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Minutes of the Regular Meeting of the Academic Council

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The Academic Council met in regular monthly session from 3:45 -4:50 p.m. on Thursday, December 6, 2001 in 139 Social Science Building with Professor Peter **Burian** (Humanities) presiding.

MINUTES

The **Chair** asked for and received a motion and second to approve the Minutes of the meeting of November 15. They were **approved** by voice vote as submitted.

Wishing everyone present and their families wonderful holidays, the **Chair** moved to the first order of business, namely to continue with the discussion of the changes in post-retirement medical benefits. There would be a vote on these changes at the conclusion of the discussion. The wording of the motion, proposed by ECAC, would be distributed among the audience. He invited Professor Tom **Metzloff** (Chair, Faculty Compensation Committee) to come forward and lead the discussion.

Professor **Metzloff**, in order to bring everyone up to speed, reiterated that the discussion last time turned on the suggestion that the Council recommend to the administration to modify current rules such that if any current employee who, as of January 1, 2002, met a new test where their years of service at Duke plus their age equaled 75 or more, hopefully 10, 15, 20 years after as long as they would like to stay and keep working, they would get the same benefit that current retirees would get which was Duke paying 80% of the post-retirement medical benefits and the employee, then retired, paying 20%. It was his understanding that this was acceptable and that the change had been made and would be part of the policy. The FCC had been experimenting with various options and stages and broadened out the intermediate category that acknowledge those nearest to retirement but eventually settled on only one, the "rule of 60" group. This solution was even better than the extra category FCC contemplated, and they welcomed it, although with regret that they had to make any change at all. This did not affect at all the medical benefits and the university's contributions for those who were still working at the university. The change for those now retired and those very close to retiring would be a very modest 5% increase in the share of their part of the premium, with the current dollars something less than

\$10/month. What was down the road no one knew, since one had to think about accruing future medical benefits 10-20-30 years out it became very problematic. He would be glad to take more questions.

The **Chair** pointed out that Clint Davidson, the Vice President for Human Resources and Lois Ann Green (Director of the Benefits Administration) who was directly responsible for this and other programs had kindly agreed to be present as well and to take questions.

Professor Curt **Richardson** (NSEES) wished to hear exactly what changes had been agreed on, since the motion did not state that.

Peter **Burian** said this was so because the material was presented the last time but it would be easy enough to ask Tom Metzloff to explain precisely what the changes were.

Tom **Metzloff** said the change was with respect to post-retirement medical benefits. At the moment the first question was who was eligible to get post-retirement medical benefits. If one were to work at Duke for one week when you were 50 years old one wouldn't be entitled to it. The current rule for whether one was entitled at all to post-retirement medical benefits was the rule of 75. Upon retirement, one looked at the number of years of service at Duke and one's age. If it was greater than 75, one was eligible for whatever the benefit was. That didn't change. That was still the trigger for any entitlement to post retirement benefit. For someone who was retired and met that rule of 75 the individual paid 15% of the medical care benefit and Duke paid 85%. The problem was the need to accrue so much money upwards of \$25-30 M a year to cause a fairly large reserve on the university's books. The change would be for those people who were now retired to move from a 15% to a 20% payment. The university's share went down from 85% to 80%. As of January 1, 2002 there were going to be two intermediate categories. If one met a test of years of service plus age that added up to 75 or more, that person was going to be treated the same as current retirees, i.e. to make a 20% contribution, whenever one retired 10-15 years from now. If one met the new rule of 60, so that one's years of service plus age as of January 1, 2002 was 60, the individual would come into a middle category where one would pay 30% of the medical benefits upon retiring and the university would pay 70%. For those who didn't get up to 60 as of January 1, 2002 or anybody hired from now on, it would go to 40%. So upon retirement, assuming one was otherwise eligible, one would pay 40% of the medical benefit. The university would still pay the majority or 60%.

VOTE ON RESOLUTION TO CHANGE POST-RETIREMENT MEDICAL BENEFITS

Since the question had been called and since there was no further discussion, the **Chair** asked for a vote on the following resolution

which, having come from ECAC, didn't require a second: "The Academic Council accepts with regret the need for a prospective alteration in the Duke share of the cost of employee post-retirement medical benefits. We commend the Faculty Compensation Committee for its diligence in working to minimize the negative consequences of this change, and the administration for the strong spirit of cooperation and its willingness to accept the amendment of the proposal made at the Academic Council meeting of November 15, 2001." The motion **passed** unanimously by acclamation.

