Mercer University School of Medicine Faculty Handbook 2023

Revision June 2023

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1.0 VISION, MISSION, VALUES, GUIDING PRINCIPLES

VISION

The grand challenges of rural health are resolved through education, research, and community engagement.

MISSION

To educate physicians and health professionals to meet the primary care and health care needs of rural and medically underserved areas of Georgia.

VALUES

- Integrity
  - Honesty. Professionalism. Accountability.
- Respect
  - Empathy. Civility. Transparency.
- Excellence
  - Service. Quality. Commitment.
- Diversity
  - Inclusive. Welcoming. Fair.
- Collaboration
  - Three Campuses. One School Community.

GUIDING PRINCIPLES

- Our academic support facilitates student success.
- Service is our mindset and orientation.
- Community impact is our outcome.
- Meeting the health and medical needs of rural and medically underserved Georgia is our purpose.

Approved by Executive Council, March 26, 2019

1.1 Diversity and Recruitment

Diversity Statement

Mercer University School of Medicine is privileged to be located in Georgia, a state with a unique, diverse, and evolving heritage. Mercer is committed to serving Georgia by educating physicians and other healthcare professionals to meet the healthcare needs of the state's medically underserved.

Mercer University School of Medicine believes that an environment of inclusiveness, equal

opportunity, acceptance, and respect for the similarities and differences in our community is essential for excellence in the fulfillment of our mission. An atmosphere where differences are valued leads to the training of a culturally competent healthcare workforce qualified to meet the needs of the varied populations of our state and enhances the development of professionalism in our students. Further, we believe that institutional diversity fuels the scholarly advancement of knowledge in an atmosphere of free inquiry and expression.

The School of Medicine adopts a definition of diversity that embraces race, ethnicity, gender and gender identity, religion, sexual orientation, social and cultural attributes, rural or metropolitan background, and disability. The definition of diversity also includes life experiences, record of service and employment, and other talents and personal attributes that can enhance the scholarly and learning environment.

The School of Medicine seeks to attain a diverse learning environment through the recruitment, enrollment, hiring, and retention/graduation of students, faculty, staff, and leadership who meet this definition of diversity. We also seek to deliberately and thoughtfully utilize the benefits of diversity in our interactive, team-based educational programs.

Approved by Executive Council December 4, 2012 and reaffirmed by Executive Council
Revised and approved by the Executive Council on November 26, 2019
Diversity and Inclusion Committee reaffirmed on August 16, 2022

1.2 Faculty Recruitment And Selection

Mercer University School of Medicine follows the policies and procedures for Mercer University. These details can be found on the Human Resources website in the Supervisor's Toolbox. https://hr.mercer.edu/supervisor/ accessed 9/26/22. Refer to the section *How to Recruit/Hire a New Employee*. Faculty and staff who serve on search committees should review these policies and procedures to ensure Mercer University hiring practices are being followed. The Search Committee should be a diverse committee comprised of faculty and administrators who bring multiple perspectives and fresh ideas.

Hiring Manager

- Mercer University Human Resource's "Supervisor's Toolkit" includes all required procedures for recruiting a faculty member. https://hr.mercer.edu/supervisor/
- Prior to making a request to recruit a new faculty member, funding should be approved by MUSM Executive Director for Finance's Office.
- The job announcement should be inclusive and encourage diverse groups to apply. For example, a statement specifically encouraging applications might be used in the announcement:

  "Mercer University recognizes the power of a diverse community and encourages applications from individuals with varied experiences, perspectives and backgrounds."
- The hiring manager will convene the search committee and provide a charge that aligns with MUSM's mission and the strategic plan of the division, department or unit.
- The hiring manager will communicate the operations and functions of the search committee to include: applicant reviews, upcoming meetings, candidate presentations, reference checks, campus visit, timelines, etc.
- The hiring manager will work with the MUSM Dean, Executive Director for Finance, and Mercer University Human Resources once a candidate has been identified for hire. If the candidate pool and interviews didn't provide a candidate, Human Resources can assist with continuing the search.

The Search Committee, together with the hiring manager should:

- Review the job description and discuss essential duties, knowledge, skills, and responsibilities for the position.
- Review the resources on the Human Resources website in the Supervisor's Toolbox to include: Conducting Interviews, Interview Do's and Don'ts, Are You Asking Illegal Interview Questions, etc. https://hr.mercer.edu/supervisor/
- Review the Applicant Resources & Notices on the Human Resources website https://hr.mercer.edu/prospective/resources.cfm which includes Federal Employment Laws and MUSM notices and disclosures such as EEO, Equal Opportunity and Affirmative Action, Non-Discrimination and Anti-Harassment Policy, Criminal History Consent, E-Verify, etc.
- Search committee members should complete the MUSM Training in Diversity on

Canvas and review the “MUSM Diversity Statement” which can be accessed at the following link: https://medicine.mercer.edu/student-affairs-and-services/diversity-and- inclusion/ accessed 9/26/22.

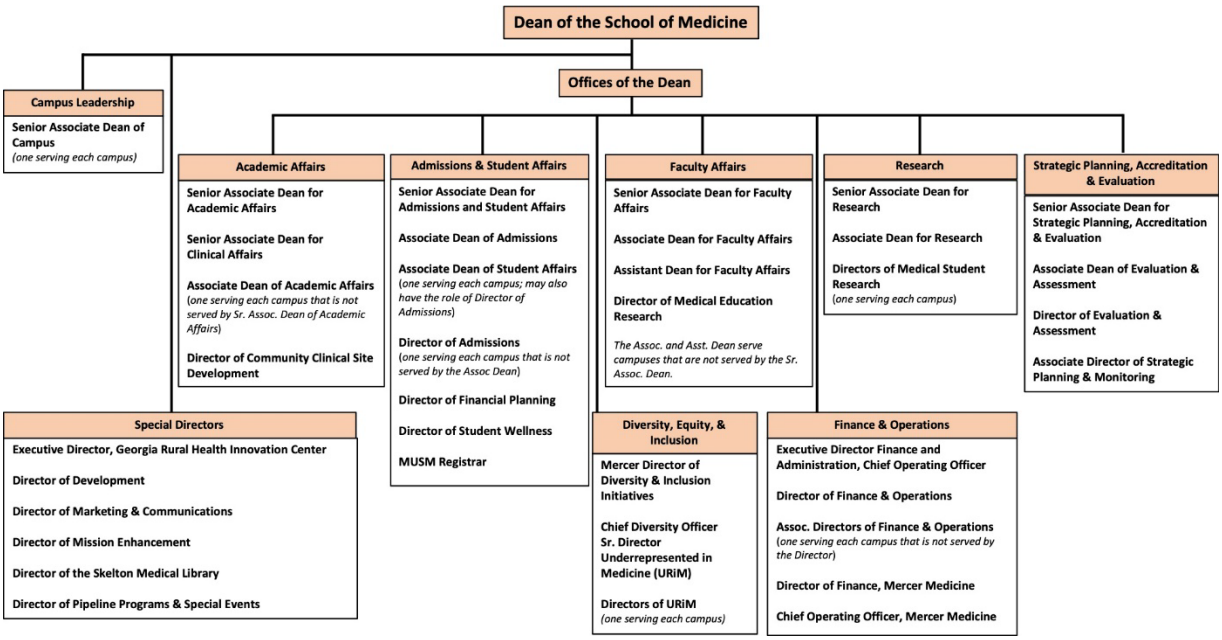
2.0 ACADEMIC ORGANIZATION

2.1 Structure and Administrative Organization

Mercer University School of Medicine (MUSM) is an academic unit of Mercer University and is subject to the rules, regulations, policies and procedures of the University as described in the Mercer University Faculty Handbook. The dean and the administrators of MUSM are appointed by and serve under the authority of the President and the Board of Trustees of the Corporation of Mercer University. MUSM was established as a public-private partnership to improve health care and access to health care in rural and underserved areas of Georgia. MUSM meets that mission by offering the following educational programs: doctor of medicine (M.D.), Ph.D. in rural health sciences, masters in family therapy, and master of science in biomedical sciences, and master of science in preclinical sciences. MUSM operates academic programs four campuses, three of which, Macon, Savannah and Columbus, are four-year campuses for the MD degree. The additional campus is in Atlanta. Clinical education for the MD Program is provided through AAMC affiliation agreements with partnering hospital systems (see map below for our main teaching hospitals).

2.2 Administrative Organization of The School

The dean of the School of Medicine is the principal academic officer who is responsible for all aspects of the School. The dean reports to the Provost of Mercer University. Administrative officers with Senior Associate/Associate/Assistant Dean or Director titles are employed to assist the dean and their duties are specified by the dean and are subject to change by the dean as circumstances require. The current administrative structure of the School of Medicine is shown below.



2.3 Job Descriptions

2.3.1 Job Description for the Dean of the School of Medicine

The dean is the principal academic officer and is responsible for the full range of academic program development within the School. The responsibilities of the dean include the following:

- To provide oversight in the design, development, and implementation of the educational program and to promote the effectiveness of the curriculum and instructional procedures in assuring a quality program of general professional education for physicians and all other graduate training programs. In doing so to ensure that the educational program, students, faculty, and staff support the school's mission.
- To provide for the recruitment and selection of qualified faculty and to foster faculty development.
- To review faculty eligibility for promotion and tenure, to conduct systematic evaluation of faculty appointments, and to make recommendations to the provost and the president concerning faculty appointments, rank, tenure, and salary.
- To preside over the faculty and to assure the effective organization of the faculty.
- To foster faculty collegiality and professionalism in a positive, diverse, and inclusive work environment.
- To assure the development and implementation of a strategic plan for the school which outlines plans for the continued development of the school
- To develop recommendations to the provost and the president regarding the operating budget.
- To provide leadership that encourages the recognition and accreditation of academic programs of the school by external agencies.
- To represent the school in the Mercer University Council of Deans collaborating with administrative officers of the University in the development, refinement, and revision of university policies.
- To foster the effectiveness of cooperative relationships with health care agencies and to assure the educational quality of clinical experiences through a community- based program of undergraduate and graduate medical education.
- To promote understanding and support of the school among its various constituents.
- To assure the effectiveness of student services and to enhance the well- being and safety of students.

The dean exercises supervision over all school personnel. While the primary responsibility for the selection of new faculty for the school resides with the Dean, the authority to appoint members of the faculty of Mercer University rests with the President, who acts on the authority of the Board of Trustees. All personnel appointments must be in accordance with the personnel policies and procedures of the University.

The dean is responsible for budget preparation for the school and for assuring adherence to the approved budget of the school. The administration of the budget must occur within the framework and limits of University fiscal policies.

2.3.2 Job Description for Senior Associate Dean of Campus

The responsibilities of the Senior Associate Deans for the Macon, Columbus, and Savannah Campuses include:

- To participate in the planning, development and implementation of the educational program, including basic science, clinical, and interdisciplinary components, on the assigned campus ensuring that offerings to students are of highest quality and comparable on each campus.
- To cultivate and maintain strong working relationships with community, faculty, external partners, clinical affiliate partners, the philanthropic communities and other key stakeholders to further research and education goals
- To collaborate with the Dean and University Advancement Office to initiate and develop potential contributors to the School and University programs.
- To work with the Executive Director of Finance to assure development of and implementation of the campus budget and a system that encourages fiscally responsible requests for travel, supplies, and other resources.
- To collaborate with other Senior Associate Campus Deans to foster and support a "One MUSM" environment by encouraging cross-campus events, outreach opportunities and shared learning experiences for students, faculty, and staff.
- To evaluate workforce needs on the assigned campus and participate in the recruitment and selection process assuring compliance with bylaws
- To assure that faculty development opportunities are available and that these opportunities foster personal growth and development of the faculty and strengthen commitment to the school's mission in collaboration with the Office of Faculty Affairs and Professional Development.
- To communicate to the Dean the concerns, challenges and needs of faculty, staff and students and propose potential solutions
- To foster and demonstrate faculty collegiality and professionalism.
- To support a climate in which students, faculty and staff value diversity, inclusion and cultural awareness.
- To strongly support and demonstrate commitment to the mission of Mercer University School of Medicine by encouraging students to serve in rural or underserved areas in primary care or other needed specialties.
- To participate in strategic planning and development of the campus and school.
- To support the accreditation efforts and initiatives of the school that will assure that all standards for accreditation are met or exceeded.

- To facilitate a safe environment for the students, faculty and staff on the assigned campus.
- To support the well-being of students, faculty and staff for whom the Senior Associate Dean is responsible.
- To encourage and participate in community engagement and outreach from faculty and students that support the mission of the School of Medicine.
- To attend committees as the Dean's designee to include, but not limited to, Curriculum and Instruction, Admissions, Administrative Leadership Team, Executive Council and any external meetings, if needed.

2.3.3 Job Description for the Senior Associate Dean for Academic Affairs

The Senior Associate Dean for Academic Affairs oversees the office of academic affairs, is designated by the Dean as the chief academic officer of the medical education program, and reports directly to the Dean. This position:

- Collaborates with the Senior Associate Deans for Campuses to maintain comparability in the delivery of the medical education program across campuses, including planning for educational resources and monitoring the learning environment.
- Collaborates with the Senior Associate Dean for Clinical Affairs to develop and maintain clinical affiliations that support the medical education program and ensure primacy of education for MUSM students.
- Works with department chairs and directors of the courses/programs in the MD curriculum to determine the sufficiency of faculty to meet the instructional needs for delivery of the medical education program across all campuses.
- Works with the department chairs, the Senior Associate Dean for Faculty Affairs and the MUSM Executive Director of Finance and Administration to develop and support a recruitment and hiring plan to maintain faculty sufficiency for instruction in the medical education program.
- Makes recommendations to the Dean regarding budgetary planning for resources to meet the immediate and projected needs of the medical education curriculum across all campuses.
- Works with the department chairs and the Senior Associate Dean for Faculty Affairs on faculty development opportunities and materials.
- Works with the Office of Strategic planning, accreditation, and evaluation for the development of student surveys and the review/dissemination of student evaluation data regarding the academic program.
- Consults with department chairs to assign teaching duties in the preclinical curriculum, monitor the quality of teaching, intervene to improve the learning environment and/or remediate faculty, and provide charges of responsibility to the block committees.
- Consults with department chairs to assign/appoint membership to all of the CIC sub-committees.
- Oversees the assignment of student schedules and student learning groups; and monitors student attendance and student performance, according to school policy.
- Oversees the administration of exams, the recording of the exam results, and the dissemination of the exam data in the appropriate form to the appropriate faculty.

- Oversees student performance. Informs students of negative outcomes such as failure of tests, failure of blocks, and dismissal from school and grants independent study periods and leaves of absences.
- Determines 'legitimate educational interest' of individuals to review medical student academic records.
- Serves as a standing member of the professionalism committee.
- Serves as the ex officio, non-voting Chair of the Curriculum and Instruction Committee and a member of all CIC sub-committees.
- Serves as an ex officio member of the Student Appraisal and Promotion Committee
- Serves as an ex officio, voting member of the Executive Council and Academic Leadership Team.

2.3.4 Job Description for Senior Associate Dean for Admissions and Student Affairs

The Senior Associate Dean for Admissions and Student Affairs has MUSM-wide responsibilities. These responsibilities include supervision of Deans/Directors of Student Affairs and Admissions to achieve the following:

Admissions: Collaborates with the Deans/Directors for Admissions on all campuses and the Admissions Committee to ensure that the processes for recruitment of students, interview of candidates, and selection of students are mission-focused and adhere to standards.

- Provides communication with applicants, faculty, alumni, and other interested parties concerning the process of applying to Mercer University School of Medicine
- Administers the functions and projects of the Office of Admissions, including the interview process and recruitment functions
- Engages in ongoing planning and continuous quality improvement processes that establish short and long-term programmatic goals, result in the achievement of measurable outcomes that are used to improve programmatic quality, and ensure effective monitoring of Admissions Program's compliance with accreditation standards
- Works closely with pipeline programs
- Serves as an *ex officio* member of the Admissions Committee and Executive Council
- Serves as a member of MUSM Academic Leadership Team and other committees and task forces as appropriate
- Serves as liaison for MUSM to the campuses, communities, and national committees and projects
- Provides marketing and public relations activities to ensure the effective representation of the SOM throughout the community, the state of Georgia, and the academic/medical communities of the United States

Student Affairs: Provides leadership and oversight of the programs that support all students

and enhance their educational experience in the School of Medicine.

- Allocate resources (funds, space, staff and faculty) to MUSM programs, so as to ensure their quality, maintain appropriate accreditation, and be responsive to the needs of all students of the School
- Collaborate with the Deans of Students Affairs to manage the development, implementation and evaluation of comprehensive services and programming that support student academic success
- Work with appropriate University and School offices to ensure that the needs of the students are met with regard to student financial planning (financial aid) and registrar functions.
- Foster a safe, healthy, and supporting learning environment for students, including participation in the planning for and monitoring of: Student health services (including compliance with required immunizations); Student counseling and mental health services; Harassment training and support (including intellectual, sexual, gender, racial, etc.); Diversity training; HIPAA training; Training for limiting exposure to infectious agents and environmental hazards; Safety and Security Training, in compliance with state and federal statutes
- Participate in and help coordinate the planning and execution of the recurring cycle of academic events
- Serve as the administrative contact for the student government, the Organization of Student Representatives, student participation on medical school committees, and all other student groups and organizations
- Monitor the academic progress of students, and provide academic and personal counseling with referral to student counseling services as required and necessary
- Develop and implement programs to support the personal and professional development of students
- Provide guidance and direction toward career planning and residency placement of students
- Ensures that the school is in compliance with all LCME standards that relate to medical students
- Engages in ongoing planning and continuous quality improvement processes that establish short and long-term programmatic goals, result in the achievement of measurable outcomes that are used to improve programmatic quality, and ensure effective monitoring of the Students Affairs program's compliance with accreditation standards
- Serve as advisor on SOM policy and student affairs policies. Works with General Counsel in instances of policy change that may have legal consequences (drug and alcohol policy, etc.)
- Works with the Gold Humanism Honor Society, Phi Kappa Phi and Alpha Omega Alpha in the nomination process. Assists in nominations for Students for scholarships, summer experiences, national committees and other opportunities
- Meets regularly with Academic Affairs Deans and Chief Diversity Officer of the School to ensure alignment of goals and priorities

- Serves as an ex officio member of the Student Appraisal and Promotions Committee (serving as a student advocate). Serves as a member of MUSM Academic Leadership Team, the Testing Accommodations Committee, and other committees and task forces as appropriate.

2.3.5 Job Description for Senior Associate Dean for Clinical Affairs

The Senior Associate Dean for Clinical Affairs assumes responsibility for Clinical Affairs on all MUSM campuses and clerkship locations in Georgia. These responsibilities include:

- Interact with the clinical faculty and department chairs from MUSM and all clinical hospitals or hospital systems.
- Collaborate with hospital administration in the clinical affiliate institutions on all matters relating to clinical affairs
- Assist with the development and execution of affiliation agreements with clinical affiliate partners
- Represent MUSM at HCA Graduate Medical Education Committee (GMEC) meetings
- Interact with clerkship directors and students in the clinical years to ensure that MUSM learning objectives are facilitated in clinical settings
- Serve on the Mercer Medicine Board of Directors
- Facilitate communication and serve as an advocate for clinical affiliate faculty
- Serve as a member of the Mercer University School of Medicine Practice Plan Board

2.3.6 Senior Associate Dean for Faculty Affairs

The Senior Associate Dean for Faculty Affairs oversees the appointment, reappointment, annual review, academic promotion, and professional development of all faculty, and reports directly to the Dean. This position:

- Works with department chairs to support new faculty orientation and onboarding.
- Ensures that all newly hired faculty are informed of their promotion track and MUSM's promotion and tenure requirements.
- Oversees faculty development and maintenance of the MUSM Faculty Calendar.
- Prepares reports to the **Liaison Committee on Medical Education (LCME)**, the Association of American Medical Colleges faculty roster (FAMOUS database), and the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC).
- Conducts annual promotion and tenure workshops.
- Works with the department chairs and the Senior Associate Dean for Academic Affairs on faculty development opportunities and materials.
- Maintains the MUSM faculty handbook and oversees handbook review and revision.
- Collaborates with Academic Affairs to ensure faculty sufficiency.
- Supports faculty and senior administrative staff search committees and monitors faculty and senior administrative staff diversity.
- Works with the department chairs, the Senior Associate Dean for Academic Affairs and the MUSM Executive Director of Finance and Administration to develop and support a recruitment and hiring plan to maintain faculty sufficiency for instruction in the medical education program.
- Makes recommendations to the Dean regarding academic rank and promotion track for new faculty hires.

- Attends the Graduate Medical Education Committee meetings for MUSM's affiliate hospitals (Dean's designee).
- Serves as an *ex officio*, non-voting member of the MUSM Promotion and Tenure Committee and the Clerkship Director and Student Coordinator Committee (CDSC).
- Assigns the Assistant or Associate Dean for Faculty Affairs to serve *ex officio*, non-voting on the Nominating Committee, the Diversity and Inclusion Committee, and the Rules and Bylaws Committee.
- Serves as a voting member of the Executive Council, the Continuous Quality Improvement Committee, and Academic Leadership Team.
- Provides updates and reports at the Deans and Chairs meetings on all three campuses.

2.3.7 Job Description for Senior Associate Dean for Research

The Senior Associate Dean for Research has MUSM-wide responsibility for the research-related activities of MUSM and coordinates these activities with internal and external groups.

- Expand research participation for faculty, staff and students
- Aid in identifying grant-funding opportunities appropriate for the School of Medicine
- Facilitate the development of interdisciplinary research projects (between different departments of the School of Medicine, between different colleges/schools of the University, and between MUSM and external institutions).
- Promote the development of research opportunities for medical students and graduate students
- Facilitate interactions of MUSM research faculty with the Finance Office, Grants and Contracts Office, Office of Research Compliance, and University Provost Office of Research
- Coordinate MUSM research activities with external constituencies such as the Georgia Research Alliance and the Oak Ridge Associated Universities consortium (Mercer University is a member of both organizations)
- Facilitate MUSM faculty and student participation in University research conferences such as BEAR Day, Atlanta campus research conference, Memorial Health Research Conference, and Mercer Health Sciences Research Symposium
- Coordinate the MUSM response to annual NIH/NSF research surveys
- Coordinate the MUSM response regarding research in the annual University report to the Board of Trustees
- Serve in an advisory capacity to the MUSM Research Committee
- Serve on the MUSM Dean's Research Advisory Council, the MUSM Executive Council, and the MUSM Academic Leadership Team

2.3.8 Job Description for the Senior Associate Dean for Strategic Planning, Accreditation & Evaluation

The Senior Associate Dean for Strategic Planning, Accreditation and Evaluation holds responsibilities in the areas of strategic planning, academic program accreditation, programmatic evaluation, and continuous quality improvement across the School of Medicine. This position:

- Monitors progress on the MUSM Strategic Plan and supports strategic plan renewal.
- Oversees and engages in continuous quality improvement of academic and non-academic programs in the School of Medicine.
- Communicates with the **Liaison Committee on Medical Education (LCME)** Secretariat for compliance of the MUSM MD Program with LCME accreditation **standards.**
- **Facilitates the completion and submission of status reports, notifications, and annual surveys to the LCME on behalf of the School.**
- Facilitates MUSM compliance with the Mercer Office of Institutional Effectiveness for reporting of School resource and academic program evaluation that is needed for Mercer University accreditation by the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC).
- Supports graduate program directors in program proposal, evaluation and accreditation.
- Serves as a member of the Continuous Quality Improvement Council and Academic Leadership Team.

2.4 MUSM Deans and Chairs Council

The MUSM Deans and Chairs Council is a campus-specific committee that serves to maintain an academic environment conducive to the full and free development of scholarly learning, teaching, and research. It is also a forum for the dissemination of information and exchange of ideas and perspectives on each campus.

The Deans and Chairs Council shall consist of the following voting members:

- The Sr. Associate Dean for the Campus, who serves as chair
- All senior associate, associate, and assistant deans on each campus
- The department chair, vice chairs or chair designee of Biomedical Sciences, Bioethics and Professionalism, Community Medicine, and Pathology and Clinical Sciences Education on the respective campuses
- The Designated Intuitional Officer (DIO) and/or Chief Medical Officer/Vice Presidents for Medical Affairs/Academics for each major affiliated teaching hospital for the campus

Duties and Responsibilities of the Deans and Chairs Council

- To enable consultation with the campus dean interdepartmental and hospital system matters.
- To facilitate communication between department chairs, and between hospital officials responsible for the MUSM academic environment the campus dean.
- To implement policies established by the Executive Council.
- To forward issues for discussion and recommendations for discussion or action to the Executive Council.

Deans and Chairs Council Meetings

- The Deans and Chairs Council meetings shall be held at least quarterly. Members of the Deans and Chairs Council may request special meetings to conduct business.
- At Deans and Chairs Council meetings, a quorum shall consist of a simple majority of its

members.

- Robert's Rules of Order (most current version) shall govern the conduct of all Deans and Chairs Council meetings.

2.5 Evaluation of Administration and Faculty

The provost of the university will conduct an annual evaluation of the dean.

2.5.1 Evaluation of Administrative Deans, Department Chairs, and Unit Directors

Each administrative dean, department chair, and unit director will prepare an annual Professional Development Plan/Annual Review. This review will be conducted by the administrative supervisor and will assess progress made during the past calendar year and include an agreed upon plan for the upcoming year. All Professional Development Plans/Annual Reviews will be completed by April of each year.

2.5.2 Evaluation of Paid Academic and Full-time Clinical Faculty

All MUSM paid academic and full-time clinical faculty members of the school shall prepare a Professional Development Plan (PDP) and Annual Review using Activity Insight to be submitted to and approved by their unit director, department chair and the dean. This review will assess progress made during the past year and shall include an agreed upon plan for the upcoming year. Faculty will complete Professional Development Plans (PDP)/ Annual Reviews by April of each year. Additionally, each faculty member will complete a signed Conflict of Interest form by April of each year.

2.5.3 Post-Tenure Review

An overview of the process for post-tenure review as specified in the Mercer University Faculty Handbook (MUFH) is provided below as is the composition of the MUSM faculty advisory committee, the materials faculty undergoing post-tenure review are required to submit, and the assessment process. The domains evaluated per Section 2.4.2(2) of the MUFH (revised Nov 2022) are listed below (a-e) as well as additional domains that are MUSM specific (f-h). It is not expected that faculty will demonstrate contributions in every domain as contributions typically reflect a faculty member's distribution of professional effort and may be influenced by a change in promotion track.

a. Quality of teaching and attention given to students as individuals.
b. Breadth, depth, and variety of education and experience.
c. Professional achievement and scholarship.
d. Responsible participation in group deliberative processes.
e. Professional responsibility and service to the school and community.
f. Clinical practice.
g. Service in the clinical realm.
h. Professionalism and collegiality.

Process (summarized from the MUFM)

1. Faculty due for a post-tenure review will receive at least six months' notice of the intent to review.
2. Faculty selected for post-tenure review will review Section 2.5.2 - Post-tenure Review of the MUFH before assembling materials required for review.
3. Faculty will prepare and submit materials via Watermark for review no later than the first business day of January. Post-tenure review materials will be simultaneously available to the faculty advisory committee, the faculty member's department chair, and the Dean.
4. In early January, the MUSM promotion and tenure committee will select the members of the faculty advisory committee (described below).
5. The faculty advisory committee will review materials and submit their report to the Dean no later than the 2nd Friday of February.
6. The Dean will provide a written evaluation to the faculty member and their department chair on or before April 1.
7. By April 1, the Dean will submit to the Provost a list of faculty deferred or reviewed along with the evaluation rankings and appropriate justifications for faculty who exceed expectations or do not meet expectations.
8. If necessary, for any identified domain in which the faculty member does not meet expectations, a Faculty Developmental Support Plan will be developed in accordance with Section 2.5.2 - Post-tenure Review of the MUFH.
9. If a Faculty Developmental Support Plan is issued, resubmission of materials for post-tenure review is required in accordance with the MUFH.

Composition of the Faculty Advisory Committee

- A subset of the MUSM Promotion and Tenure Committee to include the deans of faculty affairs (*ex officio*, non-voting), the chair, vice-chair/chair-elect, and secretary.
- Three or more additional members selected by Promotion and Tenure Committee who are tenured and represent diverse departments and disciplines with at least one member representing each campus. Eligible individuals include those serving on the P/T committee.

