

AY22-33-Executive Committee

Date-Submitted: 3/13/2023

Title-of-Issue: EVHSC@ODU - Appointment, Promotion, and Tenure Policies for the School of Medicine and the School of Health Professions

Description: Ten EVMS policies will hold exclusive jurisdiction over faculty in the School of Medicine and the School of Health Professions until such time as these policies are revised for full integration with the ODU Faculty Handbook.

Rationale: To provide continuity of policy and procedure for incoming EVMS faculty during the creation of the Eastern Virginia Health Sciences Center at Old Dominion University

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Date: 3/13/2023

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The proposed policy language, including the ten policies in question (Pages 2-59):

## Eastern Virginia Health Sciences Center at Old Dominion University

### Appointment, Promotion, and Tenure Policies for the School of Medicine and the School of Health Professions

**NUMBER:**                xxxx

**APPROVED:**           [date]

A.     **PURPOSE**

This chapter is inserted into the ODU Faculty Handbook in order to ensure continuity in policy and procedure following the creation of the EVHSC@ODU.

B.     **AUTHORITY** [needed? the following is from the Code of Ethics]

Code of Virginia Section 23.1-1301, as amended

[<http://law.lis.virginia.gov/vacode/title23.1/chapter13/section23.1-1301/>], grants authority to the Board of Visitors to make rules and policies concerning the institution. Section 6.01(a)(6) of the Board of Visitors Bylaws [<http://www.odu.edu/content/odu/about/bov/bov-manual/bylaws.html>] grants authority to the President to implement the policies and procedures of the Board relating to University operations.

C.     **DEFINITIONS** [needed?]

D.     **SCOPE**

The **ten** policies in this chapter hold jurisdiction exclusively over faculty in the School of Medicine, the School of Health Professions, and the School of Public Health who were members of Eastern Virginia Medical School prior to January 1, 2024. (Hereafter referred to as “legacy EVMS” faculty.)

Faculty in the College of Health Sciences, the School of Nursing, and the School of Public health who were members of Old Dominion University prior to January 1, 2024 (“legacy ODU”) remain under the rest of the Faculty Handbook and report to Academic Affairs for purposes of appointment, promotion, tenure, annual evaluation, and all other policies.

Personnel hired after January 1, 2024 into the College of Health Sciences, the School of Nursing, and the School of Public Health also fall under the jurisdiction of the rest of the Faculty Handbook.

Personnel hired after January 1, 2024 into the School of Medicine and the School of Health Professions are considered as legacy EVMS faculty and are governed by the **ten** policies of this chapter.

Except for the **ten** policies of this chapter, the rest of the ODU Faculty Handbook holds

jurisdiction over all personnel of the EVHSC@ODU, including the School of Medicine and the School of Health Professions.

E. **AMENDMENT**

Proposals for amendment to these policies shall be submitted to the Old Dominion University Faculty Senate. The Faculty Assembly of the Eastern Virginia School of Medicine and the EVMS School of Health Professions shall serve as the deliberative body. Upon approval of the Faculty Assembly, the proposed amendment shall be sent to \_\_\_\_\_. This provision shall remain in place until such time as the individual policies here are revised for full integration into the Old Dominion University Faculty Handbook.

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11. Policy on Institutes & Centers [unclear what the IMO wants to do with this policy, which is not part of the EVMS FHB]

# POLICIES AND PROCEDURES RELATING TO FACULTY APPOINTMENT, PROMOTION AND TENURE

## I. INTRODUCTION AND POLICY

It is the Policy of EVMS that written standards, criteria and procedures for the review and recommendation of individuals for faculty appointment, promotion, and tenure be established, maintained and disseminated to all faculty. An effective academic medical center requires a diverse faculty. Accordingly, the definitions and standards contained within this document pertain to the initial appointment, subsequent promotion, and tenure (when applicable) of all faculty at Eastern Virginia Medical School (EVMS) engaged in the diverse areas of teaching, clinical care, research/discovery and administration/service. In order to affirm the multiple roles that EVMS faculty contribute to the school's mission and vision and for our community, all faculty pursue one pathway toward appointment and promotion.

## II. FACULTY STATUS

**Full-Time Faculty:** Full-time faculty are faculty members who have education, research and/or patient care responsibilities on a full-time basis, which is an established schedule of at least 40 hours per week, annually, or those faculty members who have been designated by the EVMS Board of Visitors as full-time. Full-time faculty are appointed as one of the following:

*Full-Time Salaried Faculty:* Clinical, research, administrative and other faculty who are paid by EVMS on a salaried basis and who have employment contracts with EVMS.

*Full-Time Non-Salaried Faculty:* Clinical, administrative or other faculty who are not paid by EVMS, but who have appointments in mission critical departments and who are designated by the EVMS Board of Visitors as Full-Time Non-Salaried Faculty.

*Full-Time Non-Salaried-VA Faculty:* Clinical faculty employed by the Veterans Administration and who are designated by the EVMS Board of Visitors as Full-Time Non-Salaried-VA Faculty.

**Part-Time Faculty:** Part-time faculty are faculty members who have education, research and/or patient care responsibilities on a part-time basis, which is less than 40 hours per week, annually. Part-time faculty are appointed as one of the following:

*Part-Time Salaried Faculty:* Clinical, research administrative or other faculty who are paid by EVMS on a salaried, hourly, or per service basis and who have employment contracts with EVMS.

*Non-Promotion Eligible Faculty:* Individuals primarily employed by EVMS in a non-academic role who have been invited to participate in the institution's research, teaching, or clinical care missions, to pursue collaborative efforts, or to provide other services to EVMS, on an intermittent, irregular, or seasonal basis. They may, for example, teach one or more courses for one semester, give a series of lectures within a course developed by an EVMS full-time faculty member, supervise students or prepare them for various professional roles, teach specific clinical skills or graduate seminars, or oversee graduate research conducted by EVMS students (they may not be principal advisors on masters or doctoral theses, but may serve on thesis committees).

**Community Faculty:** Community faculty are unpaid faculty members who volunteer their time, efforts, and expertise to the EVMS mission. Community faculty are expected to commit at least 50 hours to EVMS academic activities per year. This time commitment can be met by actively participating in grand rounds or other department conferences, serving on committees, delivering didactic lectures, providing ward

attending coverage, precepting students or residents, participating in other teaching activities at EVMS, or by participating in other activities agreed to by the faculty member and the Department Chair of the School of Medicine or the Vice President and Dean of the School of Health Professions (VPDSHP).

**Adjunct Faculty:** Adjunct faculty are unpaid or paid faculty members who are employed by another regionally accredited educational institution and who have been approved to participate in EVMS academic or research programs.

**Emeritus Faculty:** Emeritus or emerita is an honorary faculty appointment, awarded upon retirement, for distinguished or exceptional service and outstanding dedication to EVMS as further outlined in the Emeritus Faculty Appointment Policy. This title would not be applied to a faculty member moving to another academic position. To be considered for emeritus title, there should be evidence of service and accomplishments as an EVMS faculty member over a considerable period of time. While the faculty candidate would not be expected to teach or otherwise be involved in EVMS activities, teaching may be done with this title.

**Visiting Faculty:** Faculty members visiting EVMS for a defined duration usually up to twelve months, subject to the approval of the EVMS President/ Provost. Visiting faculty will be granted an EVMS visiting title of at a rank that is equal to that of their home institution to include Visiting Professor, Visiting Associate Professor, Visiting Assistant Professor or Visiting Instructor based on qualifications. The “visiting” prefix would be associated with a faculty member who is paid directly by her/his home institution, by another external agency such as a foreign government or by private funds. Appointment as visiting faculty does not constitute an offer of employment and in no way indicates permanence, tenure, or otherwise guarantees that the candidate will obtain any other faculty status at EVMS. Visiting faculty cannot become EVMS employed faculty except through a search in accordance with EVMS faculty hiring procedures. The visiting faculty member is expected to return to his or her home institution upon completion of the appointment.

**Honorary Faculty:** This is a special appointment made exclusively by the President, Provost and Dean of the School of Medicine. There is no formal recommendation by a Department Chair or VPDSHP and no review by the Appointment and Promotion Committee. While an individual can be recommended to the President, Provost and Dean of the School of Medicine by anyone in the institution, it is solely the President, Provost and Dean of the School of Medicine who determines if an individual’s contributions to EVMS warrant an honorary title. The honorary appointment recognizes contributions to EVMS separate from teaching, research or clinical care including advice and counsel, policy assistance. There is no requirement for specific academic background (i.e., doctoral degree, medical or research background) of the honorary faculty. There is no progression in title. The honorary faculty is not a regular faculty member of the department or school and may not take part in regular faculty activities.

### **III. FACULTY APPOINTMENT AND PROMOTION DEFINITIONS**

**Academic Activities:** Those activities performed for EVMS SOM and SHP that fulfill one or more of the institution’s core mission areas.

**Domain:** Describes the four areas of focus (teaching, clinical care, research/discovery and administration/service) that distinguish a faculty member’s activities for evaluation in the appointment and promotion process. Use of parallel criteria for evaluation of excellence across all four areas of activity will assist in achieving parity across the four domains. These include: a) Clear goals b) Adequate preparation c) Appropriate methods d) Significant results e) Effective presentation.

**Teaching Domain:** includes categories of educational activities such as instruction, mentoring and advising, learner assessment and curriculum development and educational scholarship.

**Clinical Care Domain:** includes categories of activities that document the quantity and quality of clinical activity and where feasible, the impact on a target patient population or community.

**Research/Discovery Domain:** includes categories of activities such as publications, presentations, grants and funding, patents, clinical investigations and/or clinical trials, development of original clinical programs and/or techniques and all other forms of scholarly approach to education and patient care.

**Administration/Service Domain:** includes both leadership and active participation in the various administrative committees and organizations and other categories through which faculty members advance the overall mission of their department, and/or provide personal service to the institution, their profession and/or the community as a whole.

**Track:** Two faculty tracks exist; tenure and non-tenure. Appointment and promotion on the tenure track is available to full-time salaried faculty at the rank of Associate Professor and Professor. Part-time, non-salaried and community faculty are appointed exclusively to the non-tenure track.

The consideration of a candidate for tenure versus non-tenure track is a major distinction in the evaluation of individuals for appointment and promotion, and it is only available to full-time salaried faculty.

1. **Tenure:** Although there are no absolute criteria, tenure is generally awarded to full-time salaried faculty based on accomplishments beyond achieving academic recognition, and should reflect exceptional, continuous and substantial contributions to EVMS. Faculty at the rank of Associate Professor or Professor who demonstrate excellence in at least two of the foregoing four areas are eligible for tenure subject to length of service requirements. (See Tenure section)

**Length of Requirements for tenure appointments:** 1) appointment at the rank of Associate Professor (and faculty promoted to the rank of Associate Professor) may be considered for tenure after three years of service as Associate Professor at EVMS 2) appointment at the rank of Professor may be considered for tenure after two years of service as Professor at EVMS.

2. **Non-tenure:** Applies to all faculty who are expected to function effectively in teaching, clinical care, research/discovery and administration/service with a lesser commitment to scholarly activity. The track ranks are Instructor, Assistant Professor, Associate Professor, and Professor.

**Pathway:** In order to affirm the multiple roles that EVMS faculty contribute to the school's mission and vision and for our community, all faculty pursue one pathway toward promotion, using an expanded description of activities in each area that will provide a clear opportunity for promotion of faculty who contribute in one or more areas of faculty endeavor.

**Ranks:** Four academic ranks exist for the appointment and promotion of non-tenured faculty in the SOM and SHP; Instructor, Assistant Professor, Associate Professor and Professor. Two academic ranks exist for the appointment and promotion of tenured faculty in the SOM and SHP; Associate Professor and Professor.

**Title:** Academic titles are assigned based on the track and rank of appointment according to the following:

Non-tenure track faculty appointments will have the title:

- Instructor
- Assistant Professor
- Associate Professor
- Professor

Tenure track faculty appointment will have the title:

- Associate Professor
- Professor

**Primary appointment:** Faculty members are evaluated, promoted, and/ or awarded tenure in the academic unit where they hold their primary appointment. The Department Chair of the School of Medicine or the VPDSHP is responsible for recommendations for academic actions and for performance evaluations of the faculty members with primary appointments in their department or program, except as described below for faculty who have appointments in more than one department or school.

**Secondary appointment (Joint and Secondary):** A faculty member may have a secondary appointment in one or more departments or schools for the purpose of contributions and collaborative relationships in any of the mission areas. When there is no allocation of resources or support by the secondary unit (school, department, or institute), the appointment is considered a “courtesy” appointment. Secondary appointments are recommended by Department Chairs of the School of Medicine or the VPDSHP of both primary and secondary departments with the agreement of the individual faculty member. Performance expectations of the individual faculty member should be agreed upon in writing prior to the appointment. An individual faculty may not hold academic rank in a secondary appointment higher than in the primary appointment. There are, in addition, joint or secondary appointments that are not “courtesy appointments”, which may include dedicated salary or other support from the secondary unit. These are negotiated between the Deans of the schools. Even in the case that 50% of the support of a faculty member is provided by two units (departments, schools) one of the two schools or departments must be declared as the primary appointment and one must be declared as the secondary appointment, to ensure a single unit is ultimately responsible for administering to that faculty member’s needs. Joint or secondary appointments are usually made for a specified term for faculty who are clinical, research, or tenure-track, and are usually “continuous” if a faculty member has tenure. Joint or secondary appointments may be made according to department/school-specific criteria (e.g., the secondary appointee must participate in teaching, graduate training, mentoring or research activities, etc.) and can be withdrawn at the will of the secondary unit if those criteria are no longer being met.

**Highest Degree:** otherwise known as the “terminal degree” is a degree that is the highest level of attainment in an academic or professional field of study.

#### **IV. FACULTY ROLES**

The Appointments and Promotions Committee will take into account in its deliberations the roles assigned by the Department Chairs of the School of Medicine or the VPDSHP to faculty members, both academic and community faculty. To determine in which roles (teaching, clinical care, research/discovery and administration/service ) faculty should document their expertise and accomplishments, the Committee will consider the percentage of effort or amount of time spent by faculty in those roles, as agreed to by the faculty and their Department Chairs of the School of Medicine or the VPDSHP in regular annual meetings and documented in the materials presented to the committee.

#### **V. STANDARDS OF EXCELLENCE FOR EACH RANK**

The primary criterion for academic appointment and promotion at the Eastern Virginia Medical School is demonstrated excellence as a scholar. The Appointments and Promotions Committee recognizes that such excellence may be demonstrated in various ways, as addressed in this document.

All candidates are expected to demonstrate expertise commensurate with their academic rank in all of their assigned activities (teaching, clinical care, research/discovery and administration/ service). In addition, each candidate must demonstrate accomplishment in scholarly activity as outlined in the Faculty Handbook.

Outlined below are examples of excellence appropriate to each academic rank. It is not expected that each candidate will meet all of these standards; these standards will serve to guide faculty members and their Department Chairs of the School of Medicine or VPDSHP in evaluation of faculty performance and in documenting excellence for faculty recommended for appointment and promotion.

### **A. To Rank of Instructor**

**Eligibility:** The academic title and classification of Instructor is a non-tenure eligible appointment. This rank is established to acknowledge individuals who demonstrate interest in, and the potential for, a successful academic career in teaching, clinical care, research/discovery and administration/service and to assist in the transition from training to a path that may lead to a faculty career in academic medicine. Individuals who hold a terminal degree may be eligible for promotion in rank, however, EVMS is under no obligation to promote or appoint an Instructor to Assistant Professor. Candidates should engage in mentored research, teaching, clinical care or other instructional or programmatic support that advance the mission of the institution. Instructors have the right to serve on departmental committees, vote in departmental meetings or serve on committees of the Faculty or Institutional Standing Committees, however, they shall not hold office on such committees.

The rank of Instructor is appropriate for:

- Individuals who hold a minimum of a Master's or equivalent
- Individuals who have completed most or all of the requirements for the doctorate (ABD) or equivalent
- Postdoctoral fellows who contribute significantly to the educational programs
- Trainees in clinical residencies or fellowship programs who are qualified by prior training to provide independent clinical services.

The rank of Instructor is also appropriate for new faculty, generally with M.D., Ph.D. or equivalent degrees who have the potential for academic advancement.

**Criteria:** Candidates must demonstrate contributions to teaching, clinical care, research/discovery and administration/service.

### **B. To Rank of Assistant Professor**

**Eligibility:** Candidates will usually include those who are appointed or promoted to their first independent faculty position, and will include individuals with the following:

- Individuals will hold an earned doctoral degree or equivalent, or other appropriate terminal degree in their field of expertise.
- Individuals will have completed appropriate residency and/or post-doctoral fellowship programs.
- Individuals involved in clinical practice will hold appropriate current board certification. Initial appointments (usually at the Assistant Professor level) may be granted to candidates not yet board certified, but continued appointment or promotion will require that board certification be obtained within an appropriate time as determined by the President, Provost and Dean of the School of Medicine with the advice of the Department Chair.