PROPOSAL FOR AN ACCELERATED B.S. DEGREE IN NURSING

The **Chair**, turning to the next item of business, introduced Deans Mary Champagne and Terris Kennedy from the School of Nursing to present a proposal for an accelerated Bachelor of Science degree in Nursing.

Dean Mary **Champagne** began by saying that she had come to present on behalf of the faculty of the School of Nursing at Duke their proposal for an accelerated second Bachelors degree in Nursing. In brief, this program was a 4 semester, 16 month long program of full-time study. The intent was to admit 40 students every fall and the aim was quite simple - to educate clinical nurse leaders who would provide care for patients in Duke's health system and beyond. She explained that the rationale for such a program at Duke today was based on a current shortage of nurses nationwide; by all projections this shortage was going to become worse in the future, and it was unlike any shortages in the past. It was not cyclical and there didn't seem to be any easy solution. The shortage had both demand and supply components. On the demand side everyone knew that there was an aging population, and with the proportion of the elderly increasing the use of health care also increased, both inpatient and outpatient. With that increase came a need for greater nursing care. There was also an increased use of technology in the hospital. More hospital patients were acutely ill and this high level of acuity required a greater intensity of nursing care. If one held the number of patients in hospitals steady within the next 20 years, the need for nurses would increase 36% simply because the care required by those patients and the technology were becoming so much more complex. There were also increased needs in home care and nursing homes and long term care facilities. According to numbers released by the U.S. Bureau of Labor Statistics, nursing was one of the top ten fastest growing professions. It was projected to increase 22% by the year 2008 with 400,000 new jobs created.

On the supply side of the issue, she noted a couple of statistics that were pertinent. First of all the nursing work force was aging. The average age of a nurse right now was 44.3 years and it was projected that in the next 15 years half the nursing work force would retire. Enrollments in schools of nursing were declining.

There weren't people coming in to make up for those who were retiring. In baccalaureate programs alone the enrollments over the last 5 years had declined about 20%. Duke's own health system had 300 vacancies. That meant some beds had to be closed. Some patients couldn't be cared for to say nothing of the financial loss involved. It also meant that the nurses that worked in the hospital were working too hard and sometimes burning out and unable to give the kind of care that patients deserved and the nurses wished to provide. Hence, from a numbers perspective, by 2020 they would have 20% fewer nurses than needed. It wasn't just a question of numbers, however, but also the kind of nursing that was needed. Looking at reports from very diverse groups, namely the Pew Foundation, the National Advisory Council on Nursing, a federal group, and their own North Carolina Center for Nursing, it was clear that the call was for nurses prepared at the baccalaureate level, these were the kinds of nurses needed for today's complex health care system. Nurses who were critical thinkers and problem solvers, nurses who could communicate and manage care, nurses who could lead others, nurses who understood diverse populations and culturally competent care, nurses who were well educated, technically competent and compassionate. At Duke that kind of nurse could be produced as was clear from the proposed program. It was a very innovative program. It tapped a new pool of potential students - students that already had a bachelors degree, perhaps in English, History or Biology, and after graduation weren't sure what career they wanted or perhaps they wanted to change careers. There were a handful of programs that offered this kind of accelerated second bachelor's degree. Two were Hopkins and Creighton. They had spent a lot of time talking with them and getting data from them. These universities reported high selectivity of students, high yield, they were oversubscribed. The students were mature learners, they did well, and when they graduated, their employers rated them better than graduates of traditional baccalaureate programs. Duke expected the same composite of students. They hadn't advertised at all because they needed Council approval, but they had already had over 200 inquiries from potential applicants.

In terms of distinctive characteristics she explained that Duke was looking to provide clinical leaders in nursing that would provide care. They had incorporated the best of the old system. In the old days, nurses really used to be closely linked with hospitals and with health systems. The program was going to be very strong clinically, with over 1000 clinical hours, which was double that of most baccalaureate programs. They were going to have clinical faculty that held positions in the hospital. The program also brought in the best of the new. The curriculum's foundation was based on evidence based care, so that students were always thinking of the effectiveness of a given care or given treatment that brought good outcomes to patients. The didactic portion of the program used problem based learning so that students would be constantly critically thinking about clinical situations, not just

about the kind of medical care, but about the ethics, the social meaning of what was happening, and the legal components. They were investing heavily in a clinical skills lab and simulation center. They had received some substantial funding from the Fuld Foundation and this lab was a place where students could practice complex care and gain confidence and learn to practice safely. Finally, the program included opportunity for educational advancement. Within the credit hours there were fifteen graduate credits where the students would mix with their graduate students.