Specific Expectations

Expectations for tenured faculty with primary responsibility for research (>50% DPE)

- 5-years post-tenure: Faculty are expected to have secured external funding in the 5-years following the award of tenure OR provide evidence that they have submitted grants for external funding that were scored, resubmitted, or in the process of revision for resubmission in the 5-years since the award of tenure.
- 10+ years post-tenure: Faculty are expected to have secured external funding in the 5 years following their last post-tenure review AND provide evidence that they have submitted grants for external funding that were scored, resubmitted, or in the process of revision for resubmission since their last post-tenure review.
- Demonstrate a record of involving MUSM students in research.
- Engagement in an existing internal grant peer review process at MUSM through submissions of their own grants and review of their colleagues' grants.
- Peer-review of research manuscripts by MUSM colleagues.
- Service as a role model and mentor for junior faculty on the tenure track.

Expectations for tenured faculty with primary responsibility for teaching (>50% DPE)

- Good or excellent student teaching evaluations.
- A teaching schedule consistent with their distribution of professional effort.
- A documented approach to and success in mentoring struggling MUSM students, service as a role model and mentor for junior faculty.
- A record of active participation in faculty development related to teaching, learner assessment, mentoring/advising/coaching, or curriculum development.

Required materials

1. A letter addressed to the Dean, no longer than 3 single spaced pages, to include:
    a. A statement/narrative addressing each of the applicable post-tenure review domains.
    b. A reflection on and remediation of any professionalism/civility/collegiality issues over the most recent 5 years.
    c. A reflection on some of the positive student evaluations/comments as well as areas identified for improvement and the steps taken towards improvement.
    d. Distribution of professional effort for the most recent 5 years (downloaded from Watermark).
    e. Goals for the next 5 years.
2. An up-to-date *curriculum vitae* in the MUSM CV format (faculty should clearly indicate contributions made <u>after</u> the date they were awarded tenure or after the date of their most recent post-tenure review).
3. Include the following information for the most recent 5 years:
    a. Faculty development activities (downloaded from Watermark).
    b. Letter from department chair (no longer than 2 pages) addressing your contributions to the school of medicine, any professionalism issues over the most recent 5 years, and your goals for the next 5 years.
    c. Student evaluations: individual evaluations should be downloaded from One45 or other software platform and provided as an appendix. In addition, a table summarizing the evaluations should be provided (template below may be used – the data for "attitude" are provided as an example). Faculty with a primary responsibility for teaching must include a list of students/trainees they have mentored over the most recent 5 years and must document their approach to and success in mentoring struggling students.
4. Optional materials
    a. Peer-evaluations of teaching for the most recent 5 years.
    b. Additional letters of support from colleagues/referees from or outside of Mercer University addressing all or some of the post-tenure domains or criteria (no more than two letters, each 2-pages or less).

		Mean score					
Evaluation	Academic year	Unacceptable (0)	Needs Improvement (1)	Satisfactory (2)	Exemplary (3)	Number of students	Number of modules
Attitude	2018-19	0	5	7	2	14	2
	2019-20	0	4	13	2	19	3
	2020-21	0	2	15	4	21	3
	2021-22	0	1	20	5	26	4
	2022-23	0	0	34	6	40	6
	Sum	0	12	89	19	120	18
Professionalism							
	Sum	0	0	0	0	0	0
Facilitation							
	Sum	0	0	0	0	0	0

Assessment of post-tenure review materials. Assessment of the domains below should be consistent with the faculty member's distribution of professional effort over the most recent 5-year period and with any change in promotion track. The examples below are offered only as examples.

Domain	Exceeds Expectations	Meets Expectations	Does Not Meet Expectations	N/A
Quality of teaching and attention given to students as individuals (MUFH 2.4.2(2)) Students may include individuals enrolled in MUSM programs, interns, residents, fellows, junior faculty, and peers	• Outstanding student evaluations of teaching • Outstanding peer evaluations of teaching • Sustained record of student mentorship, advising, and/or coaching • Teaching, mentoring, advising, or coaching awards • Outstanding course/module/program evaluations • Designs or develops novel learner assessments items or tools adopted by MUSM	• Satisfactory student evaluations of teaching • Satisfactory peer evaluations of teaching • Evidence of student mentorship, advising, and/or coaching • Satisfactory course/module/program evaluations • Revises learner assessments items or tools for quality improvement and designs or develops new items/tools when needed • Participates in activities related to professional	• Student evaluations of teaching consistently demonstrate need for improvement in one or more areas • Peer evaluations of teaching consistently demonstrate need for improvement in one or more areas • Fails to improve in areas identified by student or peer evaluations of teaching and/or fails to engage in actively remediating areas identified by student or peer evaluations of teaching	• Administrative role precludes an active role in student teaching, mentoring, advising, or coaching

	and/or other institutions or associations • Sustained commitment to enhancing educational skills by participating in activities related to professional development in teaching, mentoring, advising, or coaching • Invited to be a visiting professor at another institution • Develops a course, curricular component, software, or evaluation materials which are used regionally or nationally	development in teaching, mentoring, advising, or coaching • Develops a course, curricular component, software, or evaluation materials for the school	• No or limited record of student mentorship, advising, and/or coaching • Below average course/module/program evaluations • Does not contribute to the design or revision of learner assessments items or tools • Does not participate in activities related to professional development in teaching, mentoring, advising, or coaching	
Breadth, depth, and variety of education and experience (MUFH 2.4.2(2))	• Demonstrates lifelong learning skills and a growth mindset by actively seeking out and acquiring additional expertise or skills in areas outside of primary expertise and using newly acquired knowledge or skills with measurable impact to improve the learning environment, clinical practice, teaching, service, research/scholarship, etc.	• Demonstrates lifelong learning skills and a growth mindset by actively seeking out and acquiring an additional expertise or skill in areas outside of primary expertise and applies the new knowledge or skill to improve an area of practice	• Lacks a growth mindset: Does not seek and acquire additional expertise or skills in areas outside of primary expertise • Lacks lifelong learning skills: Does not expand or improve in area of primary expertise	• This domain requires evaluation and is an expectation for all faculty
Professional achievement and scholarship (MUFH 2.4.2(2))	• Editor or associate editor of a professional journal • Multiple high impact peer-reviewed publications as first or last author • Multiple peer-reviewed or invited presentations at regional, national, and international conferences • Record of continuous extramural funding as a principal investigator demonstrating	• Reviewer for a professional journal(s) • Evidence of peer-reviewed publications as first, last, or middle author • Evidence of peer-reviewed presentations, including posters, at regional or national conferences • Record of extramural funding that may be supplemented with intramural funds as principal investigator or	• Lacks peer-reviewed publications • Lacks peer-reviewed presentations • Lacks extramural funding as a principal investigator or co-investigator (for faculty with a primary responsibility for research) • Lack of involvement in collaborative research projects or clinical trials • Lack of participation in professional	• This domain requires evaluation and is an expectation of all faculty

	independence from intramural funding sources (for faculty with a primary responsibility for research) • Extensive record of engaging in the existing internal grant peer review process at MUSM (for faculty with a primary responsibility for research) • Extensive record of peer-review of research manuscripts by MUSM colleagues • Leadership role in multi-institutional collaborative research projects • Sustained commitment to enhancing professional achievement and scholarship by participating in multiple professional development activities • Leadership roles in state, regional, national, or international research societies or meetings • Participation as a consultant in regional or national research program reviews • Invited referee/reviewer of proposals for meetings of national or international associations • Awards for outstanding accomplishments in scholarship • Director of scholarly activity of other faculty and/or graduate or post-doctoral appointees	co-investigator (for faculty with a primary responsibility for research) • Record of engaging in the existing internal grant peer review process at MUSM (for faculty with a primary responsibility for research) • Record of peer-review of research manuscripts by MUSM colleagues • Co-investigator in multi-institutional collaborative research projects or clinical trials • Evidence of enhancing professional achievement and scholarship by participating in professional development activities • Participation in state, regional, national, or international research societies or meetings • Oversees training of health professions students, graduate students, or post-doctoral appointees	development activities to improve scholarship • No record of engaging in the existing internal grant peer review process at MUSM (for faculty with a primary responsibility for research) • No record of peer-review of research manuscripts by MUSM colleagues	

Responsible participation in group deliberative processes (MUFH 2.4.2(2))	• Initiates and leads academic initiatives or projects involving multiple individuals • Proven leader able to build consensus among diverse groups or stakeholders • Proven leader able to manage difficult conversations and resolve conflict in group deliberative processes with diverse stakeholders • Actively includes and engages colleagues across campuses in collaborative processes	• Participates in academic initiatives or projects involving multiple individuals • Participates in efforts to build consensus among diverse groups or stakeholders • Participates in cross-campus collaborative processes	• Does not participate in academic initiatives or projects involving multiple individuals • Does not participate in efforts to achieve consensus among diverse groups or stakeholders • Does not participate in cross-campus collaborative processes • Fails to demonstrate willingness or ability to collaborate in group deliberative processes	• This domain requires evaluation and is an expectation for all faculty
Professional responsibility and service to the school and community (MUFH 2.4.2(2))	• Sustained, excellent service as program director, co-director, block chair/co-chair, module coordinator, • Elected or appointed leader of a school, hospital, or community committee • Participates as a member of multiple and varied school, hospital, or community committees • Evidence of charitable work within the community • Initiates and leads service opportunities • Extensive record of service as a role model and mentor for junior faculty	• Service as a program director, block chair/co-chair, module/course coordinator for at least 2 years in the review period • Participates as a member of one or more school, hospital, or community committees • Participates in service opportunities within the school or community • Record of service as a role model and mentor for junior faculty	• Lack of engagement on school or community committees • Frequent absences when serving on school or community committees • Attends but does not actively contribute to or participate in school or community committees • No record of service as a role model and mentor for junior faculty	• This domain requires evaluation and is an expectation for all faculty
Clinical Practice	• Elected fellow of a professional organization in the health professions • Active member of several professional organizations in the health professions • Appointed to an administrative or	• Active member of one or more professional organizations in the health professions • Demonstrates competence and promise of excellence in clinical, diagnostic, procedural, or other professional work	• Not a member of a professional organization or limited involvement over time • Does not demonstrate competence and promise of excellence in clinical, diagnostic, procedural, or other professional work	• Not a practicing healthcare provider

	leadership role (DIO, department chair, vice-chair) • Elected or appointed to a leadership position within the governing structure of a national or international professional organization (e.g., AAMC, ACGME, COAMFTE, GAMFT) • Acknowledgement from accrediting bodies such as LCME, SACS, ACGME, COAMFTE as demonstrating "Best Practices" • Becoming a regional source of referral for expert opinion • Invitations to consult with government, insurance, or drug agencies • Recipient of awards for outstanding patient care delivery • Established consultant who attracts patients or clients on a regional or national level • Creatively revises and improves quality assurance and/or risk management procedures • Develops and implements clinical or professional program • Devises a new method or procedure which receives national or international recognition • Development of new techniques, therapies, or health care delivery systems that have improved the health of the population served	• Considered a good clinician or professional by students, residents, fellows, and faculty • Consults at local level • Meets clinical benchmarks and productivity goals • Evidence for involvement in one or more of the following: ○ Revising and improving quality assurance and/or risk management procedures ○ Developing and implementing clinical or professional program ○ Devising a new method or procedure which receives national or international recognition ○ Developing new techniques, therapies, or health care delivery systems that have improved the health of the population served • Record of service as a role model and mentor for junior clinical faculty	• Does not consistently meet clinical benchmarks and productivity goals • No or limited evidence for involvement in one or more of the following: ○ Revising and improving quality assurance and/or risk management procedures ○ Developing and implementing clinical or professional program ○ Devising a new method or procedure which receives national or international recognition ○ Developing new techniques, therapies, or health care delivery systems that have improved the health of the population served • No record of service as a role model and mentor for junior clinical faculty	

	• Recognized expertise in one's field at a regional, national, or international level • Source of referral for expert opinion • Extensive record of service as a role model and mentor for junior clinical faculty			
Service in the Clinical Realm	• Leadership of a hospital/clinical committee, task force, or work group • Organizes a major national or international clinical meeting or symposium	• Membership on one or more hospital/clinical committee, task force, or work group • Participates in regional, national, or international clinical meetings or symposia	• Not a member of a hospital/clinical committee, task force, or work group • No or minimal participation in regional, national, or international clinical meetings or symposia	• Not a practicing healthcare provider
Professionalism, Civility, and Collegiality	• Respected by colleagues and students for consistently modeling all core values: ○ Civility, empathy, and transparency when working with others with differing points of views or beliefs ○ Collegiality through respectful communication, both written and spoken ○ Professionalism by actively listening to others and changing one's point of view when presented with new ways of thinking or understanding ○ Integrity by being accountable to the school and colleagues (three campuses, one school community) ○ Embracing diversity by working towards	• Frequently models several core values: ○ Civility, empathy, and transparency when working with others with differing points of views or beliefs ○ Collegiality through respectful communication, both written and spoken ○ Professionalism by actively listening to others and changing one's point of view when presented with new ways of thinking or understanding ○ Integrity by being accountable to the school and colleagues (three campuses, one school community) ○ Embracing diversity by working towards an inclusive, welcoming, and fair working and	• Does not model core values • Record of professionalism or collegiality issues that have not been remediated successfully • Fails to attend MUSM graduation, hooding, and white coat ceremonies and/or does not seek approval from the dean when unable to attend these events	• This domain requires evaluation and is an expectation of all faculty

	an inclusive, welcoming, and fair working and learning environment • Attends all MUSM graduation, hooding, and white coat ceremonies	learning environment • Attends most MUSM graduation, hooding, and white coat ceremonies and seeks approval from the dean when unable to attend these events		

Narrative
For domains assessed as "exceeds expectations" and "does not meet expectations" provide a detailed justification:

Exceeds expectations:

Does not meet expectations:

Five-Year Post-Tenure Review Timeline Example

Tenure notification: May 1, 2018 **Date tenure is effective:** 7/1/2018	7/1/2018 - 6/30/2019	7/1/2019 - 6/30/2020	7/1/2020 - 6/30/2021	7/1/2021 - 6/30/2022	7/1/2022 - 6/30/2023
Years post-tenure:	1	2	3	4	5
					Application due first Monday of January 2024

3.0 POLICIES AND RESOURCES

3.1 Learning Environment And Student Mistreatment Policy

Purpose and Scope
The purposes of this policy are to state Mercer University School of Medicine's commitment to maintaining an environment that is conducive to student learning, to describe actions that are considered to be mistreatment of students, to list the steps for reporting mistreatment, to document the procedure for responding to mistreatment reports, and to describe the plan for dissemination of the Learning Environment and Student Mistreatment Policy to the Mercer University School of Medicine community.

Introduction
Mercer University School of Medicine (MUSM), consistent with Mercer University policies and procedures

and with the Accreditation Standards of the academic programs at MUSM fosters and maintains an educational and clinical community that promotes mutual respect and learning and enables students, faculty, residents and staff to work together in an atmosphere free of all forms of harassment, exploitation, or intimidation. Each member of the MUSM academic community is expected to treat all others, regardless of status, respectfully and courteously. Professional relations should be characterized by civility and, authority will not be abused. Abuse or misuse of authority, even if unintentional, may compromise or damage other members of the community.

More specifically, all members of the MUSM academic community will treat each other with respect and dignity, no matter what station, degree, race, age, sexual orientation, religion, gender identity, disability and/or disease state, and will extend to patients, families, teachers, other health professionals, and other learners with the same degree of respect and dignity as they would expect for themselves.

Commitment to a Positive Learning Environment

Mercer University School of Medicine strives to create a learning environment that is welcoming and safe for learners, staff, faculty, and patients. Additionally, MUSM strives to provide an environment where all members of the academic community are treated with respect and are made to feel that they belong.

A positive learning environment for learners should:

Treat students with respect. Example behaviors include calling each student correctly by name, calling attention to witnessed micro-aggressions as a bystander, and apologizing for lapses in professionalism.

Include students in the team. Example behaviors include assigning meaningful work to each student, listening to students during class discussions, and including students in clinical discussions.

Help students learn. Example behaviors include giving timely feedback, imparting clinical knowledge, and providing learning goals and objectives at the beginning of each session, rotation, or course.

Provide effective and constructive feedback. Example behaviors include giving feedback that is free of demeaning or dehumanizing components, giving feedback that includes examples of student behaviors and performance that support the evaluation, and giving suggestions for improvement in a timely manner to allow for student improvement prior to the final grade.

Description of Student Mistreatment

Mercer University School of Medicine has a responsibility to foster in all students, postgraduate trainees, faculty, and staff the development of professional and collegial attitudes. To succeed in this responsibility, MUSM must provide models of professional behaviors to build an atmosphere of mutual respect and collegiality among teachers and students. While such an environment is extremely important to the academic mission of the School of Medicine and breeches of the standards of behavior are never acceptable, it is understood that incidents of inappropriate behavior or mistreatment may occur. Such behavior should be reported and corrected. The victims and perpetrators of such behavior might include students, faculty, administrators, fellows, residents, health professionals, and staff.

Specific examples of unprofessional behavior or mistreatment, include, but are not limited to:

- Speaking insultingly or unjustifiably harshly to or about a person.
- Losing personal civility, such as shouting, using obscenities, displaying a temper, or verbally abusing

other individuals.

- Speaking in disparaging ways, including attempts at humor that demeans an individual or a group.
- Using language that makes persons feel uncomfortable with respect to age, gender identity, race, religion, ethnicity, sexual orientation, appearance, or any other personal attribute.
- Asking for sexual favors or making sexually suggestive comments.
- Making belittling or humiliating comments.
- Threatening a person with physical harm.
- Physically attacking (e.g. hitting, slapping, kicking, pushing, grabbing, etc.) a person.
- Making unwanted or inappropriate physical contact.
- Requiring a student to perform personal services (e.g. shopping, babysitting)
- Requesting or requiring students to engage in inappropriate or illegal activities or unethical practices.
- Providing unfair advantages to learners (e.g. - revealing exam content to learners).
- Deliberately and repeatedly excluding a student or a group of students from reasonable learning experiences.
- Using assessments, evaluations, or training opportunities in a punitive or retaliatory manner.
- Retaliating against a student for reporting mistreatment.

Communication and Training on the Learning Environment and Student Mistreatment Policy

Education of the medical school community concerning mistreatment serves several purposes. It promotes a positive environment for learning characterized by attitudes of mutual respect and collegiality. It informs persons who have experienced mistreatment that safe avenues for seeking redress are available. It provides awareness of mistreatment and of the School's process of responding to allegations of mistreatment.

Training on the policies and procedures surrounding the learning environment and mistreatment is provided to students, residents, faculty as follows:

- Students are made aware of the policies and procedures for the School of Medicine and their academic program at orientation for each academic year. Medical students receive additional training on MD Program policies and procedures Bears Prepare sessions. Policies and procedures are accessible in the MUSM student handbook and degree program manuals on the MUSM website and when applicable, in program and in course manuals posted on Canvas. The NAVEX Global/EthicsPoint (https://secure.ethicspoint.com/domain/media/en/gui/62627/index.html for the anonymous, confidential reporting of student mistreatment and a QR code linked to this website is posted on fliers in classrooms, restrooms, and call rooms along with other important numbers including the MUSM Crisis Line and contact information for the deans of student affairs. Visiting students receive this policy information as part of orientation at their clinical learning site.

- Residents are made aware of policies and procedures through their annual training for teaching provided by the Office of Academic Affairs and the Office of Faculty Affairs. Residents are also provided the policies and procedures in the clerkship manuals and on the Resident and Faculty Development Training Hub course in Canvas.

- Faculty are made aware of the policies and procedures of Mercer University through new employee orientation sessions and on the *Handbooks and Policies* webpage of the Mercer Human Resources website (https://hr.mercer.edu/policies/). The policies and procedures for faculty of the School of Medicine are in addition to and do not supersede those established by the University. MUSM policies

are found in the MUSM faculty handbook, which is posted on the MUSM Faculty Resources website. Academic program policies that dictate faculty responsibility in Clinical faculty are also provided with policy information on the Resident and Faculty Development Training Hub maintained by Academic Affairs.

Monitoring Learning Environment and Student Mistreatment

The School monitors the learning environment in several ways. In addition to the avenues listed below for reporting individual concerns, the AAMC Graduation Questionnaire, end-of-year surveys of each matriculating MD class, affiliated hospital learning environment surveys, and graduate program evaluation surveys shall be reviewed annually and action taken on issues that arise from these surveys. Additionally, each course/clerkship evaluation is reviewed and monitored for issues of abuse and misuse at the conclusion of each course.

Reporting Mistreatment

Students can report mistreatment through the following mechanisms:

- Directly to the Senior Associate and Associate Deans of Student Affairs, who do not evaluate students in any academic program.
- Directly to the Senior Associate and Associate Deans of Academic Affairs.
- Directly to the confidential online reporting link via NAVEX Global/EthicsPoint. https://secure.ethicspoint.com/domain/media/en/gui/62627/index.html
- Directly to the Title IX Coordinator, Sharon Stellato, JD at 478-301-2788 or Stellato_sl@mercer.edu, Stellato_sl@mercer.edu, who should receive all reports of discrimination or harassment based on race, gender identity, age, ethnicity, national origin, religion, sexual orientation, veteran status or disability and/or reports of physical or sexual harassment or abuse.
- Through course evaluations distributed at the conclusion of each course/clerkship/rotation.

Reports of an emergent nature should not be reported through these mechanisms. Students should call 911 or local law enforcement if in immediate danger. For mental health crisis assistance, students may call the Mercer Crisis Hotline at 1-888-291-5802. Additionally, students may contact the national 988 number for mental health emergencies.

Concerns about the educational facilities or resources or about other concerns not related to the Codes of Conduct can be reported to the Suggestion Line at https://med.mercer.edu/anon-report/

Mistreatment Response Protocols

Response to Student Reports

Reports submitted by students through NAVEX Global/EthicsPoint go to the Mercer University Office of Compliance and are then forwarded to the Mercer School of Medicine Office of Student Affairs. Reports that are submitted directly to the Senior Associate and Associate Deans of Academic Affairs are forwarded from the Office of Academic Affairs to the Office of Student Affairs. Reports of mistreatment on program or course evaluations are forwarded by the Office of Academic Affairs or the graduate program director to the Office of Student Affairs. The Senior Associate Dean or Associate Dean of Student Affairs contacts the student upon receiving a report of mistreatment or of a poor learning environment experience. The student can elect to pursue action immediately or delay action until the completion of the current course or program. In the case of an anonymous report, action will begin immediately. If the report involves immediate harm or retribution, then the Senior Associate and Associate Deans of Student Affairs reserve the right to move forward with action while maintaining the student's confidentiality.

Incidence Management

The Senior Associate and Associate Deans of Student Affairs in consultation with the Senior Associate and Associate Deans of Academic Affairs, and as appropriate the Dean or the campus deans, will review mistreatment incident reports.

- Concerns not involving immediate student harm will be addressed in a timely manner to mitigate the problem in the learning environment and prevent subsequent poor learning experiences. As appropriate, Department Chairs, MD Program Directors, Graduate Program Directors or Residency Program Directors may be consulted in providing feedback to faculty, staff or residents to influence positive changes in a
- constructive manner.
- Egregious acts of student mistreatment or repeated patterns of concerning behaviors by faculty, staff, residents or students will trigger a full investigation by the MUSM Dean's Office and may result in notification of the Mercer Department of Human Resources. Based on the findings of the MUSM investigation, a task force will be assembled, including members from Office of Student Affairs and others involved in the academic program (e.g.- Academic Affairs Dean, Graduate Medical Education Dean, Department Chair, Residency Program Director, Graduate Program Director) to develop an intervention to remediate faculty, resident or staff behaviors.
- Complaints concerning discrimination will be reported immediately to the Equal Opportunity/Affirmative Action Officer.
- Complaints concerning issues related to Title IX will be reported immediately to the Title IX Coordinator.
- Feedback to the person reporting the incident will be provided through the NAVEX Global/ EthicsPoint website.

3.2 MUSM Statement of Institutional Standards of Behavior

Conduct such as violence, sexual harassment, inappropriate discriminations based on personal characteristics are inherently destructive and will not be tolerated. Other patterns of unacceptable behavior by medical school faculty, staff, residents, or students in this category include habitual demeaning or derogatory comments that are belittling, insensitive, and/or crude; destructive criticism; student humiliation or dehumanization; rejection and alienation.

While the School recognizes the need for effective and constructive feedback/criticism as a part of the learning process, feedback does not have to be demeaning or dehumanizing.

Examples of inappropriate and unacceptable behaviors in the learning environment are:

- Physical punishment or physical threats
- Sexual harassment
- Discrimination based on race, religion, ethnicity, gender, age, or disability
- Repeated episodes of psychological punishment of a student by a particular superior or equal (e.g. public humiliation, dehumanization, belittlement or derogatory comments, threats, intimidation, rejection, alienation, and removal of privileges)
- Grading or attention used to show favoritism or to punish a student rather than to evaluate objective performance
- Assigning tasks for punishment rather than educational purposes
- Requiring the performance of personal services

- Taking credit for another individual's work
- Intentional lack of communication
- Repeated annoying or humiliating conduct that offends a reasonable person to whom the conduct was obviously directed, including but not limited to, gestures, facial expressions, speech or physical contact or repeated inappropriate telephone, texts, social media posts or e-mail messages.

In keeping with this statement of standards of behavior, a concerted effort must be made to provide employees and students with an environment free of all forms of mistreatment and harassment. Accusations of violations of this policy are serious and can have far-reaching effects on the careers and lives of individuals. Allegations must be made in good faith and not out of malice. Any retaliatory action will be a violation of this policy.

3.3 Rights and Freedom of Students

Mercer University School of Medicine is dedicated to the promotion of learning in a nurturing learning atmosphere, which is free of all forms of harassment, exploitation, or intimidation. In so doing, MUSM provides principles and procedures bearing upon medical student rights and responsibilities and reciprocal medical faculty rights and responsibilities essential to the realization of this institutional commitment. Application of the MUSM core values is paramount in this endeavor.

3.4 Academic and Professional Rights and Responsibilities

A. *Academic Requirements*: The School of Medicine will publish the requirements for each degree offered, including curriculum, time limits, grading system employed, and other clearly stated information relative to establishing and maintaining an acceptable academic standing in school.

B. *Standards of Professional Conduct*: Wherever expected and/or required, MUSM will publish and make available to students' standards of professional behavior. Where such professional codes of conduct are imposed and accountability is anticipated, expectations shall be expressed in specific terms.

C. Students at MUSM acquires certain rights and responsibilities as a member of the Mercer University. These rights and responsibilities are delineated in approved University policies, rules and regulations found in the Mercer Student Handbook or disseminated through Mercer email listservs.

3.5 Oversight of the Medical Education Program:

The Liaison Committee on Medical Education (LCME), the accrediting body for MD Programs, requires that a medical school have in place an institutional body (i.e., a faculty committee) that oversees the medical education program as a whole and has responsibility for the overall design, management, integration, evaluation, and enhancement of a coherent and coordinated medical curriculum.

A. The Curriculum and Instruction Committee (CIC) as defined in the MUSM faculty bylaws, is vested with the responsibility of establishing academic and professional requirements, standards of curriculum and programs, and evaluation criteria for the medical education program consistent with the mission of the School.

B. With respect to individual units of the curriculum, faculty member(s) shall have authority and responsibility for procedures and evaluation methods, subject to review and approval of the CIC. The faculty of the individual curricular units shall determine student grades based on published evaluation methods and standards.

C. Determination of a medical student's overall progress, performance and standingin the medical program shall be the responsibility of the Student Appraisal and Promotions Committee (SAPC),. as defined in the MUSM faculty bylaws. The membership roster of the SAPC shall be available to medical students along with a description of the functions and methods of the Committee. Results of the evaluation carried out by the SAPC shall be made known, in writing, to each student whose progress or standing is under review.

3.6 Grading and Evaluation of Academic and Professional Performance:

A. A student has a right to a grade that represents the faculty's objective judgment of the student's performance.

B. At the beginning of the course, module, block, unit, the student will have the right to know requirements, including grading criteria and procedures and any special requirements of attendance or participation for satisfactory completion of the unit.

C. If an assessment of a student's professional conduct and performance is included in the determination of the grade, the assessment criteria shall be clearly identified and stated in the course description and evaluation methodologies at the beginning of the course. In addition, a description of the methods employed for the assessment of such professional performance and conduct shall be provided.

D. MUSM faculty shall use written student course evaluation and instructional rating reports to assess the quality of their instruction

3.7 The Family Education Rights and Privacy act of 1974 (FERPA)

FERPA is federal legislation that protects students' privacy of **Educational Records**. FERPA:

- Permits students to inspect their education records.
- Limits disclosure to others of personally identifiable information from education records without the student's prior written consent to such disclosure.
- Provides students the opportunity to seek correction of their education records where appropriate.

