INTRODUCTION

This document provides a brief description of the Department of Radiation Oncology of The Ohio State University, as well as, a description of its policies 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 as needed. All revisions, as well as periodic reaffirmation, are subject to approval by the college office and the Office of Academic Affairs.

I. DEPARTMENT MISSION

The mission of the Department of Radiation Oncology is to provide state-of-the-art personalized care for our cancer patients through:

- capitalizing upon the unique expertise of our treatment team
- implementation of our cutting-edge technologies geared to eradicate cancer
- to advance the frontiers of the field through the conduct of cutting edge clinical, translational, and basic science research.

II. ACADEMIC RIGHTS AND RESPONSIBILITIES

In April 2006, the university issued a reaffirmation of academic rights, responsibilities, and processes for addressing concerns. This statement can be found on the Office of Academic Affairs website, http://oaa.osu.edu/rightsandresponsibilities.html.

FUNCTIONS OF THE DEPARTMENT

The Department Radiation Oncology faculty members participate in the education of residents and medical students at all levels of the medical curriculum. They also engage in the education of medical school graduates in a Radiation Oncology residency program as well as in residency and fellowship programs in surgical specialties and sub-specialties. Graduates of these programs become eligible for certification by specialty boards and similar agencies. The faculty members instruct graduate students in the College of Medicine masters-level program (M.M.Sc.) and in other related disciplines. The faculty members also conduct a variety of teaching programs for practicing physicians. From time to time members of the Department may also participate in educational projects for the general public.

The Department faculty members, including both those with medical and graduate degrees, conduct basic and clinical and translational research. Laboratories associated with the Department are active in the instruction of medical students, residents and graduate students in research methodology and technique. Departmental research is supported by both internal and external funding. Department members are engaged in collaborative projects with researchers in other departments of the University and outside of the University. The results of these various efforts are regularly presented at various scientific meetings and symposia, and they are published in books, journals and other media.
Physician faculty members of the Department are active practitioners of radiation oncology and work collaboratively with related specialties to assure care coordination for the common patient. The physicians are organized by disease site specialty. These cohesive groups are responsible for providing care to patients. The Department strives to maintain a clinical physician staff with the capability of providing a broad spectrum of radiation oncology services, with special expertise in the management of complex and unusual problems in addition to those considered more common or simple.

Department faculty members also participate in the administration and governance of the Hospitals, the College of Medicine and the University through service as members and officers of various committees. In addition, faculty members serve local, regional and national medical organizations and boards in a variety of administrative positions. Faculty members may also serve as members and officers of other charitable and service organizations on a local, regional and national level.

III. FACULTY

Faculty Rule 3335-5-19 [http://trustees.osu.edu/rules/university-rules.html](http://trustees.osu.edu/rules/university-rules.html) defines the types of faculty appointments possible at The Ohio State University and the rights and restrictions associated with each type of appointment. For purposes of governance, the faculty of this department include regular faculty with compensated FTEs of at least 50% in the department. Associated faculty, emeritus faculty, and regular faculty joint appointees with FTEs below 50% in this department are invited to participate in discussions on non-personnel matters, but may not participate in personnel matters, including promotion and tenure reviews, and may not vote on any matter.

The Department of Radiation Oncology has Tenure-track faculty. Tenure track faculty titles are Assistant/Associate/Professor of Radiation Oncology. The tenure track is for faculty whose primary effort is the creation and dissemination of new knowledge through the production of scholarship.

The Department of Radiation Oncology has Clinical faculty. Clinical faculty titles are Assistant/Associate/Professor of Clinical Radiation Oncology. The clinical title is for faculty who primarily engage in clinical teaching and practice, but contribute to all department missions.

The Department of Radiation Oncology has Research faculty. Research faculty titles are Research Assistant/Associate/Professor of Radiation Oncology. The research is for researchers who engage exclusively in scholarship.