Regarding the curriculum, she thought there were a couple of other things Council members probably needed to know. One was that the curriculum would meet all requirements of the state. The North Carolina State Board of Nursing had to approve the curriculum. They had approved the plan and they would visit their school in February. Second, they would apply for national accreditation through the Commission on Collegiate Nursing Education and they would visit Duke in February of 2003. There may be some questions as to whether this program would affect other undergraduate programs at Duke. It was a program of the School of Nursing and the Medical Center. It would not in any way affect undergraduate admissions at Duke. It wouldn't affect the use of undergraduate resources, such as housing or admissions services and so forth. It would, however, enhance the School of Nursing and the Medical Center. In sum, they thought they had a very innovative program that responded to a real need locally, as well as nationally, and that was an academically and clinically rigorous program. She would welcome any questions.

Professor **Burian** thanked the presenter and pointed out that Russel Kaufman, Dean of Medical Education was present for any questions that he could answer.

Professor Kenneth **Knoerr** (NSEES) commented that this university got rid of the nursing program twenty years ago and now the Medical School thought that nursing was a worthwhile profession. He had heard over the years and from different people that one reason why the nurses were leaving nursing, even though they were still at a productive age, was that they were being overworked, and he wondered to what extent the medical profession had created the problem by basically doing these things: overworking the nurses and not giving them the opportunity to do the things they were able to do.

Mary **Champagne** thought this a very complex situation and Russ [Kaufman] could talk about the Balanced Budget Act of 1997, which really had made fiscal problems for health care systems. They had a couple of options. They could either be proactive and join their colleagues in the health professions and say, they thought they had an innovative way to help solve this problem, and it was a bigger problem than just education, and they were working on that [or do

nothing]. So, to answer his question, they were not looking back. They knew there were problems that needed to be solved. She asked Dean Kaufman if he wanted to make a comment.

Russel **Kaufman** said that he'd be glad to. He explained that the solution that they were applying now was to the existing problems now. What happened in medicine in the last fifteen years was that first of all managed care came in, and was moving at a pace far faster than medical centers moved, which was faster than at most of the other academic institutions, because medical centers tended to move relatively slowly, and they couldn't change fast enough to keep up with the economic challenges that they had. And then the balanced budget act came along and really drove a stake in their heart as they were trying to accommodate these other financial challenges of managed care. But the issue was that this was one solution, and he thought that there was probably another way to think about it, namely what Mary was proposing, preparing people who were going to be leaders. The way care would be delivered, i.e how all of their health care providers would be used, was going to change. Presently, they were in a roughly stable period of time to be able to think about how they used their health care providers. They would probably develop new models and part of this would be [to answer the question] 'who's going to provide the care and the kind of health care providers [needed].' So, he would just say that from the Medical Center's point of view, Mary had done a tremendous job of not only enhancing the reputation and the stature of her school but also of preparing this proposal and it took some courage and vision to do this. And this proposal had been reviewed extensively by all the senior leadership as well as all the department chairs and the center directors and everyone in the Medical Center fully supported this proposal, and supported it beyond just words and would provide the resources it took to make sure that this was successful.

Mary **Champagne** added that one of the things that they had learned from the Balanced Budget Act was that cutting nursing positions didn't work and now they had to go forward and try to remedy it.

Professor James **Crenshaw** (Divinity) wanted to ask a question about interest in this. He noticed the disparity between the [numbers] in the report and her comments, whether, in fact, inquiries had doubled in two months.

Terris **Kennedy** (School of Nursing) interjected that it was over 200 now. It [changed] daily.

Professor Curt **Richardson** (NSEES) asked how this accelerated program compared to a normal program, he was not familiar with the nursing curriculum. It covered 75% of the material, and he asked if there were special courses or accelerated courses, he saw there was a summer session. He wanted to know what the comparison was,

just to give him some general idea.

