

Announcement
Faculty Senate Meeting
December 4, 2007

University Sponsored Child Care Task Force
Report to Faculty Senate
November 26, 2007

In late September 2007 Provost Marilyn Sheerer called a meeting of the Child Care Committee that issued *Providing Child Care at East Carolina University: A Preliminary Report* in October 2006. This committee was appointed by Provost Smith in April 2006.

Drawing membership from this committee, Provost Sheerer formed the University Sponsored Child Care Task Force and charged this group with responsibility for moving the university sponsored child care initiative forward. This task force includes:

- Mr. Scott Buck, Associate Vice Chancellor for Administration & Finance - Business Services
- Dr. Cynthia Johnson, Chair of the Department of Child Development and Family Relations
- Ms. Nan Lee, Teaching Instructor, Department of Child Development and Family Relations
- Dr. Jane Manner, Associate Professor, Department of Curriculum and Instruction
- Dr. Rick Niswander, Dean of the College of Business
- Dr. David A. Powers, Professor Emeritus, College of Education
- Dr. John Reisch, Associate Professor, Department of Accounting
- Dr. Mark Sprague, Associate Professor, Department of Physics
- Ms. Terry Stansbury, ECU Staff Senate

The University Sponsored Child Care Task Force began meeting in October 2007. The task force met with representatives from Pitt County Memorial Hospital to discuss the hospital's child care program. Ms. Jennifer Congleton, Administrative Employee Recognition and Retention Director for Pitt County Memorial Hospital, spoke with task force about her role as liaison with the hospital's child care program. Ms. Becky Scramlin, Director of *A Child's Place* (Pitt County Memorial Hospital's child care program), shared information about the design and operation of the hospital's child care program. Mr. Nigel Birtwistle, Client Services Director for Bright Horizons, came to Greenville to speak to the committee on the child care program options available through his firm. Representative from the City of Greenville City Manager's Office and from Pitt Community College have joined the task force for a number of these meetings.

Based on information gathered during these presentations in October and November, the task force is working closely with Mr. Scott Buck's office to design a Request for Proposals. The task force has set mid-January 2008 as a target for completing and distributing a Request for Proposals.

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I would like to take a moment to update you with the progress that has been made by the Dean's search committee. The members of the committee are as follows:

Daniel Moore, MD, Chair (non-voting)
Lorrie Basnight, MD
Joel Butler, Board of Trustees
Robert Carroll, PhD
David S. Brody, Board of Trustees
Kenneth Deville, PhD, JD
Bruce Ferguson, MD
Donald Fletcher, PhD
Gloria Frelix, MD
Glen Gilbert, PhD (non-voting)
Ted Delbridge, MD
Suzanne Kraemer, MD
Bob Lust, PhD
Kaye McGinty, MD
Angela Mebane, MD
David Musick, PhD
Mark Newell, MD
Kathleen Previll, MD
Lisa Sutton (non-voting)
David Taylor, PhD

Over the last weeks we have reviewed proposals from several search firms, completed interviews of the search firms and contracted with Witt-Kieffer. We had Anne Zenzer and Claudia Teschky, the Witt-Kieffer consultants, present at the Dean's search committee meeting on Wednesday night (November 14).

The advertisement for the Dean's position has been sent to several national medical journals for publication.

**JAMA
New England Journal of Medicine
Journal of National Medical Association
Academic Medicine**

The committee was notified about the eight CV's we currently have received by word of mouth. Our search firm has sent out approximately 2,200 contacts (emails, letters) to her list of Chairs and larger department heads across the nation. She has also received approximately 30 "nominations" for Dean

Candidates. Her office will send out a letter and indicate to the individuals that they have been nominated and see if they would like to be considered.

We talked about the medical specialty of the physician that could become the next Dean. The group felt that there should be no limitation on the specialty type and they saw some opportunity to have a new Dean that was of a specialty that we did not currently have within the BSOM. It was felt that they may be able to bring some faculty of that specialty with them and that it may help us branch out into new areas.

We discussed what we would like to see in a candidate and how to evaluate the CV's. We also discussed performing first interviews at an offsite location, like Raleigh, but the group felt that we needed to get them "on campus" to be able to determine if they would be willing to live in Greenville and to show all the new construction associated with the medical complex. We have a lot to offer and most people are impressed once they visit the facilities.

