## **BHS Town Hall Meeting**

June 7, 2022



#### Agenda

- Dean's Update Dean Chelmow
- Merit Raise Dr. Ripley
- Effort Standardization and Teaching/Research-Compensation -Dean Chelmow and the Chairs
- Next steps and ways to engage
- Questions and Answer



#### Merit Raise Update

- Awaiting final state budget
- Start date to be determined
- State budget includes proposed additional merit raise next year
- For T&R faculty in BHS and clinical departments plan (2021 evaluations):
  - Excellent- 5%
  - Very good- 4%
  - Satisfactory- 3%



# Effort Standardization and Teaching/Research- Compensation Current State

- No standards/expectations for T and R Faculty:
  - Effort allocation
  - Budget allocation
  - Allocation/expectations different by
    - SOM departments
    - VCU allied health school
  - Salary adjustment (other than state mandated)



### BHS Realignment: Where are we?



## Why now?

- Many institutions already do this
  - Maximize use of resources to enhance education and research
- Fixed pool of \$ for academics
- Pool is challenged

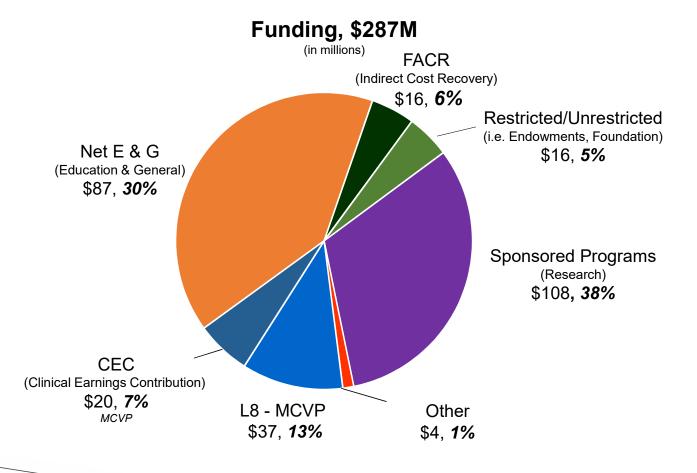


#### SOM finances – Crash course

- Where the pool comes from
- What pool is used for
- Institutional cost of funded research