Educational Records are those records directly related to a student and maintained by Mercer University. They may be handwritten or in the form of print, magnetic tape, disks, film, on-line computer access files, or some other medium contained in records, files, documents, and all other

data directly related to students. Excluded Categories of Educational Records include:

- Sole possession notes (1) Not taken in conjunction with any other person and (2) Not shared with another person or placed in an area where they can be viewed by others
- Law enforcement unit records
- Records maintained exclusively for individuals in their capacity as employees
- Doctor-patient privilege records
- Alumni records
- Directory Information: As defined each year by the University, Mercer's directory information includes the following: student name, address, telephone number, date and place of birth, academic program, dates of attendance, degrees and honors received, most recent previous institution attended and participation in officially recognized activities and sports.

❖ EXCEPTION: If a student has filed a request for non-disclosure of the above items with the Office of the Registrar.

- All employees of Mercer University, to include administrators, faculty, staff, and clinical year advisors are required to abide by the policies governing the review and release of student educational records. Access to Educational Records will be granted only to those University employees who have been determined by the nature of their job to have a "legitimate educational interest" also defined as a "need to know"
- If given access to student records it is your responsibility to **never**
  - Disclose your personal password to another individual.
  - Sign onto a computer terminal and let anyone else access data from that terminal.
  - Leave screens (or reports) containing confidential student information in view of others who do not have a legitimate educational interest in the data.
  - Leave the computer terminal unattended (always lock your session whenever you are going to be away from your desk for short periods of time and sign off whenever you are going to be away for an extended period).
  - Improperly store or dispose of printed student record reports.
- An employee of the University must never disclose confidential information (e.g., academic data such as grades, test scores, and class schedules) contained in a student's record to a third party without the written consent of the student.
  - By definition, a "third party" includes parents or guardians, spouse, other students, agencies, organizations, the media, and all other individuals who are not part of the University.
  - Sensitive student data should never be shared with another employee who does not have a legitimate educational "need to know" and is therefore not authorized to receive such information.
- Mercer students may sign a form that authorizes University personnel to release and/or discuss with the student's parents or guardians' information contained in the student's academic record. Once signed, the authorization remains in effect until the student submits a request for a change in writing to the Office of the Registrar.
- The only exception to the non-disclosure regulations pertaining to the release of student records is "directory information", as defined and published by the University. Directory information may be released at the discretion of the University without the written consent of the student. However, Mercer does not generally release directory

information. Currently enrolled students may request that directory information concerning them not be released.

3.8 Policy on Access to Student Educational Records

MUSM student educational are considered private and confidential documents and are not made available to any person without the student's consent, unless the person is administrative personnel or faculty with a "need to know" based on the nature of their duties in serving the student or in evaluating the program. These duties comprise "legitimate educational interest" and authorize access to student records. Persons authorized to view student records are required to maintain the confidentiality of those private records. Access to academic information is restricted as follows:

- A student has the right to see his or her permanent educational records and is entitled to an explanation of any information recorded in it. Under the Family Education Rights and Privacy Act, the student may also inspect confidential letters and statements placed in the files.
- Parents may see the academic records of their sons and/or daughters when the student authorizes the request.
- Teachers or administrators at Mercer University may look at academic records on a "need to know" basis for legitimate educational reasons.

MUSM has determined those with a 'need to know' based on their duties as:

- The Dean, Campus Deans, Academic Affairs Deans and Student Affairs Deans, Graduate Program Directors have a right to view all of an official education record of a student in the course of their duties.
- Academic advisors have the right to view a student advisee's official educational record to monitor the student's progress and to provide educational and career guidance.
- Academic Success Counselors have the right to view all of an advisee's official educational record to monitor student progress and to provide educational guidance.
- The MUSM Student Appraisal and Promotions Committee (SAPC) has the right to view all of an official education record of a student in the fulfillment of its charges to
    - Monitor student progress toward achieving the academic performance standards
    - Evaluate and make recommendations to the Dean on advancement, retention, or dismissal of students based on student academic performance standards
    - Make recommendations to the Dean for graduation for those students who have satisfied the objectives/competencies of the educational program
- Course directors, Block co-chairs, and clerkship directors have the right to view student performance data following the completion of the course, module or clerkship for the purpose of course and programmatic evaluation.

The Academic Affairs Dean(s) and/or Student Affairs Dean will determine "legitimate educational interest" of other parties. Other than the exceptions listed above or in the case of "directory information", Mercer University School of Medicine will not release academic information about a student nor allow anyone access to academic records unless the student has given written consent. The University will honor a court order or subpoena for information or documents about a student but will attempt to notify the student in advance of compliance. In case of "health or safety emergencies", the University may determine the disclosure of certain information to appropriate persons. The storage, transmission, and/or release of any student protected health information, as defined by the Health Insurance Portability and Accountability Act (HIPAA), shall be conducted in

accordance with Mercer University's HIPAA compliance policies.

The student may request the Office of Admissions and Student Affairs to release a copy of the Medical Student Performance Evaluation Letter (MSPE) to other schools, employers, government agencies or other "third persons". A transcript of the student's permanent academic records is a xerographic copy of the academic record affixed with the School of Medicine official seal, date and registrar's signature (except for Student Copies, which are marked as such). The request for the transcripts presumes release of the MSPE (except for Student Copies). The University reserves the right to withhold release of transcripts when a student has outstanding indebtedness to the University. A record is made of transcripts sent and responses to inquiries about student information.

Any other requests for access to student official educational records shall be handled on a case- by-case basis through the Offices of Student and Academic Affairs. Individuals making requests must make a written request outlining the legitimate educational reasons for the information.

Additional FERPA information for faculty and students may be found on the Mercer University Website, http://registrar.mercer.edu/ferpa/ (accessed 08-01-2022). All MUSM faculty must complete a FERPA form to gain access to student evaluation systems and learning management systems needed to complete their academic responsibilities regardless of whether they need access to student records.
https://registrar.mercer.edu/www/mu-registrar/ferpa/upload/FERPA.pdf (accessed 08-05-22).

3.9 Student Handbooks

The current Mercer University Student Handbook is available on the website for Office of the Provost: https://provost.mercer.edu/handbooks/studenthandbook.cfm (accessed 8-01-2022). The current MUSM Student Handbook and current manuals for each degree program in the School of Medicine are posted on the MUSM Student Handbooks and Policies webpage at: the MD Program and for the graduate programs may be accessed at https://medicine.mercer.edu/student-services/handbook/ (accessed 8-01-2022).

Academic Calendars, Class Schedules, Academic Requirements And Policies

The academic calendars and descriptions for the MUSM graduate programs and the two tracks of the MD Program (the traditional 4-year and the 3-year Primary Care Accelerated Track) are published in the MUSM Catalog that is posted on the MUSM Registrar's Office webpage:
https://medicine.mercer.edu/student-affairs-and-services/registrars-office/ (accessed 8-01-2022).
The MD Program calendar and course schedules are approved annually by the Curriculum and Instruction Committee. The calendars for the graduate programs are determined by the University Registrar, and the individual course schedules are established by the graduate program directors and faculty. The class schedules, academic requirements, student advising programs, and policies for attendance, grading and examinations are found in the manuals for each academic degree program (see Student Handbooks). Policies for the preclinical (Years 1 and 2) and clinical (Years 3 and 4) phases of the MD Program may also be contained in the specific manuals for these phases located on Canvas.

Specific information for courses within each academic degree program is posted in the Canvas learning

management system or is distributed by email to faculty by the department chair, program director, or course director. Faculty, students and staff are enrolled in Canvas courses containing information for their teaching and advising responsibilities. Faculty are notified of the specific location of these materials by the Office of Academic Affairs or the program directors and are responsible for reading and understanding the program objectives, academic standards, policies and procedures of the academic programs in which they are involved in student instruction, advisement and evaluation. Faculty must also review and understand the learning objectives and student assessments in the specific courses in which they teach and evaluate students.

3.10 Faculty Development and Instructional Support Services

Faculty Events Calendar
The Faculty Events Calendar contains faculty development and other events of faculty interest held across all MUSM campuses. The calendar is maintained by the Office of Faculty Affairs and faculty may submit an event to the calendar on the calendar webpage. Faculty may also sign up to receive weekly emails with schedules of the events posted in the calendar.
https://medicine.mercer.edu/faculty/faculty-calendar/

Skelton Medical Libraries
The Skelton Medical Libraries serve Mercer University School of Medicine (MUSM) faculty, students, and staff and partnering regional healthcare institutions by providing resources and services in support of the MUSM mission and in accordance with the Collection Management Policy, to include—

- Ensuring equitable access to information for the advancement of research, scholarship, and education;
- Delivering instruction in the skills needed to effectively find, evaluate, and manage health and medical information; and
- Collaborating with the MUSM community, becoming familiar with their needs, and curating resources and services to meet those needs.

The Libraries are staffed by an ALA-accredited librarian. For library and information literacy instruction, reference services, assistance with research projects or literature searches, contact campus librarians/staff: https://med.mercer.edu/library/staffdirectory.htm.

The Libraries have physical locations available 24/7 with badge access on three campuses—MUSM Macon, MUSM Columbus, and Memorial University Medical Center in Savannah. Electronic resources and services are also available 24/7 via https://med.mercer.edu/library/ as well as Canvas, the Mercer University online course delivery and management system.

The Libraries provide access to over 147 health related databases via an A to Z list and over 17,000 medical and healthcare related journals via the online Discovery search. Use and bookmark a customized version of PubMed at https://libraries.mercer.edu/api/med_databases/quicklink/160 to see the items accessible through the Libraries via the full text icon.

Materials not owned by the Libraries may be borrowed from other libraries via InterLibrary Loan: https://med.mercer.edu/Library/ill.htm.

Study and collaboration spaces are available for reservation at LibCal - MUSM Skelton Medical Libraries.

3.11 Management of Infectious and Environmental Hazard Exposures Including Policy on Management of Blood Borne Pathogen Exposure (needle-sticks)

The MUSM Student Handbook contains detailed instructions on the post exposure procedure and guidelines for Faculty, Staff and Students. These guidelines include first aid immediately following the incident and reporting to an approved healthcare provider for medical care and testing. https://medicine.mercer.edu/student- services/handbook/ (accessed 8-03-2022). For other safety and emergency response protocols, please refer to the Mercer University Environmental, Health & Safety Office (EHSO) website at http://ehso.mercer.edu/ (accessed 8-03-22).

3.12 Graduate Faculty Membership Policy

In order to serve the interests of a growing number of graduate programs and to better position MUSM to serve the needs of graduate students, the School of Medicine sets forth the following membership criteria that requires faculty to hold 'Graduate Faculty' status in order to teach graduate courses or serve on thesis and dissertation committees. Given that all of the graduate programs at MUSM are at the graduate professional level, all faculty in MUSM have graduate faculty status. This guideline is consistent with the University's appointment process for full or associate Graduate Faculty as outlined in section 2.3 of the Mercer University Faculty Handbook posted at: https://provost.mercer.edu/resources/handbooks/faculty-handbooks/ (Accessed 8-08-22).

MUSM graduate programs may be either department-based or interdepartmental. In either case, a committee charged specifically with oversight of the graduate program will administer the graduate program. In the case of a department-based program, the department chair will appoint the committee depending upon approval by the dean. In the case of an interdepartmental program, the dean will appoint and approve the committee.

<u>Criteria for Teaching Graduate Courses or Serving as Principal Thesis Advisor:</u>

Full Graduate Faculty appointments are only available to full-time faculty who have at least three years of acceptable experience as a faculty member within an academic institution. Associate Graduate Faculty appointments are available to full-time and part-time faculty.

A faculty member teaching in a graduate course or serving as a principal thesis or dissertation advisor must have a faculty appointment in the respective graduate program. These appointments may be either primary or secondary. The respective graduate program oversight committee will be responsible for graduate program faculty appointment recommendations, with endorsements by the Department Chair (if applicable) and the Dean. Final approval rests with the Provost. In the case of departmental-based programs, it is anticipated that all, or nearly all, faculty members in the department will hold appointments in the graduate program. Graduate program faculty appointments are based on substantial evidence that a faculty member can provide graduate students with the education, training, and mentoring that are essential to the success of Mercer graduate students. This evidence might include:

- History of relevant research, publications and/or conference participation
- Patents, product designs, creative artifacts, or other evidence of discipline mastery
- Experience in graduate student education

- History of service or willingness to serve on thesis, dissertation, qualifying, or comprehensive examination committees
- History of relevant clinical experience.

Typically, graduate program faculty members will also have:

- Full-time or part-time faculty status with Mercer University
- A relevant degree. This will typically be a doctoral degree for programs offering doctoral degrees and at least a master's degree for programs offering master's degrees.

Thesis or Dissertation Committee Composition and Membership Criteria:

- The chair of the thesis committee will be the student's principal thesis advisor, who is a member of the graduate program faculty.
- The majority of the committee will be composed of members of the graduate program faculty.
- In order to bring additional perspective or expertise to the thesis committee, a minority of members may be from outside the graduate program faculty. The graduate program oversight committee, the Dean, and the Provost, must approve the overall composition of the thesis committee, including members without appointments to the graduate program faculty.

Note that only full-time faculty may serve as a thesis committee chair.

Additional Non-academic Criteria:

- Faculty members are not permitted to serve as either chair or committee member for family members, e.g. spouse or dependent immediate family member, or individuals with whom they have a close personal relationship such as partner or extended family member, or a close professional relationship such as business associate or supervisor.

- A faculty member with a significant financial interest may not serve as chair of a thesis or dissertation committee for a student who is funded through a university sponsored project supported by the chair's company, or for a student who is employed directly by the faculty member's company. The faculty member with the conflict may serve as a committee member.

- Chair of thesis or dissertation committees must hold a degree equal to or greater than the degree to be awarded.

Record Maintenance:

At the time a graduate committee is formed for the purpose of examination, certification, or direction of graduate-level research, the program should prepare a Memorandum for Record to record the members of the committee and to certify that the members meet the requirements of the medical school. The program should maintain a copy of this Memorandum and also send a copy to the Office of Research

who will maintain the Memorandum on behalf of the Dean.

4.0 PROCEDURES, GUIDELINES, AND TIMELINES FOR FACULTY APPOINTMENT, PROMOTION, AND TENURE

4.1 INTRODUCTION

Section 4 sets forth the Procedures, Guidelines, and Timelines for Faculty Appointment, Promotion, and Tenure. Supporting this section are definitions of Faculty, Ranks, and Titles. This section also provides guidelines for requesting a change of promotion track and a change in professional distribution of effort.

The appointment, promotion, and tenure of faculty are guided by standard guidelines established by the faculty. It is the faculty member's responsibility to provide evidence in support of an application for promotion or tenure using the guidelines.

Individual departments within the School of Medicine may develop additional policies, guidelines, and procedures for promotion and tenure, however these shall not conflict with those specified in this section or with those specified in the Mercer University Faculty Handbook. Faculty should carefully examine these departmental policies, guidelines, and procedures before initiating an application.

4.2 FACULTY APPOINTMENT

4.2.1 Appointment to the Medical School Faculty

The authority to appoint members of the faculty of Mercer University School of Medicine rests with the President who acts on the authority of the Board of Trustees. The qualifications, rank, and procedures are described in the Mercer University Faculty Handbook (Section 2 – Faculty Personnel Policies, specifically Section 2.1 – Faculty Appointments at Mercer University and Section 2.2 – Terms of Appointment). The Dean, often at the request of the department chair, requests the initial faculty appointment from the Provost and President to fulfill specific goals and objectives of the medical school and an individual department or section of the medical school. At the time of appointment, reappointment, or salary notification, the faculty member will receive a letter that indicates the faculty title and rank, nature, duration, tenure status, and salary (if applicable) of their appointment. All faculty are appointed to a promotion track, described in Section 5.2.2 below, that reflects the general scope of their contributions. At the time of initial appointment, the department chair should recommend the following:

- Faculty promotion track
- Faculty rank (described in Section 4.3.1)
- Full-time, part-time, or volunteer faculty status (described below)
- Adjunct, joint, or visiting status (described below)

As described below, faculty are appointed as full-time, part-time, or volunteer faculty. A faculty appointment is distinct from employment status, which indicates whether the faculty member is salaried or non-salaried by Mercer University.

Full-time faculty
Full-time faculty members are those contributing 0.5 or more full-time-equivalents (FTE) in support of the mission of the medical school, including teaching, mentoring, advising, coaching, scholarship/research, clinical practice, administration/leadership, and academic, institutional, and

community service.

Full-time faculty may be salaried or non-salaried. Salaried faculty are those who are employed by Mercer University. Full-time salaried faculty may be appointed to a tenure track or to a non-tenure track. Non-salaried full-time faculty are those with faculty appointments but who are not employed by Mercer University. Full-time non-salaried faculty are appointed to a non-tenure track. Full-time, non-salaried faculty members include those faculty associated with clinical affiliates of MUSM who contribute to the educational mission of the medical school by teaching medical students, graduate students, residents, or fellows.

Part-time faculty

Part-time faculty members are those who contribute less than 0.5 FTE in support of the mission of the medical school by providing a variety of individualized services or skills to MUSM that are primarily teaching and service. Part-time faculty may be paid by MUSM or a clinical affiliate for their services. Part-time faculty are appointed to a non-tenure track.

Volunteer faculty

Volunteer faculty provide a variety of individualized services or skills to MUSM. These services are primarily teaching and service to a department, program, the school, or a clinical affiliate. Volunteer faculty receive no pay from MUSM or the clinical affiliate. Volunteer faculty are appointed to a non-tenure track.

Adjunct Faculty

Adjunct faculty are those who hold a primary appointment in another educational institution and a secondary appointment within MUSM. These appointments are made by the Dean at the request of the chair of the secondary department or school. Full faculty privileges are retained for the primary appointment. Adjunct faculty may not advance in rank at MUSM and are appointed to a non-tenure track.

Joint Faculty

Joint faculty are those with a primary appointment in a department within MUSM who also hold an appointment in another MUSM department (i.e., a joint appointment in a secondary department). These appointments are made by the Dean and at the request of the chair of the secondary department with approval from the chair of the primary department.

Visiting Faculty

Visiting faculty are those with a full-time appointment at another institution who are temporarily assigned responsibilities at MUSM. The faculty member will retain the faculty rank of the parent institution. Such appointments are short-term, generally one year or less. Visiting faculty may not advance in rank at MUSM and are appointed to a non-tenure track.

Emeritus/Emerita Faculty

The Faculty Emeritus/Emerita faculty status eligibility criteria, process, and benefits are described in the Mercer University Faculty Handbook in Section 2.4.4.

4.2.2 Medical School Faculty Appointment Procedures

Faculty members are recruited to fulfill specific goals and objectives of the medical school and an

individual department or unit of the medical school. In accordance with these specific needs and in consideration of each faculty member's career goals, faculty are appointed to one of eight promotion tracks:

Tenure Track
This track recognizes faculty members who make critical contributions to the full range of academic activities of the medical school with emphasis on teaching, scholarship/research, and service throughout their careers and are expected to generate extramural funding. To be eligible for this track, the faculty member must be full-time and salaried by Mercer University.

Medical Educator
This track recognizes clinical and non-clinical faculty who devote most of their time to educational endeavors associated with the educational mission of the medical school. Faculty in this track are expected to participate broadly in activities related to teaching including instruction, curriculum development, assessment of students, advising, mentoring, or coaching students, and providing effective educational leadership for academic programs. Faculty on this track will be expected to achieve and sustain accomplishments in medical education. Some scholarship will be required for promotion on this track.

Clinical Educator Track
This track recognizes the contributions of the clinical faculty in the clinical practice and educational domains in both undergraduate and graduate medical education. Faculty appointed to this track are usually core residency faculty and/or faculty who actively participate in medical student education in the core clerkships. It is expected that time spent in clinically related activities will overlap with educational activities related to mentoring, teaching, and supervising medical students, residents, and fellows. Some demonstration of scholarship will be required for promotion on this track.

Clinical Scholar Track
This track recognizes faculty with a commitment to active participation in the education of medical students, residents, or fellows. These faculty are expected to maintain a clinical practice, disseminate clinical knowledge and techniques through scholarly publications and professional communications, and to generate extramural funding.

Clinical Preceptor Track
This track recognizes faculty who are involved in clinical practice with minor contributions to the undergraduate and/or graduate program. These faculty are typically community physicians in private practice settings who support the programs and educational mission of the school as a volunteer or for a small stipend.

Administrator Track
This track recognizes the faculty with substantial assignments of effort (> 50%) in administration. While most of a faculty member's effort will be in the administrative area, they are expected to participate in teaching, scholarship, clinical service, and service as appropriate to the needs of the school, university, and/or hospital.

Research Track
This track recognizes faculty who primarily support the research mission of the school and contribute

less than 0.3 FTE to the academic program. A faculty member on the research track must have demonstrated potential for, or achieved, independence and excellence in the initiation, direction, and completion of research projects. These faculty are expected to generate extramural funding sufficient to support at least 70% of their salary. While the focus of the faculty member is to support the research mission, other missions of the school may be supported.

Library Track
This track recognizes faculty who provide a full range of library services to the medical school, clinical affiliate faculty and campuses, and community-based physicians who support the educational programs and mission of the school and the public.

4.2.3 Changes in Faculty Promotion Track and Distribution of Professional Effort

A request to move from one track to another track may be initiated when it becomes apparent that circumstances will substantially affect readiness for promotion and/or tenure. While a faculty member may at any time request a change from one promotion track to another promotion track, a request to move from the tenure track should be initiated no earlier than three years and no later than four years on the tenure track. The request to change faculty track should be faculty-initiated and represent a change in personal career goals and expectations.

Any decision to change track or to change the distribution of professional effort should be made after careful deliberation and with the support of the department chair. Requests should be based on the long-term career goals of the individual as well as the needs of the department and school of medicine. Requests must be submitted in writing by the department chair for the Dean's consideration and should specify the reasons for the change in track and/or distribution of professional effort. If approved by the Dean, the request is considered by the Provost who makes the final decision. If denied prior to reaching the Provost, the faculty member may appeal directly to the Provost. If the request to change tracks is approved by the Provost, the faculty member should expect to remain in the new track for three years before seeking promotion. This allows the faculty member to demonstrate that their contributions are in accordance with the qualitative and quantitative guidelines for promotion on this track.

A faculty member on the Tenure Track who is granted tenure may be subsequently appointed to a non-tenure track and maintain tenure status. Once an individual is assigned to a new non-tenure track, then the promotion requirements of the new track would be followed.

4.3 FACULTY ACADEMIC RANK AND TITLE

4.3.1 Faculty Academic Rank

In addition to appointment to a promotion track, all faculty are assigned to one of four academic ranks at the initial appointment, in accordance with the Mercer University Faculty Handbook (Section 2.1.B – Rank):

- Instructor
- Assistant Professor
- Associate Professor
- Professor

Each appointment is made on an individual basis with appropriate recognition given to prior academic appointments, academic experience, academic service, and productivity.

Instructor
A faculty member who meets at least one of the following requirements:

- A terminal master's degree or a master's degree approved by the Dean or
- A doctoral degree with neither specialty board certification nor post-degree training.

A librarian with a master's degree may be appointed to the faculty with the approval of the Dean.

Assistant Professor
A faculty member who possesses the potential for continued professional growth and the promise of continued service and teaching to the school. A faculty member with a doctoral degree and at least one of the following:

- Specialty board certification.
- A minimum of 3 years of post-degree training.
- A minimum of 3 years of relevant experience.

An individual with a doctoral degree and without post-degree training may be appointed to the rank of Assistant Professor upon the recommendation of the department chair and approval by the Dean.

A librarian with a master's degree may be appointed to the rank of Assistant Professor with the approval of the Dean.

Associate Professor
A faculty member who has demonstrated excellence in a primary area and proficiency in other areas. A faculty member with a doctoral degree and at least one of the following:

- A doctoral degree and, if applicable, specialty board certification.
- A minimum of 5 years of experience as an Assistant Professor or equivalent experience, unless exemplary.

A librarian with a master's degree may be appointed as an Associate Professor with a minimum of 5 years of experience as an Assistant Professor or equivalent experience.

A clinical faculty member who has demonstrated a substantial record of clinical service and teaching at one or more medical schools.

Professor
A faculty member who has sustained excellence and focal expertise in a primary area of responsibility and sustained proficiency in other areas. A faculty member with:

- A doctoral degree and, if applicable, specialty board certification, and
- A minimum of 10 years as an Assistant and/or Associate Professor or equivalent experience, unless exemplary.

A clinical faculty member who has demonstrated extended and exemplary service and teaching at one or more medical schools.

Faculty members who reach the rank of professor are recognized for sustained contributions to one or more medical schools.

4.3.2 Faculty Title

Faculty titles shall refer to their rank and to the department in which they are appointed (for example - Assistant Professor of Internal Medicine, Assistant Professor of Family Medicine, Assistant Professor of Biomedical Sciences). Titles may also refer to an area of special competence (for example – Assistant Professor of Biochemistry or Assistant Professor of Geriatrics).

4.4 PROCEDURES AND GUIDELINES FOR FACULTY PROMOTION

This section provides an overview of the promotion and tenure process, describes the domains of faculty activities that are evaluated for promotion and tenure (e.g., teaching, scholarship, service, etc.), and describes the qualitative and quantitative guidelines by which promotion and tenure applications are evaluated.

4.4.1 Overview of Faculty Promotion

Faculty members should develop a progressive record of expertise in a primary area of responsibility with proficiencies in other areas. Documentation of expertise and proficiencies are expected through progressive acknowledgement from local, state, regional, national, and perhaps international sources. Early development of personal goals and documentation of accomplishments will facilitate the promotion process. Faculty members should take advantage of faculty development opportunities and mentoring to direct their careers.

The achievements and contributions documented in promotion and tenure applications will be supported by information in the *curriculum vitae* and letters of recommendation. **Applications will be evaluated on both qualitative and quantitative factors. It is important to note that meeting the quantitative guidelines will not assure promotion or tenure as the Promotion and Tenure Committee, the Dean, and Mercer University will evaluate the applicant on qualitative factors as well. At the same time, a faculty member who does not meet the minimum guidelines in an area may be promoted based on the quality of contributions in other dimensions of their work.**

Candidates are expected to show progressive accomplishment in their academic career as they advance from Assistant Professor (or Instructor) to Professor. Multiple activities supporting each domain will strengthen the application for promotion at each rank. Excellence may be demonstrated, and promotion may be awarded without contributions or accomplishments in every area under each domain. As faculty progress from Assistant Professor (or Instructor) to Professor, the contributions and accomplishments are cumulative, and faculty will continue to meet the guidelines for lower ranks.

4.4.1 Documentation Required for Promotion

The following outline provides a general overview of the areas in which applicants are expected to document contributions. Depending upon the specific promotion track, the applicant will complete only those areas that are applicable. Candidates should seek guidance from their department chair, the Office of Faculty Affairs, and follow the detailed instructions provided by the Promotion and Tenure Committee posted on the MUSM website.

1. **COMPLETE *CURRICULUM VITAE*** (use the MUSM CV template)

2. **DOMAINS EVALUATED: Teaching, research/scholarship, clinical practice, administration/leadership, and institutional, academic, and community service.**

3. **LETTERS OF SUPPORT AND RECOMMENDATION**

Candidates will be required to contact referees, both internal and external to the institution, to determine their willingness to prepare letters of support for advancement or tenure. The MUSM website provides a guide to the required letters of recommendation as well as resources for external referees. Value to the school, department, university, and/or national/international organizations should be provided by the institutional representatives best able to speak to the applicant's abilities through support letters. Demonstrated validation (Associate Professor) or sustained excellence (Professor) in the applicable domains should be provided.

4.4.2 Statement on Scholarship

Faculty members are expected to apply a **scholarly approach** to their academic endeavors, meaning that they apply a thoughtful, structured, informed, and systematic methodology to an undertaking.

Glassick and colleagues defined six criteria for assessing scholarly work [1]. A systematic, scholarly approach requires:

1. Clear Goals (ask important questions, set objectives)
2. Adequate Preparation (demonstrate appropriate skill set, draw on existing work in the field)
3. Appropriate Methods (use appropriate methods, tools, strategies, processes for the project)
4. Significant Results (state how the findings address the study objectives and whether they raised additional research questions)
5. Effective Presentation (communicate the systematic process and findings to others)
6. Reflective Critique (reflect on what could be done differently and/or what is next)

Scholarship is distinct from scholarly work. To be considered scholarship, the work requires a scholarly approach but "adds the expectation that the work advance knowledge in the field by being public and accessible in a format that others can build on… with peer review to judge the quality and value of the contribution to the field," [2]. In other words, the work is made public, is peer-reviewed, and serves as a platform upon which others can build.

Dr. Ernest Boyer's monograph "Scholarship Reconsidered" [3] provides a broad definition of scholarship recognizing that legitimate scholarly and creative pursuits span four domains: Teaching, Discovery, Application, and Integration. Scholarship, regardless of the domain in which it falls, should meet Glassick's criteria for a scholarly approach. Boyer's four domains of academic endeavors:

Scholarship of Teaching

The Scholarship of Teaching is the systematic study of teaching and learning processes. It includes educating and stimulating scholars, not only transmitting knowledge but also transforming and extending knowledge through study and debate, as well as the creation of new knowledge about teaching and learning. This area may include developing new teaching methods, evaluating outcomes, and disseminating curricula and instructional materials.

