WAYNE STATE UNIVERSITY – ACADEMIC SENATE
Official Proceedings
November 6, 2019

Members Present: Keith Whitfield, Provost and Senior Vice President for Academic Affairs; Linda M. Beale, President of the Academic Senate; Faisal Almufarrej; Leela Arava; Poonam Arya; Paul Beavers; Juliann Binienda; Cathryn Bock; Erika Bocknek; Timothy Bowman; Stephen Calkins; Leah Celebi; Wei Chen; Victoria Dallas; Susan Davis; Richard Dogan; Alan Dombkowski; Kelly Driscoll; Brian Edwards; Tom Fischer; Wanda Gibson-Scipio; Daniel Golodner; Siobhan Gregory; Smiti Gupta; Xiaoyan Han; Robert Harr; Lance Heilbrun; Marisa Henderson; renee hoogland; Michael Horn; Arun Iyer; Barbara Jones; Thomas Karr; Kristen Kaszeta; Mahendra Kavdia; David Kessel; Fayetta Keys; Christine Knapp; Manoj Kulchania; Sarah Lenhoff; Wen Li; Justin Long; Krishna Rao Maddipati; David Merolla; Bharati Mitra; Rayman Mohamed; Sandra Oliver-McNeil; Victoria Pardo; Charles Parrish; Rachel Pawlowski; Sean Peters; Richard Pineau; Avraham Raz; Robert Reynolds; Krysta Ryzewski; Ali Salamey; Berhane Seyoum; Naida Simon; Scott Tainsky; Ronald Thomas; Ellen Tisdale; Ricardo Villarosa; William Volz; Jennifer Wareham; Robert D. Welch; Jeffrey Withey; Hossein Yarandi

Members Absent with notice: Jocelyn Ang; Tamara Bray; Pamela Dale; Kelly Dormer; Samiran Ghosh; Ewa Golebiowska; Peter Henning; T. R. Reddy; Shauna Reevers; Stella Resko; Yang Zhao

Members Absent: Santanu Mitra; Ekrem Murat; Leonidas Pittos; Brad Roth; Elizabeth Stoycheff; Fu-Shin Yu

Others Present: Thomas Anderson, Liberal Arts and Sciences; Jeff Bolton, Assistant Vice President, Budgets; Herman Gray, Chair, Department of Pediatrics; Chirag Khimavat, Office of the Academic Senate; Mary Paquette-Abt, Fine, Performing and Communication Arts; Karin Tarpenning, Liberal Arts and Sciences; Angela Wisniewski, Office of the Academic Senate

CALL TO ORDER: Provost Whitfield called this regularly scheduled meeting of the Academic Senate to order at 1:34 p.m. The meeting was held in the Bernath Auditorium in the Undergraduate Library.

I. UPDATE ON RESPONSIBILITY CENTERED MANAGEMENT

Jeff Bolton, Assistant Vice President, Budgets, reviewed the changes that have been made in the proposed responsibility centered management (RCM) budget model. Mr. Bolton met with the schools and colleges to get feedback on the proposed model. The team working on the new model looked at institutions across the country that used the RCM model or had an incentive-based budget model. Some of those institutions cautioned Wayne State that variability of enrollment in one year could create issues. If enrollment is stable, it is easy to project future enrollment and real-time adjustments can be made if needed. Some institutions struggled when, after several years of steady enrollment, they suffered a one-year decrease. They had to figure out how to adjust the budget so that a one-year drop in enrollment would not seriously affect their budgets. Our budget office incorporated a three-year rolling enrollment average using the most recent three years. During the transition from fiscal year 2020 to fiscal year 2021, units will be held harmless with budgets unchanged under the RCM model.

The revenue-generating units (RGU) are the 11 schools and colleges other than the Graduate School and the Honors College. The non-revenue-generating units (NGU) consist of the divisions and central accounts such as utilities and deferred maintenance as well as the Graduate School and Honors College. The revenue categories are the state appropriation, general fund investment income, miscellaneous, facilities and administration (F&A) from grant support, tuition and fees.

