This document provides a brief description of the Department of Psychiatry and Behavioral Health as well as a description of its guidelines and procedures. It supplements the Rules of the University faculty and other policies and procedures of the University to which the department and its faculty are subject. The latter rules, policies, and procedures, and changes in them, take precedence over statements in this document.

This Pattern of Administration is subject to continuing revision. It must be reviewed and either revised or reaffirmed on appointment or reappointment of the department chair. However, revisions may be made at any time subject to approval by the college office and the Office of Academic Affairs.

MISSION STATEMENT

The mission of the Department of Psychiatry and Behavioral Health at The Ohio State University College of Medicine is to improve lives through excellence in psychiatry and behavioral health care, advocacy, research, and education, including:

1. Providing the highest quality of psychiatric patient care by an inter-professional staff with the best of qualifications and experience.

2. Teaching medical students and trainees of various other professional disciplines the basics of psychiatric diagnosis and treatment, training MD/PhD, PhD, and postgraduate students in neuroscience and clinical service delivery, and providing post-MD training to produce high caliber future psychiatrists.

3. Performing research and scholarly investigation of disorders of behavior, emotion, and thought, including stress and trauma related problems and disorders, in order to better understand etiology and direct best practices in assessment, treatment, and prevention.

4. Providing advocacy in the Central Ohio community and beyond regarding the public health relevance of mental disorders and addictions, including efforts to educate the public, increase awareness, eliminate stigma, and improve clinical service delivery and access to care.

FACULTY

The voting faculty consists of all Tenure track, Clinical, and Research faculty members who have at least a 50% appointment in the Department of Psychiatry and Behavioral Health. Faculty includes Assistant, Associate, and Professors of Psychiatry and Behavioral Health. Research Faculty should not exceed 20% of the total faculty in the Department. Clinical and Research track faculty members may participate fully in departmental administrative procedures and decisions, and may vote on matters of promotion and tenure as defined by university policies. Associated faculty members may not vote, but may be asked to offer opinions regarding specific issues for which they may have meaningful information. Individuals with courtesy appointments (primary appointments

2
in another department with no salary support from the Department of Psychiatry and Behavioral Health) may not vote in matters of departmental governance or policy.

DEPARTMENTAL ORGANIZATION

The Department is organized into divisions that include the Division of General Psychiatry, Division of Child and Adolescent Psychiatry, and the Division of Psychology. Division directors are appointed by the Chairperson of the Department for a four-year term. The Chairperson reviews the division directors for reappointment during the fourth year of their term. The Chairperson may replace a division director at any time during the term.

The Divisional structure reflects disciplinary lines, but the activities of faculty members are matrixed across clinical service, academic, and disciplinary lines, and it is understood that faculty members will participate collaboratively and collegially in inter-professional, team-based clinical care and science.

The Department maintains an Office of Psychiatric Education, which coordinates the activities pertaining to teaching of medical students, residents, and other student learners. This office is led by the Vice Chair for Education, and includes the Residency Coordinator and the Psychiatry Unit Coordinator. It also includes the Director of Medical Student Education, the Director of the Adult Residency Program and Directors of Fellowship Programs. This office is primarily involved in daily administration of these educational programs.

A. Departmental Administration and Decision Making Process

Policy and program decisions are made in a number of ways: by department faculty as a whole, by standing or special committees of the department, or by the chair. The nature and importance of any individual matter determines how it is addressed. Department governance proceeds on the general principle that the more important the matter to be decided, the more widespread the agreement on a decision needs to be. Open discussions, both formal and informal, constitute the primary means of reaching consensus on decisions of central importance.

B. Department Administration

Department Chairperson: In concordance with Faculty Rule 3335-3-35 regarding Chairs of departments:

The Chair of the Department of Psychiatry and Behavioral Health shall be the administrative head of the department. The primary responsibilities of the chair are set forth in Faculty Rule 3335-3-35, http://trustees.osu.edu. This rule requires the chair to develop, in consultation with the faculty, a Pattern of Administration with specified minimum content. The rule, along with Faculty Rule 3335-6, http://trustees.osu.edu, also requires the chair to prepare, in consultation with the faculty, a document setting forth policies and procedures pertinent to promotion and tenure.

The duties of the Chair of the Department of Psychiatry and Behavioral Health shall be as follows:
· To have general administrative responsibility for its program, subject to the approval of the dean of the college.

