Program Mission Statement:

"The mission of the joint Master of Public Health Program at Eastern Virginia Medical School (EVMS) and Old Dominion University (ODU) is to train students, in order to equip them with vibrant and dynamic public health knowledge and skills for serving health needs of populations, and for improving the public's health."

Memorandum of Agreement, 2009
Eastern Virginia Medical School and Old Dominion University
## List of Appendices

<table>
<thead>
<tr>
<th>Appendix</th>
<th>Title of Appendix</th>
</tr>
</thead>
<tbody>
<tr>
<td>App A</td>
<td>Memorandum of Agreement Between EVMS and ODU Sept 2009</td>
</tr>
<tr>
<td>App B</td>
<td>EVMS Strategic Plan 2011-2013</td>
</tr>
<tr>
<td>App C</td>
<td>ODU Strategic Plan 2009-2014</td>
</tr>
<tr>
<td>App D</td>
<td>EVMS Mission, Vision, and Goals 2010</td>
</tr>
<tr>
<td>App E</td>
<td>Certificate Program in Public Health: Leadership</td>
</tr>
<tr>
<td>App F</td>
<td>Certificate Program in Public Health: Core Competencies in Public Health</td>
</tr>
<tr>
<td>App G</td>
<td>Recommended MPH Curriculum Plan Per Track</td>
</tr>
<tr>
<td>App H</td>
<td>EVMS/ODU MPH Program Seminars, 2007-2011</td>
</tr>
<tr>
<td>App I</td>
<td>EVMS and ODU Accreditations and Degree Programs</td>
</tr>
<tr>
<td>App J</td>
<td>EVMS Office of Planning and Health Professions Organizational Chart</td>
</tr>
<tr>
<td>App K</td>
<td>ODU College of Health Sciences Organizational Chart</td>
</tr>
<tr>
<td>App L</td>
<td>MPH Program Organizational Chart</td>
</tr>
<tr>
<td>App M</td>
<td>Old Dominion University Graduate Student Catalog</td>
</tr>
<tr>
<td>App N</td>
<td>MPH Program Student Handbook</td>
</tr>
<tr>
<td>App O</td>
<td>EVMS Faculty Handbook</td>
</tr>
<tr>
<td>App P</td>
<td>EVMS Student Handbook</td>
</tr>
<tr>
<td>App Q</td>
<td>ODU Faculty Handbook 2011 (Table of Contents and link to online version)</td>
</tr>
<tr>
<td>App R</td>
<td>Policies on Faculty Support of Students</td>
</tr>
<tr>
<td>App S</td>
<td>Constitution of the EVMS and ODU Master of Public Health Program</td>
</tr>
<tr>
<td>App T</td>
<td>EVMS Health Professions Alumni Association By-Laws</td>
</tr>
<tr>
<td>App U</td>
<td>EVMS-ODU MPH Program Committee Rosters 2010-2011</td>
</tr>
<tr>
<td>App V</td>
<td>EVMS/ODU Community Practicum Handbook</td>
</tr>
<tr>
<td>App X</td>
<td>Epidemiology and Biostatistics Core Time and Effort Estimation in Year 2010</td>
</tr>
<tr>
<td>App Y</td>
<td>MPH Program 2010 Alumni Survey Report</td>
</tr>
<tr>
<td>App Z</td>
<td>Peer-Reviewed Publications EVMS/ODU Primary/Secondary Faculty August 2011</td>
</tr>
<tr>
<td>App AA</td>
<td>Community Practicum Student Projects Academic Years 2007/2008 - 2010/2011</td>
</tr>
<tr>
<td>App BB</td>
<td>2006 – 2011 Faculty Presentations</td>
</tr>
<tr>
<td>App CC</td>
<td>2006 – 2011 Faculty Consultation and Technical Assistance</td>
</tr>
<tr>
<td>App DD</td>
<td>2007 – 2011 Faculty Membership of Non-Academic Boards And Committees</td>
</tr>
<tr>
<td>App EE</td>
<td>2007 – 2011 Faculty Membership in Professional Organizations</td>
</tr>
<tr>
<td>App FF</td>
<td>2006 – 2011 Faculty Service on Editorial Boards of Professional Journals</td>
</tr>
<tr>
<td>App GG</td>
<td>Student Reported Presentations and Teaching 2007-2010</td>
</tr>
<tr>
<td>App HH</td>
<td>2007 - 2011 Student Development of Community Projects and Community Leadership</td>
</tr>
<tr>
<td>App II</td>
<td>Student Membership in Volunteer and Professional Organizations 2007 - 2011</td>
</tr>
<tr>
<td>App JJ</td>
<td>Alumni Survey 2010</td>
</tr>
<tr>
<td>App KK</td>
<td>Graduate Program in Public Health Informational Brochures 2011</td>
</tr>
<tr>
<td>App LL</td>
<td>EVMS/ODU MPH Student Orientation Agenda 2010</td>
</tr>
</tbody>
</table>
Memorandum of Agreement for the Graduate Program in Public Health at Eastern Virginia Medical School and Old Dominion University

Vision

The joint Eastern Virginia Medical School (EVMS)—Old Dominion University (ODU) MPH degree program will combine the strengths of both institutions to improve the public's health. The program will work toward building a collegial team of MPH faculty between EVMS and ODU, and ultimately toward the establishment of a joint School of Public Health.

Mission

The mission of the joint Master of Public Health Program at EVMS and ODU hereafter referred to as the “Program” is to train students in order to equip them with vibrant and dynamic public health knowledge and skills for serving health needs of populations, and for improving the public's health.

To implement and sustain this Vision and Mission, EVMS and ODU enter into this Memorandum of Agreement. Both EVMS and ODU are in agreement to the following provisions:

1. The Program will be governed by an Oversight Committee to consist of the EVMS Vice-Provost for Planning and Health Professions, the ODU Dean of the College of Health Sciences, the MPH Program Director, and the MPH Program Associate Director, and one member from the community, who shall be jointly appointed by EVMS and ODU.

2. The Program will have a Program Director, who will be appointed from EVMS and an Associate Director, who will be appointed from ODU. Program administration will be shared between the two institutions. Program committees will have members from both institutions and there will be regular joint MPH faculty meetings. The Program Director and Associate Director will work together to set agenda, schedule meetings and produce appropriate minutes and follow through actions.

3. Joint Curriculum and Faculty Committees will review and approve faculty, curricula, program outcomes and evaluation processes. Faculty will be selected from full-time, community and adjunct faculty from both institutions and from other appropriate institutions.

4. EVMS will be solely responsible for provision of the Epidemiology and Health Administration Tracks and ODU will be solely responsible for provision of the Environmental Health and Health Promotion tracks. EVMS will be solely responsible for development and provision of a Biostatistics Track. ODU will join
Appendix A

EVMS in offering a Generalist Track to be offered on both campuses when the required faculty complement is available.

5. EVMS will be the school of record for the Program. Ultimately, all student records will be maintained at EVMS.

6. The Program will have a single application process. Students will be considered for admission under a single standard. Each Institution will decide which students to admit to their respectively administered Program Tracks.

7. The Program will have a single curriculum in which a balanced complement of courses will be offered on both campuses. Each institution will coordinate the curriculum specific to its respective tracks, with oversight by the Program's Curriculum Committee.

8. EVMS and ODU will coordinate the development and delivery of distance learning instruction.

9. EVMS and ODU will provide educational support services (e.g. library access, computer lab access, etc.) for all students in the Program.

10. The Program will have one tuition structure. Tuition and fees will be paid to EVMS and Program-generated revenue will be shared by the Institutions on a student credit hour basis. Collection of tuition will begin for students who matriculate after the date of execution of this document. Students matriculated before this date will continue in the Program under the procedures in effect at the time of their admission.

11. Each institution will prepare annual budgets through its established policy and procedures, and will be solely responsible for all associated expenses and revenues. Excess revenues in the Program budget at the end of the fiscal year will retained by each institution.

12. Each institution will pay its own faculty costs and each institution will reimburse the other for transmission costs associated with distance learning courses on a per course basis. No other costs or overhead payments will be made other than for distance learning transmission.

13. The Program Director is responsible for the administrative oversight of the program, including routine contacts and correspondence with the Council on Education for Public Health (CEPH), the State Council on Higher Education for Virginia (SCHEV), or other entities as necessary. The Program Director will confer with the Associate Director on such routine matters as appropriate. Correspondence or transmission of official reports such as a Self-Study or notification of substantive program changes will be made by the Program Director after advance approval by the MPH Oversight Committee and the Provosts of
each institution. The Associate Director is expected to contribute to these reports before submission.

14. Degrees will be awarded jointly by the institutions. Each institution will report the graduates from the Program Tracks it coordinates, except for students in the General Track who will be counted 50:50 by the two institutions.

15. This agreement is effective immediately upon the date of the latest signature below. This agreement shall be subject to revision or modification from time to time by mutual written agreement. This agreement may be terminated by either EVMS or ODU with two year’s written notice given to the other institution and with provisions to insure that all currently enrolled students complete their degrees in a timely manner.

Carol Simpson, Provost
Old Dominion University

Date 9/16/09

Gerald J. Pepe, Provost/Dean
Eastern Virginia Medical School

Date 9/16/09

Mark Babashanian, Vice President
for Finance and Administration

Date 9/14/09

Approved as to form:

By:
Office of University Counsel
Office of University Counsel
Breaking New Ground

the future begins now

A Strategic Plan for
Eastern Virginia Medical School
2011-2013

16 September 2010
Breaking New Ground
A Strategic Plan for Eastern Virginia Medical School

Overview ................................................................. 5

Our mission & vision .................................................. 7

Our core values & long-term goals ................................. 9

Measuring our progress .............................................. 10

Executive budget summary ........................................ 17

Dashboard strategic metrics ...................................... 17
By becoming a stronger strategic partner and a hub for research and innovation in the medical and health sciences, we can increase our value as a local, regional and national resource.
Breaking New Ground

*A Strategic Plan for Eastern Virginia Medical School (2011-2013)*

Roughly five decades ago, a group of dedicated physicians and community leaders decided to improve the quality of health care in Southeast Virginia. The idea of a medical school in Hampton Roads gained momentum in 1964 when local citizens — concerned about the shortage of physicians and scarcity of specialized care in the region — persuaded the Virginia General Assembly to create a medical authority charged with starting a school. In 1973, Eastern Virginia Medical School (EVMS) welcomed its first class of students.

