Chair Alison Kris called the meeting to order at 3:34 p.m.

1. **Announcements**

2. **Approval of the minutes of 1/22/16**

   Motion [Caster/Miecznikowski]: to approve the minutes of 1/22/16. The motion passed unanimously.

3. **Tabled motion for the Undergraduate Curriculum Committee**

   Motion [Davidson/Nash]: In light of the centrality of the core to the Fairfield University undergraduate experience—and given the need for a regular mechanism of core review, revision and renewal—the General Faculty charges the Undergraduate Curriculum Committee with developing a committee or subcommittee dedicated to that purpose.

GFS Susan Rakowitz explained that the October motion to table specified tabling to the next meeting. The next meeting would have been January, but the motion maker was at a conference and asked to defer the motion to this meeting. Because the motion to table was not indefinite, the motion is automatically back on the floor for discussion. Prof. Kris then recognized Prof. Ron Davidson, the maker of the original motion.

Prof. Davidson said that in light of the actions of the UCC over the last month or two, he would like to withdraw the motion. Prof. Kris asked whether there were any objections. Seeing none, the motion was withdrawn.

4. **Update from the Faculty Salary Committee**

Prof. Chris Bernhardt, Chair of the Faculty Salary Committee (FSC), spoke for the committee. His comments were accompanied by the attached powerpoint presentation. He began by acknowledging the members of this year's FSC (Profs. Paul Baginski and Bryan Crandall for one semester each, and Profs. Mark Demers, Bob Epstein, and Sonya Huber) and of the administrative team. He explained that they have been meeting weekly since close to the beginning of last semester and that the discussions were going well. He said that VP Tom Pellegrino, chair of the administration's team, was a good communicator. He added that, contrary to what happened last year, the Healthcare Committee has also been meeting regularly, about every two weeks. Provost Lynn Babington chairs that committee. They have had wide-ranging discussions.

He said that the primary concerns of the faculty are to make sure that the compensation figures reported to AAUP are accurate, to make sure that the 80/20 split is actually 80/20, and to re-establish the reserve fund (see below). The administration is most concerned about controlling costs, especially healthcare costs, and addressing the excise ("Cadillac") tax. This tax was due to begin in 2018 to fund the Affordable Care Act. At the end of 2015, Congress pushed this tax off to 2020, so the discussions the faculty and administration have had around this issue are essentially moot.

Prof. Bernhardt went on to explain the reserve fund. They found a letter from former VP of Finance, Bill Lucas, to the then FSC chair. The letter included the following: "As you know we have a self-insured program which includes by design a reserve fund. … it was part of the board’s requirement as well as good management that the program be built with a reserve fund to deal with the variable nature of medical costs."
In good years, when costs were below the premiums collected, the excess would go into the reserve fund. In bad years, when costs exceeded premiums collected, the difference would be made up from the reserve fund. In this way, the reserve fund smooths the volatility of healthcare costs. At some point, the reserve fund disappeared. The FSC would like to know when, how much was in it when it disappeared, and where the money went. The administration can't answer those questions because the fund disappeared before anyone currently in the Finance division was here. Prof. Bernhardt speculated on what may have happened. Several years ago when we had a fiscal crisis because of underenrollment, there were staff layoffs and budget deficits throughout the year. Then suddenly money appeared at the end of the year and we finished the year with a budget surplus. He guessed that that money came from the reserve fund.

Now, without a reserve fund, the university assumes the risk. If there's a loss, they pay it, but if there's a surplus, they pocket it. There seems to be a conflict of interest because the administration decides which actuaries determine the premiums. In 2013 there was a small loss and then the university switched actuaries and there have been no losses since. Without the reserve fund, the administration needs some place from which to draw money if there's a loss, so they built a volatility factor of approximately $1,000,000 per year into the budget.

Moving to 2015 data, Prof. Bernhardt explained that all of the numbers being presented were from university reports; they are undisputed. He said that in 2015, there was a $2.7 million surplus. Noting that this seems like a large number, he discussed the difficulty of determining whether it's price gouging in the context of our self-insurance. With insurance companies, there are laws to protect against price gouging. If they pay out less than 85% of their budget in actual health care costs, they have to repay money. We're not an insurance company, so those laws don't apply, but we're paying out just below 80% in health care costs (excluding overhead). The administration's explanation of the surplus is that it's been a good year because we're generally healthy.