· To develop in consultation with the faculty the Patterns of Administration. These Patterns of Administration shall be made available to all present and prospective members of the faculty of the department, and a copy shall be deposited in the office of the dean of the college and in the office of academic affairs. The Patterns of Administration of the Department of Psychiatry and Behavioral Health will adhere to the requirements for content which requires that the chair is responsible as follows:

  To provide a schedule of all faculty meetings to all faculty members before the start of each semester.

  To maintain minutes of all faculty meetings and to maintain records of all other actions covered by the patterns of administration.

  To consult with the faculty as a whole on policy matters, and that such consideration will, whenever practicable, be undertaken at a meeting of the faculty as a whole.

  To recognize in principle the presumption favoring majority faculty rule on all matters covered by the patterns of administration. Whenever majority faculty rule is not followed, the department chair shall explain the reasons for the departure to enhance communication and to facilitate understanding within the department. Where possible, this statement of reasons shall be provided before the departure occurs. This explanation shall outline the decision of the majority of the faculty, the decision of the department chair, and the reasons the decisions differ. The explanation shall be communicated to the faculty in writing, where possible, or at a faculty meeting, with an opportunity provided for faculty to comment.

The Chair of the Department of Psychiatry and Behavioral Health will consult with the faculty in the initiation and in the review and selection of new faculty members for appointment.

The Chair of the Department of Psychiatry and Behavioral Health will develop a policy (see faculty workload policy below), which explains faculty duties, and responsibilities in instruction, scholarship, and service and how such duties and responsibilities are to be assigned and distributed equitably and to the greater good of the Department.

· The Chair of the Department of Psychiatry and Behavioral Health is also required to prepare, after consultation with the faculty and in accordance with the pattern of departmental administration, a statement setting forth the criteria and procedures according to which recommendations are made concerning appointments and/or dismissals, salary adjustments, promotions in rank, and matters affecting the tenure of the faculty. This statement shall be made available to all present and prospective members of the department, and a copy shall be deposited in the office of the dean of the college and
in the office of the executive vice president and provost. At the beginning of each four-year term of the chair of a department, the members of the department or school, the office of the dean of the college, and the office of the executive vice president and provost shall receive either a revision or reaffirmation of the original statement.

- The Chair of the Department of Psychiatry and Behavioral Health is responsible to operate the business of the department.

- The Chair of the Department of Psychiatry and Behavioral Health is responsible to plan with the members of the faculty and the dean of the college a progressive program.

- The Chair of the Department of Psychiatry and Behavioral Health is responsible to evaluate continuously the instructional and administrative processes and lead in the study of methods of improving them.

- The Chair of the Department of Psychiatry and Behavioral Health is responsible to evaluate faculty members periodically in accordance with criteria approved by the board of trustees and subject to instructions from the executive vice president and provost, and also according to such supplemental criteria as may be set up by the department.

- The Chair of the Department of Psychiatry and Behavioral Health is responsible to inform faculty members when they receive their annual review of their right to review their primary personnel file maintained by their tenure initiating unit and to place in that file a response to any evaluation, comment or other material contained in the file.

The Chair of the Department of Psychiatry and Behavioral Health is responsible to recommend appointments, promotions, dismissals, and matters affecting the tenure of members of the department faculty to the dean of the college, in accordance with procedures set forth in Faculty Rule 3335-6 (http://trustees.osu.edu) and this department's Appointments, Promotion and Tenure Document.

- The Chair of the Department of Psychiatry and Behavioral Health is responsible to encourage research and educational investigations.

- The Chair of the Department of Psychiatry and Behavioral Health is responsible to see that all faculty, regardless of their assigned location, are offered the departmental privileges and responsibilities appropriate to their rank; and in general to lead in maintaining a high level of morale.

- The Chair of the Department of Psychiatry and Behavioral Health is responsible to see that adequate supervision and training are given to those members of the faculty and staff who may profit by such assistance.

- The Chair of the Department of Psychiatry and Behavioral Health is responsible to prepare the annual budget recommendations for the consideration of the dean of the college.
The Chair of the Department of Psychiatry and Behavioral Health is responsible to promote improvement of instruction by providing for the evaluation of each course when offered, including written evaluation by students of the course and instructors, and periodic course review by the faculty and administrators.

**Department Vice Chair for Academic Affairs:** At the discretion of the Department Chairperson a Vice Chair may be appointed for a four-year term, renewed annually following yearly evaluation by the Department Chairperson. The Vice Chair's primary responsibilities will be administrative, as determined by the Department Chairperson and the Departmental Patterns of Administration. He/She assists and advises the Department Chairperson with regard to administrative issues of the Department, chairs the departmental Promotion and Tenure Committee, and serves as a liaison between the College and the Faculty. The Vice Chair is a senior faculty member with a MD, MD/PhD, or PhD degree and a proven record of service, administrative experience and leadership skills.