Today, EVMS holds an honored position in American history as the only school of medicine founded and funded by a grassroots effort of the local community. Over the years, EVMS has more than satisfied its original purpose, both educating health-care providers and serving as a magnet to attract much-needed medical specialists to a region where many basic services were lacking.

But, once again, our community — and the nation — is in need. We must prepare for the leading edge of the Silver Tsunami: the first wave of baby boomers who are nearing retirement age and will require more medical care. Quite simply, our country does not have enough physicians and health-care professionals to meet this growing demand.

The Association of American Medical Colleges (AAMC) has called for medical schools across the country to increase their enrollment by 30 percent by 2015. Former Virginia Governor Timothy M. Kaine echoed that call, and the Virginia General Assembly provided Eastern Virginia Medical School with $59 million toward an $80 million project that will result in a new medical education and research building and significant renovations to Lewis Hall.

This expansion will allow us to increase our MD and physician assistant (PA) class sizes and help offset the expected physician shortages in our region and across the country. But our impact is not limited to graduating MD and PA students. Eastern Virginia Medical School already serves as an economic driver for the Hampton Roads region. By becoming a stronger strategic partner and a hub for research and innovation in the medical and health sciences, we can increase our value as a local, regional and national resource.
Envisioning a Bold Future

Development of a new strategic plan for EVMS has been a year-long process and involved stakeholders from across the campus community. Students, alumni, full-time faculty, community faculty and staff participated in an online survey. Strategic-planning consultants conducted focus groups with members of the EVMS Board of Visitors, the EVMS Foundation Board of Trustees and various functional teams (education, research, patient care, administration and finance, and external affairs) and conducted a number of one-on-one interviews.

The result: a transformational strategic vision that provides the opportunity to break new ground. Exciting changes in structure and leadership over the last five years have provided a unique opportunity to capitalize on areas of strength in our educational, research and clinical enterprises. We are positioned to conduct revolutionary translational research that will enhance learning and dramatically improve patient care.

To ensure we take best advantage of these opportunities, we have refined our mission:

**Eastern Virginia Medical School is an academic health center dedicated to achieving excellence and fostering the highest ethical standards in medical and health professions education, research, and patient care. We will strive to improve the health of our community and to be recognized as a national center of intellectual and clinical strength in medicine.**

By acting on this mission every day, we believe we can realize a new vision for EVMS within five years:

**Eastern Virginia Medical School will be recognized as the most community-oriented medical school in the nation.**

Those are carefully chosen words. We do not say simply “community-based.” EVMS already stands out in that small cadre of medical centers. Similarly, we do not mean “community-funded.” EVMS requires much more if it is to achieve its goals of research and clinical innovation.

Instead, Eastern Virginia Medical School will be the most community-oriented academic health center in the nation:

- An institution that intends to lead the world in research on the ailments most prevalent outside its own doors.
- An institution that reaches out and cooperates with health-care providers and centers of learning in Hampton Roads.
- An institution that creates top-notch doctors and other health-care professionals who want to remain and practice here.
- An institution where students and faculty reflect the rich cultural diversity of the Hampton Roads community and participate in serving its people.
Focusing the Work

Three core values drive our daily efforts:

- **Excellence**: We determine with our stakeholders what is valuable and hold ourselves to high performance standards that fulfill our promises.

- **Collegiality**: We serve our community and one another, building strong and mutually supportive relationships. We work as a cooperative, united team to further our purposes of education, research and patient care.

- **Integrity**: We strive to maintain the highest ethical standards and accept accountability for all we do and say.

This work, however, must be strategically focused on the areas that provide the greatest leverage for effecting change in our academic health center and our greater community. To that end, we have identified seven long-term goals:

- **Cultural Alignment**: Strengthen our entire organization’s collective pursuit of our mission, vision and values.

- **Education**: Enhance the knowledge, skills and values required for the EVMS community to excel in our chosen professions and to respond to current and emerging societal needs.

- **Research**: Enhance and strengthen our research enterprise in order to improve community and national health.

- **Patient Care**: Enhance our clinical enterprise to provide the highest quality patient care distinguished by our research and academic clinicians.

- **Affiliates**: Strengthen relationships with our affiliates by determining and delivering value.

- **Finances and Funding**: Ensure ongoing financial stability.

- **Marketing**: Strengthen our brand awareness and reputation to increase preference and support from students, patients, physicians and the community.

**Goals** are the broadly defined strategic position that we desire to reach: our desired outcomes at a high level. Achievement of these goals will close the gap between our current position and our vision for Eastern Virginia Medical School.

**Key initiatives** are high-leverage, focused efforts designed to move us closer to realizing our goals and vision. While many activities will contribute to the fulfillment of our goals and strategies, **key initiatives** are truly transformational in nature.
Cultural Alignment

Goal: Strengthen our entire organization’s collective pursuit of our mission, vision and values

To become a successful academic health center, we must continue to evolve. This growth relies on building a strong culture of mutual support, eliminating “silo” mentalities, better reflecting the diversity of our region and creating a unified campus community. When we share a vision of our future, we can more easily achieve our goals and advance the causes of teaching, discovering and caring. Acting on the following key initiatives will help us achieve this goal:

- Develop and implement a plan to strengthen our alignment with and commitment to our values of excellence, collegiality and integrity.
- Demonstrate tangible progress toward realizing our vision to be recognized as the most community-oriented medical school in the nation.
- Improve alignment between Eastern Virginia Medical School and EVMS Health Services.
- Create and implement a business case and accountability process by which EVMS consistently operates.
Education
Goal: Enhance the knowledge, skills and values required for our EVMS community to excel in our chosen professions and to respond to current and emerging societal needs

As a school founded through community grassroots efforts, EVMS has a responsibility to produce the best health-care professionals possible. In order to achieve this end, it is imperative that our facilities, technological resources and faculty be of the highest caliber. Enhancing the quality of the education we provide will improve the school’s reputation, attract top candidates and promote growth. A stronger organizational foundation and greater prosperity for the school translate into a more vibrant local economy and a healthier Hampton Roads.

Acting on the following key initiatives will help us achieve this goal:

- Enhance student learning by developing and implementing a systematic program to effectively integrate educational technologies into the medical and health professions curricula by implementing the Quality Enhancement Plan.
- Recruit, develop and support high-quality teaching faculty.
- Invest in improved performance and assessment methods for all educational programs.
- Implement an integrated system to identify, allocate and coordinate the clinical teaching sites for all educational programs.

Research
Goal: Enhance and strengthen our research enterprise in order to improve community and national health

The benefit to seeking treatment at an academic health center is simple — the institution’s translational research. The promise of groundbreaking discoveries that could change the face of medicine is a powerful draw. Close collaboration between scientists and clinicians means that novel treatments move more quickly from laboratory bench to patient bedside. Delivering those medical advances here at EVMS requires that departments across the campus cooperate on research and integrate the resulting discoveries into our clinical practices.

Acting on the following key initiatives will help us achieve this goal:

- Develop and implement a multi-disciplinary growth plan incorporating the basic-science and clinical departments for each of the four research areas, including target recruits, investigator initiated clinical projects, a business case, and a framework to prioritize investments based on the overall strategic plan.
- Integrate research into clinical growth plans.
Patient Care
Goal: Enhance our clinical enterprise to provide the highest quality patient care distinguished by our research and academic clinicians

People initially invested in EVMS because of the promise of a healthier Hampton Roads. We must continue to deliver on that promise. EVMS has the opportunity to grow its clinical enterprise and meet unfilled medical needs in Hampton Roads.

Acting on the following key initiative will help us achieve this goal:

☐ Develop and implement a clinical enterprise enhancement plan that includes enhancing the quality of care within existing departments as well as adding the critical specialties needed to complete the EVMS clinical and educational portfolio.
Affiliates
Goal: Strengthen relationships with our affiliates by determining and delivering value

Unlike most other academic health centers across the country, EVMS is not part of a university and does not own a teaching hospital. As a result, broadening strategic alliances with our affiliates is critical to our growth. We must be able to clearly articulate and plainly demonstrate how a partnership with EVMS benefits our affiliates.

Acting on the following key initiatives will help us achieve this goal:
- Strengthen and build upon our on-campus affiliates, Sentara Health System and Children’s Hospital of The King’s Daughters.
- Explore and strengthen relationships with other academic affiliates and teaching hospitals, including but not limited to University of Virginia, Virginia Commonwealth University, Old Dominion University, Hampton University, Jefferson Lab, VMASC, Bon Secours, Riverside Hospital, Veterans Affairs Hospital, Chesapeake Regional Medical Center.

Finances & Funding
Goal: Ensure ongoing financial stability

Our academic health center was born via the generous contributions of our community. As we grow our education, research and clinical enterprises, we must further cultivate that community support and enhance other available revenue streams. By ensuring our ongoing financial stability and growth, EVMS can deliver on its promise of teaching, discovering and caring for generations to come.

Acting on the following key initiatives will help us achieve this goal:
- Increase funding from affiliates, government and the community.
- Gain state funding comparable to other state medical schools.

Marketing
Goal: Strengthen our brand awareness and reputation to increase preference and support from students, patients, physicians and the community

Our message of teaching, discovering and caring must resonate on campus, in the community and around the globe as a result of our strategic communications efforts and brand-building. Through repetition and consistency, the EVMS name, logo and brand standards will be equated with a catalyst for change in the country’s medical renaissance. By sharpening the public’s understanding of our unique contributions to our region and the country, EVMS will enjoy greater political and financial support from the community.

Acting on the following key initiative will help us achieve this goal:
- Develop and implement a brand strategy and strategic marketing plan.
Measuring Success

Enacting our vision for EVMS will require collaboration across the academic health center. To ensure significant progress, our efforts must be transparent and measurable. Thus, our strategic plan includes metrics and timelines for reaching those benchmarks.

Strategic metrics are the sets of measures that indicate progress toward the fulfillment of our goals and strategies. The strategies, key initiatives and strategic measures associated with each goal are included within the strategic plan document. The leaders responsible for ensuring progress on each key initiative also have been identified.

Progress toward achieving these goals will be reported to the Board of Visitors and shared with the academic health center quarterly. Information regarding our strategic plan and our progress also will be available online at:

http://www.evms.edu/StrategicPlan

All members of the academic health center family — students, faculty, staff and administrators — have a part to play in this transformation. We must hold ourselves and our peers accountable for fully engaging in and advancing our key initiatives.

