1.0 **Call to Order – Dr. David Johnsen**

Dr. Johnsen called the meeting to order at 12:01 p.m.

2.0 **Review, Correction, Approval or Disposition of Minutes – Dr. David Johnsen**

The minutes of the October 30, 2008 meeting were approved as distributed.

3.0 **Update on the DSB Renovation – Dr. David Johnsen**

We have been given permission to proceed by the Board of Regents. We are starting the search for a general architect from Iowa. The dean explained the procedure at the University as to how we proceed. The dean showed the individuals, committees and groups that are involved in the process, and the tentative plans for various parts of the building.

He also briefly presented some aspects of fundraising, including the groups that have been and will be approached.

4.0 **Marketing-Asst. Dean of Clinics Mike Kanellis**

Dr. Kanellis presented a synopsis of what had been discussed at the Executive Committee Retreat.

Marketing was aimed at providing an adequate patient pool to meet the educational and fiscal needs of the College of Dentistry. To do this, there is the aim of increasing awareness of patient care being provided at the College, not only by student clinicians but by faculty.

We need not only patients in general, but also those for targeted procedures.

Currently we are doing almost no marketing, so there is some concern about what would happen if there was an over-response.

Parking continues to be a concern, but it is currently prohibitively high to offer free patient parking. In as much as there is no knowledge that it will increase patient flow, it has been tabled, but individual departments may look at covering this. There is concern that patients will ask why it is provided for some and not others.

There also is a change in emphasis in tracking patient complaints from one of reaction to proaction, i.e., prevention of problems. Joan Grabin has been asked to
take over managing all complaints that involve resident and faculty practice. This will free up Ann Synan for marketing strategies, as her background and educational expertise are in marketing.

Dr. Kanellis then spoke about the early discussions involving changing to AxiUm. This will require some changes to how patient initial data is acquired and entered into the system, as it will no longer be hardcopy.

Regarding external marketing, Ann Synan has met with each department to update referral information to try to standardize across the College. She will present this at a booth at the IDA meeting in May.

The College can aid current activities by department. For example, mailing labels can be created for all dentists within a 100-mile radius, and we can provide these dentists with an easy way to get information about how to refer their patients to the College.

There were several other ideas presented, such as marketing on campus, offering a mini-forum for the public, addressing a specific topic, or radio announcements. There may be TV announcements, but these are costly. These will not be run while conducting our building campaign, to minimize political costs.

The webpage is being revamped.

There may be a change in telephone listings, putting these in directories outside the Iowa City area.

There may be some change in the dental benefits for UI faculty and staff who go to the student clinics. There may be no co-payment.

Other items were mentioned, such as Cambus advertising or advertising in movie theatres.

Some discussion ensued, especially about town and gown relationships.

5.0 Unfinished Business

5.1 Ethical Behavior and Student Code of Conduct – Drs. Michael Finkelstein and John Doering

Dr. Doering reminded the audience that the draft Code of Conduct was discussed at the last faculty meeting.

Motion: That the faculty approve the Professional and Academic Code of Conduct as stated in the Student Handbook and revised in the handout given to faculty prior to this meeting. Moved and seconded. Passed without opposition.
Discussion ensued about asking students to sign that they have read and understand the Code, and will abide by it. CAPP was in favor of this. A question was raised about faculty signing it. It was felt by some that the faculty already has such a University document. Discussion of the pros and cons of this ensued. There was a request to have it reviewed by the University Ombudsman and General Counsel before faculty sign.

Further discussion was tabled until the next meeting.

6.0 Adjournment

Dr. Johnsen adjourned the meeting at 12:59 p.m.

- Minutes by Dr. Axel Ruprecht
FACULTY MEETING
Tuesday, October 25, 2005
Minutes

1.0 Call to Order – Dr. Johnsen
Dr. Johnsen called the meeting to order. He welcomed two new faculty members to the meeting, Justine Kolker and Erin Lacey-Spector.

2.0 Review, Correction, Approval or Disposition of Minutes – Dr. Johnsen
The minutes of the April 12, 2005 meeting were approved with two corrections on page 3. Dr. Ruth Spieker’s name was misspelled, and Dr. Michael Finkelstein should be included in the list of those who met to review a revised health questionnaire.

3.0 Appointment of New Faculty Secretary – Dr. Johnsen
Dr. Johnsen recommended the appointment of Jan Swartzendruber as secretary of the faculty. There were no objections.

4.0 Announcements
4.1 Dr. Johnsen announced the following professorships and awards:
- Dr. Gerald Denehy is the Bob H. and Jerilee H. Williams Professor in Restorative Dentistry.
- Dr. Steven Levy is the Wright-Bush-Shreves Professor of Research.
- Dr. Axel Ruprecht is the Gilbert E. Lilly Professor of Diagnostic Sciences.
- We reached the goal for funding the Walton Professorship in Endodontics, and we are moving forward with the selection.
- Dr. Howard Cowen is one of ten delegates to represent Iowa at the 2005 White House Conference on Aging in Washington, D.C.
- Dr. Jane Chalmers was named the Systems Unlimited Professional of the Year Award at a celebration in August.
- Dr. Jeff Murray, who has a joint appointment in Pediatrics and Dentistry, was recently inducted into the Institute of Medicine (IOM) of the National Academies.
- Dr. Johnsen presented Dr. Gerald Denehy with the ADA Golden Apple Award for mentoring advanced students into academia.

4.2 January Faculty Meeting
Dr. Johnsen announced a change in the date for the January faculty meeting. The meeting has been moved from January 24 to January 17 due to a Hawkeye basketball game.

4.3 Building Transformation Presentation and Discussion
Dr. Johnsen presented an outline of the building transformation process. He welcomed comments/feedback.
Dr. Maze asked how comprehensive care fits into the plan. Dr. Johnsen responded that the fourth year will be comprehensive care. The task group that is assigned to design the clinic floor will be a good place to start discussions. We will need to decide whether third year students will be taught in the areas of the departments. We will ease toward this in two steps.

Dr. Ruprecht asked about the overall budget. Dr. Johnsen emphasized that $20 million is a ballpark figure for the facility, major equipment, systems, etc. It is important to determine an estimate in discussions with the university.

Dr. Doering thinks the budget is too low. He recommended checking with other institutions and considering raising the ballpark figure. Dr. Johnsen said that people have asked about what areas we plan to renovate. The major clinic areas, research areas, teaching areas, and support areas are what will drive this process. We have already spent $10 million for renovations over the last 10 years. Dr. Johnsen added that money from the University would be designated as capital expenses and must be used for that purpose.

Dr. Levy asked if we envision a bare minimum of success in maintaining workflow with ample temporary space. Dr. Johnsen responded that the migration plan could be the most complicated part of this project. There is currently no plan for this.

Dr. Johnsen looks forward to working on this project over the next five years and welcomes everyone to join in the discussions and give input.

5.0 ADEA Faculty Representative Update – Professor Cunningham-Ford
Ms. Cunningham-Ford made two brief announcements from ADEA.

1. Effective January 1, 2006, there is an opportunity for individual ADEA memberships at no charge for all faculty (full time faculty, adjunct faculty, graduate students and dental students). Our goal is for 100% of faculty belonging to the professional organization we claim as our educational home. Membership sign-up will be available online effective January 1, 2006. Dr. Doering asked why we leave it up to the individual if we want 100% participation. Dr. Johnsen did not think ADEA allows mass registration.

2. The March 2006 meeting will be a joint ADEA/AADR meeting in Orlando. In 2004, ADEA passed a resolution to waive the registration fee for new faculty within three years of their faculty appointment and attending the meeting for the first time with the hope that they would submit an abstract for the next year. Last year we sent three new faculty to the ADEA meeting. Two of the three have abstracts submitted for the meeting this year.
6.0 Faculty Case Manager Program – Dr. Kanellis

Dr. Kanellis shared an update on the Faculty Case Manager Program (FCMP). It is a program designed for the D3 students involving D2 and D3 patients. The program is intended to monitor patient care, quality of care, coordination of care, and patient satisfaction.

Dr. Kanellis noted problems with the current FCMP. It does a poor job of coordinating patient care, faculty do not assume ownership of patients, students may or may not see or treat patients, and only a few patient records are reviewed by faculty.

The proposed FCMP would have two students (instead of three) assigned to each faculty member and will meet as a team. Students would share a pool of 40 patients (20 patients each) for whom they provide most of the care. This would require twelve additional faculty members. The proposed program would allow faculty to take ownership and accountability of patients. It would also include more meetings between faculty and students.

Dr. Kanellis underscored the challenges with the proposed FCMP. It would require recruitment of additional faculty, Windent training and support for faculty, and dedicated time for faculty and student teams to meet.

Discussion followed. Dr. Khera asked if informal discussions include D2 students so they would be able to see and participate. Dr. Kanellis is in favor of pairing the D2 students with D3 or D4 students, but not as part of the FCMP right now. Dr. Khera asked how difficult it would be to bring the D2 students into this program. Dr. Kanellis did not think it would be difficult and said he would like to discuss this in more detail with Dr. Khera to work out a solution.

Dr. Huang asked what we would achieve with the proposed program. Dr. Kanellis said that we have done the past program for a number of years. There has been no formal outcomes assessment, but there have been consistent complaints by patients, faculty and students. There is no continuity of care for patients. Students do not get the opportunity to see their own work throughout the school year. While we do an excellent job of teaching students, we do a poor job of coordinating patient care.