- Individuals with the highest degree in para-professional or related health care field (e.g. PharmD, DNP, MPA) or with the highest degree in a non-health care (e.g. MBA)

**Criteria:** Candidates must demonstrate:

- Competence in one domain area (teaching, clinical care, research/discovery and administration/service) as stated in the expanded description of activities (Level 1) of the promotion guidelines at a local level (e.g. hospital, graduate program)
- Participation in at least another domain area as described below:

### 1. Teaching

- a. Is a regular participant in teaching activities. This may include responsibility for (but is not limited to): lectures and small group presentations to medical students, graduate students and residents; clinical bedside teaching; mentoring students; and participation in grand rounds and other continuing medical education activities.
- b. Is considered an excellent teacher by students and faculty. This may be documented by student evaluations and peer review by Chairs and other faculty. Teaching awards from students and peers are noteworthy.
- c. Begins to develop a local or regional reputation as a teacher. This may be documented by evaluations from participants in CME courses or by invitations to speak at local or regional CME courses and meetings. Repeat invitations are noteworthy.
- d. Is a regular and effective participant in curriculum development and administration. Service on course committees, service as a course director, preparation of course syllabi, etc., on a local or regional level are appropriate.

### 2. Clinical Care

- a. Demonstrates competence and promise of excellence in clinical, diagnostic, procedural, or other professional work as determined by the department.
- b. Considered a very good clinician by students, residents, fellows, and faculty based on formal evaluations.
- c. Meets clinical productivity goals established by the department.
- d. Demonstrates potential for a leadership role in a clinical service in the department or hospital.
- e. Establishes a reputation and consults at local and regional levels; invited to consult or invited to speak at CME courses and meetings.
- f. Has publications in peer-reviewed journals.

### 3. Research/Discovery

- a. Develops an original research program.
- b. Has peer-reviewed, first-authored publications.

### 4. Administration/Service

- a. Actively participates in medical school and hospital committees.
- b. Actively participates in professional/clinical organizations.

### C. To Rank of Associate Professor

**Eligibility:** Candidates for Associate Professor rank are expected to contribute substantially to EVMS academic activities, and have a substantial record of achievement and academic accomplishments beyond that required for Assistant Professor. Promotion to Associate Professor usually requires between four (4)

and six (6) years following initial appointment at the rank of Assistant Professor at EVMS or at another academic institution to be considered for promotion. Candidates include:

- Individuals with the highest degree in a clinical or scientific discipline who are board-certified or have equivalent qualifications as applicable to their professional and academic responsibilities
- Individuals without a terminal degree in para-professional or related health care field or with the highest degree in a non-healthcare field (e.g., EdD, MBA)

**Criteria for faculty in the non-tenure track:** Candidates must demonstrate excellence in one domain area (teaching, clinical care, research/discovery and administration/service) (Level 3) and competence in one other domain area (Level 1) or meritorious contributions in two domain areas (Level 2) or meritorious contributions in one domain area (Level 2) and competent contributions in two other domain areas (Level 1) as stated in the expanded description of activities of the promotion guidelines. The domain of demonstrated excellence will depend upon the individual's interests, level of responsibility, and percentage of time devoted to the activities. Local and regional recognition is required.

**Criteria for faculty in the tenure track.** The expectations are the same with candidates in the non-tenure track. A record of significant scholarship and a record of academic institutional service are required. Initial appointees at the rank of Associate Professor (and faculty members promoted to the rank of Associate Professor) may be considered for tenure after three (3) years of service as Associate Professor at this medical school and institution.

### **1. Teaching**

- a. Demonstrates outstanding performance as a teacher and educator.
- b. Has established a regional or statewide reputation as an excellent teacher.
- c. Regular participation in regional or national meetings, conferences, or CME courses is expected. Formal evaluations by participants in such courses and meetings are expected. Repeat invitations based on excellent performance are expected.
- d. Course materials, syllabi, etc., are respected by peers at other institutions and may be used in other institutions. Candidate may be asked to serve as consultant for development or evaluation of courses at other institutions in the region.
- e. Has received teaching awards.

### **2. Clinical Care**

- a. Has developed new clinical programs recognized and adapted at the local and regional level.
- b. Has significantly improved ongoing clinical activity.
- c. Has devised or implemented a new diagnostic or therapeutic procedure, instrument, or system.
- d. Has developed innovative infrastructure such as patient databases for patient tracking.
- e. Has developed clinical pathways or outcome measures utilized at the local or regional level.
- f. Is actively involved in clinical investigation and/or trials.
- g. Has appropriate publications in clinical journals.

### **3. Research/Discovery**

- a. Has a demonstrated sphere of expertise through first/senior authorships in peer-reviewed journals.
- b. Has had continuing success in generating financial resources necessary to undertake scholarly activity.

- c. Is recognized beyond the local community as documented by national meeting presentations, key articles, invited lectures or national awards.
- d. Is a peer reviewer at the local or regional level.

#### 4. Administration/Services

- a. Is an officer in local or regional clinical/professional society.
- b. Is a Chair of a major hospital or school standing committee.
- c. Is a member of hospital or school standing committee.
- d. Has testified before legislative bodies and/or involvement in policy-making at the local or regional levels.
- e. Has developed, organized and participated in major CME activities.

### D. To Rank of Professor

**Eligibility:** Candidates for Professor rank are expected to contribute substantially to EVMS academic activities, and their professions. Professors are leaders in their field of expertise, as demonstrated by a substantial and sustained record of accomplishments and scholarship well beyond that required for the rank of Associate Professor. Promotion to Professor usually requires between five (5) and seven (7) years following initial appointment at the rank of Associate Professor at EVMS or at another academic institution to be considered for promotion. Candidates include:

- Individuals with the highest degree in a clinical or scientific discipline who are board-certified or have equivalent qualifications as applicable to their professional and academic responsibilities
- Individuals without a terminal degree in para-professional or related health care field or with the highest degree in a non-healthcare field (e.g., EdD, MBA)

**Criteria for faculty in the non-tenure track:** Candidates must demonstrate excellence in two domain areas (teaching, clinical care, research/discovery and administration/service) (Level 3) or excellent contributions in one domain area (Level 3), meritorious contributions in one other domain area (Level 2), and competent contributions in one other domain area (Level 1) as stated in the expanded description of activities of the promotion guidelines. The domain of demonstrated excellence will depend upon the individual's interests, level of responsibility, and percentage of time devoted to the activities. National or international recognition is required.

**Criteria for faculty in the tenure track:** The expectations are the same with candidates in the non-tenure track. A record of significant scholarship and a record of academic institutional service are required. Initial appointees at the rank of Professor may be considered for tenure after two (2) years of service as Professor at this medical school and institution.

#### 1. Teaching

- a. Is continually recognized as an outstanding teacher and educator. Candidate should present outstanding evaluations from students, peers, and others, as appropriate. Teaching awards from students, faculty, or state or national organizations provide additional evidence of excellence.
- b. Has widespread regional and national recognition for excellence as teacher or educator. Regular participation as a presenter in national review courses and professional meetings is expected.
- c. Contributes to Board examination in specialty or subspecialty. Gives or administers oral examinations in specialty or subspecialty.

- d. Course materials, syllabi, etc., should be widely respected by peers at other institutions. Candidates should serve as consultants in the design and evaluation of educational programs and curricula at the national level.
- e. Has developed educational methods or protocols recognized at the local, regional and national level.
- f. Is recognized as an authority by peers and invited to speak or chair sessions at national meetings.
- g. Has had visiting professorships.
- h. Provides mentoring at regional and national level.

**2. Clinical Care**

- a. Has developed a new clinical program recognized at the regional and national level.
- b. Has significantly improved an ongoing clinical activity.
- c. Has devised or implemented a new diagnostic or therapeutic procedure, instrument or system.
- d. Has developed an innovative infrastructure such as patient databases for patient tracking.
- e. Has developed clinical pathways which are used on the local, regional or national levels.
- f. Has developed outcome measures which are used at the local, regional or national levels.
- g. Has a continuing active role in clinical investigation and clinical trials.
- h. Has had a major impact on the development of national standards for patient care.
- i. Establishes, consults and/or tracks patients on a regional, national or international level.

**3. Research/Discovery**

- a. Has continually demonstrated expertise as first/senior author in peer-reviewed journals.
- b. Has been editorial board member and peer reviewer on the national level.
- c. Has had sustained and continuing success in generating financial resources necessary to undertake scholarly activity.
- d. Is invited to speak at national specialty meetings.

**4. Administration/Service**

- a. Is an officer/director of a scholarly society or member of an organizing committee for a scholarly meeting.
- b. Is an officer in local or regional clinical/professional society.
- c. Is an officer in national or international professional/clinical societies.
- d. Is a Chair and member on major hospital and standing school committees.
- e. Has testified before legislative bodies and/or involvement in policy-making at the regional or national level.

**VI. INITIAL APPOINTMENT TERMS**

The Board of Visitors, with the recommendation of the President, Provost and Dean of the School of Medicine, may appoint faculty in the non-tenure track for a term not to exceed three (3) years, as follows:

- a. Instructors shall be appointed for one (1) or more successive terms of one (1). Initial appointments may be less than one year based on the date of the initial appointment.
- b. Assistant Professors shall be appointed initially for a probationary term of one (1) year.

Initial appointments may be less than one year based on the date of the initial appointment.

- c. Assistant Professors who have previously served a probationary term may thereafter be appointed for one (1) or more successive terms of two (2) years each.
- d. Associate Professors shall be appointed for one (1) or more successive terms of three (3) years each. Initial appointments may be less than three (3) years based on the date of the initial appointment.
- e. Full Professors shall be appointed to one (1) or more successive terms of three (3) years each. Initial appointments may be less than three (3) years based on the date of the initial appointment.

## **VII. REAPPOINTMENT AND NONRENEWAL**

- A. A reappointment shall be offered only following a substantive review of a faculty member's performance during the previous appointment. The qualifications a faculty member shall possess to be reappointed to a rank are specified in Standards of Excellence for Each Rank. Reappointment is primary recognition of excellent performance. Reappointment decisions shall be based on rigorous standards and reappointment shall be denied if past performance is not sufficiently high quality or does not meet the EVMS standards of professional behavior. Reappointment may also be denied for financial or programmatic reasons (See Grounds for Dismissal of Faculty).
- B. Faculty who will be nonrenewed will be notified by December 31 of the last year of the term of their appointment.
- C. Faculty shall be notified of reappointment, which may be for a term not to exceed three (3) years based on rank, by June 30 of the last year of the term of their appointment.

Policies and Procedures Relating to Faculty Appointment, Promotion and Tenure  
Board Approved: September 15, 2020

## **POLICIES AND PROCEDURES FOR FACULTY APPOINTMENT**

### **I. INTRODUCTION AND POLICY**

All initial faculty appointments to a Department in the School of Medicine (SOM) or the School of Health Professions (SHP) shall be made in accordance with the applicable Standards of Excellence, the Appointment and Promotions Guidelines and the framework outlined in this Policy.

### **II. FACULTY APPOINTMENT PROCEDURES**

A. Initial Appointment. Initial appointments at the ranks below Associate Professor are not considered by the Appointments and Promotions Committee. At these levels, appointments are reviewed by the Vice Dean for Faculty Affairs and Professional Development (FAPD) and approved by the President, Provost, Dean of the School of Medicine following receipt of the appropriate materials from the Department Chair of the School of Medicine or VPDSHP. Nominations for appointment at the Associate Professor and Professor ranks are considered by the Appointments and Promotions Committee.

1. Following is an outline of the general process for initial faculty appointment.
  - a. Candidate submits required documents to the Department Chair of the School of Medicine or the VPDSHP.
  - b. Department Chair of the School of Medicine or VPDSHP obtains letters of reference.
  - c. [Optional] Nomination sent to Departmental Appointments Committee for consideration.
  - d. [Optional] Recommendation from Departmental Appointments Committee to Department Chair of the School of Medicine or the VPDSHP.
  - e. Nomination package forwarded by Department Chair of the School of Medicine or the VPDSHP to the President, Provost and Dean of the School of Medicine in care of FAPD.
  - f. Packages reviewed by FAPD to assure necessary information is submitted.
  - g. Nominations at the ranks of Assistant Professor and below are reviewed by the Vice Dean for FAPD and approved by the President, Provost, Dean of the School of Medicine.
  - h. For the ranks of Associate Professor and Professor, the President, Provost and Dean of the School of Medicine forwards the nomination package to the Appointments and Promotions Committee in care of FAPD.
  - i. Nomination reviewed by the Appointments and Promotions Committee and recommendation forwarded to the President, Provost and Dean of the School of Medicine.
  - j. Nomination forwarded by the President, Provost and Dean of the School of Medicine to the Academic and Student Affairs Committee for review and recommendation.
  - k. Academic and Student Affairs Committee forwards to Board of Visitors for approval.
  - l. Board of Visitors sends letter of appointment to new faculty member at the rank of Associate Professor and Professor.
  - m. The Vice Dean for FAPD sends letter of appointment to new faculty member at the rank of Instructor, Assistant Professor and Non-Promotion Eligible Faculty.

## B. Appointment Nomination Package Required Checklist

### 1. Chair of the School of Medicine or VPDSHP Letter

- a. Rank at which candidate is being proposed.
- b. Time in current rank.
- c. Descriptions of candidate's assigned duties, job description, annual breakdown of percentage of time allocated to the following areas: teaching, clinical care, research/discovery and administration/service.
- d. Department Chair of the School of Medicine or VPDSHP evaluation of candidate's ability, experience, and accomplishments in each of the four areas mentioned above.

2. Letters of Recommendation. Letters of recommendation external or internal are requested and obtained by the Department Chair of the School of Medicine or VPDSHP. A faculty candidate for appointment is not permitted to solicit any letters of recommendation. Letters should be obtained from well-qualified scientists, scholars, educators and clinicians who are able to provide a fair and objective evaluation of the candidate's work. In general, a potential referee should have at least an "arms-length" relationship with the candidate. The nature of the professional relationship of the candidate and the potential referee must be specified in the letter and there must be a brief statement of the referee's academic qualifications. The majority of the individuals submitting letters of recommendation should have no previous direct supervisory relationship with the candidate. In summary, such letters should document how long and in what capacity the individual knows the candidate, a candidate's qualifications and professional expertise for an appointment, and also be addressed to the Department Chair of the School of Medicine or VPDSHP.

#### **a. Salaried Faculty**

- i. For Instructor:
  - (1) One letter from the Department Chair of the School of Medicine or VPDSHP.
- ii. For Assistant Professor:
  - (1) Three internal and/or external letters are required. They should be obtained from training directors, faculty members at the training institution or other professionals with an academic appointment at an equivalent or higher rank than that for which the candidate is being proposed
  - (2) They should document the candidate's competence in one domain area and participation in at least another domain area of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service)
- iii. For Associate Professor:
  - (1) Three external letters are required. They should be obtained from individuals with an academic appointment at an equivalent or higher rank than that for which the candidate is being proposed
  - (2) They must come from three different institutions
  - (3) One letter may come from an individual who holds a position within institutes/organizations such as the NIH and has previously held an academic appointment at an equivalent or higher rank
  - (4) They should address how the candidate is recognized regionally or nationally
  - (5) They should document the candidate's meritorious contributions in one or more domain areas and/or competence in other domain areas of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service)

- iv. For Professor:
  - (1) Three external letters are required. They should be obtained from individuals at an equivalent rank for which the candidate is being proposed.
  - (2) They must come from three different institutions, at least two from outside the Commonwealth of Virginia.
  - (3) One letter may come from the Commonwealth of Virginia, but outside EVMS
  - (4) One letter may come from an individual who holds a position within institutes/organizations such as the NIH and has previously held an academic appointment at an equivalent rank
  - (5) They should address how the candidate is recognized nationally or internationally
  - (6) They should document excellence in one or more domain areas and meritorious contributions in other domain areas of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service)

**b. Non-Salaried Faculty**

- i. For Instructor:
  - (1) One letter from the Department Chair of the School of Medicine or VPDSHP.
- ii. For Assistant Professor:
  - (1) Two internal and/or external letters are required. They should be obtained from training directors, faculty members at the training institution or other professionals with an academic appointment at an equivalent or higher rank than that for which the candidate is being proposed
  - (2) They should document the candidate's competence in one domain area and participation in at least another domain area of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service)
- iii. For Associate Professor:
  - (1) Three external letters are required. They should be obtained from individuals with an academic appointment at an equivalent or higher rank than that for which the candidate is being proposed
  - (2) They must come from three different institutions
  - (3) One letter may come from an individual who holds a position within institutes/organizations such as the NIH and has previously held an academic appointment at an equivalent or higher rank
  - (4) They should address how the candidate is recognized regionally or nationally
  - (5) They should document the candidate's meritorious contributions in one or more domain areas and/or competence in other domain areas of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service)
- iv. For Professor:
  - (1) Three external letters are required. They should be obtained from individuals at an equivalent rank for which the candidate is being proposed.
  - (2) They must come from three different institutions, at least two from outside the Commonwealth of Virginia.
  - (3) One letter may come from the Commonwealth of Virginia, but outside EVMS