Breaking New Ground

We are proud of Eastern Virginia Medical School’s numerous accomplishments and our ability to overcome significant obstacles. Now, we are poised to break new ground and to strive for even greater success.

As in the past, our academic health center’s future strength depends on the dedication of our academic health center family and the support of our regional community. As a relatively young academic health center, we possess unique advantages — organizational flexibility and nimbleness.

To reach our full potential and achieve our vision, we must couple that institutional agility with proven business practices and strategic decision making. We must capitalize on one of our hallmarks — our collaborative and collegial atmosphere — to reach our vision.

We will demonstrate our viability as a strong strategic partner and worthy investment for donors and grant-making organizations. We will commit ourselves to the highest standards of excellence in Teaching, Discovering and Caring.
Executive Budget Summary

<table>
<thead>
<tr>
<th>Core Financial Projections</th>
<th>FY 2011</th>
<th>FY 2014</th>
<th>FY 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial Net Excess/(Deficit)</td>
<td>(1.0)</td>
<td>(2.2)</td>
<td>(5.6)</td>
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<tr>
<td>Net Excess/(Deficit) After New Building</td>
<td>0.1</td>
<td>0.6</td>
<td>(1.7)</td>
</tr>
<tr>
<td>Net Excess/(Deficit) After Strategic Plan</td>
<td>(1.4)</td>
<td>1.0</td>
<td>2.7</td>
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Dashboard Strategic Metrics

Measuring strategic progress is an important component of the strategic plan. EVMS maintains a comprehensive set of indicators of overall institutional performance. In implementing this plan, EVMS will also maintain and regularly report on a set of strategic metrics that measure EVMS’ performance against itself over time and against the performance of a set of peer institutions. These Dashboard Strategic Metrics will provide a more focused measurement of strategic progress.

Strategic Metrics

1. Community Orientation (progress toward vision)

- Community brand perception (%)
- Community service/outreach activities
- Faculty/Staff Diversity - Women (%)
- Faculty/Staff Diversity - Hisp./Af-Am/NA/A (%)
- Student Diversity - Hispanic (%)
- Student Diversity - African-American (%)
- Student Diversity - Native Am./Alaskan (%)
- GME/HP graduates who stay in VA and/or Hampton Roads (# and % of grads)
- EVMS medical graduates entering generalist/primary-care residencies

2. Cultural Alignment

- Desired Behavior norms and/or values alignment (% based on survey)

3. Quality

- EDUCATION
  - Acceptance offers per MD matriculant (ratio)
  - Acceptance offers per HP matriculant (ratio)
  - USMLE pass rate (% of national rate for Steps 1 and 2)

- RESEARCH
  - Total sponsored research ($)
  - Total sponsored research/sf ($/sf)
  - Total fed. research/FTE basic science faculty

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## Dashboard Strategic Metrics, continued

<table>
<thead>
<tr>
<th>Strategic Metrics</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RESEARCH, continued</strong></td>
</tr>
<tr>
<td>Research faculty salary covered by grants (%)</td>
</tr>
<tr>
<td>Total research funding rank (#)</td>
</tr>
<tr>
<td>NIH funding grants ($)</td>
</tr>
<tr>
<td>NIH funding grants rank (# out of 131)</td>
</tr>
<tr>
<td>Investigator-initiated trials (#)</td>
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<tr>
<td>License income ($)</td>
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<tr>
<td><strong>CLINICAL</strong></td>
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<tr>
<td>CMS PQRI Program (# of measures reported)</td>
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<tr>
<td>CMS PQRI Program (# of physicians reported)</td>
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<tr>
<td>Programs with formal, external designation of excellence (#)</td>
</tr>
<tr>
<td><strong>4. Satisfaction</strong></td>
</tr>
<tr>
<td>Residents - High satisfaction (%) or Net Promoter Score (NPS)</td>
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<tr>
<td>Students - High satisfaction (%) or NPS</td>
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<tr>
<td>Faculty and Staff - High satisfaction (%) or NPS</td>
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<tr>
<td>Patients - Overall rating (score on 1-5 scale)</td>
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<tr>
<td>Faculty turnover percentage (%)</td>
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<tr>
<td>Classified staff turnover percentage (%)</td>
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<tr>
<td>Unclassified staff turnover percentage (%)</td>
</tr>
<tr>
<td>USN&amp;WR medical school rank - research (#)</td>
</tr>
<tr>
<td>USN&amp;WR medical school rank - primary care (#)</td>
</tr>
<tr>
<td><strong>5. Financial Stability</strong></td>
</tr>
<tr>
<td>Total revenues ($)</td>
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<tr>
<td>Unrestricted operating margin (%)</td>
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<tr>
<td>Practice plan total revenue ($)</td>
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<tr>
<td>Practice plan support % of total revenue (%)</td>
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<tr>
<td>Tuition/fees % of total revenue (%)</td>
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<tr>
<td>State/local support % of total revenue (%)</td>
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<tr>
<td>Hospital support % of total revenue (%)</td>
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<tr>
<td>Total philanthropic funds raised ($)</td>
</tr>
<tr>
<td>Fund-raising costs/$ raised (%)</td>
</tr>
<tr>
<td>Total endowment net assets ($)</td>
</tr>
<tr>
<td>Clinical revenue per clinical FTE ($)</td>
</tr>
<tr>
<td>Average medical school debt ($)</td>
</tr>
<tr>
<td>Cost of attendance - in state</td>
</tr>
<tr>
<td>Cost of attendance - out of state</td>
</tr>
</tbody>
</table>
Appendix B

A Strategic Plan for Eastern Virginia Medical School 2011-2013

Harry T. Lester
President

Gerald J. Pepe, PhD
Dean and Provost

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Eastern Virginia Medical School

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Old Dominion University

Strategic Plan 2009-2014
Mission Statement:
Old Dominion University, located in the City of Norfolk in the metropolitan Hampton Roads region of coastal Virginia, is a dynamic public research institution that serves its students and enriches the Commonwealth of Virginia, the nation, and the world through rigorous academic programs, strategic partnerships, and active civic engagement.

Vision Statement:
Old Dominion University will be recognized nationally and internationally as a forward-focused metropolitan university with a collaborative and innovative approach to education and research that spurs economic growth, focuses on student success, engages civic and community partners, and uses its connections with the military and maritime industries and its exceptional strengths and leadership in related areas to provide practical solutions to complex, real world problems.

Who we are:
Old Dominion University is a comprehensive, multicultural, and student-centered university whose central purpose is to provide our students with the best education possible. We seek to provide access for a more diverse array of student populations, elevate our standing among the nation’s public research institutions, make innovative use of modern learning technologies, and insist on an arts-and-sciences-based general education for all undergraduates. We explore ways to address critical needs in the professions, increase our service to the Commonwealth of Virginia, find practical solutions for modern needs, and be a resource for the citizens of the Hampton Roads region and beyond. We have developed Innovation Research Park to facilitate synergistic partnerships with regional, national, and international businesses and agencies. We enrich the university campus and local communities through arts, athletics, and cultural events, and we celebrate the diverse and profoundly multicultural community that is Old Dominion University. At the same time, we work to evaluate and constantly improve the ways we help students, faculty, staff, and the many constituents we serve through rigorous self-examination, assessment, and efficient use of resources and we acknowledge that development, alumni relations, and marketing are imperative to achieving private funding and public support for all of our Strategic Plan initiatives.
INSTITUTIONAL ENVIRONMENT AND CONTEXT

LOCATION
Old Dominion University (ODU) is a comprehensive, multicultural, and student-centered residential university that enjoys tremendous advantages from its unique coastal location within a thriving metropolitan region adjacent to major maritime and military installations and within easy reach of the nation’s capital. Metropolitan Hampton Roads’ location provides a rich living laboratory for many of ODU’s academic and research pursuits, including environmental, marine, and natural sciences and engineering associated with the Chesapeake Bay and the Atlantic Ocean. The region is host to an extensive and comprehensive public education system and several community colleges and universities, with which ODU has long-standing and strong collaborations. ODU’s co-location with an exceptional array of major local and federal government facilities and organizations presents opportunities for mutually beneficial partnerships, such as with the Jefferson National Laboratory, NASA Langley, Virginia Port Authority, and teaching hospitals such as Eastern Virginia Medical School and Sentara Norfolk General Hospital, among others.

RECENT ACCOMPLISHMENTS
Building on its history and inherent advantages, the Old Dominion University Strategic Plan: 2005-2009 guided the direction of the University over the previous planning period while allowing the University to take advantage of additional unanticipated opportunities.

Academic program quality and offerings
During the past five years, a complete review and revision of the University’s undergraduate general education program was accomplished, focusing on the targeted learning outcomes for each academic area. The University conducted a program evaluation that culminated with an in-depth Academic Program Review process. Programs with waning demand and low productivity have been reduced. A number of doctoral programs have been added in high-need areas, including: Ph.D. programs in English; public administration and urban policy; health services research; education; criminology and criminal justice; chemistry; and professional doctorates in nursing practice and engineering. Several of these programs offer multiple options that doctoral students may pursue. The 2008 US News and World Report guide to university graduate programs ranked Darden College of Education as a Top 100 graduate school of education; the College placed for the first time at #96. New bachelors programs include: Asian Studies; African American Studies; Maritime and Supply Chain Management; and, most recently, Modeling and Simulation. An increasing number of departments are providing the opportunity for undergraduates to write a senior honors thesis.

Academic support programs
To better coordinate academic advising, career management, and other student services aimed at retention, University College was established in 2006 through reorganization and merger of several separate services into a single unit. Planning for a Student Success Center was completed and construction scheduled for 2009-10. It will be co-located with a new Learning Commons in the Perry Library to form a campus focal point for students that provides academic support...
support, including academic advising, testing, and tutoring services, and access to technology in support of out-of-class assignments. Online tools have been purchased to facilitate efficient and accurate advising for students. On the graduate level, enhancements include implementation of dissertation fellowships that include travel awards, and a doctoral mentoring award.

Faculty quality, recruitment, and retention
Between 2005 and 2008, the number of research and teaching faculty positions increased by 90 to approximately 720 full-time equivalent positions, of which 40% are female. Endowment-funded chairs for distinguished senior faculty were established and start up funding to recruit new research faculty has been increased. Several nationally-recognized faculty have been recruited to work in multi-disciplinary clusters and teams in modeling and simulation, biomedical sciences, bioelectrics, and computer sciences. University and external awards in teaching and research excellence were emphasized and in the past five years, 11 faculty members have earned the competitive and prestigious Virginia Outstanding Faculty Award. External faculty awards also included National Academy appointments, Fulbright Awards, and Fellow status in various professional societies for mechanical engineering, counseling, kinesiology and physical education, electrical and electronics engineering, ergonomics, engineering management, geoscience, human factors, physics, nursing, and speech and hearing. Increasing faculty salaries to the 60th percentile of peers by 2007 enhanced faculty retention efforts.

