

DEPARTMENT OF ANESTHESIOLOGY

PATTERN OF ADMINISTRATION

THE OHIO STATE UNIVERSITY COLUMBUS, OHIO



**Wexner
Medical
Center**

Approved by the Faculty:

Approved by the Office of Academic Affairs: 05/12/2020

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Patterns of Administration for the Department of Anesthesiology

Revised: April 2016; February 2019

I. Introduction

This document provides a brief description of the Department of Anesthesiology 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 subject to approval by the College of Medicine and the Office of Academic Affairs.

II. Mission Statement

The Department of Anesthesiology of The Ohio State University is dedicated to 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 XV 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 basic, translational and clinical research. 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 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.

Physician members of the department are practitioners of anesthesiology and its associated specialties. Members of the department who are non-physician practitioners 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 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 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. Academic Rights and Responsibilities

In April 2006, the university issued a [reaffirmation](#) of academic rights, responsibilities, and processes for addressing concerns.

IV. Faculty

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. Faculty members in the Department of Anesthesiology include those assigned to tenure track, clinical, research and associated faculty appointments, and those who have been granted emeritus faculty status. Faculty members have terminal degrees of training, including M.D., D.O., Ph.D., D.D.S. or equivalent.

A. Definition of Faculty Categories

As used in this Pattern of Administration the term “faculty” shall include persons appointed by the University Board of Trustees with tenure track, clinical, research, associated, and emeritus appointments on full- or part-time appointments, with or without salary.

1. “Tenure track faculty”: persons with the titles of Professor of Anesthesiology, Associate Professor of Anesthesiology, Assistant Professor of Anesthesiology, and Instructor of Anesthesiology who serve on appointments totaling fifty percent or more service to the University.
2. “Clinical faculty”: persons with the titles of Professor of Clinical Anesthesiology, Associate Professor of Clinical Anesthesiology, Assistant Professor of Clinical Anesthesiology, and Instructor of Anesthesiology. Individuals appointed to the clinical faculty may participate in governance at the division, departmental and college levels, but may not participate in promotion and tenure matters of the tenure track faculty.
3. “Research faculty”: persons with the titles of Research Professor of Anesthesiology, Research Associate Professor of Anesthesiology and Research Assistant Professor of Anesthesiology. Research faculty may vote in all matters of department governance except tenure-track appointment, promotion and tenure decisions and clinical appointment and promotion decisions.
4. “Associated faculty”: persons with the titles of Clinical Professor of Anesthesiology, Clinical Associate Professor of Anesthesiology, Clinical Assistant Professor of Anesthesiology, and Clinical Instructor of Anesthesiology. “Associated faculty” also includes persons with adjunct titles, visiting titles, lecturers; also professors, associate professors, assistant professors, and instructors who serve on appointments totaling less than fifty percent service to the University.
5. “Emeritus faculty”: tenure track, clinical, or research faculty members who, upon retirement, were recommended by the Chair, the Dean and the Executive Vice President and

Provost for emeritus status. Emeritus faculty members may not vote at any level of governance and may not participate in promotion and tenure voting, but may have such other privileges as individual academic units or the office of human resources may provide.

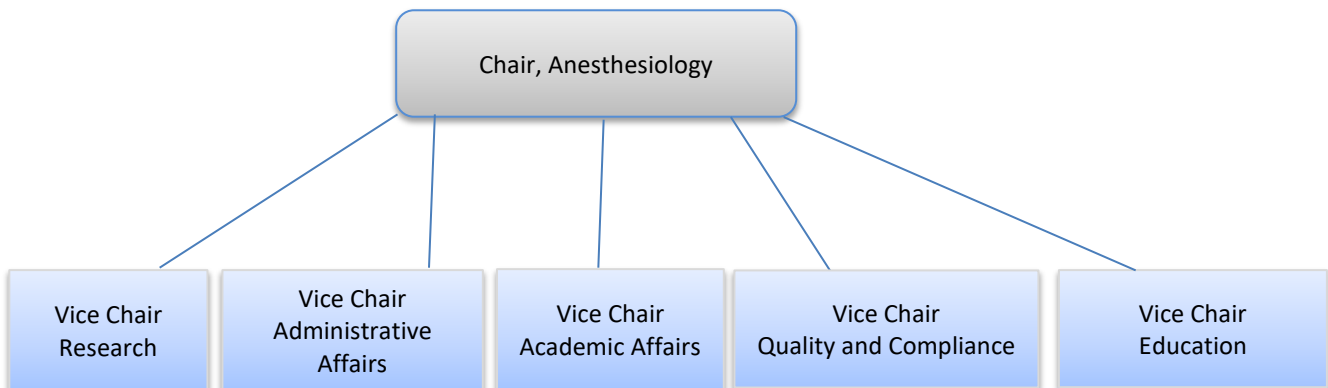
B. Guidelines for Appointment, Promotion and Tenure –