The formula for allocating the state appropriation and the general fund investment income remains the same as under the original RCM model, except for incorporation of a weighted credit-hour system based on Ohio's analysis of cost of instruction in Ohio's public universities (whose costs are similar to ours). Initially, the model took each school's or college's credit hour total and divided that by the university's total credit hours to determine the percentage of the state appropriation to be allocated to each school or college. That approach favored undergraduate credit hours because more credits are generated at the undergraduate level than at the graduate/professional level, even though credit hours at the graduate/professional level are more expensive. The team looked at the methodology the state of Ohio used to allocate funds more equitably among the different public universities. Ohio carried out a program vs. program comparison to determine the cost of each type of degree. The state of Ohio separated its programs into four categories, with different levels within each category that have different credit-hour costs. There also might be differences of disciplines within the levels. For example, within the category of business, education, and social sciences, there might be a difference in cost between an accounting undergraduate degree and an undergraduate degree in special education. Or, there might be differences between an undergraduate degree and a graduate or professional degree or a doctoral degree in the same discipline.

Miscellaneous revenue is money from a non-central location collected directly by the schools and colleges. That money remains in the schools and colleges under the RCM model as in the current budget model.

Facilities and administrative (F&A) cost recovery funds, also known as indirect cost recovery (ICR), are the funds the university receives from grants to cover administrative costs. Currently five percent goes to the school or college, 8% to the department, and 5% to the principal investigator. This will remain the same (with the remainder going to support university-wide research activities).

The base tuition and fees from undergraduate and graduate courses will be spread between the school or college (S/C) of a student's major and the S/C offering the course of instruction. For undergraduates, the split is 25/75: 25% to the S/C of the student's major and 75% to the S/C of instruction. For example, in the case of an undergraduate student majoring in Business and taking a course in Liberal Arts and Sciences (CLAS), Business would get 25% of the tuition for that course and CLAS would get 75%. For graduate and professional students, the split is 75/25: 75% would go to the S/C of the student's degree program and 25% to the S/C of instruction. The distribution for the Honors College is different since the college does not have majors (NGU-like) but does teach courses (RGU-like). When a faculty member from another college teaches an honors course, 75% of the revenue would go to that faculty member's S/C and 25% would go to the S/C of the student's major. The majority of honors courses are taught by senior lecturers in the college, so tuition revenue from those courses would be combined with the support fee that is charged for the Honors College and count as a direct cost reduction to the amount to be charged in the student cost allocation category in RCM. One hundred percent of the registration fee, the support fee, the Ph.D. maintenance fee, and differential tuition would go to the S/C of the major.

The total tuition and fee revenue is $11.8 million for the hypothetical S/C in the example.

Mr. Bolton next explained how student financial aid would be funded. The total number of undergraduate credit hours generated by a S/C is divided by the total number of undergraduate credit hours in all S/Cs. The university provided $56 million of financial aid in the year used in the model. The fictitious school in the example generated 9,340 undergraduate credit hours. Dividing that number by the total number of undergraduate hours in the university of 433,000 results in 2.15%. That school would therefore pay 2.15% of the cost of undergraduate financial aid, which in this example would be $1.2 million.

The financial aid for graduate level will be determined in two ways. The tuition for graduate assistants is in a Board of Governors line and is overseen by the Graduate School. The budget for tuition for graduate assistants is $7.6 million that will be allocated to the RGUs based on the current methodology of how that money is allocated. This will be a special carve-out from the traditional operations of the individual Ss/Cs. The money will be put in a special fund within the Ss/Cs that only can be used for graduate student financial aid.

Graduate School awards include fellowships, graduate professional scholarships, and competitive graduate research assistantships. This portion of financial aid is $9.5 million in FY 20. That money will remain in the Graduate School. Funding will be allocated to the Graduate School based on each RGUs three-year average percentage use of graduate awards. The fictitious school averaged over the past three years about 2.45% of the $9.449 million or about $231,000. That is the amount of funding that would be allocated from its budget to fund graduate school awards. Waivers are used when a school has a non-resident student. A graduate award will traditionally cover the resident tuition and fees for graduate student recipients. The waiver covers the non-resident portion of tuition and is currently considered a reduction to revenue rather than an expense for financial reporting purposes. About $8 million is budgeted in FY 20 for graduate tuition waivers. The fictitious school has used about 0.17% of the budget over the last three years so about $13,000 would go towards the waiver budget. The total net revenue for the fictitious school, including state appropriations, general fund investment income, miscellaneous revenue, F&A cost recovery, tuition and fees, and financial aid is about $14.2 million.