Scholarship of Discovery

The Scholarship of Discovery encompasses research and scholarly investigation, which is at the core of hypothesis-driven research. This type of scholarship encompasses research and scholarly investigation that advance knowledge, and includes quantitative, qualitative, and mixed methods research.

Scholarship of Application

The Scholarship of Application bridges theory and practice as well as the intersection of service and clinical activities. This area includes the translation of new knowledge in practical interventions that solve problems or improve the difficulties experienced by individuals and society. For example, the application of new knowledge to solve practical problems in patient care or medical education, professional excellence, or empathy in treating patients.

Scholarship of Integration

The Scholarship of integration involves synthesis across disciplines, across topics within a discipline, or across time. It places the research findings in a larger context, views data in a revealing way, interprets data and research in new ways, and looks at boundaries of the convergence of research and practice (interdisciplinary, interpretive, integrative, new insights). This area translates research findings into new and beneficial clinical practices or products.

References

1. Glassick CD, Huber MR, Maeroff GI. Scholarship Assessed: Evaluation of the Professoriate 1997. San Francisco, CA: Jossey-Bass.
2. Simpson D, Yaris LM, Carek PJ. Defining the scholarly and scholarship common program requirements. J Grad Med Ed. 2013;5(12):539-540.
3. Boyer EL. Scholarship Reconsidered, Priorities of the Professoriate. The Carnegie Foundation for the Advancement of Teaching, Princeton University Press. Lawrenceville, NJ, 1990.

Importance of Scholarship

To advance in rank in any of the faculty promotion tracks, faculty should regularly communicate new findings and/or applied knowledge and analytical thinking to their peers both within and outside the university. Accordingly, generating high quality, peer-reviewed works (e.g., journal articles, electronic publications, other scholarly works) based on original research by faculty members, represents a major source of evidence for productive scholarship.

In addition, publication of invited, peer-reviewed articles, books, book chapters, and invited or peer-reviewed presentations at national and international symposia or colloquia are typically strong indicators of the quality of a faculty member's scholarship, research, and creative endeavors.

Funding derived from competitive grants, contracts, and other external funding programs is another measure of scholarship, particularly when such funding leads to the publication of high-quality research in reputable peer-reviewed journals.

Faculty should be aware of predatory journals and conferences and requests to disseminate their work via these journals or conferences as well as opportunities to serve on the Editorial Boards of predatory journals. If questions arise, faculty should consult the Skelton Medical Library staff. Publishing or presenting in these predatory venues can damage your reputation and/or weaken your portfolio for promotion/tenure and has the potential to damage the reputation of Mercer University.

Examples of Scholarship

Faculty should not interpret the lists provided below to mean that all items on the list are expected from any single applicant. Please also note that the lists are not comprehensive, and there are other legitimate forms of scholarship that provide evidence for the faculty member's scholarly reputation. Faculty are encouraged to develop and maintain a portfolio of high quality, scholarly contributions. Examples of scholarship may include but are not limited to:

Publications:

- Peer-reviewed publications in area of expertise
- Published abstracts of presentations
- Teaching/curricular materials published in peer-reviewed repositories
- Books and/or book chapters
- Development and adoption of new library pathfinders, such as webpage content, online videos, and mobile apps

Presentations:

- Presentation of peer-reviewed papers
- Invited presentations at other institutions
- Invitations to speak at scientific or educational meetings/conferences

Support:

- Extramural support (e.g., NIH, foundation grants)
- Intramural support (e.g., Mercer University Seed Grants)
- Grant and/or contract awards
- Extramural support from commercial vendors
- Clinical trials, especially investigator-initiated and multi-center trials

Evidence of a Faculty Member's Reputation as a Scholar

- Citation by other faculty in the field in published papers (can be determined with Citation Index)
- Published reviews by other faculty in the field
- Awards for outstanding accomplishments in scholarship
- Invited referee/reviewer of manuscripts for journals in area of expertise
- Invited referee/reviewer of proposals for meetings of national or international associations
- Review of grant applications for local, state, national, and governmental agencies
- Appointment to national committees to review research proposals or results
- Participation and membership in national study sections and advisory groups
- Leadership roles in state, regional, national, or international research societies or meetings
- Participation as a consultant in regional or national research program reviews
- Documented recognition by peers outside the university as an independent and original investigator (e.g., letters of support)
- Participation on editorial boards and/or as editor

4.4.3 Documenting Faculty Contributions in Each Domain

Faculty are evaluated in five domains: teaching, scholarship/research, clinical practice (if applicable), administration/leadership (if applicable), and service. The examples listed in the following tables are offered as guidelines to demonstrate the variety of contributions that might support promotion and/or

tenure and are not intended to serve as the only activities acceptable for demonstrating accomplishment in a domain. These tables should be used to guide faculty in meeting the qualitative and quantitative guidelines described in Sections 5.4.5 and 5.4.6, respectively. Multiple activities comparable to the examples shown below will strengthen the application for promotion at each rank. Faculty should also consult the application examples for each rank and promotion track provided on the MUSM website. As mentioned in section 5.4.1 above, excellence may be demonstrated, and promotion may be awarded without contributions or accomplishments in every area under each domain. As faculty progress from Assistant Professor (or Instructor) to Professor, the contributions and accomplishments are cumulative, and faculty will continue to meet the guidelines for lower ranks.

Accomplishments in the Teaching Domain

The effectiveness of an educator in the teaching domain is evaluated in four areas: instruction, curriculum development, learner assessment, and advising/mentoring/coaching. Effective educators focus on student learning, incorporate evidence-based teaching strategies into their instruction, embrace the evaluation process as a means of assessing learning, enhance education skills by participating in professional development opportunities, and assist students in translating knowledge into practice in a variety of settings including the classroom, tutorial groups, and outpatient and inpatient clinical settings. Undergraduate students, graduate students, medical students, house officers, residents, fellows, or continuing medical education participants are considered students. Competency in teaching is expected of most faculty members at all ranks, and teaching evaluations are expected from the variety of learners with whom the faculty member has contact. Other means of evaluation such as peer evaluation of teaching and teaching innovations related to instruction, curriculum, and assessment will be considered in addition to student evaluations. Faculty members, however, are not necessarily expected to demonstrate contributions in all four areas.

TABLE 1. ACCOMPLISHMENTS IN THE TEACHING DOMAIN			
AREAS	**ASSISTANT PROFESSOR**	**ASSOCIATE PROFESSOR**	**PROFESSOR**

Instruction	• Receives satisfactory evaluations from learners • Active participation in teaching or supervision of medical students, graduate students, and residents/fellows (lectures, tutoring, large/small group instruction, teaching rounds, grand rounds, etc.) • Instructs in laboratory sessions • Supervises trainees in outpatient or inpatient clinical services • Delivers postgraduate or continuing education course which serves a local audience • Participates in activities related to professional development in teaching	• Demonstrates meritorious, consistent teaching ability • Invited lecturer at other institutions of higher education, research and development facilities, or institutes at state or regional level • Develops and participates in the teaching of major portions of a graduate course • Receives local teaching award • Favorable performance/assessment data for students or residents, where these can be attributed largely to the individual faculty member • Develops and implements innovative approaches to improving student/ resident learning and enhancement of learning experiences	• Demonstrates sustained teaching excellence • Invited to be a visiting professor at another institution • Invited to organize and participate in a symposium or plenary session at a regional, national, or international educational meeting • Invited presenter at professional meetings • Outstanding performance or evaluation data for students or residents, where these can be attributed largely to the individual faculty member • Teaching awards from students or peers (regional, national, or international level) • Acknowledgement from accrediting bodies such as LCME, SACS, ACGME as demonstrating “Best Practices”

Curriculum Development	• Contributes to curricular material (new course, syllabus materials, cases, lectures)	• Prepares curricular material (new course, syllabus materials, cases, lectures) • Develops innovative curriculum which improves student/resident learning and enhances learning experiences • Favorable evaluations of courses and curricula, as part of a systematic evaluation program • Develops/directs a postgraduate or continuing education course which serves a regional audience • Incorporates or implements a new instructional format • Develops special teaching materials such as videos, animations, computer programs, and websites	• Develops a course, curricular component, software, or evaluation materials which are used regionally or nationally • Supervises a training program which has a regional or national audience • Outstanding evaluations of courses and curricula, as part of a systematic evaluation program
Learner Assessment	• Participates in developing assessments such as OSCEs or multiple-choice questions • Serves as an OSCE/MPRA reviewer	• Develops or implements an evaluation tool or process • Develops assessments such as OSCEs or multiple-choice questions	• Develops evaluation tools or processes used outside the institution

Mentoring/ Advising/ Coaching	• Serves as an advisor to medical students, graduate students, and/or residents • Summer scholar sponsor	• Serves as advisor/mentor/coach for learners • Documented approach to mentoring struggling students • Serves as project mentor for medical or graduate students or residents/fellows • Membership on graduate student theses/dissertation committees • Favorable evaluation by faculty mentored by the candidate • Coach trainees on physical exam skills	• Sustained effort in mentoring, advising, and/or coaching • Documented approach to and success in mentoring struggling students

Accomplishments in the Scholarship/Research Domain

To advance in rank, MUSM faculty members should regularly communicate newly obtained and/or applied knowledge and analytical thinking to their peers both within and outside the university. Accordingly, generating high-quality, peer-reviewed works (e.g., journal articles, presentations, other scholarly works) based on original research by faculty members represents a major source of evidence for productive scholarship. For a work to be considered scholarship it must be made public, peer-reviewed, and serve as a platform for others to build upon. Section 5.4.3 above provides an expanded definition and description of scholarship.

For those tracks in which funding is expected, the source may be competitive funding from any source external to MUSM or MUSM clinical affiliate hospitals, e.g., private/foundation, government, or small or large industry. Grants awarded to students being advised/guided by the faculty member can also be considered for promotion. Funded clinical trials are expected to be those that are investigator-initiated. Faculty on the tenure track should note that while the minimum quantitative guidelines do not reflect a requirement for external funding in the scholarship domain for promotion to associate professor, faculty with a large percentage of their professional effort allocated to research are expected to be productive in securing external/extramural funding.

TABLE 2. ACCOMPLISHMENTS IN THE SCHOLARSHIP/RESEARCH DOMAIN			
AREAS	**ASSISTANT PROFESSOR**	**ASSOCIATE PROFESSOR**	**PROFESSOR**

Discovery	• Evidence of ability to function independently as a researcher • Initial success in obtaining extramural funding • Evidence of initial publication success • Supports MUSM scholarly activities through literature searches and research consultations • Presents results of scholarship at regional/national meetings	• Evidence of a portfolio of high quality, peer-reviewed publications • Publishes abstracts and presents results of scholarship at national or international professional meetings or conferences • Authorship in peer-reviewed papers (greater significance to first and/or senior authored papers) • Author or co-author of review articles in peer-reviewed journals • Participates in multi-center trials • PI or co-investigator on peer-reviewed intramural grants	• Continuous evidence of a significant portfolio of high quality, peer-reviewed publications • Publishes review articles in peer-reviewed journals either as first or senior author, or corresponding author • Substantial record of peer-reviewed first and/or senior authored publications • Continued, consistent success in obtaining extramural grant or contract funds • Continued consistent success in obtaining investigator-initiated grants or contracts with pharmaceutical, instrumental, or other commercial enterprises

		• Success in obtaining extramural grants or contracts • Success in obtaining investigator-initiated grants or contracts with pharmaceutical, instrumental, or other commercial enterprises • Inventions, licensed patents issued • Independently develops or directs a major program/ project/research laboratory • Invited scholarly talks, both intramural and extramural • Supervision of graduate students or post-doctoral fellows	• PI or co-investigator on peer-reviewed grants, especially extramural, and federally sponsored studies • Acquires FDA approvals; invention has a major impact on state-of-the-art; invention generates resources • Leadership of multi-institutional collaborative research projects • Director of scholarly activity of other faculty or post-doctoral fellows • Presents at national and international meetings • Oversees a major research project as principal investigator, which involves management of personnel and finance • Collaborates with colleagues at multiple institutions in major presentation at regional/state level (symposia, conference workshops) • Demonstrates a sustained leadership role in an independent research program

Integration	• Writes a textbook for use in multiple disciplines	• Writes a textbook for use in multiple disciplines • Writes comprehensive peer-reviewed review articles • Develops and/or maintains systems and interfaces that provide access to resources for scholarly activity	• Author of book chapters and/or textbooks
Teaching	• Develops peer-reviewed publicly available products such as pathfinders, web pages, and subject guides	• Publication of articles on education or teaching innovations • Publication of teaching materials in peer-reviewed repositories • Advances learning theory through research • Designs and implements peer-reviewed program assessment system	• National/international use of peer-reviewed teaching materials or courses
Application	• Develops peer-reviewed guidelines, protocols, or standards for clinical care • Participates in peer-reviewed initiatives related to patient safety, quality improvement, and process/practice improvement	• Documented ongoing clinical, translational, and/or clinical outcomes research • Guidelines, protocols, or standards for clinical care adopted by other facilities or institutions • Leads initiatives related to patient safety, QI, and process/practice improvement	• Consults at the national level • Initiatives related to patient safety, quality improvement, and process/practice improvement are adopted by other institutions/facilities • Resources that support scholarship initiatives adopted by other institutions

Accomplishments in the Clinical Practice Domain

The clinical practice of an academic clinician is intimately linked to their role as a teacher. In addition to consistently practicing a high standard of medicine, the clinician participates actively in development, delivery, and oversight of undergraduate and graduate curricula and training. The practice of medicine today requires that clinicians seek and apply new knowledge to improve patient outcomes and incorporate that knowledge into practice and education of learners. Excellence and effectiveness expected of clinical faculty will be determined by recommendations of colleagues and any quantitative data available related to hospital/practice measures. Maintaining specialty and/or subspecialty certification are expected.

TABLE 3. ACCOMPLISHMENTS IN THE CLINICAL PRACTICE DOMAIN			
AREAS	**ASSISTANT PROFESSOR**	**ASSOCIATE PROFESSOR**	**PROFESSOR**
Patient care	• Demonstrates competence and promise of excellence in clinical, diagnostic, procedural or other professional work • Considered a very good clinician or professional by local peers and learners • Consults at local level • Meets clinical benchmarks and productivity goals	• Emerging consulting physician or professional at regional level • Considered an excellent clinician or professional by local and regional peers and learners • Evidence that a unique clinical service is provided • Known as an excellent clinician with special skills at a regional level • Surpasses clinical benchmarks and productivity goals	• Becoming a regional or national source of referral for expert opinion • Invitations to consult with government, insurance, or drug agencies • Recipient of awards for outstanding patient care delivery • Established consultant who attracts patients or clients on a regional or national level

Quality initiatives	• Participates in initiatives related to patient safety, quality improvement, and process/practice improvement	• Consistently favorable reports on quality assurance and/or risk management assessments • Consistently favorable reports in patient satisfaction or similar assessments collected by the institution • Refines, devises, or implements a new method (diagnosis, therapy, clinical pathway or standard guidelines, device etc.) or procedure • Creative, active participation in the evaluation of the effectiveness (e.g., quality, utilization, access, cost) of the care provided. • Initiatives related to patient safety, quality improvement, and process/practice improvement are adopted by other institutions/facilities	• Creatively revises and improves quality assurance and/or risk management procedures • Develops and implements clinical or professional program • Devises a new method or procedure which receives national or international recognition • Development of new techniques, therapies, or health care delivery systems that improve the health of the population served

Accomplishments in the Administrative/Leadership Domain

The skills and abilities of some faculty members are utilized in the administration, management, and leadership of the medical school, the university, or clinical environment. For these faculty members, significant time is expended in administrative and leadership activities related to program development, program evaluation, accreditation, strategic planning, etc. Effectiveness in the role, description of accomplishments and outcomes must be documented according to guidelines provided within the promotion application materials.

TABLE 4. ACCOMPLISHMENTS IN THE ADMINISTRATIVE/LEADERSHIP DOMAIN			
AREAS	**ASSISTANT PROFESSOR**	**ASSOCIATE PROFESSOR**	**PROFESSOR**
Administration and leadership	• Demonstrates skills in managing activities or programs	• Serves as an assistant or associate dean or other administrative appointment, e.g., chair, vice or associate chair of a department, unit director • Oversees, directs, and interprets tests, procedures, or data handling in support of a clinical or service laboratory • Independently develops and/or directs major program or project for the organization • Demonstrates leadership role in projects/ committees/task forces • Serves as a section chief, director, or leader of a clinical area • Directs clinical or professional programs • Directs patient care activities in clinical settings • Supervises or coordinates teaching by other faculty, fellows, residents, or graduate students (course director, block coordinator, clerkship director, program director, etc.)	• Special consultant appointment and/or lectureship • Provides major leadership of hospital or institution such as chief of staff, DIO, or CMO • Administrative initiatives adopted by other institutions • Develops a unique or essential clinical program • Establishes new clinical programs (e.g., new residency program) • Invited to participate in practice guideline committees, external program reviews • Supervises or coordinates teaching by other faculty, fellows, residents, or graduate students

Accomplishments in the Institutional, Academic, and Community Service Domain

Institutional, academic (professional), and community service is an extension of the mission and vision of the school beyond the traditional academic and clinical programs within the school and should be within the area of one's professional discipline. Service may reflect the responsibility and citizenship of a faculty member to participate in functions essential to the school, University, or hospital. These activities may include service on an institutional or academic committee, or contributions to the community through activities representing the school (e.g., local committees or volunteering that reflect the mission and vision of the school), or activities that extend beyond the community to state, regional, national, or international participation in professional societies and organizations.

TABLE 5. ACCOMPLISHMENTS IN THE SERVICE DOMAIN

AREAS	ASSISTANT PROFESSOR	ASSOCIATE PROFESSOR	PROFESSOR
Institutional Service	• Serves on committees in the department, school, and/or institution • Medical school admissions or residency applicant interviewer • Participates in activities that enhance/promote the mission of MUSM	• Chairs MUSM standing committee • Contributing member of department, school, university, hospital committees and/or task forces, medical school admissions, or residency applicant interviewer • Advises student interest groups and organizations • Chairs departmental faculty search committees • Participates in activities that enhance/promote the mission of MUSM	• Evidence for sustained and varied participation in activities that enhance/promote the mission of MUSM • Evidence for multiple leadership roles associated with institutional service

Academic Service	• Member of local or regional professional society or scholarly organization	• Leadership role in local or regional professional society or scholarly organization • Serves as officer in state or local professional society • Serves as an ad hoc journal reviewer or ad hoc member of review committees or study sections • Consultant for private sector corporations • Invitations to speak at universities, hospitals, other academic/medical facilities, professionals, to the lay public locally/regionally • Leadership role in dealing with health issues local, state, or regional levels	• Multiple leadership roles by serving as officer or major committee member/chair in regional or national professional society or scholarly organization • Serves on national scientific advisory boards or study sections • Regular or ad hoc member of a national research or clinical review committee, or a taskforce • Editorial board of professional or scientific journals • Editor-in-chief of an academic journal • Leadership role in dealing with health issues at regional, national, or international levels • Contributes to board examination in specialty • Leadership role in regional/ national/international professional societies, research, or educational meetings • Invited to speak at universities, hospitals, other academic/medical
Community Outreach	• Speaks to lay groups from perspective of professional area of expertise • Science fair judge • Volunteers, especially with students, at MUSM sponsored community events	• Represents MUSM on mission trips • Recruiting trips on behalf of MUSM • Provides professional assistance to committees, agencies, or institutions • Represents MUSM to the public	• Represents MUSM to the public on a regional, national, or international level

Librarianship Service- Librarianship in the areas of Archives/Digital Initiatives; Collection Services; Public Service/Outreach; Technical Services and Library Systems	• Exhibits increased understanding of library operations and how they relate to the institution • Demonstrates increasing knowledge, understanding and skill in library functions • Develops expertise in new areas of library operations	• Assumes responsibility for supervision of library staff or other librarians • Demonstrates leadership in implementing initiatives that enhance the library services • Develops new or innovative approaches to problem-solving in specific areas of librarianship • Continued professional development in librarianship	• Contributes to high-level decision-making and strategic planning within or beyond the department • Sustained, exceptional accomplishments that are recognized at the national and/or international level • Incorporates current trends and developments in the library profession to enhance MUSM library services

4.4.4 Qualitative Guidelines for Promotion

The tables below provide the qualitative guidelines for promotion and/or tenure. The examples listed in the tables are offered as guidelines to demonstrate the variety of contributions that might support promotion and/or tenure and are not intended to serve as the only activities acceptable for demonstrating accomplishment in a domain. Multiple activities comparable to the examples shown below will strengthen the application for promotion and/or tenure at each rank. Faculty should also consult the application examples for each rank and promotion track provided on the MUSM website. As mentioned in section 5.4.1 above, excellence may be demonstrated, and promotion may be awarded without contributions or accomplishments in every area under each domain. As faculty progress from Assistant Professor (or Instructor) to Professor, the contributions and accomplishments are cumulative, and faculty will continue to meet the guidelines for lower ranks.

MUSM clinical affiliate faculty who are not salaried by Mercer University (i.e., not employees of Mercer University) should refer to the promotion process and guidelines delineated under Section 4.4.7 – Promotion of Clinical Affiliate Faculty.

TENURE TRACK

In addition to reviewing the qualitative guidelines presented in this section, faculty on the tenure track should review the guidelines specified in the Mercer University Faculty Handbook under section 2.4.2 Tenured Appointments, subsection 2, as well as the MUSM guidelines for post-tenure review in the MUSM Faculty Handbook section 2.5.4 – Post-tenure Review, to guide their preparation for tenure and post-tenure review.

Table 6. Qualitative Guidelines for Appointment or Promotion on the Tenure Track			
DOMAIN	**ASSISTANT PROFESSOR**	**ASSOCIATE PROFESSOR**	**PROFESSOR**

Teaching	• Demonstrated teaching aptitude through experience or training	• Demonstrated teaching excellence • Documented approach to mentoring struggling students	• Demonstrated sustained teaching excellence • Documented approach to and success in mentoring struggling students
Scholarship/ Research	• Demonstrated potential for developing scholarship through experience or training	• Demonstrated scholarship validated through peer-review • Demonstrated initial success in obtaining funding	• Demonstrated sustained scholarship validated through peer-review • Expectation of sustained extramural funding
Clinical Practice	• Little or none	• Little or none	• Little or none
Administration/ Leadership	• Little or none	• Little or none	• Little or none
Institutional, Academic, and Community Service	• Demonstrated initial/limited service to school, university, and/or hospital	• Demonstrated service to school, university, and/or hospital	• Demonstration of sustained service to school, university, and/or hospital
Reputation	• Local/regional	• National • Established area of expertise in field	• National/international • Sustained excellence and focal expertise • Demonstration of expertise in one's field at a national or international level

MEDICAL EDUCATOR TRACK

Table 7. Qualitative Guidelines for Appointment or Promotion on the Medical Educator Track				
DOMAIN	**INSTRUCTOR**	**ASSISTANT PROFESSOR**	**ASSOCIATE PROFESSOR**	**PROFESSOR**

Teaching	• Previous experience or potential aptitude and willingness to develop capability in teaching	• Demonstrated teaching aptitude through experience or training	• Demonstrated teaching commitment and expertise as evidenced by consistent effective teaching, development of curriculum, methods, or assessment materials • Mentor/adviser to students, residents, colleagues • Documenting an approach to mentoring struggling students	• Demonstrated sustained teaching excellence • Distinguished record as demonstrated by teaching awards • Documents an approach to and success in mentoring struggling students
Scholarship/ Research	• Demonstrated capacity for scholarship	• Demonstrated potential for developing scholarship through experience or training	• Evidence of peer-reviewed publication success • Presentation of scholarly work at regional or national conferences or professional meetings	• Record of peer-reviewed publications • Presentation of scholarly work at national or international conferences or professional meetings
Clinical Practice	• Little or None	• Little or None	• Little or None	• Little or None
Administration/ Leadership	• None	• Little or none	• Little or none	• Little or none
Institutional, Academic, and Community Service	• Demonstrated initial/limited service to/for school, university, and/or hospital	• Demonstrated initial/limited service to/for school, university, and/or hospital	• Demonstration of service contributions to/for school, university, and/or hospital	• Demonstration of sustained service to department/ division, school, university and/or hospital

Reputation	• Local	• Local	• Local/regional • Established expertise in teaching	• National and/or international • Recognized expertise at national or international level

CLINICAL EDUCATOR TRACK FOR FACULTY EMPLOYED BY MERCER UNIVERSITY

Table 8. Qualitative Guidelines for Appointment or Promotion on the Clinical Educator Track				
DOMAIN	**INSTRUCTOR**	**ASSISTANT PROFESSOR**	**ASSOCIATE PROFESSOR**	**PROFESSOR**
Teaching	• Previous experience or aptitude and willingness to develop teaching capabilities	• Demonstrated teaching aptitude through experience or training	• Demonstrated teaching effectiveness	• Demonstrated and sustained teaching excellence
Scholarship/ Research	• Little or none	• Evidence of initial publication success • Participation in QI-Patient Safety Initiatives	• Demonstrated success in scholarship • Leadership role in QI-Patient Safety Initiatives	• Publication and presentation of peer-reviewed scholarly work
Clinical Practice	• Aptitude in patient care	• Demonstrated competence in clinical, diagnostic, procedural or other professional work • Considered a very good clinician or professional by local peers and learners	• Demonstrated expertise in specialty area • Consistently favorable reports on such measures as peer assessment, patient satisfaction, outcomes assessments, productivity, and efficiency • Documents an approach to mentoring struggling students	• Demonstrated expertise in developing, implementing, and directing clinical or professional programs and patient care activities • Develops new techniques, therapies, or health care delivery systems • Documents an approach to and success in mentoring struggling students

Administration /Leadership	• None	• Little or none	• Serves in a position that involves significant time in administrative activities such as an assistant or associate dean, department chair	• Special consultant appointments and/or lectureships • Major leadership role of hospital or institution (e.g., dean, DIO) • Serves as a section chief, director, or leader of a clinical area

Institutional, Academic, and Community Service	• Serves on a committee in the department, school, university and/or hospital	• Serves on committees in the department, school, university and/or hospital • Participates in local professional society	• Demonstrated service to/for school, university, and/or hospital and the profession • Leader and advocate for improving patient care services	• Demonstrated sustained service to the department, division, school, university and/or hospital and the profession • Advocate to improve patient care services regionally/statewide
Reputation	• Local	• Local	• State/Regional • Established expert in one's field • Validation of teaching, scholarship, and clinical practice at a local, state, or regional level	• Regional/National • Recognized expertise in one's field at a regional, national, or international level • Source of referral for expert opinion

CLINICAL SCHOLAR TRACK FOR FACULTY EMPLOYED BY MERCER UNIVERSITY

Table 9. Qualitative Guidelines for Appointment or Promotion on the Clinical Scholar Track			
	ASSISTANT PROFESSOR	**ASSOCIATE PROFESSOR**	**PROFESSOR**
Teaching	• Previous experience or potential for effectively educating medical students or residents/fellows.	• Effective teacher • Mentor/advisor to colleagues, residents, graduate and/or medical students • Supervise or coordinate teaching by others • Develop educational and assessment materials	• Develops a course, curricular component, software, or evaluation materials which are used regionally or nationally • Organizes a training program with a regional or national audience • Publishes educational works in peer-reviewed outlets or repositories
Scholarship/ Research	• Focused, investigator-initiated area of scholarship • Evidence of potential to function independently as a scholar	• Disseminate results of scholarship, typically as peer-reviewed publications or presentations • Leadership role in QI-Patient Safety Initiatives	• Sustained scholarship validated through peer review • Extramurally funded research

Clinical Practice	• Appropriate clinical training and potential for excellence in clinical practice	• Demonstrated clinical expertise • Consistently favorable reports on such measures as peer assessment, patient satisfaction, compliance with care guidelines, outcomes assessments, productivity, and efficiency • Devises or implements a new method (diagnosis, therapy, clinical pathways, or standard guidelines, etc.) or procedure • Directs clinical or professional programs • Leadership that promotes quality of care, patient safety, and quality improvements	• Source of referral for expert opinion • Invited to participate in practice guideline committees, external program reviews, activity of government agencies, etc. • Develops new techniques, therapies, or health care delivery systems that improve the health of the population served • Contributes to board examination in specialty or subspecialty
Administration/ Leadership	• Little or none	• Little or none	• Leadership role in hospital/practice setting

