Compact for Pharmacy
FY 2004-05

I. Introduction
The University of Minnesota College of Pharmacy is among the nation’s best, rated number 5 by U.S. News and World Report and number 7 in the latest Gorman report. The college’s mission is to educate pharmacy practitioners who deliver essential pharmaceutical services to the people of Minnesota and society, to educate pharmaceutical scientists and to perform research for the improvement of human health. There are approximately 462 students enrolled in the full-time Doctor of Pharmacy program. The college offers the only pharmacy program in the state, and about two-thirds of the state’s pharmacists are alumni.

The College of Pharmacy continues many initiatives from last year. We are in year four of our strategic plan and the goals identified for emphasis in the upcoming year are not new but are selected for emphasis during FY05. We will begin formulating a new strategic plan during FY05. Some of the emphases are made necessary by the current environment of financial difficulty and our need to accomplish goals despite decreases in state funding. Others have risen from the self-study we completed for our recent accreditation review.

The need for an expanded pharmacy workforce and class expansion through the recently established Duluth program continues as a top priority. We welcomed our first class to the College of Pharmacy, Duluth, in August 2003. It is important that we establish goals to continue the excellence of the Twin Cities program—especially since students are paying significantly increased tuition—and that synergy is obtained between the two sites of the program. Students have high expectations for progress in interprofessional educational opportunities. Technology development is essential for both campuses of the program, and for the work of our faculty in promoting the practice of pharmacy in greater Minnesota. We’re making progress in increasing our research productivity and investments made toward that goal appear to be garnering success.

II. Progress on Major Themes and Specific Objectives stated in the FY04 Compact

This has been a year of very significant accomplishments for the College of Pharmacy. As detailed below, most of the specific objectives established in the FY04 compact have been accomplished or are ongoing. It is useful to highlight a few that are most significant:

- The Duluth branch of the college opened with 52 students, eight faculty, a senior associate dean and four staff members in newly renovated space in Kirby Plaza on the University of Minnesota, Duluth campus. We were very successful in hiring outstanding faculty, and Stephen Hoag, Ph.D., provides excellent leadership. Technology plays a big role in the delivery of the curriculum and has for the most part, worked well. The biggest challenge is hiring another 10 faculty for next year. Plans for renovating the Life Sciences Building, after it is vacated when the Swenson Science Building is complete, are developing. Although we anticipated funding from the 2004 legislative session, the lack of passage of a bonding bill in the regular session makes that questionable. We are within budget with our Duluth renovation plans.
- The college received full six-year accreditation and a glowing report following the visit of the American Council on Pharmaceutical Education in March 2003.
- The college’s research funding is increasing significantly. Among U.S. colleges of pharmacy, the CoP moved from 27th to 15th based on NIH funding for FY03. We anticipate further increases. The increase follows several years of declining rankings. A significant investment in our research infrastructure and faculty over the past few years appears to be bearing fruit. Most significant is that several of our junior faculty are gaining external funding for their work, and we have also hired several well-funded associate and full professors thereby expanding the percentage of faculty with external funding.
- We organized and hosted the first meeting of the college’s National Board of Advisors. More than 20 members of the board—comprised of pharmacy professionals from around the country—attended a 1.5 daylong meeting that resulted in stimulating discussion and helpful advice.

FY04 Accomplishments, organized according to the 2000-05 Strategic Plan (note: *** was used to designate a high priority objective***)
Equally important are the advances on many fronts represented by the following achievements toward our strategic plan.

1. Educate pharmacists to improve the health of the people of Minnesota and society.
A. Meet the needs of Minnesotans for pharmacists, as resources permit.
   • ***Continue implementation of the expansion of the Pharm.D. program to the Duluth campus***
     We welcomed 52 students to the Duluth campus in August 2003 and have hired eight faculty to date. We anticipate hiring 10 more faculty this year and will add one class each year for the next three years.
   • Monitor the geographic makeup of the Pharm.D. applicant pool as the college begins a new admissions process. Based on those statistics, make recommendations consistent with our goals (i.e., meeting needs of Minnesotans, achieving our financial goals, providing high-quality education, diversity etc.)
     Fourteen percent of 164 first-year students self-identified as minorities, and 75 percent are from Minnesota. Seventy-seven percent are women.
   • Encourage scholarship and research in practice models including innovative use of technology to create a new vision of product distribution. Assess the impact of technicians and technology on practice.
     Todd Sorenson recently received a grant to study the use of technology in the delivery of pharmacy services in a rural community. Several faculty members are working with the community of Henderson, Minn., on reintroducing pharmacy services in a rural community.
   • Continue monitoring of workforce needs
     Faculty continued to study workforce needs and determine where shortages are most acute as well as provide input to government and industry officials on addressing the needs. We advocated for the Pharmacy Aid Education Act, which would provide loan forgiveness to those practicing in underserved. Most recent data show that Minnesota continues to have one of the highest demands for pharmacists in the nation.

B. Value education and educators.
   • ***Develop incentive plan for educational efforts***
     Work on this project continues.
   • Begin work on a peer review of teaching system
     In collaboration with other AHC Associate Deans and faculty, CoP faculty are working on an online set of tools for course evaluation and instructor evaluation. Peer evaluation is a topic for future consideration.
   • Nominate outstanding faculty for recognition programs
     One faculty member received an Award for Outstanding Contributions to Postbaccalaureate, Graduate and Professional Education in 2003, and the college nominated another in 2004.

C. Develop an outcome-based curriculum (including experiential education).
   • ***Define desired curricular outcomes and delineate expectations, goals and objectives for the experiential program as a whole and each Advanced Pharmacy Practice Experience (APPE); develop assessment tools, including possible portfolios; Reexamine the structure of the overall experiential program.***
     The Committee on Experiential Programs has developed a draft of the desired curricular outcomes for the experiential education program.
   • Survey recent graduates to assess the effectiveness of current experiential program as career preparation
   • Recent graduates were queried on several issues, including the effectiveness of Advanced Pharmacy Practice Experiences (APPEs). Implement a case-based capstone course in spring 2004 that will also provide an assessment of student learning.
     Completed.
   • Improve preceptor development and communication to ensure preceptors know curriculum and teach to desired outcomes
     A preceptor program was held in November that was well received and well attended.
   • Continue evolution of work assigned to the assessment committee
     Assessment Committee and Educational Policy Committee (EPC) Chairs are communicating regularly. Committees are accomplishing joint projects. The Assessment committee chair was invited to educational policy committee meetings.