With regard to reporting data to AAUP, he reminded the faculty of the administration's commitment to the 95th percentile in each of the ranks. It is important that the data reported to AAUP are correct, but the data are sent in January. That means that health care costs are estimated for the second half of the academic year. In the past, the administration assumed the worst care scenario; they assumed that the entire volatility factor would be spent on the health care, so they included it all as part of our compensation.

The one thing the FSC has accomplished so far this year is to eliminate the volatility factor from this year's AAUP data submission. Remaining on the to do list for the FSC is to reinstate the reserve fund, seeding it with the 2015 $2.7 million surplus, and to maintain no changes to health care benefits.

To end the presentation, Prof. Bernhardt read the following report from Prof. Walt Hlawitschka, representing the faculty members on the Health Care Committee:

The administration has over-budgeted healthcare by almost $4mm over the past 3 years, and based on the numbers the administration has provided, the University is spending less in total for healthcare than was spent 7 years ago. The future should show more improvement for the University as the faculty are adding a very large deductible starting in January 2016. And, while the amount spent by the University per person on healthcare decreased by about 3.3% over the past 7 years, tuition increased by over 22.6% during this period. Healthcare, as a percent of the University’s budget, is probably decreasing faster than any other item. There is no healthcare crisis at Fairfield University.

At this point, the floor was opened for questions

Prof. Betsy Bowen asked whether the administration was objecting to the FSC's call for the reinstatement of the reserve fund. Prof. Bernhardt said that the administration was not objecting to the reserve fund, but wanted to start it with nothing and then tack an extra amount onto premiums to fund it. The issue is still under discussion.

Prof. Joan Weiss noted that we're already paying extra- 24.7% rather than 20%. Prof. Bernhardt agreed that we've paid into the surplus.
Prof. Irene Mulvey said that she was deeply concerned about the disappearance of the reserve fund.

**Motion [Mulvey/Bowen]:** The General Faculty directs the FSC to investigate what happened to the reserve fund, how much was in it when it disappeared, where the money went, and report their findings back to the Academic Council.

Prof. Bernhardt said that they have asked these questions and the administration hasn't been able to provide answers. He said he wasn't sure how they would find the answers, but they would try. Prof. Joe Dennin said he would think it's more appropriate for the administration to figure out where the money went. Even if they don't have the institutional memory, they should have the relevant records. The FSC should task the administration's team with finding the data.

**Motion passed unanimously**

Prof. Vin Rosivach said that the FWC newsletter seemed to indicate wage theft. If the surplus was inappropriately reported as part of our compensation, doesn't that mean that we're not in fact getting to the 95th percentile? Prof. Bernhardt said that we're very concerned about reporting to the AAUP. This year we told them to double the six months of actual costs in order to estimate the full year's costs, so this year's numbers should be good. Prof. Rosivach said that if we were underpaid last year, then our base is down, perhaps for more than one year. Prof. Bernhardt said that they were aware of the volatility factor last year and did some back of the envelope calculations determining that though the compensation amounts were over-reported, more accurate numbers wouldn't have triggered a 95th percentile issue.

Prof. Sonya Huber, member of the FSC, added that the administration is hung up on taking away the PPO option again. The administration's position is that we're in a healthcare crisis, which they seem to be manufacturing. We're not in a stalemate, but there's a difference of opinion about reality. Prof. Bernhardt concurred, saying that proposals were being exchanged, but at the moment, they are very far apart.

5. **Informational presentation organized by the Student Life Committee on the current state of student mental health and crisis management**

Prof. Jenna LoGiudice, Chair of the Student Life Committee, spoke on behalf of committee members Profs. Jennifer Adair, Gwen Alphonso, and Harvey Hoffman. She explained that they wanted to update the faculty on student mental health because the student life subcommittee of the Board of Trustees has focused on these issues this year. The committee felt this information would be helpful to the General Faculty. She then introduced two guests, Dr. Susan Birge, Director of Counseling and Psychological Services (C&PS), and Mr. Todd Pelazza, Director of the Department of Public Safety (DPS).