The number of faculty who serve in leadership roles in national and international professional organizations continues to increase each year. Faculty publications in peer-reviewed periodicals, books, and conference presentations have increased substantially. Faculty articles have been accepted by prestigious journals, such as *Nature* and *Science*, and are attracting positive attention from the national media, such as the *New York Times* and *The Chronicle of Higher Education*.

Research profile and awards
The University’s research profile has improved substantially by a number of measures. Overall research expenditures have nearly doubled between 2002 and 2008. ODU’s ranking increased among public universities in federal source Research and Development expenditures for NASA, Department of Energy, National Institutes of Health, and the National Endowment for the Humanities. Substantial federal and state funding was obtained for the multidisciplinary Virginia Modeling and Simulation Center (VMASC), which is managed through the Office of Research, and the Virginia Coastal Energy Research Consortium (VCERC), headed by ODU faculty. Individual program areas that increased their research expenditure rankings include aerospace engineering, economics, education, electrical engineering, humanities, mathematics, oceanography, political science, sociology, and visual and performing arts. Interdisciplinary research efforts were greatly strengthened in modeling and simulation, bioelectrics, teacher education/K12 education, coastal energy research, and molecular medicine. Emphasis increased in the areas of alternative energy sources and health sciences research. Recognizing ODU’s particular strengths in physics, a new Center for Accelerator Science has been developed in partnership with the Jefferson Lab.
Economic Development
The University’s economic development activities have been focused in three areas: partnership with business; workforce development; and, regional business attraction, expansion, and creation. Some of the University’s efforts, such as the development of modeling and simulation technologies, extend across all three categories and form an important economic development platform. The University is committed to working with local companies through the Innovation Research Park (IRP), which offers tenants Class A office/wet lab/dry lab environments and easy access to ODU’s research faculty. Tenants are specifically selected to provide research, commercialization, and translational opportunities for companies and organizations. The Virginia Applied Technology and Professional Development Center offers translational and consulting relationships to companies to help solve their business problems. Beyond its main campus, ODU maintains three higher education centers and the TELETECHNET distance delivery network, through which a variety of undergraduate and graduate academic programs are offered. The directors of the higher education centers reach out to local businesses with training classes and continuing education offerings that can be customized for employees.

Improved academic and other campus facilities
Dramatic growth in academic facilities has been accomplished in recent years, including: complete renovations of the Batten Arts and Letters and Health Sciences buildings; major additions to the Oceanography and Physical Sciences Building; the completion of the Engineering and Computational Sciences Building in 2004 and the Kaplan Orchid Conservatory in 2008. Substantial increase in research and business entrepreneurial space has been realized by the opening of Innovation Research Park (IRP) Buildings I (in 2007) and II (in 2009) in the University village. A variety of additions and new constructions were completed to support the University’s growing athletics program, including the Powhatan Sports Complex, the new Folkes-Stevens Indoor Tennis center, and construction of the Ainslie Football Complex in tandem with a full renovation to the Foreman Field at SB Ballard Stadium in preparation for the start of ODU’s new Monarch Football season in Fall 2009. A state-of-the-art Sports and Recreation Center that includes an indoor pool, track, and climbing wall, opened in summer 2009 adjacent to new student residence halls and the Roseann Runte Quad. The University’s Tri-Cities Center was constructed in Portsmouth adjacent to the Virginia Modeling and Simulation Center in Chesapeake. In support of the computational infrastructure, the National Lambda rail and Hampton Roads research grids have been implemented. Other infrastructure projects include the addition of several new parking structures and storm water management constructions.

Growth of a vibrant residential campus life
With the completion of construction in the University Village, along with a major investment in residence hall accommodations (from 2,285 to 4,610 beds) on both the east and west sides of Hampton Boulevard, the plan for the emergence of a truly residential campus has been realized. In addition to the new residence halls, the campus area now boasts a full-service Recreation Center, a new campus bookstore, a variety of restaurants, the Gordon Art Gallery, and regularly scheduled events in the highly successful Ted Constant Convocation Center. Additional housing development by a private entity is anticipated in the next two years in the University Village area.
Appendix C

ODU Strategic Plan: 2009-2014

Enrollment management
A formal Enrollment Management structure was implemented in 2008, to allow for University-wide coordination of recruitment, admission, orientation, enrollment planning, financial aid, retention and graduation processes. After thorough study, the University elected to target a less aggressive enrollment growth position than in prior years. However, the recent dramatic downturn in the economies of the Commonwealth and nation has encouraged more students to seek degree completion programs, alternative careers, and advanced degrees, all of which will make enrollment planning more challenging for the next few years.

Financial Planning
A series of budget cuts beginning in FY 2007-08 reduced the state portion of the University’s operating budget by about 14 percent, from $106 million to $94 million in FY2009/10, and further reductions are anticipated. During the same period, student headcount and FTE enrollment will have increased by more than 1,200. Despite the decline in state funding, annual tuition increases have been kept in the five to seven percent range. A four-year financial plan was developed and approved by the Board of Visitors in June 2009 that included use of one-time federal stimulus money to allow University units to engage in long term resource planning despite the cuts in state funding. The continuingly uncertain external financial environment will provide the University its biggest challenge in realizing its plans for 2009-2014, and the strategic planning process took this challenge into consideration.

Continuous Institutional Assessment
Coordinating the planning function
The University has reaffirmed its commitment to a regular, data-based process of self-assessment and improvement, through the coordination of internal planning processes including academic planning, enrollment management, space and capital planning, and budget and resource planning. For example, planning for the Student Success Center/Learning Commons involved a broadly based planning group and culminated in a significant, highly functional redesign of facilities. The Enrollment Management process, coupled with the Strategic Planning process, regularly brought faculty and staff into discussions regarding the future of the University, including recommendations for resource allocation.

Assessment plans
Regular assessment of the University’s performance relative to its documented plans will be incorporated into the 2009-2014 planning and budgeting processes. All programs of the University will have assessment plans with measures to determine success over the first and subsequent years of implementation, the results of which will be used in documented improvements and to inform future budget decisions. The effectiveness of each program will be summarized and annually disseminated and best practices in each area will be used in documented improvements. Existing programs that are shown to be ineffective by institutional effectiveness measures will be discontinued, in accordance with SACS and SCHEV procedures for program discontinuance to ensure that already enrolled students are give the opportunity to complete their declared program of study in a reasonable timeframe.
THE STRATEGIC PLANNING PROCESS

The *Old Dominion University Strategic Plan: 2009-2014* represents the University’s sixth formal strategic planning cycle since the early 1980s. For over 25 years, ODU has engaged in an ongoing systematic and collaborative strategic planning process to inform long-term capital planning, annual academic activities and annual operating budgets. ODU’s strategic planning process has always maintained the academic mission at its core, with plans for other areas of the University in support of that mission. The annual operating budget request process requires units that submit resource requests to cite the relationship between those requests and the accomplishment of one or more strategic planning goals. Consistent with the University’s ongoing institutional effectiveness efforts, the strategic planning process incorporates periodic assessments of progress toward goal accomplishments and strategic plan objectives, with subsequent adjustments to plan implementation based on those assessments.

*Early preparation*

Preparation for the 2009-2014 strategic planning process began in May 2007, with a mid-cycle review of accomplishments of the goals within *Old Dominion University’s Strategic Plan: 2005-2009*. Efforts moved to the next level in Summer 2008, when then Acting President John Broderick created the Office of Enrollment Management and tasked it to oversee a broad-based analysis and planning process that would establish ODU’s enrollment management strategy for the next several years.

Fourteen Strategic Enrollment Management Committees were convened in August 2008 and reported out in December 2008 on a wide range of topics: Data Assessment; Continuing Education/Non-Credit operations; Customer Service; Technology/Distance Learning; Military; First Year Experience; Financial Aid/Scholarship; Transfer Students; Graduate Studies; Retention; Campus Infrastructure; Budget; International Activities; and Institutional Reputation. The findings and recommendations from the 14 committees were presented for discussion at Faculty Forums and via a Strategic Enrollment Management web site accessible from the University’s home page, and formed the basis for eight *2009-2014 Strategic Plan* working ‘topic’ committees that were convened in January 2009.

*Planning input and information dissemination*

The *Old Dominion University Strategic Plan: 2009-2014* preparation process included: (1) early and continuing guidance from the Board of Visitors and senior officers of the University, including President Broderick, the Provost, Vice-Presidents and Deans; (2) incorporation of prior and concurrent planning processes such as in enrollment management, capital planning, and the academic colleges’ strategic plans; (3) inclusion of broad representation across academic and non-academic areas, with an emphasis on faculty representation and leadership, on the eight working committees and on a task force overseeing the process; (4) provision of a variety of
assessment, institutional research, and planning materials as resources to the planning process; (5) a strategic planning website to provide regular and frequent reports on committee activities and give University community members the ability to track and comment on those activities; (6) two open forums and a web blog for members of the University community at large to provide input; and, (7) presentations of the draft Goals and Objectives at various meetings and retreats of faculty, administrators, and student groups, including a 2-way video conference with site directors and other members of the ODU Distance Learning unit.

Other planning and assessment efforts contributed greatly to the 2009-2014 Strategic Plan development process. The six academic colleges were provided detailed information on departmental resources and academic program productivity in Fall 2008. Early input was received from an external consultant, who discussed results of an environmental study with the ODU Board of Visitors at their winter retreat in January 2009. Recommendations were received from a Quality of University Life survey of all full-time teaching and research faculty, administrative and professional faculty, and classified and wage employees conducted by Human Resources staff in the latter half of 2008. Additional input included Office of Assessment reports on student satisfaction, a consultant’s report on graduate programs, and discussions with Vice Presidents, Deans, and other members of the Provost’s Council and central administration.

Planning committees

The Strategic Plan Executive Task Force was established and co-chaired by the Provost and a member of the Faculty Senate Executive Committee. The Task Force was composed of approximately 20 individuals including faculty members, administrators and clerical staff, in addition to the chairs of the eight strategic planning topic committees, seven of whom were full-time faculty members. The topic committees were: Quality and Institutional Effectiveness; Community Engagement; Educational Outcomes and Student Experience–Undergraduate; Educational Outcomes and Student Experience–Graduate; Campus Life; Faculty Development and Resources; Research and Scholarship; and Academic and Administrative Support–Technology, Facilities, Resources.