The timeline was also reviewed. As you know, it is required to advertise the position for thirty days before we start interviewing. We have started the thirty day period with our first advertisement placed about two weeks ago. We plan to keep the search open until the position is completed as we don't want to limit any good candidates that may come in later in the process. Due to the Thanksgiving and Christmas holiday we felt we would not get any candidates scheduled for onsite interviews during this time. In January/Early February we plan to have the CV's reviews completed by the committee. Onsite interviews will be scheduled beginning mid-late February or early March. Hopefully, the new Dean should be on site by late spring, early summer.

I or any of the committee members are available as needed for any further questions or updates. I will periodically send out updates as they are available.

Daniel Moore, MD
Professor and Chairman
Rehab Medicine

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Faculty Senate Resolution #06-07

Approved by the Faculty Senate: February 21, 2006

Approved by the Chancellor: March 1, 2006

Editorial revision: 11-29-07

changing the date to forward names to the VC for Research (which will benefit faculty in knowing sooner who will be given the awards).

Academic Awards Committee

Procedures for Annual Lifetime and Five-Year University Research/Creative Activity Awards

Objective

To reward originality and excellence in research and creative activities as evidenced by sustained high quality work performed while contributing to the academic functions of East Carolina University at any rank or status.

Awards Per Year

Two Lifetime Achievement Research/Creative Activity Awards

Two Five-Year Achievement Research/Creative Activity Awards

Review Procedures

In early September, all academic units will be notified of the opportunity to nominate applicants for either a Lifetime or a Five-Year Achievement University Research/Creative Activity Award. Department-level academic units (to include 'areas of concentration' in the School of Art) may select candidates for each award (Lifetime or Five-Year) for consideration at the University level. Nominations may also be forwarded directly from the individual candidate or any collegial representative of the candidate's field of work.

Each nomination must include a cover letter detailing the contributions of the nominee to his or her field of work over the period of the intended award. The nominating letter must specify for which award the candidate is to be considered (Lifetime or Five-Year). Consideration for the five-year award must focus on the candidate's research or creative achievements during five years of continuous service at East Carolina University.

Nominations arising from academic units must be put in perspective of the unit's stated criteria for evaluating faculty research and creative activities. Independent nominations must include a similar statement of perspective, specifying criteria against which the applicant may wish to be judged. The core of the submission will be the presented evidence of the candidate's productivity and of the value and influence of the work according to peer review and any other help that can be provided for the committee's considerations.

The nominator must request and include three letters of recommendation from outside of ECU, on institutional stationery, providing evaluations of the candidate's accomplishments and contributions to the field of work for purposes of these award considerations. The request for outside reference letters must require that any present or past relationships between the referee and the candidate be specified.

The nominating letter, the nominee's complete curriculum vitae, and three letters from outside referees must be submitted to the Academic Awards Committee on or before November 1st of each year.

The selection committee (composed of members of the Academic Awards Committee) will review applicants' materials in the perspective of the criteria governing evaluation of research or creative activity in the academic unit/s most closely representing the candidates' respective fields of work. The primary criterion of the committee's evaluation will be the impact of the body of work on the applicant's field of scholarship.

In February ~~December~~, the Academic Awards Committee will forward the names of those selected for the four awards (two Lifetime Achievement and two Five-Year Achievement) to the Vice Chancellor for Research. The Vice Chancellor for Research will review the candidates' research materials prior to the public announcement of these awards.

East Carolina University Brody School of Medicine
Recent Highlights
November 2007

Horns
12-4-07
Faculty
Senate
mtg.

Leadership:

- Search committee for Dean: A search committee to find a new Dean for BSOM was appointed in September, 2007. This committee is now working aggressively, with assistance from the search firm Witt-Kieffer, to locate a strong leader for the BSOM as soon as possible.
- Vice Dean's Role—A major part of the leadership change in the BSOM last fall was the appointment of Dr. Nicholas Benson as Vice Dean. This was a new position for the school and was specifically executed to assure strong Physician leadership for the school during the transition. His role has included all day-day interactions with Department Chairs relative to faculty recruitment and retention, conflict resolution, financial management, and quality assurance. Among the many other duties he assumed was major responsibility for evaluating the performance of Department chairs and determining compensation changes for the coming year. Dr. Benson has been a member of the Brody faculty for more than 25 years and is a former chair of the Department of Emergency Medicine and has served as senior associate dean for operations of the BSOM.
- MFPP Board reorganization—This change provided for an elected Physician chair. Dr. Mike Rotondo, chair of the Dept of Surgery was elected to this position and provided exceptional physician leadership for the successful MFPP turnaround.
- Faculty recruitment and retention is an ongoing challenge, however a recent review of medical faculty turnover indicates no greater loss of faculty this year compared with the past 5 years. In fact, there were ten fewer departures in FY 2006 than FY 2005. We have also made significant faculty hires this year including a new Chief of Surgical Oncology, Dr. Emmanuel Zervos.
- Cultural assessment: A team of faculty and staff conducted an assessment of the culture in the BSOM this past year and made several recommendations relative to improving the work environment and communications patterns. This group is now working to implement a number of initiatives designed to promote inclusiveness, respect, positive communications and participatory decision-making.