The Department of Radiation Oncology has Associated Faculty. The Associated title is a broad category of faculty types that include the following:

- Full-time Paid Associated Faculty titles are Clinical Assistant/Associate/Professor of Radiation Oncology. Typically, faculty appointed as full-time associate faculty engage almost exclusively in clinical practice, to the exclusion of academic pursuits.
- Visiting Faculty titles are Visiting Assistant/Associate/Professor. The title shall be used to confer faculty status on individuals who have credentials comparable to tenure-track, clinical or research faculty of equivalent rank who spend a limited period of time on formal appointment and in residence at this institution for purposes of participating in the instructional and research programs of the university. A visiting appointment cannot exceed three continuous academic years of service.
• Adjunct Faculty titles are Adjunct Assistant/Associate/Professor of Radiation Oncology. The shall be used to confer faculty status on individuals who have credentials comparable to tenure-track, clinical, or research faculty of equivalent rank, who provide significant service to the instructional and/or research programs of the university and who need a faculty title to perform that service. Significant service would include teaching the equivalent of one or more courses, advising graduate students or serving on graduate committees, and serving as a co-investigator on a research project. Such individuals may be either non-university employees or university employees compensated on a noninstructional budget. Adjunct appointments are made for the period in which the service is provided. Renewal of adjunct appointments is contingent upon continued significant contributions. Procedures for the promotion of adjunct faculty members shall be the same as for promotion of tenure, clinical, or research faculty.

• Lecturer titles are lecturer and senior lecturer shall be used for all compensated instructional appointments where other titles are not appropriate. Lecturers' responsibilities are limited to teaching as defined in Chapter 3335-6 of the Administrative Code.

• Emeritus faculty are tenure-track, clinical, or research faculty who, upon retirement, were recommended by the chair, the dean and the executive vice president and provost for emeritus status. Emeritus faculty may not vote at any level of governance and may not participate in promotion and tenure matters but may have such other privileges as individual academic units or the office of human resources may provide.

Detailed information about the appointment criteria and procedures for the various types of faculty appointments made in this department is provided in the Appointments, Promotion and Tenure Document. (http://oaa.osu.edu/policiesprocedureshandbook.html)

IV. ORGANIZATION OF DEPARTMENT SERVICES AND STAFF

The Department of Radiation Oncology is organized into various specialties within the discipline of Radiation Oncology between three clinics at the main James and one clinic at the Breast Center. Each specialty constitutes an academic sub-unit, responsible for teaching, research, and patient care related to the specific specialty. In addition, the department as a whole and the members of the department as individuals are responsible for contributing to the overall mission of the Department.

The Chair is responsible for the organization of services in the Department. All faculty, staff, and administrators in the Department report ultimately to the Chair. In addition to the administrative roles of the chairs of committees, other services are organized as follows:

• **Radiation Oncology at The James**
  This site functions as a model ambulatory care training setting. As appropriate, radiation oncology care is provided to patients on an independent and/or supervised basis by radiation oncology faculty, radiation oncology residents, radiation oncology physician extenders, radiation oncology nurses, radiation therapists, and radiation therapy students; all report to the Chair.

• **Radiation Oncology at the Stefanie Spielman Comprehensive Breast Center**
  This site functions primarily for radiation oncology related to breast cancer. As appropriate, radiation oncology care is provided to patients on an independent and/or supervised basis by radiation oncology faculty, radiation oncology residents, radiation oncology physician extenders, radiation oncology nurses, radiation therapists, and radiation therapy students; all report to the Chair.
• Radiation Oncology at Network Locations

Network sites have various levels of oversight by the chair depending on the level of affiliation, and MSA (Material Services Agreement), and as to whether the physician is OSU faculty.

V. OVERVIEW OF DEPARTMENT ADMINISTRATION AND DECISION-MAKING

Ideally departmental policy and programmatic decisions of importance will be made with input by faculty of the Department as a whole or by standing or special committees of the Department’s faculty where indicated. The Department will operate on the principle that the more important the issue to be decided, the more extensive the agreement on a decision needs to be. Open and widely shared discussion, both formal and informal, will constitute the primary method of reaching agreement on basic decisions. Ultimately, however, the Department’s Chair must retain responsibility for final decisions or recommendations to a higher level of administration.

VII. DEPARTMENT ADMINISTRATION

A. CHAIR

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.
Other responsibilities of the chair, not specifically noted elsewhere in this Pattern of Administration, are paraphrased and summarized below.

- The Department of Radiation Oncology comprises a diverse workforce of physicians, researchers, physicists, administrators, radiation therapists, nurses, dosimetrists, administrative staff, as well as other staff vital to its clinical and research missions. As of March 2009, it was agreed upon by The James and the COM that the Department would be defined to include the employees listed above and that all would ultimately report to the Chair of the Department of Radiation Oncology.