Mary **Champagne** replied that the program covered what was covered in a traditional baccalaureate program but in a different way, in the sense of more interactive learning. It took some of the courses that might be taught in the traditional undergraduate program to a graduate level, so that was a little different. The other thing that was really quite different was that there really was an intense focus on clinical application. So it was all there and then some, but it was just done differently. Their sense was that having completed a bachelor's degree, these people were going to come to them as much more mature adult learners with really a solid background in the sciences.

Professor Craufurd **Goodwin** (Social Sciences) commented that one of the points that was made in the discussion twenty years ago when the old nursing program was brought down, was that this was a program with very low salaries for nurses and somehow the institutions in the medical world didn't permit these salaries to increase and solve this problem of shortage which they were talking about here. He asked if that had changed.

Mary **Champagne** said that she needed to equivocate. In the '80s there was a significant increase in salaries. In the '90s, when managed care came in and the Balanced Budget Act came, the salaries flattened. So, an entry salary of around \$38,000 wasn't great, not for the level of responsibility that the nurses had today. She always thought about the neonatal care unit. If one went in one today, one would find a bank of computers that measured every function one could think about. There was a bank of IVs dripping all sorts of [intravenously] active drugs, and there was a little tiny baby and a family. It was really a lot of responsibility. The good news was that as nurses assumed additional responsibilities, and particularly if they came back and completed their master's degree— and they really fully believed that a significant proportion of these students would— with a third of their coursework already done, then their salaries became very respectable, around \$60,000 and up. But they did need to work on the base salary. It was a concern.

Roger **McClendon** (Medical Center) asked if there was an existing bachelors of science degree in nursing already place or just a master's degree program. The reply was that there was none but that their MS was a great program. The fact that they didn't have a bachelor's program had in many ways been liberating, because they were able to bring in the right people to help them think broadly and differently and create a really innovative program for the 21st century.

Profesor David **Sanford** (Humanities) asked whether some of these students would sort of live together in a cohort or on their own

like graduate students.

Mary **Champagne** responded that it was pretty clear that they were going to be a really cohesive group because they would go through the program together and they would spend a lot of time together. They hadn't gotten as far as trying to say they recommended students live here or there. They were adults and in many ways they would probably be like graduate students. They had had some discussions as to whether or not there might be areas they recommended that as they came to Duke they'd look so they might be a group, but they really hadn't acted on that yet.

Susan **Denman** (Nursing) wanted to make a couple of comments about the faculty perspective on this program. They had been heavily involved as a graduate faculty group in the development and input of these courses, and as folks who had taught graduate students for many years, they were extremely excited about the kind of leaders that this program would produce. They believed that a strong clinical program that produced strong leadership was what nursing needed to go into the next millennium and that was the package they really wanted to see and that was [being offered here].

Professor Tom **Spragens** (Social Sciences) prefaced his question by reminding everyone that when the baccalaureate nursing program terminated years ago, one of the principal reasons for this was that the relevant applicant pool was declining because the students who had the academic capabilities to succeed at a place like Duke or seek out a place like Duke and to pay for a place like Duke were going into other professions and then since the Duke program had been started there were more baccalaureate and associate degree programs in nursing where people could go more cheaply. Now, these people who had already completed a bachelor's degree and would then do even more work where were they coming from. He wondered what had changed in the twenty years that now was going to provide that quality pool.

Mary **Champagne** said she thought the reason for the presence of an applicant pool even intuitively beyond the data they had gotten from Creighton and Hopkins and a couple of other private schools like Duke was that [they had] oversubscribed programs. Students now often went to college without knowing what they wanted to be. Then they majored in a field such as English or History or Biology, but when they graduated there was not a position for them and they had to think about what they wanted to do. One option was nursing. It seemed to be attractive to a significant number of applicants. They thought they would recruit those applicants with the idea that this was the beginning of a career- long profession that had progression, promotion, and a wide variety of opportunities. So it was a different pool. It was not an eighteen year old pool.

VOTE ON ACCELERATED B.S. DEGREE IN NURSING

As there seemed to be no further comments and questions and as the **Chair** had heard nothing to suggest problems with the proposal or suggestions for any changes, he asked if Council was prepared to vote on the proposal now even though ordinarily this would be regarded as a two-meeting issue. He thought it would be nice to be able to finish this business during this calendar year and permit the School to go on with its planning process. He then heard a motion to do so. Thinking that this might be the case, he had prepared a brief motion (Laughter):

"The Academic Council, convinced of the soundness of the accelerated bachelor of science degree program proposed by the School of Nursing and cognizant that it has received the endorsement of the Academic Priorities Committee, the Dean of the School of Medicine, and the Provost, endorses the proposal."