Research:

- In 06-07 the BSOM had the highest record in history for acquisition of externally funded research at nearly \$20,000,000.
- Research Success – Brody School of Medicine Awards

Fiscal Year	Total	Amount
2000-2001	164	\$16,076,874
2001-2002	158	\$10,899,270
2002-2003	129	\$11,408,767
2003-2004	115	\$12,389,471
2004-2005	132	\$15,571,142
2005-2006	145	\$17,462,395
2006-2007	180	\$19,908,359

- James A. McCubrey (Microbiology) received the University's Lifetime Achievement Award for Excellence in Research in recognition of his exemplary productivity in basic science research.
- Robert Carroll (Physiology) was named a 2006-07 ECU Scholar-Teacher.
- A research Infrastructure Assessment team completed a review of the supports and barriers to research within the BSOM and made recommendations about needed improvements to enhance the growth of research endeavors and funding.

Academics:

- BSOM students have had remarkable success on Step 1 and Step 2 Clinical Knowledge (CK) and Clinical Skills (CS). For the past year, BSOM had an overall 99% pass rate on Step 1 for students in the Class of 2009; and 98% overall pass on Step 2 Clinical Knowledge in the Class of 2007.

- The Step 2 CS has been in place for three years. Within that timeframe, our overall pass rate is 96%. For the graduating class of 2007, our overall pass rate is 100%.
- The Class of 2007 demonstrated the commitment to primary care that is the hallmark of BSOM. 63% of the graduates matched into primary care residencies:
 - 19% in family medicine
 - 24% in internal medicine
 - 7% in combined internal medicine/pediatrics
 - 10% in obstetrics and gynecology
 - 3% in pediatrics
- From the Class of 2007, 42% of the graduates stayed in North Carolina to complete their medical training. 19% of them are receiving their training at Pitt County Memorial Hospital/University Health Systems.
- Over the past 25 years:
 - 27% of the School's graduates practice medicine in eastern North Carolina
 - 58% practice within North Carolina
 - 50% practice primary care medicine
- In the fall 2008, the BSOM will enroll 76 students, an increase of four students from the historical 72. There are 73 students in the class that entered in fall 2007.
- In April 2007, the BSOM received a "Family Medicine Top Ten Award" from the American Academy of Family Physicians. These awards recognized 10 medical schools for their high performance in graduating students into first year Family Medicine residencies over a 3 year period.
- Twenty-five physicians from the Brody School of Medicine at East Carolina University have been chosen by their peers for inclusion in the 2006 "Best Doctors" listing.
- We have moved forward with the development and approval of the Masters of Science Program.
- Continuing to explore and develop additional dual degree programs (MD/MPH and MD/JD).
- Faculty awards:

- Paul Schenarts, MD (Surgery) received the University's Robert L. Jones Award for Outstanding Teaching and the UNC Board of Governors Distinguished Professor for Teaching Award. Dr. Schenarts was also recognized by the United States Army with a Bronze Star for his bravery in action while on active duty in Afghanistan.
- In April 2007, *U.S. News and World Reports* ranked the School in the Top 10 medical schools in the country in these categories: 6th in primary care and 9th in rural medicine.

