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Section 1  Mission-Values-Vision-Diversity and Recruitment

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MERCER UNIVERSITY SCHOOL OF MEDICINE

1.1 MISSION, VALUES, VISION

MISSION

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

CORE MISSION AREAS

TEACHING – Excellence in educational programs that graduate caring, compassionate, competent health professionals.

SCHOLARLY ACTIVITY/RESEARCH – Discovering new knowledge, integrating and applying knowledge to improve the health status of Georgians.

CLINICAL CARE – Providing high quality, patient-centered, cost effective health care services.

COMMUNITY SERVICE – Reaching out and partnering with neighborhoods and communities.

CORE VALUES

COLLABORATION – Working together and respecting each other’s contributions

COMPASSION – Showing empathy and concern for the well-being of others

COMPETENCE – Demonstrating mastery of skills of one’s profession or vocation

EXCELLENCE – Performing at the highest level and exceeding the expectations of those we serve

INTEGRITY – Unwavering adherence to a professional and ethical code of conduct

RESPECT AND HONESTY – Conducting ourselves in a manner that demonstrates the value of each individual

SERVICE – Offering our talents and skills toward betterment of our communities

VISION

To be a recognized leader in educating primary care, rural and community-based health professionals by:

- Improving access to quality health care for Georgia residents
- Enhancing the health status of Georgia residents
- Providing an outstanding medical and health science education in an environment that emphasizes achievement, discovery, diversity, and inclusion.

Approved by Executive Council December 9, 2014
1.2 DIVERSITY AND RECRUITMENT

1.2.1 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
1.2.2 Faculty, Professional and Staff Recruitment & Selection:
Best Practices for Search Committees - *(approved 8/4/14)*

Mercer University is committed to Equal Employment Opportunity and Affirmative Action. The University is committed to identifying areas where qualified minority group members and women may be underutilized; determining the reason for any such underutilization; taking affirmative measures in a good faith attempt to increase the representation of minorities and women in such areas; and regularly monitoring progress. Recruitment and selection processes are in place to support these commitments and departments are expected to contact Human Resources and follow any Mercer University policies and procedures that have been established [https://hr.mercer.edu/internal/recruit/faculty/](https://hr.mercer.edu/internal/recruit/faculty/).

These best practices are intended to enhance the diversity initiatives of Mercer University School of Medicine and should not supersede any policies established by Human Resources, rather enhance the efforts to recruit, select, and retain a diverse workforce.

**FACULTY RECRUITMENT AND SELECTION**

- The Search Committee should be a diverse committee comprised of faculty and administrators who bring multiple perspectives and fresh ideas.

- As part of the charge to the committee, the hiring manager should align the committee with the diversity efforts of the medical school, the mission of the medical school and the strategic plan of the department/division/unit. Committee members should be aware of the diversity needs of the medical school, particularly with the value-added groups of gender and underrepresented groups in medicine (African American, Native American, and Hispanic). The diversity statement of the medical school may be accessed at the following link: [http://medicine.mercer.edu/about/diversity/](http://medicine.mercer.edu/about/diversity/).

- The Committee should review Human Resources Policy and Procedures related to recruitment and selection.

- The Search Committee, together with the hiring manager should:
  - Discuss the essential duties, tasks, and responsibilities for the position. Define the position as broadly as possible while still meeting the needs of the Department.
  - Discuss the knowledge, skills, and abilities required and reach consensus prior to beginning the search.
  - Clarify essential and preferred criteria and reach consensus regarding how qualifications will be weighted.
  - Avoid narrowing the search to one specific research area.
  - Develop a position description and job announcement that accurately represent the responsibilities and expectations associated with the position.

- The job announcement should be critically analyzed to ensure that it is geared toward inclusiveness and will enhance the diversity of the faculty. Language in the announcement should be assertive in encouraging 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 Search Committee should ensure that a diverse pool of candidates is recruited:
  - Work with Human Resources to ensure that appropriate outlets are identified in which to place the initial announcement.
As applications are received, request that Human Resources review the demographics of the applicant pool with regard to race, gender, and ethnicity. If there are concerns that the applicant pool is not sufficiently diverse to meet the goals of the medical school, request that Human Resources expand and/or target additional outlets for advertising of the position.

At least two committee members should screen initial application materials.

Once the committee has selected their “short list” of candidates, the chair can contact HR who will inform the committee of the overall makeup/demographics of those candidates (not individual information) in comparison of the rest of the pool. For example, if they are interviewing three candidates and there is a strong fourth candidate, HR can let them know if a fourth candidate would add any diversity to the interview pool.

To ensure consistency in the screening process, a list of the job criteria may be used to develop a screening instrument to ensure that the same criteria are applied consistently when identifying those applicants whom the committee wishes to invite for a telephone or personal interview.

- After the first review has been completed and the candidates selected for interview, request that Human Resources put the posting on hold. This means that no new notices or e-mails are sent to candidates and no new candidates can apply. In the event an acceptable candidate is not found, the posting can be reopened. This will help to eliminate late applications that are never really considered.

- If telephone interviews will be conducted, determine how many committee members will be involved in each interview and if all candidates will not be interviewed by the same individuals at the same time, develop a common process for the interview.

- Committee members should have a shared understanding of the general details of the offer package prior to beginning the search. The process to be used and the budgetary details (how many visits, accommodations, travel requirements, etc.) should be transparent to the committee.

- When constructing the visit itinerary, ask the applicant if there are specific individuals with whom they would like to meet.

- Clarify the committee’s role in the final recommendation. For example, will a ranked or unranked list be submitted to the dean and/or department/division chair?

- If a candidate refuses an offer, work with Human Resources to determine why. These reasons may help inform the next search process.

- At least annually, the Affirmative Action Officer conducts an adverse impact analyses on all selections to determine whether the selection rates of minorities or women in a particular job group approximates the selection rates of Caucasians and males. In job groups where the analyses reveal possible adverse impact, each step of the process will be reviewed to determine where possible adverse impact occurred and subsequent discussions held with hiring managers to determine reasons for selection and non-selection.
1.2.3 Staff and Professional Recruitment and Selection

Mercer University is committed to Equal Employment Opportunity and Affirmative Action. The University is committed to identifying areas where qualified minority group members and women may be underutilized; determining the reason for any such underutilization; taking affirmative measures in a good faith attempt to increase the representation of minorities and women in such areas; and regularly monitoring progress. Recruitment and selection processes are in place to support these commitments and departments/divisions are expected to contact Human Resources and follow any Mercer University policies and procedures that have been established. https://hr.mercer.edu/internal/recruit/

These best practices are intended to enhance the diversity initiatives of Mercer University School of Medicine and should not supersede any polices established by Human Resources, rather enhance the efforts to recruit, select, and retain a diverse workforce.

STAFF AND PROFESSIONAL RECRUITMENT AND SELECTION

- The Search Committee, if one is used for the position, should be a diverse committee comprised of individuals who bring multiple perspectives and fresh ideas.
- As part of the charge to the committee, align the committee with the diversity efforts of the medical school, the mission of the medical school and the strategic plan of the department/division. Committee members should be aware of the diversity needs of the medical school, particularly with the value-added groups of gender and underrepresented groups in medicine (African American, Native American, and Hispanic). The diversity statement of the medical school may be accessed at the following link: http://medicine.mercer.edu/about/diversity/
- The Committee should review Human Resources Policy and Procedures related to recruitment and selection.
- The Search Committee, together with the hiring manager, should:
  - Discuss the essential duties, tasks, and responsibilities for the position. Define the position as broadly as possible while still meeting the needs of the Department.
  - Discuss the knowledge, skills, and abilities required and reach consensus prior to beginning the search.
  - Clarify essential and preferred criteria and reach consensus regarding how qualifications will be weighted.
  - Develop a position description and job announcement that accurately represent the responsibilities and expectations associated with the position.
- The job announcement should be critically analyzed to ensure that it is geared toward inclusiveness and will enhance the diversity of the administrative unit.
- The Search Committee should ensure that a diverse pool of candidates is recruited:
  - Work with Human Resources to ensure that appropriate outlets are identified in which to place the initial announcement.
  - As applications are received, request that Human Resources review the demographics of the applicant pool with regard to race, gender, and ethnicity. If there are concerns that the applicant pool is not sufficiently diverse, request that Human Resources expand and/or target additional outlets for advertising of the position.
  - At least two committee members should screen initial application materials.
Once the committee has selected their “short list” of candidates, the hiring manager can contact Human Resources who will inform the committee of the overall makeup/demographics of those candidates (not individual information) in comparison of the rest of the pool.

To ensure consistency in the screening process, a list of the job criteria may be used to develop a screening instrument to ensure that the same criteria are applied consistently when identifying those applicants whom the committee wishes to invite for a telephone or personal interview.

- After the first review has been completed and the candidates selected for interview, request that Human Resources put the posting on hold. This means that no new notices or e-mails are sent to candidates and no new candidates can apply. In the event an acceptable candidate is not found, the posting can be reopened. This will help to eliminate late applications that are never really considered.

- If telephone interviews will be conducted, determine how many committee members will be involved in each interview and whether similar questions will be asked. If one person will screen applicants by telephone, identical questions should be used for the screening.

- The University has already developed a number of action-oriented programs targeted to increase appropriately the minority group/female representation in the group and/or organizational units identified, if vacancies occur, or document good faith efforts to do so. These actions include: contacting the Department of Labor regarding the posting/referral of all non-promotional job announcements; contacting community agencies and colleges who serve diverse populations, particularly minorities and women; posting professional positions to www.higheredjobs.com; posting to newspapers serving a diverse population; and actively encouraging employees, particularly women and minorities, to apply for existing vacancies.

- Human Resources will work with the hiring manager to ensure the recruitment process has resulted in a pool of candidates that includes women and minorities. If not, they will suggest strategies to enhance the pool.

- At least annually, the Affirmative Action Officer conducts an adverse impact analyses on all selections to determine whether the selection rates of minorities or women in a particular job group approximates the selection rates of Caucasians and males. In job groups where the analyses reveal possible adverse impact, each step of the process will be reviewed to determine where possible adverse impact occurred and subsequent discussions held with hiring managers to determine reasons for selection and non-selection.
# MUSM – Faculty and Staff Hiring Approval Form

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Please provide any additional details below that are pertinent to hiring this position:

I have read and understand MUSM’s Diversity Statement and the MUSM Policy on Faculty, Professional and Staff Recruitment and Selection: Best Practices For Search Committees. [http://medicine.mercer.edu/About/Diversity](http://medicine.mercer.edu/About/Diversity)

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Approved By: Program Director Date

Approved By: Department Chair Date

Approved By: Executive Director of Finance & Administration Date

Approved By: Dean Date

Section 1 Mission-Values-Vision-Diversity and Recruitment
Section 2  Academic Organization

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2. ACADEMIC ORGANIZATION

2.1 Administrative Organization

Mercer University School of Medicine (MUSM) was established as a public-private partnership to improve health care and access to health care in rural and underserved areas of the state. MUSM meets that mission by offering educational programs in medicine (M.D.) and masters programs in, marriage and family therapy, bio-medical science, and pre-clinical science. MUSM operates three teaching campuses. Pre-clinical education in all of the degree programs takes place either on the Macon or Savannah campuses of Mercer University. Clinical education activities occur primarily at its five affiliated teaching hospitals: Navicent Health and Coliseum Health in Macon, Memorial University Medical Center in Savannah, and Columbus Regional Health and St. Francis Hospital in Columbus. Accredited post-graduate medical education training programs are sponsored by MUSM on both the Macon and Savannah campuses. Faculty status is available to the qualified professionals who teach in any of the above-mentioned educational programs.

The educational activities of MUSM receive oversight by the faculty governance structures of the programs and School, and by the administration of the school. MUSM is one of the component colleges and schools of Mercer University, and is subject to the rules, regulations, and faculty by-laws of the university. The dean and the administrators are appointed by and serve under the authority of the President and the Board of Trustees of the University.

2.1.1 Administrative Organization of the School

Mercer University School of Medicine is organized into administrative departments and academic programs as prescribed by the Mercer University Board of Trustees. Each department or program has a chair or director who is responsible for the administration of that unit.

The administrative staff of MUSM consists of senior associate/associate/assistant deans and support staff.

The dean is the chief executive officer of MUSM and is responsible for all aspects of the School. The dean reports to the provost of the university.

Other administrative officers are employed to assist the dean in the performance of his/her duties. These persons have titles such as senior associate/associate dean, assistant dean, and Executive Director of Finance and Administration. Their duties are specified by the dean and are subject to change by the dean as circumstances require.
2.2 Job Descriptions

2.2.1 Job Description of the Dean of the School of Medicine

The dean is the chief 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 lead 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.

- To develop plans for the continued development of the school.

- To develop recommendations to the provost and the president regarding the operating budget.

- To foster the recognition and accreditation of the school by external agencies.

- To represent the school in the Administrative Cabinet and Academic Council and to collaborate 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 publics.

- To provide for the effectiveness of student services and to enhance the well-being and safety of students.

The dean exercises supervision over all school personnel. Any grievance and appeals must be made through the Office of the Dean. The primary responsibility for the selection of new faculty for the school resides with the Dean. However, the Provost of the University has the responsibility of reviewing each appointment and may veto such appointments. The President makes the offer of faculty appointment or he may delegate his appointment powers to the Provost of the University or to the Dean of the
School of Medicine. 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.

2.2.2 Job Description of Senior Associate Dean of Campus

Senior Associate Dean for the Campus-Macon, Columbus, Savannah

- 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 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 foster and support a “One MUSM” environment by encouraging cross-campus events, outreach opportunities and shared learning experiences for students and faculty.
- To evaluate workforce needs on the assigned campus and participate in the recruitment and selection process assuring compliance with by-laws.
- 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 Development.
- To supervise campus faculty and communicate to the Dean the faculty’s concerns, challenges and needs as well as suggested solutions to issues raised.
- To supervise those responsible for students and communicate to the Dean student concerns, challenges and needs.
- To foster and demonstrate faculty collegiality and professionalism.
- To support diversity, inclusion and cultural awareness in the student body and faculty.
- To strongly support and demonstrate commitment to the mission of Mercer University School of Medicine: Encourage students to serve in rural or underserved area in primary care or other needed specialties.
- To participate in strategic planning and development of the campus and school.
- To assure that all standards for accreditation are met or exceeded.
- To assure the students, faculty and staff on the assigned campus are provided a safe environment.
- 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 student 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 external meetings if needed.
2.2.3 Deans and Chairs Council

The Deans and Chairs Council is a special committee that serves to maintain and protect a school 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.

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

- The dean, who serves as chair.
- All associate and assistant deans.
- The department chairs from the Macon and Savannah campuses.
- The Chief Medical Officer/Vice Presidents for Medical Affairs/Academics for each major affiliated teaching hospital.

Duties and Responsibilities of the Deans and Chairs Council

- To provide consultation to the dean on faculty or interdepartmental related matters. It is also a forum for the dissemination of information and exchange of ideas and perspectives.
- To strive for adequate communication among the faculty, departments, and the dean.
- To implement policies established by the Executive Council.
- To forward issues 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 annually. 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.

2.3 Evaluation of Administration and Faculty

2.3.1 Evaluation of the Dean

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

2.3.2 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 using Activity Insight. This review 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.
2.3.3 Evaluation of the Faculty

All academic and full-time clinical faculty members of the school shall be evaluated annually by the chair of their respective department or unit administrator, and the results of such evaluations shall be shared with the individual faculty member being evaluated and shall be transmitted to the dean.

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.
Bylaws of the Faculty
(Revised April 24, 2018)

a. The School of Medicine, hereinafter called the School, is an educational and administrative component of Mercer University comprised of departments and other units with common educational interests. By authority of the Board of Trustees of Mercer University and the President of the University, the School is delegated the responsibility to conduct programs leading to the awarding of the degree of Doctor of Medicine and other appropriate degrees and certificates.

b. Subject to policies approved by the Board of Trustees of Mercer University, the School shall have the fullest measure of autonomy consistent with general University educational policy and appropriate academic and administrative relations with other divisions of the University. In questions of doubt concerning the proper limits of this autonomy between the School and the University, the School shall be entitled to appeal to the President for a ruling.

c. The Faculty of the School shall have jurisdiction in educational matters falling within the scope of its programs, including the determination of its curricula. Proposals that involve budgetary changes shall require approval by the administration of the School.

d. The Bylaws of the Faculty shall define the duties and responsibilities of the Faculty of the School with regard to the Executive Council and all Standing Committees.

e. As stated in the Mercer University Faculty Handbook, all members of the Faculty, whether tenured or non-tenured, are entitled to academic freedom as defined in the 1940 Statement of Principles on Academic Freedom and Tenure, formulated by the Association of American Colleges and the American Association of University Professors. It is thus the policy of Mercer University to maintain and encourage full freedom, within the law, of inquiry, discourse, teaching, research and publication and to protect any member of the academic staff against influences, from within or without the University, which would restrict her/him in the exercise of these freedoms in her/his area of scholarly interest.

f. These Bylaws are intended to supplement the bylaws and approved policies and procedures of Mercer University. Where conflicts are alleged, the Mercer University Faculty Handbook shall prevail.
Article 1. THE FACULTY

1.1 The Faculty of the School shall include the Dean and all persons with full or part-time appointments with academic rank (including persons appointed to clinical or non-clinical positions, whether or not they are employees of the University). Faculty ranks are Professor, Associate Professor, Assistant Professor, and Instructor.

1.2 The Dean, on the advice of the Executive Council, may add to the Faculty representatives of another department of the University or group as may be entitled to representation by virtue of participation in the program(s) of instruction in the School.

1.3 The President and Executive Vice President/Provost of Mercer University are ex officio members of the Faculty of the School.

1.4 The Executive Council shall determine the Faculty membership and voting rights of persons holding academic rank who are neither full-time nor contractually appointed part-time members of the Faculty.

1.5 Standards and procedures for appointments, promotion and tenure shall be determined by the Faculty and shall be incorporated into the “Manual of Procedures and Guidelines for Faculty Appointment, Promotion and Tenure” (a supplement to the Mercer University School of Medicine Faculty Handbook).

1.6 Duties and Responsibilities of the Faculty

The duties and responsibilities of the Faculty shall include the following:

1.6.1 The Faculty has the authority to organize and conduct educational programs and to establish academic policies. This includes establishing the academic and admissions standards and standards for the evaluation of the academic performance of students; certifying students for graduation from the programs of the School; and making recommendations to the Dean concerning the internal administration and the implementation of programs.

1.6.2 Faculty are expected to subscribe to the highest standards of teaching, research, and service in accordance with policies and procedures developed by the Executive Council in support of the School’s academic mission, as well as the highest standards of conduct and ethical behavior.

Article 2. EXECUTIVE COUNCIL

2.1 The Executive Council provides consultation to the Dean on matters of academic policy and strategic planning. It is also a forum for the dissemination of information and exchange of ideas and perspectives.

2.2 Membership and Chair

2.2.1 The Executive Council shall consist of the following members (18 voting members with a quorum of 10 members):

   a. The Dean, who serves as Chair;
   b. Five Faculty members from clinical departments with at least one member from the Macon campus, at least one member from the Savannah campus, and at least one
member from the Columbus campus;

c. Four Faculty members from Biomedical Sciences with at least one member from the
   Macon campus and at least one member from the Savannah campus;

d. One Faculty member from Community Medicine;

e. One Faculty member from the Medical Library;

f. Two “at-large” Faculty representatives. These two representatives shall represent
   different units or programs within the School;

g. The Secretary of the Faculty;

h. Six representatives from the Student Council, elected by the Student Council – with two
   students representing the Macon campus, two students representing the Savannah
   campus and two students representing the Columbus campus. The representation will
   be divided such that each campus has one preclinical year and one clinical
   representative, if available. Each respective campus will share one vote per campus;

i. Chairs of the Standing Committees, who shall serve without vote: Nominating,
   Admissions, Curriculum & Instruction, Student Appraisal & Promotions, Faculty
   Promotions & Tenure, Research, Library & Learning Resources, and Rules & Bylaws;

j. The assistant or associate dean(s) or liaison whose responsibilities most involve
   academic affairs, admissions, student affairs, faculty affairs, diversity and inclusion,
   clinical affairs, research, graduate medical education and accreditation, shall be ex
   officio members and shall serve without vote;

k. The Executive Director of Finance and the Staff Council representative, as Staff
   representatives, ex officio, without vote;

l. A representative from the Executive Committee of the University House of Delegates
   shall be an ex officio member, without vote.

2.2.2 Students shall serve one-year terms. All other voting members of the Executive Council
shall serve three-year terms.

2.2.3 One member shall be elected annually from and by the Council to serve as Vice-Chair.
The same person may serve no more than two consecutive terms. The Vice-Chair shall
serve as a liaison to the Standing Committees.

2.3 Voting

2.3.1 Voting shall be conducted in two formats. The normal method of voting on a motion shall
be by voice. A written ballot may be used when requested by an Executive Council
member.

2.3.2 A member may not designate a substitute or proxy.

2.3.3 A member with a potential conflict of interest in a matter may participate in the
discussion of the matter after having declared the conflict but must abstain from voting.

2.3.4 A simple majority of all Executive Council voting members constitutes a quorum.
A quorum shall be assumed to exist unless challenged.

2.3.5 Any issue that receives a tie vote is neither approved nor rejected. Additional discussions
may occur before considering a second vote.

2.4 Duties and Responsibilities of the Executive Council

The duties and responsibilities of the Executive Council shall be as follows:
2.4.1 To establish policy and procedures which determine but are not limited to the following:
   
   a. Standards for admission, retention and graduation of students.
   b. Standards for professional conduct and performance of Faculty and students.
   c. Standards and procedures for Faculty appointments, reappointments, promotion, and tenure.
   d. Faculty governance.

2.4.2 To provide final approval of proposed policy on behalf of the Faculty.

2.4.3 To receive reports and recommendations from standing and ad hoc committees.

2.4.4 To act on behalf of the Faculty on all standing and ad hoc committee reports. Reports from Standing Committees may differ in content:
   
   a. They may provide items for information only; or
   b. They may contain items demanding immediate action by the Executive Council; or
   c. They may contain recommendations for changes in School policy. Whenever a report recommends action by the Executive Council and contains more than one item, items shall be dealt with individually and shall be voted upon separately. In the event that a report is unacceptable to the Executive Council, it shall be returned to the Standing Committee for further action.

2.4.5 To convene ad hoc committees as necessary to facilitate its work. An ad hoc committee generally performs a specific purpose or duty and continues only until the purpose or duty assigned to it is accomplished.

2.4.6 To ensure effective liaison between all Faculty, departments and units in the School, recognizing that it is the responsibility of all representatives to keep their members informed.

2.4.7 To review and resolve challenges to the slates of candidates prepared by the Nominating Committee.

2.4.8 To perform such other functions as may be delegated to it by the Faculty or the Dean.

2.5 Executive Council Meetings

2.5.1 Executive Council meetings shall be held monthly. Members of the Executive Council may request special meetings to conduct business.

2.5.2 The Secretary of the Faculty, in consultation with the Chair and Vice-Chair, shall prepare the agenda for all regular Executive Council meetings. The Secretary of the Faculty shall request items from the Faculty for each agenda before each regular Executive Council meeting.

2.5.3 Robert's Rules of Order (most current revision) shall govern the conduct of all Executive Council meetings unless otherwise noted.

Article 3. STANDING COMMITTEES: GENERAL RULES OF ORGANIZATION

3.1 The Dean is an ex officio, non-voting member of all Standing Committees and subcommittees. By virtue of the Office, the intention of the Faculty is to permit, not to require, that the Dean shall act as a member of all Standing Committees and
subcommittees. Therefore, in counting a quorum, the Dean should not be counted as a member. At the Dean’s discretion, s/he may designate a representative to serve in her/his stead.

3.2 All Standing Committees shall begin their annual activities once the newly elected members have taken their office which, with the exception of the Student Appraisal and Promotions Committee, shall be the first day of July. New members of the Student Appraisal and Promotions Committee take office on the first day of September.

3.3 All Standing Committee Chairs and Vice Chairs shall be elected from and by the Faculty members of the committee with the advice and consent of the Dean. The elected Chair and Vice Chair shall preferably represent distinct campuses of the School. Committee Chairs shall serve until the committee convenes for the first time the following academic year at which time the Vice Chair becomes Committee Chair and a new Vice Chair shall be elected. However, the Senior Associate Dean of Academic Affairs shall serve as the permanent Chair of the CIC, ex officio, without vote.

3.4 All Standing Committee Chairs shall submit Executive Summaries of their non-confidential, monthly activities to the Executive Council. Whenever a Standing Committee recommendation contradicts policies established by the School, the Executive Council either shall revise the recommendation or shall return the report to the committee in question for further action.

3.5 Robert’s Rules of Order (most current revision) shall govern the general conduct of all Standing Committee meetings unless otherwise noted.