The Strategic Planning topic and Task Force committees comprised over 125 faculty and staff and included members of the undergraduate and graduate student leadership. Weekly meetings began in late January 2009 and initial recommendations were discussed at an open Forum on April 29, 2009. Task Force discussions continued through early summer 2009 and a preliminary draft of the 2009-14 strategic goals was presented to the Board of Visitors in June 2009 and to the Vice President’s and Deans in early July 2009. Board of Visitors input was again solicited in mid-July 2009 and revisions from all areas incorporated into a final draft that was presented to the President’s Administrative Retreat in early August 2009. The 2009-2014 Strategic Plan was completed in mid-August 2009 and presented to the University community at an open forum in early September 2009, and to the ODU Board of Visitors for final approval on September 17, 2009.
From all of these discussions, the following 6 Strategic Goals were developed for the Old Dominion University Strategic Plan: 2009-2014.

1. Provide Students with the Tools to Succeed
2. Gain a National Reputation Through Key Academic Programs and Scholarship
3. Invest Strategically in Research to Spur Economic Growth
4. Enrich the Quality of Campus Life
5. Expand International Connections
6. Build Strong Civic and Community Partnerships

Implementation and assessment

On completion of the 2009-2014 Strategic Plan and its endorsement by the Board of Visitors, the six major Goals outlined are to be incorporated into revisions of the academic college strategic plans, the capital planning process, and into the ongoing operating budget process at the University. Implementation of an annual assessment process for the 2009-2014 Strategic Plan will incorporate feedback on the accomplishment of goals, objectives, and tasks into an annual report and will form an integral part of the annual operating budget process.
Old Dominion University’s
Strategic Plan 2009-2014

Goals and Objectives

with

Responsible Parties

and

Measures of Success
Goal 1. Provide Students With the Tools to Succeed

**Advance an innovative and engaging learning environment for student success.** Develop pedagogical models that foster creative learning, encourage student independence, enable inspired teaching, and make the best use of new technologies. Create a University Center for Learning and Teaching Excellence as an outgrowth from the current Center for Learning Technologies (CLT) where pedagogy and content experts will provide faculty with modern tools for enhanced pedagogical effectiveness. Enhance student academic success through targeted initiatives by departments, colleges, and the university, that provide greater attention to effective advising and assistance for students with academic deficiencies. Offer attractive and effective learning environments and expand opportunities for high achieving students. Create a Student Success Center and a Learning Commons as enhancements to the Perry Library that will integrate the library, information technology and University College services, instruction, and assistance to foster student creativity and experimentation and help students develop skills to improve their personal and professional success.

**Rationale:** We continually look for ways to improve the student learning experience, particularly given that we serve many non-traditional student populations, including members of the military and military spouses, returning adults, working students, and learners at a distance. Our faculty has developed award-winning programs in instructional development through our existing CLT that can be of great benefit to the entire teaching faculty and graduate teaching assistants. As we become a more residential campus, we need to offer a stimulating learning environment for students both during and out of class hours. Our high-achieving undergraduate students seek rewarding and relevant academic opportunities that will assist them in their future graduate experiences and professional careers. The availability of creative technologies encourages students to explore and experiment. We can facilitate student success through a modern and attractive Learning Commons that will provide a learning-centered environment with associated technology in support of the pedagogy and research needs of our students. We also seek to strengthen support services for those students needing assistance in meeting the challenges of contemporary higher education. Our planned Student Success Center will consolidate all of the support services that students need, including general academic advising and counseling, testing services, and internship, co-op, and career services, into one central location that has a natural flow-through to the library and the effective workspaces of the Learning Commons.

**Objectives:**

A. **Strive for teaching excellence in classroom and distributed instructional models.**

Expand existing capabilities of the Center for Technology and Learning to create a new Center for Learning and Teaching Excellence, that will assist faculty to develop effective pedagogical models and support them with modern technology. Solicit faculty input on best practices and uses of all delivery modes for on-campus and distance education, regardless of delivery method or class size. Create or newly emphasize teaching workshops and training for new faculty, adjunct faculty, and teaching assistants, particularly for courses with large numbers of first-year students. Increase faculty participation in development workshops and
seminars through widespread promotion and encouragement. Sponsor competitive internal awards for teaching excellence and innovation by graduate students, adjuncts, and full-time teaching faculty.

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<tr>
<th>Responsible Parties</th>
<th>Measures of Success</th>
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<tbody>
<tr>
<td>Provost, Distance Learning, Deans, University College, Graduate Studies, Department Chairs, Graduate Program Directors, Faculty Senate, Office of Computing and Communication Services, Information Technology Advisory Committee, Faculty, Student Affairs</td>
<td>1. Targeted workshops and training emphasizing teaching freshmen and other first-time college students developed by Fall 2010. 2. Improved teaching evaluations for Adjuncts, Lecturers, and Graduate Teaching Assistants from baseline 2009-2010 data. 3. Increased faculty participation in existing programs and annual increase in faculty use of technology to enhance teaching effectiveness. Assessment instruments indicate faculty members and students perceive long-term effectiveness of program. 4. Improved overall student satisfaction surveys, by department and College</td>
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**B. Improve advising and academic support structures.**

Ensure that the planned Student Success Center is an efficient and inviting space that enables students who need University-wide support services for their academic goals to find them in one central location. Assist those students who are in academic difficulty to overcome obstacles to success through faculty, peer-to-peer, and on-line tutorial programs. Maintain a minimum of 80% Freshman–Sophomore retention rate. Develop programs to support retention and success at Sophomore –Junior and Junior–Senior levels. Obtain regular feedback from faculty and students regarding effectiveness of the Student Success Center in facilitating student success. Provide for effective advising within academic units by offering regular advisor training. Create and make accessible on the university website a guide to academic support services that includes Writing Tutorial Services, Career Management (internships), advising services, and other student and academic assistance organizations.

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<th>Responsible Parties</th>
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<tr>
<td>Deans, Department Chairs, University College, Enrollment Management, Admissions, Chief Departmental Advisors, Graduate Program Directors, Faculty Senate, Disability Services, Student Affairs, Student Government Association</td>
<td>1. Using 2006-07 as a baseline, increased student achievement in traditionally difficult courses, increased retention rate from Freshman to Sophomore to Junior years, and increased average ratings on quality of advising from Senior and Graduate Exit Surveys and other assessment tools. 2. Increased annual attendance at existing and enhanced advisor training. 3. Increased faculty, staff and student ratings of usability and effectiveness of university website in obtaining needed information regarding academic support services. 4. Assessment instruments indicate faculty members and students perceive effectiveness of Student Success Center.</td>
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Appendix C

ODU Strategic Plan: 2009-2014

C. Provide attractive and effective learning environment for students.

Ensure that the planned Learning Commons addition to Perry Library becomes a flexible, inviting space to facilitate student learning through exploration, discussion, collaboration, and access to technology that supports their out-of-class assignments and needs. Obtain regular feedback from faculty and students regarding effectiveness of the Learning Commons in facilitating student success. Continue technological enrichment and modernization of all learning spaces on campus and at Higher Education Centers, including laboratories, performing arts spaces, studios, and library study areas, and complete the mediation of all appropriate classrooms. Include group study areas as part of all future new building and building renovation plans. Ensure that strategic management of enrollment continues on an annual basis and that growth in enrollment is in line with resources available to support student success.

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<tr>
<th>Responsible Parties</th>
<th>Provost, University Capital Planning Committee, University Space Committee, University College, Enrollment Management, Office of Computing and Communication Services, Facilities Management, University Librarian, Deans, Associate Deans, Student Affairs, Graduate Student Organization, Student Government Association</th>
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| Measures of Success | 1. Using 2008-09 as a baseline, increased number and percentage of total mediated classrooms.  
2. Increased student use of Perry Library and Learning Commons.  
3. Beginning in 2009-10, annual reports on technology and space improvements made and planned.  
4. Assessment instruments indicate faculty members and students perceive effectiveness of Student Success Center. |

D. Expand opportunities for high-achieving students to demonstrate proficiency.

Provide high-achieving students at all levels with opportunities for research and academic success, including support structures for those who enter national competitions. Sponsor competitive student research fellowships and stipends, and faculty matching grants for undergraduate participation in sponsored research. Display student achievements more widely on the university website and through other media and scholarly publications.

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<tr>
<th>Responsible Parties</th>
<th>Provost, Deans, Honors College, Academic Departments, Faculty, Graduate Program Directors, Development Office, Media Relations/Marketing</th>
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</table>
| Measures of Success | 1. Using 2008-09 as baseline, increase number of undergraduates participating in research, assessed by College, beginning in 2010-11  
2. Increase number of undergraduate students entering national competitions and whose work is recognized in these competitions, beginning in 2010-11.  
3. Increase number of undergraduate students supported in research through external grants, starting in 2010-11.  
4. Increase number of students that co-author presentations or publications with faculty sponsor(s), by 2011-12. |
Goal 2. Gain a National Reputation Through Key Academic Programs and Scholarship

Strategically advance our nationally recognized academic programs. Reallocate resources to programs that have or could attain national prominence as measured by faculty reputation and successful graduates, including modeling and simulation, physics, bio-electrics and bio-engineering, education leadership and counseling programs, ocean sciences and engineering, among others. Support programs that successfully meet demonstrated local and regional needs, such as health sciences, nursing, economic forecasting, creative writing, and science, technology and mathematics (STEM) education. Increase efforts to attract high-achieving students, promote the scholarly achievements of our faculty, strategically increase the number of full-time faculty in prominent or promising programs, emphasize interdisciplinary opportunities, and affirm our identity as a graduate institution through concentrated attention to graduate student recruitment and support.

Rationale: We have many programs, some quite new, others more established, that have been recognized in national ratings or that hold promise to have significant national impact. We want those programs to continue to draw positive attention, even climb in the rankings, or else generate further grant money, good publicity, and/or interest to attract top quality students and faculty. Therefore, it is important to direct resources to those areas without at the same time undermining the value of other programs that, by virtue of their steady or increasing enrollment, importance to General Education or other core programs, significance to college mission, or other signs of vitality, deserve continued strong support. This will mean making hard choices about continuing support for programs that show steadily declining enrollments, inability to hire strong faculty, or failure to support college or university core missions.