- (4) One letter may come from an individual who holds a position within institutes/organizations such as the NIH and has previously held an academic appointment at an equivalent rank
- (5) They should address how the candidate is recognized nationally or internationally
- (6) They should document excellence in one or more domain areas and meritorious contributions in other domain areas of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service)

**c. Community Faculty**

- i. For Instructor:
  - (1) One letter from the Department Chair of the School of Medicine or VPDSHP.
- ii. For Assistant Professor:
  - (1) One internal letter is required. It should be obtained from program director, department chair or from the office of Medical Educations (SOM) or other professionals in the SOM or SHP with an academic appointment at an equivalent or higher rank than that for which the candidate is being proposed.
  - (2) They should document the candidate's competence in one domain area (teaching) and provide evidence of teaching strengths and quality of teaching.
- iii. For Associate Professor:
  - (1) Three external letters are required. They should be obtained from individuals with an academic appointment at an equivalent or higher rank than that for which the candidate is being proposed
  - (2) They must come from three different institutions
  - (3) One letter may come from an individual who holds a position within institutes/organizations such as the NIH and has previously held an academic appointment at an equivalent or higher rank
  - (4) They should address how the candidate is recognized regionally or nationally
  - (5) They should document the candidate's meritorious contributions in one or more domain areas and/or competence in other domain areas of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service)
- iv. For Professor:
  - (1) Three external letters are required. They should be obtained from individuals at an equivalent rank for which the candidate is being proposed.
  - (2) They must come from three different institutions, at least two from outside the Commonwealth of Virginia.
  - (3) One letter may come from the Commonwealth of Virginia, but outside EVMS
  - (4) One letter may come from an individual who holds a position within institutes/organizations such as the NIH and has previously held an academic appointment at an equivalent rank
  - (5) They should address how the candidate is recognized nationally or internationally
  - (6) They should document excellence in one or more domain areas and meritorious contributions in other domain areas of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service)

3. Curriculum Vitae and Additional Required Information. For the purpose of appointments, the candidate should provide the information requested on the EVMS Curriculum Vitae form, available from FAPD. In addition, the candidate should provide additional information not already included in the Curriculum Vitae format as required for documentation of scholarly activity as outlined in Section VII. All candidates should compile and attach a portfolio on each area (teaching, clinical care, research/discovery and administration/service) in which the individual has time allotted, documenting evidence of quality of teaching, assessments of clinical service and research, and contributions to the department.

4. Original Transcript of Terminal Degree. Candidate must provide an original transcript, with raised seal, from the institution that awarded his/her terminal degree (only required for full-time faculty). Clinical faculty with appropriate credentials and a medical license within the Commonwealth of Virginia are not required to provide a transcript.

**C. Senior Lateral Appointments** (for candidates moving from another academic institution and requesting same academic rank as that held at prior institution).

To facilitate academic appointment for faculty who have been recruited from another academic institution and for whom an appointment is requested at the same academic rank (i.e., Associate Professor, Professor) that was held at the prior institution, the candidate's appointment process could be expedited via a simplified packet submitted for review. An ad hoc sub-committee of the Appointments and Promotions Committee reviews the candidates. The ad hoc sub-committee consists of the A&P Chair and at least four (4) committee members selected by the A&P Chair.

Appointment Nomination package for Lateral Appointments at all ranks should contain:

1. Candidate's CV in EVMS format
2. Department Chair's letter of nomination that adequately describes and documents how the candidate meets the Standards of Excellence at Rank as described in the Policies and Procedures Relating to Faculty Appointment, Promotion and Tenure, and the Guidelines for Appointment and Promotion.

A unanimous positive evaluation ends the review and the appointment is approved. Academic titles often differ from institution to institution. Therefore, if the submitted materials do not provide the required documentation, then additional information including letters of recommendations could be requested from the candidate's department chair and a full review by the entire A&P Committee may be initiated. FAPD is responsible for soliciting additional information from the institution from which a candidate is moving to understand the academic expectations as they relate to the specific rank, especially when modifiers are used (i.e., clinical Associate Professor or adjunct) to ensure alignment with EVMS's promotion criteria.

**D. Provisional Appointments**

For initial salaried faculty appointments only to all faculty ranks, the President, Provost and Dean of the School of Medicine may approve in emergency situations a provisional appointment provided:

1. The Department Chair of the School of Medicine or VPDSHP must provide to the President, Provost and Dean of the School of Medicine, in writing, the reason for requesting provisional status for a potential new faculty member. The President, Provost and Dean of the School of Medicine must be given at least five (5) working days to respond with approval or disapproval.
2. The maximum provisional appointment period will not exceed three (3) months. In special situations the President, Provost and Dean of the School of Medicine may approve one extension of three (3) months. All faculty approved for provisional appointments must still

- submit all requirements for appointment as outlined under Policies and Procedures for Faculty Appointment, prior to expiration of their provisional appointment.
3. The required clinical credentials must be complete prior to the beginning of any clinical activity including direct patient care, consultation or preceptorship.
  4. The President, Provost and Dean of the School of Medicine notifies the prospective faculty member by letter of the provisional appointment stating: a) termination date, b) that the full appointment/credentialing process must be completed by such date, and c) compensation payments will automatically cease by such date and EVMS will have no continued contractual obligation beyond such date unless a permanent appointment has been approved.
  5. The non-binding offer letter may not refer to provisional appointments.
  6. New Faculty will not be added to the EVMS payroll until the President, Provost and Dean of the School of Medicine has approved provisional status and the letter referred to in 4. above has been sent to the prospective faculty member. Retroactive pay (prior to the date of President, Provost and Dean of the School of Medicine's approval) will not be granted.

Policies and Procedures for Faculty Appointment  
Board Approved: September 15, 2020

## GUIDELINES FOR APPOINTMENT AND PROMOTION

### A. Introduction

The criteria for appointment and promotion at EVMS require that faculty fulfill their assigned responsibilities in teaching, clinical care, research/discovery and administration/service, with a level of expertise befitting the rank. All faculty including community faculty may seek appointment or promotion in one system with agreement from the faculty member and the Chair as to the role of the faculty member. The guidelines remain general so as to be appropriate for faculty in all departments. The allocation of time to each activity should be developed *a priori* between the faculty member and the Department Chairperson. In turn, when discerning the quality of faculty activity, the Appointments and Promotions Committee will consider the faculty member's present rank, level of responsibility, and percentage of time devoted to these activity categories. Finally, criteria for appointment and promotion have been developed to reflect the mission statement of Eastern Virginia Medical School.

### B. Thresholds for Appointment and Promotion to Associate Professor or Professor

In order to affirm the multiple roles that EVMS faculty (salaried, non-salaried, and community faculty) contribute to the school's mission and vision and for our community, all faculty pursue **one pathway toward promotion**, using an expanded description of activities in each area that will provide a clear opportunity for promotion of faculty who contribute in one or more areas of faculty endeavor.

The criteria for documentation are described in three levels, referred to as impact rankings: 1- competent, 2- meritorious and 3- excellent.

*Appointment and Promotion to Associate Professor* will require a sum of impact rankings of four, **in at least two domains** (teaching, clinical care, research/discovery and administration/service). Promotion would be considered with domain rankings of:

- 3 in one domain and a 1 in another
- 2 in two domains
- 2 in one domain with a 1 in two others
- 1 in four domains would not be considered adequate for promotion
- Local and regional recognition

*Appointment and Promotion to Professor* will require a sum of domain impact rankings of six **in at least two domains**. Promotion would be considered with domain rankings of:

- 3 in two domains
- 3 in one domain, 2 in another domain and 1 in yet another domain
- 2 in three domains would not be considered adequate for promotion
- National or international recognition

### C. Faculty Accomplishments

#### A. Scholarly Activity

##### 1) Definition

Scholarship is the generation of new knowledge or mastery and application of existing knowledge aimed to advance one of the following: (1) the understanding of basic scientific principles; (2) the practice of clinical medicine;

or (3) the effectiveness of educators. Scholarship can occur in each area of faculty responsibility: teaching, clinical care, research/discovery and administration/service. In addition, scholarship requires the dissemination of such knowledge/application for the benefit of others in a fashion that is tangible and can be peer-reviewed and documented.

## 2) Evidence of Scholarly Activity

Below are examples of scholarly activity. When documenting activity under each example, a faculty member should include the list of information given under each example to describe the activity fully. An alternative to listing of requested information is to provide a narrative of a contribution or activity.

### a) Publications

List publications including author, title, year of publication, journal and pages. The candidate may indicate the number of times a work has been cited or other information that gives an indication of its impact.

#### (1) Full-length publications

- (a) Peer-reviewed articles
- (b) Non-peer-reviewed articles
  - (i) Book chapters
  - (ii) Reviews
  - (iii) Case reports
  - (iv) Articles in lay publications
  - (v) Procedures/protocols
  - (vi) Electronic media
- (c) Books, monographs

#### (2) Presented Abstracts

- (a) Peer-reviewed articles
- (b) Non-peer-reviewed articles

### b) Presentations

List actual presentations, indicating whether the presentation was invited, the target audience, and whether the meeting was international, national, regional, or local.

- 1) Oral presentations
  - (a) Plenary
  - (b) Workshop
  - (c) Seminars
- 2) Poster presentations
- 3) Discussant
- 4) Session Chairs

### c) Patents

List patent applications and the status of each, providing the following:

- 1) Title
- 2) Inventors
- 3) Brief description
- 4) Disposition

5) Impact

**d) Clinical Investigation and/or Clinical Trials**

Indicate the level of involvement/contributions to the planning, implementation, and/or reporting beyond contributing patient care, records, etc., of each.

**e) Development of Original Clinical Programs and/or Techniques**

- 1) Brief description, including goals
- 2) Target population
- 3) Impact
- 4) Nature of dissemination

**f) Development of Original Teaching Tools, Methods**

- 1) Description of product, including objectives
- 2) Level of involvement
- 3) Target audience
- 4) Copyright status
- 5) Impact
- 6) Nature of dissemination

**g) Mentoring of Future Scholars**

Mentoring comprises a one-on-one relationship between a faculty member and a student, or between senior and junior faculty that is both comprehensive and time intensive. The mentor may assist the student or junior faculty in career development issues as well as regular and frequent guidance in research, education program design and implementation, clinical skills development, and professional values acquisition. For each mentorship, please list:

- 1) Level of trainee mentored
  - (a) Student (if an advisory committee is involved, the candidate will indicate whether he/she was the Chair or a member of the committee)
    - (i) Thesis (Dissertation)
    - (ii) Non-thesis
  - (b) Resident
  - (c) Fellow
  - (d) Visiting Scientist
- 2) Duration of mentoring
- 3) Accomplishment of scholarly activity by the trainee during the training interval
- 4) Current position of the trainee

**h) Scholarly Involvement in Professional Societies/Organizations**

Provide the level of involvement:

- 1) Officer/director of a scholarly society
- 2) Membership on advisory boards
- 3) Membership on editorial boards

- 4) Reviewer for journal
- 5) Reviewer for funding agency
- 6) Member of organizing committee for a scholarly meeting

**i) Consultancies**

**j) Serving as a Visiting Professor**

- 1) Site
- 2) Date of visit
- 3) Who invited the candidate?
- 4) Contribution of candidate

**k) Recognition for Scholarship**

- 1) Recognition
- 2) Date
- 3) Awarded by
- 4) Award received for

**D. Types of Evidence in the Four Faculty Roles**

**1. Teaching Accomplishments**

Teachers don't just convey revealed knowledge but encourage the development of an inquiring mind. Teachers instruct in identifying new discoveries related to their discipline, translate basic and clinical observations into practice, integrate the connections of their discipline with other disciplines within the school and communicate professionally outside of the school. Teachers assess their learners' needs, and provide the most effective environment for their learners to integrate the new knowledge and its complicated relationships into their current understanding and practice. Teachers today have the advantage of the explosion in new technologies that can facilitate the acquisition of knowledge and its application that may be incorporated in enhancing the learning experiences of the student of today. The challenge to teachers in the information age is to transform their focus from content to focus on their learners; from information transfer to conditions for learning, moving from abstractions to application, from narrow specialties to broad grasp of complexities, from isolated work to collaboration.

**Level 1. These activities should be recognized locally as being competent.**

- Active participation in teaching activities of the department, such as a series of educational presentations, or coordinating a course
- Delivery of educational materials to students, residents, trainees, research fellows or peers in health professions training program
- Instructs in laboratory sessions for health science students
- Facilitates small group sessions for medical students, health science students, residents/fellows
- Serves as LGM Instructor
- Presents teaching rounds or patient conferences
- Supervises trainees performing outpatient or inpatient clinical service
- Participates in teaching or supervision of medical students or graduate students or residents/fellows
- Participates in postgraduate or continuing education courses that serve a local audience
- Receives satisfactory evaluations from learners or peer reviewers Demonstrates

commitment to enhancing educational skills by participating in courses, conferences, workshops, on-line learning experiences, etc. related to one's educational responsibilities

- Serves as Advisor for medical student, health sciences student, postgraduate student or resident/fellow

**Level 2. These activities should be recognized locally or regionally as being meritorious.**

- Prepares curriculum material (new courses, syllabus materials, Blackboard materials, etc.)
- Supervises or coordinates the teaching by other faculty, residents or graduate students (i.e., Course or Unit director)
- Develops innovative approaches to improving students/resident learning and the enhancement of learning experiences (e.g., implements integration across disciplines; explores impact of innovation on learners' accomplishments)
- Develops or directs a postgraduate or continuing education course that serves a regional audience
- Invited to make presentations at the state or regional level
- Invited presenter at other institutions of higher education (i.e., universities, medical centers, health profession schools) or research and development facilities or institutes (i.e., NIH, Harvard-Macy, Max Planck Institute, etc.)
- Develops and participates in the teaching of major portions of a graduate course
- Supervises graduate students (Masters or PhD), MPH thesis for students in MD/MPH programs, serves as a project mentor for MD student or resident/fellow scholarly activity or research project requirement
- Demonstrates meritorious teaching ability as measured by learner evaluation and peer review
- Receives a local teaching award

**Level 3. These activities should be recognized regionally, nationally or internationally as excellent.**

- Develops a course, curricular component, educational software, or evaluation materials that are used regionally or nationally
- As course leaders, acknowledged by LCME or SACS reviewers as demonstrating 'best practices.'
- Invited to organize and participate in a symposium or plenary session at a regional or national educational meeting
- Initiates and collaborates with colleagues at multiple institutions in major presentation at regional or state level (symposia; preconference workshops)
- Identifies exemplary 'best practices' from other institutions, adapts practices for EVMS curriculum, implements innovative approach to curriculum delivery and evaluation
- Implements inter-professional educational experiences that address leading community health needs; demonstrates improved educational outcomes.
- Supervises a training program, residency program or fellowship and achieves recognition of supervisory authority.
- Receives a regional or national teaching award
- Nominated to and serves on national professional organization's education task force or initiative
- Invited to be a Visiting Professor at other institutions
- Provides educational leadership by serving as Editor of textbooks, journals or editorials.



- Achieves funding of innovative educational program through national or international funding agency
- Publishes educational works in peer-reviewed journals, television or radio or electronic sites
- Develops educational and evaluation tools acknowledged as advancing field in disciplinary or interdisciplinary teaching and evaluation.
- Citation by news bulletins, etc., of professional organizations

## 2. Research/Discovery Accomplishments

Research takes many forms. Traditional biomedical researchers strive to enhance our understanding of the fundamental mechanisms underlying health and disease. Translational and clinical researchers aim to take these findings from bench to bedside and provide new tools and treatments to improve patient care. Public health is enhanced by the work of epidemiologists, behavioral scientists, and social scientists who identify areas of need and provide evidence in support of the most effective therapies. Educational research identifies the best methods and tools for imparting knowledge to our students, and administrators use research methodology to improve practices in their areas of expertise.

