PATTERNS OF ADMINISTRATION FOR THE DEPARTMENT OF INTERNAL MEDICINE

INTRODUCTION

This document provides a brief description of the Department of Internal Medicine 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.

DEPARTMENT MISSION

- To improve peoples lives through innovation in research, education, and patient care.
- Working as a team to shape the future of medicine by creating, disseminating, and applying new knowledge to meet the needs of each individual.

FACULTY

Faculty Rule 3335-5-19 <u>http://trustees.osu.edu/rules5/ru5-19.html</u> defines the types of faculty appointments possible at The Ohio State University and the rights and restrictions associated with each type of appointment. For purposes of governance, the faculty of this department include regular faculty with compensated full-time employment (FTEs) of at least 50% in the department. Auxiliary faculty, Emeritus faculty, and Regular faculty joint appointees with FTEs below 50% in this department may be invited to participate in discussions on non-personnel matters, but may not participate in personnel matters, including promotion and tenure reviews, and may not vote on any matter.

The Department of Internal Medicine appoints faculty to the regular Tenure Track and to three non-Tenure Tracks. The latter are the Auxiliary Track, the Research Track and the Clinical Track. To be considered for appointment, a prospective member of the faculty must have completed the terminal degree in their area of expertise.

Detailed information about the appointment criteria and procedures for the various types of faculty appointments made in this department is provided in the Appointments, Promotion and Tenure document. http://medicine.osu.edu/faculty/pages/index.aspx

I. <u>Faculty Responsibilities</u>

The Department of Internal Medicine is committed to the academic and professional development of all members of its faculty. Conversely, all members of the physician faculty are expected to follow the standards of academic and professional behavior described by the rules and policies of The Ohio State University, the College of Medicine, the Department of Internal Medicine, and the Division to which the faculty member is appointed. Although each member of the faculty has her or his own area(s) of career emphasis and the Department supports career emphasis in areas of excellence, it is also expected that each member of the physician faculty will respond to the clinical service, academic, education, and

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administrative needs of his or her Division and Department as required to fulfill Departmental and Divisional missions. Non-physician faculty (e.g. PhD faculty) contribute to the research and educational mission as well as administrative tasks for departmental success.

II. <u>Faculty Time</u>

The Department of Internal Medicine is committed to the academic and professional development of all members of the faculty. It recognizes the need for distribution of professional effort that provides for both the clinical service needs of the Department and the professional development needs of the members of the faculty. Accordingly, the Department maintains standards of distribution of professional effort as outlined in the following tables:

Title	Career Descriptor	Clinical Service Requirements per 1.0 FTE	Academic Expectations	Funding Source
Auxiliary (pd)	Clinician	80-100%	1. Clinical Care 2. Clinical Teaching	Clinical Revenue
Clinical Track	Clinical Scholar	20-80%	 Clinical Care Clinical and Didactic Education Scholarship of application Clinical leadership 	Clinical Revenue Administrative Stipends
	Clinical Educator	20-80%	 5. Service on departmental and institutional committees Didactic Education Curriculum & Program Development Educational Leadership 4. Scholarship of education and integration 	Clinical Revenues College and
			5. Clinical Care6. Service on departmental and institutional committees	Hospital funds for Teaching Administrative Stipends
	Clinical	20-80%	1. Scholarship of discovery and integration	Grants Grants
	Investigator		 Clinical Care Direct Education Service on departmental and institutional committees 	Clinical Revenue
Tenure Track	Physician Scientist	0-30%	 Scholarship of discovery and integration Direct Education, including graduate students Research Leadership Roles Limited clinical care Service on departmental and institutional committees 	Grants Institute/Center, College, Medical Center support
				Administrative Stipends
	PhD Scientist	0%	 Scholarship of discovery and integration Direct Education Research Leadership Roles Service on departmental and institutional committees 	Grants Institute/Center, College Support Administrative Stipends
Research	PhD	0%	1. Scholarship of Discovery and Integration	Grants

Policy on Faculty Duties & Responsibilities

Tr	ack	Scientists		2. Mentorship of medical and graduate students
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Notes:

- ALL faculty are expected to generate sufficient funds through clinical practice, extramural funding, teaching, supplements for specific tasks of importance to the department, or administrative activities to cover their salary and benefits, as well as their appropriate share of divisional expenses. Senior faculty must fulfill this obligation within two years of the date of hire and junior faculty within six years of the date of hire; however, it is expected that clinical productivity goals, as determined by the Division Director, are met earlier.
- If productivity is low in any specific mission area, workload may be reassigned at the Division Director's discretion.
- ALL regular faculty members (except Research Track) are expected to participate in committee work at the departmental and institutional level.

Definitions:

Clinical Service Requirements: This column represents the range of each faculty member's time that is committed to clinical work in either the inpatient or outpatient arena. It includes time spent performing invasive procedures as well as time spent supervising trainees in a clinical environment. The Division Director is responsible for assigning faculty to clinical activities based on their rank, skills, aptitudes, training, funding sources and the needs of the department and division. Each division will define its calculation of % clinical effort using available metrics.

Academic Expectations: All Faculty members within the Department of Internal Medicine are expected to approach their work in a scholarly fashion. The following definitions are in use in this document.

- **Clinical Care**: Provision of measurable high quality care.
- **Direct Education**: Education of medical students, graduate medical education trainees (residents and fellows) and faculty development; includes both apprenticeship based teaching assignments (clinical and lab based) as well as didactic lectures.
- **Clinical Leadership Roles**: Director or Associate Director of clinical sites, programs or divisions.
- Educational Leadership Roles: Director or Associate Director of medical school modules, programs, clerkships, graduate medical education programs, CME or faculty development; Key faculty and core liaisons for GME programs
- Research Leadership Roles: Director or Associate Director of labs, research programs and similar activities.
- Categories of scholarship (Reference: Boyer et al.)

*Scholarship	Scholarship of Discovery	Scholarship of Integration	Scholarship of Application	Scholarship of Education
Definition	Generation of new knowledge through research	Integration of research from interdisciplinary fields to generate new knowledge and ideas	Application of existing research in a larger community and measurement or results	Transmitting, transforming and extending knowledge by teaching and educational program development
Example	Basic Science, Translational, Health Services	Clinical research; Educational Research	Clinical Service; Clinical Quality Improvement	Educational Service and Quality Improvement
Metrics	Grants, Patents, Publications	Grants, Publications	Quality Metrics, Presentations, Publications	Educational Quality Metrics, Presentations, Publications, Educational Tools, Curricula

*Glassick et al. Criteria for Scholarship of any type:

- **Clear Goals:** Does the scholar state the basic purpose of his or her work clearly? Does the scholar define objectives that are realistic and achievable? Does the scholar identify important questions in the field?
- Adequate Preparation: Does the scholar show an understanding of existing scholarship in the field? Does the scholar bring the necessary skills to his or her work? Does the scholar bring together the resources necessary to move the project forward?
- **Appropriate Methods**: Does the scholar use methods appropriate to the goals? Does the scholar apply effectively the methods selected? Does the scholar modify procedures in response to changing circumstances?
- **Significant Results:** Does the scholar achieve the goals? Does the scholar's work add consequentially to the field? Does the scholar's work open additional areas for further exploration?

- **Effective Presentation**: Does the scholar use a suitable style and effective organization to present his or her work? Does the scholar use appropriate forums for communicating work to its intended audiences? Does the scholar present his or her message with clarity and integrity?
- **Reflective Critique**: Does the scholar critically evaluate his or her own work? Does the scholar bring an appropriate breadth of evidence to his or her critique? Does the scholar use evaluation to improve the quality of future work?

