UNIVERSITY OF IOWA FACULTY SENATE 1999-2000
MINUTES

Tuesday, April 25, 2000
Senate Chamber, Old Capitol


Guests: J. Folkins, J. Whitmore (Office of the Provost); S. Kurtz (Law); M. Chapman (Daily Iowan); J.G. Andrews (Mech. Engineering); J. Crawford (Senate Staff Secretary)

Note: Attendance list includes 1999-2000 and 2000-2001 Faculty Senate members.

I. President Carlson called the meeting to order at 3:50 PM.

II. There being no objection, the Faculty Senate minutes of April 4, 2000 were approved as distributed.


President Carlson presented three motions by the Faculty Council for discussion and action.

1. The Faculty Council moves the adoption of the attached Resolution to Permit Expansion of Clinical Faculty Track in Individual Colleges [Attachment A, p. 1-3].

2. The Faculty Council moves to amend the previously adopted resolution relating to clinical track promotion criteria [Attachment A, p. 4].

3. The Faculty Council moves the adoption of the attached Resolution to Require Clarity in Filling of Salaried and Non-Salaried Clinical Track Faculty [Attachment A, p. 5].

ACTION RE: MOTION/RESOLUTION 1

Professor Hurtig moved, Professor Menninger seconded the following:

MOTION: That debate regarding the Resolution in motion 1 not extend beyond 4:05 PM, at which time the question will be called to approve or disapprove the resolution.

Faculty Senate Minutes (Part 1)
4/25/2000
The vote for/against the motion was 22/14. The motion failed the two-thirds majority required for approval.

Professor Collins moved, Professor Berman seconded to amend the Resolution:

**MOTION:** That the following language be inserted at the end of section a of the Resolution to Permit Expansion of Clinical Track Faculty:

iii) As it is the sense of the Senate that any requirement of research, scholarly productivity, or artistic creation by clinical track faculty under consideration for reappointment or promotion would be inconsistent with the definition of clinical faculty (Operations Manual III-10.9.a), with the role of clinical faculty (Resolution 2, Faculty Senate Minutes of 4/4/00), with the qualifications for specific ranks on the clinical track (Operations Manual III-10.9.d), and has the potential to undermine tenure as the cornerstone on which academic excellence has been created and maintained at the University of Iowa, the following language should be added to current Operations Manual section III-10.9.d:

"Demonstration of artistic or scholarly achievement shall not be a requirement for reappointment or promotion of clinical track faculty."

Discussion followed. Professor Collins stated that the expectations for clinical faculty to progress and develop need to be clear. When the clinical track faculty policy was first introduced, the intent was that the clinical track was a teaching and service track. For example, the College of Medicine states that scholarship is not a requirement for promotion or reappointment for clinical track faculty.

Professor W. Stanford stated that the College of Medicine looks at all aspects of the faculty member's record - scholarship and service - for promotion decisions for clinical and tenure track faculty. He asserted that the individual colleges should decide how to assess the criteria for scholarship.

It was pointed out this amendment did not prohibit clinical track faculty from engaging in research and other scholarly endeavors, but stated that these are not required.

A faculty member from the College of Pharmacy expressed opposition to the resolution and stated that the proposed amendment was not compatible with existing promotion criteria in the College of Pharmacy. Scholarly achievement is required for both clinical and tenure track faculty, but defined differently.

Professor Grassian moved, Professor Kline seconded to amend the amendment:

**MOTION:** That the amendment be amended to remove the word "promotion".

There was discussion of the expectation of "professional productivity", and of the diverse activities that may be defined as "scholarly achievement" and may appropriately be required for promotion of clinical track faculty. But it was pointed out that it was necessary to draw the distinction between clinical and tenure track faculty - that clinical track faculty are hired specifically to teach and to perform service.

The question was called on the motion to amend the amendment. The motion failed.

The question was called on Professor Collins' motion: Amendment to the Resolution to Permit Expansion of Clinical Track Faculty in Individual Colleges. The motion carried 27 for/13 against.

Professor Kline moved, Professor W. Stanford seconded to amend lines 15-17 of Resolution 1 as follows:

**MOTION:** That lines 15-17 in section a) of the Resolution to Permit Expansion of Clinical Faculty track in Individual Colleges be amended to:

"...track) must obtain approval of a majority of the faculty, without regard to
tenure or clinical track status, within the college by a referendum supervised by the Associate Provost for Faculty. Any such proposal must also be...

Professor Kurtz requested permission to comment on this motion. He explained the rationale for having clinical and tenure track faculty vote separately, stating that blending the vote would remove the impact of the tenure track faculty on decisions of clinical track expansion.