Institutional, Academic, and Community Service	• Serves on local institutional committees	• Serves on local medical school and/or hospital committees • Leadership role or committee service in professional society • Healthcare advocate for improving patient care services locally or regionally • Leadership role in dealing with health issues at local level	• Leadership role in medical school and hospital committees • Leadership role or committee service at the national level • Organizes a major national or international scientific meeting or symposium
Reputation	• Local	• Regional/National • Established expert in one's field • Validation of teaching, scholarship, and clinical practice at a local, state, or regional level	• National/International • Recognized expert in one's field at a national or international level • Source of referral for expert opinion

CLINICAL PRECEPTOR TRACK FOR FACULTY EMPLOYED BY MERCER UNIVERSITY

Table 10. Qualitative Guidelines for Appointment or Promotion on the Clinical Preceptor Track				
DOMAIN	**INSTRUCTOR**	**ASSISTANT PROFESSOR**	**ASSOCIATE PROFESSOR**	**PROFESSOR**
Teaching	• Previous experience or potential aptitude for competently educating medical students, residents, fellows, or graduate students	• Previous experience or potential aptitude for competently educating medical students, graduate students, or residents/fellows	• Effectively supervises trainees in an ambulatory care setting, inpatient service, and procedural skills facilities • Mentors/advises colleagues, students, and residents	• Demonstrates sustained teaching excellence • Effective role model and mentor for students, trainees, and colleagues
Scholarship/ Research	• Little or none	• Involved in scholarly activity • Participation in QI-Patient Safety Initiatives	• Evidence of initial scholarship success • Leads QI-Patient Safety Initiatives	• Publication of peer-reviewed scholarly work • Presentation of peer-reviewed scholarly work
Clinical Practice	• Aptitude in patient care	• Demonstrates competence in clinical, diagnostic, procedural or other professional work • Considered a very good clinician or professional by students, residents, fellows, and faculty	• Consistently favorable reports on such measures as peer assessment, patient satisfaction, compliance with care guidelines, outcomes assessments, productivity, and efficiency • expertise in specialty area • Recognition as a skilled clinician	• Directs clinical or professional programs and patient care activities • Leadership role in hospital/ practice setting
Administration/ Leadership	• None	• Little or none	• Little or none	• Little or none

Institutional, Academic, and Community Service			• Active member of professional society • Advocate for improving patient care services locally • Provides meaningful service contributions to MUSM as a volunteer preceptor or to the community	• Leadership role in professional society • Advocate for improving patient care services regionally/statewide
Reputation	• Local	• Local	• Local/Regional • Established area of expertise in one's field • Validation of practice at a local, state, or regional level	• State/National • Evidence of regional and/or national recognition • Recognized expertise in one's field at a regional, national, or international level

ADMINISTRATOR TRACK

Table 11. Qualitative Guidelines for Appointment or Promotion on the Administrator Track			
DOMAIN	**ASSISTANT PROFESSOR**	**ASSOCIATE PROFESSOR**	**PROFESSOR**
Teaching	• Previous experience or potential aptitude for competently educating medical students, residents/fellows, or graduate students	• Consistently demonstrates effective teaching ability • Participation in medical school curriculum (lectures, tutorials, courses, dissertation committees) • Mentors/advises colleagues, residents, and medical students • Develops curricular and assessment materials • Supervises or coordinates teaching by other faculty, fellows, or residents	• Demonstrated sustained teaching competence • Participation in regional/national educational activities • Develops educational and assessment materials which are used regionally or nationally • Organizes a training program that has a regional or national audience
Scholarship/ Research	• Evidence of potential to function independently as a scholar	• Demonstrates initial success in research/scholarship	• Demonstration of continued research/scholarship
Clinical Practice	• Appropriate clinical training and potential for excellence in clinical practice.	• Consistently favorable reports on such measures as peer assessment, patient satisfaction, compliance with care guidelines, outcomes assessments, productivity, and efficiency • Demonstrates expertise in specialty area	• Directs clinical or professional programs and patient care activities • Leadership role in hospital/practice setting • Develops new techniques, therapies, or health care delivery systems that improve the health of the population served

Administration/ Leadership	• Serves as an assistant dean or other administrative appointment, e.g., vice chair of a department	• Serves as an associate dean or other administrative appointment, e.g., chair of a department • Evidence of effectiveness in major role through completed projects • Evidence of effective leadership in department/school/ hospital projects, committees, task forces	• Evidence of effectiveness in major role through completed projects • Evidence of effective leadership in projects, committees, task forces

Institutional, Academic, and Community Service	• Serves on a medical school or hospital committee	• Serves on medical school and hospital committees • Leadership role or committee service in professional society • Board membership in health- related organizations or agencies • Participates in relevant state, regional/national professional societies • Advocate for improving patient care services locally or regionally	• Sustained service to the department/division, school, university and/or hospital • Leadership role in national professional society or advocacy organizations • Regular or ad hoc member of a national research committee, clinical review committee, editorial boards, study sections
Reputation	• Local	• Regional/National • Established expert in one's field • Validation of teaching, scholarship, and administrative practice at a local, state, or regional level	• National/International • Recognized expert in one's field at a regional, national, or international level • Evidence of regional and/or national recognition

RESEARCH TRACK

Table 12. Qualitative Guidelines for Appointment or Promotion on the Research Track			
DOMAIN	**ASSISTANT PROFESSOR**	**ASSOCIATE PROFESSOR**	**PROFESSOR**
Teaching	• Previous experience or potential aptitude for competently educating medical students, residents/fellows, or graduate students	• Participation in medical school curriculum • Demonstrates effective teaching ability • Supervises students in the laboratory • Mentors/advises students, colleagues, residents	• Demonstrated competence in teaching • Continued participation in mentoring/advising activities

Scholarship/ Research	• Demonstrated potential for developing scholarship/research activity	• Demonstrated scholarship/research activity • Initial publication success in peer-reviewed publications • Success in securing extramural funding • Evidence of independent research	• Demonstration of sustained scholarship/ research activity • Demonstration of expertise in one's field at the national and/or international levels • Sustained extramural funding
Clinical Practice	• Little or none	• Little or none	• Little or none
Leadership/ Administration	• Little or none	• Little or none	• Little or none
Institutional, Academic, and Community Service	• Serves on a medical school or hospital committee	• Active member of professional society • Peer review of submitted manuscripts, grants, and/or service on study section • Service on university, school, or departmental/ divisional committees	• Leadership role in professional society • Demonstration of service to the department/ division, school and/or university • Peer reviewer of submitted grants for an extramural funding agency • Service on a national committee
Reputation	• Local	• Regional/National • Established area of expertise in one's field • Validation of practice at a local or state level	• National/International • Evidence of regional and/or national recognition • Recognized expertise in one's field at a regional, national, or international level

LIBRARY TRACK

Table 13. Qualitative Guidelines for Appointment or Promotion on the Library Track				
DOMAIN	**INSTRUCTOR**	**ASSISTANT PROFESSOR**	**ASSOCIATE PROFESSOR**	**PROFESSOR**
Teaching	• Previous experience or potential aptitude and willingness to develop capability in teaching	• Demonstrated teaching aptitude through experience or training	• Demonstrated teaching commitment and expertise as evidenced by: • Consistent effective teaching, development of curriculum, methods, or assessment materials • Mentors/ advises colleagues, residents, students	• Demonstrated sustained teaching excellence • Distinguished record as demonstrated by teaching awards
Scholarship/ Research	• Capacity for scholarship	• Demonstrated potential for developing scholarship through experience or training	• •Evidence of publication success • •Presentation of scholarly work at regional conferences or professional meetings	• Record of peer reviewed publications • Presentation of scholarly work at national conferences or professional meetings
Clinical Practice	• Little or None	• Little or None	• Little or None	• Little or None
Administration /Leadership	• None	• Little or none	• Little or none	• Little or none
Institutional, Academic, and Community Service	• Demonstrated interest in service to/for school, university, and/or hospital	• Demonstrated interest in service to/for school, university, and/or hospital	• Meaningful service contributions to/for school, university, and/or hospital	• Demonstration of sustained service to department/ • division, school, university and/or hospital

Reputation	• Local	• Local	• Local/Regional • Established expertise in teaching	• National • Recognized expertise at regional, national, or international level
Experience Requirements	• Master's degree in library science	• 3 years of service or equivalent experience	• Completion of 5 years of service at the rank of Assistant Professor at the time of application	• Minimum of 10 years as an assistant and/or Associate Professor

4.4.5 Quantitative Guidelines for Promotion

This section details the quantitative guidelines used in evaluating promotion and tenure applications. The tables below specify the qualifications for appointment and general guidelines for promotion by track. Multiple activities supporting each domain will strengthen the application for promotion at each rank. As stated in section 5.4.1 above, excellence may be demonstrated, and promotion may be awarded without contributions or accomplishments in every area under each domain. As faculty progress from Assistant Professor (or Instructor) to Professor, the contributions and accomplishments are cumulative, and faculty will continue to meet the guidelines for lower ranks.

MUSM clinical affiliate faculty: Clinical affiliate faculty who are not salaried by Mercer University (i.e., not employees of Mercer University), please refer to the promotion process and guidelines delineated under Section 4.4.7 – Promotion of Clinical Affiliate Faculty.

Tenure-track faculty: In addition to reviewing the minimum quantitative guidelines presented in this section, it is important to review the guidelines specified in the Mercer University Faculty Handbook under section 2.4.2 Tenured Appointments, subsection 2, as well as the MUSM guidelines for post-tenure review in the MUSM Faculty Handbook section 2.5.4 – Post-tenure Review, to guide their preparation for tenure and post-tenure review.

TABLE 14. QUANTITATIVE GUIDELINES FOR THE TENURE, MEDICAL EDUCATOR, AND CLINICAL EDUCATOR TRACKS	**TENURE TRACK**		**MEDICAL EDUCATOR TRACK**			**CLINICAL EDUCATOR**	
	Assistant to Associate Professor	**Associate to Full Cumulative**	**Instructor to Assistant Professor**	**Assistant to Associate Professor**	**Associate to Full Cumulative**	**Assistant to Associate Professor**	**Associate to Full Cumulative**
TEACHING DOMAIN							
Teaching evaluations	Consistently Effective	Consistently Excellent	Consistently Effective	Consistently Effective	Consistently Excellent	Consistently Effective	Consistently Excellent

Curricular products developed/improved	1	2	1	2	4	1	2
SCHOLARSHIP/RESEARCH DOMAIN							
Scholarly works total:	7	20	2	4	9	2	7
Peer reviewed publications	3	12	1	2	5		3
Invited or peer reviewed external presentations to state/regional/national audiences	4	7	1	2	4	1	2
Externally funded grants/ contracts/ clinical trials		1					
Active role in QI-Patient Safety initiatives						1	2
CLINICAL PRACTICE DOMAIN							
Meets hospital/practice productivity, effectiveness, satisfaction etc. measures						Consistently	Consistently
Demonstrates clinical excellence						Consistently	Consistently
ADMINISTRATIVE/LEADERSHIP DOMAIN							
Effective completed or adopted initiatives							
Productive leadership role in projects/ committees/task forces							
INSTITUTION/ACADEMIC SERVICE							
School/ Department/ College/Hospital Committees or task forces	2	7	1	2	5	2	3
University/State/National/ Professional Committees		2			1		1
Leadership and/or service in professional organizations, study groups, external review panels, peer review	2	4			2		1

process, editorial board, etc.							
Outreach (e.g., presentation of health information to public, science fair judge, recruiting trips, mission trips, represent MUSM)		2		1	3	2	3

TABLE 15. QUANTITATIVE GUIDELINES FOR THE ADMINISTRATOR, CLINICAL PRECEPTOR, AND CLINICAL SCHOLAR TRACKS	ADMINISTRATOR		CLINICAL PRECEPTOR		CLINICAL SCHOLAR	
	Assistant to Associate Professor	Associate to Full Cumulative	Assistant to Associate Professor	Associate to Full Cumulative	Assistant to Associate Professor	Associate to Full Cumulative
TEACHING DOMAIN						
Curricular products developed/improved	Consistently Effective	Consistently Excellent	Consistently Effective	Consistently Excellent	Consistently Effective	Consistently Excellent
Curricular products developed/improved	1	3				
SCHOLARSHIP/RESEARCH DOMAIN						
Scholarly works total:	4	9	1	2	5	12
Peer reviewed publications	2	5			2	6
Invited/Peer reviewed presentations at state/ regional/national meetings	2	4		1	2	3
Externally funded grants/contracts/ clinical trials						1
Active participation in QI-Patient Safety initiatives				1	1	2
CLINICAL PRACTICE DOMAIN						
Meets hospital/practice productivity, Effectiveness, satisfaction etc. measures	Consistently	Consistently	Consistently	Consistently	Consistently	Consistently
Demonstrates clinical excellence	Consistently	Consistently	Consistently	Consistently	Consistently	Consistently
ADMINISTRATIVE/LEADERSHIP						
Effectiveness in major role through completed or adopted initiatives, products, projects	1 per year	1 per year				
Leadership role in projects/committees/task forces	1 per year	1 per year				
Demonstrates leadership skills such as communication, mentoring, judgment, positive attitude, commitment	Consistently	Consistently				
INSTTITUTIONAL/ACADEMIC SERVICE						
School/ Department/ College/Hospital Committees	2	8			2	4
University/State/National/ Professional Committees		2			1	1
Leadership and/or service in professional organizations, study groups, external review panels, peer review process, editorial board, etc.	1	4			1	2

Volunteer service contribution to MUSM and/or community			80 hours/ year, most years	80 hours/ year, most years		
Outreach (e.g., presentation of health information to public, science fair judge, recruiting trips, mission trips, representing MUSM to the public)	5	8	3	5	2	4

TABLE 16. QUANTITATIVE GUIDELINES FOR THE LIBRARY AND RESEARCH TRACKS	LIBRARY TRACK			RESEARCH TRACK	
	Instructor to Assistant Professor	Assistant to Associate Professor	Associate to Full Cumulative	Assistant to Associate Professor	Associate to Full Cumulative
TEACHING DOMAIN					
Teaching evaluations	Consistently Effective	Consistently Effective	Consistently Excellent	Consistently Effective	Consistently Excellent
Curricular products developed/improved	1	2	4		
SCHOLARSHIP/RESEARCH DOMAIN					
Scholarly works total:	2	4	9	8	23
Peer reviewed publications	1	2	5	3	12
Invited or peer reviewed external presentations to state/regional/national audiences	1	2	4	4	7
Externally funded grants/ contracts/ clinical trials				1	4
Active role in QI-Patient Safety initiatives					
Library Products (e.g., pathfinders, subject guides, etc.) Library Products may substitute for publications or presentations; minimum totals should equal total scholarly works.	1	2	4		
CLINICAL PRACTICE DOMAIN					
N/A					
ADMINISTRATIVE/LEADERSHIP DOMAIN					
Effective completed or adopted initiatives					
Productive leadership role in projects/committees/task forces					
INSTITUTION/ ACADEMIC SERVICE					
School/ Department/ College/Hospital Committees or task forces	1	2	5		3
University/State/National/ Professional Committees			1		
Leadership and/or service in professional organizations, study groups, external review panels, peer review process, editorial board, etc. ***			2	1	4
Outreach (e.g., presentation of health information to public, science fair judge, recruiting trips, mission trips, representing MUSM to the public) (does not apply to Librarians-see below		1	3		
Librarianship 1 project/contribution from any of the following four areas each year					

Archives/Digital Initiatives					
Collection Services (selection and deselection of materials)					

Public Service/Outreach (e.g., research consultations)					
Technical Service and Library Systems (e.g., maintaining functionality of electronic resources, database management, etc.)					

4.4.6 Promotion of Clinical Affiliate Faculty

A separate process and guidelines have been developed for the promotion of MUSM clinical affiliate faculty who are not salaried by Mercer University (i.e., not employees of Mercer University) on the Clinical Preceptor, Clinical Educator, and Clinical Scholar promotion tracks. In the information and tables below, the process, requirements, and qualitative and quantitative guidelines for promotion on each track are provided. Additional information can be found on the Mercer University School of Medicine website.

Clinical Preceptor Track:

This track recognizes two cohorts of non-MUSM-employed clinical faculty: (1) community-based physicians in private practice who serve as volunteer preceptors in the school's population health course for medical students, and (2) community- and hospital-based physicians who teach or train medical students and/or residents in the clinical environment and receive either no remuneration (i.e., volunteer faculty) or a stipend from the School of Medicine for their work with medical students and/or residents.

Quantitative and Qualitative Promotion Guidelines for the Clinical Preceptor Promotion Track

See annotated CV for additional examples of activities for each domain

Domains	**Activities**	**Associate Professor**	**Professor ***
Clinical practice	Maintains an active clinical practice (must have an active medical license)	Minimum of 5 years of experience as an Assistant Professor, unless exemplary	A minimum of 5 years as an Associate Professor, unless exemplary
	Meets hospital/clinic/practice measures or outcomes (e.g., productivity, patient satisfaction, patient safety, etc.)	Consistently	Consistently
	Demonstrates effectiveness and excellence in the care of patients	Consistently	Consistently
	Demonstrates effectiveness and excellence as a role model	Consistently	Consistently
Teaching, mentoring, and advising	Achieves good/excellent medical student and/or resident evaluations. Include any personal statements from learners or colleagues if you do not	Consistently good evaluations	Consistently excellent evaluations

	have formal evaluations		
	Supervises medical students and/or residents in the clinical environment	Demonstrates an ability to supervise medical students and/or residents	Demonstrates excellence in medical student and/or resident supervision
	Population health preceptors: Teaching first-year (3-week rotation), second year (3-week rotation), and fourth year (4-week rotation) medical students	10 medical students in total; each student for a minimum of one rotation	20 medical students in total years; each student for a minimum of one rotation
	Other clinical preceptors: Teaching medical students and/or residents in the clinical environment – includes one-on-one teaching, group teaching, supervising students/residents, teaching clinicals skills, rounding with students/residents, etc.	Minimum of 3 rotations	Minimum of 6 rotations
Scholarly activity and scholarship	Examples of activities – See the annotated CV for additional examples: • Non-peer-reviewed publication (e.g., community newspaper article, development of a patient handout • Non-peer-reviewed presentation (e.g., rotary presentation, community non-medical presentation) • Peer-reviewed publication • Peer-reviewed presentation • Internally funded grants • Externally funded grants • QI-patient safety initiatives • Innovations in clinical practice	2 different products	4 products with at least 2 that are different products

Service: Institutional, professional/ academic, and community service/ outreach related to your role as a clinician and/or clinical educator	Examples of activities – See the annotated CV for additional examples: • Administrative or leadership role in the practice setting (e.g., management of employees or other practitioners, chair, DIO, etc.) • Leadership role in an academic or professional society • Editorial board or journal reviewer • Serve on a School of Medicine or Mercer University committee • Serve as a student candidate interviewer for the School of Medicine • Serve on a hospital or clinic committee • Advocate for improving patient care regionally/statewide/nationally • Volunteer service activity • Service on a local/community board • Community outreach • Mission work	2 different activities	4 activities with at least 2 that are different activities

***** Promotion to professor includes those contributions made while an assistant and associate professor (i.e., cumulative)

Clinical Educator Track:
This track recognizes faculty in the clinical practice and educational domains in both undergraduate (MD) and graduate (residency) medical education. Faculty appointed to this track are usually core clerkship faculty who actively participate in medical student education in the 6 required core clerkships. It is expected that time spent in clinically activities will overlap with educational activities related to mentoring, teaching, and supervising medical students, residents, and fellows. Faculty on this track include both full- and part-time faculty who are either MUSM-employed or not MUSM-employed (i.e., employed by hospital or clinic) faculty. MUSM-employed faculty on this track must apply for promotion using the same process as other MUSM-employed faculty. The process below is relevant for the promotion of non-MUSM employed clinical faculty on the Clinical Educator Promotion Track.

Quantitative and Qualitative Promotion Guidelines for the Clinical Educator Promotion Track

See annotated CV for additional examples of activities for each domain

Domains	**Activities**	**Associate**	**Professor ***

		Professor	
Clinical practice	Maintains an active clinical practice (must have an active medical license)	Minimum of 5 years of experience as an Assistant Professor, unless exemplary; Must have experience working with MUSM medical students in the clinical environment	A minimum of 5 years as an Associate Professor, unless exemplary; Must have experience working with MUSM medical students in the clinical environment
	Meets hospital/clinic/practice measures or outcomes (e.g., productivity, patient satisfaction, patient safety, etc.)	Consistently	Consistently
	Demonstrates effectiveness and excellence in the care of patients	Consistently	Consistently
	Demonstrates effectiveness and excellence as a role model	Consistently	Consistently
Teaching, mentoring, and advising	Achieves good/excellent medical student and/or resident evaluations. Include any personal statements from learners or colleagues if you do not have formal evaluations	Consistently good evaluations	Consistently excellent evaluations
	Teaching medical students and/or residents in the clinical environment – includes one-on-one teaching, group teaching, supervising students/residents, teaching clinicals (e.g., teaching on rounds or in clinic)	Minimum of 3 clerkship rotations with MUSM medical students and/or 3 years supervising residents	Minimum of 6 clerkship rotations with MUSM medical students and/or 6 years supervising residents
Scholarship/ Research	Examples – See the annotated CV for additional examples: • Peer-reviewed publications • Peer-reviewed presentations • Internally funded grants • Externally funded grants • QI-patient safety initiatives	2 products that represent 2 different forms (categories) of scholarship/ research; at least 1 of the products must be a peer-reviewed	7 products that represent at least 2 different forms (categories) of scholarship/ research; at least 2 of the products must be peer-

		publication. Evidence of scholarship/ research with MUSM students is required; you must make this clear in your application by including student names	reviewed publications, and at least 1 of them published since the last promotion. Evidence of scholarship/ research with MUSM students is required; you must make this clear in your application by including student names
Service: Institutional, professional/ academic, and community service/ outreach	Examples – See the annotated CV for additional examples: • Administrative or leadership role in the practice setting (e.g., management of employees or other practitioners) • Leadership role in an academic or professional society • Editorial board or journal reviewer • Serve on a School of Medicine or Mercer University committee • Serve as a student candidate interviewer for the School of Medicine • Serve on a hospital or clinic committee; any committee service of at least 1 year is counted as 1 activity, a full 3-year term is counted as 3 activities • Advocate for improving patient care regionally/statewide/nationally • Volunteer service activity • Service on a local/community board • Community outreach • Mission work	2 different activities with at least 1 at MUSM or Mercer University	3 activities with at least 1 that is different from the other 2. At least 2 activities at MUSM or Mercer University

Administration/Leadership	Examples – See the annotated CV for additional examples: • DIO • Assistant, Associate, Senior Associate Dean • Department chair • Section chief, director, or leader of a clinical area • Consultant appointments and/or lectureships	Optional	Optional

***** Promotion to professor includes those contributions made while an assistant and associate professor (i.e., cumulative)

Clinical Scholar Track:
This track recognizes faculty with a commitment to active participation in the education of medical students and residents/fellows. These faculty are expected to maintain clinical practice and to disseminate clinical knowledge and techniques through scholarly publications and professional presentations.

Quantitative and Qualitative Promotion Guidelines for the Clinical Scholar Promotion Track

See annotated CV for additional examples of activities for each domain

Domains	**Activities**	**Associate Professor**	**Professor***
Clinical practice	Maintains an active clinical practice (must have an active medical license)	Minimum of 5 years of experience as an Assistant Professor, unless exemplary; Must have experience working with MUSM medical students in the clinical environment	Minimum of 5 years as an Associate Professor, unless exemplary; Must have experience working with MUSM medical students in the clinical environment
	Meets hospital/clinic/practice measures or outcomes (e.g., productivity, patient satisfaction, patient safety, etc.)	Consistently	Consistently
	Demonstrates effectiveness and excellence in the care of patients	Consistently	Consistently
	Demonstrates effectiveness and excellence as a role model	Consistently	Consistently

Scholarship/ Research	Examples – See the annotated CV for additional examples. **Categories of scholarship:** • Peer-reviewed publications • Peer-reviewed presentations • Internally funded grants • Externally funded grants • QI-patient safety initiatives • Peer-reviewed social media posts on reputable, publicly available websites	5 total products that include: 2 peer-reviewed publications 2 peer-reviewed presentations 1 QI-Patient Safety Initiatives Evidence of scholarship/ research with MUSM students is required; you must make this clear in your application by including student names	12 products that include: 6 peer-reviewed publications with at least 3 publications since the last promotion. 3 peer-reviewed presentations 2 QI-Patient Safety Initiatives Evidence of scholarship/ research with MUSM students is required; you must make this clear in your application by including student names
Teaching, mentoring, coaching, and advising	Achieves good/excellent medical student and/or resident evaluations. Include any personal statements from learners or colleagues if you do not have formal evaluations	Consistently good evaluations	Consistently excellent evaluations
	Active participation in teaching medical students, fellows, and/or residents in the clinical environment – includes one-on-one teaching, group teaching, supervising students/residents, mentoring, teaching clinicals (i.e., teaching on rounds or in clinic)	Minimum of 3 3rd/4th year clinical rotations with MUSM medical students and/or 3 years supervising residents	Minimum of 6 3rd/4th year clinical rotations with MUSM medical students and/or 6 years supervising residents
Service Categories: Institutional, professional/ academic, hospital, and community	Examples of service • Administrative or leadership role in the practice setting (e.g., management of employees or other practitioners)	2 different activities with at least 1 at MUSM or Mercer University	3 activities with at least 1 that is different from the other 2 categories of service. At least 2 activities at

service/ outreach	• Leadership role in an academic or professional society
	• Editorial board or journal reviewer
	• Serve on a School of Medicine or Mercer University committee
	• Serve as a student candidate interviewer for the School of Medicine
	• Serve on a hospital or clinic committee; any committee service of at least 1 year is counted as 1 activity, a full 3-year term is counted as 3 activities
	• Advocate for improving patient care regionally/statewide/nationally
	• Volunteer service activity
	  ○ Service on a local/community board
	  ○ Community outreach
	  ○ Mission work
			MUSM or Mercer University

Administration/Leadership	Examples – See the annotated CV for additional examples: • DIO • Assistant, Associate, Senior Associate Dean • Department chair • Section chief, director, or leader of a clinical area • Consultant appointments and/or lectureships • Leadership position: professional staff	Little or none required	Little or none required

Reputation	Develops as a subject matter expert in a clinical practice area	Local/Regional • Established expert in one's field • Validation of teaching, scholarship, and clinical practice at a local, state, or regional level	National/International • Recognized expert in one's field at a national or international level • Source of referral for expert opinion

* Promotion to professor includes those contributions made while an assistant and associate professor (i.e., cumulative)

Required Application Materials for Clinical Preceptor, Clinical Educator, and Clinical Scholar Promotion Tracks (for non-Mercer employed faculty):

- Letter of intent to apply for promotion. A template is available for your use. The letter must also be sent to your Chair and, if you have a joint appointment, the Chair of that department as well.
- MUSM CV (an annotated CV is available for your use)
- Letters of recommendation
    - Two letters of recommendation from colleagues/peers who are currently in practice (MD, DO, MBBS) or previous medical students or residents in practice that attest to the candidate's contributions to the mission of the school of medicine and their commitment to excellence in clinical practice. For physicians in hospital departments a letter from the department chair, department head, or equivalent describing your contributions to the mission of the school of medicine and your commitment to excellence in clinical practice <u>is required</u> as one of the two required letters of recommendation. Letters must be written by individuals at or above the rank the candidate is applying for (i.e., the letter writer's rank must be higher than the current rank of the candidate).
    - Additional letters are encouraged and may be submitted but are not necessary. These letters may be written by individuals at any academic rank as well as individuals who may not be affiliated with a medical school (i.e., in private practice).
    - Letters of recommendation must address aspects of clinical practice: meeting hospital/clinic/practice measures or outcomes (e.g., productivity, patient satisfaction, patient safety, etc.), effectiveness and excellence in the care of patients, and effectiveness and excellence as a role model.
- Medical student evaluations - these will be collected for you by the school, but you must make the request from the Office of Academic Affairs. Peer evaluations or other forms of teaching evaluation may also be included.
- Candidate letter addressed to the Dean that articulates how the candidate has met or exceeded the requirements for promotion. A template is available for your use.

Timeline and Review Process:

1. Letter of intent to apply for promotion due no later than the **first Monday in July** and sent via email to: musm_faculty_affairs@mercer.edu
2. Application materials due no later than **first Monday in September** and sent to via email to: musm_faculty_affairs@mercer.edu
3. Campus dean reviews and approves the packet no later than the last Friday in September.
4. Review by the promotion and tenure committee October-November
5. Promotion and tenure committee makes a recommendation to the dean no later than the second Monday in December.
6. The dean reviews and makes the final decision. Decisions are communicated to the candidate, the candidate's department chair, the promotion and tenure committee, and faculty affairs between May and July.