### **Level 1. These activities should be recognized locally as being competent.**

- *Extramural Funding:* PI on foundation grants, PI for product/device donation to support research, co-investigator on indirect cost bearing grant
- *Publications:* 1-2 journal articles/year in mid-tier journals with mid-tier impact, case reports, multiple articles as middle author (assumes 100% effort to research)
- *Communications:* Invitations to speak at EVMS, hospitals, other academic/medical facilities, professional meetings in the Hampton Roads area; invitations to speak locally to the lay public; presentation of submitted (non-invited) abstracts
- *Patents:* Author on a submitted (pending) patent
- *Clinical Trials and Methods:* Participation as a listed investigator
- *Mentoring in Research:* Primary faculty involved in training a student in research
- *Service in support of Research:* Membership in professional societies; grant and manuscript reviews on an ad hoc basis

### **Level 2. These activities should be recognized locally or regionally as being meritorious.**

- *Extramural Funding:* PI on indirect cost bearing grant to support research and PI salary for effort on this project
- *Publications:* 2-3 journal articles/year in mid-tier journals with mid-tier impact or 1 journal article/year in top journal with high impact (assumes 100% effort to research; only consider those where candidate is listed as 1<sup>st</sup> or last author)
- *Communications:* Invitations to speak at universities, hospitals, other academic/medical facilities, professional meetings, to the lay public outside Hampton Roads but within our region/nationally
- *Patents:* Author on an issued patent or multiple submitted patents
- *Clinical Trials and Methods:* Participation as site principal investigator
- *Mentoring in Research:* Primary faculty involved in training multiple students in research, involvement in training program, recognition/invitations for training at a regional/national level, service on student committees
- *Service in support of Research:* Active participation in professional societies; regular service as grant and manuscript reviewer

**Level 3. These activities should be recognized regionally, nationally or internationally as excellent.**

- *Extramural Funding:* PI on indirect cost bearing grants to support research and PI salary for total effort devoted to research; evidence of sustained support at this level
- *Publications:* 3-4 journal articles/year in mid-tier journals with mid-tier impact or 2 journal articles/year in top journals with high impact (assumes 100% effort to research; only those where candidate is listed as 1<sup>st</sup> or lastauthor)
  
- *Communications:* Invitations to speak at universities, hospitals, other academic/medical facilities, professional meetings, to the lay public nationally/internationally
- *Patents:* Author on a patent which has been licensed and/or generates revenue for EVMS
- *Clinical Trials and Methods:* PI or Co-Investigator with a significant role in trial design, implementation, and/or acquisition of funding
- *Mentoring in Research:* Primary faculty involved in training multiple students in research, director of a training program, recognition/invitations for training at a national/international level, Chair of student committees
- *Service in support of Research:* Regular service to professional societies as committee chair or in other leadership positions; associate editor/editorial board member; member of standing grant review panel

Awards: The significance of any award for research activities should be evaluated based on the prestige of the group or organization bestowing it.

**3. Clinical Care Accomplishments**

The scholarly and service activities of clinical faculty within an academic setting can take many forms and includes activities that go beyond relative value units (RVU's). In short, academic clinicians must do more than simply practice medicine. They should continue to add academic value by seeking new knowledge, improving patient outcomes and standards of care. They should aspire to reflect, measure and disseminate this information with patients, colleagues and students both within and across disciplines. Through such persistent efforts the academic clinical faculty at EVMS contribute greatly to the mission and reputation of EVMS locally, nationally and internationally. Clinicians that successfully combine their roles as teachers, mentors, researchers and administrators are worthy of recognition and promotion at EVMS. By opening their practices to such academic principles and our community of learners these professionals overtly demonstrate the centrality of the doctor-patient relationship to the healing arts. It is important for each candidate seeking such recognition and promotion to appropriately document the scope and breadth of their scholarly and service activities at a level commensurate with their intended promotional rank. For guidance purposes a non-exhaustive list of examples of some of the varied forms that clinical scholars can demonstrate their academic achievements at each of the three promotional levels has been included. It is important to note that the promotions committee considers each completed package upon the weight of the accumulated and documented evidence that such levels have been achieved.

**Level 1. Candidates must demonstrate competency of achievements at local or institutional levels as being competent.**

- Demonstrates competence as defined by attaining/maintaining educational and/or professional accreditations/ Board Certifications (NCCPA, NSAA, ACGME, ABMS etc...) in areas such as (but not limited to) patient care, diagnostic, procedural and other clinical related activities

- Consistently rated highly by students, residents, fellows and faculty
- Provides evidence of consulting and collaborating at local levels
- Actively coordinates or develops additive activities within the academic unit or practice group
- Provides evidence of being a contributing/active member in specialty/subspecialty professional groups and societies
- Provides evidence of high rating of periodic validated patient experience surveys
- Consistently meets objective clinical/departmental benchmarks demonstrating quality care standards (length of stay, complication rate, utilization parameters, etc.) as compared to peer groups
  
- Provides evidence of providing a minimum of 50 hrs/year community clinical service/care to underserved /indigent /special needs populations in support of EVMS activities and missions
- Provides evidence of reflective self-evaluation and assessment to improve performance within the scope of practice
- Provides evidence of being a consistent life-long learner through activities such as faculty development, CME and other professional development sessions

**Level 2. Candidates must demonstrate evidence that achievements have risen to the level of being recognized at regional and state levels as being meritorious.**

- Demonstrate competency as defined by attaining meritorious/advanced educational or professional accreditations/awards or recognitions by academic groups and organizations (AOA faculty recognition, Special certifications/programs, Fellowships, Continuing education certifications/degrees)
- Provides evidence of consulting and collaborating regional level by peers
- Evidence of meritorious recognition as a regional specialist via letters of reference, awards, requests to write review
- Actively serving in leadership positions on regional/prestigious clinical committees (state guidelines, academic reviewer etc.)
- Recognized by media publications at local & state level (“Best Doctors” surveys) for clinical care (note: this cannot include monetarily attained listings or self-promotion vehicles)
- Offers a unique clinical service in local/state/regional area as measured by colleagues, learners and/or patients
- Coordinates and develops collaborations across medical disciplines/fields of practice
- Consistently exceeds clinical benchmarks (length of stay, complication rate, utilization parameters, etc.) compared to peers
- Provides evidence of holding active and persistent committee/subcommittee/ officer involvements in multiple specialty/subspecialty of regional societies
- Participates regularly in regional guideline development groups or protocol or SOP development panels
- Directs clinical or professional program or QI initiatives that have resulted in evidence showing improved educational or patient care outcomes
- Serves as an officer of the hospital medical staff
- Develops and disseminates a unique clinical program, diagnostic test, or intervention that has local or regional impact
- Provides evidence of superior results of periodic patient experience surveys
- Presents multiple examples of unsolicited recognition from patients, institutions and peers for meritorious clinical skills & professionalism behaviors
- Consistently exceeds group/department productivity/strategic goals (Not RVUs)
- Evidence of providing a minimum of 200 hrs/yr of community clinical service/care to underserved /indigent /special needs populations

- Presents evidence of being consistent and persistent as at reflective self-evaluation and assessment to improve performance within the scope of practice and mentoring others in such activities of growth
- Presents evidences of being a consistent and persistent life-long learner who goes above and beyond the minimum standard (as compared to peers) to engage in regular activities such as faculty development, CME and other professional development sessions

**Level 3. Candidates must demonstrate evidence that their activities are recognized nationally or internationally as consistently excellent.**

- Demonstrates outcomes and impact of clinical, educational or professional programs they have developed and implemented
- Presents evidence as an established consultant and collaborator at national or international levels
- Provides evidence that the scope of their clinical or professional practice has achieved consistently excellent feedback by multiple peers at national or international level
- Serves on national/international clinical committees (guidelines, peer review, etc.)
- Is recognized by media publications at national or international levels (“Best Doctors” surveys) for clinical care or professional achievements (note: this cannot include monetarily attained listings or self-promotion vehicles)
- Provides evidence of consulting and collaborating at national and international levels
- Presents evidence of a unique clinical program, diagnostic test, or interventions developed that has had widespread and national/international impact
- Contributes significantly to board examination (i.e., board examiner, item test writer) in specialty/subspecialty
- Receives exceptional recognition by specialty/subspecialty society (Mastership or equivalent) or Fellowship in multiple societies
- Participates in national and international guideline setting or protocol writing panels
- Is elected to a significant leadership role in clinical or professional societies
- Receives outstanding recognition by grateful patients, institutions or societies for excellence in clinical care. May consist of special awards, endowments or substantial impact to EVMS mission and the community of scholars.
- Provides exceptional amounts of community clinical care to underserved /indigent /special needs populations in excess of 400 hrs./yr.
- Makes broadly impacting clinical contributions internally and externally appropriate to the mission of the institution its students, faculty or staff

**4. Administrative/Service Accomplishments**

**Level 1. These activities should be recognized locally as being competent.**

- Demonstrates skills in managing activities or programs
- Serves on School or hospital committees
- Conducts tests, procedures or data handling in support of a clinical or service laboratory

**Level 2. These activities should be recognized locally or regionally as being meritorious.**

- Independently develops or directs a major program/project/research laboratory
- Oversees, directs and interprets tests, procedures or data handling in support of a clinical or service laboratory
- Oversees a major research project as Principal Investigator or Co-investigator, which involves management of personnel and finances

- Offers major collaborative services with other faculty in attracting external funding not achievable without the administrator's contributions.
- Serves as an officer in state or local professional society
- Serves as an Assistant or Associate Dean or other administrative appointment (i.e., Chairperson, Vice or Associate Chairperson of a department)
- Serves as a Program Director, Clerkship Director or other position related to the mission of the School that involves significant time in administrative activities, such as program development scheduling, evaluation, documentation of unit activities.
- Consults nationally regarding service-related activities
- Chairs medical subspecialty or professional society committee
- Chair a school or hospital committee
- Attracts substantial gifts or endowments to the School
- Serves as a regular or Ad Hoc member on a national research or clinical review committee
- Performs a service for the community or organizations within the community that are not directly associated with the School

**Level 3. These activities should be recognized regionally, nationally, or internationally as excellent.**

- Serves as an officer or major committee member/chair on regional or national professional society
- Chairs a departmental faculty search committee
- Chairs a major committee (i.e., Admissions, Student Affairs, Appointments and Promotions, etc.)
- Serves as section chief, director or leader of a clinical area
- Recruits external funding for innovative programs in the school

Board Approved: November 13, 2012

Clinical Guidelines Updated and Board Approved: December 12, 2017

## **POLICIES AND PROCEDURES FOR FACULTY PROMOTION**

### **I. INTRODUCTION AND POLICY**

Promotion to a higher rank by EVMS is primary recognition of excellence. EVMS recognizes that such excellence may be demonstrated in all academic domain areas (teaching, clinical care, research/discovery and administration/service). Promotion to a higher rank implies recognition by a faculty member that, concurrent with the honor and privileges awarded, there are continuing obligations to academic excellence, professional growth and service. Promotion shall occur only after an exhaustive evaluation has been made of the candidate's merits. It is the Policy of EVMS that faculty promotions shall be made in accordance with the applicable Standards of Excellence, the Appointment and Promotions Guidelines, and the framework outlined in this Policy.

### **II. FACULTY PROMOTION PROCEDURES**

A. Ongoing Evaluation. Each Departmental Chair of the School of Medicine and the VPDSHP should make promotion expectations explicit for each faculty member at the time of initial recruitment and appointment, with reiteration and/or modification of these expectations at subsequent annual reviews. These explicit expectations should guide faculty toward their promotion. For these expectations to be achievable, there should be demonstrable opportunity for faculty members to allocate necessary time to these objectives, and promotion should be considered within a reasonable period of time. A faculty member's progress toward meeting these objectives will be judged in accordance with the faculty member's percentage of effort directed toward teaching, clinical care, research/discovery and administration/service. Annual reviews at which Department Chairs of the School of Medicine (or designee) and the VPDSHP meet with individual faculty to discuss faculty accomplishments, plans for the coming year, and progress toward promotion, are critical to this process. The annual meeting between Department Chair of the School of Medicine or VPDSHP (or their designees) and faculty member should result in documentation of all explicit agreements regarding allocation of effort, goals, plans, and performance expectations. At the time a candidate is proposed for appointment and/or promotion, the Department Chair of the School of Medicine or VPDSHP's letter for the faculty candidate should summarize departmental expectations and goals, and clearly indicate the faculty member's percentage of allocated effort in teaching, clinical care, research/discovery and administration/service.

B. Time Frame. Promotion to Associate Professor usually requires between 4 and 6 years following initial appointment at the rank of Assistant Professor. Promotion to Full Professor usually occurs between 5 and 7 years after first appointment as Associate Professor. There are no time limits on these promotions.

C. Promotions Process. Promotions at the ranks of Instructor and Assistant Professor are not considered by the Appointments and Promotions Committee. At these levels, promotions are reviewed by the Vice Dean for Faculty Affairs and Professional Development (FAPD) and approved by the President, Provost, Dean of the School of Medicine following receipt of the appropriate materials from the Department Chair of the School of Medicine or VPDSHP. Nominations for promotion at the Associate Professor or Professor ranks are considered by the Appointments and Promotions Committee. Following is an outline of the general process for promotion to all ranks.

1. Initial and annual evaluation by the Department Chair of the School of Medicine or VPDSHP. Documentation should include time allocation to the areas of teaching, clinical care, research/discovery and administration/service.
2. Candidate identified for promotion in a Department.
3. Candidate submits required documents to the Department Chair of the School of Medicine or VPDSHP.

4. Department Chair of the School of Medicine or VPDSHP obtains letters of reference.
5. [Optional] Nomination sent to Departmental Promotions Committee for consideration.
6. [Optional] Recommendation from Departmental or School of Health Professions Promotions Committee to the Department Chair of the School of Medicine or VPDSHP.
7. Nomination package forwarded by the Department Chair of the School of Medicine or VPDSHP to the President, Provost and Dean of the School of Medicine in care of FAPD.
8. Packages reviewed by FAPD to assure necessary information is submitted.
9. Nominations at the Instructor/Assistant Professor ranks are reviewed by the Vice Dean for FAPD and approved by the President, Provost, Dean of the School of Medicine.
10. For the ranks of Associate Professor and Professor, the President, Provost and Dean of the School of Medicine forwards the nomination package to the Appointments and Promotions Committee.
11. Nomination reviewed by Appointments and Promotions Committee and recommendation forwarded to President, Provost and Dean of the School of Medicine.
12. Nomination forwarded by the President, Provost and Dean of the School of Medicine to the Academic and Student Affairs Committee for review and recommendation.
13. Academic and Student Affairs Committee forwards recommendation at Associate Professor and Professor ranks to Board of Visitors.
14. Board of Visitors sends letter of confirmation to faculty member and to Department Chair of the School of Medicine or VPDSHP.

#### D. Promotion Nomination Package Required Checklist

1. Department Chair of the School of Medicine or VPDSHP Letter
  - a. Rank at which candidate is being proposed.
  - b. Time in current rank.
  - c. Description of candidate's assigned duties, job description, annual breakdown of percentage of time allocated to the following areas: teaching, clinical care, research/discovery and administration/service. Also comment on major changes, if any, in time allocation in these four areas during the candidate's time in current rank.
  - d. Department Chair of the School of Medicine or VPDSHP evaluation of candidate's ability, experience, accomplishments and performance (i.e., outstanding, excellent) in each of the four areas mentioned above.

2. Letters of Recommendation. Letters of recommendation provide important perspective on the fulfillment of criteria for the candidate seeking promotion. The external and/or internal letters of recommendation are requested and obtained by the Department Chair of the School of Medicine or the Vice President and Dean of the School of Health Professions and should place the academic and scholarly activities of the candidate in context of other academic institutions. A faculty candidate for promotion is not permitted to solicit any letters of recommendation or contact the internal/external referees regarding the letters of recommendation. Letters should be obtained from well-qualified scientists, scholars, educators and clinicians who are able to provide a fair and objective evaluation of the candidate's work. In general, a potential external referee should have at least an "arms-length" relationship with the candidate. The nature of the professional relationship of the candidate and the potential referee must be specified in the letter. Such letters should document how long and in what capacity the individual knows the candidate, a candidate's qualifications and professional expertise for a promotion. Letters should be addressed to the Department Chair of the School of Medicine or VPDSHP.

Specifically, letters of recommendation should:

- Define the relationship between the referee and the candidate

- Reflect on the teaching engagement and skills of the candidate (if relevant)
- Comment on the commitment to clinical practice (if relevant), especially during the period for most recent appointment or promotion
- Address the extent and relevance of scholarly productivity, including strengths and weaknesses
- Reflect on the leadership abilities, qualities and reputation of the candidate, whether in a local, regional or national/international setting
- Comment on the institutional and professional service contributions of the candidate Provide perspectives on the character, skills, productivity, leadership, scholarly context or other qualities of the candidate, especially in relation to expectations at peer academic institutions.
- Any additional insight that may be helpful to the EVMS Appointment and Promotion Committee regarding the candidate's promotion and/or academic appointment

It is not expected for every letter of recommendation to address each aspect noted above, nor would the reflective referee be able to do so. Consequently, to ensure all of these areas are appraised, it is necessary for the candidate to have at least three letters in support of the nomination for promotion from various referees.

- a. For Assistant Professor:
  - i. Three internal and/or external letters are required. They should be obtained from training directors, faculty members at the training institution or other professionals with an academic appointment at an equivalent or higher rank than that for which the candidate is being proposed
  - ii. They should document the candidate's competence in one domain area and participation in at least another domain area of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service)
  
- b. For Associate Professor:
  - i. Three external letters are required. They should be obtained from individuals with an academic appointment at an equivalent or higher rank than that for which the candidate is being proposed
  - ii. They must come from three different institutions
  - iii. One letter may come from an individual who holds a position within institutes/organizations such as the NIH and has previously held an academic appointment at an equivalent or higher rank
  - iv. In addition, up to three recommendation letters can be obtained from faculty or department Chairs of EVMS
  - v. They should address how the candidate is recognized regionally or nationally
  - vi. They should document the candidate's meritorious contributions in one or more domain areas and/or competence in other domain areas of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service)
  
- c. For Professor:
  - i. Three external letters are required. They should be obtained from individuals at an equivalent rank for which the candidate is being proposed.