Objectives:
A. Identify and enhance funding for programs of special prominence or that are deserving of continuing support; identify programs that need significant change to be viable, or discontinue.

Undertake regular and systematic program reviews to identify programs of special prominence, or the potential for such prominence, and those that deserve continuing support. Appoint review committees in each college to determine criteria for prominence. Use this process to identify programs in need of major revitalization or that should be discontinued. Develop metrics to assess and optimize business and administrative costs for each program. Reallocate resources and include at least 40 new faculty positions toward the support of promising programs and develop action plans for reform or discontinuance of underperforming programs. Revisit each program every five years to ensure that resources are properly directed to prominent and core programs.

Responsible Parties
Provost, Deans, Associate Deans, Department Chairs, Institutional Research and Assessment, Graduate Studies, Faculty Senate, Faculty Committees.

Measures of
1. By fall 2010, each college identifies prominent or promising programs,
Appendix C

ODU Strategic Plan: 2009-2014

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<td>and programs that should be discontinued or need change to be viable.</td>
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<td>2. By fall 2011, each academic college will undertake first annual review of prominent, potentially prominent, and weak programs.</td>
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<tr>
<td>3. Resource requests and allocations provide evidence that appropriate follow up is implemented and that resources are appropriately allocated to existing and emerging programs of prominence.</td>
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B. Coordinate and enhance promotional and recruiting activities. *(Links to Goals 3 and 6)*

Increase support for promotional and reputational strategies that will enhance the national and international visibility of the University and its academic programs. Appoint recruiting committees or recruiting officers to work with Colleges, Admissions, and Marketing, as well as other units where relevant, to assist in developing attractive and up-to-date promotional and recruiting materials and an inviting web presence that will attract top quality undergraduate and graduate students.

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<tr>
<td>Media Relations/Marketing, Enrollment Management, Admissions, Provost, Deans, Continuing Education Units, Community Relations, Institutional Research and Assessment</td>
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<th>Measures of Success</th>
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<td>1. Increased mention of ODU in national and international media.</td>
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<td>2. Increased national rankings of programs by 2013.</td>
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<tr>
<td>3. Increased availability, dissemination, and web use of recruitment materials from surveys of newly enrolled students.</td>
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<tr>
<td>4. Increased % of top quality freshman and transfer undergraduate students and graduate students enrolled, as measured by SAT’s, GPA’s, class rank, etc.</td>
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<tr>
<td>5. Using 2008-2009 as a baseline, increased alumni activities and involvement, private donations, annual giving, and number of donors.</td>
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C. Attract and retain quality graduate students.

Increase accountability for graduate student success at College and Departmental level. Allocate funding for graduate student recruitment toward targeted areas within programs that are identified as high priority, and support graduate program development in critically needed areas. Offer competitive graduate support packages. Assist programs to track graduate student progress, improve program completion rates, and track professional or academic placement of graduates.

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<tbody>
<tr>
<td>Deans, Associate Deans, Graduate Studies, Graduate Admissions, Graduate Program Directors, Faculty Senate, Alumni Relations, Enrollment Management, Media Relations/Marketing, Institutional Research and Assessment</td>
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<th>Measures of Success</th>
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<tr>
<td>1. Increased retention of graduate students in first two years of program, by College and Department.</td>
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<td>2. Decreased average time to degree completion by College and increase in number of PhDs awarded.</td>
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<td>3. Increased number and percentage of graduate degree recipients providing job and/or academic placement information.</td>
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</table>
Goal 3. Invest Strategically in Research to Spur Economic Growth

**Position Old Dominion University as an economic development leader for the region.** Further develop our nationally recognized Research Institutes and Centers of Excellence, such as the Frank Reidy Research Center for Bioelectrics, Virginia Modeling Analysis and Simulation Center (VMASC), the Center for Accelerator Science (in collaboration with the Jefferson National Laboratory), and the Laser and Plasma Engineering Institute, and focus in areas such as Supply Chain Management, Alternative Energy, Biomedical Sciences, and others to solidify the university’s role as an economic development leader for the region. Employ Old Dominion’s entrepreneurial ethos to create economic development impact by extending research discoveries and technology into business attraction and business creation opportunities. Leverage existing investments in computational and technology resources and in infrastructure such as Innovation Research Park (IRP), and develop planned facilities such as the Systems Engineering Building, to create new opportunities for translational research, technology transfer, cross-disciplinary and other collaborative research projects, that create real-world solutions for our communities and the world. Expand opportunities for collaboration with the City of Virginia Beach with an expected emphasis on graduate-level Health Sciences research in the Princess Anne Commons corridor. Seek out new strategic partnerships and build on existing collaborations, such as with the nearby Naval Postgraduate School, regional maritime industries, local teaching hospitals, and national laboratories. Hire and retain research-active and highly creative faculty and increase faculty productivity in research, scholarship, and creative work by reassessing teaching loads and broadly enhancing the University’s research infrastructure.

**Rationale:** Having committed itself to become a nationally recognized, highly-ranked research university, ODU must continue its pursuit of excellence in attracting and retaining top-flight research faculty and foster the conditions under which nationally recognized research, scholarship, and creative activity can take place. Not to do so is to risk putting in jeopardy the gains that have been made in recent decades. We have several high profile research efforts that have, or are positioned to have, significant national impact in both fundamental and applied research. ODU is also committed to working with local, regional, and state economic development agencies to foster business attraction opportunities in the Hampton Roads region.

ODU has faculty clusters of excellence, such as in modeling and simulation at VMASC, and has developed attractive, modern facilities, such as IRP, that are poised to have considerable local and regional impact on workforce development and that can attract new businesses and economic opportunities to the region. We need to leverage our investments and assets to promote additional economic development and success in the region and further develop IRP as a focal point for business attraction and creation through translational research, technology transfer, and business development opportunities. By advancing the University’s research infrastructure and encouraging a culture that supports patent applications and grant proposal submission, we will increase the success of external grants and contracts to faculty, draw continued positive attention, and attract top quality students and faculty to ODU. (Also linked to Goal 2)
Objectives:
A. Pursue strategic collaborations, including economic development and cross-disciplinary research opportunities.

Identify economically and academically beneficial collaborations with external institutions and companies. Work with neighboring cities such as Virginia Beach to identify mutually beneficial programs that will address regional need. Develop joint or dual degree programs in key disciplines with other universities and teaching hospitals. Provide opportunities and support for faculty, including standard technology services, to develop spin-off companies, accelerate existing business enterprises, and/or develop strategic research connections with other institutions or entities in the region. Encourage external collaborators to work with faculty and graduate students in IRP, VMASC, or other high-profile facilities.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Vice President of Research, Vice President of Administration and Finance, Provost, Executive Director of Economic Development, Executive Director of VMASC, Deans, Office of Computing and Communication Services, Research Faculty.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measures of Success</td>
<td>1. Using 2009-10 baseline number of collaborations, track the number of new collaborations established or terminated. 2. Using 2009-10 baseline number of dual or joint degree programs, track the number of new dual or joint programs established or terminated.</td>
</tr>
</tbody>
</table>

B. Hire and retain research active faculty.

1. Establish endowed chairs and other endowments that support retention and recruitment of top research faculty in identified strategic research areas.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Office of Development, Vice President of Research, Provost, Deans, Department Chairs.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measures of Success</td>
<td>1. Increased funding for endowed chairs and research faculty recruitment. 2. Increased number of new research faculty hired annually and retained two or more years from initial hire in strategic research areas. 3. Using 2009-10, as a baseline, track the number and dollar amount of startup packages provided to, and research productivity of, newly hired research faculty. 4. Increased annual externally funded research expenditures in strategic research areas.</td>
</tr>
</tbody>
</table>

2. Assist faculty to increase research output by evaluating, and adjusting as necessary (a) faculty workload policies and practices, including graduate student supervision; and (b) departmental staff support in departments or programs that have high research and/or graduate program commitments.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Provost, Vice President for Research, Deans, Associate Deans, University Workload Committee (TBD), Department Chairs, Institutional Research and Assessment staff, Associate Vice President for Academic Services.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measures of Success</td>
<td>Report on current workload policies and allocations, support staff allocations, and instructional and research productivity by college, with</td>
</tr>
</tbody>
</table>

Appendix C
C. Enhance the resources available to support research areas of excellence.

1. Identify and widely promote our current and potential research areas of excellence, and those that deserve continuing support. Review, revise or formalize as necessary, and implement criteria for establishing, supporting, and phasing out of Centers, Institutes, and external Partnerships.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Vice President for Research, Provost, Deans, Associate Deans, Graduate Studies, University Space Committee, Faculty Senate.</th>
</tr>
</thead>
</table>
| Measures of Success | 1. By Fall 2010, the University will identify existing and potential Research Institutes or Centers of Excellence for sustained support, and Centers, Institutes, or external partnerships that should be discontinued.  
2. Recommended policy for Centers, Institutes, and Research Partnerships to take effect Spring 2011. |

2. Review all research support areas for improvements in efficiency, including the allocation, upkeep, and enhancement of physical facilities needed for research purposes. Ensure continuation and upgrade of necessary computational resources, including high performance computing, research network connectivity, mass data storage, and research computing expertise.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Provost, Vice President for Research, Vice President for Finance, Capital Planning Committee, University Space Committee, Office of Computing and Communication Services, Faculty Senate, Deans, Department Chairs.</th>
</tr>
</thead>
</table>
| Measures of Success | 1. Report with recommendations for improvements and projected costs for implementation to the Vice President of Research and the Provost by September 2010.  
2. Annual report documents planning process and priorities for allocation, upkeep, and improvement of research facilities/space for the year, with associated operating and capital budget resource needs and allocations.  
Goal 4. Enrich the Quality of Campus Life

Build Our Reputation as a vibrant residential campus with a multicultural community that respects individuality. Become known as a student-centered university. Expand residential life and co-curricular programs to enhance student learning and engagement outside the classroom. Intensify our commitment to bringing engaging arts, cultural, and athletic events to the campus and to the surrounding Hampton Roads communities. Strengthen intra-campus communication systems and attend to the campus community's overall welfare. Renew focus on the civility of personal interactions and deliver first-rate service to faculty, staff, students, and the public.

