random survey of faculty looking at both people who have more than 50% assigned clinical and faculty who has more than 50% assigned research. They are doing this survey formulating issues for the Dean as to what should be done better or what needs to be fixed in the plan. Simultaneously they are going to be monitoring what happens next year because the Department of Medicine will be doing a pilot that will involve over 200 faculty and so the Business school will be surveying the Department of Medicine as well as non-DOM faculty and comparing the two, both at mid-point and the year after the department of medicine pilot plan.
 - The concern is also if you have a lot of uncompensated administrative responsibilities or things that you don't get credit for—how can those hours be used as compensated time? Clinical RVUs has salary attached.
 - One of the big changes to the compensation plan is that it will allow salaries to fluctuate up or down. One of the concerns that were shared with the compensation committee in years past

was that the COM was restrained for our inability to lower salaries. The COM could reward faculty who were higher producers; however, we were not successful in decreasing salary for those who did not produce very well. The Department of Medicine will have that option.

- To summarize--pilot Department of Medicine for a year and be given a number of RVU targets based on clinical activity and where the challenge is when you are not seeing patients and how would that effect your RVU target if you don't meet the target goal.
- Suggestion was made by Dr. Curry to have Mr. Richard Nuttall (Department of Medicine) to come and address the faculty council.
- 6. Announcements, Reports, and Old Business:

Past President Bova gave a brief overview of the several topics and allowed for additional questions.

3. The meeting was adjourned at 6:05PM

The next Faculty Council meeting will be held Tuesday, June 5, 2012 @ 5PM in the Hugh Hill Conference Room

Minutes recorded by Sonya Jones, Administrative Assistant