Dr. Birge began by saying that they were pleased to be here and would try to be succinct with regard to this important topic. They wanted to give a sense of Fairfield students and broader national trends. She said that most young men and women who go to university do quite well in adjusting, but an increasing number are having a difficult time.

The Delworth model, developed 25 years ago, distinguishes between students who are disruptive and those who are disturbed. The former act out inappropriately in ways that impact the community. The latter have mental health issues. She noted that sometimes these types intersect, but they don't always. Many students with mental health issues are high functioning and not disruptive.

Dr. Birge went on to explain that nationally, and at Fairfield, there is an increase in students coming to campus with prior mental health issues, including histories of medication and/or hospitalization. More students are entering with significant anxiety. They come to us right after the stress of getting into college. They expect perfection of themselves and they want it immediately. In many cases, their parents have given them what they want immediately, so that's what they expect of us. They often lack coping skills because they have not had the opportunity to make mistakes, to fail, or to deal with being told "no". Without those experiences, they have not developed resilience. Our students have increased prevalence of suicidality, suicidal ideation, and suicide threats. Because of their limited coping skills and lack of perspective, the smallest slights can quickly lead to suicidality. There has also been an increase in violence and threats of...
violence. For many students, everything is urgent, and one of our tasks is to distinguish between urgency and emergency.

At this point Mr. Pelazza said that we are trying to create a safety net and faculty play an integral role in that process because of how much faculty interact with students. All DPS employees are certified medical technicians and have participated in crisis intervention training. This training is about recognizing someone having his or her own crisis, even if it might not seem to be a warranted crisis. Since September, DPS has responded to 27 mental health related calls, 13 of which led to hospitalizations. He noted that these issues are not limited to first year students.

Dr. Birge explained that C&PS consists of 13 professional staff including psychologists, a social worker, an alcohol and drug counselor, mental health counselors, trainees, including an ARPN, and 2 psychiatrists who are available part-time. Currently the wait time for appointments with one of the psychiatrists is four weeks. That wait time has resulted in more referrals to local doctors off campus. Twenty years ago, there was only one psychiatrist with many fewer hours on campus, and often those hours weren't fully used. C&PS has walk-in hours every day so that no one has to wait to see a mental health professional. She then presented some data from last semester. Twenty-one students threatened suicide; many of them were hospitalized and/or medically withdrawn. Three students made serious suicide attempts, one of whom made several attempts. There were two reported sexual assaults, not necessarily on campus, several cases of overdoses, three students who made threats, and a number of students who experienced some sort of traumatic event and/or mental health problem. Altogether, there were 48 crisis responses in the first semester and 21 students who required hospitalization, and there have been more cases already this semester. There used to be one or two such cases each semester, and suicide attempts and threats are up 43.7% just since last year. She noted that these numbers may be underestimates because not all cases are reported. She said that C&PS and DPS work together in these situations. A major goal is to recognize signs and indicators so that they can intervene with treatment.

Mr. Pelazza talked about threat assessments. Informal assessments are handled by C&PS. For formal assessments, there is a Threat Assessment Team as mandated by law. It's comprised of representatives from C&PS, Human Resources, Student Affairs, Academic Affairs, DPS, and local law enforcement. He pointed out material contained in the packet for today's meeting that lists some pre-violent indicators including threats of violence, fascination with firearms, talking about violence, crossing boundaries, marked academic decline, and changes in personality, mood, or behavior. Concerns can be reported through a dean, DPS, or C&PS. The Crisis Management Team operates during a crisis. There is a Case Management Team that tries to proactively identify and address students of concern. They meet every other week during the academic year. Their work is confidential and they recommend courses of actions. Some examples of things about a student that faculty might report are worrisome writings, excessive absences, or death of a family member. Assoc. Dean of Students Will Johnson chairs this committee. Concerns can be reported to him or to DPS or to C&PS.

Dr. Birge explained that if you are concerned about the safety of a student or the safety of our community, DPS will assist immediately and then C&PS will make a full assessment. This process includes an interview and evidence-based assessment and consultation with a Bridgeport Hospital psychiatrist. The same holds true for assessments of threats of violence, especially in student writings. Other concerns, for example about excessive absences, should be referred to the Case Management Team.