D. Embrace innovative teaching strategies (active learning) with continuous quality improvement in delivery and content.
• **Implement the Duluth curriculum using innovative teaching strategies designed to improve quality on both campuses**
  Many faculty have developed WebCT courses to facilitate the distribution of grades and learning materials. Successful models of co-campus collaboration, using ITV and WebCT, are being profiled at College Assembly. PDAs are being used as an audience response mechanism in one class.

• **Incorporate the use of the IERC (clinical skills lab) in the curriculum; Inform faculty about the use of simulation technologies.**
  SimMan has been incorporated into physical assessment instruction. IERC has been used by patient assessment, cardiovascular therapeutics and lab courses.

• **Organize faculty workshops on teaching skills and Web page development**
  We held several informational seminars, which were well-attended, on the development of Web pages, use of ITV and use of Power Point in lectures. Seminars on active learning have been scheduled.

• **Ask assessment committee to identify weaknesses in the current curriculum and address them; include results of accreditation review.**
  Ongoing

• **Review Complementary and Alternative Medicine (CAM) topics in required courses and make necessary changes; attempt to identify additional faculty members to work in this area**
  Ongoing

• **Promote attendance at the American Association of Colleges of Pharmacy (AACP) meeting programming**
  More than two dozen faculty attended the meeting in July.

E. Develop ample high-quality practice sites.

• **Identify satellite sites by July 2004 for our Duluth students**
  Regional hubs have been identified and the search for regional educational coordinators is ongoing.

• **Continue to investigate the possibility of adding another acute-care educational coordinator in the metro area**
  Scott Chapman, Pharm.D. has been hired and will be located at North Memorial Medical Center.

• **Add an educational coordinator for the Community University Health Care Clinic (CUHCC) and inner-city experiences**
  A faculty member was added at CUHCC in a shared position with Snyders.

• **Explore role of collegiately coordinated residency program in expanding clerkship sites and develop plan for any program EPC developed guidelines for residency affiliation with the college. This will be a major topic in our strategic planning.**

• **Reexamine the structure of our advanced pharmacy practice experiences and improve the quality as outlined in Section C**
  See above.

• **Define curricular outcomes and delineate expectations, goals and objectives for each APPE experience**
  See above.

• **Develop APPEs (advanced practice experiences) at Fairview inpatient and Fairview system hospitals.**
  More work to be done.

F. Promote interprofessional education.

• **Assign a point person within the college to be responsible for development of interprofessional education**
  The Associate Dean for Students (Don Uden) was assigned to develop interprofessional education. He piloted a problem-based learning experience with third-year Pharm.D. students and second-year medical students. Associate dean for professional programs (Ron Hadsall) participated in discussions with other AHC associate deans to determine how to fit interprofessional activities within tight curricula and how to pay for interprofessional education activities.

• **Address issues of logistics and demonstrate feasibility of interprofessional education and practice.**
  The transitional care unit in which Tom Lackner practices provides an interprofessional practice experience. Issues of financial viability and logistics are being analyzed.

• **Link curriculum to practice.**
  Several Duluth faculty have co-funded positions with dual curricular and practice responsibilities. Several TC faculty have practice components as well as didactic course responsibilities.

• **Make full use of educational coordinators**
Educational coordinators continue to provide experiential education and are participating in courses as lecturers and course directors. They are directly involved in the Committee on Experiential Programs and have developed curricular outcomes for all the advanced practice experiences.

- **Use reactivated Committee on Experiential Programs**
  - See above
- **Communicate with preceptors. Through the assessment committee, seek preceptor input and bring to Educational Policy Committee**
  - The committee worked on the outcomes document and code of conduct document and is looking at curriculum development and quality improvement of the sites.

2. **Educate scientists in flourishing and nationally recognized graduate programs.**
   
   **A.** Increase the quality and number of U.S.-trained students in the college's graduate programs.
   - **Encourage students to pursue advanced training. Explore possibility of dual-degree programs (determine applicant pool, interested students, previously developed plans, other schools, e.g. Tenn.,) and how to actively recruit for them. Include DGSs in planning**
     - Departments held informational sessions, aimed at first and second year students, about graduate programs within the college. Conversations about joint degrees were begun.
   - **Recruit graduate students from current University student population**
     - Each graduate program is pursuing this goal.
   - **Increase available resources to enhance graduate programs and graduate research. Evaluate need for and viability of an executive masters program for leadership development or otherwise establish a preeminent program in pharmaceutical leadership contingent upon seed funds from capital campaign or other sources.**
     - Postponed; funds not available.
   - **Conduct a forum for faculty to present graduate and other post-doctoral opportunities to students**
     - Some departments held question and answer forums for students regarding graduate and post-doctoral programs. More to be done.

3. **Engage in research and scholarship resulting in the development of new drugs and drug delivery systems, the optimization of drug use and the advancement of pharmaceutical care education.**
   
   **A.** Enhance research productivity and ensure that our research is at the cutting edge of each discipline.
   - **Collect stories of problems, with impact, and present to higher administration**
     - Discussions were held with External Sales office and Controller to reduce time to agreement for external sales agreements.
   - **Enhance efficiency and timeliness of when research is initiated**
     - Not accomplished; see FY05 proposals.

   **B.** Capitalize on the rich intellectual diversity of the University of Minnesota.
   - **Center for Drug Design – Work with the Center to help ensure its success**
     - Center for Forecasting Drug Response included in the GCRC renewal application that was funded, and this center now receives partial support from the GCRC. This center is recognized as a “core” facility of the GCRC.
   - **Use participation in the GCRC renewal to expand collaborations across the AHC**
     - The college played an important role in the successful proposal for the renewal of the GCRC core grant, and Dick Brundage as director of the Center for Forecasting Drug Response will be partially funded by the GCRC grant. Several ECP faculty members have clinical research projects that run through the GCRC.
   - **Utilize opportunities made available by having faculty in Duluth**
     - Duluth faculty have begun to establish collaborative relationships. See the proposal for a UMD Pharmacy-Medicine collaborative graduate program in this year’s proposals.
   - **Capitalize on placement of faculty in interprofessional programs in the University**
     - Funding obtained for research projects in collaboration with many interdisciplinary centers, including the Center for Spirituality and Healing, the Cancer
Center, the Lillihei Center, the Center for Excellence in Critical Care, and others.

- Participate in the development of a Chemical Biology program and other medical genomics opportunities, especially as made available by the Mayo-U of M initiative. Rod Johnson (with a Mayo collaborator) submitted a proposal for the Mayo-UofM funding, but it was not funded. Rick Wagner is playing a major lead role in the Chemical Biology Initiative, which is part of President Bruininks Biosciences Initiatives, and other faculty are participating.