Dr. Kolker asked for clarification of the number of patients followed. Dr. Kanellis emphasized that all 1,500 patients will be followed by the D3 students.

Dr. Kanellis summarized that the proposed program puts the responsibility on the faculty member where it belongs. Training will be available this spring so that we are not walking into this fearful of Windent.

7.0 New Business

National Board Policy

Dr. Hand said that administration recently received a proposal to tie promotion in dental school and graduation to passing the National Boards. This is based on the fact that one
cannot get a license to practice dentistry without passing Parts I & II of the National Boards. There have been changes with the way the National Boards are handled. Beginning in January 2006 for Part II and January 2007 for Part I, the National Boards will be computer based, off site, and students will be responsible for scheduling and completion of the exams. Students can take the exam up to twice in a calendar year following a 90-day waiting period between testing. Dr. Hand explained that we have a small number of students and former students who have not passed Part I or Part II of the National Boards.

Beginning January 2007, the new policy proposes that students will not be eligible for promotion to the junior year until Part I is passed. Beginning June 2007, students will not be eligible to graduate until Part II is passed. We would work with students who were not able to pass, allowing them to audit classes and take mock boards. This is an attempt to ensure that students have the best opportunity to pass the boards.

Dr. Hand said that the Deans, DEOs, and CAPP Committee have reviewed the proposed policy. Everyone has been positive about the proposed policy.

Dr. Ruprecht expressed concern about National Boards as a measure of competence. Dr. Hand does not believe that the Boards are necessarily the best measures of competence and knowledge of dental practice. On the other hand, to graduate someone who is unable to practice dentistry is not tenable.

Dr. Ettinger asked what happens in Medicine. Dr. Finkelstein said medical students have to pass National Boards, and it has been that way for a long time. Dr. Finkelstein added that the National Boards are just one outcome measure for knowledge. He believes it is reasonable to expect students to pass national boards.

**Contribution for earthquake victims in Pakistan**
Dr. Satish Khera announced that approximately 100,000 were killed in the recent earthquake in Pakistan. We have a graduate student who lost ten family members in the tragedy. He asked faculty to consider contributing money to help these victims. Donations can be directed to any international agency, such as the Red Crescent organization. Contributions can also be given in care of the Hindu Temple of Cedar Rapids. One hundred percent of the money will be given to a local organization in Pakistan to help the people rebuild their lives.

Dr. McQuistan asked anyone interested in helping with the Free Dental Clinic to contact her or Dr. Walton. Volunteers usually work for two hours and see two or three patients during that time.

Minutes by Jan Swartzendruber
1.0 Call to Order – Dr. Johnsen
Dr. Johnsen called the meeting to order.

2.0 Review, Correction, Approval or Disposition of Minutes – Dr. Johnsen
The minutes of the April 11, 2006 meeting were approved as distributed.

3.0 Announcements
Dr. Johnsen congratulated Dr. Janet Guthmiller for her selection as associate dean of academic affairs at the University of North Carolina, Chapel Hill, effective February 1, 2007.

Dr. Johnsen announced that Dr. William DeKock received the Distinguished Alumni Achievement Award and Mr. Joe Brennan received the Distinguished Alumni Service Award. They will be honored in June 2007.

Dr. Johnsen was pleased to announce that Orhan Pamuk, a veteran of the University of Iowa International Writing Program, was awarded the 2006 Nobel Prize in Literature.

4.0 Updates
4.1 Clinic Management System Assessment Update – Mr. Renshaw
Mr. Renshaw was at a Windent Users Group Meeting at BCU and was unable to attend the meeting tonight. Dr. Kanellis said Windent does not currently have an electronic patient record. They are willing to work with us in developing an electronic record at additional costs. Prior to deciding whether or not to do this, Mr. Renshaw wrote a detailed request for information that he sent to vendors who already had existing electronic records available. Two outside vendors responded to his request, and Axium and Salud were invited to present their product to the College. The college has asked Windent to provide the same information that the other two vendors have provided. They will then evaluate the material and make a recommendation to Administration.

Dr. Aquilino asked about the electronic patient record system used at UIHC and the VAMC. Dr. Kanellis responded that UIHC uses Windent. Dr. Johnsen said the VA has such a record, which is a national centralized record. He noted that the VA records do not allow for customization. Dr. G. Schneider has talked to Dr. Luebke about the VA system and encouraged Dr. Kanellis to visit with him about it. Dr. Kanellis said Mr. Renshaw is doing a great job as project manager. We expect to have a recommendation within the next month regarding which way we should go.

4.2 Digital Imaging Update – Dr. Ruprecht
Dr. Ruprecht said we have spent the last eight years designing what we want in digital imaging and how to implement it in the clinics. Dr. Hand asked Mr.
Reynolds and Dr. Ruprecht to co-chair a Digital Imaging Committee to explore digital imaging for the College. The committee evaluated various PACS systems and selected MIPACS, which now seems to be the choice of a large number of other schools. They selected software not linked to a specific capture system. They want to have software that captures images as well as pulls up images. They will make a decision by the end of the month on which actual capture devices/systems we will choose. Each department will be consulted about the devices to be used in their area.

Dr. Ruprecht provided an update of the rollout plan. They have begun rolling out implementation with the students. The plan for the digital imaging rollout in the College is expected to take two years, which will spread out the cost and provide time to make necessary modifications. We will have both analog images and digital images for a period of time. Dr. Ruprecht asked for questions.

Dr. Timmons asked if Admissions is currently utilizing digital images. Dr. Ruprecht responded that it is.

Dr. Khera asked if there is a plan to digitize the existing analog images. Dr. Ruprecht said there is no reason to digitize the analog images. We will have the ability to look at film-based or analog images for a long time. Future images will be digital.

Dr. Ruprecht emphasized that a major objective is to eliminate any major disruption.

Dr. McQuistan asked when faculty and staff will receive training. Dr. Ruprecht said they will be trained close to when they will utilize the system. It is also important that faculty and staff receive training prior to students. Dr. Kanellis said the training sessions are already occurring for those who already need to know.

Ms. Cunningham-Ford asked how one can tell if the records are digital or analog in Windent. Dr. Ruprecht said the records will indicate if the images are digital.

Dr. Johnsen thanked Dr. Ruprecht for his hard work and perseverance.

5.0 Unfinished Business
5.1 International DDS – Dr. Hand
Mr. Arneson provided a follow-up to the discussion at the Faculty Retreat in September to consider an International DDS Program. He emphasized that state allocations for the College will not increase as fast as the costs of maintaining our quality programs. We need to be proactive in our response to the continued decline in state support. He showed a ten-year graph of revenue trends indicating a leveling of state appropriation funds. He pointed out that patient care revenue has increased and has exceeded state-appropriated funds over the last five years. We could be considered a state-assisted rather than state-funded program.
To maintain the excellence we have achieved, we need to explore revenue alternatives. Mr. Arneson pointed out opportunities for tuition increases with predoctoral students. He recommended that we be proactive and address the issues now.

Mr. Arneson also discussed a graph of the Survey of Predoctoral Dental Education Institutions – Four Year Resident Educational Costs Summary. We had been lowest in cost of the six Big Ten dental schools until the last academic year.

Dr. Ettinger asked if there is a state mandate to take a specific number of in-state students. Dr. Johnsen responded that we do not have such a mandate and we actually take the largest number of in-state students of any of the health science colleges. Eighty percent of this year’s class is composed of Iowa residents. There is pressure from the state to educate and train dentists. We do our best to educate elected leaders around the state on both the workforce issue and the access issue.

Dr. Doering asked why we should increase the resident student population when we could increase the non-resident student population to solve the problem. Dr. Johnsen responded that Dentistry is one of the most costly programs in terms of dollars per student. It is important to note that we receive about $12 million from the state each year for 300 students.

Dr. L. Squire asked if we have the patient population to support this program. He also asked why this institution has not gotten more actively involved in tasteful marketing. Mr. Arneson responded that we have discussed marketing, but it is important that it be branded and coordinated within the College. Dr. Kanellis agreed that those are two important issues and we have much to discuss before implementing such a marketing plan. He noted that we have the same if not more patients coming through Admissions; however, we have significant shortages in other areas. Dr. Johnsen added that we will soon meet with Richard Saunders, Associate Director, UI Human Resources, to determine whether we can make the predoctoral clinic more accessible and attractive for the second and third shift employees at the University. Dr. L. Squire also suggested targeting the University student population for patient pool. Dr. Hand affirmed the marketing issue. We need to make sure we are doing target marketing to get the kinds of patients we want and need.

Dr. Hand discussed the following assumptions:
1. If we begin an International DDS Program -
   – Tuition would be $50,000 per year, of which we would keep 100%.
   – Class size would be 10 students per year.
   – The program would be integrated into the clerkship and Family Dentistry.
   – There would be 2-3 months of intensive preclinical orientation and introduction.
   – International students would be 1.5 times as productive in clinic.
   – Another key assumption would be having a sufficient patient pool.
2. If we add four non-resident students -
   – The tuition would be approximately $37,000 per year, of which we would keep 83%.
3. If we add four resident students -
   – The tuition would be approximately $22,000 per year, of which we would keep 83%.

Dr. Hand discussed financial costs for implementing an International DDS Program verses adding to class size. We would need to add personnel (faculty and staff). There would be no additional costs for equipment and supplies or renovation costs, as this would be covered through the SSIMS fee.