See separate document: **Department of Anesthesiology Appointments, Promotion and Tenure**
Also refer to University guidelines: <https://oaa.osu.edu/policies-and-procedures-handbook>

V. Organization of Department Services and Staff

The Chair is responsible for the organization of services in the Department. The department's clinical and scholarly activities are organized into divisions, namely General Anesthesiology, Critical Care, Obstetric Anesthesiology, Cardiothoracic Anesthesiology, Pain Medicine, and Ambulatory Anesthesia. 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, and clinical activities. Faculty members affiliated primarily with a specific division may have significant activities across other divisions.

The Department contains additional leadership positions, Vice Chair for Research, Vice Chair for Academic Affairs, Vice Chair for Education, Vice Chair for Quality and Compliance 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 Administrative Affairs oversees clinical activities, and other administrative activities. Any of these positions may be replaced by the chair at any time, and any or all may remain vacant for any period of time.



VI. Overview of Departmental Administration and Decision-Making

Policy and program decisions can be made in a number of ways: by the Department as a whole, by standing or special committees of the Department, 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. 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 practicable, 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.

VII. Department Administration

A. Chair

The primary responsibilities of the chair are set forth in Faculty Rule 3335-3-35 <https://trustees.osu.edu/university-faculty-rules/3335-5>. 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 <https://trustees.osu.edu/university-faculty-rules/3335-6>, 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.

- To have general administrative responsibility for department programs, subject to the approval of the dean of the college, 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 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 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.
- 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 <https://trustees.osu.edu/university-faculty-rules/3335-6> 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.

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 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

1. 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 when so designated by the chair.
2. Each vice-chair will be responsible for all duties assigned to them by the chair.
3. The appointment of the vice-chairs shall be made at the pleasure of the department chair.
4. One or more vice-chair positions may be left unfilled at the chair's discretion.
5. 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 following list provides more details.

Guidelines

1. **Appointments**
 - a. Appointments to standing committees and the appointment of the chair of these committees shall be made by the chair of the department who may choose to change committee membership or committee chairs at any time to best serve and balance the department's missions. Committee appointments shall be predominately comprised of faculty members, although resident representation is encouraged on department committees, especially those that pertain to education.
 - b. Appointees shall be advised of committee objectives by the department Chair. A current list of committee appointments shall be provided to each faculty member.
2. **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. Anesthesiology Revenue Cycle

To review 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.

3. Appointment, Promotion and Tenure Committee

To review the status of all faculty on an annual basis and to provide guidelines and recommendations to the Chairman regarding continued 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.

3. Clinical Competency Committee

As required by the ACGME, this committee will meet biannually to review the current status of all house officers in training in the department of Anesthesiology. All residents will be reviewed by the committee in order to recommend a milestone level assignment to be used for biannual reporting to the ACGME and ABA. The committee will make recommendations to the committee chair and to the program director of anesthesiology regarding the application of Focused Review and Academic Probation requirements..

4 Equipment Committee

To evaluate clinical technology and 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 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.

5. Faculty Recruitment Committee

To evaluate perspective 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

6. Operations Council

To periodically assess and review 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.

7. Perioperative Medicine Committee

To review current PSH service lines, and recommend revisions and improvements in the care pathways. To determine future service lines to add to our list of PSH service lines. To disseminate the outcomes of these initiatives across the Department and beyond.