There are two categories of expenses. One is the direct expense of the RGUs: examples include the unit's salaries, supplies, travel, etc. - things that are borne directly from the RGUs. The other category of expense is cost allocations, the process of "charging" the RGUs for some portion of a central service or central cost. The cost allocation process funds the NGU budgets.

Mr. Bolton addressed how direct expenses would be handled under RCM. First, an upcoming change to the way the summer session will operate. Currently, the summer program (i.e., the spring term, the spring/summer term, and the summer term) has been handled differently than the fall and winter semesters under the current budget framework. Under RCM the summer semester will be handled the same way as the fall and winter semesters. Revenue will come in through the RGUs and the expenses will be borne by the RGUs. The summer session budget will be allocated to the RGUs for the direct expenses. About $6 million in total will be allocated to the RGUs.

There are four categories under cost allocation, and each category has a specific "cost driver" that determines how much each S/C must pay out of its revenues to support the NGUs in that category. The student category consists of the base budget, as it exists in FY 2020 as well as fringe benefits. The total FY 20 budget for the areas in the student category is $93.4 million. Some revenue offsets will not be allocated directly to specific S/Cs, such as late payment fees, matriculation fees, collection fees, etc.; instead, that revenue will reduce the overall amount in the cost allocation categories. Example: (as discussed earlier for the Honors College courses taught by the college's lecturers). Deducting these revenue sources from the original $93.4 million total cost of the student category leaves a cost allocation amount of $88.6 million to be paid by the RGUs. The costs of NGUs within the student category are allocated to the RGUs using a credit-hour percentage: total credit hours of each S/C over the university's total credit hours. The fictitious school generated 2.3% of the university's total credit hours so would cover 2.3% of the $88.4 million or just over $2 million from the school's revenues.

The total FY 20 budget of the NGUs in the general category is about $88 million. Other revenue sources come from such things as banking services and some rental space on campus. Those revenues add up to just over $3 million. That revenue is a direct reduction to the cost allocation, reducing the amount to be funded by S/Cs to just under $86 million. The amount paid by each S/C is proportional to that S/C's general fund direct expenditures. Accordingly, the fictitious school would contribute 4.06% of the cost allocation or about $3.4 million.

The third category is Research, which includes the budget of the Division of Research, research stimulation, and the research facilities funds. The FY 20 budget amount is about $32.6 million. Direct F&A funding of research operations reduces the cost allocation to about $2.7 million, and a S/C's responsibility is determined using the percentage of the total F&A funding generated by the S/C as the cost driver. In the example given, the fictitious school generates 0.93% of the total F&A, so will contribute 0.93% of the $2.7 million or about $27,500 to cover the research cost allocation.

Space is the fourth category. Space comes up both as a direct cost and as a cost allocation. The majority of items in the cost allocation category are central items - utilities, rentals and leases, deferred maintenance, debt service, amounting to about $85 million. $85 million divided by the total general fund-assignable square footage on campus of slightly over 4.3 million gives a cost of about $19.50 per square foot. For the direct space expense charged to each RGU, the square footage that is assigned is multiplied by that cost of $19.50 per square foot. In the fictitious example, the school had about 47,000 square feet assigned, resulting in a direct expense for that space of about $935,000 (47,000 sq. ft. times $19.50 per sq. ft.).

Many types of space such as shared common space, vacant space, and shared classroom space are included in the space category, amounting to about 561,000 square feet of space that is not assigned to an individual S/C. Multiplying 561,000 by $19.50 results in a total cost allocation for space of just under $11 million. Each S/C is allocated a percentage of that cost based on the S/C's proportion of the total RGU assigned square footage of 2.2 million. In the fictitious example, the school would pick up 2.15% of the common and vacant space, which will cost about $235,000.