3.6 Issues requiring approval by a simple majority that receive a tie vote are neither approved nor rejected. Additional discussions may occur before considering a second vote.

3.7 Each Standing Committee shall develop those procedures necessary to guide its specific conduct.

3.8 Unless otherwise stated in these Bylaws, all Standing Committee meetings are open to the Faculty of the School, who shall be notified of the date, time and place of all meetings. However, Standing Committees may enter into executive session in accordance with Robert’s Rules of Order.

3.9 With the exception of confidential information (i.e., Faculty or student personnel matters) approved minutes of committee meetings shall be submitted by the Committee Chairs to the School’s webmaster, who shall make them available to the Faculty by posting them on the internal Faculty website, and the School’s Archives maintained by the Medical Library and the Learning Resource Center.

3.10 Chairs of all Standing Committees shall submit written annual reports to the Secretary of the Faculty in the Spring of each year. The Secretary shall make the reports available for review by Faculty for approval at its annual Spring meeting. An annual report shall comprise summaries of non-confidential business conducted during the period between April 1st of the preceding year and March 31st of the current year.

3.11 Elected Faculty members are expected to attend all meetings unless prior approval is obtained from the Standing Committee Chair. If repeated unexcused absences occur, the Chair of the committee has the authority to call for a vote whether to remove the Faculty member from the committee. A removal will occur if the majority of the Standing Committee votes for the action. The removed Faculty member may appeal the decision to the Appeals and Grievances Committee.

3.12 Whenever a vacancy occurs in the membership or an elected position on a Standing Committee, the committee shall determine whether the vacated seat needs to be filled.
prior to the election of new committee members in the Spring. If so, the Chair of the
committee shall notify the Nominating Committee requesting that the vacated seat be filled.
The Nominating Committee will fill the vacated seat using one of the following options:
1. With the exception of providing the opportunity for write-in candidates
   from the floor at a meeting of the Faculty, the procedure for filling a
   vacancy may be the same as for a regular appointment or elected position.
   The new member shall serve the remainder of the term being filled.
2. The Nominating Committee, in consultation with Chair and members of
   the committee with the vacancy, may present a nominee to the Executive
   Council for approval and interim appointment to serve on that committee
   for the remainder of the current academic year. Any position with any
   remaining unexpired term beyond the remainder of the current academic
   year will be filled during the regular election process.

3.13 Appointment or Election of Members of Standing Committees

3.13.1 Only Faculty with primary responsibilities within the School may serve on Standing
   Committees. Faculty may only represent the department of their primary responsibility.
3.13.2 Elected members of the Executive Council and Standing Committees shall be derived
   from slates prepared by the Nominating Committee and submitted to the Faculty at its
   Spring meeting. Additional candidates may be nominated from the floor at the Spring
   Faculty Meeting. Elections to Standing Committees shall occur electronically,
   immediately subsequent to the Spring Faculty Meeting.
3.13.3 The term of office for all Standing Committees shall be for three years with
   approximately one third of the seats vacated each year. There shall be a limit of two
   consecutive terms on the Nominating Committee.

Article 4. NOMINATING COMMITTEE

4.1 Membership

4.1.1 The Nominating Committee shall consist of the following members (9 voting members
   with a quorum of 5 members):
   
a. Four members from Clinical departments, with at least one member from the Macon
   campus, at least one member from the Savannah campus, and at least one member
   from the Columbus campus.
b. Three members from Biomedical Sciences, with at least one member from the
   Macon campus and at least one member from the Savannah campus.
c. One member from Community Medicine.
d. One member from the Medical Library.
e. Dean or Dean’s Designee ex officio without vote.

4.2 Duties and Responsibilities of the Nominating Committee

The duties and responsibilities of this committee shall be as follows:

4.2.1 To prepare slates of proposed candidates for election to the Executive Council, the
Standing Committees, and the position of Secretary of the Faculty, and to submit these slates to the Faculty.

The procedure for preparing slates of candidates shall be as follows:

a. The Nominating Committee shall solicit from the Faculty at large the names of candidates to fill open or vacated Faculty positions.
b. Once the list of nominations has been received, the Nominating Committee shall meet and prepare a preliminary slate of candidates from this list. The Nominating Committee shall strive to present a balanced slate of candidates that represents the Faculty and programs fairly and without bias. More than one candidate may be nominated for any position. Members of the Nominating Committee shall not be barred from being nominees for open positions themselves.
c. The Nominating Committee shall verify each person’s interest in serving in these positions before placing her/his name on the preliminary slate of candidates submitted to the Faculty.
d. Once prepared, the preliminary slate of candidates shall be submitted to the Faculty who shall be given the opportunity to challenge the inclusion or exclusion of any Faculty member on the slate of proposed candidates. All challenges shall be presented to the Executive Council, who shall be responsible for their review and resolution.
e. Following the challenge process a final slate of candidates shall be generated and submitted to the Faculty by the Nominating Committee at the Annual Spring Faculty Meeting. Additional candidates may be submitted from the floor at the Spring Faculty Meeting. Elections to Standing Committees shall occur electronically shortly thereafter.

Article 5. ADMISSIONS COMMITTEE

5.1 The Admissions Committee, in the fulfillment of its duties and responsibilities, may be assisted by subcommittees so constituted as to provide advice and guidance with the different aspects of selecting candidates for admission to the School.

5.2 Membership

5.2.1 The Admissions Committee shall consist of 20 voting members as stipulated in 5.2.1a – 5.2.1e below with a quorum of 11 members, where at least 6 of the 11 voting members are Faculty members. Ex-officio members serve without vote as stipulated below in 5.2.1f.

a. Seven Faculty members from clinical departments, with at least three members from the Macon campus, at least three members from the Savannah campus, and at least one member from the Columbus campus, elected by the Faculty.
b. Five Faculty members from Biomedical Sciences, with at least two members from the Macon campus and at least two members from the Savannah campus, elected by the Faculty.
c. One full-time, part-time or volunteer Faculty member, elected by the Faculty.
d. Two faculty members (full-time/part-time/volunteer faculty) from the School of Medicine or MUSM M.D. alumni appointed by the Dean.

e. Five rising fourth year medical students appointed to a one year term beginning the first of May through 30th of April, with at least two members from the Macon campus, at least two from the Savannah campus, and a maximum of one member from the Columbus campus. The Assistant/Associate Deans shall select these medical students for Admissions in consultation with the Dean of the School of Medicine.

f. At the appointment of the Dean of the School of Medicine, the Assistant/Associate Deans of Admissions as well as the Chief Diversity Officers/Assistant/Associate Deans of Diversity and Inclusion from all campuses of the School of Medicine shall be ex-officio members of the Admissions Committee, without vote.

5.2.2. Meetings of the Admissions Committee are held in executive session unless otherwise noted. The Chair may invite individuals to advise and inform the committee. Said individuals will be listed on the committee agenda and may remain in session with the committee at the discretion of the Committee Chair, who may opt to excuse these individuals at the appropriate time.

5.3  Duties and Responsibilities of the Admissions Committee

The duties and responsibilities of this committee shall be as follows:

5.3.1 Determine qualified students and to admit all pre-doctoral students into the School in adherence with the academic mission of the School and with the admissions policies and criteria established by the Committee.

5.3.2 To make recommendations related to the recruitment of students. Policy recommendations shall be reported to the Executive Council, whereas recommendations related to implementation of existing policies shall be reported to the Dean.

5.3.3 To explore and review admissions criteria on an ongoing basis and to submit recommendations for changes to admissions criteria to the Executive Council.

Article 6.  CURRICULUM AND INSTRUCTION COMMITTEE

6.1 The Curriculum and Instruction Committee (CIC), in the fulfillment of its duties and responsibilities, may be assisted by subcommittees constituted to address different segments of the curriculum. Each subcommittee or task group shall be appointed by the Curriculum and Instruction Committee and shall consist of a membership reflecting the interdisciplinary needs of the subcommittee or task group. The Senior Associate Dean of Academic Affairs shall serve as the permanent Chair of the CIC, ex officio, without vote.

6.2 Membership

6.2.1 The Curriculum and Instruction Committee shall consist of the following members (21 voting members with a quorum of 11 members):

a. Four Faculty members from clinical departments, with at least one member from the
Macon campus, at least one member from the Savannah campus, and at least one member from the Columbus campus.
b. Four Faculty members from Biomedical Sciences, with at least one member from the Macon campus and at least one member from the Savannah campus.
c. One Faculty member from the Community Medicine Faculty.
d. One Faculty member from the Medical Library Faculty.
e. Two community-based Faculty members appointed by the Dean.
f. The PBL Program Directors, from the Macon and Savannah campuses, (with one vote*),
   Professional Growth and Development Co-Chairs (with one vote).
   One Primary Care-Accelerated Track (PC-ACT) Program Faculty member,
   The Year 3 Program Director,
   The Year 4 Program Director.
g. The Senior Associate Dean of Academic Affairs shall be the permanent Chair of the CIC, ex officio, without vote.
h. Three medical students, one from each campus, elected by the student body. The Macon and Savannah campuses shall alternate elections of representatives of the preclinical and clinical years, while the Columbus representative will be from the clinical years. Each appointment will be for 2 years.
i. At the appointment of the Dean of the School of Medicine the Chief Diversity Officers/Associate Deans of Diversity and Inclusion from all campuses of the School of Medicine shall be ex officio members, without vote.

6.2.2 The Directors of the PBL program shall be from the Macon and Savannah campuses. The Co-Chairs of the PGD program shall be from the Macon and Savannah campuses. The Year 3 and Year 4 Program Directors shall be from the Macon, Savannah, or Columbus campus. When necessary, an Associate Year 3 or Year 4 Program Director may be named from one of the other two campuses. The Associate Program Director shall serve ex officio without vote, except in the absence from a CIC meeting of the Program Director.

6.2.3 Students shall have three votes, one vote from each campus.
6.2.4 All other members are voting members. A member may not designate a substitute or proxy except as stated above.

6.3 Duties and Responsibilities of the Curriculum and Instruction Committee

The duties and responsibilities of this committee shall be as follows:

6.3.1 Oversight of the medical education program as a whole.
6.3.2 To work in a shared governance relationship with the Dean to optimize curriculum content, design, implementation and evaluation.
6.3.3 To evaluate and make recommendations to ensure that:
   a. The overall pre-doctoral educational program fulfills the mission of the School.
   b. The School has defined its educational objectives/student competencies and the methods for assuring that those objectives/competencies have been achieved for both the educational program as a whole and the component programs/courses/clerkships/electives comprising the overall program.
   c. Curriculum content in programs/courses/clerkships/electives and the curriculum
as a whole are sufficient to meet the educational objectives/student competencies of the program as a whole.
d. All those who teach or supervise students are familiar with the educational objectives of their respective course/clerkship/elective and are prepared for their educational roles.
e. Students have mastered on direct observation the core skills list that is specified in the School’s objectives and competencies.
f. The core education skills expected of learners in the educational program are mastered.
g. All programs, courses, clerkships and electives provide formative and summative feedback to students in a timely manner.
h. Remediation policies and procedures for the educational program as a whole and its components are administered in a manner consistent with the remediation policies of the School.
i. Comparable educational experiences are maintained on geographically separated campuses.
j. Equivalent methods of evaluation and standards for evaluation are maintained on geographically separated campuses.
k. The methods used to evaluate the effectiveness of the educational program as a whole and the component programs, courses, clerkships, electives, are monitored and that evaluation and improvement cycles occur.
l. Student workload is monitored and conflicting curricular demands are managed within the academic calendar.

6.3.4 To evaluate:
a. Competencies, objectives, content, and pedagogy of each component of the curriculum, as well as the curriculum as a whole, making recommendations for revisions as needed.
b. The effectiveness of the educational program by ensuring that the educational objectives of the School are met, that student competencies are achieved, that omissions are identified and corrected, and that undesirable redundancies are eliminated, making recommendations where needed.
c. The performance of students and graduates in the framework of national norms of accomplishment.

6.3.5 To review and make recommendations on the quantified criteria for patient encounters needed to achieve the School’s overall objectives and competencies.

6.3.6 To monitor the content provided in each discipline in the context of achieving the educational objectives of the curriculum and student competencies and to make recommendations for revisions where needed.

6.3.7 To monitor and make recommendations to adjust, where needed, student work load in order to balance educational opportunity and learner fatigue.

6.3.8 To make recommendations on student performance criteria and standards to the Dean.

6.3.9 To provide informational updates on curriculum and instruction to the Executive Council through the CIC Committee chair.
Article 7. STUDENT APPRAISAL AND PROMOTIONS COMMITTEE

7.1 Membership

7.1.1 The Student Appraisal and Promotions Committee (SAPC) shall be composed of 7 voting Faculty members with a quorum of 4 members, all of whom should have a doctoral degree. It is intended that there be more physicians than there are non-physicians as members:

a. Four faculty members from clinical departments; at least three must be physicians:
   - with at least one physician from the Macon campus,
   - with at least one physician from the Savannah campus,
   - and least one physician from the Columbus campus.
   - The non-physician clinical faculty person may be selected from any of the three campuses.

b. Two faculty members from Biomedical Sciences with one member from the Macon campus and one member from the Savannah campus.

c. One M.D. Faculty member from Community-based Faculty.

7.1.2 The senior associate or assistant or associate dean(s) or liaison(s) whose responsibilities most involve academic affairs as determined by the Dean shall be an ex officio member without vote.

7.1.3 The assistant or associate dean(s) whose responsibilities most involve student affairs as determined by the Dean shall be an ex officio member without vote.

7.1.4 Meetings are held in executive session unless announced otherwise. Only Committee members and persons invited by the Chair may attend.

7.2 Duties and Responsibilities of the Student Appraisal and Promotions Committee

The duties and responsibilities of this committee shall be as follows:

7.2.1 To monitor student progress toward achieving the academic performance standards, achieving the competencies of the educational program, and mastering core education skills.

7.2.2 To evaluate and make recommendations to the Dean on the advancement, retention, or dismissal of students, based on student academic performance standards approved by the Faculty. The Dean will convey back to the SAPC committee his/her decision regarding an appeal.

7.2.3 To make recommendations to the Dean for graduation for those students who have satisfied the objectives/competencies of the educational program for the M.D.

7.2.4 To provide feedback based upon student performance to the Committee on Admissions and/or the Curriculum and Instruction Committee.

Article 8. FACULTY PROMOTIONS AND TENURE COMMITTEE

8.1 Membership

8.1.1 The Faculty Promotions and Tenure Committee shall consist of the following members all of whom shall be tenured or on a non-tenure track (11 voting members with a quorum
of 6 members):

a. Four members from clinical departments, with at least one member from the Macon campus and at least one member from the Savannah campus.
b. Three members from Biomedical Sciences, with at least one member from the Macon campus and at least one member from the Savannah campus.
c. One member from Community Medicine.
d. One member from the Medical Library.
e. Two members from the Faculty-at-large at the rank of Professor.

8.1.2 The assistant/associate dean for Faculty affairs shall be an *ex officio* member without vote.

8.1.3 The Committee may be assisted by subcommittees for advice and guidance in specialty areas of medical practice or basic science. Such subcommittees shall be appointed by the Committee as needed and shall consist of one regular member of the Committee and two other members of the Faculty who reflect the special needs of the subcommittee.

8.1.4 Meetings are held in executive session unless announced otherwise. Only Committee members and persons specifically invited by the Chair may attend.

**8.2 Duties and Responsibilities of the Faculty Promotions and Tenure Committee**

The duties and responsibilities of this committee shall be as follows:

8.2.1 To provide assistance to Faculty members seeking clarification of policies and procedures for promotion and tenure.

8.2.2 To review applications submitted by Faculty members for promotion and tenure.

8.2.3 To make recommendations to the Dean on Faculty promotions and granting of tenure.
   a. Recommendations will reflect decisions from Committee members who are Professors or who are at a higher rank than that of the candidate.
   b. Committee deliberations shall be confidential and reported only to the Dean.

8.2.4 To review and make recommendations to the Executive Council to ensure that the standards and guidelines are up to date.

8.2.5 To receive additional application material from a candidate after the submission deadline and prior to committee review if the new material reflects a change in status of items in the application.

8.2.6 To consider the candidate’s application package in making recommendations on the candidate’s promotion and/or tenure.

1 See the Mercer University School of Medicine Faculty Handbook & Policies and Procedures 2016, Section 5, “Procedures and Guidelines for Faculty Appointments, Promotion and Tenure”.

**Article 9. RESEARCH COMMITTEE**

9.1 The Research Committee shall serve as a liaison between persons engaged in research and the administration of the School, including appropriate liaisons for animal care and use, radiation safety, bio-safety, hazardous materials, and human subjects.
9.2 **Membership**

9.2.1 The Research Committee shall consist of the following members (9 voting members with a quorum of 5 members) who are actively engaged in research or are facilitating research:

a. Four Faculty members from clinical departments, with at least one member from the Macon Campus, at least one member from the Savannah campus, and at least one member from the Columbus campus.

b. Three Faculty members from Biomedical Sciences, with at least one member from the Macon campus and at least one member from the Savannah campus.

c. One Faculty member from Community Medicine.

d. One Faculty member from the Medical Library.

e. Two non-voting, student members, one from the Macon Campus and one from the Savannah campus.

f. The assistant or associate deans(s) whose responsibilities most involve research shall be *ex officio* members and shall serve without vote.

g. The chair and vice chair of biomedical sciences shall be *ex-officio* members without vote.

9.3 **Duties and Responsibilities of the Research Committee**

The duties and responsibilities of this committee shall be as follows:

9.3.1 To advise the Dean, through the Executive Council, on the implementation of administrative programs and policies instituted for the support of research.

9.3.2 To receive and disseminate information from the Dean’s Office on issues that impact research.

9.3.3 To serve as a forum for the discussion of improvement and expansion of research activity.

9.3.4 To communicate needs or problems related to research and the research environment to the Dean’s Office.

9.3.5 To make recommendations for the coordination of programs to enhance research and the research environment.

9.3.6 To make recommendations for the coordination of activities with other committees involved with research.

9.3.7 To promote the dissemination of information regarding research at the School.

9.3.8 To promote collaborative research.

**Article 10. LIBRARY AND LEARNING RESOURCES COMMITTEE**

**10.1 Membership**

10.1.1 The Library and Learning Resources Committee shall consist of the following members (11 voting members with a quorum of 6 members):

a. Four Faculty members from clinical departments, with at least one member from the Macon campus, at least one member from the Savannah campus, and at least one
member from the Columbus campus.
b. Three members from Biomedical Sciences Faculty, with at least one member from
the Macon campus and at least one member from the Savannah campus.
c. One member from Community Medicine Faculty.
d. One member from the Medical Library Faculty.
e. One member from community-based Faculty.
f. Three medical student members elected by the student body. One student shall be
elected from each of the three campuses. These student members shall
collectively share one vote.

10.1.2 The Director and Associate Director of the Library shall be *ex officio* members without
vote.
10.1.3 The Library Directors from the affiliated hospitals shall serve in an advisory capacity
without vote.
10.1.4 The assistant or associate dean whose responsibilities most involve academic affairs as
determined by the Dean shall be an *ex officio* member without vote.

10.2 *Duties and Responsibilities of the Library and Learning Resources Committee*

The duties and responsibilities of this committee shall be as follows:

10.2.1 To make recommendations on the development of the collection for the Medical Library
and Peyton T. Anderson Learning Resources Center in Macon and the Health Sciences
Library in Savannah.
10.2.2 To make recommendations on user policies for the Medical Library and Peyton T.
Anderson Learning Resources Center in Macon and the Health Sciences Library in
Savannah.
10.2.3 To assist the Directors of the Medical Library and Peyton T. Anderson Learning
Resources Center in developing procedures and priorities for acquisitions in Macon and
the Health Sciences Library in Savannah.
10.2.4 To serve as liaison between all campuses of the School and all units of the Medical library
and its affiliated Learning Resources Centers.

**Article 11. APPEALS AND GRIEVANCES COMMITTEE**

11.1 In the consideration of any appeal or grievance filed by a member of the Faculty
of the School, the concept of "due process of law" shall at all times guide the
members of the Appeals and Grievances Committee in all their deliberations. All
deliberations shall be conducted so as to assure a fair hearing to both parties.

11.2 *Membership*

11.2.1 The Appeals and Grievances Committee shall consist of two elected senior faculty
members on the Macon campus, two elected senior faculty members on the Savannah
campus, and two elected senior faculty members on the Columbus campus.

a. Two elected committee members and a third Senior Faculty member selected by both
parties in the appeal or grievance will review petitions from faculty members on each respective campus only.

b. Two Senior Faculty members, to include one full professor and a second full professor or a senior faculty person, shall be elected from and by the Faculty-at-large, Macon campus, and shall be available to serve in appeals or grievances filed in Macon.

c. Two Senior Faculty members, to include one full professor and a second full professor or a senior faculty person, shall be elected from and by the Faculty-at-large, Savannah campus, and shall be available to serve in appeals or grievances filed in Savannah.

d. Two members shall be elected from and by the Faculty-at-large, Columbus campus, and shall be available to serve in appeals or grievances filed in Columbus.

11.2.2 Members of the Promotions and Tenure Committee and administrative Deans shall not be eligible for membership.

11.3 Duties and Responsibilities of the Appeals and Grievances Committee

The duties and responsibilities of this committee shall be as follows:

11.3.1 To consider faculty grievances related to academic or personnel matters.

11.3.2 To consider appeals of decisions made in the School related to reappointments, promotions and tenure. The aggrieved faculty member must initiate such appeals within thirty working days from the date of notification of a contested decision.

11.4 Conduct of Hearings

11.4.1 Hearings shall be held in closed session unless both parties agree to an open session.

11.4.2 Faculty members may be represented at any hearing of an appeal or grievance.

11.5 Routing of Appeals and Grievances

11.5.1 Failing an informal resolution between aggrieved parties, the petitioner shall file a formal appeal (or grievance) in writing to the Chairperson of the Appeals and Grievances Committee with a copy to her/his department or unit chairperson and a copy to the Dean. The Committee shall forward its recommendation(s) to all parties concerned with the petition as well as to administrative officers at appropriate levels of both the School and the University.

11.5.2 Whenever one of the aggrieved parties is the Dean of the School, the Committee shall forward its recommendation(s) to all parties concerned and to the President of Mercer University.

Article 12. RULES AND BYLAWS COMMITTEE

12.1 Membership

12.1.1 The Rules and Bylaws Committee shall consist of the following members (8 voting
members with a quorum of 5 members):

a. Three Faculty members from clinical departments, with one member from the Macon campus, one member from the Savannah campus, and one member from the Columbus campus.
b. Three Faculty members from Biomedical Sciences, with at least one member from the Macon campus and at least one member from the Savannah campus.
c. One member from Community Medicine.
d. One member from the Medical Library.
e. The Dean or Dean’s designee without vote.

12.2 Duties and Responsibilities of the Rules and Bylaws Committee

The duties and responsibilities of this committee shall be:

12.2.1 To review the Bylaws annually.
12.2.2 To ensure that the policies and procedures set forth in the Bylaws are consistent with those of the University Faculty Handbook, the University Student Handbook, the School’s Student Handbooks and any other procedural documents.
12.2.3 To resolve differences in interpretation of the Bylaws.
12.2.4 To interpret the rules, regulations, and procedures of the School.
12.2.5 To investigate violations of rules, regulations, and procedures of the School.
12.2.6 The Committee shall report findings and make recommendations to the Executive Council.

12.3 Rules and Bylaws Committee Meetings

12.3.1 Meetings of the Rules and Bylaws Committee are scheduled no less than twice per year. At least one meeting annually shall be to review the Bylaws.
12.3.2 Faculty members may petition the Committee to consider special requests of interpretation in writing.

Article 13. FACULTY MEETINGS

13.1 The Dean shall chair all Faculty meetings of the School.
13.2 The Faculty must meet once during the Spring of each academic year to approve Standing Committee reports, to certify the graduating class, and to elect members of Standing Committees. Additional meetings of the Faculty may be called by the Dean, the Executive Council, or by petition of no fewer than ten Faculty members. At any special meeting only such business may be transacted as has been specified in the notification of the meeting.
13.3 Robert's Rules of Order (most current revision) shall govern the conduct of all meetings of the Faculty.
13.4 At all Faculty meetings, a quorum shall consist of no fewer than fifty Faculty members.
13.5 All members of the Faculty as defined in Article 1 shall be entitled to participate in meetings of the Faculty by voice and by vote.
13.6 At meetings of the Faculty of the School, any motion referred from the Executive
Council to the Faculty and related to School policy shall require a two-thirds majority of the total vote cast.

13.7 Vote counting shall be based upon the number of Faculty attending a meeting.
13.8 Persons with Visiting and Adjunct appointments may attend Faculty meetings but shall not vote.
13.9 At regular and special meetings, a majority of Faculty present may determine that any item on the agenda shall be considered in executive session. Only voting members shall be present in executive session.