- ii. They must come from three different institutions, at least two from outside the Commonwealth of Virginia.
  - (1) One letter may come from the Commonwealth of Virginia, but outside EVMS
  - (2) One letter may come from an individual who holds a position within institutes/organizations such as the NIH and has previously held an academic appointment at an equivalent rank
- iii. In addition, up to three recommendation letters can be obtained from faculty or department Chairs of EVMS
- iv. They should address how the candidate is recognized nationally or internationally
- v. They should document excellence in one or more domain areas and meritorious contributions in other domain areas of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service)

2. Curriculum Vitae and Additional Required Information. For the purpose of promotions, the candidate should provide the information requested on the EVMS Curriculum Vitae form, available from FAPD <https://www.evms.edu/facultyaffairs>. In addition, the candidate should provide additional information not already included in the Curriculum Vitae format as required for documentation of scholarly activity as outlined in the Faculty Handbook. All candidates should compile and attach a portfolio on each area (teaching, clinical care, research/discovery and administration/service) in which the individual has time allotted, documenting evidence of quality of teaching, assessments of clinical service and research, and contributions to the department and Medical School.

Policies and Procedures for Faculty Promotion  
Board Approved: September 15, 2020

## **ANNUAL REVIEW OF FACULTY PERFORMANCE**

### **I. POLICY**

It is the policy of EVMS that all EVMS Department Chairs of the School of Medicine or the Vice President and Dean of the School of Health Professions, referred to as academic unit's administrative head, or their designees, annually evaluate all faculty members appointed within their departments or programs with the exception of those faculty members who are appointed with an "Adjunct" or "Visiting" title. Academic units shall make reasonable efforts to inform faculty of the promotion process, including tenure, and encourage participation in professional development activities aligned with their career goals.

### **II. PURPOSE**

EVMS values excellence in teaching, clinical care, research/discovery and administration/ service. The institution believes that an ongoing performance management process supports these values by providing faculty with performance feedback in order to understand what is expected, how they are performing in each four domains as applicable to the faculty member, and what is required to achieve or sustain excellence for promotion or tenure. Specifically, annual reviews of faculty performance are intended to: 1) involve faculty members in the design and evaluation of objectives and goals of their academic programs and in the identification of the performance expectations central to their own personal and professional growth; 2) assess actual performance and accomplishments in the areas teaching, clinical care, research/discovery and administration/service; 3) promote the effectiveness of faculty members through an articulation of the types of contributions they might make to enhance EVMS; 4) provide a written record of faculty performance to support personnel decisions; 5) recognize the special talents, capabilities, and achievements of faculty

members; 6) correct unsatisfactory ratings in one of more areas of responsibility through specific faculty improvement plans designed to correct the deficiencies in a timely manner; and 7) fulfill reappointment, promotion and post-tenure reviews (when appropriate) for faculty.

### III. PROCEDURE

#### A. Review Process.

1. Notice. Faculty Affairs and Professional Development (FAPD) will notify all faculty, chairs and administrators via email in the spring of each year that the annual performance review process has begun with directions and a link to the evaluation form and activity report.

2. Faculty Submission. Each faculty member shall submit an annual evaluation form and any other materials that may be deemed relevant to the academic unit's administrative head of her/his past year's performance and her/his goals and priorities for subsequent year in a timely manner for review. Information provided on the annual evaluation form shall be based on the appropriate criteria for subsequent annual review, reappointment, promotion, and (as applicable) tenure and post-tenure review. In the area of teaching, student evaluation of faculty performance and other expressions of teaching performance are required. Student evaluations of faculty should become available to the academic unit's administrative head from the Office of Medical Education, School of Medicine and School of Health Professions.

3. Review Meeting. The academic unit's administrative head, or designee, shall meet with each faculty to discuss progress toward meeting last year's goals in all domains aligned with the institution's mission areas and determine goals and priorities for the upcoming year in accordance with the faculty's percentage of effort directed toward teaching, clinical care, research/discovery and administration/service. Reasonable efforts shall be made to inform faculty of the promotion process and promotion guidelines, including tenure, and encourage participation in professional development activities aligned with their career goals. If faculty members are making exceptional contributions, they should be encouraged to apply for promotion consistent with guidelines time frame. As soon as possible thereafter, the academic unit administrative head or his/her designee shall prepare a written report of the evaluation that is acknowledged by both parties verifying that the evaluation was completed, and the feedback was read and discussed.

#### 4. Alternate Reviewers and Multiple Appointments.

- a. In the event that the academic unit's administrative head does not have routine contact or knowledge of the performance of a faculty member, she/he may select another individual within the academic unit as a designee (i.e., associate chair, division chief or program director) who is in a supervisory role and has knowledge of the individual faculty member's performance.
- b. When the faculty member holds an appointment that involves an administrative assignment that involves more than 50% effort, the annual performance review shall be conducted by the supervising administrator with appropriate input from other units when appropriate. Decisions on academic advancement remains under the responsibility of the academic unit's administrative head.
- c. When the faculty member holds multiple appointments involving administrative, professional, or other assignments, the annual performance review is conducted by the academic unit's administrative head, or designee, and shall address contributions under each of these assignments.

5. Failure or Denial to Submit. If the faculty member does not timely submit or denies to submit annual performance review information to the academic unit administrative head, or designee, the faculty member shall receive an overall unsatisfactory performance rating, which will initiate the Faculty Improvement Plan described below, unless the administrative head determines the good cause exists for an exception.

6. Review File. A copy of all signed annual evaluations shall be maintained with FAPD as part of the faculty member's academic file.

7. Use of Review. The appropriate Dean of each school as well as the appropriate committees shall have access to the annual performance reports for subsequent annual review, reappointment, promotion, and, if applicable, tenure decisions. Annual performance reviews completed in the last three years, may be considered on the promotion and tenure process, but such evaluations are not determinative on promotion and tenure decisions. Satisfactory ratings in the annual performance reviews do not necessarily indicate successful progress toward promotion and tenure. Progress toward promotion and tenure requires scholarly accomplishment over a period of years in the broader range of faculty responsibilities, and includes evaluation by external referees, which is not part of the annual review process. Criteria and decisions regarding promotion and tenure are detailed in the applicable policies.

B. Unsatisfactory Ratings of Non-Tenure and Tenure Track Faculty.

1. Overall Unsatisfactory Rating. In the event a faculty member receives an overall annual performance review rating as unsatisfactory, the faculty member's immediate supervisor shall work with the faculty member to develop an individualized Faculty Improvement Plan (FIP). The FIP should be created within 30 days after the completion of the annual performance review. It should take into consideration the reasons for under performance by the faculty member including professionalism issues that interfere with the faculty member's performance; lack of knowledge/skills to perform assigned tasks and willful or deliberate neglect of roles, responsibilities or tasks, and include specific benchmarks to enhance faculty's performance over the next academic year period, or may choose to initiate other actions in accordance with institutional policy.

2. Faculty Improvement Plan. The objective of the Faculty Improvement Plan (FIP) is to resume the faculty member's place as a fully contributing member of the faculty. The faculty member must take responsibility for meeting to develop the FIP and submitting any necessary materials in a timely manner, and for following the FIP once it is developed.

- a. FIP aims to address a) two or more areas of performance rated as unsatisfactory; b) one area of performance rated as unsatisfactory, depending on the emphasis assigned to that area or the extent of the deficiency; c) the faculty member's failure to provide annual performance review information on time to their academic unit's administrative head (or designee); d) the faculty's member denial to submit annual performance review information on time to their academic unit's administrative head (or designee); e) ratings of needs improvement in more than one area of performance before they become sufficiently serious to impair the faculty member's overall performance.
- b. FIP will generally:
  - i. Describe specific deficiencies;
  - ii. Provide a list of clear and reasonable outcomes needed to correct deficiencies;
  - iii. Describe the process to be followed to achieve outcomes;
  - iv. Provide the timeline for accomplishing the process, including frequent reviews and feedback;

- v. Describe benchmarks and expectations;
  - vi. Describe the criteria to be used in evaluating progress in the FIP.
- c. The academic unit's administrative head (or designee) develops the plan in collaboration with the faculty member and the appropriate department/unit committee, when available.
  - d. The plan has a maximum of one-year duration, has clear and attainable objectives for the faculty member and includes appropriate interim monitoring and feedback. When appropriate, the plan includes a commitment of departmental or institutional resources (i.e., mentoring, faculty development).
  - e. The plan may also include a reallocation of the faculty member's workload distribution in accord with the department workload standards and is signed by the faculty member, the academic unit's administrative head (or designee) and the Dean of the appropriate School.

3. Expected Outcomes of the Faculty Improvement Plan. Faculty members are expected to demonstrate improvement in the deficient area to a level that meets expectations within one year. If the faculty member fails to demonstrate reasonable progress relative to the benchmarks and performance goals, dismissal for cause or non-renewal of contract may be initiated, and if initiated will proceed in accordance with the applicable policies.

4. Refusal to Participate. If the faculty member refuses to participate in the development of the Faculty Improvement Plan, an unsatisfactory rating will be assigned to the faculty, which will initiate other actions in accordance with institutional policy.

#### C. Appeals of Annual Performance Review Ratings.

Faculty members have the right to appeal their overall annual performance review when: 1) there are errors of fact that may impact the rating; or 2) the facts may be correct, but there is disagreement about the supervisor's judgment of the rating by providing additional information to the next administrative level, ordinarily to the academic unit's administrative head. If the disagreement cannot be resolved to the satisfaction of the faculty member, then the faculty member may appeal their reviews with the Dean of the appropriate School through the office of FAPD. Such appeals must be made in writing within 30 days from the date of the written annual performance review and must state with specificity: 1) the findings to be appealed; 2) the points of disagreement; 3) the facts in support of the appeal; and 4) the corrective action sought. The document should not exceed three pages in length.

The administrator reviewing the appeal will consider the facts in support of the appeal and develop any additional facts deemed necessary. The decision on the appeal, which represents the final evaluation, will be completed in writing within 30 days, with copies provided to the faculty member, the administrative head involved in the annual performance review and the office of FAPD.

Annual Review of Faculty Performance  
Board Approved: September 15, 2020

## **FACULTY TENURE POLICY**

### **I. INTRODUCTION AND POLICY**

A decision to award tenure allows EVMS to retain its best faculty and preserve academic freedom. EVMS extends tenure based on the merit of the faculty member and the needs of EVMS to approved full time salaried faculty holding or being promoted to the rank of Professor or Associate Professor in accordance with this Policy.

### **II. TENURE ELIGIBILITY AND CRITERIA**

A. Tenure Definition. Tenure relates to faculty rank and salary and is the status granted to qualified faculty members which is reviewed at five-year intervals and which protects faculty from dismissal, except for Cause, Reallocation of Institutional Resources, and Severe Institutional Distress as set forth in the Grounds for Dismissal of Faculty Policy.

B. Length of Service Requirements.

1. Initial appointees at the rank of Associate Professor (and faculty members promoted to the rank of Associate Professor) may be considered for tenure after three (3) years of service as Associate Professor at EVMS.

2. Initial appointees at the rank of Professor may be considered for tenure after two (2) years of service as Professor at EVMS.

3. Department Chairs of the School of Medicine or the VPDSHP at the professorial level may be considered for tenure at the time of initial appointment.

4. The foregoing probationary periods may be modified or waived upon recommendation of the Departmental Chair of the School of Medicine or VPDSHP and with the concurrence of the Tenure Committee, the President, and the Board of Visitors. After the passage of these probationary periods of appointment and review, tenure may be granted or the faculty member may remain on a term contract basis with the institution applicable to all other non-tenured faculty.

5. Tenure is unrelated to the administrative position of a Department Chair or Program Director.

6. The terms and conditions of every tenure appointment and any revisions will be stated in writing at the time of the appointment, be provided to the affected faculty member, and be made a part of the academic faculty file.

7. A tenured faculty member relinquishes appointment with tenure upon resignation or termination of employment from EVMS.

C. Eligibility

1. Full-time faculty in the Basic Science Departments and School of Health Professions are eligible to be considered for tenure and with full base salary. Full base salary is defined as the current level of compensation (not including incentive or bonus pay) for a faculty member, but not to exceed the average salary of the tenured faculty within the relevant rank and department.

2. Full-time faculty in the Clinical Science Departments at the rank of Associate Professor or Professor are eligible to be considered for tenure. For the purposes of tenure, the base salary for clinical faculty is defined as the current average base salary support provided to the appropriate rank and department by EVMS.

3. The ceiling for the number of tenured positions for full-time faculty is established by the President, Provost and Dean of the School of Medicine from time to time with the approval of the Board of Visitors.

#### D. Criteria For Tenure Appointment.

1. EVMS, to encourage all faculty members to achieve excellence in major academic activities, may award tenure to faculty members at the rank of Associate Professor or Professor, provided a departmental or School of Health Profession tenure position is available in the appropriate department or School of Health Professions and the Department Chair of the School of Medicine or VPDSHP so recommends.

2. Tenure decisions are based on rigorous standards of quality of performance. Therefore, all tenure decisions shall involve high academic unit standards and shall also involve comparisons of the qualifications of the candidate for tenure with the qualifications of those faculty who are at a similar stage in their careers and who might be available to the academic unit. Consistent with these guidelines, under which tenure is a privilege that is awarded by the institution in recognition of distinguished performance, the question to be asked when faculty members are considered for promotion to tenure is not whether that have performed adequately or even well during their previous years of their faculty appointment whether they have achieved distinction in their field and show promise of continued professional growth. The criteria used for awarding tenure include a higher level of effectiveness in four (4) areas:

- a. Research/Discovery and publication;
- b. Teaching;
- c. Patient care; and
- d. Administration/Service.

3. The applicant must demonstrate excellence in at least two (2) of the foregoing four (4) areas.

4. The Department Chair of the School of Medicine or VPDSHP must demonstrate that there is a need for the knowledge and skills of the candidate in the departmental/school program, and that such knowledge and skills will enable the department/school to substantially assist the EVMS to achieve its mission.

### **III. TENURE APPOINTMENT AND REVIEW**

A. Tenure Committee. The Tenure Committee is charged to evaluate faculty for tenure and post-tenure reviews. The Tenure Committee shall be appointed by the President, Provost and Dean of the School of Medicine and shall consist of nine (9) tenured faculty members who shall serve for three-year terms.

## B. Initial Tenure Review and Appointment Procedures.

1. Each nomination for an initial review of faculty tenure status must originate with a letter of nomination from the Department Chair of the School of Medicine or VPDSHP addressed to the President, Provost and Dean of the School of Medicine in care of Faculty Affairs and Professional Development (FAPD). A letter of nomination should contain the following documentation:

- a. Description and evaluation of the candidate's teaching abilities and responsibilities.
- b. Evaluation of the quality, originality, and significance of the candidate's research. A description of work in progress and relevant sources of funding should be included.
- c. Description and evaluation of administrative and other services to the department and EVMS.
- d. Description of the role of the candidate in the department's program and the effect of the Institution's long-term commitment to the faculty member on the balance of skills required for a well-ordered department.
- e. Letters from faculty/students of EVMS knowledgeable of the faculty member's qualifications should accompany the letter of the Department Chair of the School of Medicine or VPDSHP. In addition, a list of four professional colleagues, external to EVMS, knowledgeable of the candidate's qualifications should be provided. The President, Provost and Dean of the School of Medicine through the office of FAPD will contact at least two of them for recommendation relating to the nominee's candidacy for tenure.
- f. Summation of the grounds on which the recommendation is based.

2. For Faculty who are also being nominated for promotion, the nomination package shall be submitted to the Appointments and Promotions Committee first to ensure that faculty nominated for tenure and promotion meet the guidelines for promotion/rank. Promotions will be considered as outlined in the Policies and Procedures for Faculty Promotion.

3. Promotions approved by the Appointments and Promotions Committee, and nomination packages for eligible faculty without a request for promotion, will be sent to the Tenure Committee for review. Recommendations of the Tenure Committee will be sent to the President, Provost and Dean of the School of Medicine and if approved, to the Board of Visitors for final approval and action.

## C. Post-Tenure Review

1. All tenured faculty will undergo a post-tenure review at five-year intervals for approval of tenure for an additional five-year period.

2. The Department Chair of the School of Medicine or VPDSHP shall submit a letter addressed to the President, Provost and Dean of the School of Medicine for submission to the Tenure Committee through the office of FAPD for review that outlines the basis for the original (or previous) award of tenure, the faculty member's accomplishments, and an assessment with documentation of whether the tenured faculty member's performance was consistent with the criteria for tenure. For a Department Chair of the School of Medicine or VPDSHP, such assessment will be done by the President, Provost and Dean of the School of Medicine.