- To have general administrative and financial authority, oversight and responsibility for department’s clinical, research, administrative, and financial programs, subject to the approval of the dean of the college, and to conduct the business of the department efficiently. This broad authority includes the acquisition and management of funds and the hiring and supervision of faculty and staff.

- To plan with the members of the faculty and the dean of the college a progressive program; to encourage research and educational investigations.

- To evaluate and improve instructional and administrative processes on an ongoing basis; 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.

- To evaluate faculty members annually in accordance with both university and department established criteria; to inform faculty members when they receive their annual review of their right to review their primary personnel file maintained by their department and to place in that file a response to any evaluation, comment, or other material contained in the file; to evaluate all manager-level employees, administrators, and administrative assistants.

- 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/rules/university-rules.html) and this department's Appointments, Promotion and Tenure Document.

- To see that all faculty members, 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.

- To see that adequate supervision and training are given to those members of the faculty and staff who may profit by such assistance.

- To establish policies and procedures of the department, with input from faculty where needed.

Day-to-day responsibility for specific matters may be delegated to others, but the chair retains final responsibility and authority for all matters covered by this Pattern, subject when relevant to the approval of the dean, Office of Academic Affairs, and Board of Trustees.

Operational efficiency requires that the chair exercise a degree of autonomy in establishing and managing administrative processes. The articulation and achievement of department academic goals,
however, is most successful with input from faculty, which will be solicited as needed. All faculty, staff, and administrators ultimately report to the Chair, whether James, COM, or CCC employees.

VICE CHAIR(S)

The Chair will make Vice-Chair appointments as needed to meet the needs of the Department.

- **Duties**
  The Department Chair has the final responsibility for academic and clinical affairs of the Department. However, in the absence of the Chair, such responsibilities may be delegated. The Vice Chair(s) and/or Clinical Director will be responsible for all duties assigned by the Chair.

- **Selection of Vice Chair(s)**
  Appointment of the Vice Chair(s) shall be made by the Department Chair.

- **Evaluation of Vice Chair(s)**
  Evaluation of Vice Chair(s) shall be done on an annual basis by the Department Chair.

- **Term**
  Vice-Chair appointments and terms will be determined by the Chair on an individual basis. Each Vice Chair will be reviewed at the conclusion of their term. Such review(s) will be conducted by the Department Chair and will be based on the results of preceding annual reviews.

B. **MANAGEMENT**

- **Chief Administrative Officer (CAO)**
  Responsible for the day-to-day departmental administrative operations of the department. The CAO will act as the representative of the Chair to accomplish the administrative duties pursuant to its academic, clinical, and financial goals. The CAO represents and reports directly to the Chair.

- **Clinical Director**
  Provides clinical leadership and management of Radiation Oncology at the James. The Clinical Director reports directly to the Chair.

- **Chief of Clinical Medical Physics**
  Provides leadership and management of Physics program in Radiation Oncology, reporting directly to the Chair.

- **Director, Breast Radiation Oncology**
  Provides clinical leadership and management of the Radiation Oncology at the Stefanie Spielman Comprehensive Breast Center, reporting directly to the Chair.

- **Director, Radiation Oncology Residency Program & Medical Student Education**
  Provides leadership for Radiation Oncology residency program and medical student education, reporting directly to the Chair.

- **Director, Radiobiology**
  Provides leadership for Radiobiology program for the Department of Radiation Oncology, reporting directly to the Chair.
• **Technical Director**
  Responsible for directing all matters related to technical coding, billing, compliance, documentation under the direction of the Chief Administrative Officer of the Department of Radiation Oncology, reporting directly to the CAO and Chair.

• **Program Director**
  Responsible for the administration, didactic and clinical education of students in the Radiation Therapy Education program; including portions of the clinical and didactic experience for radiologic technology students from the School of Health and Rehabilitation Sciences, reporting directly to the CAO and Chair.

• **Clinic Nurse Manager**
  Responsible for educating, guiding, coaching and evaluating the Nursing and Patient Care staff in the Department of Radiation Oncology, reporting directly to the Chair.

• **Associate Director Radiation Therapy**
  Oversees the financial, administrative, and operational aspects of the clinic, representing and directly reporting to the CAO and Chair.

• **Radiation Therapy Manager**
  Directs the treatment team who oversees and assists in the preparation and daily delivery of radiation therapy services, reporting directly to the Associate Director Radiation Therapy and Chair.

