PATTERN OF ADMINISTRATION for<br>The Ohio State University College of Medicine<br>Department of Anesthesiology



Approved by the Faculty: April 2016; February 2019; September 2020, February 2024

Approved by the Office of Academic Affairs: February 20, 2024

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## I. Introduction

This document provides a brief description of the Department of Anesthesiology of The Ohio State University College of Medicine (COM) 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 COM Office of Faculty Affairs and the University Office of Academic Affairs.

## II. Mission Statement

The Department of Anesthesiology's mission is to promote the achievement of excellence in education, research, service and clinical care in all of the various disciplines encompassed by the specialty.

The Department of Anesthesiology is a participant in the education of medical students at all levels of the medical curriculum and in the education of skilled professionals in the basic and clinical medical sciences and allied medical professions. It also educates medical school graduates in an anesthesiology residency program, and in other residency and fellowship programs associated with the specialty. Graduates of these programs become eligible for certification by specialty boards and similar agencies. The Department instructs graduate students for Masters and PhD level programs and in other related disciplines. Approval to advise and supervise graduate students must be obtained from the graduate school as detailed in Section XII of the Graduate School Handbook. The Department also conducts a variety of teaching programs for practicing physicians. Members of the Department may also participate in educational projects for the general public.

The Department faculty conduct research which includes, but is not limited to basic, translational and clinical. Laboratories associated with the Department are active in the instruction of undergraduate students, medical students, residents, postdoctoral fellows 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 (i.e., team science) with researchers in other Departments of the University and outside of the University. The results of these efforts are regularly presented at various scientific meetings and symposia, and they are published in books, journals and other media.

As medical doctors and members of the Department, anesthesiologists function as faculty leaders of the anesthesia care team and its associated specialties. Members of the Department who are non-physicians engage in practice related to their area of expertise. The Department strives to maintain a clinical staff with the capability of providing a broad spectrum of anesthesiology and perioperative services.

Department members also participate in the administration and governance of the OSU Wexner Medical Center and Nationwide Children's Hospital, the COM and the University through service as members and officers of various committees as permitted per Faculty Rule 3335-7-11. In addition, faculty members serve local, regional and national medical organizations 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.

The Department performs regular reassessments of the effectiveness of its efforts in teaching, scholarship and service. A comprehensive evaluation is performed and published as the Department of

## Anesthesiology Annual Report.

A critical component of the Department mission is the dedication to continuous improvement in the quality of its contributions to the discipline and practice of anesthesiology and its various specialties, and to the provision of state-of-the-art perioperative care for all of its patients.

## III. Values

Shared values are the commitments made by the COM's community regarding how work will be conducted. Our values in the Department of Anesthesiology include:

- Inclusiveness
- Determination
- Empathy
- Sincerity
- Ownership
- Innovation

The Department of Anesthesiology operates on the premise that all faculty, staff and learners in the Department have unique talents that contribute to the pursuit of excellence and further our ambition. Faculty, staff, and learners are expected to set a high example of collegiality in the workplace with respect for personal boundaries and diversity and inclusion. They must avoid behaviors that interfere with or adversely affect a community member's ability to learn, carry out research, care for patients or fulfill the individual's professional responsibilities. This synergism may be seen in the creation of our learning environment, research collaborations, co-authorship of publications, team approach to clinical practice including health and wellness, sharing of innovative ideas in committee meetings, community, and industry outreach. Faculty members are expected to offer mentorship within the entire learning community, including mentorship to faculty colleagues.

The Department supports diverse beliefs and the free exchange of ideas and opinion and expects that faculty, staff, and students promote these values and apply them in a professional manner in all academic endeavors and interactions within and representing the Department.

All faculty, staff and learners should work towards establishing and maintaining a team culture and an enriching and diverse intellectual working and learning environment. The Department is committed to evaluating the practice of these core values as part of all performance evaluations.

## IV. Academic Rights and Responsibilities

In April 2006, the university issued a reaffirmation of academic rights, responsibilities, and processes for addressing concerns.

## V. Faculty and Voting Rights

## A. Faculty Appointments

Faculty Rule 3335-5-19 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 includes tenure-track, clinical (including per diem), research, and associated faculty.

The Department of Anesthesiology makes tenure-track appointments with titles of instructor, assistant professor, associate professor, or professor. Individuals on the tenure-track serve on appointments >50\% service to the University.

The Department of Anesthesiology makes clinical appointments. Clinical faculty titles are clinical instructor; assistant clinical professor; associate clinical professor, clinical professor. Individuals on the Clinical faculty serve on appointments totaling $50 \%$ or more service to the University. Clinical faculty members are not eligible for tenure. Clinical faculty are appointed for terms of three to five years and may be reappointed to successive terms. Procedures for reappointment and promotion are defined in the Department's Appointment, Promotion, and Tenure Document.

In accordance with Faculty Rule 3335-7-03, there is no cap on the number of clinical faculty in the Department.

The Department of Anesthesiology makes research appointments. Research faculty titles are research assistant professor, research associate professor, and research professor. Research faculty members are not eligible for tenure. Research faculty are appointed for terms of one to five years and may be reappointed to successive terms. Procedures for reappointment and promotion are defined in the Department's Appointments, Promotion, and Tenure Document.

According to Rule 3335-7-32 unless otherwise authorized by a majority vote of the tenure-track faculty in the Department, research faculty must comprise no more than twenty per cent ( $20 \%$ ) of the number of tenure-track faculty in the Department. In all cases, however, the number of research faculty positions in the Department must constitute a minority with respect to the number of tenure-track faculty in the Department.

The Department of Anesthesiology makes associated faculty appointments per Faculty Rule 3335-5-19. Associated faculty include clinical (of practice) faculty, adjunct, visiting, returning retiree, lecturer, tenure track faculty who have an appointment < $50 \%$ and other temporary and term positions. Associated faculty may or may not be Ohio State University employees. They may or may not be paid. Titles for associated clinical faculty include: clinical assistant professor of practice, clinical associate professor of practice, and clinical professor of practice. These positions are usually intended to be short-term but may be appointed for a term up to three years. Procedures for reappointment and promotion are defined in the Department's Appointments, Promotion, and Tenure Document.

Emeritus faculty - Emeritus faculty status is an honor given in recognition of sustained academic contributions to the university as described in Faculty Rule 3335-5-36. Full-time tenure track, clinical, research, or associated faculty may request emeritus status upon retirement or resignation at the age of sixty (60) or older with ten or more years of service or at any age with twenty-five or more years of service. See the Department's Appointments, Promotion, and Tenure Document for additional detail.

Detailed information about the appointment criteria and procedures for the various types of faculty appointments is provided in the Appointments, Promotion, and Tenure Document. All faculty letters of offer are issued under the signature of the Department Chair and the Dean. In addition, for faculty in the Faculty Group Practice (FGP), letters of offer may be signed by health system leadership. Documentation of resources provided by centers, institutes, or other entities is outlined through a memorandum of understanding between the Department and that entity.

## B. Voting Rights

Faculty members with a $50 \%$ or more compensated appointment, who hold an appointment as tenure-track faculty, clinical faculty, or research faculty shall have a full vote at Department faculty meetings and in
faculty elections as described below.