III. <u>Faculty Evaluation</u>

All faculty undergo annual evaluation as described by the Department of Internal Medicine and College of Medicine Appointment, Promotion, and Tenure Documents and University Faculty Rules. The Department of Internal Medicine uses a faculty performance instrument that rates faculty in the broad categories of Education, Scholarship and Research, Clinical Service and Scholarship, Leadership and Administration, and Citizenship (instrument posted at http://medicine.osu.edu/faculty/Pages/index.aspx) Specific metrics of performance in each of these areas are outlined in this instrument as well as metrics of financial performance. The faculty member provides information on performance benchmarks in all areas other than financial performance and indicates their performance goals in each area for the coming year as well as perceived barriers to achieving his/her career goals. This instrument is then reviewed with the Division Director and appropriate members of divisional leadership and administration. The faculty member and Division Director discuss future goals and performance expectations for the coming year as well as ways in which the division can facilitate the faculty member's achievement of goals and career advancement. Written comments and evaluation in each of the above areas as well as an overall summary evaluation are provided by the Division Director. The faculty member is rated in each of the above areas as well as in overall performance as: 1. Below Average (Does not meet expectations); 2. Average (Meets expectations); 3. Above Average (Meets or exceeds expectations); 4. Well Above Average (Exceeds expectations). After this evaluation is completed, it is reviewed by the Department which provides an overall evaluation using the above scale and written comments regarding the faculty member's performance. This final performance evaluation is then provided to the faculty member for their approval and signature. All evaluations must be signed by the faculty member, the Division Director, and the Chairman of the Department of Internal Medicine or the Vice Chair for Academic Affairs.

IV. <u>Performance Improvement and Involuntary Termination</u>

The Department of Internal Medicine is dedicated to the fair treatment of all members of its faculty. It is committed to the career development and advancement of the faculty. Nevertheless, there can arise instances in which a faculty member does not consistently meet the expectations of the Department through demonstration of inefficiency, incompetence, and/or failure of good behavior. In these instances, a procedure that is fair and definitive will be followed for identifying required performance improvement and determining if a faculty and/or Ohio State University Physicians (OSUP) appointment must be terminated. The elements of this procedure are outlined below. However, serious infractions such as violation of Departmental, College, and/or University rules and policies and/or the law may necessitate the immediate involuntary termination of a faculty member, as described in the section titled *Causes for Immediate Involuntary Termination*.

A. Performance Improvement Plan

Faculty demonstrating inefficiency, incompetence and/or failure of good behavior will be provided a written Performance Improvement Plan. A Performance Plan may be given to a faculty member during his/her annual review or anytime during the year as performance dictates. The Department office of Vice Chair of Academic Affairs should receive a copy of the Performance Improvement Plan.

It is expected that the faculty member would have received verbal counseling/notification of deficiencies leading up to the Performance Improvement Plan. In addition, the division should have internal notes of the verbal counseling/notification provided.

If a Performance Improvement Plan is provided at annual review time, the faculty member must be rated below expectations in at least one category of his/her annual review (education, research and scholarly activity, clinical performance, or citizenship). The annual review must state the reasons that a performance area is rated below expectations.

The Performance Improvement Plan should include the following:

- Description of the performance/behavior that needs to be corrected and why it needs to be corrected.
- The expectation that has not been met and/or the policy or rule that has been violated.
- Description of the desired performance/behavior and the time frame within which the desired performance/behavior must occur.
- Action steps that need to be taken to reach the desired performance behavior.
- Information on how the faculty member's performance/behavior will be monitored/reviewed.
- An established date and time to discuss progress (successes and challenges) in changing performance/behavior.
- A clear statement that failure to improve performance/behavior may result in termination of the faculty and/or OSUP appointment.
- A signature and date line for both the Division Director and the faculty member.

B. Meetings with Division and Department Leadership

The Performance Improvement Plan will be provided to the faculty member in a meeting with the Division Director. The Division Administrator will also be present in this meeting.

The Vice Chair for Academic Affairs may be invited as a participant in the above meeting to advise both the faculty member and the Division as to Faculty, College, and Departmental rules. The Vice Chair may also meet with the faculty member at other times for counsel and advice as requested by the faculty member.

All faculty members are entitled to meet with the Chairman of the Department of Internal Medicine regarding a variety of issues and the potential for termination is no exception. However, the performance improvement and involuntary termination process is the primary responsibility of the faculty member's Division who must keep the Chair appraised of the progress of performance improvement as noted above. There is no requirement for the Department Chair to meet with the faculty member unless there is a request by the Division or the faculty member. This is similarly true for the Senior Associate Dean for Faculty Affairs or members of this Dean's staff who may be invited to attend meetings with the faculty member, or provide advice to the faculty member upon request.

C. Performance Improvement Plan Follow-up

Informal meetings/counseling sessions may be held at any time during the Performance Improvement Plan period. However, a formal meeting, no later than four months following the issuance of the Performance Improvement Plan, must be held with the faculty member and the Division Director and other relevant members of the faculty member's Division (e.g. the Division Administrator) to discuss the faculty member's progress. The date of this formal meeting should be predetermined and referenced in the Performance Improvement Plan. The length of the Performance Improvement Plan period will be dictated by the nature of the inefficiency, incompetence and/or failure of good behavior and by an assessment from the Division Director determining reasonable time frame for improvement based upon the circumstances.

If there continues to be substandard performance/behavior by the faculty member, specifics of such will be identified and the faculty member will be notified of the intent to terminate his/her OSUP appointment. The faculty member will receive a written summary of this meeting. This written summary will contain a sixty day notice of at will termination from the OSUP in accordance with OSUP bylaws and the stipulations of the OSUP contract. Complaints against faculty members for Tenure and non-Tenure Track faculty will follow the Faculty Rules of The Ohio State University and the guidelines of the College of Medicine and the Department of Internal Medicine (see 3335-5-04 of the Rules of the University Faculty). The Vice Chair for Academic Affairs and the Chairman of the Department of Internal Medicine will receive a copy of this document.

If the faculty member's performance has improved and is meeting the expectations outlined in the Performance Improvement Plan, the specifics of such will be discussed as well as measures that the faculty member must continue to take to sustain this improvement. The faculty member will receive a written summary of this meeting. This written summary will include a clear statement that if the faculty member's performance/behavior falls back to a substandard level, the faculty member will be subject to termination. If subsequent substandard performance/behavior warrants termination of his/her OSUP and/or faculty appointment, the faculty member will receive a written sixty day notice of at will termination from the OSUP in accordance with OSUP bylaws and the stipulations of the OSUP contract. Termination of faculty appointment for Tenure and non-Tenure Track faculty will follow the Faculty Rules of The Ohio State University and the guidelines of the College of Medicine and the Department of Internal Medicine. The Vice Chair for Academic Affairs and the Chairman of the Department of Internal Medicine will receive a copy of this document.