The student and general research space has the same methodology. All the NGUs under the student category occupy 830,376 square feet. Multiply that by $19.50 and the total is just over $16 million. Credit hours are the cost driver used to determine how to allocate that $16 million for the space occupied by the NGUs in the student category. The same 2.32% credit hours calculation means that the fictitious school would pick up 2.32% of $16 million or $375,000 of that NGU cost.

The NGUs in the general category occupy about 454,000 square feet costing $8.9 million using the $19.50 per sq. ft. figure. The driver for the general category is percentage of direct expenditures. 4.06% was the factor we used with the allocation for the general category. Multiply 4.06% by $8.9 million and $360,000 of space for the general category would be picked up by the fictitious school. This results in a total space allocation charge to the fictitious school of $970,000 (= $235,000 + $375,000 + $360,000), in addition to its direct space cost of $935,000.

Put all that together for the fictitious school in the example, there are $19 million in total expenses (direct and cost allocation). Combining all of the revenues and expenses, the fictitious school would have about a $5 million shortfall in the transition from FY 2020 to FY 2021. There would accordingly be $5 million in subvention to make sure that resources would remain the same in the first year of RCM budgeting.

Mr. Bolton took questions from the members.

Mr. Edwards asked if the RCM budget model had been in place over the last five years if S/Cs would have been given the power to fix the elevators in their buildings and if the steering committee structure gives RGUs any power to fight against the administrative costs they are charged.

Mr. Bolton said that it is impossible to say whether S/Cs would have had money to make repairs to their buildings. The finance office and Facilities Planning and Management have not finalized what would be covered by the cost allocation funding rather than covered by RGUs from their own budgets. The Budget Planning Council continues to discuss how to handle any reductions in the funds provided by the RGUs to the NGUs.

Mr. Bolton was asked if a program that offered many online courses would be charged the same amount as those that teach in classrooms. He said that S/Cs would be charged for their assigned space, however it is used. If a unit needs less space, its expenses could be reduced. Provost Whitfield noted that some space might be taken 'offline' when online courses generate revenue not tied to specific space, thus reducing costs. If we use less space by teaching online, the benefit would be a long-term benefit as we proceed with the master plan.

Mr. Edwards suggested that benefits be provided to motivate departments to increase enrollment. The three-year averaging of costs is too long a time. Mr. Bolton said that the averaging of enrollment would be at the school and college level. Increases in department enrollment would be included in the increase in college enrollments. The methodology used in the RCM model does not assign funds to departments. Having a faster payback is worth considering.

The Senate thanked Mr. Bolton for his presentation.

III. UPDATE ON THE DEPARTMENT OF PEDIATRICS

Dr. Herman Gray, the chair of the Department of Pediatrics, informed the Senate about the situation in that department. Dr. Gray is a pediatrician and has been chair of the department for 1 1/2 years. He served ten years as a faculty member early in his career and then served as associate dean for graduate medical education at the School of Medicine. Most of his career has been in management and administration. He was chief operating officer of Children's Hospital of Michigan and was president of the hospital for almost nine years. He was asked to chair the department largely because of the challenges it is facing due to the ongoing disputes among faculty members about the practice plan and future of the association with Children's Hospital. He had hoped to use his leadership training to help resolve the conflict, but it has not been possible.

The medical school operates differently than the main campus. The vast majority of the physician clinicians who are faculty members have two discrete lines of income. One from the university is for their academic work (teaching and research) and the other line is from the practice plan. An organization related to the university, but not necessarily the university, was formed as a practice plan. The University Pediatricians practice plan was started by the university and has been the practice plan for pediatrics for about 30 years. Its mission was to support the mission of the medical school and the university. The dean's guidelines for practice plans specify what they are to do and how they are monitored. For many years they worked reasonably well. Some of the requirements are routine and mundane such as requiring an audit of the financial records on an annual basis. Some are more strategic and allow the university to maintain some modicum of control over the practice plans, such as the chair of the department should be the president of the practice plan. The practice plan, however, is a separate 501(c)(3) organization with its own board. When faculty are offered positions typically the offer is a dual offer. In a single letter an offer is made to the candidate to become an academic faculty member and an offer is made from the practice plan saying that they are a member of University Pediatricians and the amount of time they are to split between the two entities. Their rank, salary and a description of their roles are included. The letter reflects the interdependent nature of the roles that physician faculty play. They are teachers and frequently teach at the same time that they are providing clinical care. It is difficult to separate their various responsibilities.