**Article 14. SECRETARY OF THE FACULTY**

14.1 A Secretary of the Faculty shall be elected from the Faculty-at-large through the same process used to elect members of Standing Committees.
14.2 The Secretary shall serve a three-year term and may serve successive terms. The Secretary of the Faculty shall serve until July 1 of the year in which a successor is elected.
14.3 The Secretary of the Faculty shall serve on the Executive Council with vote.

**14.4 Duties and Responsibilities of the Secretary of the Faculty**

The duties and responsibilities of the Secretary of the Faculty shall be as follows:

14.4.1 To prepare, in consultation with the Dean and Vice-Chair of the Executive Council, the agendas for all regular Executive Council meetings.
14.4.2 To prepare, in consultation with the Dean, the agendas for all Faculty meetings.
14.4.3 To distribute notices and agendas of all Executive Council and Faculty meetings.
14.4.4 To request faculty input for agendas of Executive Council and Faculty at least 5 days prior to a meeting of either body.
14.4.5 To submit approved, non-confidential minutes of Executive Council and Faculty meetings to the School’s webmaster and the School’s Archives.
14.4.6 To inform newly elected Committee Chairs of their administrative responsibilities.

**Article 15. REVISION OF THE BYLAWS**

15.1 A Standing Committee or no fewer than five Faculty members should submit any proposed amendment or revision of these Bylaws to the Rules and Bylaws Committee.
15.2 Any proposed amendment or revision of these Bylaws shall have two readings. Receipt by the Faculty of the School of any proposed amendment or revision of the Bylaws shall constitute a first reading. A second reading shall take place at a Faculty meeting called within four weeks of the first reading; that meeting may be the Annual Meeting of the Faculty. A vote shall be taken at the second reading, and adoption of the amended or revised articles shall require a two-thirds majority of the vote cast.
15.3 At a second reading, any proposed amendment or revision of an amendment or revision on the floor for consideration shall, if approved by the Faculty, be subject to an additional reading.
Article 16. RECRUITMENT OF THE DEAN

16.1 Whenever a vacancy occurs in the post of Dean, the President or Provost shall appoint a search committee that shall include no fewer than five members of the Faculty of the School to which the President or Provost may add members-at-large.

16.2 The President or Provost shall appoint the Chair(s) of the search committee charged to recruit a Dean.

16.3 The search committee shall submit a list of qualified candidates for the position of Dean to the President or Provost.

Article 17. RECRUITMENT OF A DEPARTMENT CHAIR OR UNIT ADMINISTRATOR

17.1 Whenever a vacancy occurs in the post of Chair of a department or unit, the Dean shall appoint a search committee made up of no fewer than three members of the department (unit) in question. The Dean may add members-at-large to the committee.

17.2 The Dean shall appoint the Chair of the search committee.

17.3 The search committee shall ensure that all members of the department or unit in question have the opportunity of meeting with all invited candidates.

17.4 The search committee shall submit a list of qualified candidates to the Dean with recommendations on the rank order of the candidates.
By-Laws Revisions Timeline

* Originally from the archives of the Secretary of the Faculty, Nov. 7, 1997; affirmed as document in force by the Executive Committee (EC), Feb. 19, 2002

recommend for revision by EC Mar 8, 2004 revisions approved by Faculty May 3, 2005
recommend for revision by EC Mar 5, 2008 revisions approved by Faculty Apr 22, 2008
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recommend for revision by EC Aug 13, 2013 revisions approved by Special Called Faculty mtg Sep 9, 2013
recommend for revision by EC Apr 14, 2015 revisions approved by Faculty Apr 21, 2015
recommend for revision by EC Feb 9, 2016 revisions approved by Faculty Apr 26, 2016
recommend for revision by EC Mar 28, 2017 revisions approved by Faculty Apr 25, 2017
recommend for revision by Faculty email Jun 13, 2017 revisions approved by Faculty electronic vote Jul 11, 2017
recommend for revision by EC Mar 27, 2018 revisions approved by Faculty April 24, 2018
Section 3 Academic Policies and Procedures

(Updated: 8/2017)

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3.1 Learning Environment

Mercer University School of Medicine, consistent with the Liaison Committee on Medical Education (LCME) Accreditation Standards and Mercer University policies and procedures, fosters and maintains an educational and clinical community that fosters learning, nurtures learners and is a learning environment in which students, faculty and staff can work together in an atmosphere free of all forms of harassment, exploitation, or intimidation. (For the purpose of this statement, relationships in the educational and clinical community include unequal power [teacher-learner or learner-teacher] as well as equal power [teacher-teacher or learner-learner] relationships).

Mercer University School of Medicine endorses the following core values and guiding principles for all interactions and relationships among faculty, students, staff, and visitors:

3.2 MUSM Core Values

COLLABORATION – Working together and respecting each other’s contributions

COMPASSION – Showing empathy and concern for the well-being of others

COMPETENCE – Demonstrating mastery of the skills of one’s profession or vocation

EXCELLENCE – Performing at the highest level and exceeding the expectations of those we serve

INTEGRITY – Unwavering adherence to a professional and ethical code of conduct

RESPECT AND HONESTY – Conducting ourselves in a manner that demonstrates the value of each individual

SERVICE – Offering our talents and skills toward betterment of our communities

3.3 Compact Between Teachers and Learners of Medicine, (AAMC) Association of American Medical Colleges

Preparation for a career in medicine demands the acquisition of a large fund of knowledge and a host of special skills. It also demands strengthening of those virtues that under gird the patient/physician relationship and that sustain the profession of medicine as a moral enterprise. This Compact serves as both a pledge and as a reminder to teachers and learners that their conduct in fulfilling their mutual obligations is the medium through which the profession inculcates its ethical values.

3.3.1 Guiding Principles

DUTY Medical educators have a duty, not only to convey the knowledge and skills required for delivering the profession’s contemporary standard of care, but also to inculcate the values and attitudes required for preserving the medical profession’s social contract across generations.
INTEGRITY The learning environments conducive to conveying professional values must be suffused with integrity. Students learn enduring lessons of professionalism and caring by observing and emulating role models who epitomize authentic professional values and attitudes.

RESPECT Fundamental to the ethic of medicine is respect for every individual. Mutual respect between learners, as novice members of the medical profession, and teachers, as experienced and esteemed professionals, is essential for nurturing that ethic. Given the inherently hierarchical nature of the teacher/learner relationship, teachers have a special obligation to ensure that students and residents are treated respectfully.

As part of the Institutional Standards of Behavior, the medical school community also accepts the guiding principles and commitments espoused in these statements adapted from the AAMC Compact.

3.3.2 Commitments of the Faculty

- We pledge our utmost effort to ensure that all components of the educational program for students and residents are of high quality.
- As mentors for our student and resident colleagues, we maintain high professional standards in all of our interactions with patients, colleagues and staff.
- We respect all students and residents as individuals, without regard to gender, race, national origin, or religion, age or disability; we will not tolerate anyone who manifests disrespect or who expresses biased attitudes towards any student or resident.
- We pledge that students and residents will have sufficient time to fulfill personal and family obligations, to enjoy recreational activities, and to obtain adequate rest; we monitor and, when necessary, reduce the time required to fill educational objectives, including time required for “call” on clinical rotations, to ensure students’ and residents’ well-being.
- In nurturing both the intellectual and the personal development of students and residents, we celebrate expressions of professional attitudes and behaviors, as well as achievement of academic excellence.
- We do not tolerate any abuse or exploitation of students or residents.
- We encourage any student or resident who experiences mistreatment or who witnesses unprofessional behavior to report the facts immediately to appropriate faculty or staff; we do not tolerate reprisals or retaliations of any kind.

3.3.3 Commitments of Students and Residents

- We pledge our utmost effort to acquire the knowledge, skills, attitudes and behaviors required to fulfill all educational objectives established by the faculty.
- We cherish the professional virtues of honesty, compassion, integrity, fidelity, and dependability.
- We pledge to respect all faculty members and all students and residents as individuals, without regard to gender, race, national origin, religion, age or disability.
- As physicians in training, we embrace the highest standards of the medical profession and pledge to conduct ourselves accordingly in all of our interactions with patients, colleagues, and staff.
In fulfilling our own obligations as professionals, we pledge to assist our fellow students and residents in meeting their professional obligations, as well.

### 3.3.4 MUSM Statement on 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
- 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 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.

### 3.4 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 are paramount in this endeavor.
3.4.1 Academic and Professional Rights and Responsibilities:

A. Academic Requirements: The School of Medicine will publish the requirements for the medical degree, 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. The medical student, by virtue of his/her voluntary association with Mercer University, acquires certain rights and responsibilities as a member of the total University. These rights and responsibilities are delineated in approved University policies, rules and regulations.

3.4.2 Establishment of Requirements, Standards, and Evaluation:

A. The Curriculum and Instruction Committee (CIC) of the faculty is vested with the responsibility of establishing academic and professional requirements, standards of curriculum and programs, and evaluation criteria 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 Curriculum and Instruction Committee. 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 standing in the medical program shall be the responsibility of the Student Appraisal and Promotions Committee, composed of Medical School faculty.

3.4.3 Grading and Evaluation of Academic and Professional Performance:

A. The medical 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 unit, the student will have the right to know unit 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. The assessment of a medical student's overall standing in the medical program by the Student Appraisal and Promotions Committee (SAPC), and the current membership of the Committee, shall be available to medical students along with a description of the functions and methods of the Committee. Results of evaluations carried out by the Student Appraisal and Promotions Committee shall be made known to each involved student in written form.

E. Medical School faculty shall use written student course evaluation and instructional rating reports to assess the quality of their instruction

3.5 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
    - Not taken in conjunction with any other person
    - 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
  o Disclose your personal password to another individual.
  o Sign onto a computer terminal and let anyone else access data from that terminal.
  o Leave screens (or reports) containing confidential student information in view of others who do not have a legitimate educational interest in the data.
  o 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).
  o 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.
  o 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.
  o 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.

*Updated August 2017*
3.6 Policy on Access to Student Educational Records

Accepted educational practice dictates that medical student educational records must be confidential and made available only to those members of the faculty and administration with a need to know (Liaison Committee for Medical Education, Functions and Structure of a Medical School, Standard 11.5, March 2016). Therefore, at MUSM the academic records of MUSM students are confidential and generally not accessible to faculty and administrative personnel without the students’ consent. Student records are considered private documents and the information contained therein is released only to authorized persons.

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 defined those with a need to know as:

- The Dean, Campus Deans, Academic Affairs Deans and Student Affairs Deans have a right to view all of an official education record of a student in the course of their duties.
- Student advisors have the right to view all of an advisees’ official educational record to monitor student 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
- Faculty given responsibility to monitor student progress toward achieving the academic performance standards of an individual discipline shall have the right to view the individual discipline record of a student to monitor and oversee remediation activities
- 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.
- Faculty assigned to facilitate a small group in a module will be given information on total class performance following completion of the module for the purpose of tutorial and programmatic evaluation. Individual tutor group data is not provided.
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.

3.7 Student Handbooks
Copies of student handbooks for the MD Program and for the graduate programs may be accessed at https://medicine.mercer.edu/student-services/handbook/

3.8 Calendar and Class Schedule

The Medical School calendar and class schedules are approved annually by the Curriculum and Instruction Committee and provided to the faculty, students, and staff by the Office of Academic Affairs. The calendar for the graduate programs are published by the University and the individual class schedules determined by the Programs.

3.9 Class Attendance

Attendance is mandatory in all required courses. Preclinical medical students should seek excuses for absences from the Office of Academic Affairs. Clerkship director or course director will excuse absences for clinical years’ medical students. In the graduate programs, the faculty in charge of individual courses may excuse students from those courses for appropriate reasons. Consult the individual class syllabus for absence policies.

3.10 Examination and Grading

The faculty of each curricular component (module, block, course, clerkship, etc.) shall determine the means and timing of evaluation for that curricular component subject to review and
approval by the Curriculum and Instruction Committee. The faculty in charge of each curricular component shall distribute this information to students at the start of each component. The faculty in charge of each curricular component shall inform students in a timely manner of the results of evaluations. At the completion of each curricular component, the faculty in charge shall convey the final grades to both the Academic Affairs Dean(s) and the academic records department. Final curricular component grading is pass/fail for the MD Program.

3.11 Providers of Sensitive Health Services
Whenever possible, faculty members should avoid providing medical care or personal or psychological counseling to medical 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.

3.11.1 Providers of Sensitive Health Services Policy
(Approved by Executive Council – March 18, 2014)

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.

3.12 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 a familial relationship, a present or former doctor/patient relationship, a prior social relationship, etc. To address these concerns MUSM recognizes the following student rights and faculty responsibilities.

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.
- 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 to complete a conflict of interest form stating only that a conflict exists and requesting a change of student.
- The Office of Academic Affairs will facilitate the necessary change.
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 Phase __________________________________________

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


Section 3 Academic Policies
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 Phase ________________________________________

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
3.13 Course/Instructional Evaluation

Evaluation and feedback is solicited from faculty and students at the end of each course or phase. This information is provided (in anonymous format) to the Block Committees or course directors and to the CIC for appropriate response.

3.14 Instructional Support Services

The Skelton Medical Libraries serve Mercer University School of Medicine faculty, students and staff. The libraries have two physical libraries, one in Macon on the campus of Mercer University and one in Savannah on the campus of Memorial University Medical Center. Faculty, staff and students on the Columbus Campus may contact either the Macon or Savannah Libraries by phone or email to arrange library instruction, reference services, or assistance with research projects or literature searches.

The Skelton Medical Libraries are members of NN/LM (National Network of Libraries of Medicine) and have consortia memberships for resource sharing with GETSM (Research Libraries of Georgia), CONBLS (Consortium of Biomedical Libraries in the South) and Lyrasis. The Skelton Medical Libraries also share resources with other Mercer University libraries - University Libraries (Macon, Atlanta and the Centers) and the Law Library (Macon).

The Skelton Medical Libraries provide resources and services in support of the School of Medicine including:

- providing information to advance research, scholarship, and education;
- educating faculty, staff, and students 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 providing and promoting resources and services that meet those needs.

Electronic library resources and services are available to MUSM faculty, staff and students 24/7 via the libraries’ webpage: http://med.mercer.edu/library. Library resources are also available via Canvas, the Mercer University online course delivery and management system. Electronic journals may be accessed via the libraries online full text finder of over 17,000 medical and healthcare related journals, and online journal databases such as Search Everything, ScienceDirect, Wiley Online Library, SpringerLink, Web of Science, PubMed, ClinicalKey, and PsychiatryOnline. Over 4,000 medical and healthcare related electronic books may be accessed via the libraries online full text finder and online databases such as ClinicalKey, AccessMedicine, McGraw-Hill Medicine, and the LWW Health Library. The libraries provide access to over 30 health related databases including:

- Point-of-Care: Cochrane Library, Dynamed Plus, TRIP, Medscape, and National Guideline Clearinghouse
- Differential Diagnosis: VisualDX and Diagnosaurus
- Images/Video: ClinicalKey, MedlinePlus Videos, NEJM Multimedia, and WebPath
- Drug Information: Micromedex, ClinicalKey, AccessMedicine and NLM Drug Portal
- Patient Education: MedlinePlus, ClinicalKey and AccessMedicine
The libraries’ combined print collection includes approximately 360 unique journal titles and 113,500 print volumes. Anatomical models are also available in support of the curriculum. Checkout privileges are extended to Mercer University School of Medicine students, staff and faculty. Members of the community are welcome to use resources in-house. Circulation policies are posted on the libraries’ webpage. 
http://med.mercer.edu/library.

Materials not owned by the Medical Libraries may be borrowed from other libraries via InterLibrary Loan. Forms for making InterLibrary Loan requests are on the libraries webpage. 
https://med.mercer.edu/Library/ill.htm

Users are encouraged and requested to make recommendations for resources. A “Make a Suggestion” form is available on the libraries’ webpage. 
https://med.mercer.edu/library/makeasuggestion.htm

The libraries utilize social media such as Facebook and mobile applications. Links to these may be found on the libraries web page. 
https://med.mercer.edu/library/facebook.htm

A combined staff of seven professional librarians and 12 library assistants are available to assist faculty, students, staff and affiliated healthcare providers with their information needs. Library hours are posted on the libraries’ web page. Contact the libraries in person, by phone or email for library instruction, reference services, or assistance with research projects or literature searches. https://med.mercer.edu/Library/contactus.htm

The library faculty provides scheduled instruction to students, faculty and staff, participating in resource lectures and conducting small group sessions in the areas of evidence-based medicine and the use of library online and mobile resources. Library classes are also available on demand for students, faculty and staff with no minimum class size. 
https://med.mercer.edu/Library/libraryinstruction.htm

Librarians serve on standing faculty committees including Research, Curriculum & Instruction, Library & Learning Resources, Rules & Bylaws, Promotion & Tenure, and the Executive Council. Library liaisons work with designated departments on both campuses to facilitate use of the libraries, and increase faculty and student awareness of services and collections. A list of liaisons and their areas of service and contact information may be found on the libraries’ webpage. 
https://med.mercer.edu/Library/libraryliaisons.htm

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

The MD Program 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, seeking care, reporting to an approved healthcare provider, follow-up action, and campus specific healthcare providers. Copies of required reports and forms are also included.
3.16 Graduate Faculty Membership Policy

Mercer University School of Medicine
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. These MUSM guidelines are consistent with the university’s appointment process for full or associate Graduate Faculty as outlined in section 2.03 of the Mercer University Faculty Handbook (see Attachment A). https://provost.mercer.edu/www/mu-provost/handbooks/upload/2014-University-wide-Faculty-Handbook.pdf

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.

Criteria for teaching graduate courses or serving as principal thesis advisor:

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 will be 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.

Annually, the Dean will seek recommendations from the graduate program steering committees through their department chairs for new appointments or re-appointments of Graduate Faculty members. The updated list will be forwarded to the Provost for approval.

*Approved by Executive Council January 14, 2014*
In order to serve the interests of a growing number of graduate programs and to better position the Colleges and Schools to serve the needs of graduate students, qualified faculty may receive graduate faculty status.

The title of ‘Graduate Faculty’ may be designated for those members of the full-time, academic faculty who are appointed by their College/School to lead the research efforts of graduate students in their respective fields or who serve as examination or certification leads. The chair of any thesis or dissertation committee, or chair of any examination body at the graduate level must be a member of the Graduate Faculty. A College/School may appoint a person not formally affiliated with Mercer as a ‘Term Graduate Faculty’ for a limited period of time in order for an adjunct, professional colleague, visiting faculty, or distinguished academic to serve as the leader of a student research project.

Each College/School shall determine its own criteria and process for the appointment of faculty as Graduate Faculty. The appointments shall be for 5 years and appointments can be renewed indefinitely based on review of the faculty member’s service during a prior appointment. Appointments to the Term Graduate Faculty are made as needed but shall not exceed three years in duration before a renewal review.

Each College/School shall, at the time a graduate committee is formed for the purpose of examination, certification, or direction of graduate-level research, prepare a Memorandum for Record to record the members of the committee and to certify that the members meet the requirements of the applicable College/School. The Memorandum for Record shall be archived in the applicable College/School Dean’s Office and a copy provided to the Senior Vice Provost for Research.
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4.1 **Advising Responsibilities of the Faculty**

It is the Medical School’s desire that each student has every opportunity to succeed. There are several components to the Academic Success Initiative: Preclinical Advising Program, Clinical Advising Program, and the Academic Success Counselors (ASCs).

4.2 **Preclinical Advising Program**

The goals of MUSM’s preclinical advising program are to:

- support growth and development of all students,
- identify and remediate problems early,
- help students to develop the necessary skills for recognizing their limitations, seeking consultation, and continually assessing their competencies,
- prevent students from falling into academic difficulty through frequent assessment and intervention, and
- foster collegial relationships that support each student’s learning and successful progression through the first two years of the curriculum.

The preclinical academic advisors and ASCs coordinate MUSM’s Academic Success Initiative in a manner that supports the achievement of these goals.

4.2.1 **Role of Preclinical Academic Advisors**

The role of the preclinical academic advisor is to assist the student in maintaining good academic health, and to identify areas that may prove to be problematic before they become so. As such, the advisor helps students maximize academic outcomes, referring students for academic counseling as necessary. The advisor and the student meet according to the schedule suggested in Section xxx or as often as desired.

4.2.2 **Role of Academic Success Counselors**

Academic Success Counselors enhance the academic advising provided by preclinical faculty advisors. These counselors are located on both preclinical campuses, and serve students during all four years of their medical school training. Early and frequent intervention provides prompt and effective strategies to help ensure academic success. All students, regardless of academic performance, are encouraged to meet with ASCs to discuss their learning strategies, style and needs.

4.3 **Academic Success Initiative: Overview**

Students meet with their preclinical faculty advisors regularly to review their academic performance in the modules and blocks (see general schedule for required and optional meetings, beginning on page 2). MUSM’s compensatory assessment system frequently identifies markers of success or academic difficulty. In this system, The Office of Academic Records communicates test results to students and Preclinical Academic Advisors.

- In addition to the preclinical faculty advisors, beginning with the first end-of-module exam (not summative quiz), and for any subsequent summative assessment (not formative quizzes), students who are identified as “Fail” or “Low Pass” are referred to Academic Success Counselors
(ASC) for **required consultation**. Academic Records will notify the preclinical advisor of this referral. The preclinical advisor is encouraged to contact the ASC to determine if there are specific issues in which they may provide assistance.

b. The ASC and student distinguish the singular instance of poor test performance from potentially chronic academic weaknesses or other issues that may affect success.

c. Students with potential psycho/social or learning disability issues receive referrals to the Dean of Student Affairs. Psychological counseling may also be suggested and is available if the student so chooses. The faculty advisor may make the referral if the provider is in-house. Psychological services outside of MUSM will require a referral from the Dean of Student Affairs.

d. After initial consultation, the student and ASC determine academic plans, plans for monitoring compliance, and schedules for follow-up.

e. At the end of a Block, students are notified of their final score totals. Students scoring less than or equal to 70% of the total points possible are required to consult with ASCs. The student and counselor determine academic plans and monitoring schedules.

f. At the beginning of a new academic year, repeater students are required to meet with the ASC to review previous year difficulties, to review repeat year rules, to determine an academic plan and particular strategies to help the student be successful, and to confirm plans for monitoring compliance and schedules for follow-up.

### 4.3.1 Academic Success Initiative: Primary Support

#### 4.3.1.1 Preclinical Faculty Advisors

The role of the preclinical faculty advisor is to assist the student in maintaining good academic health, and to identify areas that may prove to be problematic before they become so. As such, the advisor helps students maximize academic outcomes, referring students for academic counseling as necessary.

a. The Office of Academic Records assigns each incoming freshman medical student an academic advisor from the preclinical faculty who are involved in the Patient Based Learning (PBL) curriculum. Students may request reassignment to a different faculty advisor at any time through the Dean of Academic Affairs.

b. Having access to advisees’ academic records, the preclinical advisor monitors each advisee’s academic progress during the first two years of medical school.

c. The preclinical faculty advisor helps students proactively identify and address evolving academic problems before these problems develop into serious academic difficulties.

d. The preclinical faculty advisor coaches students with regard to group skills and group process, curricular matters, study strategies, academic performance and professionalism.

e. The preclinical faculty advisor informs and guides students with regard to academic issues, as well as other issues related to medical education as requested by the student.

f. Students and their advisors regularly discuss their academic performance according to the following general schedule for required and optional meetings. **Preclinical faculty advisors communicate with their advisees per this schedule, even if their advisees opt out of face-to-face meetings.**

- Required. Early in Block 1 (Initial meeting)
- Optional. Block 1 mid-point, after the Module 3 summative quiz
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- Required. Early in Block 2 (reflecting on Block 1)
- Optional. Early in Block 3 (start of Year 2, reflecting on Year 1)
- Optional. Early in Block 4 (reflecting on Block 3)
- Optional. After Block 4/ Before Clerkships (reflect on preclinical/ transition to clerkships)

Students may contact the advisor via email to arrange the first meeting.

g. Preceding each meeting, the Office of Academic Affairs will prompt faculty and students to schedule and prepare for meetings according to suggested advising agendas.