- Tenure-track faculty may participate in discussions of and vote on tenure-track, clinical, and research faculty matters, including promotion and tenure reviews.
- Clinical faculty may participate in discussions of and vote on clinical faculty matters, including promotion reviews. Individuals appointed to the clinical faculty may not participate in or vote on promotion and tenure matters of tenure track faculty or the promotion of research faculty, but otherwise may participate in all matters of Department, College, and University governance unless otherwise stipulated.
- Research faculty may participate in discussions of and vote on research faculty matters including promotion reviews. Individuals appointed to the research faculty may not participate in or vote on promotion and tenure matters of tenure track faculty or promotion of clinical faculty, but may participate in all matters of Department, College, and University governance unless otherwise stipulated.
- Associated faculty may not participate in discussion of or votes on personnel matters. Emeritus faculty 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.

As defined by Faculty Rule 3335-7-11, tenure-track and clinical faculty may be nominated and may serve if elected on the University Senate as a representative of the college.

## VI. Organization of Department

The Department Chair is responsible for the organization of services in the Department of Anesthesiology. The Department's clinical and scholarly activities are organized into divisions, namely General Anesthesiology, Critical Care, Obstetric Anesthesiology, Cardiothoracic Anesthesiology, Pain Medicine, and Ambulatory Anesthesiology. These areas each have their own directors, who may be replaced by the Chair at any time. Within each division, there is a range of research, teaching, clinical activities. Faculty members affiliated primarily with a specific division may still have significant activities across other divisions.

The Department contains additional leadership positions, including Vice Chair for Research, Vice Chair for Academic Affairs, Vice Chair for Education, Vice Chair for Quality and Compliance, Vice Chair for Diversity, Equity and Inclusion, and Vice Chair for Administrative Affairs.

The Vice Chair for Research organizes Departmental research activities and prepares reports for the Chair about Departmental research as requested by the Chair.

The Vice Chair for Academic Affairs oversees and facilitates the establishment of mentorship relationships and promotion and tenure advising and counseling.

The Vice Chair for Education oversees education efforts throughout the Department and directs curricular development and administration.

The Vice Chair for Quality and Compliance directs and oversees Departmental quality improvement activities and assures processes are in place to facilitate compliance with regulatory requirements related to clinical care.

The Vice Chair for Diversity, Equity and Inclusion oversees, promotes, and facilitates excellence in diversity, inclusion, equity, and antiracism efforts across all aspects of the Department.

The Vice Chair for Administrative Affairs oversees clinical activities and other administrative activities.
The Department chair may replace any of these vice chair positions at any time, and any or all may remain vacant for any period of time. In addition, a new Vice Chair position or an Associate Vice Chair position may be created at Department Chair's discretion.


## VII. Overview of Departmental Decision-Making

Policy and program decisions can be made in a number of ways: by the Department as a whole, by standing or special Departmental committees, by individuals to whom specific responsibilities are delegated, or by the Chair. The nature and importance of each matter will determine the procedure to be followed. Matters of the most general importance are usually dealt with first in one of the standing committees and then in a full Departmental meeting. Matters of lesser importance or of a more specific nature may be decided by the committees themselves or by the Chair or the Chair's designee. Any such matters and related decisions can be brought up for review in the full Departmental meetings; or they can be placed on the agenda by the Chair, the committees, or interested members of the faculty.

The Department proceeds on the general principle that widespread agreement on decisions should be obtained whenever practical, recognizing that matters of an urgent or confidential nature may require decision by a smaller entity, including the Chair rendering a decision independently. Open and widely shared discussions constitute the primary vehicle for reaching agreement on decisions for which such discussions are feasible.

## VIII. Department Administration

## A. Chair

The primary responsibilities of the Department Chair are set forth in Faculty Rule Faculty Rule 3335-335. 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 also requires the Chair to prepare, in consultation with the faculty, a document setting forth policies and procedures pertinent to appointments, reappointments, promotion and tenure.

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

- To have general administrative responsibility for Department programs, subject to the approval of the dean of the COM, and to conduct the business of the Department efficiently. This broad responsibility 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 COM a progressive program; to encourage research and educational investigations.
- To assign workload according to the department's workload guidelines (see Section X) and faculty appointment type (and rank).
- 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 evaluation by students, residents and fellows 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.
- After consultation with the eligible faculty, to recommend appointments, promotions, dismissals, and matters affecting the tenure of members of the Department faculty to the dean of the COM in accordance with procedures set forth in Faculty Rules 3335-6 and 3335-7 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 maintain a curriculum vitae for all personnel teaching a course in the Department's curriculum.
- To see that adequate supervision and training are given to those members of the faculty and staff who may profit by such assistance.
- To prepare, after consultation with the faculty, annual budget recommendations for the consideration of the dean of the COM.
- To facilitate and participate in prescribed academic program review processes, in collaboration with the dean of the COM and the Office of Academic Affairs.

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 of the COM, 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 when all faculty members participate in discussing and deciding matters of importance. The Chair will therefore consult with the faculty on educational and academic policy issues and will respect the principle of majority rule. When a departure from majority rule is judged to be necessary, the Chair will explain to the faculty the reasons for the departure, ideally before action is taken.

## B. Vice-Chairs

The Vice Chair is responsible for the functions related to their Vice Chair role. The appointment is for one year. The Vice Chair will undergo review by the Department Chairperson according to the Departmental review process. All Vice Chair reappointments are subject to satisfactory annual performance reviews and are at the discretion of the Department Chair.
i. The Department Chair has final responsibility for the administration of the Department. In the absence of the Chair, this administrative responsibility may be delegated to a Vice Chair of the Department as designated by the Chair.
ii. Each Vice-Chair will be responsible for all duties assigned to them by the Chair.
iii. The appointment of the Vice-Chairs shall be made at the pleasure of the Department Chair.
iv. One or more Vice-Chair positions may be left unfilled at the Chair's discretion.
v. Vice Chair positions may be created or eliminated at the Chair's discretion.

## C. Committee Assignments and Objectives

Some Departmental decisions are made through committees and approved by the Chair. The Department 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. The following list provides more details.

Guidelines
vi. Appointments

1. Appointments to standing committees and the appointment to chair these committees shall be made by the Department Chair. Committee appointments shall be predominately comprised of faculty members, although resident and advanced practice provider representation is encouraged on certain Department committees, especially those that pertain to education and other Department-wide topics, at the discretion of the committee and Department Chair.
2. Appointees shall be advised of committee objectives by the Department Chair. A current list of committee appointments shall be provided to each faculty member.
3. Each committee is normally expected to contain between 5 and 20 members.
4. Each committee shall have a Chair and a Vice Chair. One or more committee Chair and Vice Chair positions may be left unfilled at the Chair's discretion.
vii. Term of Office - One year, renewed annually.