Further discussion of this motion included comments on the advisability of requiring a greater than majority vote for approval of clinical track expansion; that a separate vote creates the perception of two classes of faculty; that the existence per se of a clinical track and a tenure track demonstrates that there are two different tracks – that the faculty in those tracks are not the same.

The question was called on Professor Kline’s motion to amend. The motion failed.

Professor Lynch moved, Professor Hunsicker seconded a motion to amend Resolution 1:

*MOTION: That Resolution 1, section b) line 21, page 2 be amended as follows: “...the Senate shall be a 3/5 affirmative vote of those voting, whether...” and that section c) lines 4-5, page 3 be amended as follows: “This policy may not be revised or amended without a 3/5 affirmative vote in the Faculty Senate of those voting.”

There was discussion that a 3/5 majority vote of the entire Faculty Senate membership would make it too difficult, if not impossible, to implement changes in the policy. It is often difficult to achieve such a high attendance rate at Faculty Senate meetings because faculty may have other commitments, and a mail ballot does not necessarily ensure the necessary return rate. After implementation of the proposed clinical track policy and expansion, what if many faculty find that the policy is flawed and that the clinical track should not have been expanded? The requirement of a 3/5 majority vote of the entire Senate membership would make it difficult to rescind this policy.

The question was called on Professor Lynch’s motion to amend. The motion carried.

Professor Hunsicker moved, Professor Kline seconded to further clarify the amendment that was just approved:

*MOTION: That the words “...whether or not present at the time of the consideration of the amendment” in section b) lines 21 – 22, page 2 and the words “whether or not present at the time of consideration of any proposed revision or amendment” in section c), lines 5 – 6, page 3 be deleted.

The motion carried.

Professor Kline moved, Professor Pincus seconded a motion to amend Resolution 1:

*MOTION: That the 3/5 majority affirmative vote required in section b), line 21, page 2 and in section c), line 4, page 3 be changed to a simple majority affirmative vote.

Discussion included the following points. The requirement of a 3/5 majority or a majority greater than a simple majority is unusual and is not required for approval or changes of other policies in the Operations Manual. This may result in unintended consequences. Although the 3/5 majority is a higher standard to meet, it is not an unreasonable standard; in fact, the Ad Hoc Committee to Review the Clinical Track Policy originally recommended that a 2/3 majority affirmative vote be required. Although the 3/5 majority is unusual, the clinical track policy is unusual and is not ordinary business. A required 3/5 majority would be prejudicial against the medical campus, because most of these faculty cannot attend Senate meetings. The problem of attendance could be addressed by using a mail ballot.
The question was called on Professor Kline's motion to amend. The motion failed with 23 for/26 against.

Professor Lynch moved, Professor Hunsicker seconded:

    MOTION: That Resolution 1 be amended to insert the words "required by mail ballot" after the phrases "3/5 affirmative vote of those voting" on page 2 and page 3 of the attachment.

Professor Collins offered a friendly amendment to this amendment, seconded by Professor Dyer:

    MOTION: That lines 27-28 on page 2 be amended to "for approval of a matter, the President of the Senate shall take the vote by a mail ballot."

The motion carried.

Professor Collins moved, Professor Manderscheid seconded to amend Resolution 1.

    MOTION: To strike section c), p. 3 of Resolution I.

Discussion: This motion would make it possible to avoid a change in the Bylaws of the Operations Manual. If section c) is deleted, then section b), iii) lines 25-26, (which refer to cases of requiring a supermajority vote) is not needed. The result of this motion would mean that any part of the resolution can be amended by a simple majority except the provision that no more than 20% of the senators from any college may be clinical track faculty of that college.

The question was called on Professor Collins' motion, and the motion carried.

Professor Menninger moved, Professor Wasserman seconded to amend Resolution 1.

    MOTION: That Resolution 1, section a)(1) be amended so that each college be permitted to raise the percentage of its total salaried faculty that may hold clinical track appointments from 20% to 30%, up to a maximum of 30%.

Discussion: The concern was expressed that there has not been sufficient evaluation, nor sufficient length of time that the clinical track policy at the 20% cap has been in effect, to determine how well the clinical track policy has worked or its impact for the colleges or the University as a whole. Therefore, to increase the percentage without this information is premature. Others expressed opinions that the clinical track policy has worked well, with no adverse effects. There was extensive discussion on the pro's and con's of having no limitations on the percentage of clinical faculty. Professor Kurtz explained the policy's attempt to balance the need of the health sciences colleges to have sufficient clinical track faculty to carry out their missions, with the need to have primary responsibility for faculty governance in the hands of the tenure track faculty. Professor Menninger stated that more needed to be protected than the Senate's role in governance. Professor Wasserman stated his opposition to the proposed clinical track policy, citing his concern about the erosion of tenure and about ongoing discussions for a non-tenure research faculty track.