4.3.1.2 Initial Meeting: First Week of Medical School

Objectives
a. Get to know student
   - Personal information
   - Previous study habits
   - Hopes/Fears
   - Pertinent information that the student feels the advisor may find helpful.

b. Explore areas in student’s premedical curriculum that may be weak. Make appropriate recommendations.
   - Did the student take only the bare minimum of pre-medical science courses? If so, are there proactive that should be recommended so that the student can compensate for this?
   - Are there areas in the student’s undergraduate coursework in which the student stumbled? If so, are there ramifications for our curriculum that need to be considered? (E.g. student performed well in most premed required subjects, with the exception of biochemistry? Given such a scenario, how might the student be proactive to help prevent a similar performance in our curriculum?)

c. Encourage student to make a Block/ Module calendar detailing what is to be accomplished each week.

d. Encourage the student to maintain balance (physical, mental, and spiritual life). (Identify university and community resources if needed)

4.3.1.3 Meeting 2: Block 1 Midpoint, After Module 3 Summative Quiz

The Advisor will receive copies of advisees’ exam scores and tutor evaluations, and will review these data prior to the meeting.

a. Suggested coaching conversations/ prompts for reflection:
   - On a scale of 1-10, with 10 being the best you have ever done, how do you feel you are doing in the Block? If the student, for example, says He/she is a 5, ask what would have to happen to make it a 6, etc. (note comments)
   - Ask student if he/she is keeping up with the block/ module calendar established earlier in the block.
   - Reflect on successes and struggles with the PBL group process.
• Reflect on successes and struggles with time management.
• Reflect on successes and struggles with learning how to study effectively.
• Does the student feel confident about the material?
• Does the student stay on a reading schedule?
• Does the student read material more than once?
• Is the student comfortable with the idea of seeking out discipline faculty members when needing help? Is he/she doing so?
• Does the student show early signs of emotional fragility?
• Is the student socially isolated? Is this problematic?
• How much time is student spending with family? Too much or too little?
• Is the student involved in study groups? Does he/she want to be?
• One scale of 1-10 again ask student to share where he/she is in terms of balance. Make notes and follow up accordingly.
• What are some of the challenges you faced during your start of Medical School?
• Reflecting on your test performance, what concepts or skills do you need to improve upon?
• What have you learned about dealing with stress in medical school?

b. Discuss other concerns such as life-school balance and wellness, as desired by the advisee.

c. Develop action plan and refer to academic counselor if any of the above questions seem problematic.

d. Refer students with potential psycho/social or learning disability issues to the Dean of Student Affairs.

4.3.1.4 Meeting 3: Early in Block 2
Follow-up on action plan developed in previous meeting. Review academic performance from Block 1 (MCQ Exams, MPRA, and Tutor Evaluations).

a. What worked in Block 1?

b. Did anything go wrong in Block 1?

c. What would you do differently in Block 2?

d. Suggested coaching conversations/prompts for reflection:
  • Reflect on your successes and struggles with the PBL group process.
  • Reflect on your successes and struggles with time management.
  • Reflecting on your test performance, what concepts or skills do you need to improve upon?
  • What have you learned about learning from both positive and negative feedback?
  • With regard to professionalism, what ways can you continue to grow and develop?

e. What did you learn from anatomy lab that may be of most value in your medical career? Discuss other concerns such as life-school balance and wellness, as desired by the advisee.

f. Make appropriate adjustments to action plan.

g. Refer students with potential psycho/social or learning disability issues to the Dean of Student Affairs.
4.3.1.5 Meeting 4: Early in Block 3 (start of Year 2, reflecting on Year 1)
Follow-up on action plan. Review academic performance from Block 2 (MCQ Exams, MPRA, Tutor Evaluations)

a. What worked in Block 2?
b. Did anything go wrong in Block 2?
c. What would you do differently in Block 2?
d. Suggested coaching conversations/ prompts for reflection:
   • What have you learned about balancing the requirements of medical school with your personal life?
   • What did you learn from scholarly project or service learning experience that may be of most value?
   • What are your strengths in Clinical Skills? What can you improve upon?
   • What have you learned about yourself with regard to collaborating with other people?
e. Discuss other concerns such as life-school balance and wellness, as desired by the advisee.
f. Make appropriate adjustments to action plan.
g. Refer students with potential psycho/social or learning disability issues to the Dean of Student Affairs.

4.3.1.6 Meeting 5: Early in Block 4 (reflecting on Block 3)
Follow-up on action plan. Review academic performance from Block 3 (MCQ Exams, MPRA, and Tutor Evaluations)

a. What worked in Block 3?
b. Did anything go wrong in Block 3?
c. What would you do differently in Block 3?
d. Suggested coaching conversations/ prompts for reflection:
   • What concepts do feel most and least prepared for with regard to the Step 1 exam?
   • What did you learn from your Community Medicine visit that may be of value in your medical career?
   • Reflect upon your emerging professional identity. Are you on track to be the physician you want to be?
e. Discuss other concerns such as life-school balance and wellness, as desired by the advisee.
f. Make appropriate adjustments to action plan.
g. Refer students with potential psycho/social or learning disability issues to the Dean of Student Affairs.

4.3.1.7 Meeting 6: After Block 4/ Before Clerkships (reflecting on Year 1 & Year 2/looking to clerkships)
Review academic performance from Block 4 (MCQ Exams, MPRA, and Tutor Evaluations)

a. Discuss Step 1
b. Suggested coaching conversations/ prompts for reflection:
   - How do you cope with burnout?
   - As relates to your career goals, what do you hope to learn from your clerkship experiences?
   - What are your feelings about practicing medicine in rural Georgia, other medically underserved areas, or for medically underserved populations not living in rural Georgia?

c. Discuss other concerns such as life-school balance and wellness, as desired by the advisee.

d. Transition to Clerkships.

e. Refer students with potential psycho/social or learning disability issues to the Dean of Student Affairs.

4.4 Academic Success Initiative: Secondary Support

Academic Success Counselors (ASCs)
Academic Success Counselors enhance the academic advising provided by preclinical faculty advisors. These counselors are located on both preclinical campuses, and serve students during all four years of their medical school training. Early and frequent intervention provides prompt and effective strategies to help ensure academic success.

a. All students regardless of academic performance are encouraged to meet with ASCs to discuss their learning strategies, style and needs.

b. MUSM communicates exam scores to all students. For each exam, MUSM identifies performance as:
   - Fail. Student scores less than the pass score.
   - Low Pass. Student passes, but scores less than or equal to the pass score plus \( \frac{1}{2} \times \text{standard error of measurement (SEM)} \).
   - Marginal Pass: Student passes but scores less than or equal to the pass score plus \( 1 \leq \text{the pass score plus } 1 \times \text{SEM} \).
   *Performance indicators are NOT reported on academic records. They merely identify students who need help.*

c. Beginning with the first end-of-module exam (not summative quiz), and for any subsequent summative assessment (not formative quizzes), students identified as “Fail” or “Low Pass” are referred to academic success counselors for **required consultation**. Students identified as “Marginal Pass” are **strongly encouraged** to consult with an Academic Success Counselor.

d. The ASC and student distinguish the singular instance of poor test performance from potentially chronic academic weaknesses or other issues that may affect success.
   - The ASC will refer students with potential psycho/social or learning disability issues to the Dean of Student Affairs.
   - Academic Success Counselors will document referral notes including learning plans, plans for monitoring compliance, and schedules for follow-up.
   - Academic success Counselors will systematically communicate with students’ academic advisors.
e. After initial consultations, students and ASCs determine academic plans, plans for monitoring compliance, and schedules for follow-up.

f. At the end of a Block, students are notified of their final score totals. Students scoring less than or equal to 70% of the total points possible are required to consult with the campus ASCs. The student and the ASC will determine academic plans and monitoring schedules. Consultations, academic plans, and/or monitoring schedules must not interfere with other curricular obligations.

g. ASCs communicate with students’ faculty advisors, the Deans of Academic Affairs, and the Deans of Student Affairs.

h. Academic Success Counselors will provide faculty development that orients MUSM faculty to the theories of learning support that inform MUSM’s Learning Support System. Faculty development will also enumerate specific services rendered and protocols followed.

i. Repeat-year students are required to meet with the ASC at the beginning of the academic year and establish a monitoring schedule for the year.

j. Deans of Academic Affairs, Deans of Student Affairs, and Academic Success Counselors meet twice annually to review student cases.

4.5 Academic Success Initiative: Support for Students Repeating the Year

At point of notification, that MUSM will grant a failing student the option to repeat a year, the student is required to meet with the Academic Success Counselor (ASC) to draft an academic plan for supporting the student’s off-campus preparation for the repeat year.

Repeat-year students are required to meet with the ASC at the beginning of the academic year and to adhere to the plan for monitoring established by the student and the ASC.

Meeting 1: Block 1, Module 1, Week 1

- Review difficulties from the previous year
- Review student success/difficulties in off-campus repeat year preparation.
- Review repeat year rules as they apply to the student.
- Determine an academic plan and any particular strategies to help the student be successful.
- Confirm plans for monitoring compliance and schedules for follow-up.

4.6 Clinical Years Advising Program

The role of the Clinical Years Advisor is to prevent academic difficulty, to facilitate optimal progress through the clinical curriculum, and to support a smooth transition to residency.

- The role of the Clinical Years Advisor is to foster a collegial helping relationship with advisees that results in the facilitation of a student’s learning and successful progression through the third and
fourth years of the curriculum. Advisors will assist with career decision making, elective planning, and be available to assist in a supportive capacity for issues arising around clinical practice, such as unexpected patient deaths or complications, malpractice issues, and professionalism, including allegations of possible abuse or harassment. For the purposes of academic counseling, the Clinical Years Advisor will have access to advisee’s academic records, to include Step One and Step Two scores and clerkship evaluations, for the purposes of academic counseling. As the Clinical Advisor monitors advisees’ progress during the clinical years, the advisor can play a valuable role in helping students identify and address any evolving academic problems.

- Each rising third year medical student may choose a Clinical Years Advisor from those full time clinical faculty who provide clinical teaching or supervision during the third year clerkships. Advisors may accept up to 6 (six) advisees, and may choose to accept fewer than that number. Lists of advisors with contact information will be made available during orientation. The advisor will serve as a resource for information and guidance on issues that may arise during the third and fourth year clinical educational experience, as well as other issues related to medical education as requested by the student.

- **Students are required to meet with their Clinical Years Advisor regularly to discuss their performance.** Minimal requirements for meetings are outlined below. Either the advisor or advisee may schedule additional meetings. Students may seek additional advising at any time.

- Clinical Years Advisors will review sign off on any changes to the elective selection or senior schedule of advisees.

- If a student fails a clerkship, fails a shelf test, or has required remediation, s/he will be required to meet with their Clinical Years Advisor. Repeated failed shelf tests, repeated remediation requirements or a failed clerkship will trigger a case conference (see below).

- Students may initiate a request for assignment to a different Clinical Years Advisor at any time after Meeting 2 (after the end of the second rotation) upon request in writing through Academic Records. The student will have the responsibility for gaining the approval of the “new” Clinical Years Advisor. Academic Records will notify both “new” and “old” Clinical Years Advisors of the change.

- Nothing in this process is intended to interfere with any other informal ‘advising’ or mentoring provided by any other faculty member.

### 4.6.1 Required Meetings

#### 4.6.1.1 Meeting 1: Upon selection of an advisor

a. Get to know student, including areas of academic concerns and preliminary career plan/ goals.

b. Encourage student to make a calendar detailing what is to be accomplished each week.

c. Encourage the student to maintain balance (physical, mental, and spiritual life). Identify university and community resources if needed.
4.6.1.2 Meeting 2: After the end of the second rotation
The date of this meeting will vary as clerkship rotations and dates vary. This meeting should occur when two sets of clerkship evaluations are available i.e., three weeks after the end of the second rotation.

a. Clinical Years Advisor may request copies of clerkship evaluations/shelf test scores of advisees from Academic Records. In addition, the Clinical Years Advisor may review advisees’ academic files maintained in Academic Records, and will be offered access to advisees’ academic records contained in the academic records software.

b. Explore student confidence, concerns, and perceptions with regard to the clinical experience. Discuss self-care practices and the importance of professional/personal life balance.

c. Develop action plan for improvement or achieving goals.

4.6.1.3 Meeting 3: Before the closing date for elective selection (April)

a. Review shelf test/clerkship scores and clinical experience to date.

b. Discuss specialty career plans.

c. Determine the students’ goals for elective selection
   Note: The advisor must sign off on schedule changes

4.6.1.4 Meeting 4: During the summer ERAS process (July or August)

a. Review residency specialty selection and provide feedback (realistic expectations, necessary advice, career guidance, etc.).

b. Refer for advice from specialty specific faculty (i.e. mentors) as needed.

c. Review curriculum vitae and personal statement and provide feedback.

d. Discuss any issues that may arise during preparation of the Medical Student Performance Letter (Dean’s Letter) of which student is aware.

4.6.1.5 Meeting 5: Prior to rank ordering (January)

a. Review and debrief on interviews.

b. Review match list and provide advice.

Note: Match list ranking is considered to be very confidential information which should not be shared with other faculty or administration without the student’s permission. The student may or may not wish to share rank order information with his/her advisor.

4.6.2 Case Conference

For a clinical student experiencing academic difficulty, the Associate Dean of Academic Affairs schedules a case conference. The objective of the case conference is to facilitate academic success by reviewing the student’s progress with clerkship director(s) of failing clerkship/shelf test/remediation,
the student’s Clinical Years Advisor and the Associate Dean of Student Affairs. The student will be
invited to participate in all or part of the conference.

a. A case conference is called if a student fails a clerkship, has more than one failure on a shelf test,
or more than one required remediation.

b. The Office of Student Affairs will assess the student for psycho/social and learning disability
issues.

4.6.3 Additional Meetings

a. Additional meetings may be required for students who fail a clerkship, repeatedly fail shelf tests,
or require repeated remediation. In such cases, the student will be expected to meet with
his/her Clinical Years Advisor to review any issues.

b. Additional meetings may be scheduled at the students’ request at any time, and with any
frequency.

4.6.3.1 Failed shelf test/required remediation Events Chain

a. Student fails shelf test or required remediation.

b. Academic Records notifies Clinical Years Advisor and student, with directions for the student to
make an appointment with his/her advisor.

c. Student makes appointment with advisor.

d. Student meets with advisor. The factors that contributed to the shelf failure should be
determined and discussed (i.e. time factors, outside distractions, interpersonal issues, teaching
problems, etc.).

e. Formulate Action plan to improve performance on future exams.

4.6.3.2 Failed Clerkship/Repeated Failed Shelf Tests/Repeated Remediation Events Chain

If a student fails clerkship, repeatedly failure on shelf test, or has repeated remediation:

a. Academic Records notifies Clinical Years Advisor and Associate Dean of Academic Affairs.

b. Academic Records sends the student a letter apprising them that they will need to make
appointments with their advisor and the Student Affairs Dean.

c. Student meets with advisor, and covers issues as above.

d. Student meets with Student Affairs Dean.

e. Case Conference convened by Associate Dean of Academic Affairs.

4.7 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
    - Not taken in conjunction with any other person
    - 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.

Section 4 Advising Responsibilities of the Faculty
• 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.
  o 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.
  o 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.

Updated August 2017

4.8 Policy on Access to Student Educational Records

Accepted educational practice dictates that medical student educational records must be confidential and made available only to those members of the faculty and administration with a need to know (Liaison Committee for Medical Education, Functions and Structure of a Medical School, Standard 11.5, March 2016). Therefore, at MUSM the academic records of MUSM students are confidential and generally not accessible to faculty and administrative personnel without the students’ consent. Student records are considered private documents and the information contained therein is released only to authorized persons.

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 defined those with a need to know as:

- The Dean, Campus Deans, Academic Affairs Deans and Student Affairs Deans have a right to view all of an official education record of a student in the course of their duties.
- Student advisors have the right to view all of an advisees’ official educational record to monitor student 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
- Faculty given responsibility to monitor student progress toward achieving the academic performance standards of an individual discipline shall have the right to view the individual discipline record of a student to monitor and oversee remediation activities
- 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.
- Faculty assigned to facilitate a small group in a module will be given information on total class performance following completion of the module for the purpose of tutorial and programmatic evaluation. Individual tutor group data is not provided.

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.

The Offices of Student and Academic Affairs shall handle any other requests for access to student official educational records a case-by-case basis. Individuals making requests must make a written request outlining the legitimate educational reasons for the information.
5. PROCEDURES AND GUIDELINES FOR FACULTY APPOINTMENTS, PROMOTION AND TENURE

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5 PROCEDURES AND GUIDELINES FOR FACULTY APPOINTMENTS, PROMOTION AND TENURE

5.1 INTRODUCTION

This section sets forth the Standards for Faculty Appointments, Standards for Advancement, and Standards for Tenure. Supporting these Standards are definitions of Faculty, Ranks, and Titles. The section provides general guidance for preparing applications, requesting advancement, requesting tenure, and requesting Emeritus/Emerita status. It also provides guidelines and time lines for faculty members requesting promotion and/or tenure at Mercer University School of Medicine (MUSM).

This section also includes the current by-laws for the MUSM Committee on Faculty Promotions and Tenure1, and the current operating procedures used by the Committee in its deliberations.

Appointments, Advancements, and Tenure of Faculty members are guided by Standards established by the Faculty2. These Standards should be reviewed when considering new faculty appointments for departments3. Faculty members should also become familiar with the Standards as they develop personal career goals with their department chair, director, and/or mentor. It is the faculty member’s responsibility to provide evidence supporting a request for advancement or appointment using the Standards as a guide.

Individual departments of the School of Medicine may develop additional policies and criteria for promotion and tenure, other than those specified in the University Faculty Handbook or in this section. However, these departmental policies, criteria and procedures shall not conflict4 with those of the University Faculty Handbook or those stated herein. Each applicant should also carefully examine these departmental criteria and policies before initiating an application.

Full-time faculty members, or those contributing more than 0.5 full-time-equivalents (FTEs) to the academic program, are expected to provide evidence in applications for promotion, tenure, or both, of capable and up-to-date teaching, scholarship, clinical practice, administrative service, and responsible, active contributions to the school as part of institutional and academically-related service. An expectation for scholarship may vary among tracks but scholars should demonstrate a progressive development of expertise. Validation of expertise should begin locally with peers and progressively develop beyond the school to the state, regional, and national or international level.

Faculty members who contribute less than 0.5 FTEs, or who are volunteers, provide a variety of individualized services (or skills) to MUSM. These services are primarily teaching and service-oriented. Advancement criteria for this faculty, while similar, will differ from full-time faculty and faculty contributing more than 0.5 FTEs to the academic program.

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1 Approved: May 2, 2005
2 Approved: July 14, 2003
3 "Department” in this section refers to both departments and divisions.
4 Departments may develop policies and guidelines more stringent than MUSM or the University but not less stringent.
5.2 APPOINTMENTS

Faculty
A full-time or part-time faculty member at a MUSM campus is one who holds academic rank and collectively pursues teaching, scholarship, clinical practice, administrative service, and responsible and active contributions to the school and/or the profession as part of institutional and academically related service. Faculty members at MUSM include educators, scientists, clinicians, librarians and others holding appointments in a department or administrative unit of the school. There are no distinctions between educators, scientists, clinicians, and librarians in rank or expectations for advancement within individual faculty tracks. All faculty members should reflect an educational background appropriate for a specific position and sound character traits. All faculty members should demonstrate a commitment to the mission and goals of the school, department, and programs.

5.2.1 Medical School Faculty Appointments
At the time of appointment, and any subsequent reappointment or salary notification, the letter will indicate clearly the title, nature, duration, tenure status, and salary (if applicable) of the appointment. All faculty are appointed to a track that reflects the general scope of the contributions. The general expectations for appointment on each track are outlined in Section 5.4 Standards for Faculty Appointments and Advancement. The Dean, at the request of the department chair, makes initial Medical School Faculty appointments. At the time of each initial appointment, the department chair should recommend the following:

- Faculty track
- Specific faculty rank
- Full-time, part-time, or volunteer status
- Adjunct, joint, or visiting if appropriate

Change in Faculty Status:
A faculty member may at any time request a change from one track to another track; however, a request to move from tenure track should be initiated when it becomes apparent that circumstances will substantially affect readiness for tenure rather than waiting until the year in which the review is scheduled. This request should be faculty-initiated and represent a change in personal career goals and expectations. Any decision to change Faculty status or to change Full-Time Equivalent (FTE) status should be made after careful deliberation and with the support of the department chair. Requests should be based on the long-term needs of the individual as well as the department and the school. 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. To initiate the change in track:

1. Discuss the change with the department chair
2. Submit a letter to the department chair outlining the following: Date of Appointment; Terminal tenure year decision, if applicable; Reason for requesting the change in track
3. The department chair submits the faculty member’s letter plus a letter of support to the Dean
4. If approved by the department chair, the request is taken under consideration by the Dean, and if approved, subsequently considered by the Senior Vice President for Health Sciences, and the Provost.
5. If denied prior to reaching the Provost, the faculty member may appeal to the Provost.

Overview of tracks:
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 along with each individual’s career goals, faculty members are appointed to one of eight faculty tracks:
• **Tenure Track:**
  This track recognizes faculty members who make critical contributions in the full range of academic activities of the medical school with emphasis on teaching, scholarship, and professional service throughout their careers. To be eligible for this track, the faculty member must be full time and salaried by MUSM.

• **Medical Educator:**
  This track recognizes faculty, clinicians and non-clinicians, who devote the majority 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 and/or mentoring students, and providing effective educational leadership for academic programs. Faculty in this track will be expected to achieve and sustain accomplishments in medical education. Some scholarship will be required 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 will usually be core residency faculty and/or 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 and supervision of medical students, residents and fellows. Some demonstration of scholarship is required.

• **Clinical Scholar Track:**
  This track recognizes faculty with a commitment to active participation in the education of medical students and residents/fellows; who maintain a clinical practice; and are involved in the dissemination of clinical knowledge and techniques through scholarly publications, professional communications, and extramural funding.

• **Clinical Faculty Track:**
  This track recognizes faculty at a MUSM campus who are involved in clinical practice with minor contributions to the academic program (undergraduate and/or graduate program) and community physicians in private practice settings who support the programs and educational mission of the school of medicine as a volunteer or for a small stipend.

• **Administrator Track:**
  This track recognizes the faculty with substantial assignments of effort (> 50%) in administration. A faculty member may be appointed to the Tenure Track or appointed to a non-tenure track. If appointed to the Tenure Track, in most instances a faculty member will not have been assigned a major administrative role until they achieve tenure. While the majority of a faculty member’s effort will be in the administrative area, they are expected to participate in teaching, scholarship, clinical service, and institutional and professional 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 .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. A research faculty member is expected to generate extramural funding sufficient to support at least 70% of salary. While the focus of the faculty member will be to support the research mission, he or she may also support other missions of the school.

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

### 5.2.2 Other Appointments

- **Adjunct Faculty:**
  A faculty member with a primary appointment in another school or college within Mercer University who holds a secondary appointment in a different department or school. These appointments are made by the Dean at the request of the chair of the secondary department or school. Full faculty privileges are for primary appointments.

- **Joint Faculty:**
  A faculty member with a primary appointment in another department within the medical school who also holds an appointment in another department. These appointments are made by the Dean and at the request of the chair of the secondary department.

- **Visiting Faculty:**
  Faculty with a full-time appointment at another institution who are temporarily assigned responsibilities at the school. The faculty member will retain the faculty rank of the parent institution. Such appointments are short, generally one year or less. Visiting Faculty may not advance in rank at MUSM.

- **Emeritus/Emerita Faculty:**
  Retiring full-time faculty at the rank of either Associate Professor or Professor (tenured or non-tenured) who demonstrate outstanding credentials, a record of noteworthy contributions and at least ten continuous years of service to the school upon retirement. Service to the school should represent exemplary and extended contributions. Emeritus/Emerita Faculty status is granted through application and review of credentials. Emeritus/Emerita Faculty will remain affiliated with their respective Medical Faculty.
  - Emeritus/Emerita faculty employed by Mercer University are entitled to the benefits and privileges as determined by Section 2.04.4 in the University *Faculty Handbook* and by the Dean.
  - Emeritus/Emerita faculty who are employed by a clinical affiliate partner of Mercer University School of Medicine may maintain access to the library, may continue to be eligible to teach or perform research as needed, and may be eligible to serve on committees or other privileges as determined by the Dean.

The process for applying for emeritus/emerita faculty will be as outlined in Section 5.11.
5.2.3 Full-time Faculty

5.2.3.1 Salaried: Those persons with faculty appointments and who are MUSM employees. The appointment may be to tenure track or to a non-tenure track.

5.2.3.2 Non-salaried: Those persons with faculty appointments, but who are not MUSM employees. These appointments are not eligible for tenure. A faculty appointment is distinct from employment status. Full time, non-salaried faculty members include those faculty associated with clinical affiliates of MUSM (e.g., Navicent Health, Memorial University Medical Center, Columbus Regional Health, and St. Francis Hospital System) who contribute to the educational mission of the medical school by teaching medical students, graduate students, residents, and/or fellows. Initial appointment will be at the request of a department chair or the Dean to fulfill specific goals and objectives of the medical school and an individual department or division of the medical school.

5.2.4 Part-time Faculty:
Faculty members who contribute less than 0.5 FTEs provide a variety of individualized services (or skills) to MUSM. These services are primarily teaching and service oriented. Part-time faculty may be paid by MUSM or a clinical affiliate for their services. Advancement criteria for these faculty members differ from full-time faculty and faculty contributing more than 0.5 FTEs to the academic program.