Since he was making the motion himself rather than on behalf of ECAC, he needed and received a second. The motion **passed** unanimously by voice vote.

ANNUAL REPORT ON THE RESULTS OF THE A.P.T. PROCESS

The **Chair** now proceeded to the last item of business, the Provost's report on the APT process in the year just past, to be heard in open session.

The **Provost** began by saying that what might be called the Knoerr introduction, he was in his 56th year, and his 21st year of service at Duke, and it was his pleasure to introduce this proposal today, since he had definitely met the rule of 75. (Laughter) He said that he really had nothing remarkable to report this year. As people knew, since he became provost they had been working to try to make the tenure process viewed as a long term process. They had the review committee think of tenure as being a process which began the day that one entered the university and carried through the full career. They had also been seeking to increase the awareness of the role that the departments and the deans played in the process and to push as much of the substantive decision making down in the process to those who had the highest level of awareness and understanding of the strengths and weaknesses in the case, so that the role of the APT committee was really one of oversight and of ensuring the integrity of the process but with much of the decision made by those who had the highest rating of expertise. He believed this was having its effects and they were doing rather well. Members also knew that they had instituted some changes and procedures for this year through the review committee process, and they were already showing effects on the committee this year. One of these was the rule of reasonableness that was proposed and which was working very well and they had been able to accelerate the treatment of cases that were very clear and essentially didn't raise any questions. Before going to the details of the report, he

wanted to publicly acknowledge the excellent service of members of the committee. This was a very hard working committee. It met weekly, effectively most of the year even into June very often and the committee members also needed to spend a good deal of time reading the files and preparing for each week's meetings. And he'd like to publicly acknowledge Fred Nijhout who was the chair last year for his service. Fred had now stepped down and immediately went onto ECAC which he found mind boggling (Laughter). He also wanted to acknowledge the superb assistance to the committee, that the committee and he received from Jeane Bross, and Robert Russell, who worked in the office and kept what was an amazingly detailed process moving forward so that everyone felt a great deal of confidence that what they were seeing was what they were supposed to be seeing.

Turning to the data projected on the screen, Provost **Lange** explained that he would comment on the meaning of the data presented by way of a synopsis of a given category. Basically, his data provided detailed information on the annual number, the annual results, and the two-year average of internal tenure reviews, internal advancement to full rank and external recruitment with tenure. It was important to understand that APT was a 13 member committee. In order for there to be a decisive vote either up or down, seven of the members needed to vote either favorably or negatively so there was a category called the non-definitive vote, which would be that there was either a majority in favor or against but did not have the seven votes to be an absolute majority. Commenting on the various sub-categories for each of the major three categories of promotion, he pointed out that they had had about 28 eligible cases per year for promotion to tenure from within. Of those 28, about 25 reached APT. Of these, about 10% received no recommendation and another 10% had negative recommendations. It could be seen that he approved a few more cases than the committee recommended that he approve. In general, in fact in all the cases over the last two years, where there had been overrides on his part, there were factors that the committee either could not consider by the rules of the committee— that is, institutional factors, because the committee was to make a judgment only on the qualifications of the candidate and not on the institutional need or any other such factors— and on the basis of information that emerged after the committee's deliberations had been concluded. In two cases which he reviewed last year, in fact, the departments had prepared files that were inadequate, and that did not contain all the information they should have, and upon review, the departments brought forward material that should have been in the original file and was not. In both cases, the additional material referred to the level of productivity, which had been a major issue in the committee's disapproval of the candidacies.

Last year, the decisions obviously led to a high percentage of

approvals. It could be seen the committee had 74 cases last year. That was a lot of work. The chart showed that over 90% of the votes in all cases were unanimous or unanimous but one. So when the cases came to the committee, they were pretty strong. This was not an easy committee and people asked a lot of critical questions and that was significant in itself, and this was true for 83% of the internal promotion to tenure cases. So it was still a very strong process even for internal promotion and tenure. Why then did they even have this committee if these cases were so open and shut? It should be noted that of the unanimous votes, three were unanimously no and that meant there were three votes on cases which had come before a department, had received endorsement by a department, and had received endorsement by a dean. So there was a real hope for the committee.