Objectives of Standing Department Committees

1. Ambulatory Committee

To review the clinical and academic activity at the Department's ambulatory surgical sites throughout the medical center. The committee shall share best practices and seek opportunities to apply those practices across the ambulatory platform.
2. Appointment, Promotions and Tenure Committee

The Department's Appointments, Promotions, and Tenure (APT) Committee assists the Committee of the Eligible Faculty in managing faculty appointment, promotion and tenure issues. The committee reviews the status of all faculty on an annual basis and provides guidelines and recommendations to the Chair regarding the appointment, promotion and tenure of prospective faculty. When a candidate is identified for promotion, the committee will assist the candidate in all matters to forward the candidate allowing the greatest potential for promotion success. Members of the APT committee are appointed by the Department Chair. The committee consists of at least 9 and no more than 12 faculty members, with a minimum of 3 being professors. When considering cases involving clinical faculty the APT Committee may be augmented by up to 3
non-probationary clinical faculty members at the rank of associate professor or professor, as appropriate to the case. When considering cases involving research faculty the APT Committee may be augmented by up to 2 non-probationary clinical faculty members and up to 2 nonprobationary research faculty members; the clinical and research faculty appointees will hold the rank of associate professor or professor, as appropriate to the case. When considering cases involving tenure, the APT Committee may be augmented by up to 3 non-probationary tenured faculty members from within or outside the Department. These augmentations will be enacted as necessary to achieve a voting quorum.

## 3. Clinical Competency Committee

As required by the Accreditation Council for Graduate Medical Education (ACGME), this committee will meet biannually to review the current status of all residents and fellows in the Department of Anesthesiology. All residents/fellows in ACGME-accredited training programs, will be reviewed by the committee in order to recommend a milestone level assignment to be usedfor biannual reporting to the ACGME and American Board of Anesthesiology (ABA). The committee will make recommendations to the committee Chair and to the respective training program director regarding all trainees and regarding the application of Focused Review and Academic Probation requirements.

## 4. Diversity, Equity and Inclusion Committee

This committee exists to help foster a culture that embraces inclusion and ensures that all Departmental policies, practices, clinical care, and academic pursuits are grounded in tenants of diversity, equity, antiracism, inclusion, and belonging.

## 5. Equipment Committee

This committee evaluates clinical technology and anesthetic related medications in order to make recommendations to the Chair and hospital administration for patient care needs. The committee will work with appropriate hospital services to resolve current equipment problems, pharmacy issues, and communicate updates to the Department. The committee shall facilitate scheduling all appropriate equipment in-services.

## 6. Faculty Recruitment Committee

This committee evaluates prospective candidates for faculty positions. The committee members will participate in the interview process, make recommendations for hire, follow-up as appropriate with selected candidates, and make recommendations to better facilitate recruitment and retention.
7. Faculty Revenue Cycle

This committee reviews all aspects of Departmental finances on an ongoing basis. The committee will review all billing and collection procedures. The committee will be involved in the selection of our billing agent and will work with the billing agent at this committee meeting to review data and advise the Chair on strategies to enhance our business model.

## 8. In-Room Practitioners Committee

In recognition of the unique challenges and opportunities faced by in-room providers in the Department of Anesthesiology, this committee offers representation to Anesthesiology Residents, Certified Registered Nurse Anesthetists (CRNA), Certified Anesthesiology Assistants (CAA), and Anesthesia Technicians (AT) to come together to propose solutions and identify successes in this shared space. Identify opportunities for teaming across professions (resident, CRNA, CAA, AT). Develop an understanding of each represented group's culture and facilitate cross-group relationships to improve the in-room environment. Approach challenges for all in-room team
members with humility and solution-oriented thinking. Propose changes to Departmental leadership based on Committee decisions.

## 9. Operations Committee

This committee periodically assesses and reviews the delivery of clinical care across all settings in which anesthesia care is provided, to ensure that the care delivered aligns with all missions of the Department.

## 10. Perioperative Medicine Committee

This committee reviews current service lines and recommend revisions and improvements in the care pathways; determines future service lines to add to our list of service lines; works to improve perioperative optimization of surgical patients; and disseminates the outcomes of these initiatives across the Department and beyond.

## 11. Pharmacy Committee

The committee evaluates anesthetic related medications in order to make recommendations to the Chair and to the hospital administration for patient care needs. The committee will work with Pharmacy to resolve pharmacy issues and communicate updates to the Department.

## 12. Program Evaluation Committee (PEC)

This committee is the supervisory body charged to oversee the curriculum of the residency program and fellowship training programs. As outlined by the ACGME, it is also responsible for approving annual goals as reported in the Annual Program Evaluation plan (APE) and for monitoring the progress of those goals. This committee actively participates in planning, developing, implementing, and evaluating educational activities of the residency program. Its responsibilities include reviewing and making recommendations for revision of competencybased curriculum goals and objectives, addressing areas of non-compliance with ACGME standards and reviewing the program annually using evaluations of faculty, residents, fellows, and others. The committee documents formal, systematic evaluation of the curriculum at least annually, and is responsible for rendering an APE that is then reported to the Graduate Medical Education Office. Through the committee, the program must monitor and track resident/fellow performance, faculty development, and graduate performance in order to create an annual improvement plan as required by the ACGME.

## 13. Quality Improvement Committee

This committee is responsible for review of clinical anesthesia conduct and to provide monthly statements regarding compliance and quality initiatives. This committee will review all patient deaths and track patient morbidities. The committee will provide a written report to the Chair once per month and will provide feedback to the Department at least twice per year.

## 14. Research Committee

The Research Committee will review all active and proposed animal and human research proposals in the Department of Anesthesiology. The committee is formed to foster the research development within the Department of Anesthesiology. All matters regarding research infrastructure, finance, resource allocation and strategic direction will fall under the purview of the research committee.

## 15. Resident Selection Committee

The Committee defines applicant criteria used for offering interviews. The faculty and residents are charged with the duty of evaluating all applicant files along with interviewing the selected applicants. This Committee aids in defining the rank list each year.

## 16. Simulation Education Committee

This committee oversees and directs all aspects of Departmental simulation education activities on an ongoing basis as it relates to student, resident, fellow, and faculty simulation education. An additional duty of the committee shall be to actively participate as faculty instructors and content designers for simulation education activities, and the Maintenance of Certification in Anesthesiology (MOCA) course.

## 17. Wellness Committee

The Wellness Committee creates access to well-being endeavors by driving organizational change to promote wellness and empower individuals to care for themselves, thereby elevating patient care.

## 18. Ad Hoc Committees

From time to time, the Chair may create Ad Hoc committees to address specific needs. Examples include the Executive Operations Council that addresses the Department's operational issues and Faculty Finance Council that addresses the Department's budget-related issues and overall financial oversight.

## IX Faculty Meetings

Faculty meetings are scheduled upon call of the Chair, but not less frequently than once each three months during the academic year. Faculty members are informed by e-mail at least 72 hours in advance of the meeting. Additional meetings may be called at the discretion of the Chair as necessitated by matters of general concern or important reports coming from standing or special committees. A meeting of the Department faculty will also be scheduled on written request of $25 \%$ of the faculty. The Department chair will make reasonable efforts to have the meeting take place within one week of receipt of the request. A call for agenda items and completed agenda will be delivered to faculty by email before a scheduled meeting All professors, associate professors, assistant professors and instructors including physician trainees who hold a faculty appointment are invited to all faculty meetings. At the discretion of the Chair, associated and non-faculty members of the Department may be invited to attend. The Department Chair or his/her/their designee, typically one of the Vice Chairs, presides at the meeting. The structure is informal. Minutes will be taken at faculty meetings and distributed to the faculty by e-mail within seven days of the meeting if possible.