5.2.5 Volunteer Faculty:
Faculty members who provide a service to a department, program, the school or a clinical affiliate and receive no pay. Initial appointment to the Faculty will be at the request of a department chair or the Dean to fulfill specific goals and objectives of the medical school and an individual department or section of the medical school.

5.3 FACULTY RANK and TITLES

In addition to a track appointment, all faculty are assigned a rank at the initial appointment. There are four ranks of the faculty in all departments of the school:

- Instructor
- Assistant Professor
- Associate Professor
- Professor

Within the following tracks- Tenure Track, Medical Educator Track, Clinical Educator Track, Clinical Scholar Track, Administrative Track, and Library Track- the faculty title shall refer to the rank and to the department in which the faculty member is 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 as determined by the administration (for example – Assistant Professor of Biochemistry or Assistant Professor of Geriatrics).

Within the Research Faculty Track, a “Research” title along with an appropriate rank should be requested by the department chair at the time of appointment. The term “Research” will refer to an individual with primarily research responsibilities (for example – Research Associate Professor of Biochemistry).
For faculty within the Clinical Track, a “Clinical” title along with an appropriate rank should be requested by the department chair at the time of appointment. This title refers to an individual with primarily clinical service responsibilities reflected in direct patient care and patient care services (for example – Clinical Assistant Professor of Surgery, Clinical Assistant Professor of Internal Medicine, Clinical Associate Professor of Community Medicine).

**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 possesses the potential for continued professional growth and should possess the promise of continued service and teaching for the school.
- A faculty member with a doctoral degree in the area of appointment and at least one of the following:
  - Specialty board certification;
  - A minimum of 3 years post-degree training; or
  - A minimum of 3 years of relevant experience.
- An individual with a doctoral degree and without post-degree training may be appointed at the Assistant Professor rank upon the recommendation of the department chair and approval of the Dean.
- A librarian with a master’s degree may be appointed at the Assistant Professor rank with the approval of the Dean.

**Associate Professor**
- A faculty member 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 in the area of appointment and
  - 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 has demonstrated commitment to the school through extended clinical service and teaching.

**Professor**
- A faculty member 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 in the area of appointment and
A minimum of 10 years as an Assistant and/or Associate Professor or equivalent experience, unless exemplary.

- A clinical faculty member has demonstrated extended and exemplary service and teaching. Faculty members who reach the rank of professor are recognized for sustained contributions to the school.

### 5.4 STANDARDS FOR FACULTY APPOINTMENTS AND ADVANCEMENT

**Appointment:** Faculty appointments are made by the Dean. The minimum degree requirements for appointment to the faculty are the master’s degree or its equivalent for appointment to the rank of Instructor and the doctor’s degree or its equivalent for appointment to the rank of Assistant Professor, Associate Professor or Professor. Each appointment is made on an individual basis with appropriate recognition given to prior academic appointments, academic experience, and academic service and productivity.

> “When determining acceptable qualifications of its faculty, an institution gives primary consideration to the highest earned degree in the discipline in accord with the guidelines listed below.\(^5\) The institution also considers competence, effectiveness and capacity, including, as appropriate, undergraduate and graduate degrees, related work experiences in the field, professional licensure and certifications, honors and awards, continuous documented excellence in teaching, or other demonstrated competencies and achievements that contribute to effective teaching and student learning outcomes. For all cases, the institution is responsible for justifying and documenting the qualifications of its faculty.”\(^5\)

**Advancement:** Faculty may seek rank advancement through the Promotions and Tenure Committee. A full application, letter of request from the department chair, and complete curriculum vitae of the faculty member should be submitted to the Dean following review by the faculty member’s department. The Dean forwards the application and supporting documentation to the Promotions and Tenure Committee. Each application should thoroughly address the Standards for Faculty Appointments and Advancement, including a description of the individual’s contributions to the school and the requirements of the department for advancement. Faculty members are expected to develop expertise and proficiency in the areas of teaching, scholarship, clinical practice, administration, and/or institutional and academically related public service, as applicable. The rank of Professor is the highest level of achievement and represents a record of sustained excellence and contributions to the school.

**Track Requirements for Appointment and Promotion to Faculty Tracks**

Qualifications for appointment and general criteria for promotion are specified by track in the following tables. Multiple activities supporting the criteria below will strengthen the application for promotion at each rank. Excellence maybe demonstrated and promotion may be awarded without the candidate having fulfilled every single criterion noted on the tables specific to the track. In the tables below, it is

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\(^\) Credential Guidelines: e. Faculty teaching graduate and post-baccalaureate course work: earned doctorate/terminal degree in the teaching discipline or a related discipline
expected that higher ranks will meet criterion cited for lower ranks. Section 5.07.2, Qualitative Determination by Domains of Accomplishment, provides more detailed examples of accomplishments.

TENURE TRACK

This track recognizes faculty members who make critical contributions in the full range of academic activities of the medical school with emphasis on teaching, scholarship, and professional service throughout their careers. To be eligible for this track, the faculty member must be full time and salaried by MUSM.

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<thead>
<tr>
<th>Table 1. Track Requirements For Appointment Or Promotion On The Tenure Track</th>
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<tr>
<td><strong>ASSISTANT PROFESSOR</strong></td>
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<tr>
<td>1. Teaching</td>
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<td>2. Scholarship</td>
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<td>3. Clinical Practice</td>
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<td>4. Administration</td>
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<td>5. Institutional and Academically Related Service</td>
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<td>6. Reputation</td>
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MEDICAL EDUCATOR TRACK

This track recognizes faculty, clinicians and non-clinicians, who devote the majority 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 and/or mentoring students, and providing effective educational leadership for academic programs. They will be expected to achieve and sustain accomplishments in medical education. Some scholarship will be required on this track.

<table>
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<th>Table 2. Criteria for Appointment or Promotion as a Medical Educator</th>
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<tbody>
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<td><strong>INSTRUCTOR</strong></td>
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</table>
| 1. 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 |
| 2. Scholarship | 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 |
| 3. Clinical Practice | Little or None | Little or None | Little or None | Little or None |
| 4. Administration | None | Little or none | Little or none | Little or none |
| 5. Institutional and Academically Related 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 |
| 6. Reputation | Local | Local | Local/Regional  
• Established expertise in teaching | National  
• Recognized expertise at regional, national, or international level |
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 will usually be core residency faculty and/or 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 and supervision of medical students, residents and fellows. Some demonstration of scholarship is required.

<p>| Table 3. Criteria for Appointment or Promotion on the Clinical Educator Track |
|---------------------------------|-----------------|-----------------|-----------------|-----------------|
|                                 | INSTRUCTOR      | ASSISTANT       | ASSOCIATE       | PROFESSOR       |
| 1. 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 |
| 2. Scholarship                  | Little or none  | ● Evidence of initial publication success | ● Demonstrated success in scholarship | ● Publication and presentation of peer reviewed scholarly work |
|                                 |                 | ● Participation in QI-Patient Safety Initiatives | ● Leadership role in QI-Patient Safety Initiatives | |
| 3. Clinical Practice            | Aptitude in patient care | ● Demonstrated competence in clinical, diagnostic, procedural or other professional work | ● Demonstrated expertise in specialty area | ● Demonstrated expertise in developing, implementing, and directing clinical or professional programs and patient care activities |
|                                 |                 | ● Consistently favorable reports on such measures as peer assessment, patient satisfaction, outcomes assessments, productivity and efficiency | | ● Develops new techniques, therapies, or health care delivery systems |
| 4. Administration               | None            | Little or none  | Serves in a position that involves significant time in administrative activities such as a dean, department chair | ● Special consultant appointments and/or lectureships |
|                                 |                 |                 |                 | ● major leadership role of hospital or institution |
|                                 |                 |                 |                 | ● Serves as a section chief, director or leader of a clinical area |</p>
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<th>INSTRUCTOR</th>
<th>ASSISTANT PROFESSOR</th>
<th>ASSOCIATE PROFESSOR</th>
<th>PROFESSOR</th>
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</thead>
</table>
| 5. Institutional and Academically Related Service |            | • 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 for improving patient care services regionally/statewide |
| 6. Reputation       | Local      | Local               | State/Regional      | Regional/National |
|                     |            |                     | • Established expert in one’s field  
• Validation of teaching, scholarship and clinical practice at a local, state, or regional level | • Recognized expertise in one’s field at a regional, national, or international level  
• Source of referral for expert opinion |
CLINICAL SCHOLAR TRACK

This track recognizes faculty with a commitment to active participation in the education of medical students and residents/fellows; who maintain a clinical practice; and are involved in the dissemination of clinical knowledge and techniques through scholarly publications, professional communications, and extramural funding.

Table 4. Requirements For Appointment Or Promotion On The Clinical Scholar Track

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<th>ASSISTANT PROFESSOR</th>
<th>ASSOCIATE PROFESSOR</th>
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<tbody>
<tr>
<td><strong>1. Teaching</strong></td>
<td>Previous experience or potential for effectively educating medical students or residents/fellows.</td>
<td>• Effective teacher • Mentors/advises colleagues, residents, graduate and/or medical students • Supervises or coordinates teaching by others • Develops educational and assessment materials</td>
<td>• 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</td>
</tr>
<tr>
<td><strong>2. Scholarship</strong></td>
<td>• Focused, investigator-initiated area of scholarship • Evidence of potential to function independently as a scholar</td>
<td>• Disseminates results of scholarship, typically as peer-reviewed publications • Leadership role in QI-Patient Safety Initiatives</td>
<td>• Sustained scholarship validated through peer review • Extramurally funded research</td>
</tr>
<tr>
<td><strong>3. Clinical Practice</strong></td>
<td>• Appropriate clinical training and potential for excellence in clinical practice</td>
<td>• 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, critical pathway or standard guidelines, etc.) or procedure • Directs clinical or professional programs • Leadership that promotes quality of care, patient safety, and quality improvements</td>
<td>• 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</td>
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<tr>
<td><strong>4. Administration</strong></td>
<td></td>
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<td>• Leadership role in hospital/practice setting</td>
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### Table 4. Requirements For Appointment Or Promotion On The Clinical Scholar Track

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<th>ASSISTANT PROFESSOR</th>
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<tr>
<td>5. <strong>Institutional and Academically Related Service</strong></td>
<td>• Serves on local institutional committees</td>
<td>• Serves on local medical school and 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</td>
<td>• 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</td>
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<tr>
<td>6. <strong>Reputation</strong></td>
<td>Local</td>
<td>Regional/National</td>
<td>National/International</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Established expert in one’s field • Validation of teaching, scholarship and clinical practice at a local, state, or regional level</td>
<td>• Recognized expert in one’s field at a national or international level • Source of referral for expert opinion</td>
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</table>
ADMINISTRATOR TRACK

This track recognizes the faculty with substantial assignments of effort (> 50%) in administration. A faculty member may be appointed to the Tenure Track or appointed to a non-tenure track. If appointed to the Tenure Track, in most instances a faculty member will not have been assigned a major administrative role until they achieve tenure. While the majority of a faculty member’s effort will be in the administrative area, they are expected to participate in teaching, scholarship, clinical service, and institutional and professional service as appropriate to the needs of the school, university and/or hospital.

| Table 5. Track Requirements For Appointment Or Promotion On The Administrator Track |
|-----------------------------------------------|-----------------------------------------------|-----------------------------------------------|
| **ASSISTANT PROFESSOR** | **ASSOCIATE PROFESSOR** | **PROFESSOR** |
| **1. Teaching** | • Previous experience or potential aptitude for competently educating medical students, residents/fellows, or graduate students | • Consistently demonstrates effective teaching ability | • Demonstrated sustained teaching competence |
| | | • Participation in medical school curriculum (lectures, tutorials, courses, dissertation committees) | • Participation in regional/national educational activities |
| | | • Mentors/advises colleagues, residents, and medical students | • Develops educational and assessment materials which are used regionally or nationally |
| | | • Develops curricular and assessment materials | • Organizes a training program that has a regional or national audience |
| | | • Supervises or coordinates teaching by other faculty, fellows, or residents | | |
| **2. Scholarship** | Evidence of potential to function independently as a scholar | • Demonstrated scholarly productivity | • Demonstration of continued scholarship |
| | | | | |
| **3. 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 | • Directs clinical or professional programs and patient care activities |
| | | • Demonstrates expertise in specialty area | • Leadership role in hospital/practice setting |
| | | | • Develops new techniques, therapies, or health care delivery systems that improve the health of the population served |
| **4. Administration** | • Serves as an assistant or associate dean or other administrative appointment, e.g. chair, vice or associate chair of a department | • Evidence of effectiveness in major role through completed projects | • Evidence of effective leadership in projects, committees, task forces |
| | | • Evidence of effectiveness in major role through completed projects | • Evidence of effective leadership in department/school/hospital projects, committees, task forces |
| | | • Evidence of effective leadership in department/school/hospital projects, committees, task forces | | |
| Table 5. Track Requirements For Appointment Or Promotion On The Administrator Track |
|---------------------------------|---------------------------------|---------------------------------|
| 5. Institutional and Academically Related Service | ASSISTANT PROFESSOR | ASSOCIATE PROFESSOR | PROFESSOR |
| • Serves on medical school and hospital committees | • Leadership role or committee service in professional society | • Sustained service to the department/division, school, university and/or hospital |
| • Leadership role or committee service in professional society | • Board membership in health related organizations or agencies | • Leadership role in national professional society or advocacy organizations |
| • Board membership in health related organizations or agencies | • Participates in relevant state, regional/national professional societies | • Regular or ad hoc member of a national research committee, clinical review committee, editorial boards, study sections |
| • Participates in relevant state, regional/national professional societies | • Advocate for improving patient care services locally or regionally | • National/International |
| • Advocate for improving patient care services locally or regionally | | • Recognized expert in one’s field at a regional, national, or international level |
| 6. Reputation | Local | Regional/National | National/International |
| • Established expert in one’s field | • Validation of teaching, scholarship and administrative practice at a local, state, or regional level | • Evidence of regional and/or national recognition |
CLINICAL FACULTY TRACK

This track recognizes faculty at a MUSM campus who are involved in clinical practice with minor contributions to the academic program (undergraduate and/or graduate program) and community physicians in private practice settings who support the programs and educational mission of the school of medicine as a volunteer or for a small stipend.

| Table 6. Criteria for Appointment or Promotion on the Clinical Faculty Track |
|---------------------------------|-----------------|-----------------|-----------------|-----------------|
|                                  | INSTRUCTOR      | ASSISTANT PROFESSOR | ASSOCIATE PROFESSOR | PROFESSOR       |
| 1. 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 ambulatory care setting, inpatient service, and procedural skills facilities | • Demonstrates sustained teaching excellence |
|                                 |                 |                 |                 | Effective role model and mentor for students, trainees and colleagues |
| 2. Scholarship                  | Little or none | • Involved in scholarly activity | • Evidence of initial scholarship success | • Publication of peer reviewed scholarly work |
|                                 |                 | • Participation in QI-Patient Safety Initiatives | • Leads QI-Patient Safety Initiatives | Presentation of peer reviewed scholarly work |
| 3. Clinical Practice            | Aptitude in patient care | • Demonstrates competence in clinical, diagnostic, procedural or other professional work | • Consistently favorable reports on such measures as peer assessment, patient satisfaction, compliance with care guidelines, outcomes assessments, productivity and efficiency | • Directs clinical or professional programs and patient care activities |
|                                 |                 | • Considered a very good clinician or professional by students, residents, fellows and faculty | • Expertise in specialty area | • Leadership role in hospital/practice setting |
|                                 |                 |                 | • Recognition as a skilled clinician | |
| 4. Administration               | None            | Little or none  | Little or none  | Little or none  |
### Table 6. Criteria for Appointment or Promotion on the Clinical Faculty Track

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<th>INSTRUCTOR</th>
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<tr>
<td><strong>5. Institutional and Academically Related Service</strong></td>
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<td></td>
<td>• Active member of professional society</td>
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<td>• Advocate for improving patient care services locally</td>
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<td>• Provides meaningful service contributions to MUSM as a volunteer preceptor or to the community</td>
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<td>• Leadership role in professional society</td>
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<td></td>
<td>• Advocate for improving patient care services regionally/statewide</td>
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<tr>
<td><strong>6. Reputation</strong></td>
<td>Local</td>
<td>Local</td>
<td>Local/Regional</td>
<td>State/National</td>
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<td></td>
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<td>• Established area of expertise in one’s field</td>
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<td>• Validation of practice at a local, state, or regional level</td>
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<td>• Evidence of regional and/or national recognition</td>
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<td>• Recognized expertise in one’s field at a regional, national, or international level</td>
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RESEARCH FACULTY TRACK

This track recognizes faculty members whose primary foci are research and scholarship. Faculty would be expected to generate a minimum of 70% of their salaries through extramurally funded grants. Individuals are expected to develop and maintain an independent research program and/or play a major role in a collaborator’s research program. Some degree of teaching and professional service is required for faculty in this track. Teaching may take the form of training undergraduate students, graduate students, postdoctoral fellows, medical students, and residents. Appropriate forms of professional service include participation on school, university and department/divisional committees.

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<tr>
<th>Table 7. Track Requirements For Appointment/Promotion Of Research Faculty</th>
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<tr>
<td><strong>1. Teaching</strong></td>
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<tr>
<td>Previous experience or potential aptitude for</td>
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<tr>
<td>competently educating medical students,</td>
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<td>residents/fellows, or graduate students</td>
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<td><strong>2. Scholarship</strong></td>
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<tr>
<td>Demonstrated potential for developing scholarship/</td>
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<td>research activity</td>
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<td><strong>3. Clinical Practice</strong></td>
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<td><strong>4. Administration</strong></td>
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<tr>
<td><strong>5. Institutional and Academically Related Service</strong></td>
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<td><strong>6. Reputation</strong></td>
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LIBRARY TRACK

This track recognizes faculty who devote the majority of their time to providing library services to those who provide educational endeavors associated with the educational mission of the medical school, including faculty, students, clinical affiliate faculty and associated hospital personnel, and the public. Faculty in this track are expected to participate broadly in activities related to teaching and scholarship and sustaining accomplishments reflective of librarianship.

<table>
<thead>
<tr>
<th>Table 8. Criteria for Appointment or Promotion as a Librarian</th>
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<tbody>
<tr>
<td><strong>INSTRUCTOR</strong></td>
</tr>
<tr>
<td>1. Teaching</td>
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<tr>
<td>2. Scholarship</td>
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<tr>
<td>3. Clinical Practice</td>
</tr>
<tr>
<td>4. Administration</td>
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<tr>
<td>5. Institutional and Academically Related Service</td>
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<tr>
<td>6. Reputation</td>
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<tr>
<td>7. Experience Requirements</td>
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</tbody>
</table>
**EMERITUS/EMERITA FACULTY**

Faculty members in good standing who have retired or announced their retirement may be nominated for Emeritus/Emerita status by any other faculty member in good standing. The faculty member may be nominated for Emeritus/Emerita status and the application may be considered after announcing a retirement but may not receive the title until after retiring from MUSM. Faculty members who do not desire Emeritus/Emerita status shall not be nominated.

The nomination should be submitted to the Dean on the announced date. The Promotions and Tenure Committee will review the application and make a recommendation to the Dean.

The criteria for promotion of faculty to Emeritus/Emerita status should include recognition in at least two of the following areas:

- Excellence in instruction or curricular innovation
- National recognition for scientific or service contribution
- Excellence in service to the institution
- Service to the community
- Distinguished scholarly contribution(s)
- Professional awards and honors
5.5 STATEMENT ON SCHOLARSHIP

DEFINITION OF SCHOLARSHIP

Faculty members are expected to engage in a number of endeavors with a scholarly approach, i.e., applying a thoughtful, structured, systematic methodology to the undertaking. A scholarly approach should not be confused with scholarship.

Glassick and colleagues (1) have defined the criteria for assessing a scholarly work. A systematic, scholarly approach requires:

- Clear Goals (ask important questions, set objectives)
- Adequate Preparation (demonstrate appropriate skill set, draw on existing work in the area)
- Appropriate Methods (use tools, strategies, processes for the project)
- Significant Results (findings address the objectives and raise additional questions)
- Effective Presentation (communicating the systematic process and findings to others)
- Reflective Critique (step back and determine what could be done differently and/or next).

However, a work may be scholarly without being considered scholarship. 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)

Dr. Ernest Boyer’s monograph “Scholarship Reconsidered” (3) provides a broad definition of scholarship recognizing that legitimate scholarly and creative pursuits span four dimensions: discovery, integration, application, and teaching. Boyer’s model reaffirms a commitment to scholarship while recognizing that a broader view of scholarship acknowledges the comprehensive range of faculty talents and functions required to accomplish the mission of the medical school.

Boyer has characterized four domains of academic endeavor: Teaching, Discovery, Application, and Integration. Scholarship, regardless of the domain in which it falls, should also meet Glassick’s criteria for a scholarly approach (described above).

1. Scholarship of Teaching
   The Scholarship of Teaching 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.

2. 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 at the core of the pursuit of knowledge for its own sake.

3. 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 application of new knowledge with interaction of
research and practice each informing the other. For example, the application of new knowledge incorporated into patient care, professional excellence, integrity and empathy in treating patients.

4. Scholarship of Integration
   The Scholarship of integration makes connections across disciplines and places specialties 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.

Regardless of the scholarship domain, to be considered scholarship, a work should meet the following essential characteristics or the “3Ps”:

1. Faculty effort results in a tangible product or output (work): PRODUCT
2. The work is public and available outside of the institution: PUBLIC
3. The work undergoes external peer review and critique by others in the field: PEER-REVIEWED


IMPORTANCE OF SCHOLARSHIP

To advance in rank in any of the faculty appointment systems, 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, electronic publications, other scholarly works) based on original research by faculty members, represents a major source of evidence for productive scholarship.

Without peer review, validation of the importance, significance and impact of a faculty member’s scholarly works is much more difficult to assess. The extent and rigor of the peer-review process is not always proportional to the importance, significance and impact of a given published work. At times, committee members may independently assess the importance, significance and impact of scholarly work published in such journals before rendering a judgment regarding the degree to which such publications are viewed positively in P&T committee deliberations.

On the other hand, publication of invited, peer-reviewed articles, books, book chapters and invited or peer reviewed presentations at national and international symposia or colloquia are often strong indicators of the quality of a faculty member's scholarship, research, and creative endeavors. Even when such publications and presentations produce little new knowledge, they typically provide valuable new analytic thinking and insights into the application of new knowledge.

Funding derived from competitive grants, contracts and other external funding programs is one measure of scholarly aptitude, research, creative and scholarly excellence and potential, particularly when such funding leads to the publication of high quality research in reputable peer-reviewed journals.
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 note that the lists are not comprehensive; 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. Faculty are encouraged to seek guidance from the medical library in identifying appropriate journals for the publication of their scholarly work (https://med.mercer.edu/library/identifying_scholarly_publications.htm). These journals would also be appropriate for peer reviewer and editorial board service. Examples of appropriate documentation of scholarship may include but are not limited to:

1. Publications:
   - Peer-reviewed publications in area of expertise
   - Published abstracts of presentations before professional groups
   - Teaching/curricular materials available in peer-reviewed repositories, such as MedEd Portal
   - Books and/or book chapters
   - Development and adoption of new library pathfinders, such as webpage content, online videos and mobile apps.

2. Presentations:
   - Presentation of peer-reviewed or juried papers before professional audiences
   - Invited presentations at other institutions (intramural presentations, e.g. Grand Rounds, case conferences should be included as instruction in the educator’s portfolio)
   - Invitations to speak at scientific meetings and other universities

3. Support:
   - Extramural support (e.g., NIH, foundation grants)
   - Intramural support (e.g., Mercer University Seed Grants, Navicent Foundation Grants)
   - Grant and/or contract awards
   - Extramural support from commercial vendors
   - Clinical trials, especially investigator-initiated and multi-center trials (document level of participation)

4. Other forms of scholarly activity:
   - Development and adoption of a new clinical pathway or clinical guidelines (should be documented)
   - Quality assurance project that measurably affects patient outcomes
   - Computer assisted instruction and other technology-based instruction that is documented and publically available
   - Unfunded, scored grants
   - Unfunded, unscored grants
5. Evidence of a faculty member’s reputation as a scholar may be assessed by the following:

- Citation by other faculty in the field in published papers (can be determined with Citation Index)
- Published reviews by other faculty in the field, especially the leaders, of papers/books
- Awards for outstanding accomplishments in scholarship
- Invited referee of manuscripts for journals in area of expertise
- Invited referee of proposals for meetings of national 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, original and substantive investigator (e.g., letters of support)
- Participation on editorial boards and/or as editor

5.6 ADVANCEMENT OF FACULTY

Careful review of the Standards for Appointment and Advancement will indicate areas of expectation for a faculty member with a MUSM faculty appointment. The application will lead the faculty member to develop a very personalized profile. This profile should clearly indicate and document that a candidate has occupied himself or herself with academic pursuits that contribute to the programs of MUSM. The major areas that have occupied a candidate’s time and effort must demonstrate recognizable and professional development and value to the institution. Although contributions are expected in all of the traditional academic areas, clearly a major time commitment in one or more of these areas may well be at partial expense of the others. However, no area should be excluded in one's pursuit of professional development.