- Promote pharmacogenomics initiative; identify what we bring to the table; continue investment in AHC Biomedical Genomics. Several faculty have pharmacogenomics components to their research, including at least five funded projects.

C. Invest in research facilities.
- ***Keep research equipment current and adequate for needs.***
  Several items of major equipment were purchased, including a LC-MS, and several grants for equipment were obtained from the Graduate School via competitive grants.

- Continue to work for funding for Translational Research Facility
  We worked with the AHC to successfully lobby lawmakers and governor to fund TRF and contributed Ziagen funds to the facility. The building is expected to be ready for occupancy in June 2005.

- Identify other potential lab space for future lab-based faculty
  A space analysis is being done to identify anticipated needs for the next five years. This will be shared with Dr. Cerra and Lorie Wederstrom. Also, the first floor WDH stockroom is being renovated and will accommodate a 600 SF laboratory.

- Find research space for office-based researchers and graduate students
  Office based research will be included in the five year analysis.

- Continue outreach programs in high schools and junior colleges
  The recruiter continues to visit high schools and community colleges to expose students to the college and the profession as well as provide guidance for course selection and application.

- Analyze impact of PharmCAS to make decisions, based on pool generated by PharmCAS, about admissions criteria
  The Admissions Committee and Office of Student Services are reviewing the first round of data submitted by PharmCAS, an online application process. As this data is raw and recently released, no decisions have been made. Recently the College Assembly approved admissions criteria and procedures that comply with federal laws and provide for a variety of criteria in addition to past academic performance in order to admit classes with high motivation for the profession and a diversity of previous experiences and backgrounds.

- Educate faculty about PharmCAS
  Information presented to faculty during college assembly meetings as well as in Central Council regarding online application process.

B. Serve as a force for advancing the profession.
- Use co-funded positions in Duluth for advancing practice
  The cofunded position in collaboration with Walgreens has led to the opening of a patient care center in a local Walgreens pharmacy, staffed by an UMD faculty member. New practice was also initiated at St. Mary’s Duluth Clinic in a critical care area.

- Look for novel practices, especially CAM-providing pharmacies, that may be opportunities for promoting practice and clerkship sites
  We will be adding a 0.5 time educational coordinator who practices and supervises clerkships in a CAM pharmacy and will work to develop other CAM sites.

- Implement the Leadership Initiative from the capital campaign as resources allow. Continue to raise private funding for this initiative.
  A leadership elective and the leadership residency are both continuing under the direction of Todd Sorensen, but other aspects remain unfunded and unimplemented.
C. Maintain a sterling reputation for leadership and innovation.

- **Submit names for Scholars’ Walk**
  Names of College of Pharmacy faculty were submitted to central for inclusion in the walk.
- **Plan international symposium on solid-state properties of pharmaceuticals in honor of David Grant**
  Not accomplished at this time.
- **Consider celebration of Larry Weaver’s contributions to honor his 80th birthday and completion of college history book**
  A celebration was held honoring Larry Weaver’s 80th birthday in January. The college history book is nearing completion.
- **Plan and implement at least one Outstanding Alumnus award**
  Not accomplished.
- **Support faculty involvement in national leadership**
  Several faculty members were elected to leadership positions in national organizations.
- **Nominate faculty for at least one AACP award and for other national recognition**
  Not done
- **Nominate faculty for AHC Academy of Excellence in Research and Academy of Distinguished Teachers**
  We nominated one faculty member, who should be renominated next year.

D. Value and promote diversity.

- **Continue efforts on searches to recruit diverse candidates***
  We are continuing to work actively to recruit diverse applicant pool. We have hired faculty with a good gender mix in Duluth and it appears we will have some faculty-of-color among the 2004 hires. Two new faculty-of-color began their careers in the TC in 2003 and 2004, respectively.
- **Distribute best practices of recruitment and retention**
  Not done
- **Hold seminars on cultural, ethnic, racial differences, including how cultural differences in health care impact practices**
  We are planning to complete this before the end of 2004

E. Develop and promote advanced professional training programs.

- **Encourage residency development, especially in Duluth**
  A Duluth faculty member secured a grant at St. Mary’s Hospital to develop a residency. Duluth faculty and the senior associate dean are anxious to pursue further residencies, as funding permits.
- **Explore the collegiate role in residencies and fellowships. What value added can we bring?**
  The Experimental and Clinical Pharmacy faculty developed a policy on residencies and fellowships that are affiliated with the college. The policy encourages closer interaction of the residents at off-site locations with the college. The policy is being shared with Pharmaceutical Care and Health Systems faculty and the discussion will result in an all-school policy.
- **Encourage residents and fellows to pursue faculty roles**
  One resident pursued a faculty position. One course day for professional students is spent discussing academia and avenues for pursuing academic positions.
- **Consider PharmD-MBA, Pharm.D.-MPH joint degrees, management master’s and residency programs and an Executive Master’s Leadership training program.**
  Ongoing discussions are being held with the School of Public Health, no discussions yet with Carlson School of Management

F. Develop administrative and leadership skills in faculty.

- **Develop assessment skills in faculty using the group who attends the AACP Institute**
  An Assessment Committee was formed and meets regularly
- **Ensure opportunities for chairing committees, with the intention of developing leadership skills, are given to faculty members.**
  Faculty are assigned to chair various committees.

5. Engage constituencies.

A. Provide highly valued expertise and programs to constituencies.

- **Hold the CMC Management Conference**
  The CMC Management Conference on the Medicare Prescription Drug benefit was held April 24, 2004. It was well planned and well received, and attracted more than 105 participants, exceeding our capacity of 100.
- **Establish partnerships and provide courses for industry**
  Ongoing discussion and programs are offered through the Office of Educational Development.
• Reexamine the needs and desires of constituents, especially as we transition through the completion of the DP4 program
  A practitioner focus group study was completed. A marketing plan is being developed to address the profession's needs
• Examine needs of preceptors and provide preceptor development and information about the curriculum
  The 2003 Preceptor conference addressed information about the curriculum. This will be an ongoing process.
• Continue service on boards of organizations, consulting.
  Faculty served on and with various professional organizations boards, including MPhA, and MSHP.

B. Establish effective avenues of input from internal and external constituencies.
• ***Communicate broadly with the student body via Web site and through town-hall style meetings.***
  Our newly reformatted Web site provides improved communication tools for and with students. The Office of Student Services staff has unlimited access to post information to its pages and update students. Class meetings are used to provide information to students and focus groups and surveys are used to gather input from students.
• ***Improve student recognition and satisfaction.***
  White coat ceremonies were held for both first and third year students. We are exploring the first-year students’ dissatisfaction with ITV and are working to address the technology and teaching issues.
• Implement the external advisory board
  The first meeting of College of Pharmacy National Board of Advisors was held in October. Representatives from many aspects of the profession sit on the board, which will offer guidance as the college begins its strategic planning.
• Consider a practitioner advisory board, perhaps using CMC and/or alumni boards
  Practitioners were placed on the National Advisory Board. We will determine the need for a separate group after a few years’ experience with the National Board.