Because clinical service workload makes it sometimes difficult to establish a quorum, we do not utilize the quorum concept except on matters requiring faculty vote according to COM rules. Faculty members are provided with the option of participating in faculty meetings remotely via conference call, to accommodate faculty members who are unable to be physically present due to other commitments. Faculty members participating remotely are considered present and enjoy the same rights to speak and vote as those members physically present at the meeting. An approval vote on most matters constitutes the majority of those present at the faculty meeting.

Attendance at faculty meetings is documented and monitored, and failure to attend at least $20 \%$ of faculty meetings may be viewed as unsatisfactory Departmental citizenship performance in annual performance reviews.

The Chair will consult with the faculty as a whole on all matters of policy. Whenever practicable, this consultation will be undertaken at a meeting of the faculty as a whole. The Department recognizes in principle the presumption favoring majority rule on all matters covered by the pattern of administration. Decisions are
usually made by consensus, compromise, or Chair'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 ( $>50 \%$ ). Special policies pertain to voting on personnel matters, and these are set forth in the Department's Appointments, Promotion and Tenure document. When majority rule is not followed on policy matters, the Chair explains at a faculty meeting the reason for departing from majority wishes. Where possible this explanation will be provided before the departure occurs. 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.

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 email 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 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, the most recent edition of the American Institute of Parliamentarians' Standard Code (AIPSC) will serve as the parliamentary authority, with the most recent edition of Robert's Rules of Order, Newly Revised, serving as the parliamentary authority on matters for which AIPSC is silent, when more formality is needed to serve these goals.

The Department Chair, may convene additional meetings of the faculty on an ad hoc basis, such as the Faculty Forum. The Faculty Forum is intended to facilitate an informal discussion of the matters pertaining to the faculty, and the date/time of this meeting, in addition to the agenda (if any), will be communicated in advance. No minutes will be taken during this meeting.

## X. Distribution of Faculty Duties, Responsibilities, and Workload

Faculty assignments are described in the initial letter of offer. The University's policy with respect to faculty duties, responsibilities, and workload is set forth in the Office of Academic Affairs Policies and Procedures Handbook, Volume 1, Chapter 2, Section 1.4.3. Depending on their appointment, Departmental faculty are expected to contribute to the department's, COM's and/or university's mission through teaching, research, outreach/engagement, and/or service. When a faculty member's contributions decrease in an assigned area, additional activity in one or more of the other areas is expected. Fluctuations in the demands and resources of the Department and individual circumstances of faculty members may also warrant changes. Assignments and expectations for the upcoming year are addressed as part of the annual review by the Department Chair.

Faculty members are expected to be accountable for interaction with students, trainees, service assignments and other responsibilities. Faculty members should not be away from campus for extended periods of time unless on an approved Special Assignment or other approved leaves. Faculty members are expected to work at a COM/University worksite during normal work hours. Flexibility for an alternate location can be provided through consultation and documentation with the Department Chair or the Dean. Any faculty working out-of-state for more than 30 days in a year must be approved by the Dean of the

COM.
Telework exception: Faculty members with responsibilities requiring in-person interaction are to work at a university worksite to perform those responsibilities. Telework and the use of remote, virtual meetings are allowed at the discretion of the Department Chair if such work can be performed effectively and faculty members are able to fulfill their responsibilities. Telework will be encouraged under certain circumstances if it serves the needs of the Department, college, university, and/or community. The Department Chair has the discretion to require faculty to work on campus if there are concerns that responsibilities are not being fulfilled through telework.

The guidelines outlined here do not constitute a contractual obligation. Fluctuations in the demands and resources of the Department and the individual circumstances of faculty members may warrant temporary deviations from these guidelines.

A full-time faculty member's primary professional commitment is to Ohio State University and the guidelines below are based on that commitment. Faculty who have professional commitments outside of Ohio State during on-duty periods (including teaching at another institution; conducting research for an entity outside of Ohio State; external consulting) must disclose and discuss these with the Department Chair in order to ensure that no conflict of commitment exists. Information on faculty conflicts of commitment is presented in the University's policy on Outside Activities and Conflicts.

In crisis situations, such as life-threatening disease (COVID-19, for example) or physical dangers (natural disasters, for example), faculty duties, responsibilities, and workload may be adjusted by the Department chair to take into account the impact over time of the crisis. These adjustments may include modifying research expectations in order to maintain teaching obligations. These assignment changes must be considered in annual reviews.

The Department Chair is responsible for ensuring that every faculty member has duties and responsibilities commensurate with their appointment and that Departmental workload is distributed equitably among faculty. To achieve our goal of becoming a top quartile academic medical center, it is essential that all of our faculty members are provided with clear performance objectives, and that their efforts are aligned with the mission and goals of the Department and COM. Faculty members are expected to set a high example of collegiality in the workplace with respect for personal boundaries and diversity and inclusion. Faculty members must avoid behaviors that interfere with or adversely affect a community member's ability to learn, carry out research or fulfill the individual's professional responsibilities. It is the responsibility of the Department chair to effectively communicate with each faculty member about performance expectations, to set high standards, to give clear feedback about performance, and to appropriately incentivize high levels of productivity. The Department chair, in consultation with the faculty member, should establish criteria for meeting performance expectations and should establish explicit goals for each faculty member. At the end of the academic year the Chair (or his/her/their designee) should meet with the faculty member to evaluate the faculty member's performance with respect to previously established goals. It is essential that faculty members receive clear, objective, and constructive written feedback regarding their performance. It is unhelpful to give unconditional positive evaluations for faculty members who are not meeting expectations. Face-to-face conversation with the Chair/designee as the basis for the written annual performance review is required. The written annual performance review, signed by both the Chair/ designee is submitted to the College of Medicine.

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. These guidelines recognize that all faculty members are expected to have responsibilities in some combination of teaching, research, clinical care, and service and that the distribution of
these responsibilities will vary among faculty. Fluctuations in instructional demand, Departmental resources and particular circumstances may necessitate modification of this policy. It is understood that completion of expected responsibilities does not constitute meritorious performance. Evaluation of meritorious performance requires demonstrable achievements which substantially exceed the expectations for a faculty member. Departure from the expected level in any area may be balanced by increased or decreased activity in other areas.

The nature of activities subsumed under the areas of responsibility and criteria for evaluation (teaching, research, service) are fully delineated in the Departmental appointment, promotion and tenure Guidelines. Teaching expectations are further described in Section A below.