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. In general, faculty members advancing to the ranks of Associate Professor and Professor should seek to make at least a minimal contribution each year in each of the areas of teaching, research/scholarship/creative endeavors, clinical practice, administrative service, and institutional and academically related public service, as appropriate. Early development of personal goals and documentation of accomplishments with a career portfolio will facilitate the process of the advancement application. Faculty members should take advantage of faculty development opportunities and mentoring to direct their careers.

The recommendation to advance a faculty member will be made after thoughtful consideration of qualitative and quantitative information provided by the applicant and his/her department chair, colleagues and referees. The Office of Faculty Affairs routinely provides assistance and guidance as approved by the Promotion and Tenure Committee in the form of suggested outlines and templates to assist with the preparation of applications. Detailed information regarding documentation, acceptable evidence, and examples will be provided. This information will be updated periodically so applicants are urged to seek guidance from the Promotion and Tenure Committee or the Office of Faculty Affairs and not rely on information from colleagues who may have engaged in the process at an earlier date.
5.6.1 ADVANCEMENT OF NONTENURE TRACK, EMPLOYED FACULTY

Non-tenure track appointments generally have no probationary period. Non-tenured appointments for MUSM employed faculty may be for one year, two years, or three years and are renewable at the option of the University. Regardless of the stated term or other provisions of any appointments, written notice that a non-tenured appointment is not to be renewed shall be given to the faculty member in advance of the expiration of his/her appointment, as follows:

- Not later than March 1 of the first academic year of service, if the appointment expires at the end of that academic year; or, if a one-year appointment terminates within an academic year, at least three months in advance of its termination.

- Not later than December 15 of the second academic year of service, if the appointment expires at the end of that academic year; or, if an initial two-year appointment terminates during an academic year, at least six months in advance of its termination.

- At least twelve months before the expiration of an appointment after two or more years of service at the institution (University Faculty Handbook).

5.6.2 ADVANCEMENT OF NONTENURE TRACK FACULTY, NOT EMPLOYED BY MUSM

A faculty appointment is distinct from employment status. Non-salaried faculty members with full time faculty appointments include those faculty members associated with clinical affiliates of MUSM. These faculty members seek advancement through the same route as MUSM-employed faculty, following the expectations of the assigned track.

5.7 APPLICATION FOR ADVANCEMENT-ALL FACULTY TRACKS

An applicant for advancement will be required to submit information that documents faculty contributions in each of the applicable areas. Although general outlines of the information required by the Promotions and Tenure Committee are contained in the policies in Section 5, periodically the Promotions and Tenure Committee, through the Office of Faculty Affairs, will provide detailed guidance and examples of documentation concerning the required application. These guidelines will be posted on the website of the Office of Faculty Affairs and Professional Development.

The achievements and contributions documented in applications will be supported by information in the CV, faculty portfolios, letters from the department chair and colleagues, and referees external to the University.

Applications will be evaluated on both qualitative and quantitative factors. Examples of qualitative criteria may be found in Section 5.7.2. Candidates are expected to show increasing levels of accomplishment in their academic career as they progress from Assistant Professor (or Instructor) to Professor. The examples listed are offered only as guidelines and are not intended to serve as the only activities acceptable for demonstrating accomplishment in a domain and demonstrating the variety of activities that might support promotion. Multiple activities comparable to the examples will strengthen the application for promotion at each rank. Excellence maybe demonstrated and promotion may be awarded without the candidate having fulfilled every single criterion listed on the table. As faculty
progress from Level 1 to Level 3, the criteria are cumulative and faculty will continue to meet guidelines at lower levels. Minimum quantitative criteria support the qualitative evaluation of each applicant. The minimum criteria for each track and rank are noted in Section 5.07.3.

Both qualitative and quantitative elements will be considered in the recommendations that the Promotions and Tenure Committee make to the Dean and in the Dean’s recommendations. Meeting the quantitative criteria will not assure promotion as the Promotion and Tenure Committee and the University will evaluate the applicant on qualitative factors as well.

5.7.1 QUALITATIVE DETERMINATION

The following outline provides an overview of the areas in which applicants are expected to document contributions. Candidates should seek guidance from the Office of Faculty Affairs and follow the detailed instructions provided each year by the Promotions and Tenure Committee and posted on the web site.

1. PERSONAL SUMMARY OF CONTRIBUTIONS TO MUSM INCLUDING STATEMENT OF PRIMARY AND SECONDARY RESPONSIBILITIES TO DEPARTMENT OR SCHOOL

2. COMPLETE CURRICULUM VITAE (use template provided)

3. MATERIAL ESSENTIAL FOR EVALUATION OF ADVANCEMENT. Note: Depending upon appointment track, the applicant will complete only those areas that are applicable.

Teaching: Demonstrated commitment by promise (Assistant Professor), experience (Associate Professor) or sustained excellence (Professor) should be provided. Educational activities are generally an expectation of all faculty members.

A. Philosophy and goals of teaching
B. Instructional responsibilities, including dates and number of learners
C. Involvement in curriculum development
D. Experience in learner assessment
E. Activities in student advising and mentoring
F. Educational leadership and administration with documentation of program enhancements
G. Documentation of educational innovations in instruction and assessment
H. Evaluation of teaching ability
   - Demonstrated mastery of the subject matter
   - Demonstrated understanding of the teaching/learning process
   - Demonstrated skills in employing a variety of instructional methods
   - Demonstrated ability to sustain effective relationships with students
   - Demonstrated dedication to high academic standards

Research/Scholarship/Creative Endeavors: Demonstrated peer-review validation (Associate Professor) or sustained excellence (Professor) should be provided. Laboratory research is not a requirement for scholarship. Note: Items listed in C may be documented in the CV

A. Philosophy and goals of research/scholarship
B. Hypothesis(es) of research/scholarship
C. Research/scholarship
Clinical Practice
A. Philosophy and goals of clinical practice
B. Clinical service responsibilities, including dates of service
C. Evaluation of clinical service abilities
D. Other accomplishments in clinical practice

Administrative Service
A. Philosophy and goals of administrative service
B. Leadership/Administrative service responsibilities, including dates of service,
C. Outcomes, Accomplishments of administrative service

Institutional and Academically Related Public Service
A. Philosophy and goals of service
B. Describe specific contributions/accomplishments to/for the school, university, hospital or profession
C. Dates of service, if not continuous
D. Outcomes, accomplishments of service

4. REFEREES
A. 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. Candidates should provide the Chair and in turn the referees with adequate information to address the standards.
B. The department chair will contact referees and request that letters to be sent directly to the Dean.

5. VALIDATION
Value to the school, department, University, and/or national organization should be provided by the institutional representatives best able to speak to the applicant’s abilities. Demonstrated validation (Associate Professor) or sustained excellence (Professor) in the applicable domains should be provided
A. Area of general and focal professional expertise(s)
B. Provide evidence of recognition of professional expertise: Local, state, regional, national/international
5.7.2 QUALITATIVE DETERMINATION BY DOMAINS OF ACCOMPLISHMENT

EXAMPLES OF FACULTY CONTRIBUTIONS
The examples listed in these tables are offered only as guidelines to demonstrate the variety of contributions that might support promotion 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 at each rank. **Excellence maybe demonstrated and promotion may be awarded without the candidate having fulfilled every single criterion listed on the table.** As faculty progress from Level 1 to Level 3, the criteria are cumulative and faculty will continue to meet guidelines at lower levels.

CONTRIBUTIONS DEMONSTRATING ACCOMPLISHMENTS IN THE TEACHING DOMAIN

The effectiveness of an educator in the teaching domain is evaluated in five spheres: instruction, curriculum development, learner assessment, advising/mentoring, and educational leadership and administration. Effective educators focus on student learning, incorporate new discoveries into their instruction, embrace the evaluation process as a means of assessing learning, enhance education skills by participating in professional development courses, and assist students in translating knowledge into practice in a variety of settings including classroom, tutorial groups, outpatient and inpatient clinical settings. Undergraduate students, graduate students, medical students, house officers, fellows, or continuing medical education participants are considered students. Competency in teaching is expected of most faculty members at all ranks; however, faculty members are not expected to demonstrate contributions in all five spheres, depending upon the expectations of their roles.

<table>
<thead>
<tr>
<th>TABLE 9. CONTRIBUTIONS DEMONSTRATING ACCOMPLISHMENTS IN THE TEACHING DOMAIN</th>
</tr>
</thead>
<tbody>
<tr>
<td>TEACHING</td>
</tr>
<tr>
<td>-----------</td>
</tr>
<tr>
<td>Instruction</td>
</tr>
<tr>
<td>TEACHING</td>
</tr>
<tr>
<td>----------------------</td>
</tr>
<tr>
<td>Curriculum Development</td>
</tr>
<tr>
<td>Learner Assessment</td>
</tr>
<tr>
<td>Mentoring/Advising</td>
</tr>
<tr>
<td>Leadership/Administration</td>
</tr>
<tr>
<td>Professional Development</td>
</tr>
</tbody>
</table>
CONTRIBUTIONS DEMONSTRATING ACCOMPLISHMENTS IN THE SCHOLARSHIP 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, electronic publications, other scholarly works) based on original research by faculty members, including research conducted in collaboration with colleagues, students and postdoctoral associates, represents a major source of evidence for productive scholarship. Disseminating the results of scholarly work may be accomplished through outlets such as peer-reviewed publications, professional meetings, and repositories such as MedEd Portal.

| TABLE 10. CONTRIBUTIONS DEMONSTRATING ACCOMPLISHMENTS IN THE SCHOLARSHIP DOMAIN |
|-----------------------------------------------|-----------------------------------------------|-----------------------------------------------|
| SCHOLARSHIP | Expected of Assistant Professor Locally Recognized | Expected of Associate Professor Locally/Regionally Recognized | Expected of Professor Regionally/Nationally Recognized |
| 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 and other publications, the number and forum appropriate to the field of study  
• Publishes abstracts and presents results of scholarship at national and international professional meetings  
• Presents scholarly work at professional meetings/conferences  
• Authorship in peer reviewed papers regardless of author rank (greater significance to first and/or senior authored papers)  
• Coauthor of review articles in peer-reviewed journals  
• Participates in multi-center trials  
• PI or Co-Investigator on peer-reviewed intramural grants  
• Success in obtaining extramural, NIH-defined peer-reviewed 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 extramurally  
• Supervision of postdocs | • Continuous evidence of a significant portfolio of high quality, peer-reviewed and other publications, the number and forum appropriate to the field of study  
• Publishes review articles in peer-reviewed journals either as first or senior author  
• Substantial record of peer reviewed first and/or senior authored publications  
• Continued, consistent success in obtaining extramural, NIH-defined peer-reviewed grant or contract funds  
• Continued consistent success in obtaining investigator initiated grants or contracts with pharmaceutical, instrumental or other commercial enterprises  
• 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 appointees  
• Presents at national and international meetings  
• Oversees a major research project as principal investigator, which involves management of personnel and finance |
<table>
<thead>
<tr>
<th>SCHOLARSHIP</th>
<th>Expected of Assistant Professor Locally Recognized</th>
<th>Expected of Associate Professor Locally/Regionally Recognized</th>
<th>Expected of Professor Regionally/Nationally Recognized</th>
</tr>
</thead>
<tbody>
<tr>
<td>Integration</td>
<td>• Author of book chapters and/or textbooks</td>
<td>• Collaborates with colleagues at major conferences</td>
<td>• Collaborates with colleagues at multiple institutions in major conferences</td>
</tr>
<tr>
<td>Teaching</td>
<td>• Develops library products such as pathfinders, web pages, and subject guides</td>
<td>• Writes a textbook for use in multiple disciplines</td>
<td>• Demonstrates a sustained leadership role in an independent research program</td>
</tr>
<tr>
<td>Application</td>
<td>• Develops guidelines, protocols or standards for clinical care</td>
<td>• Publication of articles on education</td>
<td>• Presents peer reviewed scholarly work at national/international meetings</td>
</tr>
<tr>
<td>Application</td>
<td>• Participates in initiatives related to patient safety, quality improvement, and process/practice improvement</td>
<td>• Documented ongoing clinical, translational, and/or clinical outcomes research</td>
<td>• Presents peer reviewed scholarly work at national/international meetings</td>
</tr>
<tr>
<td>Application</td>
<td>• Leads initiatives related to patient safety, quality improvement, and process/practice improvement</td>
<td>• Guidlines, protocols or standards for clinical care adopted by other institutions</td>
<td>• Harmonization and standardization of practice are adopted by other institutions</td>
</tr>
<tr>
<td>Application</td>
<td>• Resources that support scholarship initiatives adopted by other institutions</td>
<td>• Designs and implements program assessment system</td>
<td>• Resources that support scholarship initiatives adopted by other institutions</td>
</tr>
</tbody>
</table>
CONTRIBUTIONS DEMONSTRATING ACCOMPLISHMENTS IN THE CLINICAL PRACTICE DOMAIN

Clinical services may be direct (such as within the hospital or various outpatient clinics) or indirect (as provided by specialized tests or procedures). The clinical practice of an academic clinician is intimately linked to his or her role as a teacher. In addition to consistently practicing a high standard of medicine, the clinician participates actively in development, delivery and oversight of pre and postdoctoral curricula and training. The practice of medicine today requires that clinicians seek new knowledge to improve patient outcomes and incorporate that knowledge into practice and education of learners.

<p>| TABLE 11. CONTRIBUTIONS DEMONSTRATING ACCOMPLISHMENTS IN THE CLINICAL PRACTICE DOMAIN |
|----------------------------------------|----------------------------------------|----------------------------------------|</p>
<table>
<thead>
<tr>
<th>CLINICAL PRACTICE</th>
<th>Expected of Assistant Professor Locally Recognized</th>
<th>Expected of Associate Professor Locally/Regionally Recognized</th>
<th>Expected of Professor Regionally/Nationally Recognized</th>
</tr>
</thead>
</table>
| Patient care      | • Demonstrates competence and promise of excellence in clinical, diagnostic, procedural or other professional work  
                    • Considered a very good clinician or professional by students, residents, fellows and faculty  
                    • 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  
                    • 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 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 |
| Clinic Services Administration | • Serves as a section chief, director or leader of a clinical area  
                                • Directs clinical or professional programs  
                                • Directs patient care activities in clinical settings | • Develops a unique or essential clinical program  
                                • Invited to participate in practice guideline committees, external program reviews |
| 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, critical pathway or standard guidelines, device etc.) or procedure  
                                • Creative, active participation in the evaluation of the effectiveness (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 have improved the health of the population served |
CONTRIBUTIONS DEMONSTRATING ACCOMPLISHMENTS IN THE ADMINISTRATIVE SERVICES DOMAIN

The skills and abilities of some faculty members are utilized in the administration and management of the medical school, the university, or hospital/institution. For these faculty members, significant time is expended in administrative activities related to scheduling, evaluation, program development, documentation, etc. Although the management and direction of residency programs and clerkships, and major medical school academic programs require significant time, the administrative contributions of these individuals should be assessed as part of educational leadership related to their teaching contributions.

<table>
<thead>
<tr>
<th>ADMINISTRATIVE SERVICE</th>
<th>Expected of Assistant Professor Locally Recognized</th>
<th>Expected of Associate Professor Locally/Regionally Recognized</th>
<th>Expected of Professor Regionally/Nationally Recognized</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Demonstrates skills in managing activities or programs</td>
<td>• Serves as an assistant or associate dean or other administrative appointment, e.g. chair, vice or associate chair of a department, unit director</td>
<td>• Special consultant appointments and/or lectureships</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Oversees, directs and interprets tests, procedures or data handling in support of a clinical or service laboratory</td>
<td>• Provides major leadership of hospital or institution such as chief of staff, or CMO</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Independently develops and/or directs major program or project for the organization</td>
<td>• Administrative initiatives adopted by other institutions</td>
</tr>
<tr>
<td></td>
<td></td>
<td>• Demonstrates leadership role in projects/committees/task forces</td>
<td></td>
</tr>
</tbody>
</table>
CONTRIBUTIONS DEMONSTRATING ACCOMPLISHMENTS IN THE INSTITUTIONAL AND ACADEMICALLY RELATED PUBLIC SERVICES DOMAIN

Institutional and Academically-Related Service is an extension of the mission and vision of the school beyond the traditional academic and clinical programs within the school. Institutional, professional and community service activities should be within the area of one’s professional discipline and contribute to improvement of higher education. Service may reflect the responsibility and good citizenship of a faculty member to participate in functions essential to the school and University such as committee participation; to the community through activities representing the school such as local committees or volunteering that reflect the mission and goals of the school; or extend beyond the community to state, regional, or national participation in professional societies and organizations. A broad range of professional activities can contribute to service to the department, school, institution, hospital, the profession and the community. Service includes active participation as well as leadership in various committees and organizations.

<table>
<thead>
<tr>
<th>TABLE 13. CONTRIBUTIONS DEMONSTRATING ACCOMPLISHMENTS IN THE INSTITUTIONAL AND ACADEMICALLY RELATED PUBLIC SERVICES DOMAIN</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Expected of Assistant Professor</strong></td>
</tr>
<tr>
<td><strong>Locally Recognized</strong></td>
</tr>
</tbody>
</table>
| **Institutional** | - 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  
- Recommends new departments or programs  
- Participates in activities that enhance/promote the mission of MUSM | - Participates in activities that enhance/promote the mission of MUSM |
| **Community Outreach** | - Speaks to lay groups from perspective of professional area of expertise  
- Judges science fairs  
- 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 |
| **Professional** | - Contributing member of 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 | - Leadership role 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 | - Leadership role 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 |
## TABLE 13. CONTRIBUTIONS DEMONSTRATING ACCOMPLISHMENTS IN THE INSTITUTIONAL AND ACADEMICALLY RELATED PUBLIC SERVICES DOMAIN

<table>
<thead>
<tr>
<th>Librarianship Service- Librarianship in the areas of Archives/Digital Initiatives; Collection Services; Public Service/Outreach ; Technical Services and Library Systems</th>
<th>Expected of Assistant Professor Locally Recognized</th>
<th>Expected of Associate Professor Locally/Regionally Recognized</th>
<th>Expected of Professor Regionally/Nationally Recognized</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>• Exhibits increased understanding of library operations and how they relate to the institution</td>
<td>• Assumes responsibility for supervision of library staff or other librarians</td>
<td>• Initiates and coordinates high-level decision-making and strategic planning within or beyond the department</td>
</tr>
<tr>
<td></td>
<td>• Demonstrates increasing knowledge, understanding and skill in library functions</td>
<td>• Demonstrates leadership in implementing initiatives that enhance the library services</td>
<td>• Sustained, exceptional accomplishments that are recognized at the national and/or international level</td>
</tr>
<tr>
<td></td>
<td>• Develops expertise in new areas of library operations</td>
<td>• Develops new or innovative approaches to problem-solving in specific areas of librarianship</td>
<td>• Incorporates current trends and developments in the library profession to enhance MUSM library services</td>
</tr>
<tr>
<td></td>
<td>• Continued professional development in librarianship</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
5.7.3 MINIMUM QUANTITATIVE CRITERIA FOR PROMOTION

IMPORTANT NOTE: These minimum quantitative criteria are for guidance purposes only, and should not be used or interpreted by members of the faculty or the Promotions and Tenure Committee as a definitive or exhaustive checklist of the requirements for promotion. It is impossible to define criteria for promotion in purely quantitative terms, because the quality of work has a direct impact on the interpretation of the contribution and, in some cases, to the quantity of the work. Accordingly, these criteria should be used only in conjunction with the detailed qualitative guidelines in Section 5.07.02. In addition, the faculty member’s accomplishments should be sustained, as outlined in the qualitative guidelines for promotion.

MEETING THE QUANTITATIVE CRITERIA WILL NOT ASSURE THAT A FACULTY MEMBER IS PROMOTED AS THIS IS ONLY ONE COMPONENT OF THE EVALUATION.

Similarly, a faculty member who does not meet the minimum guideline in an area may be promoted based on the quality of work reflected in other dimensions of his/her work.

1. In the Teaching Domain, teaching evaluations are expected from the variety of learners with whom the faculty member has contact. Other means of evaluation such as peer evaluation and teaching innovations related to instruction, curriculum, and assessment, will be considered in addition to student evaluations. Curricular-related products developed and/or improved should be documented according to guidelines provided by the Promotions and Tenure Committee.

2. In the Scholarship Domain, MUSM ascribes to an expanded definition of scholarship. In addition to peer-reviewed publications, presentations, case reports, books, book chapters, and other examples of scholarly works, will be counted as scholarly works; these are described in Section 5.05 Statement on Scholarship. For Tenure Track and Research Track faculty seeking promotion from Assistant Professor to Associate Professor, the minimum number of publications should be those generated while at MUSM to show establishment as an independent scholar.

3. For those tracks in which funding is expected, the source may be competitive funding from any external source, i.e. 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 investigator initiated.

4. In the Clinical Practice Domain, the 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 and Maintenance of Certification are expected.

5. In the Administrative Domain, effectiveness in the role, description of accomplishments and outcomes must be documented according to guidelines provided by the Promotion and Tenure Committee.

6. A number of the contributions in the Institutional and Academically-Related Service Domain can be documented in the CV. For example, committee service requirement of “2” may be service on two different committees or 2 terms on the same committee. Volunteer service contributions to MUSM can be documented and verified through letters written on behalf of the candidate.