3. The Tenure Committee will be notified and will consider in its review any annual reviews with a summary evaluation lower than “meeting expectations.”

4. It is recognized that standards for tenure may change over time. As we improve our quality standards for faculty performance, faculty who may have qualified for appointment, promotion or tenure previously may not meet more current standards. As we state and invoke higher standards, however, we should avoid unfairness to previously appointed faculty member, which might be caused by retroactive application of higher standards without reasonable time and opportunity to meet these standards.

5. The recommendation of the Tenure Committee will be sent to the President, Provost and Dean of the School of Medicine for approval.

6. If the recommendation of the Tenure Committee is that tenure should not be awarded after its post-tenure review, and the President, Provost and Dean of the School of Medicine approves the recommendation, the faculty will have a grace period not exceeding two years to redress tenure deficiencies. If after this grace period, the faculty member has not successfully redressed his/her deficiencies as determined by the Tenure Committee and approved by the President, Provost and Dean of the School of Medicine, contractual obligations for faculty without tenure shall apply.

Faculty Tenure Policy

Board Approved: September 15, 2020



## **FACULTY GRIEVANCE POLICY**

### **I. Introduction and Policy**

It is the policy of EVMS that all faculty be given an opportunity to grieve in accordance with this policy and the procedures outlined herein. Disputes are best resolved amicably and informally through effective communication, and it is required that any Grievant shall have attempted to resolve any dispute in good faith before invoking the grievance process set forth in this policy. Similarly, faculty should understand that reviewing a formal grievance will involve a major investment of their colleagues' time and should use the grievance process only to resolve important issues and shall not file malicious or frivolous grievances or otherwise abuse the process.

### **II. Definitions**

For purposes of this policy, the following definitions apply:

*Action* – a decision, action, or inaction, whether written or otherwise, by an EVMS administrative officer or body acting in an official capacity.

*Chair* – the Chair of the Grievance Committee who is the Member-at-large of the Faculty Senate Executive Committee.

*Committee* – the Grievance Committee

*Grievable Matters* – matters that are grievable under this policy as outlined in Section III below.

*Grievance* – the formal, written complaint about a Grievable Matter that details the specifics giving rise to the matter and asks EVMS to take a formal course of action.

*Grievant* – the faculty member filing the Grievance.

*Respondent* – the administrative officer or body whose Action is the basis for the Grievance.

### **III. Grievable Matters and Exclusions**

A. Grievable Matters. A Grievable Matter is a matter that arises when a faculty member has been directly and adversely professionally affected by an Action that deviated materially from the existing policies and procedures of EVMS or was arbitrary, capricious, unreasonable, or contrary to the facts.

B. Exclusions. Certain matters that are not faculty or academic matters and/or where EVMS has a legal duty to address an issue (e.g., matters of discrimination or sexual harassment) are not intended to be Grievable Matters. Specifically, the following are not Grievable Matters:

1. Discrimination, harassment, retaliation, hostile working environment, or workplace violence allegations;
2. The amount or source of compensation including annual increases and co-terminus provisions;
3. Allegations regarding students or student conduct;

4. Any Grievance review or recommendation made by the Committee;
5. Decisions by the EVMS Institutional Review Board and the Institutional Animal Care and Use Committee;
6. An act by EVMS pursuant to federal or state law, directive of the Board of Visitors, or any governing body that regulates EVMS.

C. Grievable Matter Determinations. Decisions about whether a matter is a Grievable Matter will be made by the Grievance Committee in accordance with Section VII below.

#### **IV. Required Preliminary Steps by Grievant**

A. Exhaustion of Existing Procedures. A Grievant must first timely pursue and exhaust any existing administrative or academic procedures for review of the Action, including an appeal, prior to grieving a matter under this policy. For such matters that include an applicable appeal process, the Grievant must timely file an appeal and the date of the Action shall be considered the date of the final disposition of the appeal.

##### **B. Informal Resolution**

1. With the exception of non-renewal of faculty appointment, matters involving a decision by an EVMS administrative body, or matters that have received a final determination through an appeals process, which may proceed with filing a Grievance under Section V, a Grievant who desires to grieve a matter under this policy shall first meet with the Respondent to attempt informal resolution within 60 days of the Action.

2. EVMS Faculty Affairs and Professional Development will appoint a neutral EVMS faculty member or staff to attend the informal resolution meeting if requested by either the Grievant or the Respondent. Such person shall act in an advisory capacity only.

3. The Grievant shall provide all relevant documents to the Respondent prior to the informal resolution meeting.

4. If the matter is not resolved to the Grievant's satisfaction after the informal resolution meeting, or if the Respondent refuses to meet with the Grievant after two documented attempts by the Grievant, the Grievant may proceed with filing a Grievance as outlined in Section V.

#### **V. Grievance**

##### **A. Statement of Grievance**

1. The written statement of Grievance shall not exceed 1000 words and must contain the following elements:

- a. A statement as to the alleged Action, the date of the Action, and how the Grievant has been negatively affected.
- b. A brief history or statement of facts that gave rise to the Grievance.

- c. Identification of applicable policies and procedures on which the Grievance is based, if any.
- d. The date and outcome of any required preliminary steps as outlined in Section IV, if applicable.
- e. An explanation or reference to any attachments that will be included with the Statement of Grievance.
- f. The remedy sought by the Grievant as more specifically described in Section X.

2. The Grievant shall attach all relevant documentation that will assist the Grievance Committee in reviewing the Grievance.

3. The Grievance, including the attachments, shall contain sufficient detail and be clear as to the chronology, events, and basis for the Grievance.

B. Informal Meeting with Chair. A Grievant may contact the Chair to schedule an informal meeting to obtain guidance on his/her grievance.

C. Filing. The Grievance shall be filed electronically via email with the Chair within 90 days of the date of the Action and must be combined into one PDF document, including attachments. For such matters that have an applicable appeal process, the date of the Action shall be considered the date of the final disposition of a timely appeal. In cases where the Grievant is on approved leave from EVMS or can demonstrate that he or she was unable to meet the Grievance deadline due to mitigating circumstances, the Chair may extend the Grievance filing period in his or her sole discretion.

## **VI. Grievance Committee**

The President of the Faculty Senate shall select four members from the Faculty Senate to serve on the Grievance Committee in addition to the Chair. The President of the Faculty Senate shall consider any conflicts of interest when appointing the Grievance Committee. At any time during the Grievance process, the Chair or Committee may consult with the EVMS Office of the General Counsel to seek advice on legal and procedural matters.

## **VII. Initial Review by Grievance Committee**

A. Initial Review. Within 60 days of receipt of the Grievance, the Grievance Committee shall review the Grievance to determine whether:

- 1. The subject of the Grievance is a Grievable Matter in accordance with Section III;
- 2. The requested remedy is within EVMS' power to grant, is reasonable and appropriate, and would not disregard any EVMS policy or procedure if implemented in accordance with Section X;
- 3. The Grievance has been timely filed in accordance with Section V(C);
- 4. Required preliminary steps in accordance with Section IV have occurred; and
- 5. The requirements for the Statement of Grievance, as outlined in Section V(A) have been met.

**B. Deficient Grievances.**

1. If the Committee determines that the Grievance is deficient because it does not meet a requirement set forth in Section VII (A) 1-4, the Grievance shall be rejected and the Chair shall provide such written notice.

2. If the Committee determines that the Grievance is deficient because it does not meet the requirements for the Statement of Grievance, as outlined in Section V(A), the Chair shall notify the Grievant of the deficiencies and provide the Grievant with 30 days to correct all deficiencies and return to the Chair. The Committee shall have 60 days to review a revised Grievance. If the Grievance remains deficient, the Committee may reject the Grievance. At any time, the Chair may meet with the Grievant in order to provide or obtain clarification from the Grievant.

**C. Sufficient Grievances; Notice to Respondent.** If all requirements outlined in Section VII(A) have been met, the Chair shall notify the Grievant that the Grievance is accepted and provide the Respondent with notice of the Grievance, including a copy of the Grievance and all supporting documentation. The Respondent shall provide a response to the Grievance within 30 days, which shall not exceed 1000 words, shall include an explanation or reference to any attachments that will be included, and shall attach all relevant documentation that will assist the Grievance Committee in reviewing the Grievance.

**VIII. Mediation**

Upon receipt of the response from Respondent, the Committee shall consider whether the matter may be suited to an informal mediation, which, if determined, shall be arranged and guided by the Chair with support and involvement by the Committee, and may include but is not limited to, informal fact gathering and individual or collective discussions with the Grievant and Respondent. The Chair may request assistance from the Office of Faculty Affairs and Professional Development or other EVMS office, as applicable. The informal mediation process shall be concluded within 90 days unless extended in accordance with Section XIII(B). If the Grievant accepts the outcome of the informal mediation, the Grievance shall be considered withdrawn. If the Grievant is not satisfied with the outcome of informal mediation, or if the Committee determined that the matter was not suited for informal mediation, the matter shall proceed to a review and hearing by the Grievance Committee.

**IX. Review by Grievance Committee**

A. Hearing. The Chair, or his/her designee, shall schedule a hearing no later than 90 days after the later of receipt of Respondent's Grievance response or the conclusion of the informal mediation.

B. Notice. The Chair will provide a written notice to the Grievant and Respondent of the date, time, and location of the hearing that, at a minimum, specifies that:

1. If any party does not appear, the hearing will be held in their absence;
2. The Grievant and Respondent may each bring an advisor of their choosing (see Section C2 below); and
3. The Grievant and Respondent must provide the Chair with the names of any witnesses.

### C. Attendance.

1. Grievance Committee. A majority of the Grievance Committee shall attend the hearing. The President of the Faculty Senate may appoint alternates to serve in the place of Committee members that are unable to attend.

2. Advisors. The Grievant and Respondent may each invite an individual EVMS faculty or staff member to serve in an advisory capacity at the Grievance hearing. Advisors can be present throughout the entire hearing to provide support and advice to their advisee and/or to observe the proceedings. Although a Grievant and Respondent may seek legal guidance at any time during the grievance process, attorneys may not act as advisors or otherwise represent the Grievant or Respondent at Grievance hearings. Advisors may not also be witnesses and no advisor may provide testimony, make statements or speak on behalf of their advisee, or otherwise participate in the hearing.

3. Witnesses. Witnesses must be physically present and shall be permitted to attend only that portion of the hearing to provide testimony or as requested or approved by the Chair. If a witness is unable to attend, the Grievant or Respondent may submit a written statement prepared and signed by the witness with prior approval of the Chair. The Chair may require that the written statement be notarized.

4. Other Attendees. The hearing will be closed to other attendees except that the Chair may request or permit other attendees to assist the Committee as necessary and the Grievant may request that the hearing be open to EVMS faculty and staff. If the Grievant requests an open hearing, the hearing will be open to only as many faculty and staff that may be accommodated in the hearing room and will not be broadcast.

### D. Hearing Procedure.

1. The Chair shall preside over the hearing and shall:

- a. Maintain control over the hearing and direct the proceedings to ensure that sufficient time is allotted to each party.
- b. Allow the Grievant and Respondent, and their respective witnesses, to present evidence and ensure that anyone providing evidence responds to questions by the Committee on his/her own behalf. The Chair may also limit the number of witnesses to prevent repetitive or cumulative testimony and may grant adjournments as deemed necessary. Formal rules of evidence do not apply and there will be no cross-examination.
- c. Address any evidentiary concerns prior to and/or during the hearing including, but not limited to, excluding irrelevant, immaterial, or new allegations or evidence; or advising the Grievance Committee to disregard evidence lacking in credibility or that is improperly prejudicial (i.e. rumors).
- d. Adjourn the hearing at its conclusion. The hearing shall not exceed one and a half hours in length.

2. The Grievant has the burden of proving that he/she has been directly and adversely professionally affected by the Action of the Respondent which deviated materially from the existing policies and procedures of EVMS, or was arbitrary, capricious, unreasonable, or contrary to the facts and that such injury is remediable.

3. The hearing will be audio recorded.

E. Deliberations. After the conclusion of the hearing, the Grievance Committee shall meet to determine its findings, conclusions, and recommendation for dismissal or remedy of the Grievance.

F. Information Requests. At any time before or after the hearing, the Chair or Committee may request additional information or clarification from the Grievant or Respondent and may request information or documentation from within EVMS. The Committee may request assistance from the Office of Faculty Affairs and Professional Development or other EVMS office.

G. Post-Hearing Report. Within 30 days of the hearing, the Grievance Committee will prepare a written report to the EVMS President which shall contain the history of the Grievance, the findings of facts by the Grievance Committee, and the Committee's recommendation for action, including remedies, with all documents received by the Committee attached. The Committee may request additional time to prepare the written report from the President when necessary.

## **X. Remedies**

A Grievant may request, and the Grievance Committee may consider and recommend, any remedy appropriate for the Grievance that would reasonably resolve or correct the matter and that EVMS has the authority to provide, that is appropriate to the Grievance, and does not disregard existing EVMS policies and procedures. A remedy may include a proper reconsideration of the matter through the applicable procedures of EVMS. The Committee may decline to review a Grievance that requests a remedy that is not within EVMS' authority to provide, is clearly unreasonable or inappropriate, including enlisting resources outside of EVMS, or that would disregard any EVMS policy or procedure.

## **XI. Decision by the President**

Upon receipt of the Committee's report and recommendations, the President, in his sole discretion, may decide to accept, alter, or reject the recommendation of the Committee. The recommendation of the Grievance Committee is not binding on the President. The President shall issue a written decision to the Grievant, with a copy to the Respondent, the Chair, and Office of Faculty Affairs and Professional Development, within 30 days of receipt of the Grievance Committee's recommendations. Additional time may be provided at the discretion of the Grievance Committee. The decision of the President shall be final. The President shall cause the implementation of any remedy provided in his decision.

## **XII. Abuse of process, Malicious Grievances, or Frivolous Grievances**

A Grievant must proceed with a Grievance in good faith. If at any time the Grievance Committee determines that a Grievant has filed a malicious or frivolous grievances, has falsified information submitted in the Grievance, or is otherwise abusing the grievance process with repetitive and cumulative Grievances, the Grievance Committee may deny and reject the Grievance and the Grievant may be subject to disciplinary action.

## **XIII. Records and Time Extensions**

A. Records. For Grievances that are rejected by the Grievance Committee or which are concluded through mediation as set forth in Section VIII, the Chair shall forward all documentation received and a copy of the Committee's decision or resolution to the Office of Faculty Affairs and Professional

Development to be maintained. For Grievances that continue through a hearing, the Chair shall forward a copy of the Post-hearing report and the recording of the hearing to the Office of Faculty Affairs and Professional Development to be maintained.

B. Time Extensions. The Grievance Committee may grant reasonable time extensions upon requests made prior to the expiration of such deadlines or when it determines that an extension is reasonable and necessary.

Faculty Affairs, Faculty Grievance Policy  
Board Approved: March 10, 2020

## **GROUNDS FOR DISMISSAL OF FACULTY**

The appointment of tenured and non-tenured faculty may be revoked and terminated and the faculty member dismissed from the faculty during the term of his appointment for any one of the following reasons or grounds.

### **A. Dismissal for “Just Cause”**

Adequate cause for a dismissal will be related, directly and substantially, to the fitness of the faculty member in his/her professional capacity as a teacher, researcher, or provider of patient care. Dismissal will not be used to restrain the faculty member in the exercise of academic freedom or other rights of an American citizen.

Faculty members holding tenured or non-tenured faculty appointments may be dismissed during the term of their appointment for “Just Cause” only after a hearing conducted by their Department Chair of the School of Medicine or VPDSHP with a right of appeal through the grievance process as specified in the Policies and Procedures Manual. “Just Cause” is defined as any act or patterns of behavior considered to be seriously detrimental to the interests of the Medical School, its faculty, its students, or its employees, including, but not limited to, the following:

1. Neglect of duty, including, but not limited to, serious violation of faculty rules for governance or corporate by-laws, rules, and regulations.
2. Violation of generally accepted standards of professional ethics.
3. Material breach of contract with the Medical School.
4. Conviction of a crime deemed to render the faculty member unfit to carry out his or her professional activities.
5. Professional incompetence.
6. Refusal to perform legitimate work assigned by the faculty member’s supervisor, Department Chair of the School of Medicine or VPDSHP.