4.5 FACULTY TENURE

4.5.1 General Principles

The purpose and general principles of tenure are specified in the Mercer University Faculty Handbook (Section 2.4.1 – General Principles Tenure and Section 2.4.2 – Tenured Appointments). A tenure-eligible faculty member will request tenure through the MUSM Promotion and Tenure Committee and follow the process outlined in Section 5.4 – Procedures and Guidelines for Faculty Promotion.

The MUSM Promotion and Tenure Committee reviews individuals eligible for tenure before the end of their probationary period. Tracking of tenure begins on July 1 following the initial appointment. Probationary periods include experience gained only during the initial appointment at the rank of Assistant Professor, Associate Professor, or Professor. At the time of initial appointment, the Dean may recommend that a faculty member receive consideration for "tenure-relevant" experience gained prior to their appointment to MUSM. Prior experience by a faculty member considered "tenure-relevant" may reduce the probationary period and shorter probationary periods must be approved by the President. The standard probationary period for attaining tenure is six years. Review and notification of tenure occurs during the sixth year of full-time faculty appointment, and when granted, tenure becomes effective at the beginning of the seventh contract year. Faculty members are notified of tenure or offered a one-year terminal contract no later than May 1 of the year of tenure review.

Mercer University bases tenure on merit and tenure is determined by the aggregate consideration of the criteria defined in the Mercer University Faculty Handbook (Section 2.4.2 – Tenured Appointments).

A faculty member with a probationary period of six years should seek promotion and tenure at the end of the fifth year as illustrated in the timeline below:

Six Year Probationary Period: Example Dates of Importance for Tenure Applications

Begin tenure clock 07/01/17	07/01/18	07/01/19	07/01/20	07/01/21	**07/01/22**	Six Year Probation Period Ends	07/01/23

Years Completed	1	2	3	4	5	6	
					Submit letter of intent to department chair and dean. Prepare application for October review	Tenure Approved	Tenure begins
						Tenure Denied	1-year non-renewable contract
	EARLY APPLICATION PERIOD						

4.5.2 Change in Tenure Status

A faculty member may request to change from the tenure track appointment to a non-tenure track appointment prior to tenure review as outlined in Section 5.2.3. A faculty member may also request to change from a non-tenure track appointment to a tenure track appointment. These changes require the approval of the Dean and the Provost. For faculty members transferring to the tenure track, the probationary period begins on July 1 of the academic year following the change.

Granting tenure upon initial appointment is not a usual condition of appointment. Certain individuals of exceptional merit who have already achieved tenure while employed at another university may warrant tenure as a condition of employment or following a brief probationary period.

4.5.3 Delay in Tenure Review

There may be occasions when a faculty member encounters certain circumstances that may justify a delay in the scheduled tenure review process. Requesting an extension must occur prior to submission of an application for tenure. To be considered for an extension, the faculty member must make a written request to the department chair documenting that their ability to demonstrate readiness for applying for tenure has been substantially impaired. Faculty should submit this request when it becomes apparent that circumstances will substantially affect their readiness for tenure rather than waiting until the year in which the review is scheduled.

The faculty member should provide the following information:

1. Date of MUSM faculty appointment
2. Terminal tenure year
3. Reason for requesting an extension
4. Date of the event(s) affecting readiness for tenure
5. Explanation of how the nature of the event(s) substantially burdened (or will burden) progress toward tenure
6. Outline of the specific work for which progress has been (or will be) hampered

If approved by the department chair, the Dean considers the request, and if approved, the recommendation is subsequently considered by the Provost. If denied prior to reaching the Provost, the faculty member may appeal to the Provost.

Examples of circumstances that might justify a delay in the tenure review:

- Birth or adoption of child
- Illness or disability of a family member
- Personal or family tragedy
- Catastrophic change in the research environment that significantly delays or terminates research activity
- Other justifiable changes in the research goals of the individual or the department that adversely affect the scholarly productivity of the faculty member
- Unforeseen imposition of additional department or university duties on the faculty member that significantly detracts from the time available for scholarly activity
- Formal enrollment and engagement in additional advanced degree work that was previously approved by the institution

4.5.4 Promotion and Tenure Checklist and Important Dates for Mercer employed faculty

DEADLINES	ACTION ITEMS	INDIVIDUALS RESPONSIBLE
Prior to July	• Review your departmental policy for promotion and/or tenure as early as possible to identify any additional requirements and due dates if applicable; not every department has a separate review process for promotion and/or tenure. • Attend a Promotion and Tenure Workshop (recommended). • Discuss with department chair progress toward promotion and/or tenure and intent to apply for promotion and/or tenure.	Candidate and Chair
First business day of July	• Submit a letter of intent to department chair and submit a copy via email to the Office of Faculty Affairs by the **first business day of July**: Musm_Faculty_Affairs@mercer.edu • For faculty who have a joint appointment, a letter of intent must also be submitted to the chair of this secondary department.	Candidate
July	• The candidate will receive notice from the Office of Faculty Affairs indicating receipt of the letter of intent. • The Office of Faculty Affairs forwards all letters of intent to the Dean and the Chair of the MUSM Faculty Promotion and Tenure Committee.	Office of Faculty Affairs
July-October	• Compile and submit the information required for promotion and/or tenure – applications are due the **first business day of October (if a holiday, applications are due the next business day)**. • **Note: For MUSM-employed faculty, application materials are submitted as PDFs via Watermark (formerly Activity Insight).**	Candidate
Mid-August	• Candidate and department chair identify internal and external referees and prepare materials to submit to referees. The	Candidate and Chair

	referee's academic rank should be higher than the current rank of the candidate. • Chair contacts each referee and provides a copy of the candidate's CV and supporting material as well as the MUSM promotion and tenure guidelines. Chair request that letters are sent electronically no later than the **first business day of September** to the Office of Faculty Affairs: Musm_Faculty_Affairs@mercer.edu	
First business day of September	• **First business day of September (if a holiday, application is due the next business day)**, or in accordance with departmental policy and procedures, submit the application for promotion and/or tenure for review by the department chair and, if applicable, the departmental promotion and tenure review committee. • Candidate's department chair and, if applicable, department promotion and tenure committee evaluate the application.	Candidate, Department Chair, Department Promotion and Tenure Review Committee
Third Monday of September	• Chair letter of recommendation, a recommendation letter from the chair of the candidate's secondary/joint appointment if applicable, and internal and external referee letters are due the **third Monday of September**. Letters should be addressed to the Dean and sent directly to the Office of Faculty Affairs: Musm_Faculty_Affairs@mercer.edu • The Office of Faculty Affairs forwards letters to the chair of the MUSM Faculty Promotion and Tenure Committee	Chair, internal and external referees
First business day of October	• Submit the transmittal form, CV, application, and supporting material as **PDFs** to Musm_Faculty_Affairs@mercer.edu by 5:00 p.m. on the **first business day of October (if a holiday, due the next business day).** • Materials will be sent to the chair of the promotion and tenure committee by faculty affairs.	Candidate, Faculty Affairs
Oct – Dec	• MUSM Faculty Promotion and Tenure Committee convenes and begins its review of the applications. Committee deliberations and recommendations are conducted in executive session and are confidential.	MUSM P&T Committee
Second Monday of December	• The Promotion and Tenure Committee forwards its recommendations, along with supporting documents, to the Dean for consideration no later than the **second Monday of December (if a holiday, due the next business day)**	MUSM P&T Committee
Third Friday in December	• Promotion and Tenure Application Addendum: In recognition of ongoing developments in the areas of evaluation, the promotion and tenure review process allow for a one-time amendment to the application portfolio with a one-page written addendum submitted to the Dean on or prior to the end of the **third Friday in**	Candidate

	December (if a holiday, due the next business day). The addendum is not an opportunity to reimagine the application narrative but rather is limited to additions/revisions of status that may materially impact the review process (e.g., notification of final acceptance of publication, award of external grant/fellowship, award of professional honorific or teaching recognition, reflection on fall semester teaching, etc.). Confirming documentation may be submitted with the addendum, which shall be added to the promotion and tenure application for subsequent review. There is no guarantee of reconsideration of recommendations completed prior to addendum submission. Note that this addendum applies to all MUSM promotion tracks.	
Last Monday of January	• Dean considers the recommendations of the department chair/unit director, and the Promotion and Tenure Committee before making a recommendation to the Provost. The action taken by the Dean, and all subsequent applicable notification and review procedures, shall be in accordance with the Mercer University Faculty Handbook and follow the prescribed timelines. Recommendation and packets are due to the Provost's office the **last Monday of January (if a holiday, due the next business day)**	Dean
Feb – March	• The Provost and the President review applications.	Provost, President
April	• The Provost's Office makes recommendations to the Board of Trustees at the April meeting (Spring meeting). • The Dean notifies candidates of Board of Trustees' actions. • Note: Candidates will neither be informed of the Promotion and Tenure Committee recommendation to the Dean nor of the Dean's recommendation to the Provost.	Provost, Dean, Board of Trustees

Chronology of REVISIONS, APPROVALS, EDITS & UPDATES OF SECTION 4:

2002
Operational Procedures (5.12) approved by MUSM P&T Committee

July 14, 2003
Document revisions approved by MUSM Faculty

August 2003
Chart 1: Probationary Periods – Dates of Importance for Tenure Application approved by W. G. Solomon, University General Counsel

August 1, 2003
Document updated by L. Adkison

September 30, 2003
Operational Procedures (5.12) revised & approved by MUSM P&T Committee, and document updated by L. Adkison

April 6, 2004
Library Faculty sections approved by MUSM Executive Committee & document updated by L. Adkison

May 2, 2005
Article 11. FACULTY PROMOTIONS AND TENURE COMMITTEE of the *BYLAWS OF THE FACULTY OF MERCER UNIVERSITY SCHOOL OF MEDICINE* approved by MUSM

June 17, 2005
Document reviewed by MUSM P&T Committee, edited by J. Boltri, D. Harris & J. LaBeause & document updated by J. LaBeause

June 2006
Document reviewed by J. Boltri & D. Harris, Chart 1 corrected by L. Adkison & document updated by J. LaBeause

May 2010
Research Faculty sections approved by MUSM Executive Committee & faculty, document updated by J. Boltri, M. Dent & J. LaBeause

June 2013
Document updated with "Request for Promotion and/or Tenure" and associated changes; CV template updated, guidelines for documentation and electronic submission added as appendix by M. Dent

May 2015
Major revisions made to P&T document. Approved by faculty through electronic voting in May 2015

August 2017
Library Track reinstituted on recommendation of P&T Committee and approval by the Executive Council through an electronic vote. Document updated by M. Dent.

June 2020
Moving tracks and remaining in track for 3 years prior to seeking promotion. Document updated by B. Dickinson and M. Dent and formatted by K. Meeks

March 10, 2023
Reorganization of content to improve clarity and reduce redundancy by B.L. Dickinson and subcommittee members: R. Visalli, A. Meyers-Stinson, B. Lian, and R. Parrish.

March 28, 2023
March 10, 2023 version approved by the MUSM Executive Council.

April 11, 2023
March 10, 2023 version approved by the MUSM Faculty.

July 25, 2023
March 10, 2023 updated letters of recommendation section for non-Mercer employed clinical faculty by B. Dickinson.

5.0 RESEARCH POLICIES

5.0 University Support of Research Activities

All faculty are encouraged to engage in scholarly pursuits. The School provides a modest budget for supportive services and for maintenance of major equipment. MUSM also has start-up funds available to aid new investigators and to initiate research projects.

5.2 Openness of Research

MUSM places no restraints on the publication of research results that faculty and students conduct in a scholarly manner. All research conducted at MUSM is public or non-classified unless otherwise officially designated. In special instances, Faculty members may arrange to conduct classified research. An ad hoc committee appointed by the President must study the feasibility of conducting classified research prior to its initiation.

5.3 Inventions, Patents and Licensing

Mercer University is dedicated to teaching, research, and the expansion of knowledge. Although the University does not undertake research or developmental work principally for the purpose of developing patents and commercial applications, patentable inventions sometimes result from the research activities carried out wholly or in part with University funds and facilities. It is the policy of the University to assure the utilization of such inventions for the common good and, where appropriate, to pursue patents and licenses to encourage their development and marketing.

Mercer University has established policies and procedures with respect to inventions, patents, and licensing in order to:

A. promote the University's academic policy of encouraging research and scholarship;
B. serve the public interest by providing an organizational structure and procedures through which inventions that arise in the course of University research may be made available to the public through established channels of commerce;
C. encourage, assist, and provide tangible rewards to members of the University community who make inventions processed under this policy;
D. establish principles and uniform procedures for determining the rights and obligations of the University, inventors, and research sponsors;
E. enable the University to retain title to inventions resulting from federally- sponsored research; and
F. produce funds for further investigation and research and for the overall needs of the University.

For further information on Mercer University's Policy on Inventions, Patents and Licensing, including allocations of income to the inventor, the School and the University, see the Mercer University Faculty Handbook, Section 3.3: http://provost.mercer.edu/www/mu-provost/handbooks/upload/2020-University-wide-Faculty-Handbook-2.pdf (Accessed 4-21-20)

5.4 Research on Human Subjects

The University has established an Institutional Review Board for Human Subject Research to ensure competent review of all research activities involving human subjects. The Board is responsible for protecting the rights and welfare of human subjects involved in research conducted at, or sponsored by, Mercer University and is responsible for assuring its compliance with applicable laws and regulations. Before a faculty member undertakes any project or activity involving human subjects, the investigator must submit sufficient information to the Board to enable determination of the degree of risk at which the human subjects will be placed, to assess whether the risks are reasonable in relation to the anticipated benefits and importance of the knowledge to be gained, and to assure that legally effective informed consent will be obtained.

Investigators can obtain further information, copies of the IRB Policy, application forms, and examples of consent forms from the Office of Research Compliance https://orc.mercer.edu/ (accessed 9-26-22) and the Mercer University Faculty Handbook, https://provost.mercer.edu/resources/handbooks/faculty-handbooks/ (accessed 9-26-22)

MUSM has an internal routing and approval procedure that must be followed prior to submission of grants, contracts, IRBs, and IACUCs to the University. Details on this procedure can be found on the MUSM Office of Research website at https://medicine.mercer.edu/research/office-of-research/proposal-preparation-and-routing-information/ (accessed 9-26-22).

5.5 Use of Animals in Research

In compliance with applicable laws and regulations, Mercer University has an Institutional Animal Care and Use Committee (IACUC) charged with the responsibility of reviewing facilities, research, and teaching for the proper care and use of laboratory animals. Before any research project or teaching activity involving vertebrate animals is undertaken, the investigator must submit sufficient information to the Committee to enable it to determine the appropriateness of the animal model and to assure the proper care and use of the animals.

Faculty can obtain further information, copies of the relevant guidelines and policies, and application forms from the Office of Research Compliance. https://orc.mercer.edu/ (accessed 9-26-22).

MUSM has an internal routing and approval procedure that must be followed prior to submission of grants, contracts, IRBs, and IACUCs to the University. Details on this procedure can be found on the MUSM Office of Research website at https://medicine.mercer.edu/research/office-of-research/proposal-preparation-and-routing-information/ (accessed 9-26-22).

5.6 Environmental Safety

Mercer University has provided formal assurance to the Department of Health and Human Services (DHHS) and the Department of Natural Resources of the State of Georgia that it will follow procedures which will assure the protection of all individuals involved with research

projects. This assurance applies to research conducted on the premises of Mercer University by faculty, students, staff, or other representatives of the University whether or not the research is sponsored by DHHS. This assurance also applies to research licensed by the State of Georgia and approved by the University for conduct not on University premises by employees of the University.

In order to comply with this assurance, Mercer University has established an institutional committee qualified to review research and instructional projects that involve potentially hazardous infectious agents and/or recombinant DNA. This committee has been designated as the Institutional Biosafety Committee (IBC). In addition, Mercer University has established an institutional committee qualified to review research and instructional projects that involve radioactive agents. This committee has been designated as the Institutional Radiation Safety Committee (IRSC).

The primary function of the IBC is to assist the investigator in the protection of individuals and the environment from potential contamination. All projects that involve the use of these agents are to be conducted under these guidelines.

The primary function of the IRSC is to assist the investigator in the protection of individuals and the environment from potential contamination. All projects that involve the use of these substances and/or devices are to be conducted under these guidelines.

The full text of the Policy and Procedures for Institutional Biosafety Committee are located for faculty/staff reference in the Environmental, Health and Safety Office and on Mercer's web site at: http://www.mercer.edu/ehso/ (accessed 9-26-22),

The full text of the policy and procedures of the Institutional Radiation Safety Committee is located for faculty reference in the Environmental, Health and Safety Office, in the offices of the local Radiation Safety Officers, and on Mercer's web site at: http://www.mercer.edu/ehso/ (accessed 9-26-22).

The University also operates a formal Hazard Communication Program, a Chemical Hygiene Plan, and an Exposure Control Plan. Details on these programs and plans can be found on the Environmental, Health and Safety Office and on Mercer's web site at: http://www.mercer.edu/ehso/ (accessed 9-26-22)

5.7 Fraud and/or Misconduct in Research

Mercer University has adopted a policy on fraud and/or misconduct in research. This policy addresses the commitment of fraud in research; the willful or intentional violation of Mercer University's research policy; and the condoning of fraud in research or violations of University research policy. Faculty can access details of the policy in the Mercer University Faculty Handbook -- Section 3.5. https://provost.mercer.edu/resources/handbooks/faculty-handbooks/ (accessed 9-26-22)

5.8 Self-funded Research Requiring MUSM Research Facilities

Faculty members wishing to fund research from their own pockets have the responsibilities of a Principal Investigator (PI) and use the following policy.

- PI writes a grant proposal using Navicent Health Foundation Research and Education Grants format (www.navicenthealth.org/foundation/grants) (accessed 3-31-2020) including budget for the entire project. Indirect costs will be calculated at the current NIH F&A rate and added to budget.
- Include a list of two off-campus impartial reviewers who are willing to provide written comments on the scientific merit of the proposal and rank it 1 – 10 (10 best).
- Follow the usual MUSM routing of the proposal for approval, i.e. Chair's signature, signature of Associate Dean for Research, Finance Office, and University Research Office.
- PI transmits proposal to reviewers and has their reviews returned directly and in confidence to office of Associate Dean for Research within 1 month.
- The Dean of MUSM either approves or disallows the project.
- If approved, PI deposits first year budget with University.
- PI is responsible for maintaining budget balance to make certain account remains solvent.
- PI deposits a one-year budget annually for the approved life of the grant.
- The PI submits annual progress reports to the department Chair, the Dean's Office, and the Associate Dean for Research.

Mercer University Research Financial Conflict of Interest Policy (See Section 7 for COI policies)

6.0 CONFLICT OF INTEREST

6.1 General Policy on Conflict of Interest

6.1.1 Introduction

This MUSM policy is based on the University "Policy on Conflict of Interest and Commitment" and, like the University policy, is intended to comply with the National Science Foundation (NSF) Investigator Financial Disclosure Policy [Fed. Reg. 60, no. 132, pp. 35820- 35823 (July 11, 1995)] and the final regulations of the Department of Health and Human Services (DHHS) dealing with investigator conflicts of interest, both of which were effective on October 1. 1995. Modifications of this MUSM Policy may be necessary or advisable once other agencies adopt conflict of interest rules or once further guidance is received from NSF and HHS.

In addition to meeting the standards imposed by NSF and DHHS, both the University and the School policies have been broadened, by way of a General Philosophy and Basic Principles, to cover non- financial conflicts of interest.

6.1.2 General Philosophy

Mercer University and the School of Medicine recognize that external consulting, research, and educational or other scholarly activities are a proper and common feature of academic employment, contributing to the professional development of the individual and extending the University's missions of teaching, research, and service. The University and School of Medicine permit and indeed encourage a limited amount of such activities where they:
provide the individual employee with experience and knowledge valuable to teaching, research or scholarship,
involve suitable research or scholarship through which the individual may make a worthy contribution to knowledge, or
constitute a public service.
These activities should not present unacceptable conflicts of interest or create conflicts of commitment with respect to the individual's obligations to the University or the School of Medicine and performance of University and School duties.

6.1.3 Basic Principles

Full-time members of the faculty and professional and administrative staff owe their primary professional responsibility to MUSM; their primary commitment of time and intellectual effort should be to their institutional responsibilities assigned and/or approved by the Dean of the School. Part-time employees are obligated to the School in proportion to the terms of their employment.
Outside activities may not interfere with the individual's institutional responsibilities.

MUSM salaried faculty and staff are not permitted to retain full-time employment at another establishment.

No outside activities should result in any conflict of interest with or compromise of commitment to the individual's responsibilities to MUSM.

MUSM resources (including space, facilities, equipment, and support staff) may not be used for outside activities without prior approval and appropriate payment to MUSM.

The School's name may not be used in outside activities without prior approval.

Faculty members who wish to arrange consulting, research, educational, or other paid outside activities must obtain prior approval from the Dean of the School or the Dean's designee.

Professional or administrative staff who wish to arrange consulting, research, educational, or other paid outside activities must obtain prior approval from the appropriate supervisor.

Faculty members who believe their consulting, research, educational, or other paid outside activities will result in a conflict of commitment must obtain prior approval from the Dean of the School or the Dean's designee.

6.1.4 Annual Disclosure

In order to prevent conflicts of interest and commitment, it is the policy of Mercer University School of Medicine that each year each faculty member will complete a "Disclosure of Outside Activities and Financial Interests Form". The Disclosure will accompany the yearly contract letter; both documents must be signed and returned to the Dean's Office.

6.2 SPECIFIC POLICY ON OUTSIDE ACTIVITIES AND FINANCIAL CONFLICTS OF INTEREST

6.2.2 Definitions

Conflict of Interest means a significant outside interest of a university employee or one of the employee's immediate family members that could directly or significantly affect the employee's performance of his or her institutional responsibilities. The proper discharge of an employee's university responsibilities could be directly or significantly affected if the employment, service, activity or interest: (1) might tend to influence the way the employee performs his or her university responsibilities, or the employee knows or should know the interest is or has been offered with the intent to influence the employee's conduct or decisions; (2) could reasonably be expected to impair the employee's judgment in performing his or her university responsibilities; or (3) might require or induce the employee to disclose confidential or proprietary information acquired through the performance of university responsibilities.

Conflict of Commitment means a state in which the time or effort that a university employee devotes to an outside activity directly or significantly interferes with the employee's fulfillment of university responsibilities, or when the employee uses state property without authority in connection with the employee's outside employment, board service or other activity

Significant financial interest means anything of monetary value, including, but not limited to salary or other payments for services (e.g., consulting fees or honoraria); equity interests (e.g., stocks, stock options or other ownership interests); and intellectual property rights (e.g., patents, copyrights, and royalties from such rights).

Other support includes all resources made available to a researcher in support of and/or related

to all of their research endeavors, regardless of whether or not they have monetary value and regardless of whether they are based at the institution the researcher identifies for the current grant. This includes resource and/or financial support from all foreign and domestic entities, including but not limited to, financial support for laboratory personnel, and provision of high-value materials that are not freely available (e.g., biologics, chemical, model systems, technology, etc.).

Foreign Components means the existence of any "significant scientific element or segment of a project" outside of the United States, as defined by: 1. Performance of work by a researcher or recipient in a foreign location, whether or not grant funds are expended and/or 2. Performance of work by a researcher in a foreign location employed or paid for by a foreign organization, whether or not grant funds are expended.

6.2.3 Required Outside Activity and Financial Disclosures

Each investigator must disclose to the Dean all of his or her significant outside activities and financial interests. In addition, any "Other support" must be disclosed (including those of the investigator's spouse and dependent children):
that would reasonably appear to be affected by the consulting, research, educational or other professional activities by any source within or outside the University or
in those entities whose time or financial interests would reasonably appear to be affected by such activities.

The outside activity and financial disclosures required above must be provided prior to the initiation of the activity. Such financial disclosures either must be updated during the period of the award, on an annual basis, or as new reportable outside activity or significant financial interests are obtained.

6.2.4 Required Foreign Component Disclosures

An investigator must disclose if a portion of their project will be conducted outside of the U.S. After which it will be determined if the activities are considered significant. If both criteria are met, then there is a foreign component. To aide with what may be considered significant, click on the FAQ link below. The addition of a foreign component to an ongoing NIH grant continues to require NIH prior approval, as outlined in the NIHGPS, Section 8.1.2, Prior Approval Requirements.

In addition, any travel to foreign countries related to research, business, recruitment or education and any regular or routine travel outside of the U.S. must be disclosed.

If an activity does not meet the definition of foreign component because all research is being conducted within the United States, but there is a non-U.S. resource that supports the research of an investigator and/or researcher, it must be disclosed and reported as other support.

For example, if a PD/PI of an NIH-funded grant has a collaborator outside of the U.S. who performs experiments in support of the PD/PI's NIH-funded project, this would constitute a foreign component, regardless of whether the foreign collaborator receives funding from the

PD/PI's grant. Additional funding from a foreign source for the NIH-supported research of a PD/PI at a U.S. institution would not constitute a foreign component but would necessitate reporting as other support.

https://grants.nih.gov/faqs#/other-support-and-foreign-components.htm (accessed 9-26-22)

6.2.5 Determination and Management of Conflicts of Interest

The Dean will review the disclosures, will determine whether a conflict of interest exists, and will determine what conditions or restrictions, if any, MUSM will impose to manage, reduce or eliminate such conflict of interest. A conflict of interest exists when the Dean reasonably determines that an outside activity or significant financial interest could directly and significantly affect the design, conduct, or reporting of consulting, research, educational, or other professional activities within or outside the University.

Examples of conditions or restrictions that might be imposed to manage, reduce or eliminate conflicts of interest include, but are not limited to:

public disclosure of outside activity or significant financial interests;
monitoring of consulting, research, educational, or other professional activities by independent reviewers;
modification of the consulting, research, educational, or other proposed plan;
disqualification from participation in the portion of the sponsored consulting, research, education, or other professional activity that would be affected by the outside activity or significant financial interests;
divestiture of significant financial interests; or
severance of relationships that create conflicts.

If the Dean determines that a conflict of interest cannot be satisfactorily managed, the Dean will promptly notify the University's Office of Research Compliance, who will assure that the funding agency is kept appropriately informed in accordance with the applicable regulations.

Any investigator who disagrees with any determination made by the Dean under this policy may appeal to the Provost, whose decision shall be final.

6.2.6 Certification of Compliance

Each investigator must certify that he or she has read and understands this policy, that all required disclosures have been made, and that the investigator will comply with any conditions or restrictions imposed by MUSM to manage, reduce or eliminate conflicts of interest. Certification of compliance by the investigator shall be by signature on the University routing form for grant applications.

Disclosure of outside activities and significant financial interests shall be by completion of the University "Significant Financial Interest Disclosure Form" (Disclosure Form) found on the Office of Research Compliance website. This Disclosure Form must accompany all proposals for acquiring financial support for projects. Furthermore, an investigator must complete and submit a Disclosure Form whenever a potential conflict of interest arises.

The University is required to certify in proposals for funding made to certain governmental agencies, including NIH, NSF, and PHS that:
the University has implemented a written and enforced conflict of interest policy that is consistent with applicable requirements imposed by the agency;
to the best of its knowledge all outside activities and financial disclosures required by that conflict of interest policy have been made and all identified conflicts of interest will have been satisfactorily managed, reduced or eliminated prior to the University's expenditure of any funds awarded by the agency, in accordance with the conflict of interest policy.
upon request, the Institution agrees to make information available to HHS regarding all conflicting interests and how those interests have been managed, reduced, or eliminated.

The University will rely on the investigators' certifications in making its certifications to the governmental agencies.

Enforcement

The failure of any investigator to comply with this policy shall constitute grounds for disciplinary action, consistent with the procedures set forth in the University Faculty Handbook, the Employee Handbook for Non-faculty Employees, or other applicable disciplinary policies and procedures.

Records

Records of all outside activities and financial disclosures and all actions taken to manage conflicts of interest shall be retained until at least three years beyond the termination or completion of the government- sponsored project award to which they relate, or until the resolution of any government action involving those records, whichever is longer.

Reporting

Annually, the Dean will provide a summary report to the Provost of all conflict-of-interest determinations including any restrictions or conditions imposed. If no conflict of interests is determined then a negative report shall be transmitted.

6.3 Conflict Of Interest Policy (COI) – Interactions With Industry

Conflict of Interest Policy: Policy and Guidelines for Interactions between the Mercer University School of Medicine and the Pharmaceutical, Biotech, Medical Device, and Hospital and Research Equipment and Supplies Industries ("Industry").

6.3.1 Purpose of Policy

The purpose of this policy is to establish guidelines for interactions with industry representatives for medical staff, faculty, staff, students, and trainees of the Mercer University School of Medicine.