**Department Vice Chair for Research:** At the discretion of the Department Chairperson a Vice Chair for Research may be appointed for a four-year term, renewed annually following yearly evaluation by the Department Chairperson. The Research Vice Chair's primary responsibility will be promotion of the academic mission and affairs of the Department as determined by the Department Chair and Departmental Patterns of Administration. He/She assists and advises the Department Chairperson with regard to academic issues/affairs of the Department, and serves as a liaison between the Academic Faculty and the Chairperson. The Vice Chair for Research is a senior faculty member with an MD, MD/PhD, or PhD degree, and a proven record of research excellence, administrative experience and leadership skills.

**Department Vice Chair for Clinical Services:** At the discretion of the Department Chairperson a Vice Chair for Clinical Services may be appointed for a four-year term, renewed annually following yearly evaluation by the Department Chairperson. The Clinical Vice Chair's primary responsibility will be promotion of the clinical mission and affairs of the Department as determined by the Department Chairperson and Departmental Patterns of Administration. He/She assists and advises the Department Chairperson with regard to clinical issues/affairs of the Department, and serves as a liaison between the Clinical Faculty and the Chairperson. The Clinical Vice Chair is a senior faculty member with a MD or MD/PhD degree, and a proven record of clinical service, administrative experience and leadership skills.

**Department Vice Chair for Education:** At the discretion of the Department Chairperson a Vice Chair for Education may be appointed for a four-year term, renewed annually following yearly evaluation by the Department Chairperson. The Education Vice Chair's primary responsibility will be promotion of the educational mission and affairs of the Department as determined by the Department Chairperson and Departmental Patterns of Administration. He/She assists and advises the Department Chairperson with regard to educational issues/affairs of the Department, and serves as a liaison between the Faculty and the Chairperson. The Education Vice Chair is a senior faculty member with an M.D. or M.D./Ph.D. degree, and a proven record of clinical service, educational experience, education experience and leadership skills.
C. Departmental Committees and Structure

Some departmental decisions are made through committees and approved by the chairperson. These include recommendations for initial recruitment of faculty, promotion, tenure and reappointment of faculty, departmental practice plan and academic enrichment budget, medical records, quality assurance, and credentials. The faculty elects some of these committees, whereas the Department Chairperson appoints others. The following list provides more details:

Promotion and Tenure Committee: In the Department of Psychiatry and Behavioral Health the recommending authority for faculty appointment, reappointment, promotion and tenure is placed in the hands of eligible faculty. However, there still needs to be a committee to gather information, supervise the process and present the information to the eligible faculty. Eligibility to the committee is restricted to Associate Professors and Professors on the Tenure track or Clinical. The Committee will consist of three subcommittees. The Tenure-track Subcommittee will review tenure-track and research faculty. The Clinical Subcommittee will review clinical faculty. The Associated Subcommittee will review candidates who are associated faculty. Composition of the Department subcommittees will be as follows:

Tenure-track Subcommittee: There will be a total of 3 members of the Department of Psychiatry and Behavioral Health Promotion and Tenure Advisory Tenure-track Subcommittee. This committee will be chaired by the Vice Chair for Academic Affairs. The Department Chair will appoint all members who will be Tenure-track faculty members authorized to participate in all actions of the Committee as described above. Appointments will be made during the spring semester and commence May 1st. Replacements for members who need to terminate their role will be made in the same fashion. This committee will assist in preparing the case and other aspects of the review, but the eligible faculty must still vote on tenure decisions. In terms of appointments, the department uses search committees to make appointment reviews; thus, this committee will only work on appointments at the senior rank.

Clinical Subcommittee: There will be a total of 3 members of the Department of Psychiatry and Behavioral Health Promotion and Tenure Advisory Clinical Subcommittee. This committee will be chaired by the Vice Chair for Academic Affairs. The Department Chair will appoint all members who will be Tenure-track or Clinical faculty members authorized to participate in all actions of the Committee as described above. Appointments will be made during the spring semester and commence May 1st. Replacements for members who need to terminate their role will be made in the same fashion.