D. Causes for Immediate Involuntary Termination

There are instances in which a faculty member may violate Departmental, College, and/or University rules and policies and/or the law that require his/her removal from the faculty. Examples of such include, but are not limited to, cases in which there is violation of policies or rules of The Ohio State University, the College of Medicine, the Department of Internal Medicine or the law that pose an immediate threat to patients, personnel, students, faculty members, and/or the academic or fiscal well being and reputation of The Ohio State University, the College of Medicine, the Department of Internal Medicine, or their staff, students, or faculty. In such cases, the above procedures are not required owing to the need for immediate removal of the threat posed by such violations. The faculty member will meet simultaneously with the Chairman of the Department of Internal Medicine, the Vice Chair for Academic Affairs, and the Director of the faculty member's Division. Members of the Office of Human Resources may be present at this meeting or may meet separately with the faculty member. If it is found through these meetings that the faculty member has committed a serious violation of rules, policies and/or the law such that the institution, its faculty, students, or personnel are harmed or placed at personal, professional, or fiscal risk, the Chairman of the Department of Internal Medicine may immediately suspend professional and academic privileges, and immediate steps can be taken towards termination of OSUP and faculty appointments according to the bylaws of the OSUP and the Faculty Rules of The Ohio State University, and the stated procedures of the College of Medicine and the Department of Internal Medicine.

IV. <u>Faculty Recruitment</u>

Faculty recruitment follows the rules and regulations of The Ohio State University, the College of Medicine and the Department of Internal Medicine. Recruitment of faculty members to each division (other than Division Directorships or University, Departmental, or College leadership positions) will be conducted by a faculty committee consisting of at least three members of the division. This committee will work in consultation with the Division Director. The committee will aid the Division Director in the search for and suggestion of candidates for a position. They will participate in the interview of the candidates. They may but are not required to assist in the invitation of candidates and suggest final selection of candidates to the Division Director. The Department of Internal Medicine is dedicated to the fair recruitment of faculty and strives for faculty diversity in terms of gender, race, and ethnic background. Accordingly, one member of the recruitment committee will assure consideration of candidates. The committee will provide a recruitment report to the Vice Chair of Academic Affairs and will in that report describe the range of candidates considered and the methods by which candidates of diverse backgrounds were considered.

A. Recruitment Request, Mentors, and Approval Process

The Division Administrator will submit the Faculty Recruitment Request Form and indicate what faculty member will be responsible for mentorship. The Faculty Recruitment Request Form can be located on the SharePoint Web site of Internal Medicine at (https://collaborate.osumc.edu/staffonly/internalmedicine/default.aspx).

- 1. Faculty Recruitment Request form.
- 2. Draft copy for a national advertisement and list of publications.
- 3. List of search committee members.

Faculty Recruitment Request Form

1. Title Requested (Assistant, Associate, Professor - Tenure, Clinical or Research) - It is

sometimes desirable to request an open faculty search. This will be particularly helpful when the division is uncertain as to which faculty rank (Assistant, Associate or Professor) will finally be appointed to the position. The Track – Clinical, Research or Tenure – must always be specified.

- 2. Type of Appointment The Division must indicate *New Position* or *Replacement*. It is expected that the Division has looked at the financial and business impact of recruiting a new faculty member.
- 3. The *Effort Grid* and *Funding Support Grid* must be in agreement and make logical sense. For instance, it is expected that a regular Tenure Track faculty member will expend sizeable effort in *Sponsored Research* whereas a regular Clinical Track faculty will have a larger percent of effort devoted to *Clinical Practice*. Regular Research faculty are expected to devote 100% of their effort to research and be fully funded. Alternatively, a source for funding must be identified. In the *Funding Support Grid*, a regular Tenure Track faculty would be expected to have a portion of the salary supported by *Sponsored Research* that is equal to the effort reported in the *Funding Support Grid*. For Junior Tenure Track faculty, the three-year plan should describe funding transitions to sponsored research. On the other hand, regular clinical Track faculty would principally be supported by *Clinical Practice Funds* with an expected transition over three years to some support from *Sponsored Research*. For regular clinical track faculty not engaged in research, additional funding from proposed services should be defined.
- 4. The completed Faculty Recruitment Form should be signed by the Division Director and forwarded to the Administrative Coordinator in the Faculty Affairs office. Approval of the Department Chair and Senior Associate Dean for Faculty Affairs will be obtained and the Division Administrator will be notified that the division is approved to conduct a search.

ORGANIZATION OF DEPARTMENT SERVICES & STAFF

The Department of Internal Medicine is organized into divisions which represent the various specialties within the discipline of Internal Medicine. Each division constitutes an academic subunit lead by a Division Director and is responsible for teaching, research and patient care related to the specific discipline. Currently, the Department of Internal Medicine has fourteen divisions:

- Cancer Prevention and Control
- Cardiovascular Medicine
- Dermatology
- Endocrinology, Diabetes & Metabolism
- Gastroenterology, Hepatology & Nutrition
- General Internal Medicine
- Hematology
- Hospital Medicine
- Human Genetics
- Immunology and Rheumatology
- Infectious Diseases
- Medical Oncology
- Nephrology
- Pulmonary, Allergy, Critical Care, and Sleep Medicine

The creation or elimination of a division or the transfer of faculty in a specific discipline from one division to another is at the sole discretion of the Chair.

In addition to the leadership provided by the Division Directors, there are six Vice Chairs and five Associate Vice Chairs whose responsibilities are aligned with the mission areas of the department. The mission areas of the Department are Academic Affairs, Education, Research, OSU East/Finance, Clinical Medicine and Quality. Additionally, we have 5 Associate Vice Chairs - 2 dedicated to outpatient services and three dedicated to inpatient medical care at 1) Main, 2) Ross and 3) The James. Divisions as a whole and members of the division as individuals are responsible for contributing to the overall mission of the Department as well as their respective divisional missions.

The Department functions as an academic unit through the policies and procedures outlined in this document. The actual practice of medicine; however, is conducted through the Primary Care Network, Specialty Network or OSUP/Ohio State University Internal Medicine, LLC. Physician faculty who are part of the Primary Care or Specialty Network are employed by the health system and governed by the policies and procedures of the network in which they are employed. Ohio State University Internal Medicine LLC is an incorporated entity which constitutes the "Central Practice Group" of the Department of Internal Medicine as mandated by the Practice Plan of the University. Physician faculty who conduct their clinical practice activities through OSUP/OSU Internal Medicine, LLC are governed by "The By-Laws of OSU Internal Medicine, LLC", "Physician Handbook for Clinical Activities" and "Code of Regulations of The Ohio State University Physicians, Inc." All of these documents are available on the SharePoint Web Site. <u>https://collaborate.osumc.edu/staffonly/internalmedicine/default.aspx</u>

OSU Internal Medicine, LLC, in addition to its responsibility for the clinical activities of the Department, serves as the principal source of income to carry out the academic missions of the Department. Therefore, a direct and constant relationship between the Department and the LLC is essential for the successful functioning of either entity. Throughout this document, where appropriate, the interrelations between these two entities as related to specific functions will be noted.

Organization charts for the Department of Internal Medicine and OSU Internal Medicine, LLC are included in the Appendix to this document.

OVERVIEW OF DEPARTMENTAL ADMINISTRATION & DECISION-MAKING

The Chair of the Department of Internal Medicine provides oversight and ultimate decision-making authority for all matters of concern within the Department. The Chair will appoint Vice Chairs as needed to oversee issues pertaining to clinical operations, education, research, clinical quality, finance, and faculty affairs. The number of vice chairs and their scope of oversight will be determined by the Chair. Appointments will be for a period of one year with reviews conducted annually. Vice Chairs may be reappointed or removed at the sole discretion of the Chair.