7. There are several other considerations, which may not be captured in the quantitative guidelines, and the interpretation of performance levels outlined should only be viewed in conjunction with
the detailed qualitative guidelines. For example: if the teaching performance as measured by student evaluations does not consistently meet expectations, the performance may be considered Effective if he/she has outstanding peer evaluations and other teaching-related accomplishments, per the qualitative guidelines for promotion in the MUSM Faculty Handbook.
<table>
<thead>
<tr>
<th>TENURE TRACK</th>
<th>MEDICAL EDUCATOR TRACK</th>
<th>CLINICAL EDUCATOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistant to Associate Professor</td>
<td>Associate to Full Cumulative</td>
<td>Assistant to Full Cumulative</td>
</tr>
<tr>
<td>+Instructor to Assistant Professor</td>
<td>Assistant to Associate Professor</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Associate to Full Cumulative</td>
<td></td>
</tr>
</tbody>
</table>

**TEACHING DOMAIN**

<table>
<thead>
<tr>
<th>Teaching evaluations</th>
<th>Consistently Effective</th>
<th>Consistently Excellent</th>
<th>Consistently Effective</th>
<th>Consistently Excellent</th>
<th>Consistently Effective</th>
<th>Consistently Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Curricular products developed/improved</td>
<td>1</td>
<td>2</td>
<td>1</td>
<td>2</td>
<td>4</td>
<td>1</td>
</tr>
</tbody>
</table>

**SCHOLARSHIP DOMAIN**

| Scholarly works* | 7 | 20 | 2 | 4 | 9 | 2 | 7 |
| Peer reviewed publications | 3 | 12 | 1 | 2 | 5 | | |
| Invited or peer reviewed external presentations to state/regional/national audiences | 4 | 7 | 1 | 2 | 4 | 1 | 2 |
| Externally funded grants/ contracts/ clinical trials | | | | | | | |
| Active role in QI-Patient Safety initiatives | | | | | | | |

**CLINICAL PRACTICE DOMAIN**

| Meets hospital/practice productivity, effectiveness, satisfaction etc. measures | Consistently | Consistently |
| Demonstrates clinical excellence | Consistently | Consistently |

**ADMINISTRATIVE DOMAIN**

| Effective completed or adopted initiatives | | |
| Productive leadership role in projects/committees/task forces | | |

**INSTITUTION/ ACADEMIC RELATED SERVICE**

| School/ Department/ College/Hospital Committees or task forces | 2 | 7 | 1 | 2 | 5 | 2 | 3 |
| University/State/National/ Professional Committees | | | | | | 2 | 1 |
| Leadership and/or service in professional organizations, study groups, external review panels, peer review process, editorial board, etc. *** | 2 | 4 | | 2 | 1 |
| Outreach (e.g., presentation of health information to public, science fair judge, recruiting trips, mission trips, representing MUSM to the public) | 2 | | 1 | 3 | 2 | 3 |
## LEADERSHIP/ADMINISTRATOR

<table>
<thead>
<tr>
<th>Assistant to Associate Professor</th>
<th>Associate to Full Cumulative</th>
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## CLINICIAN TRACK

<table>
<thead>
<tr>
<th>Assistant to Associate Professor</th>
<th>Associate to Full Cumulative</th>
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</thead>
</table>

## CLINICIAN SCHOLAR

<table>
<thead>
<tr>
<th>Assistant to Associate Professor</th>
<th>Associate to Full Cumulative</th>
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</table>

## RESEARCH

<table>
<thead>
<tr>
<th>Assistant to Associate Professor</th>
<th>Associate to Full Cumulative</th>
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</table>

### TEACHING DOMAIN

<table>
<thead>
<tr>
<th>Teaching Domain</th>
<th>Consistently Effective</th>
<th>Consistently Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Curricular products developed/improved</td>
<td>1</td>
<td>3</td>
</tr>
</tbody>
</table>

### SCHOLARSHIP DOMAIN

<table>
<thead>
<tr>
<th>Scholarship Domain</th>
<th>Scholarly works</th>
<th>Peer reviewed publications</th>
<th>Invited/Peer reviewed presentations at state/regional/national meetings</th>
<th>Externally funded grants/contracts/clinical trials</th>
<th>Active participation in QI/Patient Safety initiatives</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>5, 9</td>
<td>1, 2</td>
<td>5, 12</td>
<td>8, 23</td>
<td></td>
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<td></td>
<td>3, 5</td>
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<td>2, 6</td>
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<td>2, 4</td>
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<td></td>
<td>1, 1</td>
<td>4, 7</td>
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</tbody>
</table>

### CLINICAL PRACTICE DOMAIN

<table>
<thead>
<tr>
<th>Clinical Practice Domain</th>
<th>Meets hospital/practice productivity, Effectiveness, satisfaction etc. measures</th>
<th>Demonstrates clinical excellence</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Consistently, Consistently, Consistently, Consistently, Consistently</td>
<td>Consistently, Consistently</td>
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</tbody>
</table>

### ADMINISTRATIVE DOMAIN

<table>
<thead>
<tr>
<th>Administrative Domain</th>
<th>Effectiveness in major role through completed or adopted initiatives, products, projects</th>
<th>Leadership role in projects/committees/task forces</th>
<th>Demonstrates leadership skills such as communication, mentoring, judgment, positive attitude, commitment</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Consistently, Consistently, Consistently, Consistently, Consistently</td>
<td>Consistently, Consistently</td>
<td>Consistently, Consistently, Consistently</td>
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</table>

### INSTITUTIONAL/ ACADEMIC RELATED SERVICE

<table>
<thead>
<tr>
<th>Institutional/ Academic Related Service</th>
<th>School/Department/College/Hospital Committees</th>
<th>University/State/National/Professional Committees</th>
<th>Leadership and/or service in professional organizations, study groups, external review panels, peer review process, editorial board, etc.</th>
<th>Volunteer service contribution to MUSM and/or community</th>
<th>Outreach (e.g., presentation of health information to public, science fair judge, recruiting trips, mission trips, representing MUSM to the public)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2, 8</td>
<td>2, 1</td>
<td>1, 4</td>
<td>1, 2, 4</td>
<td>5, 8, 3, 5, 2, 4</td>
</tr>
</tbody>
</table>

### Notes

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<table>
<thead>
<tr>
<th>LIBRARY TRACK</th>
<th>+Instructor to Assistant Professor</th>
<th>Assistant to Associate Professor</th>
<th>Associate to Full Cumulative</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>TEACHING DOMAIN</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teaching evaluations</td>
<td>Consistently Effective</td>
<td>Consistently Effective</td>
<td>Consistently Excellent</td>
</tr>
<tr>
<td>Curricular products developed/improved</td>
<td>1</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td><strong>SCHOLARSHIP DOMAIN</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Scholarly works*</td>
<td>2</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td>Peer reviewed publications</td>
<td>1</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>Invited or peer reviewed external presentations to state/regional/national audiences</td>
<td>1</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Externally funded grants/ contracts/ clinical trials</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Active role in QI-Patient Safety initiatives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Library Products (e.g. pathfinders, subject guides, etc.)</td>
<td>1</td>
<td>2</td>
<td>4</td>
</tr>
<tr>
<td>Library Products may substitute for publications or presentations; minimum totals should equal total scholarly works.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>CLINICAL PRACTICE DOMAIN</strong></td>
<td></td>
<td></td>
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<tr>
<td><strong>ADMINISTRATIVE DOMAIN</strong></td>
<td></td>
<td></td>
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<tr>
<td>Effective completed or adopted initiatives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Productive leadership role in projects/committees/task forces</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>INSTITUTION/ ACADEMIC RELATED SERVICE</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School/ Department/ College/Hospital Committees or task forces</td>
<td>1</td>
<td>2</td>
<td>5</td>
</tr>
<tr>
<td>University/State/National/ Professional Committees</td>
<td></td>
<td></td>
<td>1</td>
</tr>
<tr>
<td>Leadership and/or service in professional organizations, study groups, external review panels, peer review process, editorial board, etc. ***</td>
<td></td>
<td></td>
<td>2</td>
</tr>
<tr>
<td>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]</td>
<td>1</td>
<td>3</td>
<td></td>
</tr>
<tr>
<td>Librarianship 1 project/contribution from any of the following four areas each year</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Archives/Digital initiatives</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Collection Services (selection and deselection of materials)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public Service/Outreach (e.g. research consultations)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technical Service and Library Systems (e.g. maintaining functionality of electronic resources, database management, etc.)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
5.8 PART TIME AND VOLUNTEER FACULTY

Advancement – There are numerous potential areas of achievement as a MUSM faculty member. Each faculty member will represent a very personalized profile reflecting the expectation of exemplary performance in the area of primary responsibility. Varying requirements in teaching, scholarship and service will apply to part time and volunteer in comparison to full time faculty.

Faculty members should develop a progressive record of commitment to teaching and service in a primary area of responsibility. Documentation of sustained excellence in teaching and service is expected with professional expertise recognized through progressive acknowledgement from local, state, regional, national, and perhaps international sources. Service may be an area of specific responsibility (administrative service, clinical practice service, or community-based service). Good citizenship is required of all faculty members. Early development of personal goals and documenting accomplishments with a career portfolio will facilitate the process of the advancement application. Faculty members should take advantage of faculty development opportunities and mentoring to direct their careers.

5.9 FACULTY TENURE

Tenure is the right of certain full-time faculty who hold academic rank to continuous full-time appointment without reduction in academic rank until retirement or dismissal as provided in the University Faculty Handbook. The President of the University, with the authority of the Board of Trustees, grants tenure to a faculty member at MUSM. Faculty members may receive tenure only through an academic department. Tenure is transferable between departments in the school. The school structure and affiliation agreements with hospitals and some clinical departments may not provide tenure consideration for all faculty members. Tenure is viewed as a means to assure academic freedom in teaching, research, and extra-mural activities under the guidance of professional responsibility.

The career of lifetime commitment embodied in the concept of tenure must involve a mutually beneficial relationship between all parties. Long-term commitment of university resources is a serious matter; therefore, the quality of individual performance prior to granting tenure must be convincing with regard to future expectations. The decision to advance a faculty member will be made after thoughtful consideration of qualitative and quantitative information provided by the applicant and his/her department chair, colleagues and referees. A tenure-eligible faculty member will request tenure through the Promotions and Tenure Committee. Following review by the faculty member’s department, along with supporting documentation, the faculty member submits an application to the Dean’s Office, which is forwarded, to the Promotions and Tenure Committee.

Full-time doctoral faculty appointed to the Tenure Track at the ranks of Associate Professor and Professor may be eligible for tenure at MUSM. The Promotions and Tenure Committee reviews individuals eligible for tenure before the end of their probationary period. Probationary periods include experience only during the initial appointment rank of Assistant Professor, Associate Professor, or Professor. The probationary period for attaining tenure for Assistant Professors is six years; the probationary period for Associate Professors and Professors is four years. Tracking of tenure begins on July 1 following initial appointment. Faculty members may receive consideration for “tenure-relevant” experience prior to MUSM. Prior experience by a faculty member considered “tenure-relevant” reduces the probationary period proportionately. The Dean recommends the amount of tenure-relevant experience for new faculty appointments at the time of initial appointment. In exemplary cases, tenure may be requested prior to the end of probation.
Mercer University bases tenure on merit; tenure is determined by the aggregate consideration of:

- Quality of teaching and attention given to students as individuals
- Breadth, depth, and variety of education and experience
- Professional achievement and scholarship
- Responsible participation in group deliberative processes
- Professional responsibility and service to the school and community

The expectation for faculty members seeking tenure is the demonstration of proficiency and sustained excellence in each of these areas as well as satisfaction of all criteria for advancement to the rank of Associate Professor or Professor. In addition, each individual should demonstrate a promise of continual development as a valued colleague and friend to the school and community.

An early and unsuccessful tenure request does not abrogate the probationary period. In the event that tenure is not granted by the expiration of the full probationary period, a faculty member will receive a non-renewable, one-year contract at the end of the fourth or sixth academic year, depending on the probationary period. Tenure begins no later than the beginning of the seventh academic year for an Assistant Professor with a six-year probationary period. Tenure begins no later than the beginning of the fifth academic year for an Associate Professor or Professor with a four-year probationary period.

**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. A faculty member may also request to change from a non-tenure track appointment to a tenure track appointment. In the latter case, a four or six-year probation begins on July 1 (the beginning of the academic year) following the change (four years for Associate Professors and Professors and six years for Assistant Professors). This decision should be made with the support of the department chair and should be based on the long-term needs of the individual as well as the department. Requests must be submitted in writing by the department chair for the Dean’s consideration. Requests may be granted based upon the long-term needs of the medical school and the university.

Immediate tenure upon appointment is not a usual condition of appointment. However, certain individuals of exceptional merit who already have tenure in other universities may warrant tenure as a condition of employment or following a brief probationary period. A minimum of one year after the initial appointment is recommended before tenure consideration.

**Delay in the tenure review:**
There may be occasions when a faculty member encounters certain circumstances, which may justify a delay in the scheduled tenure review process. To be considered for an extension, the faculty member must make a written request to the department chair documenting that his or ability to demonstrate readiness for the grant of 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 Appointment
2. Terminal tenure year decision
3. Reason for requesting an extension
4. Date of the event
5. Explanation of how the nature of the event substantially burdened (or will burden) progress to 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 Senior Vice President for Health Sciences, and 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:
1. Birth or adoption of child
2. Illness or disability of a family member
3. Personal or family tragedy
4. Catastrophic change in the research environment that significantly delays or terminates research activity
5. Other justifiable changes in the research goals of the individual or the department that adversely affect the scholarly productivity of the faculty member
6. Unforeseen imposition of additional department or university duties on the faculty member that significantly detracts from the time available for scholarly activity
7. Formal enrollment and engagement in additional advanced degree work that was previously approved by the institution.

Careful review of the Standards for Tenure will indicate areas of expectation for a MUSM faculty member. The application will lead the faculty member to develop a very personalized profile. This profile should clearly indicate and document that a candidate has occupied himself or herself, with academic pursuits that contribute to the programs of MUSM. The major areas that have occupied a candidate’s time and effort must demonstrate recognizable and professional development and value to the institution. Although contributions are expected in all of the traditional academic areas, clearly a major time commitment in one or more of these areas may well be at partial expense of the others. However, no area should be excluded in one’s pursuit of professional excellence.

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. In general, faculty members advancing to the ranks of Associate Professor and Professor should seek to make at least a minimal contribution each year in each of the areas of teaching, research/scholarship/creative endeavors, clinical service, administrative service, and institutional and academically related public service, as appropriate. Early development of personal goals and documenting accomplishments with a career portfolio will facilitate the process of the advancement application. Faculty members should take advantage of faculty development opportunities and mentoring to direct their careers.

The Office of Faculty Affairs routinely provides assistance and guidance as approved by the Promotion and Tenure Committee in the form of suggested outlines and templates to assist with the preparation of applications. Detailed information regarding documentation, acceptable evidence, and examples will be provided. This information will be updated periodically so applicants are urged to seek guidance from the Promotion and Tenure Committee or the Office of Faculty Affairs and not rely on information from colleagues who may have engaged in the process at an earlier date.
5.10 Application for Tenure

The following outline is provided to document contributions in each of the applicable areas specified for tenure. Candidates should also submit documentation requested of faculty applying for promotion (see Section 5.7).

MATERIAL ESSENTIAL FOR EVALUATION OF TENURE

A. Quality of teaching and attention given to students as individuals. For example:
   - Evidence of high standards of teaching through evaluations by students
   - Peer-review of teaching evaluation
   - Evidence of improvement

B. Breadth, depth, and variety of education and experience. For example:
   - Evidence of continual education in areas of proficiency
   - Evidence of developing expertise
   - Evidence of disseminating skills and experience

C. Professional achievement and scholarship. For example:
   - Evidence of professional achievement and scholarship external to MUSM

D. Responsible participation in group deliberative processes. For example:
   - Evidence of participation in group efforts
   - Evidence of cooperation with colleagues and collegiality

E. Professional responsibility and service to the school and community. For example:
   - Evidence of responsibility and service to school
   - Evidence of responsibility and service to university

5.10.1 TERMINATION DATE OF THE PROBATIONARY PERIOD

An appointment to Tenure Track generally includes a probationary period. Tenure is requested by submission of an application to the department Chair. The application is forwarded to the Promotions and Tenure Committee for review and a recommendation is made to the Dean. Upon the recommendation of the Dean and approval by the University Board of Trustees, the President of the University grants tenure.

The latest recommended date for initiating application for tenure is 12 months prior to the expiration of the probationary period. Upon formal request, the Promotions and Tenure Committee will provide confirmation of the latest date for initiating application for tenure on request to any tenure track faculty member. The procedure for the response to and subsequent review of the candidate shall be determined by the department in accordance with the University Faculty Handbook. The Dean’s Office will forward all applications to the Promotion and Tenure Committee.

A probationary period is specified for tenure track faculty at the time of employment. This period is usually six or four years. The faculty member should refer to the initial contract letter to determine the probationary period. Some faculty members may have special probationary periods that are not six or four years. These conditions will be noted in the appointment letters.

If a probationary date applies, make an application at least 12 months prior to this date. If this date does not apply, determine the departmental dates for review. Preparation for these should begin no later than the spring prior to application submission.
Example: For a 6-year probationary period, application preparation and submission should be initiated during the fifth academic year. The application will be reviewed during the fall for a recommendation to the Dean by the second Friday in January; the Provost, President and Board of Trustees make a final decision in the spring. If tenure is not granted by the end of the sixth year, the faculty member will receive a one-year non-renewable contract with a starting date of July 1 of the seventh year. The time frame differs for a faculty member with a four-year probationary period. See Chart 1- *Dates of Importance for Tenure Applications* for an explanation of application time frames.
The tenure clock begins with the first July 1st after employment starting date at MUSM. For example, if the employment date was September, the tenure clock would not begin until July of the next year. Important dates for tenure applicants are shown. This chart shows a typical tenure timeline for an Assistant Professor.

### Six-Year Probationary Period Example

<table>
<thead>
<tr>
<th>Begin tenure clock 07/01/17</th>
<th>07/01/18</th>
<th>07/01/19</th>
<th>07/01/20</th>
<th>07/01/21</th>
<th>07/01/22</th>
<th>Six Year Probation Ends 2023</th>
<th>07/01/23</th>
</tr>
</thead>
<tbody>
<tr>
<td>First July 1</td>
<td>2nd 7/1</td>
<td>3rd 7/1</td>
<td>4th 7/1</td>
<td>5th 7/1</td>
<td>6th 7/1</td>
<td>June 30th</td>
<td>7th 7/1</td>
</tr>
<tr>
<td>Years Complete</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Tenure Approved</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Tenure Denied</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1-year non-renewable contract</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
<th></th>
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<tbody>
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</tr>
</tbody>
</table>

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6 Please refer to your contract to determine your probationary period. Some Faculty members may have special probationary periods that are not 6 or 4 years. These conditions will be noted in their appointment letters.

7 Approved: August 2003

8 Reflects a minimum of 5 years as Assistant Professor
Tenure Applicant:
Appointment Date:

Some applicants join MUSM at a rank higher than Assistant Professor. These Faculty members may have a four-year probationary period. The tenure clock begins with the first July 1st after employment starting date at MUSM. For example, if the employment date was September, the tenure clock would not begin until July of the next year. Important dates for tenure applicants are shown. This chart shows a tenure timeline for an Associate Professor/Professor with an application for tenure.

**Four-Year Probationary Period**

<table>
<thead>
<tr>
<th>Begin tenure clock</th>
<th>07/01/2017</th>
<th>07/01/2018</th>
<th>07/01/2019</th>
<th>07/01/2020</th>
<th>Four Year Probation Ends 2021</th>
<th>7/01/2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>First July 1</td>
<td>2nd 7/1</td>
<td>3rd 7/1</td>
<td>4th 7/1</td>
<td>5th 7/1</td>
<td>June 30th</td>
<td>7/01/2021</td>
</tr>
<tr>
<td>Years Complete</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>Submit letter of intent to department chair and dean</td>
<td>Tenure Approved</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Prepare application for October review</td>
<td>Tenure begins</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>Tenure Denied</td>
<td>1-year non-renewable contract</td>
</tr>
<tr>
<td>EARLY APPLICATION PERIOD</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
5.11 REQUEST/NOMINATION FOR EMERITUS FACULTY STATUS

Candidate:
Address:
Current rank, title and date of appointment:
Date and rank of Previous MUSM appointments:
Area of professional expertise:
Joint Appointment (if so, include the department and the date of appointment):

Request/Nomination For:
Name ________________________________  Department ____________________________

- Provide complete Curriculum Vitae.
- Letters of Support. Provide at least two letters of support that provide evidence of significant contribution to the School and/or University in at least two of the following areas:
  - Excellence in instruction or curricular innovation
  - National recognition for scientific or service contribution
  - Excellence in service to the institution
  - Service to the community
  - Distinguished scholarly contribution(s)
  - Professional awards and honors
- Does the Candidate being recommended favor Emeritus Status? _________________
- Name of Person Recommending Candidate: ________________________________
5.12  PROMOTION AND TENURE CHECKLIST AND IMPORTANT DATES

Prior to July
- Discuss with department chair progress toward promotion and/or tenure and intent to submit an application.
- Determine the departmental policy for Promotion and/or Tenure as early as possible to determine any additional requirements and dates.
- Attend Promotion and Tenure Workshop (recommended).
- Determine dates for submitting an application.

July 1
- Submit letter of intent to submit an application to the department chair with a copy to the Dean

Mid-August
- Discuss with department chair names of referees and prepare materials to submit to referees. Request that department chair solicit letters of support.
- Send requests to referees and provide them with MUSM promotion and/or tenure standards. Request that letters be sent directly to the Dean’s Office.

September
- Submit application to department chair on September 1, or as requested. This allows the chair and the department Review Committee (if applicable) to review the application prior to writing recommendation letters.
- Make changes to application based on department and department chair feedback.
- Department chair and department review committee prepare recommendation letters.

October
- Submit completed applications and supporting material electronically to the Dean by 5:00 p.m. on the first working day in October.

Oct – Dec
- Promotions and Tenure Committee deliberates.
- 3rd Friday in December Promotions and Tenure Committee sends recommendations to Dean along with supporting documents according to the schedule established by the Senior VP Health Sciences and the Provost.

Mid-January
- Dean considers the recommendations of the department chair/unit director and the Promotions and Tenure Committee before making a recommendation to the Senior VP Health Sciences and the Provost. The action taken by the Dean, and all subsequent applicable notification and review procedures, shall be in accordance with the University Faculty Handbook.

Mid- April
- The Provost’s Office makes recommendations to the Board of Trustees at the April meeting. The Dean notifies applicants of Board of Trustees’ actions.

Note: Applicants will not be informed of the Promotions and Tenure Committee recommendation to the Dean nor will they be informed of the Dean’s recommendation to the Senior VP for Health Sciences and the Provost.
5.13 Committee on Faculty Promotions and Tenure By-Laws

8.1 Membership

8.1.1 The Faculty Promotions and Tenure Committee shall consist of the following members all of whom shall be tenured or on a non-tenure track (11 voting members with a quorum of 6 members):

a. Four members from clinical departments, with at least one member from the Macon Campus and at least one member from the Savannah Campus.
b. Three members from Basic Medical Sciences, with at least one member from the Macon Campus and at least one member from the Savannah Campus.
c. One member from Community Medicine.
d. One member from the Medical Library.
e. Two members from the Faculty-at-large at the rank of Professor.

8.1.2 The assistant/associate deans for Faculty Affairs shall be ex officio members without vote.

8.1.3 The Committee may be assisted by subcommittees for advice and guidance in specialty areas of medical practice or basic science. Such subcommittees shall be appointed by the Committee as needed and shall consist of one regular member of the Committee and two other members of the Faculty who reflect the special needs of the subcommittee.

8.1.4 Meetings are held in executive session unless announced otherwise. Only Committee members and persons specifically invited by the Chair may attend.

8.2 Duties and Responsibilities of the Faculty Promotions and Tenure Committee

The duties and responsibilities of this committee shall be as follows:

8.2.1 To provide assistance to faculty members seeking clarification of policies and procedures for promotion and tenure.

8.2.2 To review applications submitted by Faculty members for promotion and tenure.

8.2.3 To make recommendations to the Dean on Faculty promotions and granting of tenure.

a. Recommendations will reflect decisions from Committee members who are Professors or who are at a higher rank than that of the candidate.
b. Committee deliberations shall be confidential and reported only to the Dean.

8.2.4 To review and make recommendations to the Executive Council to ensure that the standards and guidelines are up to date.

8.2.5 To receive additional application material from a candidate after the submission deadline and prior to committee review if the new material reflects a change in status of items in the application.

8.2.6 To consider only the candidate’s application in making recommendations on the candidate’s promotion and/or tenure.

9 Section 5.13 duplicates Article 8 of the Bylaws of the Faculty Mercer University School of Medicine
Chronology of REVISIONS, APPROVALS, EDITS & UPDATES OF SECTION 5:

- 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 Faculty.

- 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 reinstated on recommendation of P&T Committee and approval by the Executive Council through an electronic vote. Document updated by M. Dent.
6.1 RESEARCH POLICIES .................................................................................................................... 1

6.1.0 University Support of Research Activities................................................................. 1
6.1.1 Openness of Research ............................................................................................ 1
6.1.2 Patents and Copyrights.............................................................................................. 1
6.1.3 Research on Human Subjects .................................................................................. 1
6.1.4 Use of Animals in Research..................................................................................... 2
6.1.5 Environmental Safety ............................................................................................... 2
6.1.6 Fraud and/or Misconduct in Research................................................................. 2
6.1.7 Self-Funded Research Requiring MUSM Research Facilities ......................... 3
6.1 RESEARCH POLICIES

6.1.0 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 provides start-up funds to aid new investigators and to initiate research projects.

6.1.1 Openness of Research

All research conducted at MUSM is public or non-classified. MUSM places no restraints on the publication of research results that faculty and students conduct in a scholarly manner. 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.

6.1.2 Patents and Copyrights

Mercer University’s patent policy:

- promotes the University's policy of encouraging scientific research and scholarship,
- serves the public interest by providing procedures through which inventions that arise in the course of University research may be made available to the public,
- establishes principles and uniform procedures for determining the rights and obligations of the University, inventors, and research sponsors and
- encourages, assists, and provides tangible rewards to members of the University community who make inventions processed under the policy.

Investigators should notify the University promptly of any invention believed to be patentable which is conceived or developed wholly, or in part, with University funds or facilities or in the course of any University-administered grant or contract. Inventions arising from research sponsored by governmental or private agencies are controlled by the terms of the applicable grant or contract, and the inventor shall cooperate with the University to ensure that all obligations to research sponsors are met.

Mercer University does not claim any interest in books, journal articles or other traditional copyrightable material developed by its faculty members. Under certain circumstances, the University may claim an interest in computer software, videotapes and similar property developed with University funds or facilities. The University will share with the employees involved in the development any income derived from the commercialization of such property.

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: https://provost.mercer.edu/www/mu-provost/handbooks/upload/2014-University-wide-Faculty-Handbook.pdf

6.1.3 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/

6.1.4 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/

6.1.5 Environmental Safety

Mercer University complies with federal and state requirements for the use and disposal of radioactive and/or other hazardous materials. Investigators can obtain information concerning radioactive materials from the Radiation Safety Officer. The University Health and Safety Office has information, regulated forms, and copies of policies for obtaining approval for research or teaching programs using recombinant DNA or drugs, hazardous chemicals, and potentially infectious materials or organisms.

6.1.6 Fraud and/or Misconduct in Research

Mercer University has adopted a policy on fraud and/or misconduct in research. This policy addresses the intentional fabrication or falsification of research data; the plagiarism of research publications; the failure to obtain proper approval by the responsible committee for research that involves human subjects, animal subjects, radioactive materials, hazardous chemicals or bio-hazardous substances; and fraud in research. Faculty can access details of the policy in the Mercer University Faculty Handbook -- Section 3.5. https://provost.mercer.edu/www/mu-provost/handbooks/upload/2014-University-wide-Faculty-Handbook.pdf
6.1.7 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) 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. Over draw
- 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)
Section 7 Conflict of Interest

Updated 10/2017

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MERCER UNIVERSITY SCHOOL OF MEDICINE (MUSM)
Conflict of Interest Policy

Part I: General Policy on Conflict of Interest

A. Introduction
This MUSM policy is based on the University “Policy on Conflict of Interest for Government‐Sponsored Programs” 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.