Associated Subcommittee: There will be a total of 3 members of the Department of Psychiatry and Behavioral Health Appointments, Promotion and Tenure Advisory Associated Subcommittee. This committee will be chaired by the Vice Chair for Academic Affairs. The Department Chair will appoint all members who will be Tenure-track, Clinical or Associated faculty members authorized to participate in all actions of the Committee as described above. Appointments will be made during the spring semester and commence May 1st. Replacements for members who need to terminate their role will be made in the same fashion.
Executive Committee: This committee is composed of the Vice Chairs and Division Directors. It meets monthly (or more often at the call of the Department Chairperson) and advises the Department Chairperson about major policy and planning issues usually before these are brought to the whole faculty at monthly plenary meetings. It also advises on faculty recruitment.

Quality Assurance Committee: This inter-professional committee is appointed by the Department Chairperson and hospital administration. It makes recommendations to the faculty for improvement of patient care after appropriate survey and monitoring. It follows in general the guidelines established by The Joint Commission.

Inter-Professional Training Council: This group is comprised of leads for all the educational programs housed in the department. It is chaired by the Vice Chair for Academic Affairs; its purpose is to coordinate training between disciplines and to foster collaborative care.

Residency Education Committee: In accordance with the ACGME, several committees consisting of faculty members and representatives of the residency classes convene to make decisions pertaining to the educational goals, resident progress, and needs of the program. The Residency Director oversees the actions of these committees.

D. FACULTY MEETINGS

The Chairperson of the Department will schedule meetings of the faculty on a regular basis. All faculty meetings will be held from 12:00 - 1:00 P.M. at a location announced by the chair. On the first Tuesday of the month the faculty and residents will meet in a joint session. On the third Tuesday of the month the faculty will meet. The Chair of the Department will maintain the minutes of these meetings, as well as records of all other actions covered by the patterns of administration. Any faculty member can submit agenda items. Business can be brought up in advance to be included into the agenda and/or from the floor and suggestions made about departmental policy. The Departmental Chairperson or his /her designee presides at the meeting. The structure is informal by mutual agreement. The Department Chairperson introduces the business agenda and leads the discussion. Division Directors and faculty representing the Department at University, College or Hospital Committees are asked to report on faculty, teaching, academic, administrative and other issues and a discussion might follow as needed.

The Chairperson will consult with the faculty as a whole on matters of policy. Whenever possible, this consultation will be undertaken at a meeting of the faculty as a whole. The Department of Psychiatry and Behavioral Health recognizes in principle the presumption favoring majority rule on all matters covered by the patterns of administration. Decisions are usually made by consensus, compromise, or the Chairperson’s decision with tacit consent of the faculty. The chair brings policy matters to these meetings for faculty consultation, and these are usually decided by a simple majority vote. All regular faculty (50% or greater appointment on Regular Tenure Track or Regular Clinical Track) and full-time term appointment faculty have a vote on academic matters. When majority rule is not followed on policy matters, the chair will explain at a faculty meeting the reason for departing from majority wishes. The explanation will outline the decision of the majority of the faculty, the decision of the department and the reasons the decisions differ. The explanation shall
be communicated to the faculty in writing, where possible, or at a faculty meeting, with an opportunity provided for faculty to comment.

E. FACULTY WORKLOAD POLICY

The Department of Psychiatry and Behavioral Health offers training to a broad array of clinicians in training as well as basic and clinical researchers. Faculty are expected to provide clinical and/or didactic instruction in one or more of these training programs. Faculty members on the regular clinical track will have a proportionately greater commitment to clinical teaching and supervision by virtue of having a relatively greater clinical service obligation. Clinical teaching and supervision includes inpatient and outpatient settings. The Chairperson is responsible to make teaching clinical and research assignments to meet the department's mission and objectives.

F. POLICY ON FACULTY DUTIES AND RESPONSIBILITIES

The Department administration uses the following guidelines to ensure that comparable and equitable duties are assigned to faculty members, and that the scope and nature of these responsibilities are consistent with the type of academic appointment (tenure eligible versus clinical). This policy recognizes that all faculty members are expected to have responsibilities in teaching, research and service, and that the distribution of these responsibilities will vary among faculty. The distribution of teaching, service (including both clinical and administration), and scholarship activities will be determined on the basis of the faculty type (tenure, clinical, research), and academia rank. The following policy does not constitute a contractual obligation. Fluctuations in demands and resources in the department and the individual circumstances of faculty members may warrant temporary deviations from the policy.