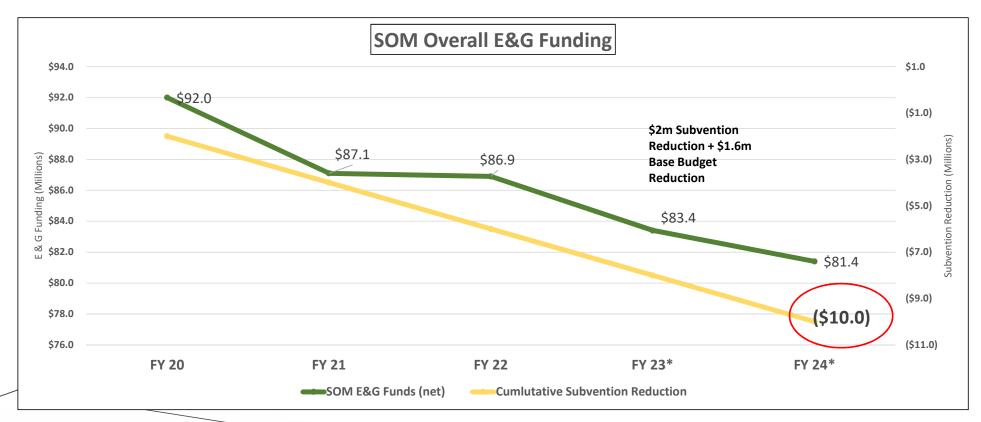


#### FY22 Revenue – All Sources



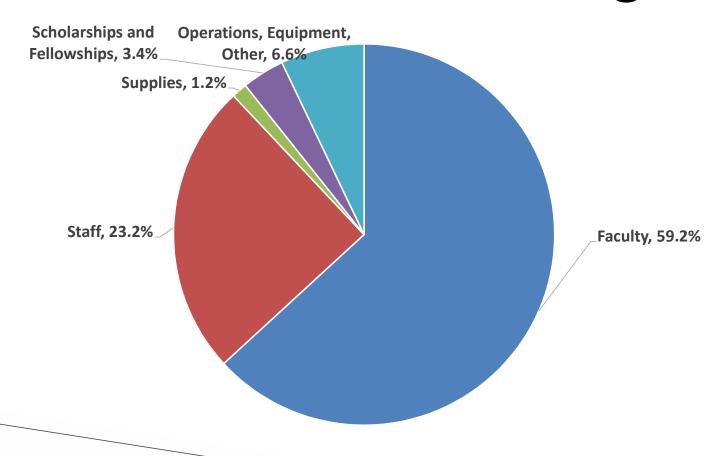


## SOM Reduction in E & G Funding





### E & G – Where does it go?





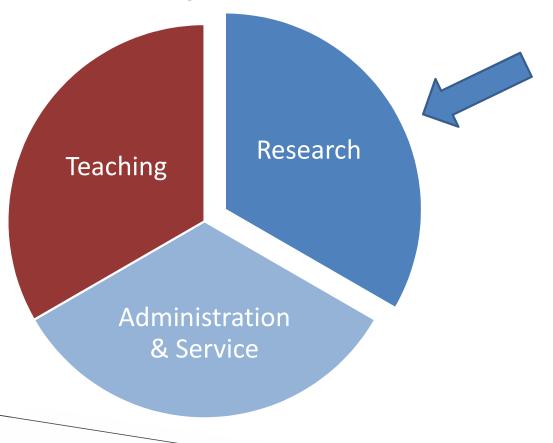
## Institutional cost of doing research



- \$.53 university per \$1 funded research (direct and indirect cost)
- What this money is spent on
  - Start up funds
  - Pilot projects
  - Time to write grants
  - Bridge funding
  - Personnel costs
  - Grants and contracts accounting
  - IRB, IACUC
  - Shared resources



## Impact of Revenue Change



Limited total \$ to cover all things not covered externally

- Start up funds
- Pilot projects
- Time to write grants
- Bridge funding
- Personnel costs
- Grants and contracts accounting
- IRB, IACUC
- Shared resources



#### Goals

- Be good steward of resources
  - Stretch pool to do as much research / education as possible
  - Retain great faculty
- Set standards and expectations
  - Ensure equity
  - Clarify expectations
  - Individual and department accountability
  - Align with Quest 2025 and Strategic Research Plans
- Expectations and guidelines
  - Apply to all T/R faculty (In clinical depts 103 + In BHS depts 162)
  - Simple and easy to understand
  - Effort aligns with time and funding



#### **Guiding Principle**

A fair and equitable standard expectation and compensation guidelines for all teaching and research faculty that reflects our mission and values and recognizes excellence in all aspects of our work.



## Institutional Imperative









What it is: A chance for all teaching and research faculty, chairs, and dean to establish standard expectations for faculty and salary guidelines that recognizes success, supports fair market salaries for meeting expectations, and provides the ability to allocate resources appropriately.

#### What it is not:

- Predetermined guidelines
- An already developed set of expectations
- A salary cut

#### What it will take:

- A focused effort for this work on the standard expectations for faculty and salary expectations
- Faculty, Chairs, and Deans working together to determine expectations and guidelines
- Faculty engaging and responding to requests for information and review of proposals
- Realistic consideration of resources and effort



## 3 Steps

 Define consistent effort expectations for all missions

Step 1
Expectations

Step 2
Compensation Guidelines

 Determine consistent and fair salary guidelines  Develop realistic phase in plan and safeguards

