

Dean's Council (DC)

May 8, 2006

Minutes

Present: Dr. Deckers, Dr. Fifield (representing Dr. Kenny), Dr. Fortinsky (representing Dr. Ford), Dr. Garibaldi, Mr. Gillon, Dr. Gould, Dr. Jacob, Dr. Koeppen, Dr. Simon, Dr. Strongwater, Dr. Weber

Excused: Dr. Arnold, Dr. Lalande, Dr. Pappano

The meeting was called to order at 8:05 a.m.

1. The minutes of the April 18, 2006 meeting were unanimously approved.
2. Dr. Deckers made a brief statement before leaving the meeting. Public health is a new initiative for the University which requires new revenue not currently available in the University system. However, funds to support this initiative will be requested during the next legislative session. He stressed the seriousness of the budget situation and the need to start thinking about the institution as a matrix in order to eliminate overlap and redundancy. He believes public health is important to our educational and research programs and that it will only succeed if it is a University-wide initiative. It must also function as a matrix which interfaces with other programs. How it will operate within the governance structure of the School of Medicine needs to be determined. He then excused himself from the meeting.

Dr. Koeppen explained that concerns regarding the Public Health Initiative (PHI) were brought to the Dean's Council from the Oversight Committee. One of their concerns was that this initiative had been developed outside of the governance structure of the SOM. He asked the members for their concerns regarding this initiative and for suggestions on how to begin to deal with them.

Some expressed a general lack of understanding of the PHI and who is under its auspices. There was also confusion as to whether this is a Type II center or a Type III University center. Normally, when a Type II center is formed, faculty may choose to be a part of it, but that is not the case with the PHI. For example, AHEC is a part of this initiative, but it is not clear what that means. Dr. Gould noted that AHEC is a federal program with many rules, and whether they will be allowed to do what they are asked for PHI is uncertain. The PHI was compared to the Pappanikou Center, which is a University center housed at the Health Center that receives resources from us but operates independently. The Center was moved from Storrs to the Health Center. Initially, Storrs provided some resources, but that is no longer the case. However, the Pappanikou Center has a substantial amount of grant money which

remains in the Center. Mr. Gillon noted there is no set policy on how to distribute revenues within centers, so this was viewed as an opportunity to develop a policy that could be applied more broadly than just the PHI. It was also noted that the PHI differs from the Pappanikou and other Type II centers because it will grant doctoral and masters degrees.

The ambiguity among the various organizational charts was noted. In some cases, centers have several different reporting relationships -- sometimes reporting to the Dean, sometimes to the PHI, or to the signature programs. Dr. Koeppen will get current organizational charts to see where the multiple lines of interaction occur. However, he noted that this is very characteristic of matrix systems, which often blur reporting relationships.

Some expressed concern that decisions regarding the PHI are being made by a few individuals rather than a governance group and lacked the spirit of academic collaboration.

It was decided that the Dean's Council will approach this issue by recommending a developmental and approval process, which adheres to the School of Medicine Bylaws, and which could be applied to new cross-campus initiatives in the future. To begin this process, organizational charts for the School of Medicine, the PHI, and the Pappanikou Center will be distributed.

Finally, it was noted that a lot of time has been committed to dealing with what has occurred in the past and what is currently happening with the PHI, and it was advised that we begin to think about the future, particularly the CTSA, which is the way clinical research will be funded in the future.

Dr. Koeppen noted that this discussion brings to light the transitioning away from traditional departments into interdisciplinary activities, which all academic health centers are struggling with. He will gather some information together in the context of developing a governance system that will be applicable to cross-campus initiatives for discussion at a future meeting. He asked the members to send him any further thoughts they may have on this subject.

3. The next meeting will be devoted to discussion of the budget.

The meeting was adjourned at 9:00 a.m.

Respectfully submitted,

Lynn Donatelli