### **B. Dismissal Because of Reallocation of Institutional Resources**

Faculty members holding tenure may be terminated and/or faculty holding non-tenured appointments may be terminated during the term of their appointments in the event the institution is confronted with the need to reallocate institutional resources due to changes in institutional programs, facilities, policies, goals, or purposes. Dismissals and terminations necessitated by such reallocation of institutional resources shall be processed in accordance with the following procedures:

1. In the event programmatic changes in the institution’s activities are determined by the President, Provost and Dean of the School of Medicine to be of sufficient magnitude to require the termination of non-tenured faculty contracts or the termination of tenured faculty positions, the President, Provost and Dean of the School of Medicine will present such determination and recommendation to the President, Provost and Dean of the School of Medicine’s Executive Committee and will make a copy available to the Faculty Senate and to the Council of Chairs.
2. After an appropriate period for communication of faculty concerns, the President, Provost and Dean



of the School of Medicine's Executive Committee will consider the President, Provost and Dean of the School of Medicine's determination and recommendation. Should the President, Provost and Dean of the School of Medicine's Executive Committee concur with the President, Provost and Dean of the School of Medicine's determination and recommendation that programmatic changes are appropriate and should involve the termination of non-tenured faculty during the term of their appointment and/or the termination of tenured faculty positions, then the Den/Provost will follow the same procedures and apply the same factors for selecting specific faculty positions for termination (with appropriate participation by the President, Provost and Dean of the School of Medicine's Executive Committee and the Board of Visitors) as are applicable in the case of dismissal of faculty because of severe institutional financial distress, as specified in section C. Should the President, Provost and Dean of the School of Medicine's Executive Committee not agree, then the procedure specified in section C-3 will apply.

3. Neither tenured faculty nor non-tenured faculty during their term of appointment will be dismissed until the President, Provost and Dean of the School of Medicine has given due consideration to the practicality of placing dismissed faculty in another department or facility of the Medical School.

### **C. Dismissal for Severe Institutional Financial Distress**

Faculty members holding tenure and non-tenured faculty during the term of their appointment may be dismissed in the event EVMS is confronted with a "severe institutional financial distress", but only after such distress has been determined to exist in accordance with the following procedures:

1. In the event the President, Provost and Dean of the School of Medicine determines that, in his/her opinion, a financial situation exists which places the institution in such financial jeopardy that the termination of tenured and non-tenured faculty positions may be necessary, then the President, Provost and Dean of the School of Medicine shall discuss such financial condition with the President, Provost and Dean of the School of Medicine's Executive Committee and the Faculty Senate.
2. In the event the President, Provost and Dean of the School of Medicine's Executive Committee, after consultation with the Faculty Senate, concur that termination of non-tenured faculty contracts and/or termination of tenured faculty positions should solely (and/or in addition to other solutions) be involved in eliminating such financial distress, then the President, Provost and Dean of the School of Medicine, in consultation with individual Department Chairs of the School of Medicine or the VPDSHP, will proceed to make the decision concerning which, if any, non-tenured faculty will be subject to termination and which, if any, tenured faculty will be terminated.
3. In the event the President, Provost and Dean of the School of Medicine's Executive Committee does not concur with the President, Provost and Dean of the School of Medicine that a severe institutional financial distress exists, then a special meeting of the President, Provost and Dean of the School of Medicine's Executive Committee, the President, Provost and Dean of the School of Medicine, and the Board of Visitors will be convened to fully consider whether or not there exists a severe institutional distress requiring tenured and/or non-tenured faculty positions to be terminated. The decision of the Board following such joint meeting will be final.
4. The determination of which non-tenured faculty positions shall be terminated and/or which tenured faculty positions shall be terminated will be made by the President, Provost and Dean of the School of Medicine, whose decision shall be final. A report of the President, Provost and Dean of the

School of Medicine's decision shall be made to the President, Provost and Dean of the School of Medicine's Executive Committee, and the President, Provost and Dean of the School of Medicine's decision will be reported for approval to the Board of Visitors.

5. In arriving at his decisions with respect to the termination of non-tenured faculty positions and/or the termination of tenured faculty positions, the President, Provost and Dean of the School of Medicine will take into consideration at least the following factors:
  - a. Tenure (in no case will tenured faculty be terminated in favor of retaining a faculty member without tenure in the same department);
  - b. Time remaining on non-tenured faculty members' term contracts;
  - c. Seniority;
  - d. Performance evaluations;
  - e. Education, research, and patient care needs of the institution.

## **ANNUAL REVIEW OF FACULTY PERFORMANCE**

### **I. POLICY**

It is the policy of EVMS that all EVMS Department Chairs of the School of Medicine or the Vice President and Dean of the School of Health Professions, referred to as academic unit's administrative head, or their designees, annually evaluate all faculty members appointed within their departments or programs with the exception of those faculty members who are appointed with an "Adjunct" or "Visiting" title. Academic units shall make reasonable efforts to inform faculty of the promotion process, including tenure, and encourage participation in professional development activities aligned with their career goals.

### **II. PURPOSE**

EVMS values excellence in teaching, clinical care, research/discovery and administration/ service. The institution believes that an ongoing performance management process supports these values by providing faculty with performance feedback in order to understand what is expected, how they are performing in each four domains as applicable to the faculty member, and what is required to achieve or sustain excellence for promotion or tenure. Specifically, annual reviews of faculty performance are intended to: 1) involve faculty members in the design and evaluation of objectives and goals of their academic programs and in the identification of the performance expectations central to their own personal and professional growth; 2) assess actual performance and accomplishments in the areas teaching, clinical care, research/discovery and administration/service; 3) promote the effectiveness of faculty members through an articulation of the types of contributions they might make to enhance EVMS; 4) provide a written record of faculty performance to support personnel decisions; 5) recognize the special talents, capabilities, and achievements of faculty

members; 6) correct unsatisfactory ratings in one of more areas of responsibility through specific faculty improvement plans designed to correct the deficiencies in a timely manner; and 7) fulfill reappointment, promotion and post-tenure reviews (when appropriate) for faculty.

### III. PROCEDURE

#### A. Review Process.

1. Notice. Faculty Affairs and Professional Development (FAPD) will notify all faculty, chairs and administrators via email in the spring of each year that the annual performance review process has begun with directions and a link to the evaluation form and activity report.

2. Faculty Submission. Each faculty member shall submit an annual evaluation form and any other materials that may be deemed relevant to the academic unit's administrative head of her/his past year's performance and her/his goals and priorities for subsequent year in a timely manner for review. Information provided on the annual evaluation form shall be based on the appropriate criteria for subsequent annual review, reappointment, promotion, and (as applicable) tenure and post-tenure review. In the area of teaching, student evaluation of faculty performance and other expressions of teaching performance are required. Student evaluations of faculty should become available to the academic unit's administrative head from the Office of Medical Education, School of Medicine and School of Health Professions.

3. Review Meeting. The academic unit's administrative head, or designee, shall meet with each faculty to discuss progress toward meeting last year's goals in all domains aligned with the institution's mission areas and determine goals and priorities for the upcoming year in accordance with the faculty's percentage of effort directed toward teaching, clinical care, research/discovery and administration/service. Reasonable efforts shall be made to inform faculty of the promotion process and promotion guidelines, including tenure, and encourage participation in professional development activities aligned with their career goals. If faculty members are making exceptional contributions, they should be encouraged to apply for promotion consistent with guidelines time frame. As soon as possible thereafter, the academic unit administrative head or his/her designee shall prepare a written report of the evaluation that is acknowledged by both parties verifying that the evaluation was completed, and the feedback was read and discussed.

#### 4. Alternate Reviewers and Multiple Appointments.

- a. In the event that the academic unit's administrative head does not have routine contact or knowledge of the performance of a faculty member, she/he may select another individual within the academic unit as a designee (i.e., associate chair, division chief or program director) who is in a supervisory role and has knowledge of the individual faculty member's performance.
- b. When the faculty member holds an appointment that involves an administrative assignment that involves more than 50% effort, the annual performance review shall be conducted by the supervising administrator with appropriate input from other units when appropriate. Decisions on academic advancement remains under the responsibility of the academic unit's administrative head.
- c. When the faculty member holds multiple appointments involving administrative, professional, or other assignments, the annual performance review is conducted by the academic unit's administrative head, or designee, and shall address contributions under each of these assignments.

5. Failure or Denial to Submit. If the faculty member does not timely submit or denies to submit annual performance review information to the academic unit administrative head, or designee, the faculty member shall receive an overall unsatisfactory performance rating, which will initiate the Faculty Improvement Plan described below, unless the administrative head determines the good cause exists for an exception.

6. Review File. A copy of all signed annual evaluations shall be maintained with FAPD as part of the faculty member's academic file.

7. Use of Review. The appropriate Dean of each school as well as the appropriate committees shall have access to the annual performance reports for subsequent annual review, reappointment, promotion, and, if applicable, tenure decisions. Annual performance reviews completed in the last three years, may be considered on the promotion and tenure process, but such evaluations are not determinative on promotion and tenure decisions. Satisfactory ratings in the annual performance reviews do not necessarily indicate successful progress toward promotion and tenure. Progress toward promotion and tenure requires scholarly accomplishment over a period of years in the broader range of faculty responsibilities, and includes evaluation by external referees, which is not part of the annual review process. Criteria and decisions regarding promotion and tenure are detailed in the applicable policies.

B. Unsatisfactory Ratings of Non-Tenure and Tenure Track Faculty.

1. Overall Unsatisfactory Rating. In the event a faculty member receives an overall annual performance review rating as unsatisfactory, the faculty member's immediate supervisor shall work with the faculty member to develop an individualized Faculty Improvement Plan (FIP). The FIP should be created within 30 days after the completion of the annual performance review. It should take into consideration the reasons for under performance by the faculty member including professionalism issues that interfere with the faculty member's performance; lack of knowledge/skills to perform assigned tasks and willful or deliberate neglect of roles, responsibilities or tasks, and include specific benchmarks to enhance faculty's performance over the next academic year period, or may choose to initiate other actions in accordance with institutional policy.

2. Faculty Improvement Plan. The objective of the Faculty Improvement Plan (FIP) is to resume the faculty member's place as a fully contributing member of the faculty. The faculty member must take responsibility for meeting to develop the FIP and submitting any necessary materials in a timely manner, and for following the FIP once it is developed.

- a. FIP aims to address a) two or more areas of performance rated as unsatisfactory; b) one area of performance rated as unsatisfactory, depending on the emphasis assigned to that area or the extent of the deficiency; c) the faculty member's failure to provide annual performance review information on time to their academic unit's administrative head (or designee); d) the faculty's member denial to submit annual performance review information on time to their academic unit's administrative head (or designee); e) ratings of needs improvement in more than one area of performance before they become sufficiently serious to impair the faculty member's overall performance.
- b. FIP will generally:
  - i. Describe specific deficiencies;
  - ii. Provide a list of clear and reasonable outcomes needed to correct deficiencies;
  - iii. Describe the process to be followed to achieve outcomes;
  - iv. Provide the timeline for accomplishing the process, including frequent reviews and feedback;

- v. Describe benchmarks and expectations;
  - vi. Describe the criteria to be used in evaluating progress in the FIP.
- c. The academic unit's administrative head (or designee) develops the plan in collaboration with the faculty member and the appropriate department/unit committee, when available.
  - d. The plan has a maximum of one-year duration, has clear and attainable objectives for the faculty member and includes appropriate interim monitoring and feedback. When appropriate, the plan includes a commitment of departmental or institutional resources (i.e., mentoring, faculty development).
  - e. The plan may also include a reallocation of the faculty member's workload distribution in accord with the department workload standards and is signed by the faculty member, the academic unit's administrative head (or designee) and the Dean of the appropriate School.

3. Expected Outcomes of the Faculty Improvement Plan. Faculty members are expected to demonstrate improvement in the deficient area to a level that meets expectations within one year. If the faculty member fails to demonstrate reasonable progress relative to the benchmarks and performance goals, dismissal for cause or non-renewal of contract may be initiated, and if initiated will proceed in accordance with the applicable policies.

4. Refusal to Participate. If the faculty member refuses to participate in the development of the Faculty Improvement Plan, an unsatisfactory rating will be assigned to the faculty, which will initiate other actions in accordance with institutional policy.

#### C. Appeals of Annual Performance Review Ratings.

Faculty members have the right to appeal their overall annual performance review when: 1) there are errors of fact that may impact the rating; or 2) the facts may be correct, but there is disagreement about the supervisor's judgment of the rating by providing additional information to the next administrative level, ordinarily to the academic unit's administrative head. If the disagreement cannot be resolved to the satisfaction of the faculty member, then the faculty member may appeal their reviews with the Dean of the appropriate School through the office of FAPD. Such appeals must be made in writing within 30 days from the date of the written annual performance review and must state with specificity: 1) the findings to be appealed; 2) the points of disagreement; 3) the facts in support of the appeal; and 4) the corrective action sought. The document should not exceed three pages in length.

The administrator reviewing the appeal will consider the facts in support of the appeal and develop any additional facts deemed necessary. The decision on the appeal, which represents the final evaluation, will be completed in writing within 30 days, with copies provided to the faculty member, the administrative head involved in the annual performance review and the office of FAPD.

Annual Review of Faculty Performance  
Board Approved: September 15, 2020

## **EMERITUS FACULTY APPOINTMENTS POLICY**

Emeriti status at EVMS is an honor, and is granted to retired faculty members who have demonstrated a distinguished professorial career and have made significant contributions to EVMS.

### **Criteria for Candidacy**

Full-Time faculty (tenured or non-tenured) at the rank of Professor or Associate Professor are eligible for Emeriti status. Candidates for consideration will have served for a period of not less than 10 years as a faculty member; or as Chair of a department; and with noteworthy academic contributions and significant service to EVMS prior to retirement as evidenced by one or more of the following:

- Research, scholarship, and/or creative work commensurate with national and/or international standards;
- Noteworthy teaching and educational contributions including departmental or institutional awards for the same;
- Significant service to EVMS recognized by peers and the institution.

### **Rank**

The ranks for Emeriti are Professor Emeritus/Emerita or Associate Professor Emeritus/Emerita and shall be based on the corresponding faculty rank at retirement.

### **Emeriti Privileges**

The privileges associated with having Emeriti status are as follows:

1. Emeritus/Emerita will be added to the faculty rank.
2. Lifetime listing indicating the appropriate rank of Professor Emeritus/Emerita or Associate Professor Emeritus/Emerita; in EVMS catalogues and directories.
3. Regular and online library privileges.
4. EVMS emeritus e-mail address and technical support for salaried faculty including listing in EVMS directories for 5 years with renewal based upon contribution/activity/engagement with the institution. Email accounts that have been inactive for more than a year will be eliminated.
5. With the permission of the department, usage of department main phone number for contact number.
6. Parking within the Medical Center may be provided by the department.
7. Participation in EVMS public ceremonies.
8. Based on availability and the recommendations of the Department Chair with the concurrence of the President/Provost, use of office and/or lab space, equipment, and other campus facilities to support scholarly work and/or educational activities.
9. With permission of the Department Chair and President/Provost, authorization to serve on thesis and dissertation committees or engage in other research or educational activities at EVMS.
10. Be eligible for up to 8 hours/week of EVMS paid administrative or educational consultation service needs within the Department as determined by the Department Chair (e.g., Chair's Fund) as an independent contractor as long as the work being performed would qualify as consulting.
11. With approval of the Department Chair and the President/Provost, Emeriti Faculty will be welcomed to:
  - i. Advise medical students, health professions students and residents. Co-author papers with them and with other faculty members within or outside of EVMS using EVMS' affiliation;
  - ii. Teach classes as an emeriti faculty member;

- iii. Participate in sponsored research, as approved by the sponsor and EVMS;
- iv. Attend departmental and collegial open meetings, as a guest, subject to the bylaws of said unit;
- v. Eligible to serve on an Institutional Standing Committee as an ad-hoc or regular member.

### **Procedure**

Application for Emeriti status may be initiated by the candidate, Chair, or Dean with the understanding that granting of emeritus requires approval by the President/Provost and Board of Visitors and requires a 3-6 month process.

To initiate the process, the faculty member must submit a letter requesting Emeriti status and supporting evidence of academic contributions, including a current EVMS Curriculum Vitae, to the Department Chair by December 1st of the year of retirement.

The Department Chair will meet with all departmental faculty to review the faculty's request for Emeriti status. Upon full concurrence by the departmental faculty, the Department Chair shall notify the Vice Dean for Faculty Affairs and Professional Development (FAPD) in writing that the faculty member has applied for Emeriti status. The Department Chair's recommendation, and all supporting materials, must be received by the Vice Dean for FAPD by January 15th.

The Vice Dean for FAPD shall convene the Emeriti Review Committee, as described below. The Committee shall deliberate and deliver its recommendations to Vice Dean for FAPD by February 15th.

The Vice Dean for FAPD shall make a recommendation and forward same, along with the Committee's recommendation, to the President/Provost by March 1st.

The President/Provost shall make a recommendation and forward same, along with all prior recommendations, to the Board of Visitors for consideration at their next regularly scheduled meeting.

Candidates whose rank of Professor Emeritus/Emerita or Associate Professor Emeritus/Emerita have been approved by the Board of Visitors shall be notified by the Board of Visitors. They shall also be recognized during the Graduation ceremony in May.

The above-referenced timeline may, at the President/Provost's sole discretion, be modified or accelerated in circumstances where the faculty member's illness, disability, or other personal events result in abrupt retirement, and/or if the institution deems that other factors make the following of such timeline impractical.