Teaching includes (but is not limited to) formal didactic lectures to trainees, grand rounds presentations, journal clubs, and direction of the clinical activities of trainees. Teaching also includes curriculum planning and development, and coordination of continuing education activities. Teaching or training of medical students, residents, fellows, or non-physician trainees are included in the teaching responsibility of faculty. Didactic teaching assignments are made by the core residency program director who must provide faculty with advanced notice of any assignment. Once a teaching assignment and appropriate notice have been made, the faculty member is responsible for carrying out the assignment or rescheduling it to the satisfaction of the core residency program director. Failure to carry out these assignments may be reflected in a faculty member's annual review and may lead to a modification of future teaching assignments with a resulting increase in duties to mission areas other than teaching. Faculty who fail to demonstrate adequate teaching performance, based on teaching evaluations and contributions to didactic lectures or similar contributions to the teaching mission, will be given the opportunity to demonstrate improvements in their teaching contributions and performance through a remediation process which includes online learning modules and formal mentorship.

Service may include administrative (committee) work for the Department, college, medical center or university, service to the faculty member's profession, or service to the community. Clinical patient care is a necessary but not sufficient component of service. Departmental faculty are expected to be able to demonstrate substantive participation in the other components of the Department's mission including research, teaching, and service. Members of the faculty who participate in clinical patient care will give resident and medical student lectures and interactive teaching sessions as assigned by the Chair and/or resident or medical student education coordinators.

Scholarly activity includes generation of new knowledge or creative work which may include publication of original work in peer reviewed journals; obtaining external peer-reviewed funding for research, books or book chapters; a creation of new diagnostic therapeutic or teaching techniques; and invited presentations and/or data presentations at state, national or international meetings. Members of the faculty should submit scholarly articles (original research, case reports, review articles, or book chapters, as examples) for publication on a regular basis. The time allocated to scholarly activities will vary in regard to the other areas of faculty responsibility as well as time constraints pertaining to specific scholarly activities. The proportion of time spent in research is influenced by earning release time through funded grants in which effort of the investigator is funded.

All faculty are strongly encouraged to participate in Department, COM, Medical Center, and/or University governance.

## A. Tenure-track Faculty

Tenure-track faculty members are expected to contribute to the university's mission via teaching, scholarship, and service. When a faculty member's contributions decrease in one of these three areas,
additional activity in one or both of the other areas is expected.

## Teaching

All tenure-track faculty are expected to contribute to the Department's teaching mission. Faculty members are also expected to advise residents and encouraged to supervise and mentor medical students, residents and fellows in research endeavors.

The standard teaching assignment may vary for individual faculty members based on their clinical, research and/or service commitments. The Vice Chair for Education is responsible for assuring that teaching assignments are made on an annual basis. The teaching expectations for tenure track faculty are that these faculty should contribute to $50 \%$ of their allocated time without time buy out. At $50 \%$ time buyout (see Scholarship below) the effort should represent 2 courses, or equivalent teaching engagement, per year.

## Scholarship

All tenure-track faculty members are expected to be engaged in scholarship as defined in the Department's Appointments, Promotion, and Tenure Document. A faculty member who is actively engaged in scholarship will be expected to publish regularly in high quality peer-reviewed journals as well as in other appropriate venues, such as edited book chapters of similar quality and length as articles. Faculty members are also expected to seek appropriate opportunities to obtain patents and engage in other commercial activities stemming from their research.

## Service

Faculty members are expected to be engaged in service and outreach to the Department, the college, and the university, as well as to professional societies, and to the community. All faculty members are expected to attend and participate in faculty meetings, grand rounds, and other Departmental events, as their schedule permits.

The Department recognizes that some of its faculty members bear an inherent additional service burden. That burden accrues when faculty members, often women and/or underrepresented colleagues, are recognized as uniquely positioned to assist with work at the Department, college, or university levels. Such individuals may be expected to provide more service than normal because their particular expertise, perspective, or voice can help working groups, for example, or task forces or students (through their mentorship of them) understand context, options, and opportunities in new ways. This additional service burden does not derive from volunteerism. Rather, it is an unwarranted and inequitable expectation.

Service loads should be discussed and agreed to during annual performance and merit reviews. When heavy service obligations are primarily volunteer in nature, the Department Chair is not obligated to modify the service load of the faculty member (reduce teaching and/or scholarly obligations). If, however, a heavy service load is due to the faculty member's unique expertise, perspective, or voice, this should be noted in the annual performance review letter, considered when distributing the faculty member's other duties, and taken into account for the annual review process. The Department Chair should also consider this additional service burden in managing equity of service loads among faculty. Increases or decreased in service assignment will be made based on existing service burden, prior performance, as well as any other relevant factors based on the discussion between the Chair and the faculty member.

## B. Special Assignments

Information on Special Assignments (SAs) is presented in the Office of Academic Affairs Special Assignment Policy.

Tenure track faculty may request a SA, consistent with the Department's requirements for SA proposals. Untenured faculty will normally be provided an SA for research for one semester during their probationary period. The Department Chair shall make a recommendation to the Dean regarding a SA proposal. Award of the SA will be based on the quality of the proposal and its potential benefit to the Department or university and to the faculty member as well as the ability of the Department to accommodate the SA at the time requested.

## C. Clinical Faculty

Appointments to the clinical faculty exist for faculty members for whom a significant majority of their effort is dedicated to the delivery of clinical care. Clinical faculty members are expected to contribute to the Department's academic missions, as further detailed in the Department's Appointments, Promotion, and Tenure Document. Service and teaching expectations are similar to those for the tenure-track. All clinical faculty are expected to participate in some form of undergraduate, graduate, medical student, resident or continuing medical education instruction for which they receive formal evaluations on an annual basis. Teaching assignments are determined with the guidance of the Division Chiefs, Department's education leaders. The evaluations shall be collected by impartial parties and will be transmitted to the Department Chair or their designee for use in the annual performance reviews. Clinical faculty on the clinician educator and clinician scholar pathways are expected to participate in scholarly activities. Scholarship is broadly defined as the discovery and dissemination of new knowledge by research, study, and learning. Clinician scholar pathway faculty members must develop a sustained record of scholarship demonstrated by a body of original and substantive work. Recognition of the scholarly work must also be external to the University and recognized by a wider scientific community as outlined in the Department's Appointments, Promotion and Tenure document.

All clinical faculty are expected to participate in the service to the Department and the profession of medicine. Service may include administrative contributions to the Department or the University, exemplary patient care, professional service to the faculty member's discipline, and the provision of professional expertise to the public and private entities beyond the University. In the College of Medicine, a candidate's service contributions must be demonstrated to be of high quality and effectiveness. All clinical faculty members must contribute to service as evidenced by documentation of contributions over a sustained period.

## D. Research Faculty

Research faculty members are expected to contribute to the university's mission via research. In accordance 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 faculty member must be approved by a majority vote of the Department'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 faculty expectations for research are similar to those for the tenure-track, albeit proportionally greater since $100 \%$ of effort for research faculty members is devoted to research. Specific expectations are spelled out in the letter of offer.

## E. Associated Faculty

Compensated associated faculty members are expected to contribute to the Department's and/or university's missions via clinical care, teaching, service and/or research depending on the terms of their individual appointments. Faculty members with tenure-track titles and appointments $<50 \%$ FTE will have reduced expectations based on their appointment level.

Expectations for compensated visiting faculty members will be based on the terms of their appointment and are comparable to that of tenure-track faculty members except that service is not required.

