

Clinical Affairs Committee Geraldine Collins-Bride, RN, MS, FAAN, Chair

2019-2020 Annual Report

Primary Focus Points for the Year:

- Amending the Division Bylaws to Facilitate CAC Reviewing UCSF Health's Affiliations
- Advocating for a Faculty Space in the Clinical Facilities at Mission Bay
- Planning for Faculty Engagement at the San Francisco VA Medical Center
- COVID19 Response and Recovery

Issues for 2020-2021:

- Initiating Reviews of UCSF Health's Affiliations with Other Health Care Providers
- Supporting Clinical Faculty at Affiliate Sites
- Equitably Addressing the Impact of COVID on Faculty Advancement and Promotion
- Supporting Faculty with Dependent Care Responsibilities
- Finding Ways to Dismantle Systemic Racism at UCSF
- Improving Systemwide Representation of Clinical Faculty

2018-2019 Members

Geraldine Collins-Bride, RN, MS, FAAN, Chair

Kathleen Liu, MD, PhD, Vice Chair

Jennifer Cocohoba, PharmD
Lukejohn Day, MD
Anne Fabiny, MD
Steven Polevoi, MD
Gaurav Setia, DDS
Nilika Singhal, MD

Ex officio members

Sue Carlisle, MD, Vice Dean
Zuckerberg San Francisco General
Joel Criste, CEO *Canopy Health*
Mike Robinson, CEO *Canopy Health (named
CEO in January)*
Kenneth Feingold, MD
Veteran's Affairs Medical Center
Gina Intinarelli, PhD, MS
UCSF Health
Kelley Meade, MD
Associate Dean of Academic and Clinical
Affairs, *Benioff Children's Hospital Oakland*

Number of meetings: 9

[CAC Landing page](#)

Academic Senate Staff:
Kristie Tappan
kristie.tappan@ucsf.edu

Permanent Guests

Steven Hetts, MD, Faculty Representative
Regents Committee on Health Services
Lawrence Baskin, MD, Member
*Parnassus Heights Hospital Replacement
Committee*
Kirsten Kangelaris, MD, Member
*Parnassus Heights Hospital Replacement
Committee*

Systemwide Business

Strengthening the Voice of Clinical Faculty Systemwide: CAC worked to strengthen the voice of clinical faculty across the UC system. CAC reviewed and revised a draft charter for an Academic Council Special Committee on Health Sciences. Unfortunately, there was inadequate support in Academic Council for this Special Committee. Academic Council Chair Kum-Kum Bhavnani encouraged UCSF to restart the informal Clinical Affairs Advisory Group (CAAG) that existed in 2017 and 2018. Former CAC Chair Steven Hetts agreed to serve as the Chair and Chair Collins-Bride joined as a member. With their support, the Group recruited 19 members from the six health science campuses. Chair Collins-Bride and Dr. Hetts shared information about UCSF with leaders at other health sciences campuses and brought back information from UCSD, UCLA, UCD, UCR, and UCI to CAC. In the coming year, CAC will continue to advocate for better representation for clinical faculty in the Academic Senate and to push for a systemwide health sciences committee.

Working Group on Comprehensive Access Chair Report: UC President Janet Napolitano established the Working Group on Comprehensive Access to evaluate whether and how UC Health should affiliate with other health care providers. President Napolitano created the Group following a controversial proposed affiliation between UCSF Health and Dignity Health (a Catholic healthcare provider). The proposed affiliation raised questions about reproductive care, gender-affirming care, and end-of-life care, all of which are restricted by Catholic providers. The Working Group was tasked with “ensur[ing] UC’s values are upheld when its academic health systems collaborate with other health systems[.]” The Working Group was unable to come to a consensus, and the Chair’s Report presented two options: allow affiliations with providers with policy-based restrictions or prohibit them.