C. Increase communication between faculty and students; combination of high tech-low tech approaches

• Work on faculty evaluation and feedback to students and faculty
  Associate Dean Ron Hadsall is exploring an electronic faculty evaluation system.
• Hold students responsible for representation and consider broadening representation.
  Not done
• Continue student focus groups with associate deans and include faculty in focus groups
  Associate deans for students and professional education meet regularly with randomly selected students to receive feedback.
• Examine student professionalization and culture of student responsibility for their education
  Associate deans meet regularly with group of student leaders to develop student professionalism seminar series and professional code.
• Explain overall curriculum to students often and identify how each course contributes to outcomes.
  An overview of curriculum was provided during orientation and discussion opportunities were provided. We are considering repeating this for other students in other venues.

D. Define our advocacy role.
• Define our role in advocacy for residency development (inpatient as well as community)
  A peer-reviewed paper was published describing community residency program. Two more years of accreditation were received. Drs. Speedie and Carter participated in writing an AACP White Paper on Residencies.
• Continue advocacy for rural health and pharmacy in greater Minnesota
  Faculty serve on rural health care advisory boards. The college continues to advocate to lawmakers for loan forgiveness as an incentive for graduates to practice in rural areas.
• Engage in practice development to support expanded need for experiential sites
  Several co-funded Duluth faculty were hired to develop new experiential sites. A new educational coordinator was hired for North Memorial Medical Center. A practice at CUHCC was started.
E. Optimize communications with internal and external constituencies.
   • Continue publishing annual report and incorporate feedback on first annual report into subsequent projects
     A second annual report was produced after consulting with faculty. A companion piece on the Capital Campaign was published in the spring.
   • Improve two-way communications
     The redesigned Web site provides more opportunities for interaction, continuing to explore other avenues for input.
   • Continue Web site improvements and develop Duluth program pages on site. Create tools for constituents to contact us through the site.
     Reconversion of the Web site created a more user-friendly design. A College of Pharmacy, Duluth, mini site is housed within the college’s main site. While some feedback opportunities exist, others will be added as the site evolves.

6. Allocate and manage resources to achieve priority items in the strategic plan.
   A. Provide appropriate staffing for implementation of the strategic plan.
      • ***Retain adequate staffing. Avoid automatic salary and hiring freezes***
        Two faculty positions were left vacant because of budget cuts. Faculty and staff (with the exception of bargaining unit) experienced salary freezes. However, departure of staff due directly to this has been minimal.
      • ***Consider requests for 80 percent FTE appointments in concert with needs and functions***
        Upon investigation, we didn’t consider this step necessary and took no formal action. Workloads of FTE would not allow for 20 percent reduction in time.
      • Stress importance of CQI and doing things smarter and better
        Ongoing, but more can be done.
      • Consider adding (or shifting) staff where opportunities for growth exist
        Done and ongoing, i.e., new scientist for pharmacology core laboratory and marketing specialist for Office of Educational Development.
      • ***Execute Duluth plan for staffing***

   We hired eight faculty and four staff for 2003-04 and interviewed candidates for 10 positions for 2004-05. Five positions have been filled and negotiations are ongoing for the others.

B. Compensate faculty at a level that will facilitate the retention and recruitment of outstanding faculty members.
   • Implement incentive plan
     Done. Impact will be assessed in summer 2004. See compact request for FY05 increases for junior faculty and newly promoted faculty members.

C. Compensate support staff at a level that will facilitate the retention and recruitment of outstanding staff.
   • ***Within University budget constraints, compensate staff to best of our ability***
     Faculty and staff (with the exception of bargaining unit) experienced salary freezes. However, departure of staff due directly to this has been minimal.
   • ***Retain staff recognition program***
     Five employees were recognized for outstanding service during Staff Day in June. Employees with service anniversaries were recognized in January during Faculty and Staff Recognition Day.

D. Integrate technology as an important component of strategic objectives.
   • ***Acquire technology (i.e., videoconferencing, Flashcom, Polycomm, etc.) for Duluth communications***
     Done; improvements being done during summer 2004.
   • ***Strive to maintain investments in technology***
     Some computers were replaced; better planning for this is needed.
   • ***Resolve laptop and PDA requirement for students at both campuses. Assess alternatives and bring recommendations to faculty. Identify where recommendations would be introduced in curriculum***
     We provided PDAs to students this year.

E. Within University constraints, work toward resolving and meeting space and facility needs.
   • ***Renovate Masonic space, equip it with appropriate technology***
Masonic 41 was renovated and equipped with technology to connect with Duluth campus. It is a very useful 30-person classroom.

- **Continue pressure on AHC to resolve classroom availability problems, especially small breakout rooms for TC students.**

We are working with the AHC to address classroom issues as well as to lobby lawmakers to help with funding to renovate classrooms throughout the AHC.

- **Complete Life Sciences predesign (Duluth)**

We worked with UMD officials to allocate space in Life Sciences building. Discussions regarding classroom space on UMD campus are continuing.

- **Support TRF, clinic space development and clinic release space (PWB) planning**

TRF plans are being built for June 2005 occupancy. Work is ongoing for other areas.

- **Find resources for facilities issues including air conditioning backup for server room, fire control system, security. Reduce risks where possible***

Done

- **Find/renovate research space for both lab-based and office-based researchers and graduate students.**

Renovation of the first floor storage space has been planned; it will create better solvent storage, desk space and a 600 SF laboratory.

**F. Develop and implement strategies to maximize resources.**

- **Continue efforts to expand non-state funding sources**

The Capital Campaign raised more than $6 million to support college activities, including scholarships, fellowships and research. ICR and research dollars are increasing. Outreach education is generating increased revenues from courses for undergraduates and other health professionals.

- **Increase class size at TC Campus to 110-112 entering students.**

We expanded the Class of 2007 to 112 students on the Twin Cities campus (the classroom was overcrowded so we will back off slightly).

- **Use interview to try to identify students who know what they are getting into and will stay in the program.**

A new interview process was implemented for 2004 interviews, including more consistent, trained interviewers.