Rationale: ODU’s recent major expansion of student residence facilities on and adjacent to campus brings the opportunity to change the overall tenor of future campus life in a very positive direction. In addition to enhanced academic support for students (Goal 1) that must reflect and respond to our diverse student body, and our existing extra-curricular activities, student-centered programs and services must integrate the curricular with co-curricular activities. Student-faculty interaction both in and outside of the classroom is critically important in achieving intellectual engagement.

Understanding and respecting differences among individuals is critical to our students’ success in the world after college and is critical to the success of the University as a whole. Our effectiveness as an organization and our reputation in the communities with whom we interact depends on the quality of service that we provide to students, parents and relatives, faculty and staff, administrators, and the public at large. The university suffers when any of those parties feels disregarded. We seek to make improvements throughout all sectors to ensure the university is recognized as properly responsive to its constituents.

Objectives:
A. Expand Residential Life and co-curricular programs

Expand residential life programs through learning communities and other student-centered experiences. Promote opportunities for students and alumni to contribute as leaders and team members. Assist first year, transfer, and off-campus students to connect with student organizations and the larger campus community. Develop a Sophomore Success program to focus on service learning, career exploration and study abroad opportunities.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Student Affairs, Housing Services/Residential Life, University College, Student Government Association, International Programs, Intercultural Relations, Career Management Center, Enrollment Management, Faculty.</th>
</tr>
</thead>
</table>
| Measures of Success | 1. Increased number and variety of residential life and co-curricular programs beginning in 2009-10, and annually thereafter.  
2. Using 2009 NSSE survey as baseline, increased student satisfaction with campus life as measured by internal and external survey instruments. |
### B. Improve engagement and interactions among faculty, staff, and students.

1. Foster an Old Dominion University identity through increased community-building events and best practice activities, including workshops and motivational speakers. Invest in engaging and exciting programs that celebrate multiculturalism and diversity. Evaluate and eliminate programming that no longer resonates. Continue to offer engaging cultural, athletic and entertainment events on campus and encourage alumni, faculty, administrators, and classified staff to attend. *(Also links to Goal 6).*

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>President, Provost, Vice Presidents, Human Resources, Deans, Faculty, Student Affairs, Institutional Equity and Diversity, Hourly and Classified Employees Association.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measures of Success</td>
<td>1. Increased number and kinds of community-building events beginning in 2009-10, and annually thereafter.</td>
</tr>
</tbody>
</table>

2. Implement approved recommendations from the 2008-09 Quality of Life (QUL) surveys. Conduct focus groups to assess the effectiveness of the implemented recommendations prior to conducting a follow-on comprehensive QUL survey in 2011-2012.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>QUL Committee, President, Provost, Vice Presidents, Human Resources, Deans, Department Chairs, Enrollment Management, Academic Affairs, Institutional Equity and Diversity, Institutional Research and Assessment.</th>
</tr>
</thead>
</table>
| Measures of Success | 1. Status of implementation of approved recommendations arising from for the QUL surveys annually. (Complete/Partially Complete/Not Complete).  
2. Assessment of the effectiveness of implemented recommendations from focus group study.  
3. Increase in qualitative and quantitative satisfaction ratings in follow-up comprehensive QUL surveys. |

### C. Improve intra- and inter-departmental communication systems.

Create a more interactive and inviting web site through usability testing and re-design and provide the resources to maintain it. Ensure useful and relevant content on web pages. Improve the timely circulation of announcements and other information to the University community and emphasize the expectation for vice presidents, deans, chairs, supervisors and other leaders to engage in regular interpersonal communications to share significant information. Encourage faculty, staff and students to serve on committees as appropriate.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Media Relations and Marketing, Vice Presidents, Deans, Associate Deans, Enrollment Management, Office of Computing and Communication Services, Web Media staff, academic departments and programs, all service areas.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measures of Success</td>
<td>Increased ratings of usability and effectiveness of university website and ability to obtain needed information using navigation tracking systems and regular surveys of faculty, staff, students, and external constituents.</td>
</tr>
</tbody>
</table>
Goal 5. Expand International Connections

Emphasize the international focus of the University. Expand student understanding of international cultures through globally conscious curricula and participation in projects that have an international component. Encourage and recognize faculty international initiatives and provide increased opportunities for student travel and learning abroad through additional faculty-led programs. Promote the strengths of our existing unique programs that have international emphasis, such as the Graduate Program in International Studies and our faculty-led Study Abroad programs, and develop new international collaborations where feasible. Improve connections with internationally focused organizations adjacent to ODU in Hampton Roads (such as the military installations, port operations, Operation Smile, and NATO). Increase international representation of students and faculty on campus.

Rationale: Old Dominion University has long prided itself on being open to the world. With one of the largest cohorts of international students in the Commonwealth of Virginia, a variety of study abroad and exchange programs, and shared interests with internationally focused organizations like NATO and the armed forces, we are already heavily invested in global thinking and activities. Many of ODU’s faculty members have collaborative research or scholarly activities with faculty in other countries; these connections could form the basis for additional faculty and student exchange programs. Amid the challenges created by the recent world economic crisis and heightened alerts in the wake of terrorist incidents, it is crucial that the University maintain its emphasis on an international outlook in order to keep lines of communication open among students, faculty, citizens of the Commonwealth, and the rest of the world.

Objectives:
A. Enhance international curricula and study abroad opportunities.

Create incentives for faculty to enhance the international component of the undergraduate experience, stressing the international dimensions of course content whenever feasible and offering additional study abroad and international project experiences. Recognize faculty involvement in international and intercultural curricular development in tenure and promotion decisions. Sponsor intercultural seminars and experiences and pursue additional scholarships for domestic students to study abroad.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Provost, Deans, Development Office, Department Chairs, International Programs, Intercultural Relations, Faculty Senate, Promotion and Tenure Committees, Faculty</th>
</tr>
</thead>
</table>
| Measures of Success | 1. Increased inventory of seminars, courses with an international dimension from 2010-11 onward.  
2. Increased number of scholarships for students to conduct study abroad.  
3. Creation of a recognition program for involvement in international curricular development, by 2010-11. |
Appendix C

ODU Strategic Plan: 2009-2014

B. Develop and support a more diverse international community.

Enhance the international diversity within the faculty and student body through targeted recruitment and follow-up mentoring to assure retention of high-achieving individuals from underrepresented national and cultural backgrounds. Ensure international graduate students are adequately prepared for teaching and research assistantships through targeted workshops and training programs.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Provost, Deans, Department Chairs, Search Committees, Enrollment Management, Admissions, Graduate Admissions, Graduate Studies, Graduate Program Directors, Student Affairs, Faculty</th>
</tr>
</thead>
</table>
| Measures of Success | 1. Increased number of international faculty, beginning 2009-10.  
2. Increased number by origin, college, and level of international students, beginning 2009-10.  
3. Increased retention and program completion rates for international graduate students. |

C. Expand beneficial global collaborations.

1. Expand beneficial connections with internationally focused agencies, including NATO and the military, and with international universities. Develop active institutional, faculty, and student relationships with international entities. Explore, and implement where appropriate, dual and joint-degree programs with prestigious international universities.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Provost, Deans, Military Affairs, Admissions, International Programs, Distance Learning, Department Chairs, Faculty</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measures of Success</td>
<td>1. Using 2008-09 as a baseline, increased inventory of collaborations and dual/joint degrees with an international dimension from 2010-11 onward.</td>
</tr>
</tbody>
</table>

2. Host international symposia and conferences by providing facilities and support structure, including use of distance-learning technology. Encourage faculty to assume leadership positions in international organizations.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Provost, Deans, Military Affairs, Distance Learning, International Programs, Department Chairs, Faculty</th>
</tr>
</thead>
</table>
| Measures of Success | 1. Using 2008-09 as a baseline, increased number and kind of international symposia and conferences sponsored on campus and via distance-learning technology, by college.  
2. Using 2008-09 as a baseline, increased number of faculty in leadership positions in international organizations |
Goal 6. Build Strong Civic and Community Relationships

Achieve national recognition as an engaged, metropolitan university. Focus on building positive perceptions of ODU in the community to encourage greater alumni and public support. Build on our successful Continuing Education programs and create stronger links with the Commonwealth’s community colleges to provide enhanced workforce development opportunities especially in areas of regional and national need, such as advanced health science degrees, modeling and simulation, engineering technology, and STEM education. Facilitate business creation and expansion efforts in the region through extension of ODU’s intellectual capital, innovation, and infrastructure into the broader community, such as via the Innovation Research Park. Establish the Virginia Applied Technology and Development Center as the University’s front door for businesses to engage the University in solutions for their business problems. Build strong civic and community partnerships to enhance Hampton Roads’ standing as a ‘Great Place to Live and Work’. Apply ODU’s expertise to community betterment and become the ‘go to’ place for solutions to Hampton Roads’ problems through increased civic and community engagement of faculty, staff, and students in solving socio-economic, educational, health, and workforce needs.

Rationale: The University is situated in a dynamic and growing metropolitan region and demonstrates its commitment to the economic development and quality of life in the region not only through its academic programs, but also through direct action in the surrounding communities. Through our Distance Learning technology and our articulation agreements with the Virginia Community College System (VCCS), we create access for all citizens of the Commonwealth and beyond to encounter Old Dominion University for professional or personal development. Through our annual State of the Region and Economic Forecasting Project reports we inform the community about global economic activity that directly affects their daily lives. Through our offerings in Continuing Education, we provide both tangible and intangible benefits to the daily lives and welfare of the community around us. Through service learning opportunities we provide support to the community in even more immediate ways as our students, staff and faculty collaborate directly with local experts to solve the many serious issues facing local, national, and global communities. It is imperative that through these means and others, we maintain and enhance the positive perception of ODU within the community and ensure that the Town-Gown dialogue remains open and mutually beneficial.

Objectives:
A. Expand and promote Continuing Education programs and related events.

Build on and promote existing successful Continuing Education programs and summer camps offered through the colleges and other university units. Develop a self-supporting base for Continuing Education. Cultivate experts in the community to lead selected programs where appropriate. Provide one-stop shopping for the provision of housing, food services, parking, card services, program space and related support. Evaluate indoor and outdoor campus spaces for their potential use as informal educational, athletic, and cultural venues. Provide an on-line calendar with a coordinated box office for events. (Also linked to Goal 1).
### B. Partner with Community Colleges for expanded workforce development in the region.