She went on to explain that if a student confides in a faculty member about some sort of problem, the faculty member doesn't have the privilege of confidentiality because we are not licensed professionals. We can offer privacy, not confidentiality. Faculty can encourage students to seek counseling and/or explain that they themselves will consult with C&PS. When C&PS reaches out to students based on a faculty member's concern, they do so very gently, explaining that we are a community of men and women for others. When someone has a concern about a member of the community it is appropriate to pass that concern on. The counselor then says that someone on this campus is concerned about you, without disclosing the faculty member's identity. She says that faculty have saved lives by reporting their concerns.

Mr. Pelazza noted that one of the ways DPS communicates during emergencies is through the stag alert system, which includes cell phone calls. He pointed out that if many cell phones go off at the same time
during class, it's probably a stag alert message. The university has just bought a system that can send a message out over every registered desktop and iPad on campus. He then referred to the updated faculty/staff guide that he had distributed, and which is attached to these minutes. He mentioned the training that was recently offered to faculty and staff and encouraged those who couldn't attend to go to the DPS website (Fairfield.edu/dps) and watch the video, "Shots fired". The key point is that there are three options in a violent intruder situation- run, hide, or fight. You should first try to get away, next hide safely, or finally, make the decision to fight. At the first opportunity, call DPS; they will contact local law enforcement, but their response time will be faster. Provide DPS with your name, location, and as much information as possible. The guide reviews the options of sheltering in place, lockdown (which may include barricading the door if it can't be locked), modified lockdown, and evacuation. If there is an incident, DPS is there for acute care; long term care is for C&PS.

Dr. Birge concluded that she hoped the presentation had given a sense of national and local trends in student mental health, and they were happy to take questions.

Prof. Patricia Behre asked about our policies on firearms and whether they are discussed with students. Mr. Pelazza said that we don't allow weapons on campus and we make that message clear in a safety presentation given to all students. Regardless of whether someone has a gun permit, he or she is not allowed to have a gun on campus.

Prof. Bowen began by thanking the presenters for their work. She then asked to clarify the distinction between privacy and confidentiality. Are faculty mandatory reporters or is it just that we have different obligations to communicate? Dr. Birge explained that confidentiality is a legal term and privacy is much broader. Confidentiality is protected for an attorney, priest, or medical professional, not for faculty. Students may expect privacy, but faculty need to ascertain whether they have sufficient concern to report a student and/or encourage the student to get help. Mr. Pelazza interjected that Prof. Bowen had attended the training sessions which, among other things, encourage faculty to check entrances, exits, and locks in classrooms.

Prof. Bowen did that and reported a problem with a door that needed to be fixed.

Prof. Paul Baginski asked whether faculty are mandatory reporters for sexual assaults. Dr. Birge said, yes.

Prof. Michelle Farrell wanted to clarify how to proceed besides encouraging a student to go to C&PS. She wasn't comfortable with emailing "counseling" rather than a specific person. Dr. Birge said that she would prefer a phone call so that they could consult about strategy. She explained that when a faculty member calls with information, that information is recorded and becomes confidential. It prompts gentle outreach to the student and can be very useful if the student comes in for help. She noted that the number of consultations with faculty tripled last semester and several resulted in students getting much needed treatment. Prof. Farrell asked whether she should be reporting to her chair as well as C&PS. Dr. Birge said that if there is a high level of concern, there is no harm in sharing with a chair or colleague, but if the concern is low level, then it need not necessarily be shared with other faculty. Mr. Pelazza added that faculty should trust their instincts in detecting problems.

With no further questions, Dr. Birge reiterated that faculty should not hesitate to contact them. Mr. Pelazza added that they would also be happy to speak to departments.

6. Adjournment

A motion to adjourn [Epstein/Dennin] was uncontested at 4:50 p.m.