## F. Modification of Duties

The Department of Anesthesiology strives to be a family-friendly unit in its efforts to recruit and retain high quality faculty members. To this end, the Department is committed to a modification of duties that will provide its faculty members flexibility in meeting work responsibilities within the first year of childbirth/adoption/fostering, or care for an immediate family member who has a serious health condition, or a qualifying exigency arising out of the fact that the employee's immediate family member is on covered active duty in a foreign country or call to covered active-duty status. See the college pattern of administration for details. See the OHR Parental Care Guidebook for additional details. See also the Parental Leave Policy in Section XIII.

A faculty member requesting the modification of duties for childbirth/adoption/fostering and the Department chair should be creative and flexible in developing a solution that is fair to both the individual and the Department while addressing the needs of the Department and/or university. Expectations must be spelled out in an MOU that is approved by the dean.

## XI. Course Offerings, Teaching Schedule, and Grade Assignments

The Department Chair is expected generally to manage the Department's course offerings and individual faculty teaching schedules, as applicable. A scheduled course that does not attract the minimum number of students required by Faculty Rule 3335-8-16 will normally be cancelled and the faculty member scheduled to teach that course will be assigned to another course for that or a subsequent semester.

If an instructor of record is unable to assign grades due to an unexpected situation (i.e. health or travel), or if they have not submitted grades before the university deadline and are unreachable by all available modes of communication, the Department Chair may determine an appropriate course of action, including assigning a faculty member to evaluate student materials and assign grades for that class. The University Registrar will be made aware of this issue as soon as it is known and will be provided a timeline for grade submission.

## XII. Allocation of Department Resources

The Department 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.

The Chair will discuss aspects of the Department budget with the faculty and attempt to achieve consensus regarding the use of funds across general categories. However, final decisions on budgetary matters rest with the Chair.

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. See COM Research Space Policy. After the preliminary/start-up period, faculty members who have not had extramural funding to support their research may be assigned laboratory space at the discretion of the Department Chair. In the event that a previously funded faculty is without extramural funding for two years, the laboratory space previously assigned to them will, at the discretion of the Department Chair, be re-assigned. The faculty member can share space with a funded faculty, with the consent of that faculty, until the faculty member
is able to re-establish their funding at a sufficient level to meet space assignment metrics. Space will be assigned according to the productivity standards established by the Wexner Medical Center, College of Medicine, Davis Heart and Lung Research Institute, and Comprehensive Cancer Center.

The allocation of office space will include considerations such as productivity, seniority, and proximity of faculty in sub disciplines.

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

## XIII. Leaves and Absences

In general, there are four types of leaves and absences taken by faculty (in addition to parental leave, which is detailed in the Parental Care Guidebook). 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 and Office of Human Resources Policies and Forms website. The information provided below supplements these policies.

## A. Discretionary Absence

Faculty are expected to complete a travel request or a request for absence well in advance of a planned absence (e.g., vacation, attending a professional meeting or engaging in consulting) to provide time for its consideration and approval and time to assure that the faculty member's commitments are covered. Discretionary absence from duty is not a right, and the Department Chair or their designee retains the authority to disapprove a proposed absence when Departmental activities and priorities are negatively impacted by the leave. Such an occurrence is most likely when the number of absences in a time period is substantial. Rules of the University Faculty require that the University Office of Academic Affairs approve any discretionary absence longer than 10 consecutive business days (see Faculty Rule 3335-508).

## B. Absence for Medical Reasons (Sick Leave)

When absences for medical reasons are anticipated, faculty members are expected to complete a request for absence as early as possible. When such absences are unexpected, the faculty member, or someone speaking for the faculty member, should let the Department 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). For more specific details see OHR Policy 6.27 .

## C. Family Medical Leave

Faculty may be eligible for leave under the Family Medical Leave Policy and/or the university's paid parental leave guidelines as described in its Policy on Paid Time Off. The faculty member requesting the leave and the Department Chair should be creative and flexible in developing a solution that is fair to both the individual and the unit while addressing the needs of the university and consistent with the OSUP/FGP compensation plan as applicable. Expectations must be spelled out in an MOU that is approved by the Department Chair.

## D. 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.

## E. Faculty Professional Leave

Tenured faculty are eligible for Faculty Professional Leave (FLP), also known as sabbatical leave, in
accordance with the standards and requirements set forth in the Office of Academic Affairs' policy on Faculty Professional Leave. FLP was created to give faculty a period of uninterrupted time to invest in their professional development. Activities that entail little or no investment in new skills and knowledge are not appropriate for the program. In addition, faculty should restrict other employment activity during a leave, including employment approved under the paid external consulting policy, to that which clearly enhances the purposes of the leave. FPL proposals generally emphasize enhancement of research skills and knowledge. However, faculty members may use an FPL for substantial investment in pedagogical or administrative skills and knowledge when these are judged to be mutually beneficial to the faculty member and their academic unit.

It is recommended that the faculty member submit proposals to the Department at least three months in advance of the proposed leave. Specifically, the Department's APT Committee will review all requests for faculty professional leave and make a recommendation to the Department Chair. The Department Chair will review the proposal consistent with the Department's guidelines for Faculty Professional Leave, as described in the Department's pattern of administration 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.

If approved, the Department will submit the proposal to the Dean or their delegate for approval, who will then submit the document for OAA approval, with leave applications finally recommended to the Board of Trustees for final approval.

## F. Parental Leave

The University, the College of Medicine, and this Department recognize the importance of parental leave to faculty members. Details are provided in the OHR Parental Care Guidebook, Paid Time Off Policy 6.27, and the Family and Medical Leave Policy 6.05 .

## XIV. Additional Compensation and Outside Activities

## A. Additional Compensation

Additional compensation is for clinical work beyond the faculty member's normal assignments. The specific compensation for such duties will be provided to the faculty in a supplemental compensation document provided with the letter of offer and may be updated periodically. Information on faculty additional compensation is presented in the OAA Policy on Faculty Compensation. Information on paid external consulting is presented in the university's Policy on Outside Activities and Conflicts. The information provided below supplements this policy. There is a separate FGP supplemental pay policy relating to clinical activity for faculty in the Faculty Group Practice.

This Department adheres to these policies in every respect. The 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 including meeting fiscal and other obligations to the Department, 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 supplementally compensated activities and external consulting combined.

Should a faculty member wish to use a textbook or other material that is authored by the faculty member and the sale of which results in a royalty being paid to him/her/them, such textbook or material may be required for a course by the faculty member only if (1) the faculty member's Department Chair and dean or designee have approved the use of the textbook or material for the course taught by the faculty member, or (2) an appropriate committee of the Department or college reviews and approves the use of the textbook or material for use in the course taught by the faculty member.

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.

## B. Outside Activities (including paid external consulting)

Information on paid external consulting is presented in the university's Policy on Faculty Paid External Consulting. The information provided below supplements this policy.

The Department encourages individual participation in outside activities, such as collaborations with government, industry, and other private institutions, because such participation helps advance the Department's mission through mutually beneficial partnerships and contributes to social and economic development and increased knowledge. Faculty are required to devote their primary professional allegiance to the university and conduct their university responsibilities with integrity, honesty and transparency. Similarly, all healthcare professionals have an ethical obligation to provide safe, effective, patient-centered, timely, efficient, and high-quality care for their patients.