Dr. Ana Diaz-Arnold asked how additional students, whether or not they are international, would not impact space. Dr. Hand said it depends on how we schedule the space we have. Currently, we have an excess capacity in terms of space, although not always when or where we want it. This would be something we would need to determine. We do have enough chairs to put the international dental students at any given time, however, it would dramatically change the way we operate.

Dr. Hand discussed non-financial costs to consider if we begin an International DDS Program. Issues include increased faculty workload, adjustment in cubicle assignment in the clinic, unhappy alumni, dilution of the value of the Iowa DDS, and political costs. Dr. Hand also discussed the financial benefits. Once an International DDS Program was fully implemented after two full years, we would expect a net tuition increase of $1 million, clinic revenue of $296,000, with a net revenue of $1.296 million. Non-financial benefits include potential to attract international dentists in the Iowa workforce. Taking into consideration the addition of three new faculty and one staff person as well as recurring costs, Dr. Hand calculated a net benefit of $871,000 by adding an International DDS program. In comparison, by adding four resident students per year, we would anticipate a net benefit of $460,160 when it is fully implemented after four full years. By adding four non-resident students per year, we would expect a net benefit of $659,360 when it is fully implemented after four full years.

Following the Faculty Retreat, Dental Administration asked Dr. Hand and Mr. Arneson to make recommendations. Dr. Hand shared the following recommendations with faculty and requested input on how to proceed before a final decision is made:
• Doing nothing is not an option.
• We must continue efforts to increase clinic revenue.
• Increase 2007 incoming D-1 class size by four non-resident students.
• Appoint a faculty committee to explore further the International DDS Program, to develop curriculum and policy associated with it, and to explore and analyze resource needs for implementing an International DDS Program.

The reason they are making this recommendation is that increasing or decreasing class size is an internal decision and will have less impact than starting an
International DDS Program. It will generate dollars for the College and allow us an opportunity to take a closer look at the International DDS Program to determine if it would work for us.

Dr. Hellstein asked if the recommendation could be worded “for best qualified” rather than limiting it to four non-residents. Dr. Hand responded that money is the reason why they selected the addition of four non-resident students.

Dr. Synan asked what the annual giving from alumni is to the College. Dr. Johnsen responded that we raised $2 million over the last year and we are working on deferred gifts as well. He noted that we had zero professorships a few years ago and we now have seven to use for program enhancement. We are cautious about using endowment funds for a means of funding sources for salaries. The tendency is to use endowment for one-time things and program enhancements rather than faculty salaries. Dr. Synan wondered if adding an International DDS Program would have any impact on alumni giving. Dr. Johnsen did not believe it would have a significant detraction since we would start with a small program.

Dr. Kanellis asked the approximate number of non-resident students we currently have and what percent of those pay full tuition. Dr. Chalkley responded that there are 16 out-of-state students in the current D-1 class. Dr. Johnsen stated that we would net 83% by adding non-resident students rather than 100% as with the International DDS Program because the remaining 17% would go to financial aid. Dr. Kanellis said it is important to note that out-of-state students are getting financial aid. Dr. Chalkley clarified that some, not all, are getting financial aid.

In our efforts to increase revenue, Dr. Aquilino asked where the college was in regard to changes in our clinical curriculum. He stated that other schools have reported substantial increases in clinic usage and revenue as a result of a more comprehensive approach to their clinical curriculums. Dr. Kanellis said we have data on how productive our school is in terms of clinic revenue. Mr. Arneson confirmed a recent survey indicating that we provide the most clinical care of any public school in terms of dollars. He was not sure if this was a result of our including the DSP income as part of our total income.

Dr. Aquilino asked where we are with the renovation project. Dr. Hand said we are not slated to receive funding from the Board of Regents until 2012. Dr. Johnsen added that we have a meeting this week with the Vice President of Finance to find out how fast we can move ahead.

Dr. Meredith asked where the ADA is at on the accreditation of foreign dental schools. Dr. Johnsen responded that a state can accept students from non-US dental schools. Dr. Chalkley said the ADA is beginning to look at this, and they will do it on a case-by-case basis. Dr. Hand agreed that this would significantly affect the demand for an International DDS Program.

Dr. Doering asked about accepting four non-residents and an additional two residents in the D1 class versus accepting four non-resident students, assuming that
some will not remain in the program for four years. Dr. Hand said the physical capacity in the short-term limits the number we can accept. Mr. Arneson explained that once the class is established, we receive funding from the Provost for the four years based on the initial class numbers.

Dr. Aquilino said that along with the space issues in clinics, there is a major issue in the maintenance of the clinics, particularly in the Simulation Clinic. He noted a decline in the cleaning standards. Dr. Hand affirmed Dr. Aquilino’s assessments and said we need to be able to increase the amount of funding available to maintain and improve these areas.

Dr. Kuthy asked if we have explored income from other areas, such as research. Dr. Hand said increasing our research, in effect, costs us money because we subsidize research. We cannot positively influence state funding dollars. Funding from gifts is something Dr. Johnsen has been engaged in, but using gifts as operating dollars, particularly on a recurring basis, is tough. It is easier to raise funds for specific projects.

Dr. Levy asked if the two to three months of intensive preclinical orientation and introduction for international students in the International DDS Program is substantial enough, then how much concern is there of the compromises it creates in better preparing for our other pre-dental students or having a chance for vacation or doing research during the month. Dr. Hand responded that this is why they saw the need to add faculty if we implement the International DDS Program. The reason we are considering these options is to add to faculty salaries and quality of faculty life. If we increase salary while increasing workload, it does not enhance quality of life.

Dr. Clark believes the increased clinic revenue figures were overly optimistic and marketing should play a key role. Dr. Hand said it might be true that the figures were optimistic, and he would expect the committee that they recommend forming to contact other dental schools to evaluate what other international students have done in comparison to the others. Dr. Hand agreed that we must target various populations such as University students and employees; however, we must have the capacity to serve them.

Dr. Doering asked about the recommendation to continue efforts to increase clinic revenue. Dr. Hand said this has to do with increasing efficiency within the clinic.

Dr. Diaz-Arnold asked if we will have a faculty vote on this program and expressed concern about not having the faculty on board. Dr. Hand sees the implementation of an International DDS Program as a cultural change and we would need to have the majority of faculty in support of it. Dr. Johnsen said if we vote down the recommendation, we will need to find alternative options. Our objective is to open discussions and keep our options open as the state levels its funding to the College. The two things we can consider are increasing clinic income and tuition.
Dr. Ettinger made the motion to allow the administration to increase class size by up to four non-resident students.

The majority voted in favor of adding four non-resident students to increase tuition.

Dr. Kanellis said an addition to the recommendations should be to continue paying close attention to tuition. We are assuming that we do not deserve to be one of the top two most costly dental schools, and he believes we are better than the current top two most costly dental schools. Dr. Hand added that as long as we can continue to raise tuition surcharge, we will continue to do so.

Dr. Levy expressed concern with the Provost’s stance of adding more undergraduate students from Illinois to generate additional income, take a percentage of that to hire additional temporary Liberal Arts faculty, and reinvest the rest of the money where it is needed throughout the University. He raised the issue of difficulty in filling faculty positions. Dr. Hand said we want to maximize revenue and continue to build our faculty. For the most part, we have been very successful in identifying, recruiting, and retaining outstanding faculty. We need to continue to increase the money available to pay them.

Dr. Johnsen appreciated the excellent discussion. He emphasized the importance of continuing discussions and urged faculty to talk with their department heads.

6.0 New Business
Dr. Khera addressed an issue regarding charges for our services in comparison to fees charged in the service industry and fees of the medical specialists of UIHC. Dr. Kanellis responded that our fees are based on what competitive dentists in the area charge. Dentist’s incomes are in the top 2% of incomes nationwide. Each year we send fee schedules to departments and request them to set their fees. Mr. Arneson added that we collect 95 cents on the dollar of everything charged to patients, in comparison to the medical school, which collects 40 cents on the dollar. He agrees that our fees are low; many are below the Delta Dental recommendations. Dr. Johnsen said Dr. Khera touched on an important point about health care in general. Secretary Leavitt spoke at the ADA House of Delegates and said we have a health care sector - we do not have a health care system. When General Motors spends more on health care than they do on steel and Starbucks spends more on health care than they do on coffee beans, something in the system is going to give. You can lead the change or accept what follows.

7.0 Adjournment
Dr. Johnsen adjourned the meeting at 7:53 p.m.

Minutes by Jan Swartzendruber
1.0 Call to Order – Dr. Johnsen
Dr. Johnsen called the meeting to order.

2.0 Review, Correction, Approval or Disposition of Minutes – Dr. Johnsen
The minutes of the November 3, 2004 meeting were approved as submitted.

3.0 ADEA Report – Professor Cunningham-Ford (Faculty Representative)
Ms. Cunningham-Ford stated that the structure of ADEA House of Delegates includes the Councill of Faculties, Deans, Sections (39). Hospitals and Advanced Education Programs, Students, Allied Program Directors and Corporate Council.