• **Finance Manager**
  Directs and manages all fiscal activities for the Department of Radiation Oncology which includes the Department’s activities in the James Cancer Hospital, the COM, OSU Physician’s Group Practice Plan and the Comprehensive Cancer Center (CCC) research labs. This position reports directly to the CAO and Chair.

C. **COMMITTEES**

Much of the development and implementation of the department’s policies and programs is carried out by standing and ad hoc committees, which advise the Chair on key departmental issues. The chair is an ex officio member of all department committees and may vote as a member on all committees except the Committee of Eligible Faculty and the Promotion and Tenure Committee.

• **Appointments**
  o Appointments of the chairpersons and membership of these committees shall be made by the chairperson of the Department.
  o Appointees shall be advised of committee objectives by the Department Chairperson. A current list of the committee appointments shall be provided to each faculty member.

• **Term of Office**
  o The normal term of office shall be for a minimum of one year beginning on July 1 of the academic year of appointment.
  o A faculty member shall be eligible for reappointment to the same committee in the interests of continuity.
The normal term of office may be adjusted as necessary to enhance the effectiveness of the committee.

- **Meetings**
  - Each standing committee shall meet upon the call of the committee chairperson or upon the petition of two members. The frequency of meetings shall be related to the purpose of the committee, but in general not less than bi-annually.
  - The quorum will be determined by each committee.

- **Reporting Requirements**
  - A secretary shall be appointed by the chairperson of each committee and shall be responsible for the preparation of a written report of each meeting (minutes).
  - This report will be approved by the chairperson and forwarded to the Department Chairperson and the Executive Committee with any recommendations.

- **Departmental Committee Support**
  - Departmental administrative and secretarial support shall be provided as the committee deems necessary with the approval of the Department Chairperson.
  - Departmental financial support shall be provided as necessary to achieve the committee objectives with the approval of the Department Chairperson.
  - As part of its annual report the committee should submit a budget if significant expenditures are anticipated.

- **Ad hoc Committees**
  - In addition to the committees listed, other ad hoc committees may be formed as required by particular matters that do not fall within the purview of the standing committees. Appointments of the Chairs and membership of these committees shall be made by the Chairperson of the Department. Committee members shall be advised of committee objectives by the Department Chair.

**D. OBJECTIVES OF STANDING DEPARTMENTAL COMMITTEES**

Each committee advises the Chair upon the operating policies and procedures. The Chair has the right to accept or modify these recommendations in accordance with the rules of the College of Medicine, and the University.

- **Executive Committee**
  The Executive Committee is comprised of the Chair and representatives of the clinical and academic missions of the department, and is appointed by the Chairperson. The Executive Committee communicates departmental committee activities to the faculty and formulates and recommends departmental policies including space.

- **Appointments, Promotion and Tenure (AP&T) Committee**
  The AP&T Committee, whose members are appointed by the Chairperson, evaluates the credentials of all candidates for academic appointments, promotion and tenure according to Departmental and College guidelines and makes recommendations to the Chairperson.
• **Radiation Oncology Graduate Medical Education Committee**
  Reviews, formulates, and recommends the curricular policies and educational programs of the core general radiation oncology program. Develops clinical rotation schedules and departmental resident/fellow policies and benefits. Evaluates resident/fellow performance in consideration for promotion. Responsible for organizing resident interviews, recruitment, and selection.

• **Radiation Oncology Medical Physics Residency Program Committee**
  Reviews, formulates, and recommends the curricular policies and educational programs of the core radiation oncology medical physics residency program and advises the chair on relevant policies to this end. Develops rotation schedules and policies for departmental medical physics residents. Evaluates medical physics resident performance in consideration for promotion. Responsible for organizing medical physics resident interviews, recruitment, and selection.

• **Clinical Operations Committee**
  This committee advises the clinical director and the chair on all aspects related to clinical operations. Reviews and measures quality of clinical practice within the Department, assessing outcomes as a measure for quality of care, patient satisfaction, and developing new system protocols to improve individual and system practice outcomes and reduce cost. Recommendations are made to the Chairperson and the faculty. The committee consists of faculty member(s) and representation from the technical operation. The committee will meet monthly to:
  
  o Review and measure quality of clinical practice within the Department, assessing outcomes as a measure for quality of care, patient satisfaction, and developing new system protocols to improve individual and system practice outcomes and reduce cost.
  
  o Review and oversee projects including but not limited to:
    
    ▪ Review and modify if necessary existing departmental policies and procedures and develop new policies and procedures as appropriate. (Safety related policies reviewed by Safety committee).
    