Children's Hospital of Michigan (CHM) is part of the Detroit Medical Center, which is owned by Tenet Healthcare, a large investor-owned for-profit hospital system. It is important to understand the attachment that academic pediatricians have to CHM. Part of the issue with which the medical school is struggling is who will practice there. If doctors do not remain in University Pediatricians (UP), they will likely not be able to practice in Children's Hospital, since UP has a contract with CHM. There are 50 or 60 large children's hospitals in the country that are similar to CHM. In addition to CHM, there are children's hospitals in Ann Arbor and Grand Rapids. Ninety percent of academic pediatricians with subspecialties practice in children's hospitals. Because the hospitals have more financial resources, faculty turn to them when they need something. The school of medicine is seldom in a position to offer much.

The relationship between the school of medicine and UP functioned pretty well for several decades. The relationship began to deteriorate about 11 or 12 years ago. Dr. Gray was president of Children's Hospital from 2005 to the beginning of 2014. The creation of what was to be a single practice plan for the entire medical school, the University Physician Group, occurred during that period. The leadership of the medical school wanted every specialty to be in one practice plan. The most efficient way for a practice plan to function is to have all physicians in one group. More money is generated and they have more influence in setting contracts with payers and with other hospitals. Pediatrics and several other specialties refused to join the UPG. The situation intensified when Robert Mentzer was dean and made it clear that he was unhappy with the chair of pediatrics, Bonnie Stanton. To protect itself from the medical school, University Pediatrics changed its bylaws so that the chair of the department did not necessarily have to be the president or chief executive officer of the practice plan. One person could hold both positions but it was not mandatory. Over time, there was growing independence of the UP and a growing discomfort with the medical school and the university. The problems intensified because of the relatively isolated environment in which academic pediatricians work. They don't have much contact with internists, surgeons, and other specialists outside their own hospital. This is true at other children's hospitals. The UP physicians had a growing sense of autonomy.

Vanguard Health Systems, a profit organization, purchased the DMC in January 2011 when Michael Duggan was the chief executive officer of the DMC. Mr. Duggan said that in selling the DMC he had found a for-profit company with not-for-profit values. At the time the DMC had enough money that it would not go broke but it did not have enough to be very good. In a span of 18 months Vanguard sold the DMC to Tenet Healthcare, a large national company whose reputation was of concern. The purchase seemed to accelerate the disaffection by our faculty. Like any publicly held for-profit organization, the next quarterly report to Wall Street is all consuming. That is how success is determined.

There have been no negotiations between the UP and the university and the school of medicine since March 2018. The UP has refused to talk. The dean has made efforts and he has asked the Board of Governors and civic leaders to intervene, with no success. The UP terminated the implementation agreement, which is the master agreement that defines the relationship between the university and the practice plan. In September 2017, the UP gave their six-months' notice that they would separate from the university effective March 2018. There was no adverse response from the university. The university thought that if the two sides would continue talking the problems could be worked out. There have been no negotiations to this date.

In early 2018 by a FOIA request the university learned that the UP was working with leaders of Children's Hospital to transfer the department of pediatrics from Wayne State to the University of Michigan. This, Dr. Gray, said was unprecedented. No public university in the country has ever taken a large department from another university. Two chairs of pediatrics negotiated the move over an 18-month period. They were within one or two weeks of making a public announcement when our Board of Governors was alerted. Board members called their counterparts on the Board of Regents at U of M. They had not been aware of the plans and stopped the move. Then WSU's medical school learned that the UP was negotiating with the two medical schools at Michigan State University. When the leadership at MSU was notified, they dropped out of consideration. On January 1, the medical school leaders learned that a relationship had been signed with Central Michigan University. Central's school of medicine is new with about 80 faculty. It is not a research university. It was created primarily to treat people in the rural regions of the state.