Several UCSF Senate committees weighed in and submitted letters to Division Chair Majumdar. Some committees believed affiliations should go forward and others were more hesitant about affiliating with faith-based providers. CAC offered itself as a conduit for faculty to have more input into the affiliation process at UCSF in its letter to Division Chair Sharmila Majumdar. CAC’s letter is included with this report as Appendix 1. In her letter to Academic Council, Division Chair Majumdar advocated for local and systemwide faculty reviews of affiliations and for the creation of a joint systemwide Senate-Administration “Clinical Affairs Committee” be established within UC Health or the Systemwide Senate. The Regents planned to discuss health care affiliations at their May 2020 meeting, but the discussion was delayed by the COVID-19 pandemic, and the Regents did not make any decisions related to health care affiliations this year.

Automatic Conferral of Emeritus Status: A change in Regents policy limited automatic conferral of emeritus status upon retirement to faculty in the Ladder Rank series. CAC wrote a letter to the Division opposing this change. The Division also came out against the change and asked for emeritus status to once again be automatically conferred on all retiring Senate faculty (as opposed to only Professors and Associate Professors in the ladder rank). The systemwide Academic Council agreed and requested that emeritus status once again be automatically conferred on all Senate faculty. CAC’s letter to Division Chair S. Majumdar regarding the automatic conferral of emeritus status is included as Appendix 2.

Divisional Business

Bylaw Amendment: CAC proposed an amendment to Division Bylaw 175 that defines CAC’s membership and duties. CAC sought to add the duty of reviewing UCSF Health’s affiliations with other health care providers to its responsibilities and to include the Chairs of the Committees on Faculty Welfare and Equal Opportunity in affiliation reviews. CAC worked with R&J to revise the proposal. The collaboration resulted in additional proposed changes to Division Bylaw 175 that clarified the roles of members and guests and strengthened the voice of Senate-appointed faculty on CAC. The proposal was approved by R&J and then by Executive Council. It was submitted to the Division for a vote and was approved. The final proposal is included as Appendix 3.

Resources for Unique Clinical Phenotypes: CAC advocated for developing career tools with Vice Provost Academic Affairs Brian Alldredge to support faculty members with unique “clinical phenotypes” who

have roles like program development, health system improvement, or clinical scholarship development. CAC met with VPAA Alldredge and discussed confusion among faculty about promotion given their varied career pathways. VPAA Alldredge explained that the expansion of UCSF Health, along with the significant increase in the number of UCSF's affiliations has created unique challenges. The size of the faculty has increased 20% over his five years. The infrastructure need to manage faculty life (appointment, advancement, even misconduct) has not grown at the same pace. There are also challenges with bringing people into the UCSF culture, as well as adapting that culture as the institution changes. He has also observed that some faculty groups feel their work is not valued, even when people in the group are advancing. The negative messages seem to come from peers, not from CAP members nor the VPAA Office. CAC suggested the following ways that UCSF could better show it values all faculty phenotypes, along with suggestions on how faculty can better show their own value: (1) make default CV headings that show that different types of work are valued, (2) encourage faculty to explicitly state when they are applying for promotion "I spend x% of my time doing x, y% of my time doing y" to help CAP understand what faculty are doing and calibrate their accomplishments; (3) explore CV coaches, (4) encourage faculty to put things in their CV – put it in "other" if they are not sure where it fits – and reference it in text elsewhere; (5) improve connections between faculty at affiliate sites with longer-standing UCSF faculty who know the system and can be mentors; (6) update help links on the Academic Affairs website to provide better cues and prompts; (7) encourage local conversations and change within departments so that non-traditional contributions are better valued; and (8) increase HS Clinical representation at the department level.

UC Health Updates and the 5 Year Strategic Plan: Throughout the year, member G. Intinarelli provided the committee with updates on UCSF Health and the development of the 2025 Strategic Plan. The process for developing the five year plan included thinking about (1) complex care leadership and how UCSF can grow its share of the tertiary/quaternary care market, (2) developing UCSF Health's network with an eye toward making UCSF quality care available within 20 miles or 20 minutes for UCSF's service population; (3) innovating at scale, (4) addressing health equity, (5) addressing behavioral health, and (6) incorporating the academic and research mission across the system.