Senior leaders of the Department of Internal Medicine (Vice Chairs and Division Directors) are responsible for strategic planning for the entire department. While this is ultimately the responsibility of the Chair, the senior leadership team must contribute ideas, effort and support for innovation in the education, clinical and research missions of the department. Senior leadership will be involved in setting vision and strategies for the clinical mission, space, financial stability and resource generation.

The Department will be governed by the Division Director's Committee which will be composed of the Division Director of each Division within the Department as well as the Vice Chairmen of the Department. The Chair of the Department serves as the Chair of the Division Director's committee. Each Division Director will be appointed by and report to the Chair of the Department of Internal Medicine. Appointment will be for a period of one year with reviews conducted annually. The reappointment or removal of a Division Director is at the sole discretion of the Chairman.

Each Division will be governed by the Division Director who may choose to appoint Section Leaders within the Division as needed in order to carry out the clinical, research and education missions of the Division. Each Division will also have a Clinical Director who will be responsible for overseeing the clinical educational mission of the Division. The Clinical Directors will be nominated by the Division Director and appointed by the Chair. The Clinical Directors will report to the Vice Chair(s) overseeing clinical affairs of the Department.

The Department will have a Finance Committee with representation from each division within the department. Members of the Finance Committee will be selected by the faculty of each division. An additional two faculty are elected by the faculty at large. The role of the Finance Committee is to review the fiscal operations of the department and provide recommendations to the Chair.

For issues of the highest level of importance, as determined by the Chair and the Division Director's Committee, governance by vote of the Departmental Faculty will be required.

The Department of Internal Medicine maintains a parallel decision-making hierarchy for decisions involving academic and medical practice issues. The clinical practice activities are governed through OSU Internal Medicine, LLC (OSUIM, LLC), a limited liability corporation falling under the corporate governance of OSU Physicians, Inc (OSUP). OSUIM, LLC maintains a separate corporate identity than The Ohio State University Department of Internal Medicine, although many of the activities and functions of the two entities are integrated in order to optimally provide patient care and education of both medical students and graduate trainee opportunities in the academic environment of the Ohio State University.

DEPARTMENT ADMINISTRATION

I. <u>Chair</u>

The primary responsibilities of the Chair are set forth in Faculty Rule 3335-3-35 <u>http://trustees.osu.edu/rules3/ru3-35.html</u>. 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 <u>http://trustees.osu.edu/rules6/ru6index.html</u>, also requires the chair to prepare, in consultation with the faculty, a document setting forth policies and procedures pertinent to promotion and tenure (the Appointments, Promotion and Tenure document; see http://oaa.osu.edu/handbook/i_aptdoc.html.

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 written evaluation by students of the course and instructors, and periodic course review by the faculty.
- To oversee the evaluation process for faculty members as conducted annually by the Division Director in accordance with both University and department established criteria; to inform faculty members when they receive their annual review of their right to review their primary personnel file maintained by their department and to place in that file a response to any evaluation, comment, or other material contained in the file.
- To evaluate the Division Directors, Vice Chairs, and Associate Vice Chairs 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 <u>http://trustees.osu.edu/rules6/ru6index.html</u> 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, are most successful when all faculty participate in discussing and deciding matters of importance. The Chair will therefore consult with the faculty on all 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.

II. <u>Vice Chair for Education</u>

The Vice Chair for Education is appointed by the Chair of the Department of Internal Medicine and is responsible for insuring the quality and competitiveness of educational programs within the Department of Internal Medicine. This role requires participation in both educational program planning and clinical activities planning to ensure seamless integration between the educational and clinical missions of the department. Additionally, it is critical to maintain a national reputation in education to increase the visibility of The Ohio State University educational programs.

Responsibilities of this position fall into the following categories:

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- Oversight of student educational activities through supervision of the Internal Medicine Course Directors and Clerkship Directors.
- Direct responsibility (program development, evaluation and residency recruitment) for the Internal Medicine Preliminary and Categorical Residency Program; provides oversight and guidance of the Residency Program Director.
- Oversight of the Department's Fellowship training programs and their Directors to insure that the fellowship programs offer high quality educational experiences and adhere to regulatory guidelines on both education and work environment. The Vice Chair is supporting the Program Director in oversight of the Department's Fellowship training programs and their Directors.
- Educational oversight and development for faculty, including the design and implementation of programs intended to enhance and document teaching effectiveness, thus facilitating promotion/advancement of the Division of Internal Medicine (DOIM) faculty within the university.
- Liaison functions with the OSU Medical Center Administration and the OSU COM to insure that the educational programs meet external expectations and are appropriately supported within the institution at large.
- Liaison function with the Vice Chair(s) for clinical activity to insure that educational programs integrate with clinical activities; with the Vice Chair for Academic Affairs to optimize promotion and tenure opportunities for faculty by documenting teaching effectiveness; and with the Vice Chair for Research to provide opportunities for trainees to participate in scholarly activities.

III. Vice Chair for Academic Affairs

The Vice Chair for Academic Affairs is appointed by the Chair of the Department of Internal Medicine and assists the Department Chair in all issues of faculty Appointment, Promotion and Tenure, and issues of ethical academic and professional conduct. The Vice Chair for Academic Affairs counsels and assists faculty in their development. All recruitments to the Department of Internal Medicine are directly or indirectly under the supervision of the Vice Chair and this office seeks to expand the diversity of the faculty and academic programs. This office will also serve as a liaison with the Senior Associate Dean for Academic Affairs of the College of Medicine. Specific responsibilities include:

- Serve as Chair of the elected faculty Appointments, Promotion and Tenure Committee.
- Lead faculty discussions and deliberations regarding Appointments, Promotion, and Tenure issues.
- Report to the Department Chair the results of all faculty Appointments, Promotion and Tenure Decisions.
- Work in close collaboration with all divisions in the recruitment of new faculty to allow appropriate initial faculty appointment coincident with the formal offers to join the Department of Internal Medicine.
- Conduct regular individual faculty discussion of career progress and provide advice regarding the
 attainment of goals leading to appropriate promotion and career advancement. This may also
 involve review by the Appointment, Promotion, and Tenure Committee and should also include
 input by the appropriate Division Directors and the Department Chair.
- Discusses faculty concerns regarding Appointment, Promotion and Tenure decisions and aid in resolution of these concerns on behalf of the Department and in accordance with Departmental, College, and Office of Academic Affairs guidelines.
- Reviews and aids in the mediation of concerns regarding ethical academic and professional conduct.

 Assists the Department Chair as deemed necessary in any areas constituting the broad context of the academic mission of the Department.

IV. Vice Chair for Research

The Vice Chair for Research is appointed by the Chair of the Department of Internal Medicine and coordinates a comprehensive research program in the Department of Internal Medicine and facilitates the acquisition and maintenance of research grants and papers for the faculty. Specific responsibilities include:

- Facilitation of expanded growth of programmatic opportunities.
- Serving as an information source to match faculty with similar research interest.
- Expands and extends infrastructure for high-impact research endeavors by creating partnerships. with research centers, institutes, and other University and non University entities.
- Developing and maintaining program for Internal Medicine Investigators to facilitate successful grant applications.
- Developing seminars and workshops to stimulate interest in research.
- Provision of assistance to faculty, as requested, in the identification of funding sources.
- Determination of research space allocation in the Department and assist with the identification and negotiation for new space allocation.
- Serve as a liaison with the College and University Research Offices; serve on appropriate committees as Departmental representative.
- Integrate the Departmental Research programs with the College and University Programs.
- Develop a strategic plan to increase research engagement by residents, post-doctoral fellows, other trainees.
- Integrate research opportunities with the OSU CCTS.