The Department of Psychiatry and Behavioral Health offers training to a broad array of clinicians in training as well as basic and clinical researchers. Teaching includes formal didactic lectures, group discussion and facilitation, research reviews and seminars, grand round presentations, seminars, and the supervision of the clinical activities of trainees. All faculty members in the department are expected to participate in the teaching programs of the Department. Teaching also includes curriculum planning and development, and coordination of continuing education activities.

All faculty members in the Department are expected to provide service to the institution (e.g., department, college, hospital, university), as well as to the community and profession. Community service includes those activities that entail application of academic expertise. Service activities also include provision of clinical services for faculty who are licensed to provide such care. Individuals on the tenure track will have somewhat lesser expectations in service activities, but will have proportionately greater expectations regarding scholarship.

All faculty members are expected to contribute to scholarship, which includes generation and dissemination of new knowledge or creative work which may include publication of original work in peer-reviewed journals, publications of review articles or book chapters, editing of books, invited presentations and/or data presentations at state, national or international meetings, obtaining external peer-reviewed funding for research or education, funding for clinical trials, development of new diagnostic therapy or novel teaching techniques including on-line resources. Faculty members
on the tenure track are expected to seek and obtain nationally competitive peer-reviewed funding to support their research program, and to establish a thematic and coherent program of research. Clinical faculty members are also required to have scholarly contributions, but to a lesser extent than tenure track faculty members. The specific expectations in teaching, scholarship and service, and the typical distribution of activities for faculty on the tenure track and clinical are described below.

**WORKLOAD PATTERNS:**

**Tenured or Tenure Eligible Faculty**

The time a faculty member spends in research, teaching and service activities may vary from year to year and throughout the year. The time allocated for each activity will be determined by mutual consent with the Department Chairperson annually. During the Annual Review each faculty member will present a Workload Schedule for the upcoming academic year, once agreed upon the Workload Schedule will serve as the template to be followed for the coming year.

**Teaching**

This will include formal didactic lectures, lecture preparation, preparation and grading of examinations, as well as clinical or laboratory supervision in the context of patient care or research performance. Teaching is expected to be approximately 10% of the average workload, but may vary depending on the particular faculty member's pathway and other specific assignments. The proportion of time dedicated to teaching will likely fluctuate throughout the year and from year to year. For faculty with clinical duties some of the teaching time will overlap with clinical service and medical student and resident supervision.

**Scholarly Activity**

All tenured and tenure-eligible faculty are expected to have a significant commitment to compensated scholarly activity and to make consistent efforts to obtain and maintain external support for their research program. Faculty members are expected to budget adequate release time in grant applications to cover the realistic amount of time expected to be spent on a research project. Faculty members are expected to be principal investigator or co-principal investigators or nationally competitive peer-reviewed grants, and may be collaborators on the grants of other faculty. Development of new research programs is highly encouraged. The average time allocated to compensated scholarly activities is expected to be 50% or more, but may vary from year to year and throughout the year depending on the particular faculty member's funding and other areas of faculty responsibility. The time devoted to scholarly efforts shall be negotiated with the Department Chairperson. Depending on the extent of service responsibilities required to meet financial commitments, faculty members on the tenure track, consistent with College policies are expected to publish peer-reviewed papers from the time of their appointment to the OSU faculty. A substantial portion of these publications should be as first or senior author. Extramural funding that covers a portion of the faculty member's salary will increase the amount of time available for scholarship.
Service

Faculty are expected to spend time on service related activities as assigned by the chair. Clinical care services will overlap to some extent with clinical supervision of departmental trainees. The amount of time may vary from year to year and throughout the year based on clinical and service needs of the department, the amount of extramural research support, and other responsibilities of the faculty member.

Clinical Faculty

The Department of Psychiatry and Behavioral Health endorses college’s recommendation that, within Clinical there will be numerous pathways that reflect the range of faculty activity, skills and accomplishments. A faculty member's activity may change over time, and thus may be consistent with different pathways of performance throughout their career. All these pathways and patterns of faculty activity may determine their workload within the department. Three pathways are recognized: Clinician Educator; Clinician Scholar and Clinical Excellence. Faculty select the pathway that best fits their workload and interests. Pathways can change as the faculty member's assignments and interests change.

Service

Clinical faculty will devote an average of 90% of their time to service related work. The majority of this time will be devoted to patient care activities on a teaching service where trainees rotate. The remaining time will be spent to service activities related to the Department, College and University mission. Since most clinical service activities are provided directly or indirectly with departmental trainees, the expectations for commitment to teaching and service will be combined. Faculty who are awarded research release time will have lowered service requirements commensurate with that release time.