    ▪ Identify quality and patient and staff satisfaction improvement projects and designate an appropriate team to lead evaluation of each project.
  
  o Progress of ongoing initiatives.
  
  o Recommendations for change in department processes are made to the Department Clinical Director for determination of appropriate next steps for implementation or approval from leadership.
  
  o The clinical operations committee will present the following at the department quarterly quality, safety, and clinical operations meeting:
    
    ▪ Review of ongoing improvement projects
    
    ▪ Review follow up of previously completed initiatives
    
    ▪ Present any new or modified policies or procedures
    
    ▪ Present new proposed projects

• **Research Committee**
  Enhances research, collaboration, and mentorship activities, establishes infrastructure and resource allocation, reviews and awards Departmental Research Grants and allocates additional Department research funds to develop new initiatives. Promotes research among new faculty in collaboration with experienced faculty members.
• **Patient Safety Committee**
  This committee serves as liaison with the chair, department leadership, and James and OSU Medical Center safety committees. The committee monitors for department compliance with local, national and international safety, licensure and credentialing standards, and ensures serious or potentially serious incidents are investigated in near real-time (e.g., less than 24 hours). The committee reviews errors or events affecting or possibly affecting patient safety or quality of care, near-misses, and ensures that actions are taken for implementing change when needed. The committee consists of a multidisciplinary team including, but not limited to; physicians, mid-level provider (NP or PA), medical physicists, medical dosimetrists, nurses, radiation therapists, and administrative support. The committee will develop and maintain a departmental reporting and monitoring system for safety related events. The committee will meet monthly to:
  
  - Review near misses, incidents and event reports
  - Develop initiatives related to patient safety
  - For any new technology or complex treatment technique, review implementation plan and need for oversight, competencies, written procedures.
  - Ensure mechanism in place to investigate serious incidents in near real-time (<24 hrs).
  - Monitor appropriate compliance with local, national, and international safety, licensure, and credentialing.
  - Disseminate safety information through peer review meetings, morning meeting, safety rounds.
  - Review and modify if necessary existing safety related departmental policies and procedures and develop new policies and procedures as appropriate.

  The chair, safety committee will present the following at the department quarterly quality, safety, and clinical operations meeting:
  
  - Summarize near misses, incidents, event reports for previous quarter.
  - Review any safety initiatives implemented during the time period.
  - Review state mandatory reports to the Ohio Department of Health required Gamma Knife and Brachytherapy reports.

  A larger Safety meeting also meets quarterly where updates/reports are presented from ongoing safety and quality initiatives/measures.

**VIII. FACULTY MEETINGS**

The chair will provide to the faculty a schedule of department faculty meetings at the beginning of each month. The schedule will provide for at least one meeting per semester and normally will provide for monthly meetings. A call for agenda items and completed agenda will be delivered to faculty by e-mail before a scheduled meeting. Reasonable efforts will be made to call for agenda items at least seven days before the meeting, and to distribute the agenda by e-mail at least three business days before the meeting.

Special policies pertain to voting on personnel matters, and these are set forth in the department’s Appointments, Promotion and Tenure Document.
For purposes of discussing department business other than personnel matters, and for making decisions where consensus is possible and a reasonable basis for action, a quorum will be defined as a simple majority of all faculty members eligible to vote.

Either the chair or one-third of all faculty members eligible to vote may determine that a formal vote conducted by written ballot is necessary on matters of special importance. For purposes of a formal vote, a matter will be considered decided when a particular position is supported by at least a majority of all faculty members eligible to vote. Balloting will be conducted by mail or e-mail when necessary to assure maximum participation in voting. When conducting a ballot by mail or email, faculty members will be given one week to respond.

When a matter must be decided and a simple majority of all faculty members eligible to vote cannot be achieved on behalf of any position, the chair will necessarily make the final decision.

The department accepts the fundamental importance of full and free discussion but also recognizes that such discussion can only be achieved in an atmosphere of mutual respect and civility. Normally department meetings will be conducted with no more formality than is needed to attain the goals of full and free discussion and the orderly conduct of business. However, Robert’s Rules of Order will be invoked when more formality is needed to serve these goals.