Chancellor's Fund and the VA Clinical Affiliate Faculty Engagement (CAFÉ) Event: CAC submitted a proposal and received funding through the Chancellor's Fund to host another Clinical Affiliate Faculty Engagement (CAFÉ) event. Previous events at Zuckerberg San Francisco General Hospital and Benioff Children's Hospital Oakland were successful in sparking collaboration and supporting faculty. CAC planned to host a similar event with the San Francisco VA Medical Center this year. CAC planned to present the UCSF Health 5-year strategic plan and get input from VA faculty about the plan before it was finalized. Unfortunately, the COVID-19 pandemic derailed the event and the committee was unable to host it in the spring of 2020 as planned.

Mission Bay Faculty Lounge: CAC met with Senior Associate Vice Chancellor for Real Estate Brian Newman to discuss the need for faculty space in the clinical facilities at Mission Bay and to discuss opening the Parnassus lounge to all faculty rather than limiting it to School of Medicine faculty. Mr. Newman oversees space, campus planning, construction, and related topics for UCSF. Committee members emphasized that there is not easily accessible space at Mission Bay where faculty members can do simple things like store their laptops while they are consulting on cases or microwave a lunch. Mission Hall does have some useful space for working and meetings, but that space is not always accessible to faculty (no badge access), and it is not convenient when they are working in the hospital and have limited time. Ideally, a faculty lounge/work/storage space would be in each hospital building. It would include lockers where faculty could safely store belongings including laptops. It would have work space where faculty could plug in and be productive between rounds or consultations. It would also have space where faculty could take calls. Last, it would give faculty a place to collaborate with each other in person.

Mr. Newman advised that space is limited at Mission Bay and that space in the hospital is particularly hard to get. There may be space in Block 33, Block 34, or in Gateway. Mr. Newman agreed to survey existing space at Mission Bay and how it is utilized to determine whether there is existing space that could meet the identified needs. If not, the next step would be to try to create the space. B. Newman then spoke with Josh Adler about the Parnassus faculty lounge, and J. Adler referred B. Newman to Diane Sliwka who led the effort to create the Parnassus lounge. B. Newman then planned to take CAC's request to the Capacity

Planning Committee chaired by Sheila Antrum, which acts as the hospital space committee. Unfortunately, further efforts to advance this project were stopped by the COVID-19 pandemic. Despite monthly requests to B. Newman for an update, once the pandemic started, CAC was unable to get more information about this effort.

COVID-19 Check Ins and Outreach about Care Remaining Available at UCSF: CAC used its meetings to keep members up to date about how the campus, health system, four schools, and departments were handling the challenges of the COVID-19 pandemic. The committee discussed the importance of making sure UCSF's patients know that UCSF is still providing care and Chair Collins-Bride wrote to Shelby Decosta at UCSF Health to encourage this type of outreach.

Faculty Objections to Switching to Remote Scribes: CAC wrote a letter to the Division Chair regarding UCSF Health's decision to terminate its contract with Scribe America and switch to an exclusively remote scribe work force. This decision caught faculty off-guard and was particularly upsetting for faculty who use, train, and practice with scribes. CAC expressed disappointment with the decision and with the failure to engage with faculty before the decision was made, and those concerns were passed along to the administration. CAC's letter to Division Chair Majumdar is included as Appendix 4.

Going Forward

The Clinical Affairs Committee will focus on the following issues in 2020-2021:

- Initiating Reviews of UCSF Health's Affiliations with Other Health Care Providers
- Supporting Clinical Faculty at Affiliate Sites
- Equitably Addressing the Impact of COVID on Faculty Advancement and Promotion
- Supporting Faculty with Dependent Care Responsibilities
- Finding Ways to Dismantle Systemic Racism at UCSF
- Improving Systemwide Representation of Clinical Faculty

Appendices

1. CAC's Letter to Division Chair S. Majumdar regarding the Working Group on Comprehensive Access Chair's Report
2. CAC's Letter to Division Chair S. Majumdar regarding Automatic Conferral of Emeritus Status
3. CAC's Proposal to Amend Division Bylaw 175
4. CAC's Letter to Division Chair S. Majumdar regarding Scribes