Philanthropy:

- \$2,500,000 gift from the estate of Frances J. Monk of Farmville, was received. Funds were given to construct the Robert T. and Frances J. Monk Geriatric Center. Groundbreaking is expected in early 2008. (*Announced November 15, 2006.*)
- \$1,333,000 pledge from Eddie and Jo Allison Smith Family Foundation of Greenville for an endowed chair for the Director of the East Carolina Heart Institute. This gift has qualified for \$667,000 in State matching funds, making East Carolina University the first within the state system to achieve a \$2,000,000 chair through the Distinguished Professorship program. (*Announced March 21, 2007.*)
- \$1,000,000 pledge from an anonymous donor of an endowed chair to benefit the East Carolina Heart Institute. This gift qualifies for \$500,000 in State matching funds and will be valued at \$1,500,000.
- \$1,000,000 planned gift has been committed to benefit the Leo Jenkins Cancer Center. This gift, planned through a future bequest from Pat L. Rice, will help to provide services to individuals dealing the loss of family members to cancer.
- \$500,000 gift from Boddie-Noell Enterprises, Inc. of Rocky Mount to name the Pediatric Cardiology area and the Cardiac Diagnostic Center located on the first floor of the East Carolina Heart Institute patient and educational building located on Heart Boulevard adjacent to the Brody School of Medicine. (*To be announced.*)
- \$300,000 bequest from the estate of Celeste A. Deans of Goldsboro for use in medical research at the Brody School of Medicine.

- \$133,000 planned gift from Dr. Roy Truslow of Reidsville to be added to the Gray-Truslow Scholarship Fund at the Brody School of Medicine.

Financial:

Financial Performance and Business Practices

- Generated a net gain of \$800,000 for FY 2006–2007 after less than 12 months of a turnaround effort, following a loss of \$14.1 million in FY 2005–2006.
- Renegotiated several commercial payor and hospital contracts, some of which had been neglected for 5 years or more.
- Identified and took steps to realize new cost efficiencies without any impact to core competencies, including reorganization of services between the main and medical campuses.
- Implemented new performance-based processes for setting faculty salaries, including the annual raise process and incentive plans.
- Reallocated state appropriations across clinical departments to improve alignment with academic activity and bring clarity to use of extramural research funding and clinical income.
- Instituted a series of new financial tools and approaches (e.g., faculty-specific financial profiles) that have fostered a new level of fiscal discipline among medical school leadership, department chairs, and administrators.
- Carried the improved financial performance forward in FY 2007–2008 with the bottom line was 37 percent ahead of last year, through October, despite new investments in faculty, facilities, and other infrastructure needs.

A. Clinical Operations and Service

- A comprehensive, patient-centric, service excellence campaign has been launched, named "Patients First." Examples of this major initiative include:
 - » Patient satisfaction survey rolled out across the entire practice for the first time in its history.
 - » Formal customer service training conducted of over 725 staff by a professional firm for the first time since the inception of the practice plan.

- » Fully developed, Web-based patient feedback resolution system to track and act upon all complaints centrally.
- » Implementation of new measures that improve access for patients (e.g., ability to see physicians the next day for certain programs).
- » Marketing material indicating our focus on service and commitment to improve facilities, service, and so forth.
- Management models of several clinics have undergone changes to streamline reporting, maximize accountability, and improve overall performance. The changes have been successful where implemented, and a large-scale, practicewide effort is now under way.
- Using its new delegated authority for property acquisition, the medical school has leased over 30,000 square feet of new, modern clinical space since July 2006, with plans under way for major renovations of several other clinics.

B. Business Development and Growth

- Development of a joint venture for an endoscopy center between the medical school and affiliated hospital – first of its kind.
- Revitalization and more focused planning for the FMC to ensure that the design is aligned with programmatic needs and the financing plan is feasible.
- Redevelopment of Leo W. Jenkins Cancer Center (LJCC):
 - » New, streamlined governance structure.
 - » Full adoption of multidisciplinary approach and structure, including integration of financial and strategic interests.
 - » Pending Certificate of Need (CON) approval of CyberKnife.
 - » New partnership development with UNC Lineberger with a focus on research.
 - » Potential development of a new breast center.
- Development of country's third department of cardiovascular sciences, which fully integrates cardiology and cardiovascular surgery. Premier institutions like the Cleveland Clinic have recently announced plans to do the same.

- There are several other opportunities for service and market expansion in different stages of development, including:
 - » Development of a new pain management center.
 - » Partnership with new radiation oncology program in Onslow County.
 - » Development of a center for human appearance.
 - » New partnerships with several private practices for specialty programs, including cardiology, neurology, and urology.