- **Work with AHC Communications to develop marketing surveys on courses, including genomics/kinetics, for industrial scientists, as well as an executive masters program for managed care and a management residency. Identify niches.**

Ongoing; a marketing specialist was hired.

**G. Communicate with legislature and grass roots supporters.**

- **Continue current efforts**

Students, faculty and staff maintained a strong presence at state and national levels to support AHC and college goals.

**H. Enhance service-oriented support structure for faculty and students.**

- **Continue work on service orientation of business office, stockroom, OSS, grants management, HR. Communicate changes to all constituencies.***

A new employee was hired for the stockroom and service is greatly improved. More work is necessary in other areas.

**I. Develop Web-based databases and processes.**

More work is needed

**III. Ongoing issues with FY05 tails: A number of initiatives that were identified for work during FY04 are not completed and will require further action in FY05. These are identified below:**

1. **Incorporate herbal content in curriculum.**

   We will hire a cofunded faculty member with natural products/herbals expertise and a natural products practice. She will precept students in the herbal practice and work with the assessment committee to determine how to incorporate required teaching of herbals in the curriculum.

2. **Assess admissions diversity in first year of PharmCAS, Duluth and PCAT**

   The Admissions committee will study whether requirement of PCAT and the use of PharmCAS affected the composition of applicant pool and those accepted for admission.

3. **Complete searches for new faculty for Duluth**
Searches for 10 faculty positions are in various stages of completion (5 have been completed) and plans are in place to complete them by Fall 2004.

4. Complete search for Weaver chair.
Negotiations are underway with the top choice candidate.

5. Complete search for Medicinal Chemistry Head
We began the search for a new head of the medicinal chemistry department. This person will provide new leadership to strengthen this already-outstanding department and to provide a productive working relationship with the Center for Drug Design and the President’s Biosciences/Chemical Biology and Biocatalysis initiative. To recruit top candidates, we must secure funding for start-up packages, as well as identify appropriate and usable office and lab space for a new department head. The search has been temporarily suspended until these issues are resolved.

Compact request: $500,000 from AHC-held Ziagen funds in an “extraordinary need” request to fund the start-up package for the new medicinal chemistry department head, as well as bridge funding for salary. (Priority #13)

6. Infrastructure support for research
The college needs to hire additional staff—both pre- and post-award grants management (also contracts and external sales) if extramural funding continues to increase.

7. Improve internal communications with students
OSS (working with College Board) will convert the student newsletter from hardcopy to electronic format, allowing for better timing and more relevant content and will continue to distribute it to preceptors, faculty, students, etc.

8. Obtain funding for Duluth Life Sciences Building and design
Efforts continue to convince lawmakers to fund this project through bonding. College is also seeking private donors for further funding.

9. Develop problem-based learning and other active-learning pedagogies, especially in pharmacotherapy series
Work continues to determine how to interact with the School of Medicine, Duluth. The college has hired a faculty member (start date 7/1/04) to work with faculty in the Twin Cities and Duluth. An active-learning retreat for faculty involved in teaching pharmacotherapy courses was held June 1, 2004. Other interprofessional projects—including the immunization program—are successful.

10. Expansion and optimization of advanced practice experiences statewide
A site development team (Carter, Rodriguez, Sisson and others) will identify and hire six regional experiential coordinators (salary and start-up for positions already in budget), who will identify housing opportunities for students, assist in site/preceptor identification and development and locate other resources, including technology in preparation for students rotations in May 2006.

Compact request: $54,000 for technology; $10,000 for travel expenses associated with setting up satellites.

11. Examine teaching responsibilities and development of incentive plan component for teaching
The current plan allows for salary augmentations for extraordinary teaching from the departmental portions of the offset distribution and provides that new external funds for educational efforts can be counted. However, the rules for determining the amount of salary offset included in newly-generated tuition have not been determined. These rules must be written and approved in 2004.

IV. FY05 Initiatives associated with major long-term goals (organized according to strategic plan)

1. Educate pharmacists to improve the health of the people of Minnesota and society.
A. Classroom adequacy and availability
   • We will require another ITV classroom in the Twin Cities for the 3rd year of expanded classes in order to continue our successful expansion of the College of Pharmacy to the Duluth campus. If bonding is not received, backup plans must be developed.
• We must acquire additional technology and secure existing technology on both campuses for distance learning.

**Compact request: $75,000 non-recurring. Priority #4**

• Add an ITV support person for Twin Cities classrooms (already present in Duluth). This is a very high priority resulting from student surveys in Spring 2004.

**Compact request: $60,000 recurring (salary + fringe). The person will also assist with desktop computer support. Priority #3**

• We will also require small group discussion rooms in the AHC (Twin Cities) to support active learning pedagogy.

• Thirty-person classrooms for Duluth for third year: The Senior Associate Dean will work with UMD administration to identify space for two 30-seat classrooms that won’t fit in the new Life Sciences building. The classrooms will require ITV technology at about $40,000 per room (FY06 request)

B. Integrate Pharmaceutical Care concepts/ pharmaceutical care examples into basic science courses.

C. Interprofessional didactic course development/ Systems Management and Patient Safety/institutional management content/new faculty member

• We believe systems management, especially as it relates to patient safety, is a high-priority topic that could be used to initiate interprofessional didactic education in the Academic Health Center, since this is a high priority of the IOM reports. We propose hiring a new College of Pharmacy faculty member to develop and implement these courses as well as to develop AHRQ funded research program in systems management and patient safety and to teach other courses in institutional and health system management. This is an area of expertise that is missing, but badly needed, on our faculty. The recently revised outcomes for pharmacy education list systems management as one of three broad areas of curriculum and we will need to modify our curriculum to address this area.

**Compact request: $100,000 recurring (salary and fringes) plus $100,000 non-recurring (start-up) for patient safety/institutional management faculty member (Priority #10)**

D. Continue to develop community practice models, especially interprofessional practices

• Develop a coordinated vision that includes goals for Twin Cities and Duluth programs. Use Duluth faculty to stimulate development in Duluth area.

• Plan for Greater Minnesota strategy and rural health initiatives by hiring regional coordinators to develop APPEs (advanced practice experiences) in Greater Minnesota. Determine whether all students must complete APPE outside Twin Cities. Coordinate with AHEC and RPAP (Rural Physician Program) sites.

• Place faculty/pharmacists in family practice clinics for interprofessional practice experiences. The college currently funds 0.4 FTE of a faculty member who practices at Bethesda Family Practice Clinic and provides education for pharmacy students and family practice residents. The Family Practice Department and the College both consider this a highly productive relationship that results in outstanding patient care and interprofessional educational experiences. We would like to expand the relationship to several other Family Practice clinic sites include St. John’s/Phalen Clinic, North Clinic (North Memorial), and Smiley’s Clinic. Each adds a different dimension in practice development (e.g., diabetes care and research at Phalen clinic; continuity care between inpatient and ambulatory patients at North Memorial; urban underserved populations at Smiley’s Clinic).