Resolutions passed were:
- Appointments to Commission on Dental Accreditation, Council on Dental Education and Licensure and Joint Commission on National Dental Examination
- There were mergers of several sections
- Assessing patients with special needs
- Dental Faculty Code of Conduct
- Open Membership (no individual dues)

Other items of interest:
- There will be an Open Membership effective January 1, 2006, for faculty and students at ADEA member institutions (dental and allied dental). The advantage is the potential for ADEA to represent 60,000 dental and allied dental faculty and students. Here at the College, 43 percent of our full-time faculty are ADEA members and the goal is 100 percent.
- The Journal of Dental Education and Bulletin of Dental Education will be available online. A paper copy of the Journal can still be purchased.
- Beginning January 2006, individuals will need to activate their memberships using the ADEA website.
- The March 2006 meeting will be a joint ADEA/AADR meeting in Orlando with one registration fee. This will be a great opportunity for our faculty and students to attend both meetings.
- Dr. Jed Hand received the Gies Fellowship Award.
- Of the 12 Presidential Citations, three had Iowa connections – Drs. Nelson Logan, Dick Ranney and David Nash.

The College previously has not had a large number of students who have become ADEA members, however, the new open membership will allow us to provide free memberships to our students. This will be a great opportunity for the College.

Dr. Doering asked if anything occurred at the meeting relative to National licensure? Professor Cunningham-Ford responded that there is a task force identified to look at the
issue of national examination. Dr. Johnsen added that he feels it may start with WREB and move through the areas.

Dr. Levy asked if there would be two separate meetings of ADEA and AADR? Professor Cunningham-Ford responded that the meetings will be held at the convention center of the Dolphin and Swan and will run concurrently. Dr. Levy added that AADR does not send out their full program ahead of time and now there will be twice as many activities going on. Having an online integrated scheduler would be extremely helpful or having complete paper copies available would be beneficial. Dr. Johnsen added that he is going to ask specific faculty to present at ADEA. The deadline for submission for presentations is August 1. Dr. Drake stated that the deadline date for AADR is September 1.

4.0 AADR Report – Dr. Drake

Dr. Drake stated that there were 5,550 delegates at the General Session from 63 countries, there were 3712 abstracts, including 2854 posters, 820 oral presentations, 29 symposia, 6 hands-on workshops, and 3 speakers in the Distinguished Lecture Series.

The College had 52 abstracts which ranked us 7th; however there was a cluster of schools in the top spots. The College received a number of awards at the research meeting:

- Matthew Miller, D2 – 1st place in the Caulk/Dentsply Student Research Group Competition. Dr. G. Schneider is Matthew’s mentor.
- Rachel Davis, D2 – Nutrition Group Best Student Abstract Award. Dr. T. Marshall is Rachel’s mentor.
- Christopher Barwaze, D2 – AADR Student Research Fellowship Award. Dr. Strack from the College of Pharmacy is Chris’ mentor.
- Dr. Luciana Van Westen – IADR’s Bernard G. Sarnat Student Award in Craniofacial Biology. Dr. A. Lidral is Luciana’s mentor.

Dr. Drake stated that the Iowa Reception was fantastic and a number of colleagues complimented Iowa for being gracious hosts.

Dr. Larry Tabak spoke regarding NIH road map initiatives and the state of the NIH budget (NIDCR) calling this a flat line budget. The competition for NIH grants is going to be extremely tight and even more so in the future years. He painted a dismal picture for NIH funding.

5.0 Announcements

5.1 Dr. Johnsen announced the following promotions and professorships:
- Dr. Mike Kanellis – Associate Professor with Tenure to Full Professor
- Dr. Steve Armstrong – Assistant Professor to Associate Professor with Tenure
- Dr. Johnsen announced that Dr. Levy has been appointed as the Wright-Bush-Shreves Professor of Research.
5.2 2005 Faculty Retreat – Kanellis
Dr. Kanellis announced that based on feedback from faculty, the 2005 Faculty Retreat will be held the afternoon of September 11 and all day on September 12. On Sunday, September 11, there will be a family picnic at the Izaak Walton Cabin beginning around 4:00 PM and all spouses and family will be invited. There will be games for children and adults, entertainment, and an interdepartmental competition. On Monday, September 12, the faculty will meet all day at Brown Deer Golf Course. If you have any ideas for the Sunday evening activities, please contact Dr. Kanellis.

5.3 Commencement
Commencement will be held on Friday, June 3, and President Skorton will be presiding. Dr. Johnsen encouraged all faculty to participate in the Commencement ceremonies to honor the students.

5.4 Health History
Dr. Elvers stated that last Fall, a Committee consisting of K. Baker, M. Finkelstein, C. Kleinegger, R. Spieker and R. Elvers reviewed a revised Health Questionnaire that will be more user friendly and adaptable with the electronic record when the College moves to it. You may start to see this new form appearing in the records (it is yellow) and it should be self explanatory. If you have any comments you would like to incorporate into the record, please let him know.

5.5 Cheating
Dr. Johnsen stated that an issue relative to cheating with cell phones has arisen. Dr. Chalkley responded that the recommendation from the CAPP Committee is that all cell phones during testing times will not be allowed in the rooms, and backpacks will have to be placed at the front of the room where the test is given. She does not feel our students are cheating; however, this policy will be easier for everyone.

6.0 New Business – Dr. Johnsen
Dr. Johnsen stated that he is working on the 2005-2010 Collegiate Strategic Plan. He views this as a philosophical direction for the College and is intended to provide an overview and to be used as a guide in resource decision making. It is not intended to be a road map. Dr. Johnsen feels that the Strategic Plan is a working document and does not need to be voted upon. He then reviewed the seven goals within the Strategic Plan. Although the strategies are numbered, he feels they are all essential programs. He welcomes input and comment on the draft of the Strategic Plan. If there are no comments, he will accept this as a working document in conducting business for the College. Dr. Levy suggested a wording change in Strategy 1A/first bullet.

Dr. Johnsen added that he does have a working Collegiate Agenda for the specific issues that the College is handling each year. The Agenda has been shared with the Executive Committee and hopes DEOs will share this with their faculty. The Agenda is more specific but does not include things that are ongoing (i.e., student admissions, student research program) unless there is something that is going to be changed. When the
Agenda is final, he will distribute to the faculty at large. He stated that we need to be careful on how much we are going to take on in a one-year period and what are the essential things the College needs to address.

Minutes by Penni Ryan
1.0 Call to Order – Dr. Johnsen
Dr. Johnsen called the meeting to order.

2.0 Review, Correction, Approval for Disposition of Minutes – Dr. Johnsen
The minutes of the January 17, 2006 meeting were approved as distributed.

3.0 Announcements
3.1 The first Richard E. Walton Professor of Endodontics has been bestowed on Dr. Bill Johnson. This is the seventh named faculty position in the College and the first one named in honor of a current faculty member.

3.2 The 2005-06 Teacher of the Year Awards were announced at the 2006 Apollonian Frolics on April 1. The recipients were as follows:
   - Class of 2009 – Dr. Michael Finkelstein
   - Class of 2008 – Dr. James Clancy
   - Class of 2007 – Dr. Neal Jones
   - Class of 2006 – Dr. Manuel Gomez
   - Adjunct of the Year – Dr. Salvador Atienza
   - Lifetime Teaching Award – Dr. Axel Ruprecht

3.3 Dr. Kuthy thanked all who helped him last Thursday, particularly Oral Surgery.

4.0 Collegiate Review Schedule – Dr. Chalkley
Dr. Johnsen thanked Dr. Chalkley for all her work with the Collegiate Review. Dr. Chalkley gave a brief outline of the schedule for the Collegiate Review that will take place on Thursday and Friday of this week. The visiting reviewers will begin with a tour of the DSB on Thursday. She asked the group to encourage staff to attend the open forum on Thursday from 12:15 – 1:00 p.m. in the Oral B Classroom. She recommended that each department be represented at the faculty open forum on Thursday from 5:15 – 6:15 p.m. in the Galagan Auditorium B.

5.0 Updates
5.1 ADEA Council of Faculties Report – Ms. Cunningham-Ford
Ms. Cunningham-Ford said this was her third year as a Council of Faculties Representative at the ADEA annual meeting. There were no controversial resolutions at the joint meeting in Orlando. They appointed a task force to work with the ADA to create diagnostic codes for dentistry. Ms. Cunningham-Ford recently sent an email notifying faculty of other opportunities including the academic fellowship for senior students that is now available. With the open enrollment program, we have 65% of our fulltime faculty enrolled. Although we did not reach our membership goal
of 100% of our fulltime faculty, there is still an opportunity to enroll and it is still free. We currently have 92 faculty and staff enrolled as members. Dr. Johnsen added that Jim Swift, alumnus, is now president-elect of ADEA. Ron Hunt, alumnus, is now vice president for the Dean’s Council and is on their board of directors. Brian Clarkson, former faculty member, is now vice president of AADR.

5.2 AADR Council Meeting Report – Dr. Kurago

Dr. Kurago reported on the joint ADEA/AADR Annual Meeting.