C. Faculty Retention and Recruitment

- All medical schools or healthcare organizations that publicly disclose financial challenges and pursue a turnaround process will experience some uncontrollable losses and become less attractive to some candidates; however:
 - » No programs or faculty were released as part of the turnaround to date.
 - » Some faculty departures were anticipated given a culture shift and new expectations being established for academics, research, and clinical productivity.
 - » Despite the tendency to mostly focus on departures, there was successful recruitment at the outset and during the peak of the turnaround, including high-profile candidates in key positions:
 - Hematology/oncology division chief.
 - Surgical oncology division chief.
- There are unquestionable challenges for retention and recruitment, but in the aggregate, after one tenuous year, signs of stability are returning, as illustrated in the table below.

Departments	4 Months Ending FYTD October 2007			FY 2006-2007			FY 2005-2006		
	Hires	Departures	Net Result	Hires	Departures	Net Result	Hires	Departures	Net Result
Clinical	28	22	6	37	41	(4)	60	48	12

Basic Sciences	4	2	2	4	10	(6)	15	13	2
Total	32	24	8	41	51	(10)	75	61	14

- At every turn during this transition period, the interests of the faculty have been first, despite tremendous financial and business challenges of the medical school.
- Despite some outside perceptions, no formal measure has taken place to emphasize the clinical aspect of the mission at the cost of academics and/or research (i.e., clinical productivity remains flat).
- Targeted efforts continue to ensure that faculty are competitively compensated, even at a time when affordability is questioned. Underlying examples:
 - » In-depth assessment was conducted for all faculty to realign compensation with activity and competitive benchmarks.
 - » The practice plan funded merit raises of \$933,000 and \$779,000 in FY 2006–2007 and FY 2007–2008, respectively (i.e., in addition to funding provided by state).
 - » Incentive plan was maintained during the turnaround, with payouts of \$1.2 million in FY 2006–2007.
 - » Compensation in new recruitment packages is extremely competitive by any industry standard.
 - » The practice plan continues to maintain a very generous and expensive supplemental fringe benefits program for clinical faculty, which ranks higher than most of the top academic medical centers (AMCs)/medical schools in the country.
- Steps are under way to develop a professional, in-house physician recruitment office in partnership with the hospital and the private practice community to bring talented physicians to eastern North Carolina.

D. Overall Posture and Reputation

- Particularly for a public institution, a turnaround of this magnitude will undoubtedly create a sense of uncertainty and compromise the reputation of the medical school.

- Nonetheless, the pace and sense of priority of this undertaking has minimized the damage to the medical school, and one must closely consider the opportunity cost of not intervening (i.e., ramifications if status quo continued for another 12 to 18 months as of July 2006).
- Locally, the reputation of the medical school with its affiliated entities has grown significantly stronger over the past year, with the medical school enjoying a new level of respect and credibility among the medical community.
 - » Unlike any other time in the medical school's history, private practices are approaching the medical school to form new or strengthen existing partnerships (six different groups to date).
 - » The way in which the medical school now handles its business affairs with the hospital has significantly improved the dynamic of the relationship for both parties.
- For the first time, the medical school is experiencing positive feedback about its clinical facilities, including an award given by the City of Greenville recognizing the appearance of a new medical office building.
- Overall, the business and financial posture of the medical school and practice plan have never been stronger.
 - » Clinical enterprise operating from a proactive rather than a reactive position.
 - » A sense of acknowledgement regarding opportunity to improve and a unified approach to address the issues.
 - » A strong sense of mission and pride in the medical school balanced with the responsibility to ensure long-term financial viability.

Brinn Report
12-4-07
Fac. Senate

An IT Service/Resource Distribution Model In a Resource-Constrained Environment

Low-value-add tools/services (Outsourced)	Higher value-add tools/services (Data Center)	Tools/services enhancement (Campus Centers)	Tools/services utilization Creativity & Leadership (Admin/Academic Units)
<ul style="list-style-type: none">• Commodity products – (Student/alumni email)• Archival storage,• Shared learning modules,• Selected application servers, e.g., PDF• Research machines• Web servers• ID management	<ul style="list-style-type: none">• Network/security• Banner data• Critical application (Banner, Blackboard, etc.)• Research machines,• Work enhancement tools (surveys, stats),• Web development• Database admin.• Systems Admin.• Virtualization of core servers, labs• Reporting tools, training & hardware	<ul style="list-style-type: none">• Business intelligence• Media center• Research computing (code enhancement, etc.)• Research design, & statistical support• Desktop/Smart Classroom Support	<ul style="list-style-type: none">• Research• Instruction• Data driven management