The question was called on Professor Menninger's motion. The motion failed.

Professor Carney-Doebbeling moved, Professor Lynch seconded to call the question on the motion to approve Resolution 1 with the approved amendments. The motion to call the question carried.

    MOTION: To adopt the attached Resolution to Permit Expansion of Clinical Track Faculty in Individual Colleges [Attachment A, p.1-5], as amended.

The motion carried.

ACTION REGARDING MOTION/RESOLUTION 2

Professor Grassian moved, Professor Collins seconded motion/resolution 2 in the attachment.
Motion: To amend the resolution relating to clinical track promotion criteria, adopted at the April 4, 2000 meeting of the Senate, by adding the following paragraph C to that motion, so that the motion will read as follows (only new language given in these minutes):

"C. How the type and/or nature of the activities evidencing professional productivity sufficient for promotion on the clinical track differs from the type and/or nature of the activities required for promotion on the tenure track.

The motion carried unanimously.

ACTION REGARDING MOTION/RESOLUTION 3

A motion to call the question was moved, seconded, and approved.

MOTION: Resolved that the Senate recommends that the Provost, utilizing his authority under the Clinical Track Policy, require each college, using its ordinary governance procedures, to take any steps necessary to ensure that its policies provide for appropriate titles for salaried and nonsalaried clinical faculty and that the titles of nonsalaried clinical faculty cannot be confused with those of salaried clinical faculty.

The motion to approved Motion/Resolution 3 carried unanimously.

IV. New Business

A. There was agreement to table item A of the agenda – approval of the amendments to the developmental leave policy, as proposed by the Provost’s Office. [Attachment B].

B. Approval of Ad Hoc Committee to Review the Office of the Provost [Attachment C]. The following faculty were proposed to serve on the Ad Hoc Committee to Review the Office of the Provost: Patricia Cain, Chair (Law); David Drake (Dentistry); Linda Kerber (Liberal Arts); Salome Raheim (Liberal Arts); Matthew Rizzo (Medicine); Soura Dasgupta (Engineering); Barbara Spence (nominated by Staff Council as staff representative; Microbiology).

Professor Menninger moved, Professor Kline seconded:

MOTION: To approve the membership of the Ad Hoc Committee to Review the Office of the Provost.

The motion carried.

C. Professor Pincus moved, Professor Berman seconded to add a Grandfathering Amendment to the Clinical Track Policy.

MOTION: Clinical track faculty hired prior to July 1, 2000 shall be evaluated in terms of the criteria set forth in the University’s original clinical track faculty policy. However, a clinical track faculty person governed by the original clinical track policy may opt to be evaluated in terms of the revised policy with the understanding that such a choice would be irrevocable.

Professor Hunsicker moved, Professor Boos seconded a motion to postpone:

MOTION: That Professor Pincus’ motion to add a Grandfathering Amendment to the Clinical Track Policy be postponed till the next Senate meeting.

The motion carried.

D. Professor Hunsicker moved, Professor Liddell seconded the motion:

MOTION: To approve the Committee appointments as recommended by the Committee on Committees [Attachment D].

The motion carried.
V. Reports and Announcements

A. The list of University of Iowa Faculty Senate Membership and Officers for 2000-01 was distributed as Attachment E.

B. Vice President Colvin presented the 1998-99 Motion Summary [Attachment F]. Professor Menninger moved, Professor Hunsicker seconded to accept the 1998-99 Motion Summary as presented.
The motion carried.

C. President Carlson announced the Brody and Regents Award winners.

   Brody Award: John P. Long, Ph.D., Professor Emeritus (Medicine, Pharmacology); Adalaide (Dee) Morris, Professor (Liberal Arts, English);
   Jude P. West, Professor (Business, Management and Organizations)

   Regents Award: David Baldus (Law); Nicholas Colangelo (Education); Daniel Collins (Business); Huston Diehl (Liberal Arts); Stuart Weinstein
   (Medicine); James Wefel (Dentistry)

D. Professor Liddell called for Senate members to acknowledge and recognize President Carlson for his outstanding leadership of the Senate during the past
   year. The Senate did so with hearty applause.

VI. The final meeting of the 1999-2000 Faculty Senate adjourned at 4:55 PM.

Respectfully submitted,

Jean Jew, Secretary