Adherence to this policy is required for all employees of the institution, whether full/part time, and for all students. It is strongly encouraged that all faculty members, all volunteer faculty members and all trainees affiliated with the School adhere to this policy regardless of clinical site or regulations at other clinical sites.

Interactions with industry occur in a variety of contexts, including marketing of new pharmaceutical products, medical devices, and research equipment and supplies onsite, on-site training of newly purchased devices, the development of new devices, educational support of medical students and trainees, and continuing medical education.

Faculty and trainees also participate in interactions with industry off campus and in scholarly publications. Many aspects of these interactions are positive and important for promoting the educational, clinical and research missions of the medical school. However, these interactions must be ethical and cannot create conflicts of interest that could endanger patient safety, data integrity, the integrity of our education and training programs, or the reputation of either the faculty member or the institution.

6.3.2 Statement of Policy

It is the policy of the Mercer University School of Medicine that interactions with industry should be conducted so as to avoid or minimize conflicts of interest. When conflicts of interest do arise, they must be addressed appropriately, as described herein.

6.3.3 Scope of Policy

This policy incorporates the following types of interactions with industry:

6.3.3.1 Gifts, Meals and Compensation

Personal gifts from industry may not be accepted anywhere at the Mercer University School of Medicine. It is strongly advised that no form of personal gift from industry be accepted under any circumstances. Individuals should be aware of other applicable policies subscribed to by the AMA or specialty societies.

Individuals may not accept gifts, meals or compensation for listening to a sales talk by an industry representative.

Individuals may not accept gifts, meals or compensation for prescribing or changing a patient's prescription.

Individuals must consciously and actively divorce clinical care decisions from any perceived or actual benefits expected from any company. It is unacceptable for patient care decisions to be influenced by the possibility of personal financial gain.

Individuals may not accept compensation, including the defraying of costs, for simply attending a CME or other activity or conference (that is, if the individual is not speaking or otherwise actively participating or presenting at the event).

6.3.3.2 Site Access by Pharmaceutical Sales and Medical Device Marketing Representatives

Sales and marketing representatives are not permitted in any patient care areas except to provide in-service
training on devices and other equipment and then only by appointment.

Sales and marketing representatives are permitted in non-patient care areas by appointment only. Appointments will normally be made for such purposes as:
In-service training of hospital personnel for research or clinical equipment or devices already purchased. Evaluation of new purchases of equipment, devices, or related items.

Appointments may be made on a per visit basis or as a standing appointment for a specified period, at the discretion of the faculty member, his or her division or department, or designated hospital personnel issuing the invitation and with the approval of appropriate hospital management.

6.3.3.3 Provision of Scholarships & Other Educational Funds to Students & Trainees

Industry support of students and trainees should be free of any actual or perceived conflict of interest, must be specifically for the purpose of education, and must comply with all of the following provisions:

The School of Medicine department, program or division selects the student or trainee.
The funds are provided to the department, program, or division and not directly to student or trainee.
The department, program or division has determined that the funded conference or program has educational merit. The recipient is not subject to any implicit or explicit expectation of providing something in return for the support.

This provision may not apply to national or regional merit-based awards, which are considered on a case-by- case basis.

6.3.3.4 Support for Educational and Other Professional Activities

Individuals should be aware of the Accreditation Council for Continuing Medical Education (ACCME) Standards for Commercial Support. They provide useful guidelines for evaluating all forms of industry interaction, both on and off campus and including both Mercer-sponsored and other events. The Standards may be found at the ACCME website: https://www.accme.org/accreditation- rules/standards-for-commercial-support (accessed 9-26-22).

The ACCME Standards include criteria to ensure that:
CME providers and their programs are free of commercial control Providers are free of personal conflicts of interest
Any commercial support was conducted appropriately with regard to learners and providers
Product promotion material or product specific advertisement is prohibited
Content and format of the CME activity is presented without commercial bias Individuals disclose relationships relevant to potential commercial bias.

All education events sponsored by the Mercer University School of Medicine must be compliant with ACCME Standards for Commercial Support whether or not CME credit is awarded.

Because of the high potential for perceived or real conflict of interest, Faculty and medical staff should evaluate very carefully their own participation in meetings and conferences that are fully or partially sponsored or run by industry. Faculty, students and trainees are discouraged from attending industry-funded events including accepting reimbursement for meals, travel or other remuneration. This provision does not apply to meetings of professional societies that may receive partial industry support, meetings governed by ACCME Standards, and the like.

Individuals who actively participate in meetings and conferences supported in part or in whole by industry (e.g., by giving a lecture, organizing the meeting) should follow these guidelines:
The meeting sponsor fully discloses any financial support by industry.
The speaker determines meeting or lecture content, not the industrial sponsor.
The lecturer is expected to provide a fair and balanced assessment of therapeutic options and to promote objective scientific and educational activities and discourse.
The industry sponsor does not require the participant to accept advice or services concerning speakers, content, etc., as a condition of the sponsor's contribution of funds or services.
The lecturer makes clear that content reflects individual views and not the views of Mercer University School of Medicine.

6.3.3.5 Disclosure of Relationships with Industry

Faculty, students and trainees must disclose all potential conflicts of interest to the School of Medicine as well as to all trainees and members of the audience.

In scholarly publications, individuals must disclose their related financial interests in accordance with the International Committee of Medical Journal Editors http://www.icmje.org (accessed 9-26-22).
Individuals are strictly prohibited from publishing articles under their own names that are written in whole or material part by industry employees (ghost writing and honorary authorship).

Consultation and advising for scientific purposes or to further the mission of the University may be allowed however, no consultation or advising for assisting a company with the marketing of a pharmaceutical product or medical device shall be permitted for employees and students. Consultation and advising for marketing purposes is strongly discouraged for all volunteer faculty members and trainees.

MUSM allows employees of the School to participate in speaking relationships, including professional speaker bureaus and presentations at speaking events, only if the presentation is not promotional in nature and if the industry funding the event has no role in determining or approving the content of the presentation. No presentations shall be allowed for promoting a pharmaceutical product or medical device.

Faculty with supervisory responsibilities for students, residents, trainees or staff should ensure that the faculty's conflict or potential conflict of interest does not affect or appear to affect his or her supervision of the student, resident, trainee, or staff member.

Individuals having a direct role making institutional decisions on equipment or drug procurement must disclose to the purchasing unit, prior to making any such decision, any financial interest they or their immediate family have in companies that might substantially benefit from the decision. Such financial interests could include equity ownership, compensated positions on advisory boards, a paid consultancy, or other forms of compensated relationship. They must also disclose any research or educational interest they, or their department, have that might substantially benefit from the decision. The purchasing unit will decide whether the individual must recuse him/herself from the

purchasing decision.

This provision excludes indirect ownership such as stock held through mutual funds.

The term “immediate family” includes the individual’s spouse or domestic partner or dependent children.

6.3.3.6 Training of Students, Trainees, & Staff Regarding Potential Conflict of Interest in Interactions with Industry

All students, residents, trainees, and staff shall receive training regarding potential conflicts of interest in interactions with industry. Students are required to participate in COI training in First Year Orientation, Ethics, Third Year Orientation, and during the Capstone Course late in the Fourth Year. Curriculum covers the effects of industry marketing on medical education and physician practice, the effects of marketing on the practice of
medicine and how it relates to professionalism, and a review of how medical treatments (pharmaceutical and devices) are developed including how efficacy and safety are established.

6.3.3.7 Enforcement and Sanctions of Policies

All violations of the Conflict of Interest Policy must be reported to the Dean of the School of Medicine who will forward the report to the appropriate entity at the University. Consequences for non-compliance will be determined by the appropriate entity.

Approved by MUSM Executive Committee, Oct 7, 2008 Approved by MUSM Faculty, April 21, 2009
Updated April 15, 2014
Updated September 2017
Updated January 2020- EC approval February 2020

6.3.4 Instructions for Completing the Disclosure of Outside Activities and Financial Interests Form

Mercer University and the School of Medicine recognize that external consulting, research, and educational or other scholarly activities are a proper and common feature of academic employment, contributing to the professional development of the individual and extending the University’s missions of teaching, research, and service. These activities should not present unacceptable conflicts of interest or create conflicts of commitment with respect to the individual’s obligations to the University or the School of Medicine and performance of University and School duties. Whenever a question, or appearance of conflict, arises between the employee's obligation to the University and any activity or financial interest, the employee is expected to report the situation and, if required as set forth below, to provide a report disclosing the information prior to engaging in the activity or obtaining the financial interest. University officials are responsible for reviewing each disclosure to determine if the activity or interest is permitted, not permitted, or if there are conditions necessary to manage, reduce or eliminate the conflicts or potential conflicts before the activity or interest can be permitted.

An annual disclosure must be submitted at the beginning of each academic year or other annual appointment for each existing outside activity or financial interest. A new disclosure must be submitted if there is a significant change in an activity or financial interest (nature, extent, funding, etc.) or before a new outside activity or financial interest is undertaken. These reporting provisions shall apply to activities performed, or interests held, while an employee is in pay status, or is on a compensated leave, including a professional development leave, but shall not apply to activities performed wholly during a period in which the employee has no appointment with the University.

An employee's failure to report activities or financial interests under the University's regulation or to follow any conditions imposed pursuant to the University's approval of such activities or interests may be grounds for disciplinary action. Such actions may include, but are not limited to: reprimand, fine, reduction in salary, change of assignment, prohibition of outside activities, suspension without pay, and termination for cause.

Reporting Requirements

The following activities and financial interests must be reported and approved prior to engaging in the activity:

A. Outside activities in which there is more than an incidental use of university facilities, equipment, and/or services.
B. Outside activities in which a university student or university employee is directly or indirectly supervised by the employee if the employee in any way supervises or evaluates the student or the employee at the University.
C. Management, employment, consulting, and contractual activities with, or ownership interests in, a business entity that does business or is proposing to do business with or competes with the University.
D. Candidacy, election or appointment to a public office.
E. Required use of books, supplies, equipment, or other instructional resources at the University when they are created or published by the employee or by an entity in which the employee has a financial interest.
F. Professional compensated activities, including but not limited to, activities for which travel expenses, travel support, and honoraria are paid, teaching at another institution, or employment as an expert witness.
G. Business activities, including service on the board of directors or other management interests or position, with regard to a business entity in the same discipline or field in which the faculty or staff member is employed.
H. Any employment, contractual relationship, or financial interests of the employee that may create a continuing or recurring conflict between the employee's interests and the performance of the employee's public responsibilities and obligations, including time commitments. This includes any outside activity in which the employee is required to waive rights to intellectual property.
I. Outside activities and financial interests required to be reported under certain federal contract and grant regulations. Such disclosures may also need to be made at the time of the submission of the proposal.
J. Outside activities (employment, consulting, management and other contractual activities) and financial interests in an entity (domestic or foreign), that supports the employee's research or training activities in any way.
K. Outside activities (employment, consulting, management and other contractual activities) and financial interests in an entity (domestic or foreign), that licenses technology invented by the employee.
L. Any "other support" including all resources made available in support of and/or related to all of their research endeavors, regardless of whether or not they have monetary value and regardless of whether they are based at the institution the researcher identifies for the current research. This includes resource and/or financial support from all foreign and domestic entities, including but not limited to, financial support for laboratory personnel, and provision of high-value materials that are not freely available (e.g., biologics, chemical, model systems, technology, etc.).
M. Any activities that include a foreign component, defined as the existence of any "significant scientific element or segment of a project" outside of the United States. This includes performance of work by a researcher or recipient in a foreign location, whether or not grant funds are expended and/or performance of work by a researcher in a foreign location employed or paid for by a foreign organization, whether or not grant funds are expended.

N. Any other employment outside the University.
O. Any other outside activity or financial interest required to be disclosed under MUSM's updated conflict of interest policy.
P. Any travel to foreign countries related to research, business, recruitment or education and any regular or routine travel outside of the U.S.

The signature on the completed disclosure form affirms and certifies an understanding of and compliance with the University's policies on conflict of interest, outside activities and financial interests as well as the completeness and accuracy of the responses. Additional information on the University's guidelines and procedures may be obtained from Sections 3.1 and 3.2 in the Mercer University Faculty Handbook at https://provost.mercer.edu/resources/handbooks/faculty-handbooks/ (Accessed 9-26-22).

Disclosure of Outside Activities and Financial Interests Disclosure Period: July 1,_____to June 30,_____

Name_____
Title/Rank_____
Phone number_____
Email_____
% FTE_____

MUID _____
Department or Unit_____
College or Division_____
University Contract Period
_____9 month 10 month_____12 month

1. In accordance with Mercer University regulations, I report the following outside activity or financial interest. Please check the category or categories of the activity or financial interest as described in the Instructions to this form:
   ☐ B. ☐ C. ☐ D. ☐ E. ☐ F. ☐ G. ☐ H. ☐ I. ☐ J. ☐ K.

   ☐ L. ☐ M. ☐ N. ☐ O ☐ P ☐ I have nothing to

   disclose ☐

2. Please provide the requested information on the activity or financial interest performed/proposed during the University contract period as identified above. Please use additional pages if necessary. All activities and financial interests for one entity should be disclosed on one form. Additional activities and financial interests should each be reported on separate forms.

   (a) Name and address of entity (or person) with which the activity is to be conducted, or name and address of entity in which the financial interest is held, and nature of its business:

Is the entity a for-profit entity? Or a not-for-profit entity? _____

Is the entity or parent, subsidiary or affiliated organization of the entity located outside the United States?
Yes_____No_____If yes, please provide the complete address of all foreign-based entities.

Does the entity or parent, subsidiary or affiliated organization of the entity sponsor your research
at Mercer or license technology from Mercer that you invented? Yes_____No_____

(b) Description of activity or financial interest. Please check all that apply.

- ☐ Consultant
- ☐ Director
- ☐ Officer
- ☐ Employee
- ☐ Honorarium
- ☐ Royalty recipient
- ☐ Ownership interest

  Percentage of ownership: _____ Value of ownership: _____

  Type of ownership interest:

  Stock (not publicly traded) ownership

  ☐ Stock (publicly traded) ownership

☐ LLC ownership
☐ Partner
☐ Sole proprietor
☐ Other ☐ Describe _____

☐ Stock option or other Option Agreement

☐ Other ☐ Describe _____

(c) Source of and type of compensation: (e.g., company/organization/client and cash/expense reimbursement; in the case of legal representation or service as an expert witness, all parties and addresses to the matter must also be identified.):
Source of compensation _____
Type of compensation _____
Amount or value of compensation _____

(d) Location and anticipated dates of activity: _____

(e) Is this a one time or continuing activity? One time ☐ Continuing ☐
If one time, estimated number of total hours, including travel time_____hours
If continuing activity, estimated number of hours per week spent on the reported activity, including travel time:_____
If you earn vacation leave, indicate number of hours per week that will be taken_____. If none, explain why no vacation is to be taken. _____

Will Mercer University employees and/or students be involved in connection with the outside activity? No____Yes_____ (Explain)_____

_____

(f) Will University equipment, facilities or services be used in connection with the outside activity?
No_____Yes_____(If yes, please attach a completed Request to Use University Equipment, Facilities and Services in connection with Non-University Activity form.)

Are you required, as a condition of the employment/activity, to waive any rights you or the Mercer University might have to intellectual property you develop, including copyrights or patent rights? No_____ Yes_____(If yes, the Office of Research must review and act on the employment/activity.)

Has the activity been reported before? No_____Yes _____

Total number of outside activity and financial interest reports submitted during this contractual period including this report. _____

Estimated total number of hours spent per week during this contractual period on all outside activities including this activity. _____

3. I understand that the activity and/or interests identified in the Instructions to this form must be reviewed and acted upon by the appropriate university officials as set forth below. For each activity or financial interest disclosed, other information may also be requested in order to review completely the activity or interest if there are potential conflicts involved.

4. I understand that if I (or my spouse, domestic partner, child or other relative) have a material financial interest or a managerial interest in an entity, or an employment or other contractual relationship with an entity that proposes to do business with, or does business with, the University, I will submit a copy of this form to the University's Purchasing Services (with the purchase requisition if a purchase requisition is required) or the contracting authority at the university prior to the purchase being made or the University's entering into the contract with the entity. I understand that if I am involved in the procurement or contractual process for the entity or for the University (including but not limited to making recommendations) I must inform the University office making the procurement or entering into the contract of my financial interest prior to the procurement or the signing of the contract in order that determination may be made whether the procurement and/or contract is allowable under Georgia law and University regulations.

5. I have read the University's Regulations and I understand my obligations under the regulation.

6. I have read the MUSM Conflict of Interest Policy and I understand my obligations under the policy.

7. In the past four years I have completed the online web-based training found at https://www.citiprogram.org

8. I hereby certify that the information reported here is accurate and complete. Further, I understand that my engaging in a non-university activity must not create a conflict of interest, unless such conflict is allowable under the law and University regulations, or interfere with the full and faithful performance of my University professional responsibilities or other University obligations.

_____ _____

Employee's Signature Date

REVIEWER	REVIEWER'S SIGNATURE	APPROVED	DISAPPROVED	DATE
Chair or Supervisor (Printed Name)				
Dean, Director or other Appropriate Administrator (Printed Name)				
Office of Research (if applicable) (Printed Name)				
Purchasing Services or other Contracting Authority(if applicable) (Printed Name)				

9. Was conference held to discuss this disclosure? No____Yes_____

   If yes, please write a brief summary of act _____

_____

10. The form should be returned to the employee and others noted below whether the activity is authorized as presented, authorized with conditions or not authorized. The returned copy should include all appropriate signatures. A copy of the form must be sent to Purchasing Services or other applicable Contracting Authority if the disclosure is made under c (and as further described under item 4 above).

Copies of completed forms must be sent to: (1) Office of Human Resource Services (2) dean or director, (3) department chairperson or other appropriate administrator, (4) employee, and (5) Office of Research, if applicable; (6) Division of Purchasing or other contracting unit (if applicable)

6.4 Admissions Conflict Of Interest Policies And Disclosure

Please read the information in this document, sign it, and return it to the Office of Admissions. This signed document may be returned by email to: musmadmissions@mercer.edu

6.4.1 Statement of Understanding of Mercer University School of Medicine (MUSM) Mission, MUSM Diversity Statement, Mercer University's Nondiscrimination Statement

Mission of Mercer University School of Medicine. To educate physicians and health professionals to meet the primary care and health care needs of rural and medically underserved areas of Georgia. The Applicant Review and Admissions Process is guided by our mission.

Mercer University School of Medicine Statement on Diversity. Mercer University School of Medicine is privileged to be located in Georgia, a state with a diverse and evolving culture. Our mission is to prepare physicians and other healthcare professionals to meet the healthcare needs of our rural and medically underserved populations. Given this calling, the School of Medicine recruits medical students with rural backgrounds and those from groups that are underrepresented in medicine who have demonstrated a commitment to the medically underserved communities across the State of Georgia.

Nondiscrimination Statement. Mercer University is committed to providing equal educational programs or activities, and equal employment opportunities to all qualified students, employees, and applicants without discrimination on the basis of race, color, national or ethnic origin, disability, veteran status, sex, sexual orientation, age, or religion, as a matter of University policy and as required by applicable state and federal laws, including Title IX. Inquiries concerning this policy may be directed to:
Equal Opportunity/Affirmative Action Officer/Title IX Coordinator, Office of Audit and Compliance, 1501 Mercer University Drive, Macon, Georgia 31207.

6.4.2 Agreement to Maintain Confidentiality of Applicant Records and Other Transactions and Activities Pertaining to MD Admissions Processes

In conducting the **Admissions Process** at Mercer University School of Medicine MD Program, **Participants in the Admissions Process** include: Admissions Committee members (the "Committee"), Admissions staff members, and MUSM staff or faculty who conduct interviews but do not serve on the Admissions Committee (Non-Committee Interviewers). Participants in the Admissions Process are granted access to confidential information regarding prospective applicants or applicants ("Applicants") to current or previous years to the MUSM MD Program or other programs. This **confidential information** may include but is not limited to information contained in the Primary and Secondary AMCAS application, Letters of Evaluation or Recommendation, updates submitted by applicants, evaluations (and scores) of candidates by the Committee or Non-committee interviewers, Rank (or Score) Lists, the Committee's ranking of applicants, the Committee's deliberations, documents circulated during Admissions meetings (such as but not limited to applicant's files, scores, rank lists), and other information related to or contained in applicants' files. Confidential information may be contained in e-mails sent from

MUSM Admissions Office, applicant management portals used by the MD Admissions process (such as AMP®), and in printed copies of documents circulated at the time of Committee meetings.

Participants in the Admissions Process are responsible for maintaining the security of the e-mail accounts at which they receive correspondence related to the Admissions Process, as well as the security of their access to the Application Management Portal (AMP). If a user believes his/her AMP account has been compromised, the Associate Dean of Admissions should be notified immediately. **MUSM is responsible for maintaining and protecting the confidentiality of applicant records; no information may be released to third parties without the applicant's written consent.** Access to Confidential Information is granted to Admissions Committee members, faculty, staff, and MUSM students who conduct interviews as non-Committee members, and faculty and staff directly involved in the conduct or evaluation of the Admissions Process to assist the Participants in the Admissions Process and the Committee in conducting its role.

Under no circumstance should Participants in the Admissions Process disclose any Confidential Information to an individual who is not a designated Participant in the Admissions Process.
Participants in the Admissions Process must not transmit Confidential Information to others not participating in the Admissions Process, or make unauthorized copies of (whether in print or electronic medium) or use Confidential Information in any capacity unrelated to the functions of the Admissions Committee. This requirement to maintain confidentiality of this information exists in perpetuity, after one is no longer an active Participant in the Admissions Process.

Users of Confidential Information should take all reasonable security steps including but not limited to those recommended by Mercer University's IT department and published at http://it.mercer.edu/faculty/security/security_best_practices.htm (accessed 9-26-22) to prevent unauthorized use or disclosure of this information. Members who violate the confidentiality of Applicants' records may be subject to disciplinary action, up to and including a professionalism investigation and dismissal as a Participant.

6.4.3 Policy On Conflict Of Interest For Those Involved In The Admissions Process

If an interviewer or a Committee member has a current or previous personal, or a supervisory/teaching, relationship with an applicant, he/she must recuse him/herself from interviewing, voting on, or discussing this applicant at any time. Recusal will include absenting the Committee member in conflict from any meeting, formal or otherwise, in which the applicant is discussed. It is not necessary for the Committee member in conflict to absent him/herself from a Committee meeting when the applicant is included in a Rank List up for approval by majority vote, but the Committee member in conflict cannot vote on that Rank List. In such cases the Committee, except for the member(s) with the conflict, should vote on the applicant(s) in question separately. The Committee member(s) in conflict shall not discuss the applicant with any other Participant(s) in the Admissions Process. Committee members may write letters of evaluation for these applicants through the American Medical College Application Service (AMCAS).

Any applicant participating in a School of Medicine based program should be interviewed by faculty members outside of that program. If the relationship meets any one of the following criteria, it constitutes a potential conflict of interest (COI) for the Committee member:

It creates the perception of, or actual potential for, bias.
It potentially compromises the objectivity of the member's voting.
It potentially helps or harms an applicant in the Admissions Process.

This COI policy follows Mercer University guidelines but is specifically adapted for the functions of Mercer University School of Medicine Admissions Committee. The Associate Dean of Admissions, who reports directly to the Dean of the School of Medicine, is charged with overseeing disclosure processes and managing potential COI in the Admissions Committee of MUSM. This COI policy requires self-disclosure and operates on the honor system. Committee members who do not comply with this policy may have their Admissions Committee voting privileges revoked.

By signing below, I **(enter full name)**_____certify that I have read and understood MUSM's mission, position on diversity, and the Mercer University Nondiscrimination Statement. I agree to maintain confidentiality of applicant records and transactions of the MD Admissions Process that may be confidential. I agree to abide by the policy on conflict of interest in the MD Admissions Process.

Signature **Date (mm/dd/yy)**

_____ _____

Approved by Executive Council on 27 August 2019.

6.5 Promotion And Tenure Process Conflict Of Interest Policy

Mercer University School of Medicine expects the Faculty to uphold the highest standards of professional integrity and practice as they carry out their responsibilities. Any individual with a conflict of interest that biases their objectivity in the process of promotion and tenure, whether intrinsic or incidental, should identify these conflicts and recuse themselves from participation in the review and recommendation. **For these purposes, a conflict of interest will be considered as a set of circumstances that creates the potential that the committee member's professional judgment, or actions regarding a primary interest (i.e., Mercer University), will be unduly influenced by a secondary interest (i.e., their relationship with the candidate).**

Each year, when applicants for promotion and tenure are known, all members of the Promotion and Tenure Committee shall identify their potential conflicts of interest. A conflict should be considered when the committee member's objectivity and judgement as a representative for Mercer University will be compromised by a previous or ongoing relationship between the committee member and the candidate, whether direct or indirect in nature. Such conflicting relationships include but are not limited to spousal, familial, administrative, and those arising from fiduciary dependencies. If the relationship meets any of the following criteria, it constitutes a potential conflict of interest for Committee member:

1. It creates the perception of, or actual potential for, bias.
2. It potentially compromises the objectivity of the member's voting.
3. It potentially helps or harms an applicant in the Promotion and Tenure review process.

All Committee members will sign the Promotion and Tenure Conflict of Interest Disclosure, acknowledge all known conflicts of interest, and submit the Disclosure to the Chair of the Promotion and Tenure Committee. This acknowledgement should occur prior or within the initial committee meeting once the identity of the candidates are formally known. The committee shall then review potential membership conflicts that may actually conflict with the primary interests of the University. If the committee and conflicted committee member(s) determine the relationship with the candidate as real and unmanageable, the conflicted committee member(s) will be asked to recuse themselves(s) during the conflicted reviews. The action of recusal shall be accomplished when the conflicted member has left the meeting room. The recused committee member will, throughout their term on the committee, be considered incommunicado regarding the conflicted candidate's application. A Committee member who has recused him/herself will not participate in the recommendation vote. Recusal will not be revealed beyond the committee's proceedings and the Committee will hold its basis in the strictest confidence.

PROMOTION AND TENURE CONFLICT OF INTEREST DISCLOSURE

NAME: _____

I understand that as part of my service on the Promotion and Tenure Committee, Mercer University School of Medicine, I must disclose at the earliest time, any situation that may be viewed as a conflict of interest. I have read the Promotion and Tenure Conflict of Interest Policy with regards to what may determine a conflict of interest. I acknowledge that the Promotion and Committee will have the authority to determine if an association is a conflict of interest.

I have no conflict to disclose_____.
I have a potential conflict as described below:
_____
_____
_____
_____
_____

_____ _____
Signature Date

Approved by Promotion and Tenure Committee on 22 August 2019

6.6 Conflict Of Interest Policy – Student Appraisal And Promotion Committee (SAPC)

Mercer University School of Medicine (MUSM) expects the Faculty to uphold the highest standards of professional integrity and practice as they carry out their responsibilities. Any individual with a conflict of interest that biases their objectivity in the process of reviewing students for decisions pertaining to their academic future, whether intrinsic or incidental, should identify these conflicts and recuse themselves from participation in the review and recommendation processes. For these purposes, a conflict of interest will be considered as a set of circumstances that creates the potential that the Committee Member's professional judgment, or actions regarding a primary interest (i.e., Mercer University) and/or fairness to the student, will be unduly influenced by a secondary interest (i.e., their relationship with the student).

When students appeal decisions of the Senior Associate Dean for Academic Affairs (i.e., they request the SAPC to suspend the academic standard), all Members of the Student Appraisal and Promotion Committee shall identify their potential conflicts of interest vis-à-vis each individual student in writing, submitting a signed Conflict of Interest Disclosure document to the Chair. If the Chair has a potential conflict of interest, the Chair submits a signed Conflict of Interest Disclosure document to the Vice Chair. This acknowledgement should occur prior to or during the initial Committee meeting once the student (whose case is being considered) is formally identified.

A potential conflict shall be reported when the Committee Member's objectivity and judgement as a representative for Mercer University might be compromised by a previous or ongoing relationship between the Committee Member and the student, whether direct or indirect in nature. Such conflicting relationships include but are not limited to spousal, familial, administrative, and those arising from fiduciary dependencies (e.g., advisor – advisee, mentor – mentee relationship), subjective evaluations (individualized grading, narrative assessment e.g., the student's tutorial or clerkship performance), or if the Committee Member is close friends with the student's family.

If the relationship meets any of the following criteria, it constitutes a potential conflict of interest for disclosure by the Committee Member:

4. It creates the perception of, or actual potential for, bias.
5. It potentially compromises the objectivity of the Committee Member's vote.
6. It potentially helps or harms a student in the review process and Committee decision.