Faculty members, including faculty with administrative assignments and appointments, are therefore permitted to engage in outside activities to the extent they are clearly related to the mission of the university, the activities are arranged so as not to conflict or interfere with this commitment to the university or the best interest of the patient, and do not create a conflict of interest as defined in the Conflict of Commitment Policy. Individuals conducting research also must avoid financial conflicts of interest in research. Faculty remain accountable for and have the primary commitment of meeting all formal and informal duties and obligations associated with research, service, instruction, scholarship, and/or clinical practice, and should not in their behaviors suggest that their commitment is to their outside engagements.

Engagement of faculty in outside activities are at the discretion of the Department Chair and/or the Dean of the COM and contingent on ability to complete all normal assigned academic and clinical roles. Allowable outside activities include, but are not limited to, consulting with pharmaceutical or device companies and medical legal work. Medical legal work includes expert witness and independent medical evaluations conducted in which a doctor/patient relationship does not exist. This includes evaluations for disability and civil or criminal legal issues (e.g., patient evaluation, reviewing records, discovery or trial deposition or trial testimony).

The Department and COM do not approve outside activities involving the use of confidential or proprietary information, which may include, but is not limited to, technologies, technical information, business information, know-how, ideas, data, materials, processes, procedures, methods, compositions, formulas, protocols, devices, designs, strategies, discoveries, inventions, trade secrets, and other intellectual property.

The Department and COM do not approve outside activities with 'Expert Networks'. These types of organizations (e.g., Guidepoint, Gerson Lehrman Group, ProSapient, Techspert, etc.) have been previously associated with insider trading resulting in legal consequences, and the college has determined that the risk outweighs the benefit.

Finally, faculty should be cautious of 'Speaker Bureaus' where remuneration offered and paid could violate anti-kickback laws. For additional details see OSUWMC Vendor Interaction Policy

All time and compensation must be reported through appropriate university processes described in Section X.B above and additional clarification is provided below. Faculty at 1.0 FTE may not spend more than 416 hours of their on-duty time per fiscal year. Consulting during off-duty periods is not subject to time limitations. Total compensation earned through such external activities may not exceed 75\% of total annual compensation, to ensure that individual faculty's principal focus does not appear to shift away from their university responsibilities. Requests in excess of this require written justification from the Department Chair and approval from the Dean. In addition, a faculty member's outside activity effort, combined with funded effort commitments, may not exceed $100 \%$ of their effort. Faculty who will exceed the maximum hours may choose to reduce their FTE or discontinue outside activities.

Faculty with an administrative position (for example, chair, associate/assistant dean, center director) remain subject to the Policy on Outside Activities and Conflicts and with appropriate approval, are permitted to engage in paid external work activities. However, faculty members with administrative positions are not permitted to accept compensation/honoraria for services that relate to or are the result of their administrative duties and responsibilities.

For faculty without administrative duties, the following activities are not subject to this policy's approval:

1. Professional service activities that exist apart from a faculty member's institutional responsibilities and that do not entail compensation beyond reimbursement for expenses and/or a nominal compensation for services. These activities include but are not limited to service to governmental and non-governmental agencies such as peer review panels and advisory bodies to other universities and professional organizations; presentations to either professional or public audiences in such forums as professional societies and organizations, libraries, and other universities; and peer review activities undertaken for either for-profit or nonprofit publishers, including grant reviews.
2. Health care activities that are explicitly covered by approved practice plans.

## Requirements/Restrictions

1. The procedure for requesting approval is outlined in the Guidance on Faculty External Consulting document on OneSource.
2. Outside activities must be approved by the Department Chair and Dean's office using the online faculty external consulting form prior to faculty member undertaking the outside activity.
3. A signed OSU IP addendum signed by both parties must be included for all external consulting agreements.
4. Faculty must use vacation leave (or unpaid leave) for any outside activities that occur during normal business hours, whether the outside activity is paid or unpaid.
a. Facilities and services of the university may not be used in connection with compensated outside activity.
b. University staff (e.g., assistants or administrators) may not be used to negotiate with companies, submit faculty requests, or book travel related to the outside activity, as these agreements are between the company and the faculty member.
c. Faculty members may not request reimbursement for expenses related to outside activities.
d. All outside activities and compensation must be disclosed in the e-COI within 30 days of College of Medicine approval.

## Corrective Actions

If a faculty member accepts payment for an outside activity without first obtaining approval or participates in activities that have been disapproved, a complaint may be filed against the faculty member under Faculty Rule 3335-5-04 and the faculty member may lose the privilege of future consulting at the discretion of the Dean of the College of Medicine.

## C. Outside Practice of Medicine

As required by the University Board of Trustees, all tenure track, clinical, or associated faculty in the COM who have a fifty percent or greater University appointment and who are providing patient care services are required, as a condition of faculty employment, to join and remain members of the Central College Practice Group (CCPG). Ohio State University Physicians, Inc (OSUP) has been designated as the CCPG by the University Board of Trustees on November 1, 2002.

Ordinarily, clinical services are provided within the facilities of the OSU Wexner Medical Center. Occasionally, a need or opportunity may arise in which a faculty member seeks to provide patient care service in a non-OSU facility. Requests to practice at a non-OSU facility (including Nationwide Children's Hospital) are considered on an individual basis. The approval process requires completion of the University Self-Insurance Program Non-OSU Location application. The request requires the approval of the Department Chair and is then forwarded to the COM for approval.

Tenure track, clinical, or associated faculty in the COM who have a fifty percent or greater University appointment are not permitted to be employed by other entities for the practice of medicine. The only exception to this policy is for faculty members who are contracted with the Veteran's Administration (VA). In those cases, the percentage of the University faculty appointed is reduced proportional to the V.A. appointment. No other exceptions are permitted.

## D. Policy on Salary Recovery

- Faculty are required to support their salary and/or funding expectations as outlined in their letter of offer or based on expectations outlined in their annual review.
- Per University Faculty Rules, for research faculty it is generally expected that salary recovery/support will be derived from extramural funds. While salary support for research faculty may not come from dollars provided to the Departments from the college, Departments may choose to provide funding from individual Departmental faculty research funds, start-up funds, and/or Department Chair package funds to maintain the faculty member's salary at $100 \%$.
- Exclusive of start-up funds that may be provided to help establish a research program, faculty members are expected to generate the financial support for their laboratory staff, supplies, and other expenses.
- Unless specifically required by a funding agency and approved by the College of Medicine (e.g., training grants), without cost (aka cost sharing) effort is not permitted.
- Faculty in 9-month appointments will be eligible for off duty pay (ODP) only if they have satisfied their fiscal obligations. ODP must be supported entirely on extramural funding.
- In addition to salary support, faculty are expected to support their research laboratory as specified in the Workload Policy.

E. Expenditures<br>University Policy on Expenditures<br>Faculty \& Staff Appreciation guidelines

## XV Financial, Educational, Commitment Conflicts of Interest

## Financial Conflict of Interest

Information on faculty financial conflicts of interest is presented in the university's Policy on Outside Activities and Conflicts. The information provided below supplements this policy. 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 who are 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 (see section above). Finally, faculty are expected to disclose any relationship (whether paid or unpaid) with foreign institutions, companies, or collaborators.

