



Faculty Reclassifications, and SCR 201

1 message

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To: BOR Testimony <bor.testimony@hawaii.edu>

Wed, May 17, 2023 at 10:52 AM

Thank you for accepting my testimony.

Jonathan K Osorio



Testimony to the BOR SCR 201.docx

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April 10, 2019

Testimony to the Board of Regents Regarding Reclassification of Faculty and Post Tenure Review
From the Dean of Hawaiʻinuiākea School of Hawaiian Knowledge

I am grateful for the opportunity to present testimony cautioning the UH administration and the Board of Regents to slow the changes to faculty classifications and the post tenure review. While I think it is important that an academic institution monitors and evaluates how it hires its faculty, just as every professional body takes on the responsibility of self scrutiny, supervision and regulation, the timing and nature of those changes should be driven by those in the profession and not by a legislature.

SCR201 is hopelessly entangled in a process that should have begun with a call from the Regents to the President and the Chancellors to begin a system-wide assessment of current tenure practices as well as the classifications of faculty. Instead, in the wake of SCR201, a Permitted Interaction Group was created to pose possible changes to the classification of faculty, the earning of tenure and post-tenure review. For this reason it has become impossible for faculty and many of us in administration to separate the contemplated changes from the numerous signs of legislative interference in the work and leadership of this university.

The fact that the legislature wants to equate true faculty with those who are teaching courses makes no sense, especially at Mānoa. Research breakthroughs in bio-chemistry, cancer research, computer science, deep sea fisheries, stream remediation, taro gardening, and yes, even astronomy don't usually occur in classrooms. And yet these kinds of endeavors are critically important to future coursework, professoriates, and to the creation of new enterprises and initiatives that actually address areas of need for the State of Hawaiʻi. SCR 201 adds no new efficiency to this university while taking our attention off of the important work we do.

As for faculty specialists at UHM, we are speaking of a type of faculty who engage in the kind of support work on which teaching faculty depend: assessment of teaching efficacy, strategic planning, program development, grant support and evaluation. But specialists also perform in key functions identical to their teaching counterparts. They serve as department and graduate chairs. Most of them direct student thesis committees. They lead on university wide teams like HAPS and WI boards. This is the kind of program support work that must be done by individuals whose ranks are not inferior to classroom professors.

The extent to which legislative interferences like this resolution diminish the morale of faculty and faculty leadership is a serious matter because it leads to deans and valuable faculty departing this university into relocation or retirement. The university, like any institution, performs best when morale and discipline are high, and legislative oversight does not encourage either one. It questions our ability and will to regulate and discipline ourselves even while incurring sweeping changes that affect not just morale but the ability of the whole university to operate effectively. Despite numerous training sessions mandatory for faculty, teaching ethics, conflicts of interest, cyber-security, diversity

in hiring, workplace violence and sexual harrassment, these interferences question our ability as professionals to supervise ourselves.

For instance, demands by the legislature for departments to conduct workload assessments are not unreasonable but suggesting that they can or or should be standardized shows a fundamental ignorance of the diversity of the work that is done even within a department. If the legislature was truly interested in the capacity of our various schools to meet the demands of educating our people why is it that the queries they send never ask us what we need?

We at Hawai‘inuiākea ask the Board of Regents to reply to the legislature that SCR201’s essential demands have been met and then urge the administration to open up new opportunities to consult with the colleges and faculty and specifically with the specialists on this campus before changes are made to our classification systems. We point out that the S Faculty Working Group’s rejection of the proposed changes in classification has been the main response to any consultation with faculty specialists, and their opinion matters not because they are protecting their jobs but because they know how much of the university’s attention to process and planning rests on their shoulders.

Mahalo Nui

Jonathan K Osorio, PhD
Professor of Hawaiian Studies
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UHM

New Athletics Director and First Aid Program

1 message

Claire Santos <cps2021@hawaii.edu>
To: bor.testimony@hawaii.edu

Wed, May 17, 2023 at 9:29 PM

Aloha President Lassner and the Board of Regents,

Last night was one of my final shifts as First Responder Nurse for UH Athletics. I won't be returning for a third season because the First Aid Program is a dangerous mess. Allow me to provide a snapshot of the first hour of my shift leading into the Mililani High School graduation ceremony.