The Committee shall review the Conflict of Interest Disclosure and decide by a simple majority vote whether the Member should recuse himself (or herself). The Member in question does not vote regarding his/her own recusal. An evenly split vote shall be deemed as a decision for recusal.

In the following situations, the Committee Member shall submit a signed Conflict of Interest Disclosure document, and will be automatically recused from the proceedings:

If the Committee Member

1. has ever served as an advisor or mentor to the student;
2. has ever taken care of the student as a patient (prior and/or ongoing physician-patient relationship);
3. has ever served as an evaluator of the student in which he/she assigned an individual, subjective failing grade and/or narrative opinion in any part of the academic program (e.g., small group tutor, attending physician supervising the student as a clerk).

If the Committee decides so or when the policy calls for automatic recusal, the conflicted Committee Member will recuse himself/herself during the reviews and the voting of the student in whose case a conflict has been identified. The action of recusal shall be accomplished by the Committee Member leaving the meeting room. A Committee Member who has recused him/herself will not participate in the deliberations and the recommendation vote. The Committee will not reveal recusal beyond the Committee's proceedings and the Committee will hold its basis in the strictest confidence.

Approved by Student Appraisal and Promotion Committee, April 15, 2020

STUDENT APPRAISAL AND PROMOTION COMMITTEE CONFLICT OF INTEREST DISCLOSURE FORM

NAME OF SAPC MEMBER:

I understand that as part of my service on the Student Appraisal and Promotion Committee, Mercer University School of Medicine, I must disclose at the earliest time, any situation that may be viewed as a conflict of interest. I have read the Student Appraisal and Promotion Committee's Conflict of Interest Policy concerning what may constitute a conflict of interest. I acknowledge that the Student Appraisal and Promotion Committee will have the authority to determine if an association that I identify is a conflict of interest.

Disclosure:

_____
_____
_____
_____

_____ _____

Signature Date

6.7 Policy To Address Potential Student/Faculty Conflict Of Interest

6.7.1 Providers of Sensitive Health Services

Whenever possible, faculty members should avoid providing medical care or personal or psychological counseling to students. MUSM recognizes that there are circumstances where students may require care from faculty members, such as emergency care or care in a subspecialty where there are few providers.

In all cases, faculty must recuse themselves from evaluating students with whom they have had a professional, therapeutic relationship. In addition, faculty must not participate in any decision regarding the advancement and/or graduation of a student with whom they have had a professional, therapeutic relationship.

6.7.2 Providers of Sensitive Health Services Policy

Health professionals who provide psychiatric and/or psychological counseling or other sensitive health services to a Mercer University School of Medicine (MUSM) student must have no involvement in assessing their academic performance or participate in decisions regarding their promotion and/or graduation.

The purpose of this policy is to ensure that the School allows students to receive medical services for psychiatric, psychological and other sensitive health care needs in an environment free from fear of adverse consequences to their academic standing, promotion or graduation.

6.7.3 Policy to Address Potential Student/Faculty Conflict of Interests

Faculty members in the Office of Student Affairs are responsible for writing the Medical Student Performance Evaluation (MSPE). Therefore, they will not participate in any educational activity that requires the assessment of student performance nor participate in decisions regarding student's promotion and/or graduation.

Occasionally students or faculty may be concerned that relational circumstances would impact the ability to receive or provide a fair and unbiased assessment. These conflicts of interests include but are not limited to familial relationship between the faculty member and the student, a close friendship between the faculty member and the family of the student, if the faculty member has (or had) a therapeutic relationship with the student, or a prior social relationship. To address these concerns, MUSM has established the following policy:

Potential conflicts of interest will be evaluated by the Office of Academic Affairs in collaboration with the Office of Student Affairs and necessary actions taken to resolve the concern with the best interest of the learner in mind.

6.7.4 Procedure(s)

Student Rights:

- Students may notify the Office of Academic Affairs if there is a potential conflict of interest between them and a faculty member assigned to assess their performance. Students are not required to notify the school of a conflict. This form will be available on Canvas course for each class of medical students.
- Students will be asked to complete a conflict of interest form stating only that a conflict exists and requesting a change of faculty.
- The Office of Academic Affairs will facilitate the necessary change.

Faculty Responsibilities:

- Faculty must notify the Office of Academic Affairs if there is a potential conflict of interest between them and a student for whom they must provide an educational assessment.
- Faculty will be asked annually to read MUSM's conflict of interest policy and fill out the COI acknowledgement form, via the One45 system.
- Faculty who serve as preceptors during the community medicine/population health courses will be required to fill out the Preceptor Conflict of Interest Form for each student assigned to them. This form will be sent via the One45 system.
- Faculty who participate in the tutorial program, the clerkship program, or the year 4 courses will be will be required to submit the Faculty Initiated Conflict of Interest form only when they discover the presence of a potential conflict of interest.
- The Office of Academic Affairs will facilitate the necessary change.

CIC Approval: March 20, 2020
Executive Council Approval: March 25, 2020

6.7.5 Mercer University School of Medicine-Student Initiated Conflict of Interest Form

Approved by Executive Council – March 18, 2014

Student Name_____ Date _____

Academic Year_____ Campus _____

Rotation or Course_____

Faculty Member or Resident with whom there is a potential conflict of interest

_____

By my signature below I am stating that there is a potential conflict of interest between myself and the above stated faculty or resident. I request a change in schedule so that I will not be evaluated by this faculty member or resident.

_____

Student's Signature

6.7.6 Mercer University School of Medicine Faculty Initiated Conflict of Interest Form

Approved by Executive Council – March 18, 2014

Student Name_____ Date _____

Academic Year_____ Campus _____

Rotation or Course_____

Faculty Member with a potential conflict of interest with the student noted above

_____

By my signature below I am stating that there is a potential conflict of interest between myself and the above stated student. I request a change in schedule so that I will not be evaluating this student.

_____

Faculty Member's Signature

7.0 FACULTY POLICIES AND RESOURCES

7.1 Faculty Absences and Time Away from Work

Absences and Time Away from Work to include: personal leave (sick and vacation), holiday policy and schedule, jury duty, bereavement leave, and military leave. MUSM follows Mercer University Policy which can be found at https://benefitspayroll.mercer.edu/benefits/pto.cfm (accessed 9-26-22).

Requesting Leave

Each department chair/unit director is responsible for maintaining leave records on his/her individual faculty members. The faculty member submits the Leave Request to the department chair/unit director. Prior to planned absences, the faculty member should complete and submit for approval the "Department Leave Request/Approval Form for Faculty". Leave requests also require that the faculty member indicate arrangements for coverage during his/her absence. Faculty may access the form on the Finance Office web page at: https://medicine.mercer.edu/wp-content/uploads/sites/7/2020/01/MUSM- Faculty-Leave-Request.pdf (accessed 9-26-22).

Reporting Time Off

While each department chair/unit director is responsible for maintaining leave records on his/her individual faculty members, the school has created a new system for reporting time off using the **MUSM Faculty Bear Time** sheet. A monthly sheet is forwarded to each (non-Dean title) faculty member at the end of each month for reporting any time off during the previous month. This excel worksheet is designed specifically for exempt MUSM faculty members. The excel report should be completed, saved, and then emailed to MUSMFacultyBearTime@mercer.edu even if the faculty member used no leave during the monthly pay period. Time is recorded in hours. These balances are kept in a summary sheet and forwarded to the Chair of each department for review each month.

7.2 Faculty Governance

Faculty are encouraged to participate in the faculty governance process through service on the Executive Council and/or Standing Committees. During early spring, the Nominating Committee will solicit nominations for vacant and/or expiring positions. The bylaws dictate the distribution of committee positions across constituencies and campuses:
https://medicine.mercer.edu/faculty/resources/faculty-governance/ (accessed 8-25-22)

Standing Committee rosters and term limits are on Faculty Affairs website:
https://medicine.mercer.edu/faculty/resources/faculty-governance/ (accessed 8-25-22)

Minutes for all Standing Committees are archived by the Committee Chair and Secretary of the faculty. Any faculty member may contact these persons to obtain a copy of the minutes.

7.3 Sabbatical Leave and Leaves of Absence

MUSM follows Mercer University Policy 2.17, https://provost.mercer.edu/resources/handbooks/faculty-handbooks/ (accessed 8-25-22).

MUSM has additional procedures for faculty taking sabbaticals which includes a Pre-Sabbatical Request Form and Post-Sabbatical Leave Report. See forms below.

MERCER UNIVERSITY SCHOOL OF MEDICINE PRE-SABBATICAL REQUEST FORM

Name of Applicant:	
Department:	
Proposed Dates for Sabbatical:	

PROPOSAL

Title of Sabbatical:	
Sabbatical Institution:	
Contact Information of Primary Mentor:	

REQUIRED INFORMATION

1. Purposes of the leave.
2. Plan of action for the period of the leave. (List objectives for your personal/professional growth.)
3. Discuss how this experience will benefit the institution.
4. Coverage of responsibilities during leave.
5. Specific person responsible for academic assignments. (Attach a letter of agreement).
   - Name and Title

APPROVAL SIGNATURES

_____	_____
Applicant's Signature	Date
_____	_____
Department Chair's Signature	Date
_____	_____
Dean's Signature	Date
_____	_____
Associate Dean for Faculty Affairs	Date

Approved April 2020

POST-SABBATICAL LEAVE REPORT MERCER UNIVERSITY SCHOOL OF MEDICINE

Name of Recipient and Title of Sabbatical	
Department and Sabbatical Institution	
Contact of Primary Mentor	

1. Describe the purpose of the sabbatical leave
2. Describe the plan of action for the period of the leave. (Specifically address each of your objectives. Include an assessment of how this contributed to your personal and professional growth.)
3. Discuss how this experience will benefit the institution. (Describe how you will apply your experience in your day-to-day academic responsibilities.)
4. Describe how the results of your project will enhance the reputation of:
   - Mercer University School of Medicine and Mercer University
   -

APPROVAL SIGNATURES

_____ _____

Applicant's Signature Date

_____ _____

Department Chair's Signature Date

_____ _____

Dean's Signature Date

_____ _____

Associate Dean for Faculty Affairs Date

Approved April 2020

7.4 MUSM Policies And Procedures Regarding Equipment Leaving Campus

Equipment is defined as tangible nonexpendable personal property having a useful life of more than one year. This would include equipment value under the $3,000 capital threshold as long as the equipment has a useful life of more than one year.

Equipment as defined above will include property purchased with Mercer University funds to include grant, contract, incentive and donated funds. No equipment purchased with grant funds may be removed from Mercer University Campus.

In order to take equipment off campus property, a request must be submitted to the appropriate Department Chair and the Associate Dean for Research. The request will then need final approval from the Dean of the Medical School along with the signature of the requestor on the "Agreement for use of Mercer University Property Off-Campus." Please see attached form.

Under the Agreement, the requestor will be responsible for and must adhere to the following:

- An annual review, which includes the requestor reviewing a list of equipment for which he/she is responsible. As part of this review, the requestor will have to validate that all equipment is in good condition and verify the location of the equipment.

- If the requestor leaves Mercer University or is out for an extended period of time, all equipment must be returned to MUSM within three business days. Extended period of time would be defined as away from Mercer for more than a consecutive two week period.

- Requestor must comply with Mercer University's property policies and procedures which include but are not limited to:
    - Tagging - All assets must be tagged or approved by the Associate Dean for Research as an item that cannot be tagged due to the sensitive nature of the equipment.

    - Disposals – Disposal procedures as defined in the Fixed Asset Accounting Procedures Manual to include completing the appropriate form "Request for Disposition of Assets" and securing the proper approvals.

- If equipment is purchased with federal funds, the requestor agrees to comply with federal guidelines to include 2 CFR Part 215 (formerly OMB Circular A-110) and any agency specific guidelines.

- Equipment must be available for inspection at any time.
- The requestor agrees to safeguard and protect Mercer University owned property and agrees to reimburse Mercer University the fair market value if equipment is damaged, impaired, lost or stolen.

- Depending on the use of the equipment, an annual report may be required.

Agreement for use of Mercer University Property Off-Campus

I hereby understand and accept the following requirements for the privilege of taking and using Mercer University owned property off campus. I agree to:

- An annual review, which includes reviewing a list of equipment, validating that all equipment is in good condition, and verifying the location of the equipment.

- Return all equipment to MUSM if I leave Mercer University or am out for an extended period of time as defined as a consecutive two-week period.

- Comply with Mercer University's property policies and procedures which include but are not limited to:

    - Tagging - All assets must be tagged or approved by the Associate Dean for Research as an item that cannot be tagged due to the sensitive nature of the equipment.
    - Disposals – Disposal procedures as defined in the Fixed Asset Accounting Procedures Manual to include completing the appropriate form "Request for Disposition of Assets" and securing the proper approvals.

- Comply with all federal guidelines for equipment purchased with federal funds, to include 2 CFR Part 215 (formerly OMB Circular A-110) and any agency specific guidelines.

- Make equipment available for inspection at any time.

- Safeguard and protect Mercer University owned property. I agree to be held responsible and reimburse Mercer University if equipment is damaged, impaired, lost, or stolen.

- Provide an annual report if required.

If I fail to abide by the terms of this agreement, I forfeit this privilege and agree to return all equipment to MUSM immediately.

_____

Signature Date

_____ _____

Department Chair Associate Dean for Research

_____

Dean, Mercer University School of Medicine

Policy effective May 23, 2006; reviewed September 2017; reviewed April 2020

7.5 Professional Travel

The policy of the Mercer University School of Medicine (MUSM) is to reimburse employees who travel on approved University related business based on actual, reasonable expenses incurred and in accordance with the descriptions of various and specific items as contained in this policy statement. Review MUSM's Travel Reimbursement Policy with appropriate forms https://medicine.mercer.edu/finance-office/ (Accessed 09/16/22).

Additional Travel Information

Privately Owned Automobile

The employee will be reimbursed at the currently approved mileage rate for work-related miles driven. The University's comprehensive mileage rate for reimbursement covers all operating costs (including but not limited to gas, oil, repairs, personal property and liability insurance) and the employee waives further claims against Mercer. Employees using personal automobiles for University related travel are **not** covered by the University vehicle insurance policy.

When two or more University employees or representatives travel in the same automobile, only the owner may claim reimbursement. **For extended travel by private automobile, reimbursements will be limited to round-trip coach airfare.** Submit documentation with the travel expense reconciliation form showing that the use of a private automobile and other related extended travel expenses (i.e. meals and lodging) do not exceed the cost of airline Coach Fare booked at least two weeks in advance for the same travel dates.

If an individual chooses to use his or her own personal vehicle on University business, then the individual will be eligible for mileage reimbursement at the rate approved by the University during the period in which the travel takes place. The University Accounting Office can provide the individual with the applicable mileage reimbursement rate. One of the components used to develop the mileage reimbursement rate is the cost of personal automobile insurance coverage. MUSM will not pay mileage and then reimburse fuel cost as well. By using his or her own vehicle for University travel and by accepting mileage reimbursement, the individual understands that his or her personal automobile insurance is the primary insurance coverage if an accident occurs. This applies to student vehicles the same as it does for Faculty and Staff.

The individual also accepts the responsibility for the comprehensive and collision coverage deductibles applicable under his or her personal automobile insurance policy. **The University's automobile insurance policy does not provide coverage for physical damage to an individual's vehicle used on University business.** The University's automobile insurance policy will only provide liability coverage on an excess basis (after the individual's personal automobile liability limits have been exhausted). Tolls and parking fees are reimbursable with original receipts.

University Owned Vehicles and Rental Cars

All individuals are encouraged to use University-owned vehicles while traveling on University business. If a University-owned vehicle is not available for University travel, then the individual should consider renting a vehicle through the University's approved rental car provider, currently ***Enterprise Rent-a-Car***. Enterprise maintains Mercer's policy numbers on file.

Original receipts are required for reimbursement**.** The University's automobile insurance policy will provide primary insurance coverage for University-owned vehicles and rental vehicles used on University business when the individual driving the vehicle is on the

Mercer Approved Driver's List. For information on becoming an approved driver please see the Approved Driver Application Form at https://benefitspayroll.mercer.edu/benefits/approved- drivers.cfm (accessed 9-26-22). Mercer University WILL NOT reimburse employees for additional insurance coverage on rental vehicles.

Actual charges for standard equipment will be allowed when this mode of travel is the most practical and/or the least expensive method. **If a rental car will be used for travel it must be justified in advance on the travel authorization form if the employee wants to be reimbursed for the expense.** Liability insurance is not reimbursable on rental cars. Mercer University's vehicle insurance policy must be referenced on all rental car agreements; private policies will not be reimbursed in case of an accident. Gasoline, oil, tolls and parking fees are reimbursable with original receipts.

Please note: The University does not encourage the use of personal-owned vehicles for purposes of transporting groups to University related events. Whenever possible, please

utilize University-owned or leased vehicles.

Rail or Bus
Actual charges are reimbursable. For extended travel by rail or bus, reimbursements will be limited to round-trip coach airfare. Documentation must be submitted with the travel expense voucher showing that the use of rail or bus does not exceed the cost of airline Coach Fare booked at least two weeks in advance for the same travel dates. Original receipts are required.

Taxi or Shuttle
Actual charges are reimbursable when the taxi or shuttle is used for work-related activities. Transportation to and from the Atlanta airport by shuttle is preferred to using a personal automobile and parking for an extended period at the airport. Original receipts are required.

7.6 Purchasing

The Purchasing Office policies may be accessed at: https://purchasing.mercer.edu/ (accessed 9-26-22).

NOTE: Under no circumstances will anyone be personally reimbursed for any purchase of goods or services that were not previously authorized in writing as a personal purchase. Only the Dean or the Executive Director of Finance can authorize such a purchase. Prior authorization will be based upon either of two criteria:
No other means are available for procuring the needed item(s) or
MUSM achieves a significant savings by individual purchase versus institutional purchase of the item(s).

Purchasing through the WorkDay: Persons who have been authorized to spend money on behalf of the Medical School can use the WorkDay System to obtain a purchase order. The purchase order will be sent to the vendor by the University Purchasing office. Each department has specific procedures for how these transactions are processed within the department so new persons need to check with their department's administrative support person(s) for specific procedures. This is the only method for purchasing computer hardware and software items which require the pre-approval of the University IT Dept.

Procurement Cards: Many departments within the Medical School issue University procurement

7.7 Information Technology

Mercer's Division of Information Technology supports, develops, and maintains the University's Information Technology environment:
Email Telecommunications Security
New Employees access Hardware/Software internet/network

All telephone related costs are paid from the departmental budget.
Faculty must request repairs and changes to basic service through the department administrator and are a cost to the department.

Long Distance service access is a calling option approved by the responsible budget administrator based upon need. A long-distance access code is required before this feature can be used.

If you have IT related issues, submit an electronic ticket through the IT Service Portal: https://mercer.saasit.com/ or contact the Help Desk by 478-301-7000 or helpdesk@mercer.edu.

7.8 Room Scheduling

Room requests for the *Macon, Columbus and Savannah campuses* are scheduled through the School of Medicine. Check Room Availability and submit a reservation
https://reservations.mercer.edu/about/reservation/

7.9 Health Services

Macon Campus
Mercer Medicine at the Macon campus is a multi-specialty physician practice serving the patient community in central Georgia. The School of Medicine faculty physicians provide patient care in the areas of Family Medicine, General Internal Medicine, Cardiology, Geriatrics, Infectious Disease, Nephrology, Pulmonary – Critical Care, Sports Medicine and Psychiatry/Behavioral Health.

Mercer Medicine operates five clinic locations within the community with access to three hospitals, a Rehab facility and a Long-term Care hospital. Physicians participate in most managed care plans including Medicare and Medicaid. Mercer Medicine retains all operational functions such as billing/accounts receivable, provider credentialing, Information Technology, accounting and administration.

Faculty are encouraged to take advantage of these health care services. Visit the website https://www.mercermedicine.com/locations/loc/mercer-medicine-downtown-macon (accessed 9-16-22).

7.10 Grievance Procedures And Policies

A faculty member has the right to file a grievance against another faculty member or administrator. There are several avenues to file a grievance depending on the nature of the

complaint. The policies can be found on the Mercer University website in the Faculty Handbook https://provost.mercer.edu/resources/handbooks/faculty-handbooks/ (accessed 9-16-22).

7.11 Mercer University School of Medicine Appeal/Grievance Procedure

If the parties cannot reach an informal resolution, then the grievance procedure in the medical school can be activated. The Bylaws of the School of Medicine establish three Appeals and Grievances Committee, one on each campus. The bylaws also prescribe how hearings should be conducted and how appeals and grievances should be routed. See Article 11. Appeals and Grievances Committee for additional details. The bylaws may be accessed in the MUSM Faculty Handbook or the Faculty Bylaws (https://medicine.mercer.edu/faculty-and-staff/resources/ (accessed 9-16-22).

7.12 Student Appeals/Grievances against a Faculty Member

A student has the right to bring grievances against a faculty member or an administrator and to appeal decisions concerning academic matters. This policy can be found in the Student Handbook https://provost.mercer.edu/resources/handbooks/student-handbooks/ (Accessed 9-16-22).

8.0 CONTINUOUS QUALITY IMPROVEMENT

8.1 Introduction

Continuous Quality Improvement (CQI) is a structured, systematic approach to evaluating the performance of systems and processes in an organization, then determining needed improvements in both functional and operational areas and evaluating the outcomes of the changes. CQI requires teamwork among all employees and maintains that all employees are valuable members of the team. The MUSM mission and strategic plan and the accreditation standards for academic programs guide CQI at MUSM. The Continuous Quality Improvement (CQI) Council, described below, provides centralized oversight for CQI efforts across the school to ensure their alignment with mission, strategic planning and accreditation standards.

8.2 Continuous Quality Improvement Council

The Continuous Quality Improvement (CQI) Council consists of the following ex officio membership. The individual representatives are appointed annually by the Dean. The Associate Director for Evaluation and Assessment from the MUSM Office of Strategic Planning, Accreditation and Evaluation serves as Chair of the CQI Council. The CQI Council meets monthly and the CQI Council Chair reports its activities to the Executive Council. The CQI Council submits an annual report to the Executive Council. The annual report will include an executive summary, roster of members, and CQI projects and outcomes.

- All Deans and Directors of the Office of Strategic Planning, Accreditation and Evaluation (includes the Associate Director for Evaluation and Assessment who serves as Chair)
- One of the Sr. Assoc. Deans of the Campuses
- One representative from the Deans of Academic Affairs
- One representative from the Deans of Faculty Affairs
- One representative from the Deans of Student Affairs
- One representative from Finance and Operations
- One representative from the URiM Offices
- One representative from the Georgia Rural Health Innovation Center
- One representative from the Instructional Technology Team
- One representative from MUSM Marketing and Communications
- The Director of Pathways, Programs and Events

All members of the committee, including the Chair, have a vote. Quorum for CQI meetings will be 50% +1 of the members. Each member may identify an alternate to attend meetings in their absence and vote when necessary. The CQIC Chair manages meeting schedules and agendas and records the meeting minutes.

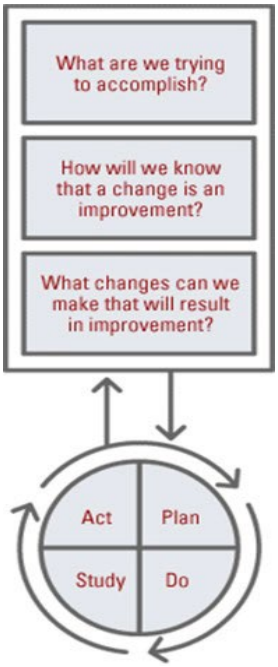
Due to the nature of the topics that may be discussed within the CQI Council students will not serve as members; however, Student Council may identify projects for CQI review, be invited to participate in meetings as deemed appropriate by the CQI Council Chair and may participate on ad hoc Quality Improvement Teams when appropriate.

The CQI Council establishes a yearly Plan for CQI priorities based on progress and impediments in strategic planning objectives, on the status of accreditation elements under monitoring by academic program accrediting agencies, and on imperatives arising from the ongoing review cycles in other committees or offices. The Council responsibilities include:

- Advocating for CQI and MUSM's culture of quality improvement.
- Establishing benchmarks for review.
- Planning schedules for data analyses, review, and reporting.
- Providing general CQI expertise and guidance for the support of CQI activities.
- Reviewing all requests to survey students, faculty and staff.
- Reviewing all proposals for new academic and non-academic programs.
- Supporting data collection and analyses.
- Supporting action planning and plan implementation.
- Monitoring progress of CQI projects in achieving set goals.
- Monitoring quality assurance and accreditation readiness for LCME standards and elements
- Determining the impact of improvement efforts.
- Validating CQI systems and processes.
- Reviewing and affirming CQI activity reports

8.3 Process For Continuous Quality Improvement (CQI)

Utilizing evidence-based methods for assessment, evaluation, and effective change, the Mercer University School of Medicine (MUSM) *Continuous Quality Improvement Process* (CQIP) serves a vital role in promoting high standards for excellence in academic programming, research, student services, faculty affairs, and administrative functions. This *Process* prompts the ongoing transformational review of practices aimed at improving existing systems, achieving better outcomes, and promoting a more robust culture of respect, compassion and diversity. MUSM's CQIP adapts the four key components of the Plan, Do, Study, Act (PDSA) quality improvement model to establish a quality improvement feedback loop. [1, 2, 3]



Steps in the PDSA Cycle (*adapted from IHI.org*)

Step 1: Plan. MUSM plans and implements programming. Programmatic units establish objectives and benchmarks for success as well as plans for data collection and analyses.

Step 2: Do. As units implement programming, outcomes data are generated for systematic review.

Step 3: Study. Units analyze outcomes data in comparison with established benchmarks, documenting problems and unexpected observations and reflecting on what has been learned of MUSM strengths and areas for improvement.

Step 4: Act. Units determine what modifications should be made and draft action plans for quality improvement**.** Most action items are

implemented per systematic ongoing CQI monitoring cycles. Some plans are piloted and tested on smaller scales before fuller scale implementation.

8.3.1 General Operating Structure

The yearly CQI Plan established by the CQI Council is implemented across all units (offices, programs and centers) of the School of Medicine.

- MUSM's Executive Council empowers CQI and monitors outcomes.
- Per the PDSA cycle, MUSM's extant units plan and implement programming, establish benchmarks, analyze outcomes data, reflect on process, draft action plans for quality improvement, and implement new programming.
- MUSM's CQI Council supports and monitors process and outcomes. In addition to the CQI that occurs across extant programmatic units, Ad-Hoc Quality Improvement Teams may be appointed to address imperative concerns. Further, the CQI Council may appoint CQI Audit Teams to affirm processes and outcomes.

8.3.2 Quality Improvement Teams

Complementing the CQI that occurs across established units, CQI Council charges ad-hoc Quality Improvement Teams to evaluate imperative issues. Quality Improvement Teams are comprised of members from program units and supported by CQIC members or appointees who are not directly responsible for ongoing program delivery. Specific responsibilities include:

- Identifying problems.
- Drafting data-informed action plans.
- Implementing and monitor plans.
- Evaluating the efficacy of imperative improvement efforts.

8.3.3 Annual Reporting and Communication

Communication is critical to the successful adoption of a CQI culture. MUSM faculty and staff will receive ongoing communication regarding quality improvement. Communication methods include:

- **Column in the MUSM Faculty and Staff Newsletter**. This electronic publication features quality improvement successes (as well as challenges), lessons learned, and celebrations of MUSM's culture of quality.
- **Canvas.** MUSM's online learning management system is a repository for quality improvement training materials, reference materials, reporting templates, data, and archives for action planning and closing the loop.
- **Faculty Meeting Reports**. The CQI Council Chair will provide updates on CQI activities, as appropriate, at scheduled MUSM faculty meetings and campus Deans and Chairs meetings.

8.3.4 References

[1] Barbara Barzansky, Dan Hunt, Geneviève Moineau, Ducksun Ahn, Chi-Wan Lai, Holly Humphrey & Linda Peterson (2015) Continuous quality improvement in an accreditation system for undergraduate

medical education: Benefits and challenges, Medical Teacher 2015; 37(11), 1032- 1038.

[2] Stoddard H, Angle Jr, SM, Brownfield E, Byerley J, Churchward G, Cottrell S, Halbert CH, Park V, Thomas A, and Wallach P. A Crosswalk of Methods for Continuous Quality Improvement in Medical Education. Oral Session presented at the Annual Meeting of the Association of American Medical Colleges, Southern Group on Educational Affairs, Charlottesville, Virginia.
2017.

[3] Hedrick JS, Cottrell S, Stark D, Brownfield E, Stoddard HA, Angle Jr SM, Buckley LA, Clinch CR, Esposito K, Krane NK, Park V, Teal CR, and Ferrari III ND. A Review of Continuous Quality Improvement Processes at Ten Medical Schools. Medical Science Educator 2019; 29 (1): 285- 290.