V. <u>Vice Chair for Clinical Operations</u>

The Vice Chair for Clinical Affairs is appointed by the Chair of Department of Internal Medicine. At the direction of the Chair, the Vice Chair will be responsible for a broad range of clinical issues, both inpatient and outpatient, at all affiliated hospitals and outpatient locations. Provide support and direction for Associate Vice Chairs (listed below). Specific responsibilities include:

- Chair the Clinical Steering Committee.
- Coordinate long-range and strategic planning activities in regard to all clinical care areas.
- Establish operating policies and procedures for all clinical operations.
- Develop performance based clinical quality standards and oversee on-going monitoring of quality standards.
- Serve on Departmental and Hospital committees as directed by the Chair in order to represent the interests of the Department of Internal Medicine within the Health System and the College of Medicine.
- Assist the Chair in the development and implementation of clinical compliance standards for departmental faculty.

A. <u>Associate Vice Chair for Inpatient Medicine (3)</u>

The Associate Vice Chairs for Inpatient Medicine are appointed by the Chair of the Department of Internal Medicine and the Vice Chair for Clinical Operations. At the direction of the Chair and Vice Chair the Associate Vice Chairs for Inpatient Medicine will be responsible for a broad range of practice-related issues including, but not limited to, the following at each designated Hospital Location – University, Ross and James.

- Establishing operating policies and procedures for all inpatient operations.
- Providing general administrative direction to inpatient clinical operations.
- Co-Chairing the Clinical Steering Committee and serving on or chairing any other appropriate departmental committees related to the practice of inpatient medicine.
- Overseeing the establishment of inpatient productivity policies and standards for all physician faculty in the Department, using RVU or other objective data methods.
- Establishing systems and standards for accountability in relations with referring physicians (e.g., . response time in returning calls, discharge summaries, etc.)
- Setting departmental guidelines for a variety of inpatient practice issues, including hospital admission policies, ICU transfers, clinical coverage of inpatients, call schedules, inpatient consultation policies, etc.
- Providing administrative direction to all corporate and departmental staff responsible for inpatient . operation, including direct or indirect supervision of physician assistants, nurses employed by OSUP IM, LLC, PCRMs, nurse practitioners, etc.
- Coordinating long-range and strategic planning activities with regard to the inpatient care arena.
- Serving as a liaison to the hospital and to other departments for issues regarding the practice of inpatient medicine.
- Responsible for quality of Moonlighting Program in each Hospital.

B. Associate Vice Chair for Ambulatory Medicine (2)

The Associate Vice Chairs for Ambulatory Medicine are appointed by the Chair of the Department of Internal Medicine and the Vice Chair of Clinical Operations. At the direction of the Chair, and Vice Chair for Clinical Operations, the Associate Vice Chairs for Ambulatory Medicine will be responsible for a broad range of practice-related issues including, but not limited to, the following:

- Establishing operating policies and procedures for all outpatient operations.
- Providing general administrative direction to clinical operations.
- Co-Chairing the Clinical Steering Committee and serving on or chairing any other appropriate departmental committees related to the practice of ambulatory medicine.
- Overseeing the establishment of outpatient productivity policies and standards for all Physician Faculty in the Department, using RVU or other objective data methods.
- Establishing systems and standards for accountability in relations with referring physicians (e.g., response time in returning calls, follow-up letters).
- Setting departmental guidelines for a variety of office practice issues, including staff coverage, hours of operation, telephone procedures, etc.
- Providing administrative direction to all corporate and departmental staff responsible for outpatient operation, including direct or indirect supervision of nursing, ancillary and management staff.
- Coordinating long-range and strategic planning activities with regard to the outpatient care arena.
- Developing performance based clinical quality standards in ambulatory medicine and overseeing on-going monitoring of quality standards.

VI. <u>Vice Chair of Quality</u>

The Vice Chair of Quality is appointed by the Chair of the Department of Internal Medicine. At the direction of the Chair, Department of Internal Medicine, the Associate Vice Chair for Quality will be responsible for the oversight of development, implementation and maintenance of the department's quality program, but not limited to, the following:

- Serve as director of quality for all personnel within the department.
- Responsible for the oversight of development, implementation and maintenance of the department's quality program. This program will be closely aligned with quality and patient safety efforts ongoing within the hospital based programs, such as OSU East, The James Cancer Hospital, The Ross Heart Hospital, The University Hospital and all clinical areas that utilize Department of Medicine personnel. Responsibilities include:
 - Processes for quality involving department members in the inpatient and outpatient care arenas
 - Research and education
 - o Business and administrative areas
 - Further, it is expected that members of the department who have involvement in quality initiatives

throughout the health system will ensure their endeavors are recognized through the department's Vice Chair for quality.

Provide representation on all quality committees in non-departmental areas that utilize department

personnel.

- Work closely with hospital counterparts to ensure that any sentinel events involving DOM personnel will be reported immediately to the department's quality committee. This same exchange of information will be expected for all event reports and risk management cases.
- Conduct any root cause analyses that involve department personnel will be reported to the Vice Chair for Quality to ensure proper redress is made.
- Recommends corrective action of Department of Medicine personnel, as appropriate. Will
 maintain appropriate oversight of the process in collaboration with the hospital quality teams.

VII. <u>Chief of Internal Medicine at University Hospitals East</u>

The Chief of Internal Medicine Service at University Hospital East (UHE) is appointed by the Medical Director of the Hospital under advisement by the Chair of the OSU Department of Internal Medicine. His/her responsibilities include:

- Assist the Medical Director of UHE in oversight of all Internal Medicine physicians (both University and private) with respect to:
 - o Clinical quality
 - o Citizenship
 - Credentialing
 - o Clinical service and patient assignments
 - Strategic planning for the hospital

- Serve as a liaison of the clinical, educational, and research missions of the OSU Department of Medicine to UHE.
- Serve as the Department's representative to the UHE Medical Executive Committee.
- Serve as the Department's representative to the UHE Physician Quality and Review Subcommittee.
- Serve as the Department's representative to the UHE Quality Management Committee.
- Assist the Vice Chair for Education in the oversight of Internal Medicine residents, interns, students, and fellows who are assigned to UHE for clinical training.
- Chair the UHE Department of Internal Medicine quarterly meetings.

VIII. Division Directors

The Division Director is responsible for developing a division with balanced missions for education, research and clinical activities that are integrated and supportive of the goals and objectives of the department. The Division Director is appointed by the Chair of the Department and serves at the pleasure of the Chair. Under the guidance of the Director, the Division faculty are expected to participate vigorously and regularly in all departmental academic and patient care programs. The responsibilities of the Division Director are broad and diverse and include, but are not limited to the following:

- General administrative responsibility for division, subject to the approval of the department Chair, and to conduct the business of the division efficiently. This broad responsibility includes the effective and sound administration of divisional finances and supervision of faculty and staff.
- An active participant in faculty development, providing counsel and mentoring and protecting faculty time from excessive administrative or clinical responsibilities.
- Approve and finalize all faculty work assignments and distributions of professional effort. This
 includes clinical service, teaching assignments, administrative responsibilities, and distribution of
 scholarly and research effort. The Division Director's assignments are final. Faculty members
 who disagree with these assignments should first discuss with the Division Director and may then
 consult with the Vice Chair for Academic Affairs who may initiate further mediation at the
 Divisional or Departmental level.
- Develops a program of state-of-the-art clinical care, ensures reasonably prompt access to division's in-patient and ambulatory care services, and takes appropriate action to correct any deficiencies.
- Provides leadership and fosters an environment that supports research such that a reasonable number of grants are submitted to local, state and national funding agencies, seeks a progression in the research program towards a greater percentage of peer reviewed research.
- Participates in and supports departmental educational programs and initiatives, develops a fellowship training program that meets standards established by the ABIM for subspecialty Boards
- Is an active leader in departmental activities, including support and attendance at Medical Grand Rounds, Faculty Meetings, Division Director Meetings, Appointment, Promotion and Tenure meetings and other major departmental activities.
- Is active in national organizations related to their specialty, publishes in national journals and books on a regular bases, encourages division faculty to a high level of scholarly productivity.
- Evaluates faculty members annually in accordance with both University and department established criteria; informs 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.