**Compact request: Three 0.4 FTE faculty @ $52,000 each (salary plus fringes)= $156,000 (recurring); $75,000 start-up. Remaining salary and fringe would come from Family practice, MERC, Clinical revenues. (Priority #12)**
E. Provide additional teaching support with an additional resident in the Pharmaceutical Care Learning Center in the Twin Cities and by hiring part-time faculty in Duluth to fill gaps in faculty expertise. Compact request: $40,000 non-recurring for TC; funded from reserves; and $40,000 non-recurring for Duluth; funded from carry-forward. (Priority #8)

2. Educate scientists in flourishing and nationally recognized graduate programs.
   A. Meet needs for collegiate TAs, especially in the Pharmaceutical Care Learning Center; Develop and implement central CoP TA assignment guidelines re: hours, workload and supervisory duties.

   B. Study recruitment, completion rate and support of graduate students; consider accountability of graduate programs.

   C. Continue residency program development in Duluth and Twin Cities. Hold discussions with potential sites, determine whether to implement a residency strategy and determine source of funding if residency strategy is adopted. Adopt guidelines for residency programs affiliated with the college.

   D. Support development of Duluth faculty research efforts via development of graduate education in Duluth.
      • Connect Duluth researchers with those in Twin Cities and UMD researchers.
      • Work with the School of Medicine to develop a program in Duluth that links to existing graduate programs in the Twin Cities. A DGS would be hired who would help recruit and advise students, determine available course work, direct seminar series, facilitate interaction with Twin Cities programs, etc.
      • Some Duluth faculty may be part of Integrated Biosciences Program if it is approved.

   Compact request: Support School of Medicine, Duluth, request for $100,000. College of Pharmacy, Duluth will provide one TA in FY05, assuming appropriate teaching assignment can be found.

3. Engage in research and scholarship resulting in the development of new drugs and drug delivery systems, the optimization of drug use and the advancement of pharmaceutical care education
   A. Continue participation in the Chemical Biology/Biocatalysis Presidential Initiative.
      • During FY04 we made an initial investment in the development of a Chemical Biology Initiative and Sr.VP and Provost Maziar made a matching contribution. The group has made significant advances in assembling an advisory group and a group of outstanding faculty from multiple disciplines and multiple schools and colleges across campus to contribute to the effort which includes chemical genomics, biocatalysis and biomaterials. They have organized a website and a symposium and have released an RFP for seed money for projects that will advance their goals. This initiative was included in the Biocatalysis/Chemical Biology Presidential Initiative and members have been actively participating in the advisory group. They anticipate having a proposal ready by summer 2004 for inclusion in the biennial request.
         i. The College of Pharmacy will provide continued commitment for FY05 as promised in FY04 and is requesting the continued match as committed by Dr. Maziar. We support the inclusion of this important initiative which will advance the university’s ability to transfer technology for economic advancement as well as our ability to compete for NIH Roadmap funding, in the biennial request to the legislature.

   Compact request: Commitments as made in Fy04. Priority #9

   B. Develop and support clinical and translational research; Respond to the NIH Roadmap, the AHC Clinical Research Task Force Report and President Bruinink’s Translational Research Initiative.

Research performed in the College of Pharmacy is an integral part of the initiatives listed above. Our major focus is taking knowledge about the biological basis of diseases and developing and optimizing therapies to treat those diseases. Every discipline within the college is involved in this process. The current emphasis on translational and clinical research nationally and university-wide means that this is the optimal time for the
College to expand its research efforts as well, building upon the improvements in faculty and infrastructure that have occurred in the past 2-3 years. The specific initiatives included in our overall effort include:

- Hire two junior, tenure-track faculty whose research programs will focus on translational (in humans) or clinical research. (We have lost two faculty positions in this area due to recent budget cut-backs; it is critical that we replace them). Priority research areas will address College and AHC needs and/or build on areas of excellence. Such areas include pharmacogenomics, women’s health, endocrinology (diabetes hormonal etc), alternative and complementary medications, (clinical pharmacology: ADME, interactions, efficacy, safety, pharmacoepidemiology), oncology, infectious diseases, CNS clinical pharmacology (including pain), pediatrics cardiology, and solid organ transplantation. The faculty will be recruited with the agreement that they will participate in AHC Multidisciplinary Clinical Scholars Training Program (K-12 grant). Senior pharmacy faculty will participate in the K12 program as mentors. Compact request: $200,000 (recurring) salaries plus fringe plus $400,000 start-up (One-half requested for FY05; one-half for FY06) Priority #5

- Establish and operate a pharmacy research core to support AHC based, drug-related translational and clinical research. The pharmacy core will support AHC faculty conducting drug-related pre-clinical and Phase I-IV research. The pharmacy core will incorporate already established programs such as the Center for Drug Design, the Drug Delivery Center, the Center for Forecasting Drug Response, the ECP Core Laboratory, and PRIME. In addition, the pharmacy core will either develop additional drug development services or maintain a database of non-University organizations who can provide needed services e.g. toxicology testing. The pharmacy core may also provide services on a fee basis to organizations outside the University.

Such a core was recommended by the Clinical Research Task Force Report who said, “The CRTF concluded that clinical pharmacology is a crucial factor in the success of CR programs. Therefore, the CRTF recommends the establishment of a Clinical Pharmacology Center. The center would provide expertise in the design and conduct of phase I-IV clinical trials that require pharmacokinetic, pharmacodynamic and pharmacogenetic analyses, specialized blinding or unique drug formulations, dose-response relationships and concentration-controlled trials. The center should be capable of collaborating on local, national, and international multi-center studies.”

Compact request: Three mid-career faculty members in three areas of drug discovery and development to complement our strengths in these areas and provide direct service to researchers in the AHC as well as performing their own research: $400,000 (recurring) salary and fringe; $600,000 start-up. This is a request for FY06 since space will not be available until the Translational Research Facility is occupied. Searches could begin in FY05 if funding were promised.

C. Minimize faculty administrative activities for research

Dedicate one FTE staff, fluent in this area, to development side of sponsored grants/external sales. The individual will assist faculty and other staff in determining whether an application is a grant, contract or external sales and assist faculty in preparing contracts and external sales agreements, completing IRB applications, etc.