- Membership increased slightly in 2005 due to student membership.
- The National Oral Health Advocacy Committee is now a joint effort between AADR and ADEA.
- Beginning January 2006, IADR members have online access to the Journal of Dental Research (JDR). Critical Reviews have now been incorporated into JDR. The current JDR impact factor is approximately 3.13.
- Finances from the Baltimore and Orlando meetings appear to be quite favorable as do projections for the 2007 meeting in New Orleans. There is some concern about the 2008 meeting in Dallas due to the close proximity to the IADR meeting in Toronto that year.
- Robert (Skip) Collins, Deputy Executive Director, announced his retirement effective May 1, 2006. He received this year’s Jack Hein Public Service Award.
- The Council approved the inclusion of a voting student member.
- Several candidates for AADR Vice-President were announced: Bill Marshall (University of California at San Francisco); Lynne Opperman (Baylor); and Tom Van Dyke (Boston University). Several candidates were also announced for AADR Treasurer and AADR Publications Committee Member-at-Large.
- The Council elected Mel Kantor (from Diagnostic Services Group) as the AADR Board Member-at-Large.
- Several awards were given: Laura Milnor, D4, received the Dentsply Award; Drs. Galen Schneider and Clark Stanford received the AADR Journal of Dental Research Cover of the Year Award. The University of Iowa received the most student presentations award.
- Brian Morris served as the VP of the National Student Research Group.
- There were two announcements made at the Council Meeting. There was a specific request for increased participation in AADR committees, and they welcome self-nominations. They also encouraged participation in local science fairs.

5.3 Faculty Council – Dr. Drake

Dr. Drake reported on today’s Faculty Council meeting. President Skorton was a guest and gave his farewell speech to the Council. There were a variety of questions asked during the questions and answer session.
The primary questions were concerning the upcoming budget, and President Skorton responded that budget discussions are ongoing. He hopes that the transformation plan will still be in the vote. Faculty salaries remain the highest priority.

An update on the UI presidential search was also addressed. Regent Wahlert is scheduled to be on campus to meet with faculty, staff, and students.

Senate leadership asked Dr. Drake to relay the message that the College of Dentistry has the distinction of having the worst voting record in university elections. They would like to see the College of Dentistry more involved in Faculty Senate elections and on university committees. We should keep in mind that we are the College of Dentistry at the University.

The issue of commercialization and intellectual freedom was also discussed. On March 23, *The Des Moines Register* published a story on the mixed messages the University is sending when it helps pay the John Pappajohn Entrepreneurial Center for a student business that makes it easy for University students to find inexpensive alcohol. A task force will be formed to answer questions related to the University’s current and future efforts to promote economic development by directly supporting the creation of new businesses. These include: 1) How should one decide which businesses will be supported and which will not? 2) The *UI Operations Manual* states, “Every student is entitled to the same intellectual freedom which the faculty member enjoys. What are those freedoms within the context of private business creation or expansion? They will discuss it more at a later date.

6.0 Pass-Fail – Dr. Chalkley/Dr. Finkelstein

Dr. Johnsen asked Dr. Finkelstein, chair of the Curriculum Committee, to make comments on the Pass-Fail issue. We had this discussion five years ago, and it was dropped because criteria for pass could not be identified. The Curriculum Committee now believes that with the system of competencies that we have for our courses, this is no longer an issue. The Curriculum Committee is unanimously behind the proposal for the limited use of Pass-Fail. Dr. Finkelstein described how Pass-Fail would work. There are several levels of safeguards built into this proposal. The Committee believes it is good to have the flexibility for the unusual situations when it is appropriate for a course or experience to be made Pass-Fail. He moved that we adopt the policy of a limited Pass-Fail system. The process would be as follows: DEOs, together with the course director, would bring their request to the Curriculum Committee. The Curriculum Committee would review the request as it relates to the educational program. Should the Curriculum Committee approve the request, it would be recommended to the Dean for approval. Dr. Walton seconded the motion. Dr. Johnsen opened the floor for discussion. Dr. Denehy said Pass-Fail has been done once in the last 20 years, and it was not successful. As they currently examine this in Operative Dentistry, they believe this would be a valuable option for the Sophomore Introduction to
Operative Clinic course. The Sophomore Clinic has a wide range of clinical patients, ranging from simple to very complex, and it is very difficult to evaluate. While there is an established competency evaluation system, he believes there is not a need for the grades to be used as a motivating factor at the sophomore level. Dr. Johnsen said there was an excellent discussion with DEOs regarding the junior clerkship level, and he asked Dr. Denehy to comment on the differences at the sophomore level. Dr. Denehy said everything is new at the sophomore level, and the idea that they are being evaluated on something they have never experienced before interferes in the learning process. Evaluation becomes increasingly important as the students progress into the junior and senior years. Dr. Walton asked who ultimately approves the course to be Pass-Fail. Dr. Johnsen said the DEO must agree, the Curriculum Committee must agree, and the Dean would need to approve. Dr. Johnsen asked the faculty to vote. The vote was unanimous in favor of the limited Pass-Fail system.

7.0 Building Transformation – A Conceptual Study – Mr. Arneson

Mr. Arneson presented the first draft of the building transformation project. He estimates that roughly 80% of the Dental Science Building will be updated and renovated. This presentation is the first draft that incorporates input from each department. He noted that better access to the building was a primary concern. We are looking at adding 19,000 net square feet. He discussed several expansion options, listing advantages and disadvantages of each. The option to expand to the southwest is the preferred option.

Mr. Arneson explained various operatory layouts. We plan to increase the number of operatories from 268 to around 290. We also are considering increasing student space and adding shower facilities for faculty and staff.

We will need to decide the adjacencies and make sure we have included everything we need. The consultants will finalize the report and estimate the cost. We will determine how much of the cost we can cover through fundraising. We will then go to the Capital Projects Review Committee for approval. We will then seek approval from the Board of Regents. The Board of Regents would then give approval for us to request bids to hire an architect to design the building. Once the architect is selected, we will request bids for a contractor. The largest issue will be how to phase the project in order to maintain education and patient care throughout the project.

Dr. Larry Squire asked if the projects are based on current class size or on the anticipation of an increase of students. Mr. Arneson responded that the projects are based on current class size. Dr. Squire asked about incorporating a stairway that would go to the first floor. Mr. Arneson said this is feasible; however, it would affect cost. We do not intend to have patient care on the first floor.

Dr. Galen Schneider asked if we are considering utilizing offsite buildings during the construction phase. Mr. Arneson said this is something we will need to address. Dr. Schneider said North Carolina used external huts during construction, which did not work well. He encouraged including the cost of the contingency plan. Dr. Johnsen acknowledged that the migration plan will be very complicated.
Mr. Arneson said we will continue to provide updates on this project as it unfolds. Dr. Kanellis will soon begin discussions on the adjacencies.

Dr. Johnsen briefly mentioned some issues that will drive this project. What will we need in the future to be a top academic dental institution? Maintenance issues such as the heating and cooling system need to be addressed. The good news is this building has been judged to be structurally sound to accommodate the building transformation for the next 20 years. Dr. Johnsen is staying in tune with issues around campus.

Dr. Johnsen thanked Mr. Arneson and the others who are working to move this project ahead.

8.0 Unfinished Business
There was no unfinished business.

9.0 New Business
Dr. Rick Walton commented on real-world dentistry. He said that Chris White recently conducted a survey about adjunct faculty. What is the advantage of having adjunct faculty? Our fulltime faculty responded that they come in to teach real-world dentistry. This means there are two types of dentistry: what we teach here (ivory-tower dentistry) and what is practiced outside the walls of the college (real-world dentistry). It is an unfortunate, incorrect term that creates problems with our students. If they think that much of what they are learning here is not applicable to what they are going to practice, then they will need to relearn a lot of dentistry once they leave these halls. Dr. Walton encouraged faculty who agree to: 1) reinforce to students that what you are teaching is applicable, and 2) do not allow that type of conversation among faculty.

10.0 Adjournment
Dr. Johnsen adjourned the meeting at 7:05 p.m.

Minutes by Jan Swartzendruber
1.0 Call to Order – Dr. David Johnsen

Dr. Johnsen called the meeting to order at 6:01 p.m. in Galagan B.

2.0 Review, Correction, Approval or Disposition of Minutes – Dr. David Johnsen

The minutes of the February 6, 2007 meeting were approved as distributed.

3.0 Announcements

Dr. Kirk Fridrich introduced a new faculty member, Dr. Charles Ringgold, who joined the Department of Oral and Maxillofacial Surgery as a professor. Dr. Ringgold received his undergraduate education at Duke University, his dental education at the University of Maryland, and his oral and maxillofacial surgery training at Walter Reed Army Medical Center. Highly decorated, he rose to be the top oral and maxillofacial surgeon in the U.S. Army. Dr. Ringgold was welcomed by the faculty.

Dr. Hand introduced a new faculty member, Dr. Keri Stahle, who joined the Department Preventive and Community Dentistry on January 15, 2007 as a Visiting Assistant Professor. She is currently working in the Admissions/Emergency clinic.

Dr. Johnsen announced the teachers of the year, selected by the students. They are Drs. David Gratton, Steve Aquilino, Vince Williams, Steve Vincent, Mike Finkelstein and Manuel Gomez.

4.0 Updates

4.1 Faculty Senate: Research Track and Extended Tenure Track – Dr. David Drake

Dr. Drake, Faculty Councilor and Senator, presented some of the important aspects of the discussion of the proposed Research Track and Extended Tenure Track for The University of Iowa.

Research Track:

Dr. Drake stated that the official reason for such a position from The University of Iowa is that it wants to explore new models of team science, and that there is, often, not a corresponding instructional need in departments and colleges, and thus tenured positions are not appropriate.
The research track would be a non-tenure eligible faculty track, with the ranks of Assistant Professor, Associate Professor, and Professor.

The primary mission of the track would be to further the research efforts of the University. These faculty members would do nothing but research. They would have no responsibilities for teaching, mentoring or scholarly pursuits.

Why does the university need a research track? The College of Medicine feels that this would make them more competitive in attracting researchers to Iowa.