IX. DEPARTMENT FACULTY WORKLOAD POLICY

The university's policy with respect to faculty teaching load is set forth in the Office of Academic Affairs Policies and Procedures Handbook, Volume 1, Chapter 2, Section 1.4.2, http://oaa.osu.edu. The information provided below supplements these policies.

Tenure-track are expected to engage in research, teaching and service to the university, college, department, their individual areas of expertise, and the profession. However, there will be differences among faculty members in the relative amounts of effort each spends in these areas. There may be significant differences in the assignment of responsibilities to individual faculty members is at the discretion of or in negotiation with the Chair. Differences in responsibilities will reflect individual faculty member’s strengths, interests, and abilities and will be based on three principles: 1) overall departmental workload expectation to ensure a balance of faculty time and effort spent in teaching, research, and service is the responsibility of the Chair; 2) types and amounts of instruction needed to accomplish the teaching mission of the Department; and 3) general expectations for research and creative activity by the faculty at any particular time.

X. FACULTY DUTIES AND RESPONSIBILITIES

The Office of Academic Affairs requires departments to have a policy on faculty duties and responsibilities (See the OAA Policies and Procedures Handbook, Volume 1, Chapter 2, Section 1.4.5, http://oaa.osu.edu). The information provided below supplements these guidelines.

During on-duty semesters, faculty members are expected to be available for interaction with students, service responsibilities and other responsibilities even if they have no formal course assignment that semester. On-duty faculty members should not be away from campus for extended periods of time unless on an approved Faculty Professional Leave or other approved leaves (see section XIII).
The following policy does not constitute a contractual obligation. Fluctuations in demands and resources in the department (college) and the individual circumstances of faculty members may warrant adjustments to the policy as needed.

- **Instructional Activity**
  All faculty members are expected to participate in some form of student, resident, or continuing medical education instruction for which they receive formal evaluations, at least once per year.

- **Research/Scholarly Activity**
  Research and scholarship is the responsibility of every tenure-track faculty member. Research and scholarship is manifested by conducting research, publishing research works in peer reviewed, high impact journals. Other indicators of a faculty member’s research and scholarship program are attracting funds, generating intellectual property, mentoring students and colleagues, consultation in areas of research expertise, serving on expert panels in the area, giving invited lectures at scientific meetings, actively participating in scholarly societies, receiving recognition for research and scholarly contributions to science and the discipline, and providing professional expertise to the public.

- **Service Activity**
  With the exception of those faculty members who are assigned research activities for 100 percent of their time and those who have negotiated a non patient care workload assignment with the Chair, all physician and other health care provider faculty members are expected to devote time to direct patient care activity. In addition, all faculty members are expected, at a minimum, to participate in one or more Department, College, University, or Hospital committee(s).

- **Balance Between Instructional, Research/Scholarly, and Service Activity**
  Each academic/clinic program within the Department of Radiation is expected to be productive within each of these three areas. It is the responsibility of the program director to insure that an appropriate balance of activities is maintained between faculty members consistent with the expectation of the division.

**XI. ALLOCATION OF DEPARTMENT RESOURCES**

The chair is responsible for the fiscal and academic health of the department and for assuring that all resources—fiscal, human, and physical—are allocated in a manner that will optimize achievement of department goals and has all authorities to these ends.

Research space shall be allocated on the basis of research productivity including external funding and will be reallocated periodically as these faculty-specific variables change.

The allocation of office space will include considerations such as achieving proximity of faculty in sub-disciplines and productivity and grouping staff functions to maximize efficiency.

The allocation of salary funds is discussed in the Appointments, Promotion and Tenure Document.

Budgets for the Department as a whole will be submitted in advance of July 1 of the next academic/fiscal year for approval. The Departmental budget will consist of expenditures for Visiting
Professors, Clinical Research, Faculty Recruitment, the Residency Program plus support for other appropriate Departmental activities. Additional areas for expenditure by the Department may be considered by the Executive Committee as submitted by the Chair of the Department. The following items will also be included in the budget can be amended as necessary: patient care and other revenue, personnel, supplies, postage, communications, equipment repair, equipment rental, reproduction services, travel, general services purchasing, general expenditures, and transfers. It is expected that the Department will have an ongoing accounting mechanism for their expenditures. The budget will be reviewed by the Department Finance Team, team members include CAO, Finance Manager and Chair, and approved by the Department Chair by the set deadline. (Timeline for budget submission is subject to change based on requirements as determined by the COM.)