Compact request: $ 60,000 salary and fringe (recurring); $30,001 is available from new ICR; $30,000 requested

D. Maximize relationship with Fairview University Medical Center

Enhance Relationship with Fairview Health Center: Initiate discussion between COP faculty and Fairview Sr. VP for Research and Education to identify issues. Mutually formulate solutions to problems. Track progress and re-convene faculty and Fairview management on an as needed basis to assess progress.
4. Foster leadership in the profession and the pharmaceutical sciences; develop leadership skills in students, staff and faculty.
   A. Improve faculty salaries
   - CoP salaries continue to be ranked at the bottom of the Big Ten schools. Of particular concern are market comparisons for a number of junior faculty members, each of whom is doing very well and is a prime target for recruitment by other schools. The demand for faculty members in colleges of pharmacy is extremely high, especially with new and expanded school programs. We have invested a great deal in each of these faculty members and need to be proactive in keeping them. In 2003, the average starting (year 1) salary of pharmacy faculty members in the U.S. is $70,125 and year 2 is $71,700. The college has 10 faculty members, one to four years in rank, whose paid salaries range from $64,890 to $71,000. Our proposal brings each faculty member's salary between $70,125 and $72,000 depending upon time in rank.

   Compact request (from CoP resources): $35,000 salary and fringe. Priority #1.
   - Seven faculty members successfully submitted credentials for promotion this year. A college policy brings each newly promoted faculty member to the AACP average salary for zero years in rank for the rank to which they have been promoted.

   Compact request (from CoP resources): $80,000 for promotion increases (recurring). Priority #2.

   B. Respectful workplace programs
   - Work with Employee Assistance Office and schedule respectful workplace educational programs in each CoP department, using Central Council as the first group to attend training.

   C. Faculty development, active learning pedagogy, mentoring
   - Coordinate development of critical thinking and problem solving in the pharmacotherapy course series.
   - Actively pursue team-building for teams of Duluth/Twin Cities faculty members teaching each course in the first and second years of the curriculum.
   - Provide faculty development on the use of ITV and other tools for teaching students on two campuses.
   - Pursue faculty development by having several faculty members participate in existing University leadership programs.

   D. P&A development

5. Engage constituencies: Continue ongoing initiatives.

6. Allocate and manage resources to achieve priority items in the strategic plan.
   See facilities analysis below. See compact financial summary.

   Compact request: Renovation of Weaver-Densford Hall 1-125 (current stockroom). Will create an additional 600SF lab as well as new solvent storage that will allow us not to add 2 hour walls to WDH floor 8. $250,000 currently available in CoP capital expenses account; Need $125,000 more to meet $375,000 estimate. Priority #6.

V. Diversity
A. Student diversity, recruitment and retention
   We will continue efforts to actively recruit diverse applicant pool by attending national and regional programs and working in minority high schools to identify high-potential students. The recruiter, Winston Minor, has recently visited a number of tribal colleges in the state to lay the groundwork for recruiting Native Americans. We will also work with the UMD School of Medicine for recruiting Native Americans. The class of 2008 has 15.3% students of color (may be more; some applicants didn’t declare race or ethnicity). This is about the same as past years, indicating that the new admissions procedures have not had an impact on the racial and ethnic diversity of the class.

   We are working with Barbara Shiels to design and implement a diversity strategy in accordance with the Michigan Supreme Court decision. The following statement, which is in compliance with recent Supreme Court rulings, was approved by the faculty at the May 18, 2004 College Assembly meeting:
Diversity Statement for College of Pharmacy:

The students at the University of Minnesota College of Pharmacy will learn to assess and address the drug-related needs of patients from many different cultures who might speak a number of different languages and possess different value systems. This creates a need for students, our future pharmacy practitioners, who are themselves ethnically, racially, socio-economically, geographically, and intellectually diverse, having varied life experiences and academic backgrounds.

Consistent with University of Minnesota Regents policy, the College of Pharmacy Admissions Committee will consider, to the extent necessary to produce a diverse student body, factors including, but not limited to, those set out in the University Equal Opportunity Policy. Factors to be considered in application review will include:

A. Ability in multiple languages
B. Academic background
C. Challenging or disadvantaged background
D. First generation college student
E. Geographic diversity
F. Professional background
G. Race / ethnicity

B. Faculty/staff diversity: We are making some progress in diversifying our faculty ranks. Of 12 new hires for 2003-04, 2 are Asian (1 tenure-track, 1 non-tenure) and 4 are females (1 tenure-track). Of six hires made thus far for 2004-05, one is Latina and one is Asian (both tenure-track) and 4 are females (1 tenure-track).

Central council and the departments will undertake respectful workplace training during the 2004-05 academic year. We will work with staff in the Employee Assistance Program office to conduct the sessions.

VI. Outreach and civic engagement

College of Pharmacy faculty are actively involved in state and national professional organizations, including MPhA, MSHP, APhA, ASHP. Our students and faculty are involved in working for state and federal funds through their lawmakers.

We have community practices throughout the state and have distributed our experiential education program in community, ambulatory and institutional sites throughout the state. We are developing pharmaceutical care in community health centers and have hired a faculty member to practice and educate students at CUHCC to serve the urban underserved patients in our community. We expanded our college to Duluth to help meet the needs of underserved populations in rural areas.

College of Pharmacy scientists are working with 3M and other health care companies. Our faculty are involved in consulting with federal and state lawmakers on drug pricing, access and delivery. Our students and faculty participate in the Early Pharmacy Experience with Community Teachers program and in a Pharmaceutical Care Clinic as well as on the rural health initiative.

VII. Enrollment management

Because of a record number of applications and desire to find new sources of revenue, we admitted 112 first-year students to the Twin Cities campus in Fall 2003, seven more students than initially planned. We have subsequently discovered that 112 students overtax our learning lab space as well as classroom space. Students and faculty have expressed concerns with the large class. We are aiming for less than 110 for the class entering the Twin Cities in the Fall of 2004. The Duluth classrooms can handle 50-52 students.

We are limited with how much we can raise our tuition and maintain our competitiveness as a top choice for pharmacy applicants. Our tuition for the 2003-2004 school year puts us at the top of public colleges of pharmacy around the country. A chart in the “Financial Issues” section below outlines where our proposed tuition would rank us with comparable colleges of pharmacy. However, for now our applicant numbers remain strong at 569, which is comparable to a year ago.