Next, he turned to the cohort analysis, because in some ways internal promotion to tenure was the end of a seven to eight year process and what really counted, in part was how they were doing all the way along that process. His data showed the numbers for two year cohorts of entering assistant professors, hence they tracked all the assistant professors who entered in '85-'86 and '86-'87 and so on down the line. The most meaningful number would be the percentage tenured of an entering cohort. The pool of tenure eligible people was reduced by those who probably left early because they knew they were not going to make it or who were bid away, although the latter group was very small. In the last two years, 55% of those eligible in year seven of service received tenure which was slightly below the ten-year average of 57%. The Provost noted that more Assistant Professors got reappointed at the end of their first three year term than before. He speculated that in part better selection by departments at the time that people came to Duke might be responsible for this trend. There were very few cases where departments did not reappoint someone in their fourth year of service. The reappointment process had been transformed from a culling process to more of a mentoring process whereby the candidate was told 'here's the kind of progress you're making, and if you want to get tenure, here are the things that you're going to have to do in order to get tenure.' To summarize his view of the internal cases of promotion and tenure, he would say that they were appropriately selective, and that more scrutiny was being exercised by departments and deans along the path of the standard decision as part of the tenure process. He also thought that Duke was doing a better but far from fully successful job at mentoring and giving feedback. Working with the deans to improve the information given to candidates and the feedback given to people during their period as junior professors was important. That said, they needed to remain vigilant and the Committee needed to continue its very strong role in evaluating cases carefully before tenure was granted.

Regarding internal promotions to full professor, he said that this

was an area where the process was changed this year, to bring the formal criteria more into agreement with what the Committee was actually doing. The Committee had actually been operating loosely with a rule that said one needed to have excellence in two of the areas of research, teaching, and service, and good performance in the third to be promoted to full professor in recent years. That had now formally become part of the procedures on which the Council gave broad consent when this was presented. As could be seen, there already was a high percentage of people who made it to full professor [a two-year average of 95%]. He did want to note that the criteria here were nonetheless taken quite seriously. Last year he had denied promotion to full professor in a case in which a professor had a poor teaching and service performance despite the fact that that person had had a strong research record and the Committee was entirely in agreement with that.

Concerning the last category of external recruitments with tenure, he noted that the approval rate was quite high although they did get some cases each year where they judged that the appointment was not at the quality level they would desire. Summing up, he would say the process was working fairly well although it always needed to be tweaked a little bit. They needed always to be vigilant in order to use the process to develop the best faculty possible and the APT committee and process were very important to that because they set the standard which then should be fed down to one that the units employed. Finally, it was important to assure that the process warranted the quality and types of activities on the part of their faculty which both advanced their careers and the research they were doing and [at the same time] advanced the research and teaching missions of the university. He would be happy to take questions.

Curt **Richardson** (NSEES) wanted to clear up a point about the percentages pertaining to internal promotions from Assistant to Associate Professor versus the external percentage which was slightly higher than the internal percentage. He thought it interesting that there was a higher rate of acceptance among external appointments, one didn't have the time frame to judge those individuals, one didn't know their teaching and service. He had served on APT a few years ago and knew that it was difficult to judge that.

Peter **Lange** said that first of all, the externals often had a longer record of research and these were not being brought in as associates. Most of these external hires with tenure were being brought in at the full professor level. It was a mix. Many of them were full professors and even the associates generally had been associates for two or three years so there was a record of research beyond the time [of their promotion]. There were a few cases where someone was being brought in right at the time they would be tenured at their home institution to be granted tenure here. There

had been a few such cases. Often the deans reviewed those cases with him before they even brought them forward to see whether he thought that they were likely to pass muster. So there was a little prediscussion that went on.

Professor **Richardson** said that he hadn't realized that it wasn't clear that most of them were at full versus associate [rank].

Professor Daphne **Wiggins** (Divinity) asked the Provost to speak to the gender ratio of those who didn't even come up for tenure in the first 7 years. The **Provost** replied that he had been asked that question in ECAC this morning. He actually didn't have that data right now, but would be happy to report back to the Council on that.