Teaching

The teaching requirement will be integrated and overlap to a large extent with the clinical service in the supervision of trainees. In addition to clinical teaching, formal teaching in other type of settings (lectures, courses, seminars, facilitation of discussion, etc.) may be required as assigned by the chair. The combined time dedicated to formal/clinical teaching and patient care will be approximately 90% and will vary according to the department’s needs and the individual faculty member’s specific goals. It is expected that Regular Clinical Faculty will take a leading role in teaching.

Scholarly Activity

Clinical faculty are expected to contribute to scholarship in authoring/co-authoring case reports, review articles, textbook chapters, textbooks, and when possible, to be involved in other scientific works. Active participation in ongoing research directed by other faculty (e.g. co-investigator or secondary authorship), and in clinical trials is expected for advancement in rank. Scholarly activity
is expected to consume about 10% of the workload of a Clinical faculty member; if a faculty member is awarded release time on a grant, this percentage will increase accordingly.

**Research Faculty**

Research faculty members are expected to contribute to the university's mission via research.

In accord with Faculty Rule 3335-7-34, a research faculty member may, but is not required to, participate in limited educational activities in the area of his or her expertise. However, teaching opportunities for each research track faculty member must be approved by a majority vote of the TIU's tenure-track faculty. Under no circumstances may a member of the research faculty be continuously engaged over an extended period of time in the same instructional activities as tenure-track faculty.

Research expectations are similar to those for the tenure-track, albeit proportionally greater since 100% of effort for faculty members on the research is devoted to research. Specific expectations are spelled out in the letter of offer.

**Associated Faculty**

Department-based Associated faculty are expected to spend 90% of their time providing patient care activities on a clinical teaching service where departmental trainees rotate. They are expected to contribute to the teaching activities of the Department and 10% of their workload may be spent on clinical or formal teaching. Associated faculty are encouraged to participate and/or facilitate the research endeavors of the department. Unpaid associated faculty receive a faculty appointment in recognition of their contribution to the scholarly mission of the department, either through teaching, service or research.

**G. FACULTY PERFORMANCE REVIEWS**

The Department Chairperson or his designee (e.g., Vice Chair for Academic Affairs) will meet individually on an annual basis with all regular faculty (tenured, tenure eligible, and clinical) and department-based Associated faculty to review and discuss the faculty member's performance and to review longer-term plans and goals. The faculty member's performance over the previous year will be reviewed in all components of faculty responsibility including teaching, research, and service. During this meeting will also be discussed the proposed work assignment (Workload Schedule) for the next academic year. The faculty member will have the opportunity to offer information regarding current and/or future work assignments. Following the meeting, the faculty member will receive written feedback regarding current performance, the proposed future goals and the agreed schedule for the upcoming academic year. The annual performance review will be based on expectations outlined in the previous performance evaluation (a letter of offer in the case of the initial year of service). Areas of needed improvement will be specifically delineated as well as suggested steps to resolve areas of weakness. A separate letter from the Chairman will provide information about the salary recommendation for the following year and a brief explanation for the recommendation. Salary recommendations will be based on the evaluation of performance of stated goals and expectations.
All faculty members will have the opportunity to respond in writing to the written feedback regarding their performance.

H. FACULTY SALARY INCREASES

A. Procedure

Faculty salary increases are necessarily constrained by University and Departmental budgets and by the University and College guidelines, which are revised annually. Within these constraints, the Department Chairperson makes recommendations considering the overall productivity of the individual faculty.

B. Criteria

Because different faculty members make their maximal contributions in different ways, the criteria need to be flexible at the Chairperson’s discretion while keeping in mind the needs of the Department.

Teaching will be evaluated on the basis of total time devoted by the faculty member, as well as on the basis of performance evaluations by trainees, peers, Chairperson, Division Director, or Director of Training. Teaching awards and other teaching related achievements (development of new courses, novel instructional tools, publication in educational journals, etc.) are given special emphasis. The quantity of teaching, the quality of teaching and the format of the teaching (lectures, facilitation, seminars, courses, supervision) are important determinants.

Research productivity will be evaluated on the basis of grants obtained, the number and quality of proposals submitted, the number and quality of publications and presentations, and the faculty member's current research and scholarly activities (individual and collaborative) as known to the Chairperson.