VIII. Facilities

The CoP is engaged in the following facilities renovations or construction:

- The Translational Research Facility will provide the CoP 8,500 sq. ft. of office and laboratory space for the when it opens in Summer 2005
- The Life Sciences Building renovation in Duluth will provide 17,000 sq. ft. to 18,000 sq. ft. of space for the program in January 2006 if bonding is received.
- Addition of hoods to the eight floor of WDH will make the lab space more useful for Medicinal Chemistry faculty
• Redesign of first floor space in WDH will improve chemical and non-chemical inventory management and chemical safety, as well as to provide an additional laboratory for new faculty.
• New space on Mayo 2 is being renovated for the expansion of the Office of Educational Development. Expect completion in June 2004.

Other needs in the short-term future include:
• We need use of an additional ITV classroom in the Twin Cities to support the expanded curriculum by Fall 2005.
• Small group classrooms on the Twin Cities campus are also needed to support active learning pedagogy.
• Space is required for the new Medicinal Chemistry department head. He/she needs approximately 1200 SF on WDH 8 (or 9), but this can be achieved by moving others to space somewhere else. Sufficient hood space is a critical factor.
• Two technology-equipped 30-person classrooms will be needed in Duluth for academic year 2005-06 and are not included in the Life Sciences planning.
• We need technology in support of the satellite experiential education sites at six locations around the state by Summer 2005.

Longer term needs:
• We have continued need for expanded laboratory and office space and will compete for renovated space in PWB once the clinics are moved.
• We have continued interest in pharmacy being an integral part of the new clinic space as it is developed.

A survey of anticipated space needs for the next five years is being compiled, based upon anticipated faculty/staff growth and/or retirement. It will be submitted as an additional report.

IX. Financial issues

The College of Pharmacy weathered the cuts faced in FY04 through a combination of increased tuition, increased research initiatives, phased retirements, faculty vacancies and dedication of Ziagen royalties.

Despite these substantial cuts, we were able to maintain our excellent professional education, and faculty continued cutting-edge research.

The ongoing cuts, however, hurt us, leaving two faculty positions unfilled. Those positions have the potential to be held by faculty who generate significant research dollars and share the teaching responsibilities.

The FY05 proposed cuts, “swaps” and reallocation to salary increases from the general fund total $910,000. Included in that figure is the 2.5 percent salary and fringe increase, Central O&M swap and AHC Targeted Cut.

Once the college’s identified priorities (including junior faculty salary adjustment, Duluth Graduate program support, etc.,) are included, the college faces an FY05 challenge of $1.148 million.

We propose to meet the $1.148 million challenge through a combination of sources, including tuition increases, Ziagen revenues, continued faculty vacancies and use of reserves. We are requesting to be allowed to fund $90,000 in one-time, non-recurring needs from college reserves.

As proposed in our FY04 Compact, the college maintains its basic principles to meet the cuts we face in FY05. We remain committed to ensuring the PharmD tuition increases are as small as possible. We propose to increase our tuition by 9.46 percent for residents and 9.71 for nonresidents for the college’s primary PharmD program and 2.31 percent for the DP4 program. We are acutely constrained in our ability to increase tuition and still remain competitive in attracting high-caliber students (see chart below). Even before the FY05 tuition increases are included, we already rank as one of the most expensive colleges of pharmacy in our region and nation. The chart below outlines where our proposed tuition + fees would rank us with Big Ten and other regional colleges of pharmacy for the 2004-2005 school year.
In state          Out of state
University of Missouri, KC  $459.35/credit hour  $901.95/credit hour
Univ. of Michigan        $14,800          $27,800
Drake (private)         $20,200          N/A
NDSU                   $13,616          $14,237
UIC                    $13,616          $21,844
Creighton (private)      $22,518-$23,222(**)  N/A
University of Iowa       $12,422          $26,576
SDSU                   $8,776           $13,942
UW Madison              $10,131(***)     $22,382(***)
U of Minnesota           $14,781          $26,170

(**)Tuition lower for fourth-year students.
(*** Rates for '03-04. '04-'05 unknown.

The college will again be able to maintain the current level of operations even with the additional FY05 cuts. But we are left with little or no funding for new initiatives, including those presented in this compact., and no room to cut further during the next biennium. It’s unlikely that the sources of revenue that we have grown to help us balance the budget during the past two will continue to increase at the same rate.

Furthermore, the Doctor of Pharmacy for Practicing Pharmacists (DP4) is experiencing planned enrollment reductions since it was always designed to enter four classes for the 4-5 year program and to cease once the program was completed. This planned decrease in tuition was included in the calculations of the tuition/O&M swap, despite an appeal to Central finance. Tuition from this program in its latter years was envisioned as seed money for programs to replace its revenue. Losing it will seriously hamper the college’s ability to develop new sources of income to replace the lost state support.

X. Compact Development

In January 2000, the whole faculty met during a two-day retreat to develop a five-year strategic plan for the College. The work progressed through the calendar year 2000 and was approved by the faculty at its 2/21/01 college assembly meeting. It has been used to guide compact development annually since then. The FY05 compact development was done initially by the Central Council (Dean, department heads, associate deans, P and A staff, faculty representative, civil service staff member and student), We reviewed our progress and brainstormed ideas for moving our goals ahead in the coming year. Proposals were developed and the compact to that point was taken by Department heads for consultation with the faculty in their departments. Comments were brought back to Central Council and proposals were prioritized. Budget issues have been discussed with Central Council and with each of the departments during the spring semester and cuts to the budget necessitated by the current financial challenge were proposed by the dean and the CFO and approved by Central Council.

XI. Data Profile/Critical Measures for Health Professional Schools

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<td>(in millions)</td>
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Non-SPA grants, contracts, external sales revenue  $1.25
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<td><strong>Educate pharmacists / improve health: Curriculum – support integration of curriculum in context of developing consistent practice, philosophy and active learning pedagogy. (Tobacco)</strong></td>
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<td><strong>Educate pharmacists / improve health: Experiential program development – continue site development of community/ambulatory pharmaceutical care education sites (Tobacco)</strong></td>
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<td><strong>Educate pharmacists / improve health: Enhance community and populations based patient care (Tobacco)</strong></td>
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<td><strong>Educate pharmacists / improve health: Site coordinator positions</strong></td>
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<td><strong>Engage in research and scholarship: Bridge funding for grant (Tobacco)</strong></td>
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<td><strong>Solve space crisis: Planner for class expansion (Tobacco)</strong></td>
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<td><strong>Faculty member to conduct research and develop education programs for students, pharmacists and other health professionals in the area of herbal medicinals</strong></td>
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<td><strong>Interprofessional experiential education – Faculty practice</strong></td>
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<td><strong>Workforce Development (Tobacco)</strong></td>
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<td><strong>Faculty Student Ties to Twin Cities (joint with Duluth School of Medicine)</strong></td>
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$^{R}$Recurring; $^{N}$Non-recurring