## Educational Conflict of Interest

Faculty at The Ohio State University COM accept an obligation to avoid conflicts of interest in carrying out their teaching and professional responsibilities. For purposes of this policy, an educational conflict of interest exists if:

1. Faculty member is currently or previously in a therapeutic relationship with the learner.
2. Faculty member is in a romantic or familial relationship with the learner.
3. Faculty member or admissions committee member is in a romantic or familial relationship with the applicant.
4. Faculty member is currently or previously in a therapeutic relationship with the applicant.

Having an educational conflict of interest may exert a substantial and improper influence upon a faculty member or admission committee member's professional judgment in exercising learner or applicant evaluation. Faculty members with an educational conflict of interest must not evaluate a learner's (for which there exists a conflict) performance or participate in any component of academic due process for that learner. Admissions Committee Members with an educational conflict of interest must not participate in any component of the admissions process for the year in which the applicant with whom they have the educational conflict with is involved. As soon as they become aware of a potential educational conflict the faculty member must disclose this to the Associate Dean for Medical Education/Designee, Associate Dean for Health \& Rehabilitation Sciences/Designee, Associate Dean for Graduate Education/Designee, or the Associate Dean of Graduate Medical Education/Designee. Admissions Committee Members with an educational conflict of interest must disclose this to the Associate Dean for Admissions/Designee or the appropriate admissions committee Chair.

## Conflict of Commitment

Information on conflicts of commitment is presented in the university's Policy on Outside Activities and Conflicts. Conflicts of commitment usually involve issues of time allocation. For example, whenever a faculty member's outside consulting activities (as defined in the university's Policy on Outside Activities and Conflicts and above) exceed the permitted limits or whenever a full-time faculty member's primary professional obligation is not to Ohio State, a conflict of commitment exists. The information provided below supplements this policy.

Ohio State University full-time faculty members, including administrators with faculty appointments, owe their primary professional allegiance to the university, and their primary commitment of time and intellectual energies should be to the education, research, service and scholarship programs of the institution. The specific responsibilities and professional activities that constitute an appropriate and primary commitment will differ across schools and Departments. To the extent that a faculty member's pattern of commitment is atypical for the Department, it should be documented through a written agreement between the faculty member and the Department Chair.

Even with such understandings in place, however, attempts by faculty to balance university responsibilities with non-university related external activities can result in conflicts regarding allocation of professional time and energies.

Faculty should disclose and discuss external commitments with their Department Chair and/or Deans prior to engaging in the activity. If an activity cannot be managed by the faculty member and the Department Chair or Dean to avoid a conflict of commitment or the reasonable appearance of a conflict of commitment, the faculty member must refrain from participating in the activity.

## XVI. Grievance Procedures

Faculty or staff members who have a grievance should first discuss the matter with the Department Chair, who will review the matter as appropriate and either seek resolution or explain why resolution is not possible. This section deals with grievances that have proceeded from the Department to the college level. If the grievance involves the Department Chair or the Department Chair is not the appropriate contact for some other reason, the faculty or staff member should bring the matter to the attention of the Dean or a Vice/Associate Dean. Content below describes procedures for the review of specific types of complaints and grievances.

## A. Salary Grievances

A faculty or staff member who believes that his/her/their salary is inappropriately low should discuss the matter with the Department 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 Department Chair and wish to pursue the matter may be eligible to file an appeal with the college's Faculty Salary Appeals Committee. A formal salary appeal can also be filed with the Office of Faculty Affairs (see Volume 1, Chapter 3 of the Office of Academic Affairs Policies and Procedures Handbook).

Staff members who are not satisfied with the outcome of the discussion with the Chair and wish to pursue the matter should contact Employee and Labor Relations in the Office of Human Resources.

## B. Faculty and Staff Misconduct

Complaints alleging faculty misconduct or incompetence should follow the procedures set forth in Faculty Rule 3335-5-04.

Any student, faculty, or staff member may report complaints against staff to the Department Chair. The Office of Employee and Labor Relations in the Office of Human Resources can provide assistance with questions, conflicts, and issues that arise in the workplace.

## C. Faculty Promotion and Tenure Appeals

Promotion and tenure appeals procedures are set forth in Faculty Rule 3335-5-05.

## D. Harassment, Discrimination, and Sexual Misconduct

The Office of Institutional Equity exists to help the Ohio State community prevent and respond to all forms of harassment, discrimination, and sexual misconduct.

1 Ohio State's policy and procedures related to affirmative action and equal employment opportunity are set forth in the university's policy on affirmative action and equal employment opportunity.

2 Ohio State's policy and procedures related to nondiscrimination, harassment, and sexual misconduct are set forth in the university's policy on nondiscrimination, harassment, and sexual misconduct.

## E. Violations of Laws, Rules, Regulations, or Policies

Concerns about violations of laws, rules, regulations, or policies affecting the university community should be referred to the Office of University Compliance and Integrity. Concerns may also be registered anonymously through the Anonymous Reporting Line.

## F. Complaints by and about Students

Each program should have a formal process for student complaints and appeals that is made available to students and faculty within the program. Normally student academic 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 Program Director/Department Chair/Division Director, they will first ascertain whether or not the students require confidentiality. If confidentiality is not required, the Program Director/Chair/Division Director 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. See Faculty Rule 3335-8-23.

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 Program Director/Department Chair/Division Director and others with appropriate knowledge of policies and procedures when problematic situations arise.

## G. Academic Misconduct

Board of Trustees Rule 3335-23-15 stipulates that the Committee on Academic Misconduct does not hear cases involving academic misconduct in colleges having a published honor code, although some allegations against graduate students fall under the committee's jurisdiction. Accordingly, faculty members will report any instances of academic misconduct to the Department Chair who will involve the Committee on Academic Misconduct, if appropriate, or will otherwise follow the Department's procedures for addressing allegations of violations of the professional student honor code.

## Professional Student Honor Code

Professionals have a moral responsibility to themselves, to their patients, to their associates, and to the institution with which they are affiliated, to provide the best service possible.

Personal ethics require certain inherent elements of character that include honesty, loyalty, understanding, and the ability to respect the rights and dignity of others. Personal ethics require conscientious preparation during one's academic years for eventual professional duties and responsibilities. A continuation of the development of professional efficiency should be accomplished by observation, study, and investigation during one's entire professional life.

Strength of character should enable one to rise above prejudice in regard to race, creed, or economic status in the interest of better professional service. To maintain optimum professional performance, one should be personally responsible for maintaining proper physical and moral fitness. Finally, it must be realized that no action of the individual can be entirely separated from the reputation of the individual or of their profession. Therefore, a serious and primary obligation of the individual is to uphold the dignity and honor of their chosen profession by thoughts, words, and actions.

History
Issued: 07/10/98 Revised: 03/02/07
Edited: 01/01/11, 05/29/12, 02/05/13, 05/01/18, 05/15/18, 05/08/20, 1/08/24