I arrived 45 minutes early, slowly drove through the parking kiosk and shaka'd the attendant as usual. And then I was hijacked by a man who called himself "Nick - the Head of Parking" who demanded that I pay \$10.00 for parking and then told me that I can no longer park at Zone 18 across Murakami because he gave those spots away... I was to park in the structure and carry my supplies to Stan Sheriff, and then sit in the post-event traffic. This was the opposite of the directive sent out by Russ Gima. I declined to pay the \$10.00. You're not paying me enough to hit me up for parking fees. When I got to the parking structure, no one knew where the nurse was supposed to park. I found a spot and lugged my first aid supplies to the Arena where Russ Gima gave me a communication radio that had a dead battery, so I went back to his office to get a radio that worked.

No sooner had I gotten set-up when the gates opened and two frantic parents were being escorted to First Aid with their 8 year-old son in Dad's arms. The child, of Chinese-American descent, had lips as white as chalk and the child himself was floppy in Dad's arms. I knew right there we were dealing with a blood pressure issue.... and I realized that I had no tools to evaluate or treat the problem. His skin felt hot and dry, but his feet were sweaty. He had a loose cough that had started the day before. I didn't have a thermometer to see if he had a fever. He felt much better lying down, but he went pale when sitting or standing. I didn't have a pediatric blood pressure cuff, so I couldn't get any objective data from that critical source. I had to rely on my good old-fashioned ER nursing skills and a few personal supplies, like my own pulse oximeter, to evaluate the situation and ultimately send the child off to the ER in his parents' care. Was his blood pressure dropping because he was too excited to be at the arena for his cousin's graduation? Did he have pneumonia? Was he dehydrated? The ER ran tests, gave him Motrin and a few cups of juice to treat his fever & dehydration, and sent him home after three hours of observation. He stayed home from school the next day, rested and is doing well, according to his Dad.

Do you see where I'm going with this? The UH Athletics First Aid Program has been allowed to disintegrate to the point that we don't have the most basic supplies to evaluate and treat patients. I've restocked and reorganized the supplies in Ching Stadium and in Stan Sheriff, donating my own supplies just to make a most basic "go bag" that makes sense. This is ridiculous and unacceptable. For a time, we had only one AED unit for all of Ching. How is that possible?

I implore you, again, to make room in the budget for a licensed healthcare professional above paramedic level to be in charge of First Aid. There are no policies, procedures, protocols, standing orders, or supply inventory lists. The Athletic Trainers were allowed to kick us out of the First Aid Room in Ching until Dave Matlin learned of it and took action to reinstate the much-needed room, but they still wanted joint use of the room (absurd). There is no one with clinical healthcare competence in charge of First Aid. It can't continue this way. The patients are coming in sick, many with multiple medical problems, and they require advanced assessment skills and not the musings of an elderly retired nurse who never worked in an ER or Urgent Care. Just because the university calls it "First Aid" doesn't mean the spectators are going to comply, and we've got to be able to respond anywhere at the venue, assess any situation and take appropriate action.

In a totally bizarre move, adding insult to injury, Glenn Nakaya canceled both nurses from providing care at the baseball games this season. He said he decided to use all EMT's. Excuse me - I was hired by Athletics to provide care at all events, and it was inappropriate for him to cut the nurses out of the payroll like that. What's worse is that he's using AMR ambulance service. Truth be told, AMR pays the crew a bonus for every ER run, which I find unethical, and I am witness to two incidents during football season where the patients should not have been transported to the ER, but I had no authority to stop AMR. I reported it to Sis because those patients should not be forced to pay an ambulance fee, let alone ER fees for no reason.

You have got to provide a UH-employed oversight person who has to clear any transport, audit documentation, have a budget for supplies and equipment, ensure that appropriate care is rendered, and include the medical crew in the disaster

preparedness plan. We've been completely left out of the picture, and you've been paying us a whopping \$25.00 per hour when job rate for an RN is above \$65.00 per hour. Do you wonder why no one applies for the job besides retired nurses and one-year experienced EMT's who want to be something else?

As I said, I won't be back for a third season. The current state of affairs is not safe for patients and I started carrying my own malpractice insurance because I don't trust the situation. Please find the money to do this right. The Ching Stadium is uncovered and you'll continue to have people dropping from the heat, you'll continue to see elderly patients in the stands suffering from multiple medical problems, and you'll continue to see trip and fall injuries.

Your new Athletics Director candidate has the experience to set it up properly, but will he be given the budget?

Mahalo nui for hearing me out. Good luck.

Aloha & 73,
Claire P. Santos, MS, RN, NHDP-BC
Board-Certified National Healthcare Disaster Professional
UHWO '79
UH Athletics Department First Aid Station Responder