Step 3
Phase in



#### Process: How Do We Get There?

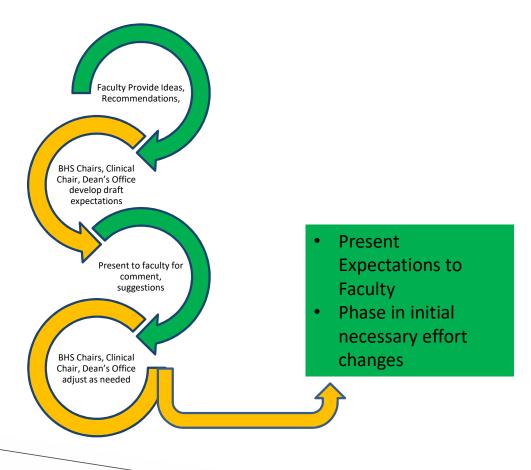


## Development process principles

- Faculty input at each stage
- Review of best practices from other VCU schools and outside SOMs
- Stays on timetable
- Respects existing resources
- Understands time to write grants and bridging are necessary
- Core group of BHS and clinical chairs, and deans proposing guidelines from faculty input and then presented to faculty for comment
- Final signoff from Dean and SVP

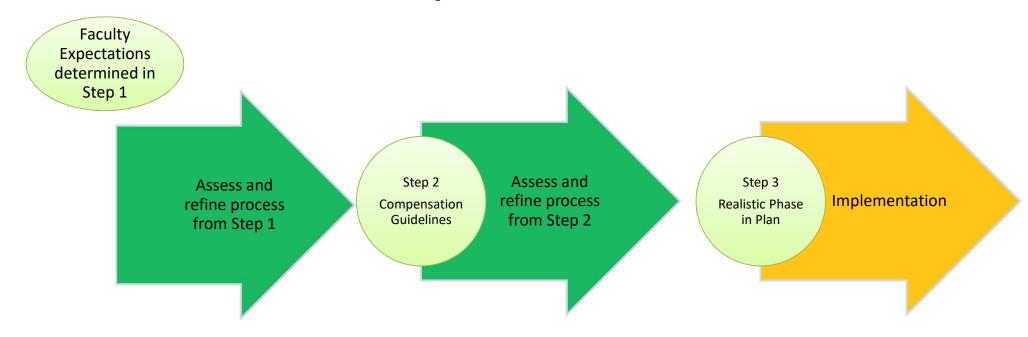


## Step 1 Developing Expectations





## Step 2 and 3



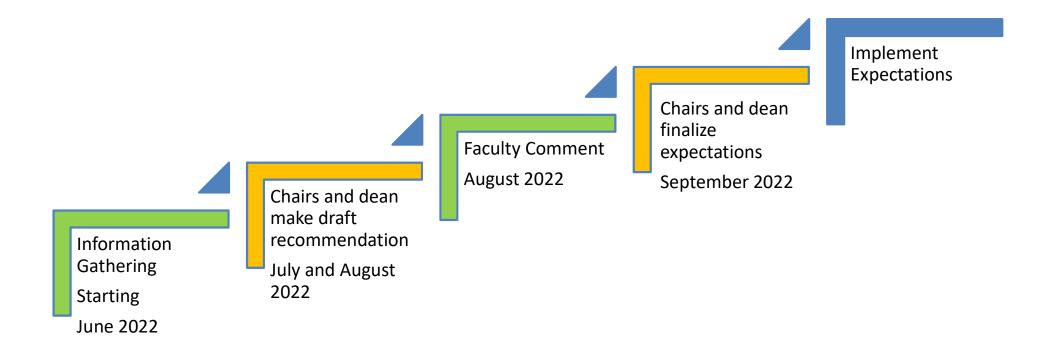


## Moving forward





#### Step 1 Milestones







#### **Engage Starting Now**





- A Redcap survey will be coming to you soon.
- Direct conversation
  - BHS faculty your chair
  - Clinical faculty Robert Findling
  - Senior Associate Deans for Faculty, Research, or Finance
- Pulse Surveys along the way



#### Q and A

- Please raise hand on zoom or enter question/ comment in chat box
- We will gather all comments and questions in chat and will address any remaining ones through the chairs