8. Pharmacy Committee

To evaluate 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.

9. Program Evaluation Committee (PEC)

This committee is the supervisory body charged to oversee the educational division of the department. All aspects of continuing medical education, resident education and medical student education will fall under the purview of the committee. This committee actively participates in planning, developing, implementing, and evaluating educational activities of the program. Its responsibilities include reviewing and making recommendations for revision of competency-based curriculum goals and objectives, addressing areas of non-compliance with ACGME standards and reviewing the program annually using evaluations of faculty, residents, and others. The committee documents formal, systematic evaluation of the curriculum at least annually, and is responsible for rendering a written and Annual Program

Evaluation (APE). Through the committee, the program must monitor and track resident performance, faculty development, and graduate performance in order to create an annual improvement plan as required by the ACGME.

10. 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 Chairman once per month and will provide feedback to the department at least twice per year.

11. 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.

12. 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.

13. Schedule Faculty Committee

This committee is comprised of the faculty in charge of managing the OR schedule. It will review all clinical coverage by the department and recommend revisions to the department clinical coverage plans.

14. Simulation Education Committee

To oversee and direct 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.

D. Ad Hoc Committees

From time to time, the chair may create Ad Hoc committees to address specific needs.

VIII Faculty Meetings

1. 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, or upon the request of one or more faculty members. All professors, associate professors, assistant professors and instructors including physician trainees who hold a faculty appointment are invited to all faculty meetings. The department chair or 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.
2. Meeting agendas are established by suggestions from the faculty and the chair. 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 College of Medicine 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.

3. Attendance at faculty meetings is documented and monitored, and failure to attend at least 50% 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. All tenure-track and clinical faculty with 50% or greater appointment and all full-time term appointment faculty have a vote on academic matters. 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 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, 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.

IX. Faculty Duties and Responsibilities

The Department of Anesthesiology adheres to the University Policy as described below:

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 chair in order to

ensure that no conflict of commitment exists. Information on faculty conflicts of commitment is presented in the OAA [Policy on Faculty Conflict of Commitment](#), as follows:

Conflict of Commitment

Faculty at The Ohio State University accept an obligation to avoid conflicts of commitment in carrying out their University education, research, scholarship or service responsibilities. This policy is intended to assist faculty members, including administrators and staff with faculty appointments, in avoiding these conflicts and in finding a balance between activities that enhance the University's core purpose—to advance the well-being of the people of Ohio and the global community through the creation and dissemination of knowledge—and those that detract from it.

Faculty should disclose and discuss external commitments with their department chairs and/or deans. If an activity cannot be managed by the faculty member and his/her 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.

The chair is responsible for assuring that every faculty member has duties and responsibilities commensurate with his or her appointment and that departmental workload is distributed equitably among faculty. In making these assignments the chair must balance the needs of the department with the preferences of the faculty member within the context of the department's policy on faculty duties and responsibilities described below.

Many faculty members voluntarily take on a variety of professional activities that fall outside the department's policy on faculty duties and responsibilities. These activities often benefit the department or university and, to the extent possible, should be taken into account in considering a faculty member's total workload.

However, fairness to other faculty and the department's need to meet its programmatic obligations may become issues when a faculty member seeks relief from departmental obligations in order to devote considerable time to personal professional interests that may not contribute to departmental goals. The chair may decline to approve such requests when approval is not judged to be in the best interests of the department.

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.

Faculty who fail to demonstrate adequate teaching performance, based on teaching evaluations and contributions to didactic lectures or similar contributions to the teaching mission, may be designated as "Non-teaching faculty" by the Vice Chair for Education. When so designated, the faculty member's efforts will be assigned to mission areas other than teaching. Faculty designated as non-teaching will be provided with opportunity to regain designation at Teaching Faculty if they demonstrate improvements in their teaching contributions and performance.

Scholarship

All tenure-track faculty members are expected to be engaged in scholarship as defined in the department's [Appointments, Promotion, and Tenure Document](#).

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.

i Special Assignments

Information on special assignments (SAs) is presented in the Office of Academic Affairs [Special Assignment Policy](#). The information provided below supplements these policies.