B. 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.

C. Basic Principles
Full‐time members of the faculty and professional and administrative staff owe their primary professional responsibility to MUSM, and 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.

Mercer University School of Medicine does not permit 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 interest must obtain prior approval from the Dean of the School or the Dean’s designee.

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.

D. Annual Disclosure

In order to prevent conflicts of interest and commitment, it is the policy of Mercer University School of Medicine that on or before April 30th of each year each faculty member will complete a Conflict of Interest/Commitment Form along with the Professional Development Plan/Annual Review, which will be made a matter of record.
Part II Specific Policy on Financial Conflicts of Interest

A. Definitions

**Investigator** means the principal investigator, co-principal investigators, and any other person employed full- or part-time by MUSM who is responsible for the design, conduct, or reporting of consulting, research, education, or other professional activities funded or proposed for funding by any source within or outside the University.

**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). The term does not include:

- Salary, royalties or other remuneration from the University or any ownership rights held by the University, if the School or University is an applicant for a recipient of funding under the Small Business Innovation Research Program or Small Business Technology Transfer Program;
- Income from seminars, lectures, or teaching engagements sponsored by public or nonprofit entities;
- Income from service on advisory committees or review panels for public or nonprofit entities;
- An equity interest that, when aggregated for the investigator and the investigator’s spouse and dependent children, meets both the following tests: does not exceed $5,000 in value as determined through reference to public prices or other reasonable measures of fair market value and does not represent more than a 5% ownership interest in any single entity; or
- Salary, royalties or other payments that, when aggregated for the investigator and the investigator’s spouse and dependent children, are not expected to exceed $5,000 during the next twelve month period.

B. Required Financial Disclosures

Each investigator must disclose to the Dean all significant financial interests of the investigator (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 funded or proposed for funding by any source within or outside the University or
- in those entities whose financial interests would reasonably appear to be affected by such activities.

The financial disclosures required above must be provided prior to the time a proposal for funding is submitted. Such financial disclosures either must be updated during the period of the award, on an annual basis or as new reportable significant financial interests are obtained.
C. Determination and Management of Conflicts of Interest

The Dean will review the financial 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 a significant financial interest could directly and significantly affect the design, conduct, or reporting of consulting, research, educational, or other professional activities funded by sources 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 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 significant financial interests;
- divestiture of significant financial interests; or
- severance of relationships that create conflicts.

If the Dean determines that imposing conditions or restrictions would be either ineffective or inequitable and that the potential negative impacts that may arise from a significant financial interest are outweighed by interests of educational or scientific progress, technology transfer, or the public health and welfare, then the Dean may recommend that consulting, research, education, or other professional activity be allowed to go forward without imposing such conditions or restrictions. Such a recommendation will be forwarded to the Provost for review and approval.

If the Dean determines that a conflict of interest cannot be satisfactorily managed, the Dean will promptly notify the University’s General Counsel, 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.

D. 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.
Disclosure of significant financial interests shall be by completion of the University form “Investigator Financial Disclosure,” which must accompany all proposals for acquiring financial support for projects.

The University is required to certify in proposals for funding made to certain governmental agencies, including NSF and HHS 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 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.

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

E. 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.

F. Records

Records of all 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.

G. 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 are determined then a negative report shall be transmitted.
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”).

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.

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.

Scope of Policy
This policy incorporates the following types of interactions with industry:

I. Gifts, meals and compensation
II. Site access by sales and marketing representatives
III. Provision of scholarships and other educational funds to students and trainees
IV. Support for educational and other professional activities
V. Disclosure of relationships with industry
VI. Training of students, trainees, and staff regarding potential conflict of interest in industry interactions
VII. Enforcement and sanctions of policies
I. Gifts, Meals and Compensation

A. 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.

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

C. Individuals may not accept gifts, meals or compensation for prescribing or changing a Patient’s prescription.

D. 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.

E. 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).

II. Site Access by Pharmaceutical Sales and Medical Device Marketing Representatives

A. 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.

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

C. 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.

III. Provision of Scholarships & Other Educational Funds to Students & Trainees

A. 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:
   1. The School of Medicine department, program or division selects the student or trainee.
   2. The funds are provided to the department, program, or division and not directly to student or trainee.
   3. The department, program or division has determined that the funded conference or program has educational merit.
IV. Support for Educational and Other Professional Activities

A. Individuals should be aware of the Accreditation Council for Continuing Medical Education (ACCME) Standards for Commercial Support (2014). 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 (accessed 10-7-17): http://www.acme.org or: http://www.accme.org/requirements/accreditation-requirements-cme-providers/standards-for-commercial-support

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.

B. 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.

C. 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.

D. 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:
1. The meeting sponsor full discloses any financial support by industry.
2. The speaker determines meeting or lecture content, not the industrial sponsor.
3. The lecturer is expected to provide a fair and balanced assessment of therapeutic options and to promote objective scientific and educational activities and discourse.
4. 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.

5. The lecturer makes clear that content reflects individual views and not the views of Mercer University School of Medicine.

V. Disclosure of Relationships with Industry

A. 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.

B. In scholarly publications, individuals must disclose their related financial interests in accordance with the International Committee of Medical Journal Editors (accessed at http://www.icmje.org). 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).

C. 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.

D. MUSM allows employees of the School to participate in promotional 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.

E. 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.

F. 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.

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

2. The term “immediate family” includes the individual’s spouse or domestic partner or dependent children.
VI. Training of Students, Trainees, & Staff Regarding Potential Conflict of Interest in Interactions with Industry
   A. 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.

VII. Enforcement and Sanctions of Policies
   A. 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
MUSM - Conflict Of Interest/Commitment Form

List below all external institutions, companies, and other organizations for which you provide professional, research, teaching, or consulting activities and indicate the type of activity you provide and the number of days/year you spend working with each entity. (Use the back of this form if additional space is required.)

_____ I have no Conflict of Interest activities to report

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<th>Name of External Entity</th>
<th>Type of Activity</th>
<th># Days/Year</th>
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I have reviewed the Conflict of Interest/Commitment Policy of the Mercer University School of Medicine. By signing this form, I am reporting that I believe that my outside consulting activities, external employment, and outside business interests do not represent possible conflicts of interest or commitment.

_____________________________   __________________
(Signature of Faculty Member)   (Date)

I have reviewed the external activities of this faculty member and agree that there is no conflict of interest or commitment with the faculty member’s assigned responsibilities within the School of Medicine.

_____________________________   __________________
(Signature of Department Chair)   (Date)

_____________________________   __________________
(Signature of Dean)   (Date)
Mercer University Research Financial Conflict of Interest Policy

The Mercer University Research Financial Conflict of Interest Policy may be accessed at: https://orc.mercer.edu/mu-orc/integrity/fcoi/upload/Revised-MU-Policy-on-FCOI_mod-Rev3-2.pdf

The Policy, effective August 24, 2012 includes the following information:

Introduction

I. PURPOSE AND SCOPE
II. DEFINITIONS
III. STATEMENT
IV. DISCLOSURES BY COLLABORATORS
V. REVIEWS AND REPORTING
VI. RECORDS ACCESS AND RETENTION
VII. SANCTIONS
VIII. REFERENCES AND RELATED POLICIES
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(updated 9/2017)

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8.5 MUSM Policies and Procedures Regarding Equipment Leaving Campus ..................... 10
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8.9 Information Technology ....................................................................................................... 18
8.10 Room Scheduling ................................................................................................................ 18
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8.1 Eligibility to work

All employees, or potential employees, must show eligibility to work in the United States on or before their first day. Faculty, or hiring managers, should refer all issues related to work eligibility, including immigration issues, to the Mercer University Department of Human Resources. Consult with Candace Whaley, Director of Human Resources, 478-301-5121 or visit the Department of Human Resources website https://hr.mercer.edu/contact/

8.2 Sabbatical Leave and Leave of Absence

Mercer University Faculty Handbook (Revised 2014, Section 2.17, pp 44-45)

2.17 Sabbatical Leaves

2.17.1 Sabbatical Leaves
The purpose of the program of sabbatical leaves is to provide opportunity for continued professional growth and intellectual development through study, research, or writing. Normally travel away from the campus is involved.

1. Eligibility
An individual is eligible for a sabbatical leave after six years of full-time service as a faculty member in the University. Any previous time spent on leave is not considered in determining years of service. A faculty member within two years of retirement is not eligible. A sabbatical leave is not considered a form of deferred compensation, a faculty right, or an automatic benefit. Years of service alone do not determine eligibility. Rather, leaves are awarded according to the merits of the leave proposal and the ability of the academic department to offer a full course of study during the individual's absence.

2. Application Procedure
No later than November 1 in the year prior to the expected leave, the faculty member must submit to the Dean a letter of application and a documented proposal that states the purposes of the leave and a plan of action for the period of the leave. The application must be approved by the Dean, who may require the approval of the department chair and/or a faculty committee. The application must also be approved by the Provost. Special consideration will be given to applications which hold promise of enhancing the applicant's professional effectiveness and future service to the institution.

Notification of those selected for sabbatical leaves will be made by February 1, and the specific terms of the leave, including salary, will be agreed upon by all parties by April 1.

3. Duration and Terms
Ordinarily, sabbatical leaves are for one semester at full salary or for one year at one-half salary. If a recipient of a sabbatical leave accepts income from other sources during the sabbatical leave, the President may require adjustment of the University salary.

Acceptance of a sabbatical leave will not interfere with the normal opportunity for annualized increases in salary. The period of the leave counts toward eligibility for promotion on the same basis as a period of on-campus instruction. A faculty member on sabbatical leave retains the rights, benefits, and privileges
of a full-time faculty member, including retirement and insurance benefits based upon the salary actually paid during the sabbatical period, housing, and tuition credit for dependents.

4. Institutional Limitations
No more than ten (10) percent of the full-time faculty may be on sabbatical leave in any given year. In addition, the academic department must be able to cover the essential workload of the faculty member during the period of his/her absence. Any faculty member who accepts a sabbatical leave is expected to return to the University for at least one (1) year or repay the University for the compensation received during such leave.

5. Evaluation
Within three (3) months of returning from a sabbatical leave, a faculty member shall submit to the Dean of the college or school a written account of the work accomplished during the leave and an evaluation of the extent to which the objectives of the leave have been achieved.

MUSM imposes an additional requirement: faculty member is required to make a verbal presentation to the faculty upon completion of the sabbatical.
### MERCER UNIVERSITY SCHOOL OF MEDICINE

- **Pre-Sabbatical Request Form**

<table>
<thead>
<tr>
<th>Name of Applicant:</th>
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<tbody>
<tr>
<td>Department:</td>
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<tr>
<td>Proposed Dates for Sabbatical:</td>
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### PROPOSAL

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<th>Title of Sabbatical:</th>
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<tr>
<td>Sabbatical Institution:</td>
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<tr>
<td>Contact Information of Primary Mentor:</td>
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</table>

### 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.

5. Specific person responsible for academic assignments. (Attach a letter of agreement).

- Name:
- Title:

**APPROVAL SIGNATURES**

_________________________________________     ________________________
Applicant’s Signature                      Date

_________________________________________     ________________________
Department Chair’s Signature                Date

_________________________________________     ________________________
Dean’s Signature                           Date

_________________________________________     ________________________
Associate Dean for Faculty Affairs          Date Recorded

Approved 9/17
### Post-Sabbatical Leave Report

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<th>Name of Recipient:</th>
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<tbody>
<tr>
<td>Department:</td>
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<tr>
<td>Dates of Sabbatical:</td>
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*The request for a final sabbatical report is contained within the Mercer University Faculty Handbook.*

---

**Mercer University Faculty Handbook (Updated July 1, 2014)**

#### 2.17.1 Sabbatical Leaves

#### 5. Evaluation

*Within three (3) months of returning from a sabbatical leave, a faculty member shall submit to the Dean of the college or school a written account of the work accomplished during the leave and an evaluation of the extent to which the objectives of the leave have been achieved.*

*• MUSM also requires a verbal presentation to the faculty.*

---

**FINAL REPORT**

<table>
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<th>Title of Sabbatical:</th>
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<tr>
<td>Sabbatical Institution:</td>
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<tr>
<td>Contact Information of Primary Mentor:</td>
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</table>
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
   - Mercer University

5. Proposed date of faculty seminar. _________________________________

**APPROVAL SIGNATURES**

Applicant's Signature

Department Chair's Signature

Dean's Signature

Associate Dean for Faculty Affairs

Approved 1/24/07
8.3 Faculty Absences

The School of Medicine follows the Faculty absence policies, sick leave policies, FMLA, and leaves of absence policies of the University as described in the Mercer University Faculty Handbook: [https://provost.mercer.edu/www/mu-provost/handbooks/upload/2014-University-wide-Faculty-Handbook.pdf](https://provost.mercer.edu/www/mu-provost/handbooks/upload/2014-University-wide-Faculty-Handbook.pdf) (Revised 2014, Section 2.17, pp 45-48)

This information is also available at the Benefits and Payroll website [http://benefitspayroll.mercer.edu/www/mu-benefitspayroll/benefits/upload/LeavePolicy.pdf](http://benefitspayroll.mercer.edu/www/mu-benefitspayroll/benefits/upload/LeavePolicy.pdf)

**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/faculty-staff/finance/](https://medicine.mercer.edu/faculty-staff/finance/)
Mercer University School of Medicine
Department Leave Request/Approval Form for Faculty

**Leave Request must be submitted to Department Chair 10 working days in advance.**

(If Faculty Member practices for Mercer Medicine, please obtain covering physician signatures and notify Mercer Medicine prior to submission to Department Chair. Leave is not approved until signed by Department Chair.)

Faculty Name:_________________________________

**Request for Leave (Please indicate type):**

( ) Vacation  Date(s):_______________________

( ) Sick   Date(s):_______________________

Please indicate type of sick leave below:

_____ Faculty Sick Leave – (If more than 3 consecutive days, must contact Human Resources.)

_____ Workers’ Comp Leave

_____ Family Medical Leave – (Must be approved by Human Resources.)

( ) Unpaid Leave Date(s):_______________________

Purpose of unpaid leave:________________________________________________________________________

(Must be approved by Chairman, Dean of MUSM, and HR.)

( ) Conference Date(s):_______________________

(Includes seminars, workshops, off-site training courses, educational conferences, etc.)

**NOTE: Separate pre-authorization required for conference reimbursement.**

( ) Jury Duty  Date(s):_______________________  (Must provide copy of orders to HR.)

( ) Military Leave Date(s):_______________________

Time out of office:_______________________

( ) Presentation/Talk Date(s):_______________________

Other Leave: Date(s):_______________________

Please describe:______________________________________________________________________________

__________________________________________________________________________________________

Physician(s) Providing Coverage (clinical faculty) – have covering physician initial & date:

Name:_________________________  Acknowledgement: _____  Date: ____________

Name:_________________________  Acknowledgement: _____  Date: ____________

Employee’s Signature:_________________________  Date: ____________

Mercer Medicine Notified:_________________________  Date: ____________

Sufficient leave available: ____________  Logged to master calendar: ____________

Department Chair’s Approval:_________________________  Date: ____________

MUSM Dean’s Approval (if necessary):_________________________  Date: ____________

HR Approval (if necessary):_________________________  Date: ____________
8.4 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/www/mu-medicine/faculty-staff/upload/MUSM-Faculty-Handbook-3-a-ByLaws-of-Faculty-9-2-17.pdf

A description of the committees, their responsibilities, meeting schedules, and meeting minutes are available at https://medicine.mercer.edu/faculty-staff/committees/

8.5 MUSM Policies and Procedures Regarding Equipment Leaving Campus
(Policy effective May 23, 2006, reviewed September 2017)

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:
  o 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.
  o 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
   (Policy effective May 23, 2006; reviewed September 2017)

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:

  o 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.
  o 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
8.6 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.

The Mercer University School of Medicine does not recognize any per diem rates for reimbursement of travel expenses.

Travel supported by MUSM requires a Travel Authorization Form that the faculty or staff member completes prior to travel. A copy of this form is available on the Website of the Finance Office at http://medicine.mercer.edu/faculty-staff/finance/forms/. It is required that this form be completed and submitted to the department chair and Finance Office two weeks prior to travel unless there are extenuating circumstances.

Within two weeks of completing travel, the faculty member must complete a Travel Expense Reconciliation, including original receipts, in order to request reimbursement of travel expenses. The MUSM Travel Reimbursement Policy (reproduced below) provides additional details related to reimbursement of travel expenses.

Mercer University Travel Policy
(Updated June 20, 2017)

MUSM Travel Policy

Mercer University School of Medicine Travel Reimbursement Policy
(Updated December 13, 2017)

Overview
The Mercer University Travel Reimbursement Policy must be adhered to unless restricted further by the following MUSM Travel Reimbursement Policy. MUSM will only reimburse travelers for necessary and reasonable expenses incurred for properly pre-authorized MUSM business travel. Travel reimbursement is limited to the individual traveling for MUSM business and not for those accompanying that individual.

Based on the requirements of IRS ruling (Revenue Ruling 2006-56), Accounts Payable must ensure that Mercer University School of Medicine’s employee accountable plan requires the following:

- There must be a business connection and the expense is reasonable.
- There must be an adequate accounting for the expense within two weeks of the completion of the travel. If a complete and accurate Travel Expense Reconciliation Form is not turned in to MUSM Finance Office within this timeframe, the expense is subject to not being reimbursed.
- All excess reimbursements must be repaid within two weeks of the completion of the travel.
**Traveler Responsibility**

Individuals traveling on behalf of MUSM should:

- Obtain pre-authorization for travel at least two weeks prior to initial travel date by filling out the MUSM Travel Authorization Form. [https://medicine.mercer.edu/www/mu-medicine/faculty-staff/finance/forms/upload/travelauthorizationexcel.xls](https://medicine.mercer.edu/www/mu-medicine/faculty-staff/finance/forms/upload/travelauthorizationexcel.xls) Travel Authorization Forms should include original signatures of person requesting travel and direct supervisor and then forwarded to the MUSM Finance Office for final approval. Do not make any travel arrangements until final approval is obtained.

- Exercise good judgment when incurring travel expenses.

- Travelers are responsible for ensuring that incurred expenses comply with all applicable policies and authorizations and are supported with valid detailed receipts and other documentation as required.

- The traveler’s original signature on the Travel Expense Reconciliation Form affirms that these responsibilities have been met. Mercer does not reimburse expenses for spousal/dependent travel. [https://medicine.mercer.edu/faculty-staff/finance/forms/](https://medicine.mercer.edu/faculty-staff/finance/forms/)

**Documentation**

The traveler is responsible for maintaining complete and accurate records and submitting receipts and/or other documentation for expenses incurred as listed below.

- Original detailed receipts.
- No sales tax has been paid (if applicable). MUSM is exempt from sales tax purchases in the State of Georgia, Florida, Tennessee, and Ohio. For specific questions regarding the payment of sales tax, please contact Charles Mize, Director of Purchasing or Becky Cauley, Director of Accounts Payable and Fixed Assets.
- The account charged has available funding/budget (This can vary based on expected funding for donor accounts.).
- The purchase was an allowable expense by University policies.
- The reimbursement form (Travel/Request for Payment/Travel Advance) is approved by the appropriate person (This approval provides assurance that there is a business connection and the expense was required.).
- The Travel form has proper documentation for mileage and other reimbursement in accordance with IRS guidelines for accountable plans.

In the case where an original receipt is lost or destroyed, the employee must make an effort to obtain a duplicate receipt. If the employee is unable to obtain a duplicate receipt, the employee must submit the completed Lost or Stolen Receipt Affidavit Form.

**Transportation**

Travelers should use the most economical mode of available transportation during MUSM approved trips. MUSM will reimburse the traveler at the IRS approved mileage rate for use of a personal automobile. The University has a preferred pricing agreement with Enterprise Rental. To take advantage of preferred pricing and maximize the cost savings, travelers are encouraged to make rental car arrangements with the preferred pricing vendor, Enterprise. The traveler should make airfare arrangements at least three weeks prior to travel to obtain the lowest fare possible.

Air travel will be reimbursed using the most economical airfare available. Any exceptions to the most economical airfare (medical reasons) should be documented and approved. The traveler is responsible for any expense incurred as a result of lost tickets or change in itinerary due to personal reasons. Expenses incurred due to lost tickets or change in itinerary for business reasons must be documented.
Lodging
MUSM will reimburse the traveler for the actual costs of the accommodations within a reasonable level. All lodging receipts must be itemized. There may be separate or additional travel requirements for some grants or contracts.

Meals
MUSM does not pay per diem meal expenses. MUSM will reimburse the traveler for actual cost of meals within reasonable limits, not to exceed $10.00 for breakfast, $20.00 for lunch, and $30.00 for dinner. Tips in excess of 20% will not be reimbursed. Alcoholic beverages are not an allowable expenditure. There may be separate or additional requirements for meals by some grants or contracts.

Other Travel Expenses
Other reimbursable incurred expenses are registration fees, internet access, parking fees, and expenses for baggage handling. Please retain any detailed documentation to support these expenses. Non-reimbursable expenses include parking tickets, lost or stolen property, and expenses not related to the approved travel assignment (movies, gym fees, etc.). Any tips outside of meals must be within reasonable limits.

Travel Advances
Travel Advance Forms and the Travel Expense Reconciliation Forms related to a travel advance are submitted to the Systems Accountant to approve and process. Travel Advances should be requested no more than 30 days prior to the trip and must be reconciled within 30 days of the end of travel. There can only be one outstanding travel advance per employee.

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Additional Transportation 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. The University Policies and Procedures Manual provides instruction on how to apply for inclusion on this list. [https://benefitspayroll.mercer.edu/benefits/approved-drivers.cfm](https://benefitspayroll.mercer.edu/benefits/approved-drivers.cfm) 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.

**8.7 Office of Marketing Communications**

MUSM offers a poster printing service for faculty, staff and students. The Office requests a two-week lead-time for all poster print requests. The request form, poster templates, and poster basics are available on the MUSM website at [https://medicine.mercer.edu/faculty-staff/communications/](https://medicine.mercer.edu/faculty-staff/communications/)
8.8 Purchasing
The Purchasing Office policies may be accessed at
https://purchasing.mercer.edu/mupurchasing/policiesandprocedures/upload/PurchasingPoliciesforMercerUniversity100507.pdf

- Purchasing:
  Mercer University School of Medicine provides several basic purchasing methods:
  - CampusVantage financial system - Requisitions and Purchase Orders
  - Procurement card system
  - Request for payment

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:
  1) No other means are available for procuring the needed item(s) or
  2) MUSM achieves a significant savings by individual purchase versus institutional purchase of the item(s).

Purchasing through the CampusVantage financial system: Persons who have been authorized to spend money on behalf of the Medical School can use the CampusVantage 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 cards to the persons within their departments that are authorized to make purchases for the department. Faculty with grants to administer can request a procurement card for use against that grant account. Training is required before the card can be issued due to the online reconciliation process for monthly transaction reporting. Requests for procurement cards are available from and must be signed by the Department Chair and the Executive Director of Finance at the Medical School.

Request for Payment: Forms are available from the MUSM Finance Office website. https://medicine.mercer.edu/faculty-staff/finance/

Purchasing Computer Hardware and Software: ALL PURCHASES OF COMPUTER HARDWARE AND SOFTWARE MUST BE PROCESSED USING THE UNIVERSITY CAMPUSVANTAGE PURCHASING SYSTEM. No other purchasing method will be accepted for these purchases.

- Letterhead and Business Cards – All campuses:
  Mercer University has a contract with Staples as the sole provider for approved letterhead, envelopes, and business cards for all Mercer departments. Business cards can be ordered for faculty and professional staff. Business cards are usually not issued for support staff personnel but the responsible budget administrator can make an exception when necessary. Place orders directly with Staples and make payment by procurement card. https://www.staplesadvantage.com (log in to the system, click down arrow under “Your Shopping Lists” select “Mercer HSC Medicine Stationery”). Review for accuracy before submitting the order.
8.9 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.

All telecommunications services can be ordered at the Information Technology website http://it.mercer.edu/faculty; helpdesk@mercer.edu or extension 2922.

8.10 Room Scheduling

Room requests for the Medical School Atrium, Auditorium, Lobby, Education Conference Rooms, Room 1-B, Distance Learning Classrooms, Dean’s Conference Rooms (Macon, Columbus and Savannah campuses) are scheduled through the School of Medicine. Check Room Availability and submit a reservation http://medicine.mercer.edu/faculty-staff/roomreservations

8.11 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.