Dr. Gray noted that three pediatricians were suing the UP for failure to follow their own bylaws. The judge ruled that the UP could not partner with or consider partnering with anyone until late March. A couple of months ago all pediatricians received appointment letters and certificates to join the faculty at CMU. Dr. Gray believes they would be voluntary faculty without applying for it although the letter did not say that explicitly. The UP applied for appointment on behalf of its members and Wayne State faculty. In the last couple weeks, the UP sent an email to our faculty soliciting applications for chair of the department of pediatrics at CMU. Before its relationship with UP, CMU had seven pediatricians.

The leadership of the UP is not interested in being part of Wayne State. They don't answer email messages or telephone calls. They don't respond to pressure from other members of the community to meet with the university administration.

The university sent a termination letter to all faculty in pediatrics telling them that if they joined Wayne Pediatricians they could retain their FTE faculty appointment. If they did not join, they would lose their faculty appointment. Faculty were given a little more than 30 days notice because the university had a lawsuit against UP for failure to pay salary reimbursement. The practice plan and the university pay the faculty salaries together. The university pays upfront and the practice reimburses the university. The last reimbursement check from the practice plan was on

February 25, 2019. They did not give the university notice or explain why they stopped paying. The amount in arrears is now $20 million. The university will continue to support our faculty. Central Michigan will get the reimbursement from Medicaid for patient care.

After sending the letter, which was signed by Dr. Gray and Dean Sobel, Dr. Gray met with every faculty member in pediatrics. The vast majority of physicians want to remain Wayne State physicians but they are afraid they will not be allowed to practice in Children's Hospital. There is a great deal of intimidation by the UP enabled by the DMC.

The university did not send the same letter to every faculty member. The university will not terminate tenured faculty or faculty who have a Ph.D. All faculty who are on subsidy condition received the letter of termination. There is a dispute about how much notice has to be given and the medical school administration is open to discussing that issue. When the school of medicine sued the UP, their lawyers replied that we failed to mitigate damages because we continued to pay faculty. If we had stopped paying them, the damages would not be $20 million. The school of medicine suspended the termination letter based on feedback from the faculty that one month was not enough time. They extended it to the first of the year at which time they will determine a date.

In Wayne Pediatricians the medical school is trying to create a practice plan that serves the needs of families in the community in a holistic way, meaning that they need to screen children for adverse childhood experiences, social determinants of health such as food insecurity and homelessness. Some children have many challenges. It is not adequate to document the problems and provide medical care. The medical practitioner's role needs to be expanded. They are designing that type of practice.

Dr. Gray took questions from the floor.

Ms. Bock asked how the situation was affecting the education of medical students and residents. The clinicians are teachers. She noted that Children's Hospital could give the residency lines to Central Michigan or to another institution. Some of the faculty are funded researchers involved in clinical trials and other forms of research. Dr. Gray said that the administration is very concerned about the impact on students. Wayne State has about 300 medical students per year, one of the largest classes in the country. It is a big challenge to find placements for all the students. If University Pediatricians or the DMC decided not to place students in their hospital, although there is an agreement in place between the university and the DMC to teach students in the clinical setting, we would have a major problem. The administration is aggressively trying to identify ambulatory settings to place the students. Henry Ford Health System takes about 115 of our students but they don't take them for the entire pediatric experience. St. John Hospital takes 40 or 50 students. All medical students have a rotation in pediatrics. Regarding research, the UP has 220 or 230 members, which is a violation of their agreement with the university. No more than 10% of their members are to be non-faculty members. Many doctors in the practice plan do not do research and some do not teach. Within our faculty there are a small number who do hypothesis-based research and a modest number who do clinical trials, mostly pharmaceutical. It is likely that the medical school will offer voluntary appointments to any faculty doing clinical trials so they will be able to continue their research even if they are with University Pediatricians. The medical school doesn't want to deny cutting-edge therapy to children who could benefit from the work. The university may have to charge for the use of the IRB, but that question has not been addressed yet. The residency programs are specific to Children's Hospital, not the DMC, but they are in the same family. There is one pediatric residency program and about 12 fellowship programs. They are dependent on the categorical program. We can't have a fellowship unless we have a categorical or general pediatric program. The residents may lose because some of our faculty may not be at the hospital. It appears that UP will make every effort to lock out Wayne's pediatricians. They claim to have exclusive rights to be in the hospital. They are threatening to open up the medical staff which means that if you meet the objective criteria to be medical staff you are accepted and the only way you can be put out is if you violate the bylaws of the medical staff. Doctors are afraid they cannot admit their patients to the hospital. The medical school believes the UP has no legal justification to prevent our faculty from admitting patients. Dr. Gray said that a physician who is not in the UP would have to challenge them by trying to admit a patient.