#### **Engage Starting Now**

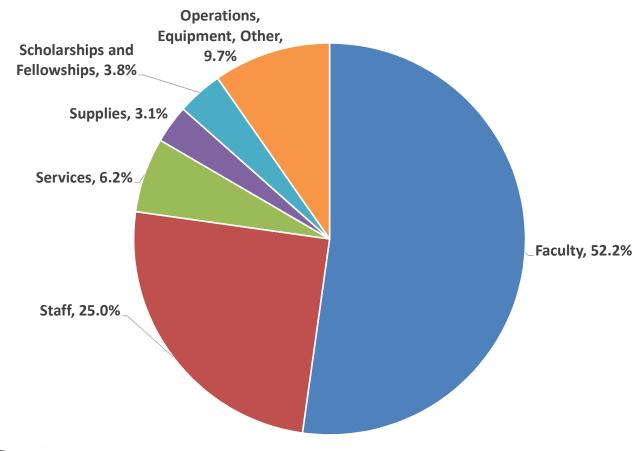




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#### FY22 – Where does the total budget money go?



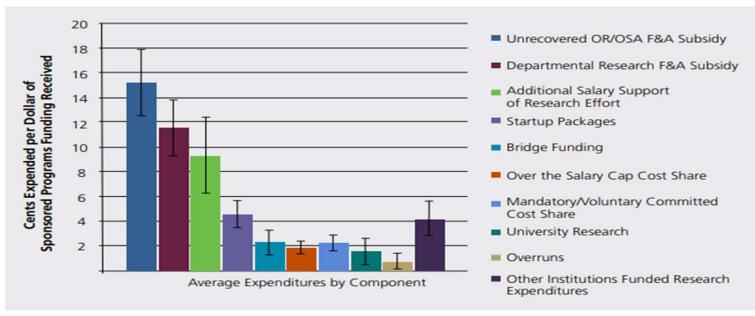


#### The Cost of Research

ACADEMIC MEDICINE INVESTMENT IN MEDICAL RESEARCH



Figure 1: Institutional Research Expenditures by Subcategory—Breakdown of the \$0.53



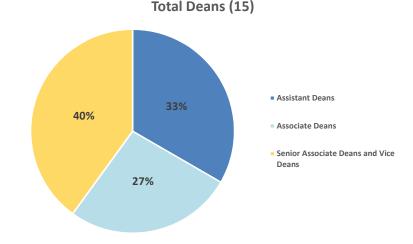




Source: AAMC Academic Medicine Investment in Medical Research – special study 2015

#### **VCU Permanent Positions**

- Current SOM employees were used as the source of this analysis.
- Based on the same categories provided by AAMC, the following output was used to benchmark SOM against AAMC data.

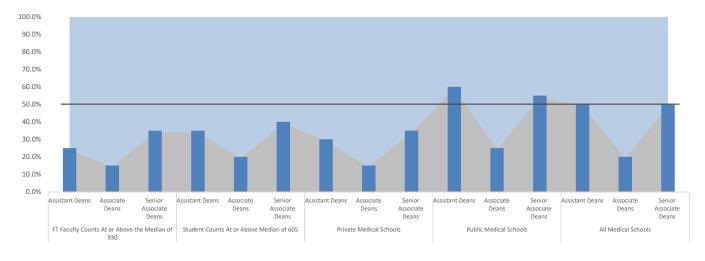


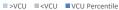
Dean Title	Faculty App.	<b>Total Deans</b>
Assistant Deans	Faculty App.	1
Associate Deans	Faculty App.	4
Senior Associate Deans	Faculty App.	4
Assistant Deans	No Faculty Appt.	4
Associate Deans	No Faculty Appt.	0
Senior Associate Deans	No Faculty Appt.	2
	Total Deans	15



#### Perm Positions Results

- SOM tends to be above the 50<sup>th</sup> percentile in its number of Assistant Deans and Senior Associate Deans, but far lower in the number of Associate Deans
- A change in 1-2 deans can change VCU's percentile in most categories by at least one or two, which suggests parity in the sample size







#### Perm Positions Results

- SOM falls in the lower percentile of medical schools regardless of category
- Based on this data, SOM does not have as top-heavy a leadership structure as most medical schools