Not every college would have to use the research track. As is the case of the clinical track, university guidelines would be established.

Discussions as to how many faculty members might be on the research track have indicated that it might be between 10-20%.

Concerns have been expressed about the fairness of research track faculty having so little job security.

The Faculty Senate will be discussing this in the fall of 2007. There will be discussion on campus over the summer.

This position would not replace the PhD scientist position, although current research scientists could apply for these positions. Transfer would not be automatic.

Extended Tenure Track:

The items of interest for the extended tenure track are as follows:

(b) Re-appointment Review (President 10/85; amended 2/01; 4/07).

Most initial probationary appointments at The University of Iowa are for:

1. three years for colleges having a collegiate norm to make a tenure decision of not more than six years or

2. four years for any college having a collegiate norm to make a tenure decision of more than six years, at the end of which time the candidate can be re-appointed following a re-appointment review. See subsection (c).

With the approval of the departmental executive officer, the Dean of the college, and the Provost, shorter initial appointments can be made.
(c) Time in Which to Make Tenure Decision.

To assure that fully informed tenure decisions are made,

each college shall establish a norm to make the tenure
decision.

A collegiate norm shall not be earlier than the sixth year of
probationary service (or the fifth year for the College of
Law.)

However, the collegiate norm for a tenure-track faculty with
significant patient care responsibilities in either the Colleges
of Dentistry or Medicine may be no later than the eighth year
of probationary service if that norm is approved by the
Provost, the Dean of the respective college, and a majority of
the respective tenured faculty of the respective college
having significant patient care responsibilities.

Other colleges may request the Faculty Senate to consider
changes in their collegiate norms.

(e) Extensions and Accelerations.

(1) For each minor child newly added to the family of a
probationary faculty member (e.g., biological, adopted,
stepchild, or by guardianship) during the probationary
period or within two years prior to the initial
appointment, the probationary period shall be extended
by one year.

(2) The probationary period may be extended for up to two
years beyond the collegiate norm, upon the mutual
agreement of the probationary faculty member, the
college, and the Provost because of an unanticipated
professional or personal impediment, such as the
assumption of additional teaching or clinical
responsibilities above the normal load at the request of
the department or college, the failure of the University to
provide resources in a timely manner if the resources are
promised in writing, personal health reasons, the
assumption of significant ongoing care responsibilities
for a spouse, domestic partner, minor or adult child, or
parent with a serious health problem or because of the
death of the faculty member’s spouse, domestic partner or
minor or adult child. Generally, no extensions under this
subsection shall extend the probationary period two years
beyond what the period would have been taking into account the relevant collegiate norm and any automatic extension under (e)(1).

(f) Impact of Extensions on Expectations of Scholarship.

No expansion of a faculty member’s probationary period as a result of an extension under subsection (e) shall result in any increase in the quantity or quality of the probationary faculty member’s expected scholarship from what would have been expected had that faculty member been considered for promotion or tenure in the final year of probationary service in light of the collegiate norms.

There is some retroactivity in this, but it depends upon your start date anniversary.

If there is an extension to 8 years, the three-year review would move to four years.

This track has been approved by Faculty Council and is going to the full Senate.

Dr. Drake also announced that Dr. Bruce Justman is the new Faculty Councilor for the College, in that we have grown in size sufficient to have two councilors.

4.2 Building Transformation Update – Dr. David Johnsen and Mr. Scott Arneson

Dr. Johnsen presented some details of the proposed DSB transformation, and the artist’s rendering and plans of the changes in the building. The reason is that the current building is in good condition, especially for a 30-year-old building, and it is in a good location relative to the rest of the health sciences.
There would be an extension of the South Building toward the parking areas and drive (see below in Print Layout View). The extension would be in keeping with the current building design.

The next phase would be a refurbishment of the three floors of the clinic and the fourth floor in research and probably some on the first floor of research.

The cost is probably in the $40-50M range and probably 7-10 years. Approximately $15M will need to be raised from private sources. The university and the state are coming up with the rest. We ask people what they needed. This all added up to about $60-70M. This was beyond what we will be getting. We will not be able to gut whole floors, the way we did for the Simulation Clinic.

In Phase 1, there will be an addition. We hope to break ground in 2 years.

Additional space is a major consideration. The third and fourth floor of the addition will have sufficient clinical space to use while other areas will be refurbished. This permits clinics to continue to function as they are refurbished, and no area will need to be shut down during renovation.
There will be direct access into the third floor with a covered entry so that patients with special needs can be accommodated. So, Phase 1 is the actual addition.
On the third and fourth floor, there may be a different configuration of the clinical and office spaces.

There will be spaces for student teaching.

For Phase 2, we plan to upgrade the clinical areas. New clinical areas will have a higher priority than office space. We would like to arrange these so that there will be flexibility in how we use the clinical areas, although there are limitations based on the building itself. We will try to create some larger units, but there are limitations on how much expansion is possible without losing an appreciable number of clinical units.

In as much as research has gone from the era of microscopy to the era of molecular biology, how the research areas are configured has changed. We are considering going from a number of small rooms to much more open space, although this has not been finalized.

There may be some changes and refurbishing for wet labs.

There are no plans for the white areas on the South Side at this time.

Based on what other schools have indicated, it seems that refurbishing is in the $35-50M range, whereas new buildings are in the $100M range. Thus, it would appear that our plans coincide.
On the second floor, although there may be upgrading of things in the Simulation Clinic, no major tearing out of areas is contemplated.

There will be no specific assignments of spaces at this time. There will be a second cycle of meetings with faculty and administration and architects.

These drawings are specific enough for fundraising but are not the final form.

There will be other refurbishments on the first floor but not as part of this project.

### 4.3 Research and IADR Meeting – Drs. Justine Kolker and Christopher Squier

Dr. Kolker attended the AADR Council Meeting where the pros and cons of a joint AADR and ADEA meeting were discussed. There was a huge cost and complex arrangements. Some people were unable to attend simultaneous meetings, whereas others found it good to see both meetings at the same time.

Also, AADR wants to put forth a statement on stem cell research. 4,000 questionnaires were sent out, and 26 responses were received. AADR will support the use of stem cell research.

Dr. Squier presented an update on the College’s participation in the recent IADR meeting.

The College had the largest number of papers presented at IADR by a significant margin. Indeed, for the second year in a row, the University of Iowa College of Dentistry was presented a Certificate of Recognition by the AADR National Student Research Group for submitting the most student abstracts for the 2007 AADR/CADR Annual Session in New Orleans.

Many of The University of Iowa’s participants received awards:

- Dr. Clark Stanford received the 2007 Research in Prosthodontics and Implants Award.

- Dr. Janet Guthmiller received the 2007 National Student Research Group Mentor Award.

The following Iowa dental students won 2007 AADR Bloc Travel Grants:
Jessica Boehrs (D2)
Lindsay Compton (D3)
Matthew Henry (D3)
William McBride (D1)
Dustin Smolenski (D2)
Scott Steward-Tharp (D2)
Joseph Tesene (D2)

Lindsay Compton (D3) won the 2007 Caulk/Dentsply Award.

Brian Nunez (D2) received the J. Morita Corporation Award for Geriatric Oral Health Research.

Two fellowships were given:

Jessica Boehrs (D2) received a fellowship from Sunstar Americas, Inc.
Joseph Tesene (D2) received a fellowship from the ADA Health Foundation.

Dr. Janet Guthmiller received an award for the largest number of returning students who presented in New Orleans.

Dr. Andrew Lidral was a co-author on a paper by Dr. Adriana Modesto that received the 2007 William J. Gies Award in the Clinical category for the best paper published in the Journal of Dental Research.

Dr. Squier also mentioned the research awards, grants and contracts that some of the faculty have received:

Dr. Clark Stanford has negotiated a five-year multi-million dollar contract with Astra Tech. The contract will address basic and translational science and clinical issues regarding the design, technology and clinical use of dental implant therapy.

Dr. David Drake was awarded a $3.2M NIH grant to examine oral health disparities in caries among Native American population in South Dakota.

Dr. James Wefel received a $5M NIH award to continue his research on the early detection of caries. Dr. Dawson received an R21 award at $400,000.

The Institutional Research Training Program (T32) received the highest score among competing applications and will likely be funded.
5.0  Unfinished Business

There was no unfinished business.

6.0  New Business

6.1  ADEA’s Commission on Change and Innovation in Dental Education – Dr. Michael Finkelstein

Dr. Finkelstein presented an overview of the American Dental Education Association’s Commission on Change and Innovation in Dental Education’s (CCI) plans. He stated that the goals of the CCI were to:

• facilitate a national discussion of curriculum and share strategies that foster innovation in dental education.

• open communication, dialogue and debate.

• foster appreciation for diversity of educational methodologies and curricula.

• encourage entrepreneurship: alternative models of dental education and strategies for recruiting and maintaining faculty.

• focus on tangible outcomes and assessment of degree to which outcomes were obtained.

As part of this process, the CCI made four assumptions:

1. Diversity of dental school curricula is a strength of dental education.

2. Dental education must remain firmly rooted in scientific discovery.

3. Dental education must change significantly to develop students into life-long, independent learners and critical thinkers. Dental students are graduate students.