Untenured faculty will normally be provided an SA for research for one semester, during their probationary period. Reasonable efforts will be made to award SA opportunities to all other faculty members subject to the quality of faculty proposals, including their potential benefit to the department or university, and the need to assure that sufficient faculty are always present to carry out departmental work. The department's committee on research will evaluate all SA proposals and make recommendations to the department chair. The chair's recommendation to the dean regarding an SA proposal 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.

B 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 research and education missions, as further detailed in the department's [Appointments, Promotion, and Tenure Document](#). Service expectations are similar to those for the tenure-track.

C Research Faculty

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

In accord with Faculty Rule [3335-7-34](#),

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

Research 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.

i Clinical and Research Faculty Governance Rights

Clinical faculty may vote in all matters of departmental governance except tenure-track appointment, promotion and tenure decisions. Any clinical faculty member appointed by the college unit may stand for election to serve as a representative in the University Senate subject to representation restrictions noted in [Faculty Rule 3335-7-11\(C\)\(2\)](#).

The number of research faculty positions must constitute a minority with respect to the number of tenure-track faculty in the unit.

Research faculty may participate in discussions of research faculty matters including promotion reviews.

D Associated Faculty

Compensated associated faculty members are expected to contribute to the university's missions via clinical care, teaching, service and/or research depending on the terms of their individual appointments.

Faculty members with appointments <100% FTE will have proportionally reduced expectations based on their appointment level.

E. Parental Modification of Duties

The Department of Anesthesiology strives to be a family-friendly, inclusive unit in its efforts to recruit and retain high quality faculty members. To this end, the department is committed to adhering to the College of Medicine's guidelines on parental modification of duties to provide its faculty members flexibility in meeting work responsibilities within the first year of childbirth/adoption. See the [college pattern of administration](#) for details.

The faculty member requesting the modification of duties for childbirth/adoption 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.

X. Faculty Workload Guidelines

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 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.

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. 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.

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.

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 has 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 the faculty members' annual review, and could cause the faculty member to no longer be designated as 'Teaching Faculty'.

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. In particular, all tenure track and research faculty are expected to have a significant commitment to scholarly activity and to make consistent efforts to obtain and maintain external support for their research program. Such faculty are expected to be principal investigator on grants and may be collaborators on the grants of other faculty. 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 expected to participate in Department, College of Medicine, Medical Center, and/or University governance.

XI. Allocation of Department Resources

1. All faculty have access to educational and meeting/travel funds through The Ohio State University Wexner Medical Center.
2. All members of the faculty have access to office space and to secretarial assistance. With few exceptions, office space and secretarial assistance will be shared among multiple faculty members.
3. Faculty members requiring research space are assigned on a priority basis, with final decision on space allocation resting with the Dean of the College of Medicine or their designee. Requests for research space by faculty without external funding will be considered in the context of available resources, previous or current allocations, and departmental priorities. Faculty members may apply to the chair for travel or seed funding. The chair will make decisions regarding allocation of funds based on the merits of the proposal, the perceived benefit to the faculty member and the department, and the availability of funds.

XII. Leaves and Absences

The university's policies and procedures with respect to leaves and absences are set forth in the Office of Academic Affairs Policies and Procedures Handbook <https://oaa.osu.edu/policies-and-procedures-handbook> and Office of Human Resources Policies and Forms website <https://hr.osu.edu/policies-forms>.

A. Discretionary Absence

Faculty are expected to submit a request for vacation or CME time, and accompanying travel approval form as applicable in advance of a planned absence to provide time for its consideration and approval and time to assure that clinical 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 clinical or other comparable commitments. Rules of the University Faculty require that the Office of Academic Affairs approve any discretionary absence of ten or more consecutive business days (see Faculty Rule [3335-5-08](#)) and must be requested on the Application for Leave form.

B. Absence for Medical Reasons

When absences for medical reasons are anticipated, faculty members are expected to complete an Application for Leave form as early as possible. When such absences are unexpected, the faculty member, or someone speaking for the faculty member, should notify the Officer of the Day when assigned clinically, and the main department reception area when assigned to non-clinical duty. Faculty members are always expected to use sick leave for any absence covered by sick leave. For additional details see OHR Policy 6.27, <https://hr.osu.edu/wp-content/uploads/policy627.pdf>.