Respectfully submitted,
Prof. Susan Rakowitz
Secretary of the General Faculty
Faculty Salary Committee

2/19/2016

Primary concerns (Fall)

- Faculty
  - Accurate compensation numbers reported to AAUP
- Administration
  - Excise (Cadillac) Tax
  - Controlling costs
- Health insurance premiums – 80/20 split
- Re-establishing the reserve fund

Salary Committee

- Faculty:
  - Paul Baginski / Bryan Crandall
  - Chris Bernhardt (Chair)
  - Mark Demers
  - Bob Epstein
  - Sonya Huber

- Administrators:
  - Scott Esposito
  - Tom Pellegrino (Chair)
  - Christine Siegel
  - Mike Trafecante

Reserve fund

As you know we have a self-insured program which includes by design a reserve fund. ... it was part of the board’s requirement as well as good management that the program be built with a reserve fund to deal with the variable nature of medical costs.

- Bill Lucas (August 2006)

Health Care Committee

- Faculty
  - Chris Bernhardt
  - Walt Hlawitschka
  - Sonya Huber
  - Michael Tucker / Irene Mulvey

- Administration
  - Lynn Babington (Chair)
  - Bob Betlinski
  - Scott Esposito

Reserve fund has disappeared

- When did it disappear?
- How much was in it when it disappeared?
- Where did the money go?
Program without reserve fund

- The university assumes the risk.
  - If there is a loss they will pay it
  - If there is a surplus they will pocket it
  - They decide which actuaries determine the premiums.

- Volatility factor added to budget ($1,000,000 per year approx.)

How’s it working? 2015

<table>
<thead>
<tr>
<th>Gross Budget for Medical</th>
<th>$15,093,960</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amount contributed by EE (20%)</td>
<td>$3,018,792</td>
</tr>
<tr>
<td>Amount &quot;contributed&quot; by ER (80%)</td>
<td>$12,075,168</td>
</tr>
<tr>
<td>Total Costs (including overhead)</td>
<td>$12,326,624</td>
</tr>
<tr>
<td>Surplus:</td>
<td>$2,767,336 (18.3% of budget)</td>
</tr>
<tr>
<td>Cost split percentage EE/ER</td>
<td>24.5% / 75.5%</td>
</tr>
</tbody>
</table>

Where are we?

Done:
- Volatility factor eliminated from this year's AAUP submission.

To do: (faculty position)
- The reserve fund should be re-instated. 2015 surplus as initial amount.
- No changes to health care benefits.

HCC Faculty Member Report for February Faculty Meeting

The administration has over-budgeted healthcare by almost $44m over the past 3 years1, and based on the numbers the administration has provided, the University is spending less in total for healthcare than was spent 7 years ago2. The future should show more improvement for the University as the faculty are adding a very large deductible starting in January 20163. And, while the amount spent by the University per person on healthcare decreased by about 3.3% over the past 7 years4, tuition increased by over 22.6% during this period5. Healthcare, as a percent of the University's budget, is probably decreasing faster than any other item6. There is no healthcare crisis at Fairfield University7.

— Walt Hlawitschka, for faculty members of HCC

AAUP data submission

- Commitment to 95th percentile.
- Important submitted data is correct.
- Health care costs are estimated for six months.
- In past, administration assumed worst case scenario — all of volatility factor spent on health care.

Footnotes for previous slide

1Data compiled by Mercer and provided to HCC by the administration. The reports are entitled, "Fairfield University Experience Report." The amount over-budgeted is determined by the annual differences between "Total Medical Gross Budget" and "Total Medical Gross Plan Costs."
2Data compiled by Mercer and provided to the HCC by the administration. The report is entitled, "HCC 2015 Mercer Peer Survey." 32015-16 MNU.
3Data compiled by Mercer and provided to the HCC by the administration. The report is entitled, "HCC 2015 Mercer Peer Survey." This report shows that Per Employee Per Year (PEPY) costs went from $13,609 in 2009 to $16,457 in 2015. Over this period, the University’s share of these costs went from 100% to 80% so that the University’s share of 2013 costs should have been only $13,105. This is a decrease of $441 per employee per year or 3.3% from the 2009 level. The actual decrease in total healthcare expenditures is much greater as there are far fewer employees currently receiving healthcare benefits.
4Data from Fairfield.edu and CollegeBoard.org. 2009 tuition reported as $36,075 and 2015 tuition reported as $44,250.
5Common sense interpretation of the data.
6See footnotes above.
FACULTY/STAFF EMERGENCY GUIDE
Fairfield University Department of Public Safety