A substantial portion of the funding for the Department will come from OSU Radiation LLC practice funds. Because of the interaction between the Department fiscal planning and OSU Radiation Oncology LLC fiscal planning, regular meetings will be held between the Department Finance Team and the LLC Leadership for purposes of planning and monitoring of Department Monthly reconciliation statements will be provided to the Finance Team and, should there be any significant deficit of funding, this will be adjudicated between the Department Chair and Finance Team on a monthly basis. Any new expenditures of significance not included in the Department budget must be approved by the Chair, and any significant increase in Departmental expenses must be approved by the Finance Team.

XII. LEAVES AND ABSENCES

The University's policies with respect to leaves and absences are set forth in the Office of Academic Affairs Policies and Procedures Handbook, http://oaa.osu.edu and Office of Human Resources Policies and Procedures website http://hr.osu.edu The information provided below supplements these policies.

- **Discretionary Absence**
  Faculty are expected to complete an Application for Leave form 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 quarter is substantial. Rules of the University Faculty require that the Office of Academic Affairs approve any discretionary absence of ten or more consecutive business days.

- **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.

- **Unpaid Leaves of Absences**
The university's policies with respect to unpaid leaves of absence and entrepreneurial leaves of absence are set forth in the Office of Academic Affairs Policies and Procedures Handbook, http://oaa.osu.edu. The information provided below supplements these policies.

A faculty member may request an unpaid leave of absence for personal or professional reasons. Professional reasons would include an opportunity to accept a visiting appointment at another institution. A faculty member desiring an unpaid leave of absence should submit a written request for the absence as far in advance as possible of the time for which the leave is desired. Approval will be based on, but not limited to, the nature of the request, the extent to which the faculty member's responsibilities can be covered or deferred during the proposed absence, and the positive or negative impact on the department of the proposed absence. Unpaid leaves of absence require the approval of the dean, Office of Academic Affairs, and Board of Trustees.

• **Special Research Assignments**

Information on special research assignments is presented in Volume 2 of the Office of Academic Affairs Policies and Procedures Handbook, http://oaa.osu.edu. The information provided below supplements these policies.

Untenured faculty will normally be provided an SRA during their probationary period. Reasonable efforts will be made to provide SRA opportunities to all productive faculty on a rotating basis subject to the quality of faculty proposals, including their potential benefit to the department, and the need to assure that sufficient faculty are always present to carry out department work.

Faculty members who desire an SRA should discuss the matter with the chair during annual evaluation or as soon thereafter as possible. The chair will indicate whether submission of a full proposal articulating the purpose and nature of the SRA is appropriate. The chair will normally announce decisions regarding SRAs for the next academic year no later than June 30 of the previous academic year, but retains the option of making decisions regarding proposals at other times when circumstances warrant such flexibility.

• **Faculty Professional Leave**

Information on faculty professional leaves is presented in Volume 2 of the Office of Academic Affairs Policies and Procedures Handbook, http://oaa.osu.edu. The information provided below supplements these policies.

Faculty Professional Leave (FPL) constitutes a more formal departure from regular academic duties than a Special Research Assignment and may be one, two, or three quarters in length for 9-month faculty and one, two, three, or four quarters in length for 12-month faculty. FPLs involve salary reductions and other considerations established by the Ohio Legislature and University Board of Trustees and faculty considering an FPL should fully acquaint themselves with these policies before applying for leave.

The Department's Executive Committee will review all requests for faculty professional leave and make a recommendation to the Department Chair based on the following criteria:

- Satisfactory completion of OAA form 202 – Application for Faculty Professional Leave (http://oaa.osu.edu)
Submission of detailed plan for research and/or observation which demonstrates credible potential for:

- Enhancing the individual’s ability to function in his or her assigned faculty role and/or
- Introducing new and innovative knowledge, procedures and technology for the benefit of the Department, and its faculty and/or
- Improving the recognition and prestige of the Department and the University

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. Prior to finalizing approval, the department must verify that all teaching and research obligations of the individual requesting FPL are fulfilled without undue imposition of responsibilities upon other department faculty members, and without measurable negative impact on the financial stability of the department.