Proposed Final Draft v3
Resolution 2007- Nov. #3 Relating to UNC Tomorrow

Whereas, the UNC Tomorrow initiative is of crucial importance to the state of North Carolina and to the University System; and

Whereas, more than 1000 faculty members from throughout the System have recently attended faculty listening forums and have followed the progress of the UNC Tomorrow Commission and the Scholars Council in other ways; and

Whereas, the Faculty Assembly and those its delegates represent wish to assist in making the next stage of the UNC Tomorrow initiative effective,

NOW, THEREFORE, BE IT RESOLVED,

1. The Faculty Assembly requests General Administration to encourage Chancellors, Chief Academic Officers, and other personnel to constitute campus UNC Tomorrow Response Teams so as to include at least 50% of their membership drawn from the non-administrative rank and file faculty (with at least half of the faculty serving in this capacity appointed by Faculty Senates).
2. The Faculty Assembly requests Faculty Senates on the individual campuses to dedicate time to discussing key issues raised by the UNC Tomorrow initiative, designate faculty representatives to serve on UNC Tomorrow Response Teams on the campus level, and work with the Faculty Assembly in its efforts to move forward with key initiatives related to UNC Tomorrow.
3. The Faculty Assembly wishes to devote time and attention to key focal areas during spring semester 2008, recognizing that there are numerous other issues that also deserve attention at a later time. It will endeavor by May to develop possible recommendations for action strategies relating to the following topics, on the understanding that effective action will require the allocation of requisite resources rather than imposition of unfunded mandates:
 - a. PreK-12 education, including strategies for
 - i. Identifying best educational practices;
 - ii. Developing curricular materials in targeted areas such as citizenship education;
 - iii. Identifying strategies to bolster educational success for minority students including in particular African-American males and Hispanic students;
 - iv. Engaging faculty from the liberal arts, sciences and other disciplines in supporting K-12 education;
 - v. Creating programmatic linkages between education, health, social work, and management programs to bolster school effectiveness, and
 - vi. Engaging faculty working together from across the system in other ways.
 - b. Sustainability, including strategies for
 - i. Focusing university research as appropriate on sustainability and alternative energy;

- ii. Providing environmental education and bolstering environmental "literacy" for both UNC students and the community at large;
 - iii. Taking a leadership role in energy conservation on UNC campuses and among UNC institutions.
- c. Enhancing higher education quality, though
- i. Identifying best practices in key areas such as writing across the curriculum;
 - ii. Using effective outcome assessment measures and maintaining high academic standards in all facets of educational programs including on-line learning;
 - iii. Identifying and supporting effective learning models such as service-learning to foster deep understanding as well as community engagement;
 - iv. Recruiting, supporting and retaining diverse students;
 - iv. Supporting a seamless transition for students from community college transferring to university programs.
- d. Allowing interested faculty to address critical priorities facing the state and the public through greater opportunities for engaged scholarship and teaching, including
- i. Reviewing tenure and promotion rules to eliminate barriers and provide rewards (e.g., compensation, time, recognition) for high quality engaged scholarship and teaching by interested faculty;
 - ii. Fostering opportunities for a larger proportion of faculty members to become involved in engaged scholarship, teaching and public service at various points in their careers;
 - iii. Creating strategies to document and assess the work of faculty members involvement in engaged scholarship and public service;
 - iv. Creating strategies to review the performance of chancellors, provosts, deans, and department chairs in supporting engaged scholarship, teaching and public service efforts of their faculty members;
 - v. Developing models for effective faculty engagement, such as creation of scholars' councils to address key topics on the university system and campus level, implementation of targeted competitive peer-reviewed research initiatives, recommending strategies for the University system to deploy resources through a system of targeted competitive peer reviewed research initiatives, and establishment of a system for disseminating relevant work by faculty and students to assist those facing key problems in communities around the state, nation, and abroad;
 - vi. Developing models to assist interested faculty members to build effective research and teaching partnerships that are responsive and attentive to public needs and concerns;
 - vii. Recommending ways in which the University system could create organizational structures, infrastructure, and other methods to link faculty from across the system in targeted initiatives for the betterment of the state.

Unanimously adopted by the Faculty Assembly on November 16, 2007

Judith Welch Wegner, UNC-CH, Faculty Assembly Secretary (Judith_wegner@unc.edu)