COMMITTEES

Much of the development and implementation of the department's policies and programs is carried out by standing and ad hoc committees. The Chair is an ex officio member of all department committees and may vote as a member on all committees except the Promotion and Tenure Committee. Standing committees for the department include the following:

I. <u>Appointment, Promotion, and Tenure Committee</u>

Monthly, 3rd Friday, 2pm

<u>Members</u>: The committee consists of 12 regular faculty members who are elected by the regular Departmental faculty.

<u>Charge</u>: Oversee all aspects of the appointment, promotion and tenure process for Departmental faculty as well as the Department's adherence to College of Medicine policies. See the Department of Internal Medicine Appointment, Promotion, and Tenure Document for specifics of committee responsibilities and activities (S/Human Resources/Faculty/P&T).

II. Departmental Clinical Quality Steering Committee (DOIM CQSC)

1st & 3rd Monday, 5:00 pm

<u>Members:</u> The committee consists of 21 members comprising Division Clinical Directors, Chief Residents, the Vice-Chair for Clinical Operations (co-chair), the Vice Chair for Quality (co-chair), COO, Associate Vice Chair(inpatient and outpatient).

<u>Charge:</u> Responsible for the delivery of quality care by the Department of Medicine. The committee will:

- Respond to queries/suggestions/requests of other quality bodies.
- Provide recommendations to the Chair about the requirements of the clinical department.
- Prioritize clinical needs for Chair and Department Finance Committee.
- Formulate department policies for both inpatient and outpatient clinical activities.
- Oversight of implementation Departmental clinical policy.
- Oversight of Divisional clinical policies/practices for adherence to departmental policy.
- Oversight of departmental clinical resource utilization.
- Mediate disputes between medicine services.
- Establish and monitor quality metrics concerning the delivery of quality patient care, patient/family satisfaction and referring physician satisfaction.
- Interact with Health System Quality Programs and Initiatives under direction of the Vice Chair of Quality.
- Department peer review.
- Department risk management.
- Clinical strategic planning.
- Respond to initiatives as directed by the Vice Chair for Quality.

III. <u>Core Liaison Committee</u>

Bimonthly, 4th Friday, 4:00 pm

<u>Members:</u> The committee consists of 13 regular faculty members selected by Division Directors and approved by the Vice Chair for Education.

<u>Charge:</u> Coordinate residency educational activities for each division.

IV. Distinguished Physician Award Screening Committee

Annually in March

<u>Members</u>: The committee consists of 4 members comprising Current & former Chief Residents, the Chairman of the Department, and Dr. Metz for whom the award is named. <u>Charge</u>: Review faculty nominations for this award and select the annual recipient.

V. <u>Division Directors Committee</u>

Monthly, Last Tuesday, 5:00 pm

<u>Members</u>: The committee consists of 20 members and is constituted by Current Division Directors and Vice Chairs.

<u>Charge</u>: Oversee general functioning of the Department; represent the interests and concerns of their division's faculty.

VI. Faculty Council, Representatives (COM)

Monthly, 4th Wednesday, 7:30 am

<u>Members</u>: There are 20 representatives to the Faculty Council who are elected by regular Departmental faculty.

<u>Charge</u>: Represent Departmental faculty on the College of Medicine Faculty Council; report salient issues at next Departmental Faculty Meeting.

VII. <u>Fellowship Directors Meeting</u>

Bimonthly, 1st Monday, 11:00 am

<u>Members</u>: The committee consists of 31 members comprising all Fellowship Directors; the Vice Chair for Education, and Internal Medicine Program Directors.

<u>Charge</u>: Oversee fellowship education, insure compliance with ACGME regulations for fellowship education; provide faculty development opportunities for faculty supervising fellows.

VIII. <u>Finance Committee</u>

Monthly, 1st Tuesday, 5:00 pm

<u>Members</u>: The committee consists of 14 regular faculty members appointed by each Division Director plus two elected regular faculty members (total of 16 committee members). <u>Charge</u>: Review financial activity and make recommendations to the Chair regarding financial issues relating to the Department.

IX. Housestaff Education Committee

Monthly, 3rd Wednesday, 5:00 pm

<u>Members</u>: The committee consists of 31 regular faculty members and house staff members with faculty selected by Division Directors and Internal Medicine Program Directors; housestaff are elected by their class.

<u>Charge</u>: Oversee all aspects of housestaff training as well as the Department's adherence to ACGME guidelines.

X. <u>Housestaff Evaluation Committee</u>

Monthly, 2nd Wednesday, 4:00 pm

<u>Members</u>: The committee consists of 17 members of the regular faculty who are selected by the Training Program Director and the Department Chair.

<u>Charge</u>: Review housestaff performance and recommend any needed corrective action to Training Program Director.

XI. <u>Intern Selection Committee</u>

Annually in February

<u>Members</u>: The committee consists of 22 regular faculty members who are selected by the Training Program Director and the Department Chair.

<u>Charge</u>: Review all data collected on interviewed candidates, individually rate each candidate's qualifications, and participate in the department's Rank Order meeting.

XII. <u>Student Education Committee (alternates with Student Evaluation Committee)</u> Every other month, 4th Thursday, 5:00 pm

<u>Members</u>: The committee consists of 25 regular faculty members who are selected by Division Director, and the Clerkship Director.

<u>Charge</u>: Oversee all aspects of medical student training in Departmental rotations as well as the Department's adherence to College of Medicine guidelines.

XIII. <u>Student Evaluation Committee (alternates with Student Education Committee)</u> Every other month, 4th Thursday, 5:00 pm

<u>Members</u>: The committee consists of 24 regular faculty members who are selected by Student Education Committee.

<u>Charge</u>: Review Med3 and Med4 student performance on Departmental rotations, assign a grade and create a grade card for the College of Medicine.

FACULTY MEETINGS

The Chair will provide to the faculty a schedule of department faculty meetings at the beginning of each academic term. The schedule will provide for at least one meeting per quarter. Divisions are expected to hold faculty meetings monthly.

For both department and divisional faculty meetings a completed agenda will be delivered to faculty by email before a scheduled meeting. Reasonable efforts will be made to distribute the agenda by e-mail at least three business days before the meeting. Minutes of faculty meetings will be distributed to faculty by e-mail—within seven days of the meeting if possible. These minutes may be amended at the next faculty meeting by a simple majority vote of the faculty who were present at the meeting covered by the minutes.

A meeting of the department/division faculty will also be scheduled on written request of 25% of the department/division regular faculty. The Chair/Division Director will make reasonable efforts to have the meeting take place within one week of receipt of the request.

Special policies pertain to voting on personnel matters are set forth in the department's Appointments, Promotion and Tenure document.