Professor Ruth **Grant** (Social Sciences) asked about data on people coming up for tenure early, and was told that the **Provost** hadn't separated that out. Most people who came up early and actually got to the committee for deliberation got through, but that sentence had a lot of detail hidden in it, because, for instance, it sometimes happened that the departments started a process, got letters, and said 'oh let's not do that.' Or the departments started the process, got letters, voted, the case floated up to the dean and the dean looked at it and said 'you know, you guys may have voted for this, but I think that if you take this to the APT committee it won't fly' or 'I can't support it.' So the case was stopped. Now those cases were not reflected. The only cases they were counting here were cases that came up and were deliberated by the committee. In fact, in the review of the APT process that had been done the issue of exactly what it meant to be up or out (which was the rule) was clarified. So that the up meant that the committee actually deliberated one's case. So anybody who started that process, but did not reach committee deliberation was not considered in the process, even from this point of view. Therefore, there was a very high return of those who got all the way through.

Professor Joel **Huber** (Fuqua) asked for clarification on the times and process where strategic considerations were allowed and when they were not and a little of the thinking about that.

Provost **Lange** wanted first to reflect on the formal part of that and then a little bit on the practice. In terms of the formal part, the APT committee did not consider strategic and institutional reasons for internal promotions to tenure, because there was a tenure track system. To take a slightly gross example one could not hire someone to do a certain thing and say 7 years later 'oh, you know, this person has done a great job at that but we've decided we don't want that anymore.' So that consideration could not be done either by the Committee or by the Provost. The department and the dean under the new rules could make a

recommendation with respect to institutional importance, but that could only come to him. It did not come to the committee. It was a separate letter which was forwarded. Regarding internal promotions to full and external appointments, the department and the dean— and it often happened in discussion with the Committee— could bring forward strategic considerations and that was especially important for external appointments. With respect to the practice, he would say that those kinds of considerations would come in only at the margins. So a person had to have a pretty strong record before institutional reasons would be enough to tip the case, and they couldn't tip it negatively for internal promotions to tenure. At the departmental level it was really within the dean's purview to make sure that departments did not reject candidates on institutional or strategic grounds.

Professor **Huber** continued his dialogue, by adding that therefore in a report to a department might suggest that a subcommittee might be formed to consider the usefulness of this person or that person's field within the strategy of the school. Now that struck him as having often a strategic component to it. "Were such reports not to be?" It would be better if those were not in the committee reports in terms of the APT committee, Peter **Lange** replied. They were not considered. However, all documents that were prepared with respect to a case came forward to the APT committee. The report that came forward from the review committee was not supposed to be altered at the departmental level, excepting little editorial changes. One of the things that was nice in the process was that there were multiple independent stages of judgment. There was the review committee. There was the department. There was the chair. There was the dean. There was the APT committee. There was a provost. Each one of those was supposed to be a process which was treated in a somewhat independent way.

Professor John **Staddon** (Natural Sciences) asked if the Provost could give examples of the considerations being talked about in strategic considerations.

Peter **Lange** used the example of an outside appointment. They might say 'look this person is strong but they are also incredibly important for this area. We need leadership in this area. We have 3 assistant professors in this area. We need senior leadership because this is an area of high strategic importance to the department and this is the best senior leader we can get for this position.' That might be an example. Or this person (internal appointment) was playing an incredibly important role in the department in terms of the intellectual cohesion of the department. Their research record wasn't that great, but their teaching and service were excellent and they were playing an incredibly important role in how this department held together. So the department would suggest this person be promoted to full professor even though maybe everything in the record when taken together

(research, teaching, service) didn't quite look as compelling as it might. The questioner thought the reply very helpful and added that intellectual reasons to do with interactions with other people perhaps made the group more effective.

Joel **Huber** asked whether the Provost's example was not one where people would be made more effective, adding that it sounded like service. The last one would be a form of service although it was not formal service was the **Provost's** reply. One knew that such people were often not serving on all these committees. They went to a lot of seminars, provided a lot of cohesion. This was one of those things like pornography. One didn't know how to define it, but one knew it when one saw it, and that was a Supreme Court Justice who said that. "Right, Bob [Mosteller]? I suddenly realized I was out on a limb here and make sure I had my legal person." [Laughter]

The **Chair** at that point said that he was letting Council out early and to remember this next year when he kept them late. Wishing everyone happy holidays, he asked for and received a motion to adjourn.

Submitted for consideration by the Academic Council,

A. Tilo Alt
Faculty Secretary