Service to be evaluated for purposes of university salary is mainly of an academic, or community type and may include: service on Departmental, College or University committees, task forces, or other administrative bodies, sharing in the burden of Departmental administration, organization or coordinating of courses or other educational programs, service on national / international review bodies and service to the community through public lectures, media presentations or interviews, or board or committee membership. Only community service that results from and includes application of academic expertise is relevant for these considerations. Because in the Department of Psychiatry and Behavioral Health Clinical faculty are partially compensated by the university, clinical service performance and productivity will be included in salary evaluation.

Fiscal issues: In the current era of diminished resources available to the University, College and Department it is imperative that the Department operate in a fiscally sound
manner in order to maintain programs, and to expand into new areas of service delivery. Therefore it is incumbent that each faculty member be aware of the fiscal constraints under which the department operates, and that each faculty member ensures that they work toward meeting their obligations to support the fiscal stability of the Department and its programs. It is recognized that this may be accomplished in different ways depending upon the nature of duties of the individual faculty members. The obligation for clinically generated revenues can be decreased by release time supported by research grants or other extra-departmental funding sources. In addition, supervision of clinical services by residents is an important area of activity by which faculty can support departmental programs. Each faculty's overall activities in these, as well as other areas, will be taken into consideration in the global assessment of their performance.

I. ALLOCATION OF RESOURCES

All faculty members will be provided with access to office space, computer, telephone, e-mail, FAX, office supplies and clerical assistance. Faculty members will have research space assigned on a priority basis. Individuals with nationally competitive extramural funding that provides full indirect cost reimbursement (e.g., NIH) will receive highest priority. Requests for research space by faculty without such funding will be considered in the context of available resources, previous or current allocations, and departmental priorities. Faculty members may apply to the Department for travel or seed funding. The Department Chairperson will make decisions regarding allocation of funds based on the merits of the proposal, the perceived benefit to the faculty member and the department, and the availability of funds.

J. RELEASE TIME POLICY

All individuals submitting research applications to sponsors that permit requests for release time (or its equivalent) are required to include in the budget a proportion of release time that is equivalent of the extent of time that is expected to be devoted to the research. The amount of time shall be determined by the departmental activities and obligations of each faculty member, and shall be negotiated with and agreed upon by the Chairperson. Release time funds generated through grants will be applied against the faculty member's financial obligation to the department.

K. LEAVES AND ABSENCES

The university's policies and procedures with respect to leaves and absences are set forth in the Office of Academic Affairs Policies and Procedures Handbook (http://oaa.osu.edu/handbook.html) and Office of Human Resources Policies and Procedures website, www.hr.osu.edu/policy/policyhome.htm. The information provided below supplements these policies.

A. Discretionary Absence

Faculty are expected to complete a travel request or an Application for Leave form (https://eleave.osu.edu) well in advance of a planned absence (for attendance at a professional meeting or to engage in consulting) to provide time for its consideration and approval and time to
assure that instructional and other commitments are covered. Discretionary absence from duty is not a right and the chair retains the authority to disapprove a proposed absence when it will interfere with instructional or other comparable commitments. Such an occurrence is most likely when the number of absences in a particular semester is substantial. Rules of the University Faculty require that the Office of Academic Affairs approve any discretionary absence longer than 10 consecutive business days (See Faculty Rule 3335-5-08) and must be requested at https://eleave.osu.edu.

B. Absence for Medical Reasons

When absences for medical reasons are anticipated, faculty members are expected to complete an Application for Leave form as early as possible. When such absences are unexpected, the faculty member, or someone speaking for the faculty member, should let the chair know promptly so that instructional and other commitments can be managed. Faculty members are always expected to use sick leave for any absence covered by sick leave (personal illness, illness of family members, medical appointments). Sick leave is a benefit to be used—not banked. For additional details see OHR Policy 6.27, www.hr.osu.edu/policy/index.aspx.

C. Unpaid Leaves of Absence

The university's policies with respect to unpaid leaves of absence and entrepreneurial leaves of absence are set forth in OHR Policy 6.45, www.hr.osu.edu/policy/index.aspx. The information provided below supplements these policies.

D. Faculty Professional Leave

Information on faculty professional leaves is presented in the OAA Policy on Faculty Professional Leaves (http://oaa.osu.edu/assets/files/documents/facultyprofessionalleaves.pdf). The information provided below supplements these policies.

The chair’s recommendation to the dean regarding an FPL proposal will be based on the quality of the proposal and its potential benefit to the department and to the faculty member as well as the ability of the department to accommodate the leave at the time requested.