4. Dental education is influenced by a number of organizations including:

   • Dental educators and administrators
   • Commission on Dental Accreditation
   • ADA Council on Dental Education & Licensure, including National Boards
   • Joint Commission on National Dental Examinations (dental licensing agencies)
Dr. Finkelstein also identified the 4 CCI liaison people from Iowa. The mixture was to be 2 senior and 2 junior faculty members, 2 of whom should be clinical and 2 basic sciences faculty members. The current members are Drs. Rick Williamson, D.C. Holmes, Teresa Marshall and Mike Finkelstein. The responsibilities of the liaison members were to:

- Disseminate CCI reports and publications
- Attend CCI meetings at ADEA annually
- Attend yearly summer workshop
- Tell CCI about our curriculum innovations
- Inform our faculty of innovations at other schools
- Sponsor or conduct annual professional development programs for faculty

More information can be obtained at

http://www.adea.org/cci/

7.0 Adjournment

Dr. Johnsen adjourned the meeting at 7:09 p.m.

- Minutes by Dr. Axel Ruprecht
1.0 Call to Order – Dr. David Johnsen

Dr. Johnsen called the meeting to order at 6:00 p.m. in Galagan B.

2.0 Appointment of New Faculty Secretary – Dr. David Johnsen

Dr. Johnsen recommended the appointment of Dr. Axel Ruprecht as secretary of the faculty. There were no objections.

3.0 Review, Correction, Approval or Disposition of Minutes – Dr. David Johnsen

The minutes of the October 24, 2006 meeting were approved as distributed.

4.0 Announcements

Dr. Galen Schneider, DEO of Prosthodontics, introduced Dr. Peter Lund, who returned to the Department of Prosthodontics as an Associate Professor January 1, 2007. Dr. Lund was a member of the department from 1987-1993, and then was the Graduate Program Director at the University of Illinois Chicago from 1993-1997. He then entered private practice in Minneapolis from 1997-2007. His research interests include color analysis, clinical implant trials, and educational research aspects. Dr. Schneider stated that the department was excited to have him on board. The faculty members present welcomed Dr. Lund back.

Dr. Johnsen recognized the newly elected OKU faculty and staff members. They were Drs. Manuel Gomez, Sandra Guzman-Armstrong, James Harris, Marcela Hernandez, Yung-Shen Huang, Lewis Humbert, Reed Parker, Christopher Tyler, Karin Weber-Gasparoni, and Mr. Doug Aunan.

Dr. Johnsen also announced that for the second time in 16 months, the cover story of the Journal of the American Dental Association, which goes to 167,000 dentists, is by Iowa faculty members:


5.0 UI Presidential Search – Dr. David Johnsen

Dr. Johnsen updated the faculty on the progress of the search committee, which he has been selected to chair. There are 13 members on the committee. The general feedback is that the committee is made up of good people.
The interview process will be on campus and over a short period of time, rather than one per week.

6.0 Updates

6.1 Health Care Legislative Hearing – Dr. Peter Damiano

Dr. Pete Damiano reported on a presentation that he and Dr. David Johnsen gave to the Joint Health Appropriations Subcommittee of the Iowa Legislature on February 6 regarding a bill designed to provide a dental home to all children insured through the Iowa Medicaid program. The presentation focused on proposals to increase dentist participation in Medicaid by “carving-out” the dental insurance portion of the Medicaid program to a private insurance carrier who will reimburse dentists at rates closer to usual and customary fees as well as a new loan repayment program to attract students to underserved areas in the state.

6.2 Electronic Health Record – Mr. David Reynolds

Mr. Reynolds, Director of Dental Informatics, provided information on the evaluation and selection of an Oral Health Information System/Electronic Healthcare Record (OHIS/EHR) for the College of Dentistry. The systems being evaluated are Windent (the current system), axiUrm and Salud. In response to several questions, Mr. Reynolds explained that whichever system is selected, it will manage patient registration, scheduling, treatment planning and delivery and billing. Conversion to a new system replacing current functionality will be the first transition. Our aggressive target is early 2008. Following the clinical system transition will be the transition to Electronic Health Records. Once the vendor is selected, specific timetables will be announced. In response to a question by Dr. Ron Ettinger, Mr. Reynolds explained that it was not possible to piggy-back on the hospital or VAMC systems, as they were not dental systems, and the systems we are looking at are designed to meet the needs of dentistry or dental schools educational missions.

6.3 Digital Imaging Rollout – Dr. Axel Ruprecht

Dr. Ruprecht said we have spent the last eight and a half years designing what we want in digital imaging and how to implement it in the clinics. The committee evaluated various PACS systems and selected MiPACS, which now seems to be the choice of a large number of other schools, and was just selected by the Air Force. They selected software not linked to a specific capture system. The capture systems selected were Schick (DR) and ScanX (CR).

Dr. Ruprecht provided an update of the rollout plan. They have begun rolling out implementation with the students. Last years the D1s were the
first class to make part of their radiographs on the skull using the digital systems. The Operative clinics have been made digital viewing enabled. The capture systems for the third floor main radiology clinics (all but the DAU/DEOF units in Family Dentistry) have been ordered. The jacks in Family Dentistry have been activated; Pediatric Dentistry is next. Parallel to that, things are happening in the Hospital Dental Institute, Hawkeye Oral Surgery, Oral Surgery and Orthodontics, as well as the hospital ASC operatories.

D2 and D3 students have been viewing digital images in the main OMR interpretation room.

Once these are up and running, Pediatric Dentistry is next.

Also, we are changing our idea that an area might be either DR or CR, to that an area will probably be both CR and DR. Using MiPACS also allows us to mix and match DR and CR images in one template.

The plan for the digital imaging rollout in the College is expected to take two years, beginning last July (2006). This will spread out the cost and provide time to make necessary modifications.

There was a question about if there is a plan to digitize the existing analog images. Dr. Ruprecht said there is no reason to digitize all existing analog images. We can do this on a selected basis, but we will retain the ability to look at film-based or analog images for a long time. Future images will be digital.

Dr. Ruprecht emphasized that a major objective is to eliminate any major disruption in implementing digital imaging in the College and that the rollout plan was subject to modification to attempt to achieve this.

Dr. David Gratton asked if there was any progress in the consideration of whether we should acquire a cone beam CT (CBCT) unit in the College. Dr. Ruprecht said that we were still reviewing this, and that there was a meeting scheduled within the next two to three weeks to discuss this further. However, MiPACS can handle storage of CBCT images.

During further discussion, Dr. Ruprecht indicated that radiology reports, although still printed out for the paper CRT, have been digital for about 2 years and are available in Windent. The reports also indicate if the images are digital or analog.
6.4 **Report on Faculty Activities Nationally – Dr. David Johnsen**

Dr. Johnsen announced that faculty members continue to be active in influencing dentistry outside the College of Dentistry. He stated that Dr. Clark Stanford was the Chair of the ADA Council on Scientific Affairs and that Dr. Richard Burton chaired the FDA Dental Products Panel.

6.5 **Report on FDA Dental Products Panel of the Medical Devices Advisory Committee Activities – Dr. Richard Burton**

Dr. Richard Burton, who first became involved with the FDA as a consultant in 1994 when various TMJ devices began to show problems, has taken over the chair of the FDA Dental Products Panel of the Medical Devices Advisory Committee. Dr. Burton explained that this group, which falls under the Center for Devices and Radiological Health, looks at anything from denture creams to bone augmentation devices. He provided a description and explanation of how the FDA functions to regulate materials and devices, and he provided an explanation of how science and politics interact in decisions to approve or disapprove various material and devices that individuals or groups want to see approved for sale or banned from use in the USA. There is a division for dental products that has about 25 staff members including dedicated statisticians and five other people with true dental backgrounds such as dental materials. The division is located in Rockville, MD.

Dr. Burton stated that he had the task of chairing the amalgam debates, which had passionate groups presenting their views. The ADA participated in these discussions.

6.7 **Report on the Regents Budget – Dr. David Johnsen**

Dr. Johnsen reported that he had seen the first budget for the year, and there was a salary bill in the Regent’s budget, meaning that salaries will not come at the expense of other areas of the budget.

7.0 **Unfinished Business**

There was no unfinished business.

8.0 **New Business**

There was no new business.

9.0 **Adjournment**

Dr. Johnsen adjourned the meeting at 7:00 p.m.

- Minutes by Dr. Axel Ruprecht
1.0 Call to Order – Dr. Johnsen
Dr. Johnsen called the meeting to order.

2.0 Review, Correction, Approval or Disposition of Minutes – Dr. Johnsen
The minutes of the October 25, 2005 meeting were approved as distributed.

3.0 Announcements

3.1 ADEA Membership – Professor Cunningham
Professor Cunningham updated the group on the free ADEA membership that began January 1, 2006. To date, 44% of College of Dentistry faculty have joined ADEA, which falls short of our membership goal of 100%. Professor Cunningham instructed the group to activate their membership online. Members receive the Journal of Dental Education and the Bulletin of Dental Education online. Professor Cunningham clarified the difference between free ADEA membership and the free registration for new faculty to attend the 2006 annual session in Orlando. Registration forms should be sent to the Dean’s office soon, and Jan will distribute to interested new faculty.

3.2 Senator Grassley Visiting DSB
Dr. Johnsen learned this afternoon that our students will meet with Senator Charles Grassley on Thursday, January 19. He encouraged faculty to greet Senator Grassley while he is in the building. Dr. Chalkley said that students invited Senator Grassley to come two years ago, and we were recently notified that he is available on Thursday. Dr. Chalkley said Senator Grassley does not plan to give a presentation; however, she asked faculty to forward to her any comments or questions for him.