INITIAL ACTIONS
The individual discovering or receiving information about an incident will take the following steps:
1. Call Department of Public Safety (DPS) at ext. 4090 or 911
2. Provide the following information:
   • Your name
   • Nature of incident
   • Location of incident
   • Severity of injuries or property damage
   • Telephone number (if a call back)
3. Take action to protect students, faculty, staff and property. This might include:
   • Moving people away from threat
   • Isolating and securing the area
   • Providing assistance as needed to students and personnel
   • Directing public safety responders to the scene
4. Await instructions from DPS, police, or University officials

FOR INCIDENT INSTRUCTIONS AND UPDATES
1. Outgoing message on the University's main line: 203-254-4000 or ext. 4000
2. Posting on the University's Website — www.fairfield.edu
3. Utilization of the SagenAlert emergency notification system

RESPONSE OPTIONS
SHELTER IN-PLACE
• If inside:
  • Use a desk or piece of furniture as a shield
  • Move away from windows and doors
  • Make body as small as possible and stay low
  • Remain quiet and still and be prepared to move quickly
• If outside:
  • Try to get behind any solid object
  • Lie flat with face away from source of event
  • Cover head and face
  • Remain quiet and still and be prepared to move quickly

LOCKDOWN
• Faculty will oversee the lockdown by drawing blinds to windows and doors - lock doors and windows and turn off lights, if possible
• Directed knocks on door or unfamiliar voices and be alert for students who may still be in the hallway
• All students and personnel should move into isolated sections of building and reduce exposure to outside windows and doors

MODIFIED LOCKDOWN
• Interior doors will be locked
• Access to and from building will be restricted
• Close doors, windows and blinds
• Remain calm and continue allowed activities

EVACUATION
• Instructions to evacuate will be issued by DPS, police, or University officials
• Evacuate students and staff quickly, but in an orderly fashion to a safe area
• Do not use elevators
• Calm students and remain quiet
• Assist handicapped persons or those in need
• Do not turn off lights or equipment
• Close all doors behind you – do not lock doors
• If you observe something unusual or suspicious, do not touch it
• Remain in a safe area until receiving notification to return to the facility

RUN... HIDE... FIGHT

FACULTY/STAFF EMERGENCY GUIDE
Fairfield University Department of Public Safety

TYPES OF INCIDENTS
HOSTAGE SITUATION
• Avoid reckless actions or quick moves
• Do everything your captor says to do
• Speak only when spoken to
• Stay calm, try not to show emotion openly
• Sit, if possible, to avoid appearing aggressive
• Do not turn away from the captor unless ordered to do so
• Model the appropriate behavior that you would expect of your students

BOMB THREAT
• If you are the receiver of a call indicating there is a bomb in the building:
  • Remain calm, do not hang up
  • Record time of call
  • Attempt to keep the caller on the phone as long as possible
  • Document everything the caller states: ask questions about type and location of device, time of detonation, and reason for planting the device
  • Document characteristics of the caller’s voice (loud, muffled, accents, intoxicated, etc.)
  • Listen to any background noise that may be present (television, traffic, music, etc.)

VIOLENT INTRUDER
• Do not confront the intruder
• Turn off cell phone ringers
• Calm students and remain quiet
• Draw blinds to windows and secure doors, turn off lights and equipment
• Disregard any knock on door or unfamiliar voices
• Be alert for students who may still be in the hallway

WEATHER EMERGENCIES
• All outdoor activities will be suspended when thunder is heard
• Shelter should be sought indoors by all members of the community until the severe weather is no longer a threat
• Stay away from electrical lines and devices
• Depending on the severity of the storm, all occupants should be brought into the interior corridors away from outside windows - close all doors
• Do not take time to collect books or other personal belongings
• To protect yourself from falling objects, seek shelter beneath a desk, table, or bench
• Stay away from outside walls and windows

KEY WEATHER TERMS
• WATCH — Threatening weather is likely. Remain alert and be prepared to implement a plan for action.
• WARNING — Severe weather is occurring or has been indicated by radar. Take immediate action.

THREAT LEVEL CRITERIA
• LEVEL 1 — Monitor
• LEVEL 2 — Standby
• LEVEL 3 — Emergency