Mr. Parrish raised other concerns about the medical school. Wayne State is a research one university because of the research in the medical school. Our level of funding from the National Institutes of Health has been flat for the last six years. A medical school the size of Wayne should have about 1100 clinicians. Other than pediatrics, we have about 260 clinicians. Both sides, he said, share the blame for the current problems. The leadership of the UP has done many underhanded and disastrous things, such as their changing the bylaws to expand the number of doctors in the practice plan. The former vice president for health affairs David Hefner was given the responsibility for the medical school. In August 2017 Mr. Hefner held a meeting with Dean Sobel and President Roy Wilson in which major threats were made to the UP leadership and the UP was told that if they did not sign a new agreement almost immediately they would not be paid in November. It was a heavy-handed and stupid approach. The bankruptcy of the UPG played a major role in the deterioration of the relationship between the UP and the university over Medicaid payments. Mr. Parrish believes the problems are considerable and no one has taken charge to solve them. The UP's strategy has been disastrous and the university's leadership has not been imaginative in addressing the problems. The university may drop out of the research one category because of the problems in the medical school in general.

Dr. Gray stated, as he had early in his comments, that there was plenty of blame to go around. In 2007 the Department of Pediatrics was ranked 15 or 16 in research productivity in the country. Now it is not in the top 60. It is very challenging when academic faculty are expected to be productive in seeing patients to also do research and preform in the way academic physicians should perform. Whether UP or Tenet created the environment or whether it was self-inflicted, research is not supported. Tenet has a dismal record with academic medical centers across the country. As a for-profit corporation, it is fulfilling the interests of its shareholders.

Mr. Heilbrun asked where Wayne Pediatricians would practice. Dr. Gray said the building formerly occupied by Hospice of Michigan has been purchased and is being renovated for their use as well as for use by some faculty in family medicine and internal medicine. The Wayne Pediatricians administrative office also will be housed in that building. As far as inpatient care, Dr. Gray has contacted other area hospitals about accepting our pediatric patients who do not need the expertise of a children's hospital.

Asked if University Pediatricians controls the privileges of the pediatricians, Dr. Gray said that the chair of the department and the chief of pediatrics in the hospital are part of the process but they do not control the process. It has to be a medical staff controlled process. The process is controlled by regulations of the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

The Senate thanked Dr. Gray for his report.

IV. REPORT FROM THE SENATE PRESIDENT

A. Report and Announcements

Ms. Beale thanked the members of the Senate who accept nomination to the various committees, in addition to the Senate's standing committees, which are set up in the course of the year and those who serve on them. Such participation is very important for shared governance. The Policy Committee, the Provost, and Ms. Beale appreciate members who are willing to serve.

Ms. Beale provided some background information about the message that Kim Trent, the chair of the Board of Governors, sent to the university community on November 5. An October 23 media event heralded the university's announcement of a new scholarship program called the Heart of Detroit. The full Board was not informed about the program until just before the event. (Nor was any information shared with the Senate Policy Committee before the announcement.) The Board's secretary sent an email to arrange a special session of the Board, which was eventually held after another committee meeting on November 4. Seven of the eight Board members were present; one member was out of the country. At that meeting a motion was made to terminate President Wilson's contract and passed by four Board members. The other Board members in attendance and President Wilson have treated the vote as illegitimate.