C. Unpaid Leaves of Absence

The university's policies with respect to unpaid leaves of absences and entrepreneurial leaves of absence are set forth in [OHR Policy 6.45](#).

D. Faculty Professional Leave

1. Information on faculty professional leaves is presented in the Office of Academic Affairs [Policy on Faculty Professional Leave](#). The information provided below supplements these policies.
2. The Vice Chair of Administrative Affairs will review all requests for faculty professional leave and make a recommendation to the chair based on the following criteria:
 1. Satisfactory completion of OAA form 202—Application for Faculty Professional Leave – <https://hr.osu.edu/wp-content/uploads/form-leave-application.pdf>
 2. Submission of a detailed plan for research, clinical activities and/or observations which demonstrates credible potential for
 - a. enhancing the individual's ability to function in his or her assigned faculty role and/or
 - b. introducing new and innovative knowledge, procedures and technology for the benefit of the department, its faculty and its patients and/or
 - c. 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 clinical, teaching and patient care obligations of the individual requesting FPL are fulfilled without undue imposition of responsibilities upon other department and division faculty members, and without measurable negative impact on the financial stability of the department.

XIII Supplemental Compensation and Paid External Consulting

The University's policies with respect to supplemental compensation and paid external consulting are set forth in the [Policy on Faculty Compensation](#). Information on paid external consulting is presented in the university's [Policy on Faculty Paid External Consulting](#). The information provided below supplements these policies.

A. Supplemental Compensation

Supplemental 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.

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 being eligible to pursue 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 by the chair. 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 has significant potential 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, without prior approval by the chair.

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. Paid External Consulting

Faculty members with the requisite expertise, are encouraged to engage in paid external consulting to the extent that these activities are clearly related to the mission of the University, provide direct or indirect benefits to the University, do not restrict the department's ability to perform its academic and clinical missions, and do not entail a conflict of interest as defined in the Conflict of Interest Policy.

As a general rule, the proportion of a faculty member's professional effort devoted to consulting should not exceed one business day per week.

Faculty members should avoid any conflict or appearance of conflict between consulting and University responsibilities. In particular, the disruption of formal instructional activities or assigned clinical duties because of consulting must be avoided. Consulting during off-duty quarters, when applicable, is not subject to time limitations.

Should a departmental 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 or her, such textbook or material may be required for undergraduate, graduate, or post-graduate curricula by the faculty member only if (1) the chair and dean or designee have approved the use of the textbook or material, or (2) an appropriate committee of the department or college reviews and approves the use of the textbook or material for use in the specific curriculum.

XIV Financial Conflicts of Interest

The University's Financial Conflict of Interest Policy for faculty may be found at:

<https://oaa.osu.edu/sites/default/files/uploads/policies/Faculty-Financial-Conflict-of-Interest.pdf> Faculty

at The Ohio State University accept an obligation to avoid financial conflicts of interest in carrying out their professional work. For purposes of 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's professional judgment in exercising any University duty or responsibility, including designing, conducting or reporting research.

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

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

A 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 (see 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 Misconduct

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

C Faculty Promotion and Tenure Appeals

Promotion and tenure appeals procedures are set forth in Faculty Rule [3335-5-05](#).

D Sexual Misconduct

The university's policy and procedures related to sexual misconduct are set forth in OHR [Policy 1.15](#).

E 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 Chair, the Chair will first ascertain whether or not the student requires confidentiality. If confidentiality is not required, the Chair will investigate the matter as fully and fairly as possible and provide a response to the student 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 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 also Faculty Rule [3335-23-05](#)).

F Code of Student Conduct

In accordance with the [Code of Student Conduct](#), faculty members will report any instances of academic misconduct to the Committee on Academic Misconduct

G. 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 his or her profession. Therefore, a serious and primary obligation of the individual is to uphold the dignity and honor of his or her chosen profession by thoughts, words, and actions.

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