L. SUPPLEMENTAL COMPENSATION AND PAID EXTERNAL CONSULTING


M. CONFLICT OF INTEREST POLICY
Information on faculty financial conflicts of interest is presented in the university's Policy on Faculty Financial Conflict of Interest (http://orc.osu.edu/files/2013/02/Policy-on-Faculty-Financial-Conflict-of-Interest.pdf). A conflict of interest exists if financial interests or other opportunities for tangible personal benefit may exert a substantial and improper influence upon a faculty member or administrator's professional judgment in exercising any university duty or responsibility, including designing, conducting or reporting research.

Faculty members with external funding or otherwise required by university policy are required to file conflict of interest screening forms annually and more often if prospective new activities pose the possibility of financial conflicts of interest. Faculty who fail to file such forms or to cooperate with university officials in the avoidance or management of potential conflicts will be subject to disciplinary action.

In addition to financial conflicts of interest, faculty must disclose any conflicts of commitment that arise in relation to consulting or other work done for external entities.

N. APPEALS AND GRIEVANCE PROCEDURES

Any faculty member who is dissatisfied with a departmental decision or policy can appeal to the chairperson for reconsideration, to the Dean's office, or through other university channels. Such faculty members may invoke the grievance procedures outlined in the Office of Academic Affairs Policy and Procedures Handbook (or in the medical staff bylaws, depending on whether the issue is academic or medical. Procedures for appeals regarding salary are described in the OAA Handbook (https://oaa.osu.edu/assets/files/documents/1.3HBAppeals.pdf).

Faculty Salary Appeals Process

The Department will follow and abide by all the rules and regulations of the College of Medicine Faculty Salary Appeals Process. If a salary dispute arises in the Department, the Chairperson will appoint a committee to advise him/her on this particular case. In addition salary equity appeals may also be considered according to university policies.

Faculty Promotion and Tenure Appeals

Promotion and tenure appeals procedures are set forth in Faculty Rule 3335-5-05, http://trustees.osu.edu.

Sexual Misconduct, Sexual Harassment, and Relationship Violence, 1.15

The university's policy and procedures related to sexual harassment are set forth in OHR Policy 1.15, https://policies.osu.edu

O. HOUSESTAFF EVALUATION AND GRIEVANCE PROCEDURES

House staff may invoke the department house staff grievance procedures, which are appended.
RESIDENT PERFORMANCE GUIDELINES
CORRECTIVE ACTIONS
DUE PROCESS

I. Standard

Members of the house staff are expected to conform to the Bylaws of the Medical Staff of The Ohio State University Hospitals and the Rules and Regulations adopted by that organization, the Rules and Regulations governing employment at The Ohio State University and state and federal laws.

II. The Evaluation Process

The various faculty members on whose services the resident has rotated complete written subjective evaluations. These are kept in a permanent file. These evaluations are submitted to the program director that reviews them before they are placed in the permanent file. The resident and the faculty member must sign all subjective evaluations before they are placed in the resident's permanent file. Objective tests are also administered as desired by the Program Director; these results may become a part of the resident's permanent file.

III. Resident Rights

A. The permanent file consisting of the written subjective evaluations of performance and the results of any objective tests will be accessible to the resident.

B. The right to expect advancement to the next level of education depends upon performance meeting the standards set by the Graduate Medical Education Committee of the Department.

C. A decision by the Graduate Medical Education Committee to deny advancement of a resident to the next level of education must be given with adequate notice along with the reasons for the decision.

D. Advancement to a fellowship is not considered a right or logical expectation of any resident. Appointment to these positions is at the discretion of the subspecialty division chief, and the department chairman.

E. The Program Directors must meet their obligation to document the clinical competence of residents recommended to the respective certification board.

F. The house staff has the right to communicate to the Director of the Graduate Medical Education Program and the Graduate Medical Education Committee as well as the Chairman. Such communication is encouraged for the purpose of discussing problems related to the evaluation process, the content of the training program or other problems of mutual concern.

IV. Corrective Action

Pursuant to Section 0335-43-05 of the Bylaws of the Medical Staff of The Ohio State University Hospitals, the house staff is entitled to the due process rights afforded Medical Staff members therein. Therefore, any complaint brought against a member of the house
staff shall be treated in accordance with the provisions contained within the existing medical Staff Bylaws. Further, any member of the Limited Medical Staff who receives notice of a proposed action that may adversely affect him shall be entitled to all rights and protection afforded members of the Medical Staff in accordance with Section 3353-43-06 of the Medical Staff Bylaws.