4.0 Audience Response System Demonstration – Dr. Finkelstein and Mr. Sean Kelley
Mr. Sean Kelley gave a brief background of the audience response system. He said Dr. Tom Southard saw an audience response system at Ohio State University. After examining several possibilities, Sean chose the TurningPoint System, which is the one used by Ohio State.

Mr. Kelley demonstrated the interactive TurningPoint slide, providing ten participants in the audience with keypads to respond to questions on each slide. He demonstrated how the TurningPoint System operates in the same way as PowerPoint. The system has the ability to output reports into Excel. Drs. Finkelstein and Maze have used the pilot system in class, and student response to this system has been positive. He said this system evokes a lot of discussion and works well in large lecture classes. We are currently
evaluating a ten-seat package. Sean asked for feedback from faculty on interest in utilizing the system, particularly in the Galagan Auditorium.

Dr. Finkelstein has used this system in the Junior Seminar where there are nine students. He demonstrated how he inserts cases into his lecture to stimulate audience participation.

Mr. Arneson asked about the cost of the system. Sean said there are various pricing models. Keypads are $45 each, the antenna is $200, and the license for the keypad is $16. It would cost approximately $5,140 to outfit a 76-seat classroom.

5.0 Faculty Council Update – Dr. Drake

Dr. Drake gave a brief background of the Faculty Senate. It is a representative body for the faculty at the University of Iowa. The Faculty Council is composed of elected Faculty Senators who meet to discuss issues of current importance and to prepare suggestions for submission to the Faculty Senate. The College of Dentistry has four Faculty Senators: David Drake, Bruce Justman, Karin Southard, and Steve Vincent.

Dr. Drake updated the group on current topics. He said central administration wants to revisit the tenure clock issue, and the Provost plans to establish a Tenure Clock Task Force. This will be a large task force. Dr. Drake also said there will be a new document with a new way of doing criminal background checks at the point of hire. It is currently in draft form.

At today’s Faculty Council meeting, Dr. Drake said that Dr. Johnsen and Dr. Edwin Dove presented a report of the Special Compensation Task Force. The charge of the task force was to develop guiding principles that would tie into the UI Strategic Plan to assist colleges in developing compensation plans. The Provost is supportive of this, and it will next be brought to the Faculty Policies and Compensation Committee. Dr. Drake said that the College of Medicine already has a plan in practice and the College of Pharmacy has a plan approved. Dr. Johnsen will present the report to College of Dentistry faculty soon. Dr. Aquilino asked why the College of Dentistry must wait for the Faculty Senate decision before we have a plan in practice. Dr. Johnsen said the College of Medicine and the College of Pharmacy received approval early. On the clinical side, the College of Dentistry has a plan in place; however, we have not yet implemented a plan on the research side. Dr. Drake asked for feedback to take to the Faculty Council. He will keep the group informed of further developments.

6.0 Updates – Dr. Kanellis

6.1 Dental Educational Operatory of the Future

Dr. Kanellis said the final report of the Dental Educational Operatory of the Future Task Force is available on the shared drive (I:\Share\Clinic Administration\Operatory of the Future). In the same folder, there is a PowerPoint presentation from Adec showing operatory layouts and design parameters and an evaluation form.
Dr. Holmes urged interested faculty to contact Alysha Gilpin to schedule time in the new operatories and complete an evaluation. He said the task force would like to have feedback soon. They do not intend to do statistical analysis but rather solicit input on what works and what the concerns are. Dr. Kanellis recommended evaluating dental equipment at the Chicago Mid-Winter Meeting using our evaluation form.

6.2 Patient Records
Dr. Kanellis drew attention to the green and yellow forms distributed at the beginning of the meeting. The goal is to eliminate the four-page white forms that new patients currently fill out. The new Health Questionnaire will be sent to patients in the mail. The back page, medical summary and updates, will be used in-house for updates. Dr. Kanellis asked faculty members to review the portions that pertain to their department and provide feedback. In the near future, we will transition to electronic forms.

6.3 Faculty Case Manager Program
This will be discussed at another time.

7.0 CAPP Committee – Summary of Activities – Dr. Doering
Dr. Doering highlighted the charge of the Collegiate Academic and Professional Performance Committee. The Committee has the authority and responsibility to communicate and recommend the collegiate criteria for retention, promotion and graduation in the College of Dentistry. The Committee monitors the academic and professional progress of every dental student and approves or delays promotions. The Committee issues letters of commendation for academic excellence. The Committee establishes criteria and holds review hearings for students showing signs of academic difficulty. When necessary, the Committee conducts inquiries and hearings and recommends to the Dean the dismissal of students when all other appropriate courses of action have been exhausted.

Dr. Doering summarized the activity of the CAPP Committee for the last five years. They averaged five meetings per year. He noted that there has been a drop in academic probation. There have been no dismissals reversed.

Dr. Doering commented on grading. He emphasized that a “D” grade is passing. It meets the minimum essential performance. An “F” grade indicates that the professional achievement level is unsatisfactory.

Dr. Doering recommended defining in the course syllabus the general rule that students are not supposed to miss class or clinic. Every course should support professional behavior.

Dr. Chalkley asked Dr. Doering to talk about dealing with problems at the course level. He said that the CAPP Committee cannot resolve the faculty’s problems. He urged faculty to handle the problem at the course director level. It is critical to document the problem for the
student file. If a problem is recurring, the CAPP Committee will take this into consideration.

Dr. Johnsen thanked the entire CAPP Committee for their very important work.

8.0 Unfinished Business
There was no unfinished business.

9.0 New Business
There was no new business.

Dr. Johnsen adjourned the meeting at 7:15 p.m.

Minutes by Deb Abbott and Jan Swartzendruber
1.0 Call to Order – Dr. David Johnsen

Dr. Johnsen called the meeting to order at 6:00 p.m.

2.0 Review, Correction, Approval or Disposition of Minutes – Dr. David Johnsen

The minutes of the April 10, 2007 meeting were approved as distributed.

3.0 Appointment of Faculty Secretary – Dr. David Johnsen

Dr. Johnsen announced that, with Dr. Axel Ruprecht’s agreement, he has been reappointed as Faculty Secretary.

4.0 Announcements

There is a meeting with the Board of Regents tomorrow for approval of plans to proceed with the building renovation and enlargement.

President Mason visited the building for 1 hour. She was impressed with the College.

Department heads were reminded to tell their department members that they must enroll in the upcoming health plans, electronically. It will not happen automatically.

The Dean presented the ADA Golden Apple Post Doctoral Award for Inspiring Students in Graduate Studies to Dr. Mike Kanellis.

The dean recounted what was done to celebrate the 125th Anniversary of the College of Dentistry. There was a symposium, luncheon at IMU, a monograph, and a 2-minute CD. The CD was entered in a national competition. It came in first in the country as a single event for advancement. The CD was played for the faculty.

5.0 Updates

5.1 Performance Feedback to Staff Covered by a Bargaining Unit – Ms. Cynthia Joyce, Ombudsman.

As a follow-up to the Faculty Retreat, where the topic of Conflict Management came up, Ms. Cynthia M. Joyce, University Ombudsman, was asked to speak to the Faculty about performance feedback to staff
covered by a bargaining unit. Ms. Joyce spoke on performance feedback and asked what the obstacles were so that she could figure out the problem.

An active discussion of specific and general issues on dental assistants followed.

Ms. Joyce suggested that a small committee be formed to make suggestions. Faculty members can e-mail Cynthia Joyce at cynthia-joyce@uiowa.edu to volunteer for the committee.

5.2 Ethical Behavior and Student Code of Conduct – Drs. Michael Finkelstein and Yvonne Chalkley

Dr. Michael Finkelstein led a discussion about a student code of conduct. He mentioned that there have been some unfortunate experiences at some US dental schools, which led to an ADA symposium on ethics.

We have expectations, and we must inform students.

There is a Code of Conduct in the student’s handbook. It was sent to faculty for comment. Students also receive the ADA handbook. Also the American College of Dentists has a set of Ethics that can be given to students. There is also a wallet card, presumably for use in an ethical emergency. The UK has published standards for dentistry. The UI has a student life code. The Carver College of Medicine and Tippie College of Business have standards for students.

Dr. Finkelstein said that the objective for tonight was to discuss revisions to our Code of Conduct to give to the CAPP to revise for the January meeting.

An active discussion followed on general and specific issues related to students and ethics. The CPP Committee is working toward a set of recommendations.

6.0 Unfinished Business

There was no unfinished business.

7.0 New Business

Dr. Johnsen remarked that the Alumni Weekend and a tailgate was last weekend. Alumni overwhelmingly felt good about being UI alumni and dentists. They feel that the CoD is a great resource for the state.

Cover story of one of the JADA issues was by Ron Ettinger.
A plea was made for volunteers at the free medical dental clinic.

Dr. Fakhry announced that a former Periodontics resident, Dr. Mike Franzman, won the first prize in the Orban competition.

Dr. Hellstein announced that one of their Oral and Maxillofacial Pathology residents, Dr. Lam-Ubol, just got one of the highest marks in the board exam.

Dr. Ruprecht announced Dr. Tunde Bamgbose, an Oral and Maxillofacial Radiology resident, and three colleagues in Lagos just won a Nigerian research award.

8.0 **Adjournment**

Dr. Johnsen adjourned the meeting at 7:05 p.m.

- Minutes by Dr. Axel Ruprecht