For purposes of discussing department/division business other than personnel matters, and for making decisions where consensus is possible and is a reasonable basis for action, a quorum will be defined as a simple majority (50% plus one member) of all faculty eligible to vote.

If a quorum is not present at a faculty meeting, and the matter is of special importance, then a formal vote conducted by written ballot will be taken. For purposes of a formal vote, a matter will be considered decided when a particular position is supported by at least 50% plus one member of all faculty eligible to

vote. Balloting will be conducted by mail or e-mail to assure maximum participation in voting. In such cases, all votes must be received within 7 business days after ballots have been issued.

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

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

COURSE OFFERINGS AND TEACHING SCHEDULES

The Vice Chair for Education will annually develop a schedule of course offerings and teaching schedules in consultation with the faculty, both collectively and individually. Department of Internal Medicine faculty will participate in the relevant educational activities arranged by the College of Medicine and the Department of Internal Medicine using the schedule put forth by the College of Medicine and the Department of Internal Medicine.

Graduate Courses offered through the Department of Internal Medicine will be offered at a time and frequency that meets the needs of the graduate student.

Oversight for the quality of the DOIM course offerings will be provided by the Vice Chair for Education.

DEPARTMENT FACULTY TEACHING RESPONSIBILITIES

All faculty with the Department of Internal Medicine are expected to participate in educational activities directed at medical students, residents, fellows and graduate students. Faculty with Department of Internal Medicine teaching assignments are expected to meet their responsibilities fully. This includes, but is not limited to:

- Review of and adherence to the curriculum of the course the faculty is assigned to teach.
- Compliance with start and stop times of classes and clinical rounds.
- Understanding and compliance with residency and student work load and work hour restrictions.
- Monitoring students and residents for fatigue, stress and impairment and notifying appropriate. educational leaders with any concerns about learners.
- Using direct observations of learners with patients to assess clinical skills.
- Completing accurate and useful evaluations of learners in a timely fashion.
- Discussing learner evaluations with them in a face to face setting at least once during the duration of the teaching encounter.
- Maintaining ready availability to learners through pager or other means of urgent communication during clinical teaching assignments.
- Mentoring students and providing career enhancements.
- Counseling and providing opportunities for growth and improvement.

Faculty with educational leadership positions (clerkship directors, program directors and associate directors, fellowship directors and core liaisons) will have expanded duties based on their position. They are expected to maintain an active teaching role, adhering to the responsibilities above.

ALLOCATION OF DEPARTMENT RESOURCES

Financial decisions will be made according to the governance of the OSU Department of Internal Medicine as described previously. All financial decisions will be made with the principle of optimally meeting the clinical, educational, research, and administrative missions of the Department of Internal Medicine.

Each year, all Divisions will prepare and submit an annual budget to the Finance Committee. The Finance Committee is responsible for reviewing and approving all budgets that in turn will require approval of the Chair. The Chair of the Department of Internal Medicine will have ultimate decision-making authority in all Departmental budgetary issues.

Financial resources for the Department of Internal Medicine can come from a variety of sources including clinical practice income, University and hospital allocations, hospital support, medical directorships, endowed positions, research grants, etc. Unless otherwise directed to specific individuals, University and hospital allocations will be distributed based on a methodology that has been reviewed and endorsed by the Finance Committee and the Division Directors Committee. The final distribution is then forwarded to the Chair for approval. The ultimate responsibility and accountability for the distribution of University and hospital allocations resides with the Chair of the Department according to the policies established within the College of Medicine. Other sources of income will be distributed based on the policies and compensation plans of each Division, the Department of Internal Medicine, and/or OSUIM, LLC.

RESEARCH SPACE ASSIGNMENTS

Department of Internal Medicine faculty may have research space assigned within the department or from a center or institute. When research space is housed within a center or institute, the policies and procedures for the center or institute will apply to Department of Internal Medicine faculty. Research space assigned by the department is governed by the Medical Center Space Policies and Space Allocations Guidelines. According to this policy, research space is assigned with consideration given to the total grant awards per square foot of research space, total indirect cost recovery per square foot, and the quality and efficiency of the space provided. The initial size and subsequent growth (or retrenchment) of laboratory space will depend upon the faculty member's ability to secure funding.

LEAVES & ABSENCES

The University's policies with respect to leaves and absences are set forth in the Office of Academic Affairs Policies and Procedures Handbook <u>http://oaa.osu.edu/handbook/tc.html</u> and Office of Human Resources Policies and Procedures website <u>http://hr.osu.edu/policy/policyhome.htm</u>. The information provided below supplements these policies. *Applications for any of the following leaves or absences will be initiated by contacting the Vice Chair for Academic Affairs*.

I. <u>Discretionary Absence</u>

Faculty are expected to complete an Application for Leave form well in advance of a planned absence (e.g. as for attendance at a professional meeting or to engage in consulting) to provide time for its consideration and approval and time to assure that instructional and other commitments are covered. Discretionary absence from duty is not a right and the Chair retains the authority to disapprove a proposed absence when it will interfere with instructional or other comparable commitments. Such an occurrence is most likely when the number of absences in a particular quarter is substantial. Faculty Rules require that the Office of Academic Affairs approve any discretionary absence of ten or more business days.

II. <u>Absence for Medical Reasons</u>

When absences for medical reasons are anticipated, faculty members are expected to complete an Application for Leave form as early as possible. When such absences are unexpected, the faculty member, or someone speaking for the faculty member, should let the Chair know promptly so that instructional and other commitments can be managed. Absences for medical reasons may be designated as Family and Medical Leave (FML) and counted towards the 12 weeks of FML time limit if applicable. Faculty members are always expected to use sick leave for any absence covered by sick leave (personal illness, illness of family members, medical appointments). See OHR Policy 6.27 and 6.05 for details: http://hr.osu.edu/policy/policy 6.05.pdf.

III. <u>Unpaid Leaves of Absence</u>

A faculty member may request an unpaid leave of absence for personal or professional reasons. Absences for personal reasons may be designated as FML and counted towards both the 12 weeks of FML time limit and unpaid leave if applicable.

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

http://oaa.osu.edu/handbook/ix_loa.html http://oaa.osu.edu/handbook/ix_loaentrepren.html

IV. Special Research Assignments

Special Research Assignments (SRAs) are normally one quarter in length and are designed to provide a faculty member time away from classroom teaching and some other responsibilities in order to concentrate effort on research. SRAs are usually, but not necessarily, provided to faculty to develop a new research skill, initiate a new project, or complete an ongoing project. SRAs of shorter duration may be

provided for such purposes as facilitating travel related to research that is less than a quarter in duration but more than a week or two provided classroom teaching is not disrupted.

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

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

For details see:

http://oaa.osu.edu/handbook/ix_sra.html

V. <u>Faculty Professional Leave</u>

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

Faculty members who desire an FPL should discuss the matter with the department Chair during their annual evaluation or as soon thereafter as possible. The department Chair will indicate whether submission of a full proposal articulating the purpose and nature of the FPL is appropriate. Because FPL proposals must be approved by the dean, Office of Academic Affairs, and Board of Trustees before they may be implemented, faculty should submit FPL proposals for a particular year no later than the end of Autumn Quarter of the preceding year, except when the development of an unexpected opportunity precludes such timing.