### **Reconsideration**

Candidates who are denied Emeriti status shall be notified of the reason(s) for such denial by FAPD. The candidate may request reconsideration by following the application process described above and resubmitting the application to the Department Chair by December 1 of the year in which the application is denied. A candidate may only request reconsideration once.

### **Emeriti Review Committee Operations**

The Emeriti Review Committee consists of two representatives from clinical departments, one from a basic science department, and one from the School of Health Professions, who are appointed by the Vice Dean for FAPD for a term of three years. One or more of the Committee members should be an Emeritus faculty member. The Emeriti Review Committee operates under the jurisdiction of the Faculty Senate who will appoint a representative from its membership to be Chair of the Committee for three years. After its deliberations, the Chair will report briefly to the Faculty Senate on the operations and the recommendations of the Committee.



**Amendments**

This Policy may be amended and the privileges changed from time to time at the discretion of EVMS through the appropriate processes and procedures, including with the advice and consent of the Faculty Senate. Such amendments shall be promptly communicated to all Emeriti faculty.

First Board Approval Date: February 12,  
2017 Last Revision: March 13, 2018

## **SABBATICAL LEAVE**

Sabbatical leave may be provided for members of the faculty holding Associate Professor or Professor ranks.

A faculty member is eligible for sabbatical leave after every sixth year of continuous service on the faculty of the Eastern Virginia Medical School. The period of service is to be calculated from the time of first appointment to the full-time faculty with a minimum rank of Assistant Professor. Sabbatical leaves are not awarded automatically after six years of service, but are awarded on the basis of individual merit.

### *Compensation*

The compensation during a sabbatical will be either at the 100% rate for leaves of six months or less or 50% rate for leaves of seven to twelve months. Funding of the base salary while on such sabbatical will be derived from the same funding sources as that paid to the faculty member while not on sabbatical except that any salary component of a faculty member's base salary that is derived from extramural research funds will instead be derived from other EVMS funds. All medical school benefits will remain in force during a sabbatical leave. The faculty member will be responsible for paying his/her portion of the premiums.

### *Activities during Sabbatical Leave*

The privilege of a sabbatical may be extended to a faculty member for the purpose of enriching academic talents relative to his/her functions at EVMS. A sabbatical is, therefore, intended to permit a faculty member to perfect or acquire techniques in teaching, clinical care, research/discovery and administration/service, either in the faculty member's original discipline or in a new area in which he/she proposes to embark. Work in a research laboratory, clinical training at another medical center or medical school or the pursuit of formal courses in an accredited institution of higher education in a relevant discipline are appropriate activities for sabbatical leaves. The writing of books or original papers is also an appropriate justification.

### *Approval of Request for Sabbatical Leave*

Sabbatical applications for any part of the school year must be submitted at least nine months in advance of the start of the leave. Applications are to be submitted to the Department Chair of the School of Medicine or VPDSHP who recommends the request to the President, Provost and Dean of the School of Medicine, giving assurance that the faculty member's activities will be adequately covered without additional cost to the department's medical school budget and justifying the faculty member's need for such a leave.

### *Upon Conclusion of the Sabbatical Leave*

Recipients of sabbatical leave are required to return to full-time service of EVMS for at least one academic year. Failure to return to EVMS service for one academic year shall create an obligation for the faculty member to pay EVMS an amount equal to the compensation the faculty member received from EVMS on a month for month basis. For example, if a faculty member was granted a sabbatical leave of one year, but only returned to EVMS for six months, the faculty member would incur an obligation to pay EVMS an amount equal to six months compensation. Faculty must submit a report of the activities during the sabbatical to the Department Chair of the School of Medicine or VPDSHP, and to the President, Provost and Dean of the School of Medicine upon completion of the sabbatical leave.

Sabbatical Leave

Board Approved June 13, 1977

END

possible addition of policy on Centers & Institutes, possibly including a list of relevant CIs.

## The rationale for the new chapter as written by the Integration Management Office (Alicia Monroe plus a couple of external consultants- pages 60-65)

### ODU Resolution – Adoption of EVMS APT policies for SOM and SHP Faculty, policies – draft

Whereas Old Dominion University and the Eastern Virginia Medical School have jointly agreed to merge; and

Whereas the principle of shared governance provides faculty with a voice in the shaping the policies that govern their appointments, promotion, and tenure; and

Whereas Eastern Virginia Medical School has seven (7) established policies for the academic appointments, promotion, and tenure of its constituent faculty, as well as grievances and dismissal; and

Whereas those policies are enumerated as: 1) Policies and Procedures Relating to Faculty Appointment, Promotion and Tenure, 2) Policies and Procedures for Faculty Appointment, 3) Policies and Procedures for Promotion, 4) Guidelines for Appointment and Promotion, 5) Faculty Tenure Policy, 6) Faculty Grievance Policy, 7) Grounds for Dismissal of Faculty; therefore

Be it resolved that Old Dominion University will adopt Eastern Virginia Medical School's seven (7) established policies for appointments, promotion, and tenure (enumerated above) and that these policies will only pertain to the faculty of the School of Medicine and the School of Health Professions; and

Be it further resolved that these policies will be added to the ODU Faculty Handbook as a separate chapter with a preamble (below) that clearly defines the scope of those policies as limited to the School of Medicine and School of Health Professions faculty; and

Be it further resolved that the language of these policies **was / will be** jointly reviewed and updated by Old Dominion University and Eastern Virginia Medical School to ensure the language of the policies aligns with changes in nomenclature resulting from the merger and that the articulated scope of the policies is clearly limited to the School of Medicine and School of Health Professions faculty; and

Be it further resolved that these policies will remain in effect until such time as they are revised and updated by the post-merger integrated Old Dominion University Faculty Senate (which will include representation from the School of Medicine and the School of Health Professions) and any subsequent changes are approved by the Board of Visitors for Old Dominion University; and

Be it further resolved that the School of Medicine and School of Health Professions faculty will be subject to all other polices listed in the ODU faculty handbook and that the specific EVMS faculty policies enumerated here will sunset and will be replaced by the corresponding ODU policies: 1) Annual Review of Faculty Performance, 2) Adjunct Faculty Appointments and Promotions Policy, 3) Non-Promotion Eligible Faculty, 4) Institutes and Centers at EVMS, 5) Policy on Consulting, 6) Regulation on Off-Campus Speakers, 7) Academic Freedom, 8) Sabbatical Leave, 9) Process for Revising the Faculty Appointment

and Promotion, Tenure, and Grounds for Dismissal Policies, 10) Visiting Faculty Policy, 11) Emeritus Faculty Appointments

**Rationale:** both Old Dominion University and the Eastern Virginia Medical School recognize that their constituent faculties should have a voice in shaping the policies that govern their appointments, promotion, and tenure, as well as dismissal and grievances. Each institution has policies uniquely suited to its constituent faculties. One of the goals of the merger is to integrate the two faculties and jointly form a new faculty body. Over time, that integrated faculty body will have the opportunity to craft and revise policies for appointments, promotions, and tenure that will suit all its constituents. In the interim, rather than maintain two faculty handbooks, it has been agreed that EVMS's seven (7) policies for appointments, promotions, and tenure, enumerated above, will be added to Old Dominion University's faculty handbook with language limiting their scope to the legacy EVMS faculty (School of Medicine, School of Health Professions). This resolution asks the faculty senate to ratify this agreement.

**Preamble:** While Old Dominion University and the Eastern Virginia Medical School have jointly agreed to merge, both institutions recognize that their constituent faculties must have a voice in shaping the policies that govern their appointments, promotion, and tenure, as well as grievances and dismissal. It has been agreed that there will be one faculty handbook, and that the seven (7) EVMS policies for academic appointments, promotion, and tenure of its constituent faculty, as well as grievances and dismissal, enumerated in this chapter and revised to ensure the language of the policies align in changes in structure and nomenclature resulting from the merger and to provide clarity on the limited scope of the policies, will apply to the faculty of the School of Medicine and School of Health Professions. The faculty of the School of Medicine and School of Health Professions are subject to all other ODU faculty policies. These policies will remain in effect for the faculty of the School of Medicine and the School of Health Professions upon the merger of Eastern Virginia Medical School's with Old Dominion University and will remain in effect until such time as they are revised and updated by the Old Dominion University Faculty Senate (which will include representation from the School of Medicine and the School of Health Professions) and subsequent changes are approved by the Board of Visitors for Old Dominion University

## Process & Timeline for approval at ODU

Wednesday	2/15/23	Draft to Dr. Monroe, Dr. Combs, and Provost Agho
Friday	2/17/23	Submit final draft to the ODU Faculty Senate Executive Committee
Tuesday	2/21/23	ODU Faculty Senate Executive Committee will use the urgent matters clause to bring the resolution to the ODU Faculty Senate for a vote

Assuming an affirmative vote by the ODU Faculty Senate

Al Wilson will contact the rector of the ODU Board of Visitors to add the affirmed resolution to the agenda for the April board meeting

Thursday	4/20/23	The resolution will be brought to the ODU Board of Visitors for a final vote of approval
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## Process for approval

The ODU Faculty Senate Bylaws – Procedures Concerning New Resolution and Other New Business – empowers the executive committee to bring matters of “special urgency directly to the floor of the senate” for a vote.

The EVMS Board of Visitors meets in March (3/21) and the ODU Board of Visitors meeting in April (4/20 – 4/21). Therefore, we would ask that the senate move expeditiously to vote on this resolution during its February meeting (2/21) and that the executive committee bypass the usual delegation to a sub-committee and exercise its power to bring matters of “special urgency directly to the floor of the senate” for a vote.

ODU Senate Bylaws – Procedures Concerning New Resolution and Other New Business

- <https://ww1.odu.edu/facultysenate/governance/bylaws#done1612907281342=&tab164=4>

Style Guides:

- <https://facultysenate.ucf.edu/document/writing-resolutions/>
- [https://senate.sonoma.edu/sites/senate/files/writingeffectiveresolutions\\_0.pdf](https://senate.sonoma.edu/sites/senate/files/writingeffectiveresolutions_0.pdf)

## EVMS Resolution – Adoption of EVMS APT policies for SOM and SHP Faculty, policies – draft

Whereas Old Dominion University (ODU) and the Eastern Virginia Medical School (EVMS) have jointly agreed to merge; and

Whereas the principle of shared governance provides faculty with a voice in the shaping the policies that govern their appointments, promotion, and tenure; and

Whereas Eastern Virginia Medical School has seven (7) established policies for the academic appointments, promotion, and tenure of its constituent faculty, as well as grievances and dismissal; and

Whereas those policies are enumerated as: 1) Policies and Procedures Relating to Faculty Appointment, Promotion and Tenure, 2) Policies and Procedures for Faculty Appointment, 3) Policies and Procedures for Promotion, 4) Guidelines for Appointment and Promotion, 5) Faculty Tenure Policy, 6) Faculty Grievance Policy, 7) Grounds for Dismissal of Faculty; therefore

Be it resolved that Eastern Virginia Medical School acknowledges that Old Dominion University will adopt seven (7) EVMS policies for appointments, promotion, and tenure (enumerated above) and that these policies will only pertain to the faculty of the School of Medicine and the School of Health Professions; and

Be it further resolved that Eastern Virginia Medical School acknowledges that these policies will be added to the ODU Faculty Handbook as a separate chapter with a preamble (below) that clearly defines the scope of those policies as limited to the School of Medicine and School of Health Professions faculty; and

Be it further resolved that the language of these policies **was / will be** jointly reviewed and updated by Old Dominion University and Eastern Virginia Medical School to ensure the language of the policies aligns with changes in nomenclature resulting from the merger and that the articulated scope of the policies is clearly limited to the School of Medicine and School of Health Professions faculty; and

Be it further resolved that Eastern Virginia Medical School acknowledges that these policies will remain in effect until such time as they are revised and updated by the post-merger integrated Old Dominion University Faculty Senate (which will include representation from the School of Medicine and the School of Health Professions) and any subsequent changes are approved by the Board of Visitors for Old Dominion University; and

Be it further resolved that Eastern Virginia Medical School acknowledges that the School of Medicine and School of Health Professions faculty will be subject to all other polices listed in the ODU faculty handbook and that the specific EVMS faculty policies enumerated here will sunset and will be replaced by the corresponding ODU policies: 1) Annual Review of Faculty Performance, 2) Adjunct Faculty

Appointments and Promotions Policy, 3) Non-Promotion Eligible Faculty, 4) Institutes and Centers at EVMS, 5) Policy on Consulting, 6) Regulation on Off-Campus Speakers, 7) Academic Freedom, 8) Sabbatical Leave, 9) Process for Revising the Faculty Appointment and Promotion, Tenure, and Grounds for Dismissal Policies, 10) Visiting Faculty Policy, 11) Emeritus Faculty Appointments

**Rationale:** both Old Dominion University and the Eastern Virginia Medical School recognize that their constituent faculties should have a voice in shaping the policies that govern their appointments, promotion, and tenure, as well as dismissal and grievances. Each institution has policies uniquely suited to its constituent faculties. One of the goals of the merger is to integrate the two faculties and jointly form a new faculty body. Over time, that integrated faculty body will have the opportunity to craft and revise policies for appointments, promotions, and tenure that will suit all its constituents. In the interim, rather than maintain two faculty handbooks, it has been agreed that EVMS's seven (7) policies for appointments, promotions, and tenure, enumerated above, will be added to Old Dominion University's faculty handbook with language limiting their scope to the legacy EVMS faculty (School of Medicine, School of Health Professions). This resolution asks the faculty senate to ratify this agreement.

**Preamble to the ODU Faculty Handbook chapter which will contain the EVMS policies:** While Old Dominion University and the Eastern Virginia Medical School have jointly agreed to merge, both institutions recognize that their constituent faculties must have a voice in shaping the policies that govern their appointments, promotion, and tenure, as well as grievances and dismissal. It has been agreed that there will be one faculty handbook, and that the seven (7) EVMS policies for academic appointments, promotion, and tenure of its constituent faculty, as well as grievances and dismissal, enumerated in this chapter and revised to ensure the language of the policies align in changes in structure and nomenclature resulting from the merger and to provide clarity on the limited scope of the policies, will apply to the faculty of the School of Medicine and School of Health Professions. The faculty of the School of Medicine and School of Health Professions are subject to all other ODU faculty policies. These policies will remain in effect for the faculty of the School of Medicine and the School of Health Professions upon the merger of Eastern Virginia Medical School's with Old Dominion University and will remain in effect until such time as they are revised and updated by the Old Dominion University Faculty Senate (which will include representation from the School of Medicine and the School of Health Professions) and subsequent changes are approved by the Board of Visitors for Old Dominion University



## Process & Timeline for approval at EVMS (to be confirmed with EVMS)

Wednesday	2/15/23	Draft to Dr. Monroe, Dr. Combs, and Provost Agho
Friday	2/17/23	Submit final draft to the EVMS Faculty Senate
Monday	2/20/23	The EVMS Faculty Senate meets and will be asked to affirm the resolution via a majority vote
Tuesday	2/21/23	The EVMS General Faculty meets and (if appropriate) will be asked to affirm the resolution via a majority vote

### Assuming an affirmative vote by the EVMS Faculty Senate

Dr. Monroe will contact the rector of the EVMS Board of Visitors to add the affirmed resolution to the agenda for the March board meeting

Tuesday	3/21/23	The resolution will be brought to the EVMS Board of Visitors for a final vote of approval
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## Process for approval

The EVMS Board of Visitors Bylaws:

Section 7. Quorum. At all meetings of the Board, a majority of the members then appointed shall constitute a quorum for the purpose of transacting business, but any number less than a quorum at a meeting may adjourn the meeting from time to time until a quorum is present. When a quorum is present, action may be taken by the Board upon a vote of the majority of the members present.

Section 8. Resolutions and Proposals for Actions. To ensure appropriate consideration of all matters to be acted upon by the Board, resolutions and action proposals shall be presented to the members by each standing committee and as a part of the reports of the Executive Officers, including the report of the President and Provost, or by the Rector.

The EVMS Board of Visitors meets in March (3/21) and the ODU Board of Visitors meeting in April (4/20 – 4/21). Therefore, we would ask that the senate move expeditiously to vote on this resolution during its February meeting (2/20) and, if warranted, advance this resolution to the General Faculty meeting on 2/21 so that the general faculty can be informed on its contents and / or vote on it.

EVMS Board of Visitors Bylaws – Procedures Concerning New Resolution and Other New Business

- [https://www.evms.edu/media/departments/leadership/board\\_of\\_visitors/EVMS\\_Bylaws\\_\(21SE\\_PT2021\).pdf](https://www.evms.edu/media/departments/leadership/board_of_visitors/EVMS_Bylaws_(21SE_PT2021).pdf)

Style Guides:

- <https://faculty senate.ucf.edu/document/writing-resolutions/>
- [https://senate.sonoma.edu/sites/senate/files/writingeffectiveresolutions\\_0.pdf](https://senate.sonoma.edu/sites/senate/files/writingeffectiveresolutions_0.pdf)