

## Minutes of the Meeting

5:00 PM-6:30 PM, Tuesday, May 3<sup>rd</sup>, 2016

Faculty Advisory Committee and Faculty Senators Quarterly Meeting with Dean Hamm.

Attended by Dean Dr. Lee Hamm, members of the faculty advisory committee and Faculty Senators, GMF Chair (Dr. Franklin) and GMF Secretary (Dr. Katakam).

Meeting began with opening remarks by Dean Hamm.

- He welcomed the members and senators to prepare the agenda and identify the issues that need to be discussed 3-4 days in advance.

### Senate Updates

- Dean Hamm invited updates from the University Senate meetings from SOM senators: 1. **(Erin Boh)** Discussion in the senate involved the issue that the university chose to uphold the decision to support the deficit in the funding of the Athletics Department. 2. Benefits Committee chose to work with United Care for underwriting health insurance. Expected to save anywhere from 2%-8% of what it cost us last year. 3. Self-insurance as an option for consideration was brought up for discussion. The benefit of in-network at Tulane Hospitals as a cost saving option was also proposed. Our senators appeared to get the impression that the senators representing schools uptown were not in favor of self-insurance option. However, they were willing to revisit this in the future perhaps next year because they feel that they received the best deal for this year from United Care with no increase in premiums. The plan proposed by Erin Boh was to table the self-insurance option for discussion early in the year.
- Concerns of low salary raises and fringe benefits have been expressed.
- Staff handbook updating may take time.
- Transgender bathrooms issues came up, apparently facilities people are working on this issue.
- **Information Technology:** 1. Redoing Canvas and updating was discussed. 2. Improving Email Security was discussed and reducing phishing, educating the users, and installing electronic filters were offered as approaches to ensure email security. 3. New Website plans were discussed. 4. Consolidation of IT personnel was brought up but not approved.
- Dr. Hamm responded to questions sent to him. Tulane's future? Dr. Hamm responded to this question by an emphatic 'Good' and expanded on his response: Tulane does not face the pressures many small Liberal Arts colleges faces and also the bureaucracy is not too big like many big universities have. Tulane is well positioned with many professional schools that are doing well. Medical school has very good educational product that continues to do well. Clinical component of SOM is too small. He feels that it is better to be part of a bigger local system. SOM has solid research base although it is not as big as it needs to be, it is improving. SOM also overly dependent on endowments. Revenues of SOM is mix of three sources. Dr. Hamm also mentioned that our research funding has been good this year but feels it is still relatively slow and plans to do something to increase the pace of growth such as the Neuroscience Center and other initiatives.
- **Faculty Retention** was addressed by Dr. Hamm. He identifies the salaries and cost of housing as two reasons. Erin Boh shares her impression that the younger generation expects rewards right away and lack the long sight of their careers. She also shares the impressions of few others who do not find Tulane

facilities/system as good as others. Dr. Hamm responded to this by identifying some key issues such as electronic medical records are not technologically up to date and also the high pressures on clinical income. He admitted that the like many places Tulane hospitals have many issues. He also mentioned that bureaucracy is functional and works well at Tulane SOM. Later on Dr. Hamm and the members of the faculty shared their experiences about the Work Force Management and the lack of prompt service. Dr. Emad Kandil brought up the issues of lack of publicity for the outstanding clinical services offered by Tulane. He also brought up the lack of recognition in terms of awards to faculty members as an incentive like many other Universities do around the country. Dr. Hamm agreed with his impressions. He shared with everyone few ways the SOM is addressing these issues through Development and also communications department. Dr. Hamm recommended to set up a subcommittee to find low cost ways to publicize the clinical services of SOM. He volunteered Katy, Rusty, and Emad to set up a subcommittee.

- UMC future if LCMC pulls out? Dr. Hamm doubts that it would happen. He mentioned about the rumors that Ochsner offered to take over UMC and he shared his impression based on his experience that 'Ochsner makes proposes many thing that hardly follow through with'.
- Dr. Hamm also shared some good news about core equipment and SOM identified money to make the purchases. Heather Mechado brought up the subject of maintenance of core equipment and also hiring qualified persons to run the facilities. She also brought up the issue of the overtime payment for non-exempt employees. Dr. Hamm mentioned that federal guidelines are expected to be announced soon about 'Exempt' status.
- Robotic Surgery scheduling was brought up. Purchasing robotic surgery platform for Ob/Gyn at Lake Side was proposed. Dr. Hamm responded that the hospital wishes that Ob/Gyn use robotic surgery. He does not think that there will be new robotic surgery equipment at Lake Side in the next 6 months. Scheduling of the Robotic Surgery present in the Urology to maximal utilizing by all departments was discussed. Design Thinking was also discussed as a tool to help better utilization of the equipment.
- Dr. Saifudeen brought up the subject of including non-clinical faculty in the clinical department as members of FAC representing clinical department. Dr. Hamm, did not see any problem with that because many issues discussed in the FAC meeting are very generic and a basic science faculty member will be able to represent a clinical department.
- Dr. Hamm provided update about 'Capital Campaign'. It is in the silent mode but will go live/public by fall. The goal was likely to be 1.2 billion, it is expected that Med School may be asked to account for approximately 300 million. Medical School endowment had some success. We had many bequest intentions for scholarships. Dr. Hamm is pushing for research funding. Biggest donors are alumni but not grateful patients. Naming the school of medicine is expected to be 100 million if it is a new donor or 50 million if there someone who had already donated before significantly.