Requests for FPL will undergo peer review as required by University rules. The peer review will be led by the Vice Chair for Academic Affairs and 4 faculty selected based on the relevance of their expertise to the activities proposed for the leave. Criteria used to evaluate the request for FPL include: 1. the extent to which the faculty member will develop new expertise or skills; 2. the degree to which this new expertise will contribute to the advancement of the faculty member's scholarly career; 3. the contribution of newly acquired expertise to the advancement of the mission of the faculty member's department, college, and to the University. The review committee will vote for or against the FPL after review of the request. A simple majority approval of the five member review committee is required to recommend the FPL to the Department Chair. 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.

For details see:

http://oaa.osu.edu/assets/files/documents/facultyprofessionalleave.pdf

VI. <u>Absences for University Business</u>

The Department of Internal Medicine recognizes that support of the tripartite mission of the institution may require faculty and staff to participate in outreach activities. The goal of these activities should be to enhance operations, expand the base of patient referrals, or increase the research and educational reputation of the institution. All activities must be compatible with the strategic priorities of the institution. When these activities arise and require absences from the institution, faculty and staff may, with prior approval, use the designation of University Business for their leave rather than use vacation leave.

University Business leave may not interfere with the day to day functioning of the department and will be subject to review to insure that the number of days away from the institution is not excessive. Arrangements for coverage of administrative and clinical activities must be made and communicated to relevant constituencies.

Travel and leaves mandated by the university or medical center to fulfill assigned roles are designated as university business. Such travel may include but is not limited to site visits, consultation visits, project demonstrations and retreats. An Application for Leave form must be completed for absences for University business.

VII. Other Categories of University Business

- **Regional and National Visiting Professorships**: Travel to an institution within the continental United States for the purpose of academic exchange may be classified as university business if there is reason to believe that such travel will improve the reputation of the department or institution with valued constituencies (i.e. future students, graduate medical education trainees, faculty or academic leaders). In general, visiting professorships should be limited to three days except with prior approval of the department Chair.
- International Visiting Professorships: International visiting professorships will be considered university business if the OSU Office of Global Health has identified a strategic rationale for a relationship between the inviting institution and Ohio State University Medical Center (OSUMC). This rationale may include the desire to establish an educational exchange program; research collaboration or clinical collaboration. International visiting professorships thus require prior authorization from the Office of Global Health Initiatives to be considered university business.

- Invited presentations at Regional, National or International Meetings: The department recognizes the value in dissemination of knowledge. Thus, faculty who are invited to present posters, abstracts, workshops, or lectures at regional, national or international meetings of specialty societies may use the designation of university business for leave required to attend such meetings.
- **NIH Related Activities**: Participation in study sections and other NIH associated business enhances the national reputation of faculty and thus the institution. Leave to attend meetings for these activities are considered university business.
- **Collaborative Research Meetings**: Meetings to establish or maintain multicenter research collaborations can be considered university business.
- Elected Positions on National Specialty Councils: With prior approval, faculty members are encouraged to seek positions of national prominence and impact in their specialty. If elected, they are allowed to use the university business designation for their leave.
- Appointments to National Boards or Regulatory Agencies: Service to national boards enhances the reputation of the institution. Such service will qualify for the designation of university business.
- **Maintenance of Certification:** The institution requires that all physicians maintain certification in their primary area of practice. Thus, leaves for secure examinations needed for maintenance of certification can be classified as university business.
- **CME:** The department recognizes the need for continuing medical education for its faculty. All faculty are entitled to five days per year of leave classified as university business. This leave must be used annually and will not accumulate from year to year if unused.
- **Depositions and Expert Witness Activities**: Faculty who are required to appear in court for cases directly related to their work with the university or medical center or in support of university or medical center cases are allowed to use the university business designation for their leave.

The following activities do not classify as university business; approved vacation leave must be used instead.

- CME in excess of five days per year.
- International Visiting professorships that do not receive prior authorization.
- Preparation for any of the activities authorized as university business.
- Expert Witness work for cases not related to the OSUMC activities.
- Paid consultancies for for-profit organizations.

SUPPLEMENTAL COMPENSATION & PAID EXTERNAL CONSULTING ACTIVITY

The University's policies with respect to supplemental compensation and external consulting are set forth in the Office of Academic Affairs Policies and Procedures Handbook:

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http://oaa.osu.edu/handbook/iii_facextracomp.html and http://oaa.osu.edu/handbook/paidexternal.html.

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

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

FINANCIAL CONFLICTS OF INTEREST

The University's policy with respect to financial conflicts of interest is set forth in the Office of Academic Affairs Policies and Procedures Handbook: http://oaa.osu.edu/handbook/coipolicy.html.

A conflict of interest exists if financial interests or other opportunities for tangible personal benefit may exert a substantial and improper influence upon a faculty member or administrator's professional judgment in exercising any University duty or responsibility, including designing, conducting or reporting research.

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

CONFLICT OF COMMITMENT

The University's policy with respect to conflict of commitment is set forth in the Office of Academic Affairs Policies and Procedures Handbook: http://oaa.osu.edu/handbook/conflictofcommitment.html

A conflict of commitment exists when external or other activities are so substantial or demanding as to interfere with the individual's teaching, research, and scholarship or service responsibilities to the University or its students. Faculty should disclose and discuss external commitments with the Chair. If an activity cannot be managed by the faculty member and his/her Chair 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.

GRIEVANCE PROCEDURES

Faculty members are encouraged to seek informal resolution to concerns within their division. If this is not possible or does not lead to satisfactory resolution, faculty members 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. The Vice Chair for Academic Affairs will assist the Department Chair in the review and examination of grievances and will oversee resolution of the grievance processes outlined below.

I. <u>Salary Grievances</u>

A faculty member who believes that his or her salary is inappropriately low should discuss the matter with the Chair. The faculty 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 http://oaa.osu.edu/handbook/xii_salaryprocess.html.

II. <u>Faculty Misconduct</u>

Faculty misconduct/incompetence: Complaints alleging faculty misconduct or incompetence should follow the procedures set forth in Faculty Rule 3335-5-04 http://trustees.osu.edu/rules5/ru5-04.html.

III. <u>Faculty Promotion and Tenure Appeals</u>

Promotion and tenure appeals procedures are set forth in Faculty Rule 3335-5-05 <u>http://trustees.osu.edu/rules5/ru5-05.html</u>.

IV. <u>Sexual Harassment</u>

The University's policy and procedures related to sexual harassment are set forth in OHR Policy 1.15 http://hr.osu.edu/policy/policy115.pdf .

V. <u>Student Complaints</u>

Normally student complaints 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. Students who do feel that they cannot approach the individual faculty member or who are dissatisfied with the results of their discussion should direct their concerns to the appropriate course or clerkship director. The course or clerkship director will investigate the concerns

under the confidentiality guidelines as established under Family Educational Rights and Privacy Act (FERPA).

http://oaa.osu.edu/reports/FERPA.html

For clinical courses in the Department of Internal Medicine, grades are assigned by the student evaluation committee and not by individual faculty members. Thus, all grade appeals should be directed first to the specific course director or clerkship director and not the supervising faculty. If the response is not satisfactory to the student, an appeal is made to the Chair. Further level of appeals will be according to College of Medicine policy.

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 <u>http://oaa.osu.edu/coam/home.html</u> and <u>http://senate.osu.edu/COAMDuties.pdf</u>.

The Code of Student Conduct is Faculty Rule 3335-23 <u>http://trustees.osu.edu/Rules 23/index.htm</u>

All medical students will follow the honor code for medical students found at the following: http://medicine.osu.edu/students/life/resources/honor_code/pages/index.aspx