This is in the context of a court case filed by four Board members claiming that actions taken at the June 21 Board meeting were illegitimate. At that time, four members of the Board boycotted the meeting in order to prevent their being a quorum. Chair Kim Trent and three Board members (Brian Barnhill, Mark Gaffney, and Marilyn Kelly) claimed that there was a quorum present by counting the President, who is a non-voting ex-officio member of the Board, for that purpose, even though he could not vote on any of the matters before the Board. That case is still in the courts.

These are exceptionally difficult times, when there is uncertainty about the university's leadership and a continuing schism on the Board regarding the competency of the President. Ms. Beale said that the university community must soldier on. Whatever the result, we have to work together and continue to advocate for stronger shared governance. In some cases, the administration has not been as open to the faculty and staff perspective as it should be. This is reflected in our academic freedom memo and the general lack of response from President Wilson to the audit process problems and our censure motions. We will continue to work with students and the community and engage with our colleagues. The controversy in the administration has been reported in the national news outlets which means we have to make an extra effort to do our jobs well.

B. Proceedings of the Policy Committee

The Senate members received the Proceedings of the Policy Committee meetings of September 30, October 7, October 14, and October 21 (Appendix A).

The primary issue on September 30 was meeting with Dean of Education Anita Welch. On October 7 Stuart Baum, the President of the Student Senate, met with the committee and discussed a number of projects they want to pursue. On October 14 Policy Committee discussed with Vice President for Computing and Information Technology and Chief Information Officer Daren Hubbard the formation of a committee to revise University Policy 00-1 Acceptable Use of Information Technology Resources, in response to the censure motion passed at the Oct. 2 meeting. Policy Committee will select three faculty/academic staff to serve and Mr. Hubbard will select three persons to serve. On October 21, Policy Committee discussed the student evaluation of teaching and the work of the 3N SET Committee. The committee has representatives from the AAUP-AFT and the Union of Part-time Faculty and thus was not in a position to conduct actual negotiations with the administration. Policy Committee discussed ongoing issues with the SET and the continuing problems with bias in teaching evaluations. We noted particular concern about the creation of an online SET process for regular courses, countering the decision that was made a few years ago about that issue.

V. <u>REPORT FROM THE CHAIR</u>:

Provost Whitfield commented on Ms. Beale's remarks about academic governance and how much the administration listens or includes or considers the voice of the faculty and academic staff. In his short time at Wayne State, the Provost thinks the inclusion of the faculty voice has improved. It is not as good as it should be, and he admitted that sometimes he has not included the appropriate number of faculty or has not solicited enough of their voice but that has changed. Under the leadership of the Academic Senate and the AAUP-AFT as well as individual members of the faculty and academic staff that is changing. The Provost noted his commitment to insuring that it will continue to improve. He reminds his colleagues to include faculty in making decisions and taking action. The faculty and academic staff do matter and we need their voice in decision-making.

The Office for Teaching and Learning held an open house recently showcasing some new activities. Provost Whitfield particularly liked the One Button Studio that allows faculty who teach online to create high quality content for courses to provide really good material from a lighted white board to being able to use one button and be able to create content.

The first meeting of the committee that will review the College of Nursing was held today. Dr. Rayman Mohamed, Chair of the Department of Urban Studies and Planning, is chairing the review committee. The report is due in early spring.

The director of the Labor@Wayne program resigned that position. The Provost worked with the program's internal advisory board to appoint Gayle Hamilton as Interim Director until a permanent director is appointed. A decision has not been made if there will be a local or national search. The change in leadership is an opportunity to move in a new direction that builds on the existing foundation but takes into account the directions in which areas or disciplines of study are moving. In the spring the Provost plans to meet with both the internal and external advisory boards.

VI. <u>NEW BUSINESS</u>

There was no new business.

<u>ADJOURNMENT</u>: The meeting adjourned at 3:27 p.m.

Respectfully submitted,

Linda M. Beale

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President, Academic Senate