XIII. SUPPLEMENTAL COMPENSATION AND PAID EXTERNAL CONSULTING ACTIVITY

Information on faculty supplemental compensation is presented in the OAA Policy on Faculty Compensation (http://oaa.osu.edu). Information on paid external consulting is presented in the university's Policy on Faculty Paid External Consulting (http://oaa.osu.edu). The information provided below supplements these policies.

This department adheres to these policies in every respect. In particular, this department expects faculty members to carry out the duties associated with their primary appointment with the university at a high level of competence before seeking other income-enhancing opportunities. All activities providing supplemental compensation must be approved by the department chair regardless of the source of compensation. External consulting must also be approved. Approval will be contingent on the extent to which a faculty member is carrying out regular duties at an acceptable level, the extent to which the extra income activity appears likely to interfere with regular duties, and the academic value of the proposed consulting activity to the department. In addition, it is university policy that faculty may not spend more than one business day per week on supplemental compensated activities and external consulting combined.

Faculty who fail to adhere to the university's policies on these matters, including seeking approval for external consulting, will be subject to disciplinary action.

XIV. FINANCIAL CONFLICTS OF INTEREST

Information on faculty supplemental compensation is presented in the university's Policy on Faculty Financial Conflict of Interest (http://oaa.osu.edu). 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 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.

XV. GRIEVANCE PROCEDURES

Members of the department with grievances should discuss them with the chair who will review the matter as appropriate and either seek resolution or explain why resolution is not possible. Content below describes procedures for the review of specific types of complaints and grievances.

- **Salary Grievances**
  A faculty or staff member who believes that his or her salary is inappropriately low should discuss the matter with the chair. The faculty or staff member should provide documentation to support the complaint.

  Faculty members who are not satisfied with the outcome of the discussion with the chair and wish to pursue the matter may be eligible to file a more formal salary appeal (the Office of Academic Affairs Policies and Procedures Handbook, [http://oaa.osu.edu](http://oaa.osu.edu)).

  Staff members who are not satisfied with the outcome of the discussion with the chair and wish to pursue the matter should contact Consulting Services in the Office of Human Resources ([www.hr.osu.edu](http://www.hr.osu.edu/)).

- **Faculty Misconduct**
  Complaints alleging faculty misconduct or incompetence should follow the procedures set forth in Faculty Rule 3335-5-04, [http://trustees.osu.edu/rules/university-rules.html](http://trustees.osu.edu/rules/university-rules.html).

- **Faculty Promotion and Tenure Appeals**
  Promotion and tenure appeals procedures are set forth in Faculty Rule 3335-5-05, [http://trustees.osu.edu](http://trustees.osu.edu).

- **Sexual Misconduct, Sexual Harassment, and Relationship Violence**
  The university's policy and procedures related to sexual harassment are set forth in OHR Policy 1.15, [www.hr.osu.edu](http://www.hr.osu.edu).

- **Student Complaints**
  Normally student complaints about courses, grades, and related matters are brought to the attention of individual faculty members. In receiving such complaints, faculty should treat students with respect regardless of the apparent merit of the complaint and provide a considered response. When students bring complaints about courses and instructors to the department chair, the chair will first ascertain whether or not the students require confidentiality. If confidentiality is not required, the chair will investigate the matter as fully and fairly as possible and provide a response to both the students and any affected faculty. If confidentiality is required, the chair will explain that it is not possible to fully investigate a complaint in such circumstances and will advise the student(s) on options to pursue without prejudice as to whether the complaint is valid or not.

  Faculty complaints regarding students must always be handled strictly in accordance with university rules and policies. Faculty should seek the advice and assistance of the chair and
others with appropriate knowledge of policies and procedures when problematic situations arise. In particular, evidence of academic misconduct must be brought to the attention of the Committee on Academic Misconduct (see www.oaa.osu.edu/coam/home.html and http://senate.osu.edu/committees/COAM/COAM.html).

- **Code of Student Conduct**
  In accordance with the Code of Student Conduct (http://trustees.osu.edu/rules/code-of-student-contact.html), faculty members will report any instances of academic misconduct to the Committee of Academic Misconduct.

- **Medical Student Honor Code**
  The College of Medicine’s policy on medical student conduct is found at: http://medicine.osu.edu/students/life/resources/honor_code/Pages/index.aspx.