Build on existing articulation agreements and connections between Distance Learning and the VCCS to develop seamless 2+2 programs and accelerated 3-yr baccalaureate degree programs in areas of regional and national workforce need. In collaboration with VCCS and individual community colleges in the region, convert targeted, high-need programs into video-stream, on-line, and blended delivery modes as appropriate to the programs.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Provost, Deans, Distance Learning, University College, Enrollment Management, University Registrar, Faculty</th>
</tr>
</thead>
</table>
| Measures of Success | 1. Using 2008-09 as a baseline, increased number and type of 2+2 program conversions, by college.  
2. Using 2008-09 as a baseline, increased number of accelerated 3-yr baccalaureate degree programs with area community colleges. |

### C. Create a dynamic Community-University relationship that uses community experts as instructors and ODU personnel as experts to help solve community problems.

1. Upgrade the faculty/staff expertise on-line profile and integrate with the on-line Faculty Activity System (FAS) to provide more effective and efficient media and community access. Encourage university personnel to contribute their expertise on issues of community concern at a local and larger level. Encourage community experts in such arenas as civic engagement, business and industry, school districts, arts and culture organizations, to be more engaged with ODU as instructors, speakers, and program leaders on campus.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Media Relations and Marketing, Institutional Research and Assessment, Office of Computing and Communication Services, Deans, Departments, Faculty, Academic program directors, College non-credit operations, University Events, Community Relations, Community Development Corporation.</th>
</tr>
</thead>
</table>
| Measures of Success | 1. Current expertise guides integrated into the Faculty Activity System and prominent on University website during 2009-10. 
2. Using 2008-09 as a baseline, increased number and kind of external consultations/products produced by faculty that address issues of community concern. |
ODU Strategic Plan: 2009-2014

3. Using 2008-09 as a baseline, increased number of community experts serving as instructors, speakers, and program leaders by areas they represent (e.g., business, arts, etc.).
4. Conduct program evaluations and use data to make improvements in subsequent offerings.

2. Provide students with meaningful experiential learning, service learning, and internship programs that have civic engagement emphasis.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Academic program directors, Career Management Center, Student Affairs, University College, Community Relations, Community Development Corporation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measures of Success</td>
<td>1. Using 2008-09 as a baseline, increased number and type of service learning activities and community engagement internships, by college. 2. Assess the learning that results from participation in these experiences using surveys and/or focus groups.</td>
</tr>
</tbody>
</table>

D. Achieve national recognition as an engaged, metropolitan university.

1. Apply for and receive Carnegie Foundation Community Engagement classification in both “academic” and “community” categories.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>Provost, Deans, Continuing Education Units, Community Development Corporation, Community Relations, Institutional Research and Assessment.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measures of Success</td>
<td>1. Acquire data to support application for Carnegie Foundation Community Engagement classification in 2009-10. 2. Submit a completed application by September 1, 2010 and every 2 years thereafter until successful, then maintain classification.</td>
</tr>
</tbody>
</table>

2. Increase private giving to supplement state support to the University through strategic and consistent public relations and marketing messaging to the University’s many constituencies, via increased personnel in Development, Alumni Relations, and Marketing.

<table>
<thead>
<tr>
<th>Responsible Parties</th>
<th>President, Provost, Vice President for Development and Alumni Relations, Deans, Media Relations/Marketing, Enrollment Management, Admissions, Continuing Education Units, Community Development Corporation, Community Relations, Institutional Research and Assessment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Measures of Success</td>
<td>1. Using 2008-2009 as a baseline, increased overall endowment, alumni activities and involvement, private donations, annual giving and number of donors. 2. Increased mention of ODU in national and international media. 3. Increased national rankings of programs by 2013. 4. Increased availability, dissemination, and web use of recruitment materials from surveys of newly enrolled students. 5. Increased percentage of top quality freshman and transfer undergraduate students enrolled, as measured by SAT’s, high school and Community College GPA’s, class rank, etc.</td>
</tr>
</tbody>
</table>
PROGRAMMATIC ASSESSMENT AND RESOURCE PLANNING PROCESS

Between September and November 2009, a complete analysis of the University’s current and future resource prospects will be reviewed in light of ongoing and likely future changes in Commonwealth funding to the University and anticipated student enrollment increases. Concurrently, a series of tuition and fee scenarios will be generated as more external financial information becomes available. During the same time frame, each academic college and all non-academic vice presidential areas will be asked to update their strategic plans in light of the new Old Dominion University Strategic Plan: 2009-14.

These processes will allow for the development of an Operational Plan: 2009-14 that will be in parallel with the new Strategic Plan. The Operational Plan will incorporate multi-year implementation timelines, needed resource allocations and reallocations, and detailed measures of success in accomplishing each Strategic Plan goal and action. It will provide a workable management and accountability tool both for the Board of Visitors and for the University’s administration.

In addition to the benefits of having more complete information regarding the University’s financial future when the Operational Plan: 2009-14 is developed, these activities will coincide and coordinate with the externally mandated planning process under the Higher Education Restructuring Act, which requires submission of six-year Enrollment, Academic, and Financial Plans to the State Council of Higher Education for Virginia in November 2009.
Mission

Eastern Virginia Medical School is an academic health center dedicated to achieving excellence and fostering the highest ethical standards in medical and health professions education, research, and patient care. We will strive to improve the health of our community and to be recognized as a national center of intellectual and clinical strength in medicine.

Vision

Eastern Virginia Medical School will be recognized as the most community-oriented medical school in the nation.

Values

Three core values drive our daily efforts:

- **Excellence**: We determine with our stakeholders what is valuable and hold ourselves to high performance standards that fulfill our promises.
- **Collegiality**: We serve our community and one another, building strong and mutually supportive relationships. We work as a cooperative, united team to further our purposes of education, research and patient care.
- **Integrity**: We strive to maintain the highest ethical standards and accept accountability for all we do and say.

Goals

To fulfill our mission and vision, we must be strategically focused on the areas that provide the greatest leverage for effecting change in our academic health center and our greater community. To that end, EVMS has identified seven long-term goals:

- **Cultural Alignment**: Strengthen our entire organization's collective pursuit of our mission, vision, and values.
- **Education**: Enhance the knowledge, skills and values required for the EVMS community to excel in our chosen professions and to respond to current and emerging societal needs.
- **Research**: Enhance and strengthen our research enterprise in order to improve community and national health.
- **Patient Care**: Enhance our clinical enterprise to provide the highest quality patient care distinguished by our research and academic clinicians.
- **Affiliates**: Strengthen relationships with our affiliates by determining and delivering value.
- **Finances and Funding**: Ensure ongoing financial stability.
- **Marketing**: Strengthen our brand awareness and reputation to increase preference and support from students, patients, physicians and the community.

Adopted April 13, 2010
GRADUATE PROGRAM IN PUBLIC HEALTH
CERTIFICATE PROGRAM:
PUBLIC HEALTH LEADERSHIP

Name of Graduate Certificate: Certificate in Public Health Leadership (C-PHL)

Program: Graduate Program in Public Health
Department: School of Health Professions
College: Eastern Virginia Medical School

Academic Requirements:
Total Credit Hours Required: 8 credit hours
Estimated time for Completion: 2 years
Time Limit for Completion: 5 years

Transfer Credit applicable to certificate:
Non-degree seeking students and transfer students may apply a maximum of 3 transfer-course credits to the graduate certificate, upon approval of the MPH Program Director.

Certificate credit hours applicable toward a graduate degree:
A maximum of 9 hours of certificate course credits may be applied to a graduate degree upon approval of the MPH Program Director.

Course Offering Schedule:
The certificate courses will be offered over a two-year cycle, with one or two courses offered each term.

Financial Aid:
Students matriculated for the Certificate Program are not eligible for financial aid.

Registration:
An online application, copies of official transcripts, three references, and a statement of interest are required.

Tuition and Fees:
- Students are considered certificate-matriculated and will be required to pay the certificate-level tuition rate of $120 per credit hour. This rate is competitive with graduate schools offering comparable programs.
- Courses may be applied toward future MPH degree, for which the student will be required to pay the cost difference between the certificate-level tuition rate and the full degree-level tuition rate, at the time of matriculation into the degree program. A comparison of costs for similar programs is shown in Appendix B.

Delivery Methods:
All certificate courses will be taught in a classroom setting, with a variable schedule designed to accommodate working professionals in the region, as determined by the faculty member and program.
Approved Course Curriculum:

(MPH Program graduate courses eligible for completion of the certificate)

The Certificate Curriculum offers courses that take students through the process of developing and implementing effective Public Health programs. The seven required courses provide a structured sequence that includes the stages of strategic planning, community assessment, program and resource development, data management and outcome evaluation, along with the leadership essentials. Other selective courses offer the opportunities to further build professional skills.

<table>
<thead>
<tr>
<th>R=Req'd</th>
<th>S=Selective</th>
<th>Suggested Sequence (O=optional)</th>
<th>Course number</th>
<th>Course Title</th>
<th>Faculty Member</th>
<th>Credit Hours</th>
<th>New or Existing Course</th>
</tr>
</thead>
<tbody>
<tr>
<td>R</td>
<td></td>
<td></td>
<td>MPH-TBD</td>
<td>Leadership Essentials</td>
<td>Donald Buckley, Ph.D., LFACHE</td>
<td>1 cr. hr.</td>
<td>New Course</td>
</tr>
<tr>
<td>R</td>
<td></td>
<td></td>
<td>MPH-TBD</td>
<td>Strategic Action Planning</td>
<td>TBD</td>
<td>1 cr. hr.</td>
<td>New Course</td>
</tr>
<tr>
<td>R</td>
<td></td>
<td></td>
<td>MPH-TBD</td>
<td>Community Assessment</td>
<td>TBD</td>
<td>1 cr. hr.</td>
<td>New Course</td>
</tr>
<tr>
<td>R</td>
<td></td>
<td></td>
<td>MPH-TBD</td>
<td>Developing Effective Programs &amp; Interventions</td>
<td>TBD</td>
<td>1 cr. hr.</td>
<td>New Course</td>
</tr>
<tr>
<td>R</td>
<td></td>
<td></td>
<td>MPH-670</td>
<td>Coalitions &amp; Partnerships in Community Health</td>
<td>Fran Butterfoss Ph.D., Ms.Ed.</td>
<td>1 cr. hr.</td>
<td>Existing Course</td>
</tr>
<tr>
<td>R</td>
<td></td>
<td></td>
<td>MPH-TBD</td>
<td>Project Outcome Evaluation</td>
<td>TBD</td>
<td>1 cr. hr.</td>
<td>New Course</td>
</tr>
<tr>
<td>R</td>
<td></td>
<td></td>
<td>MPH-675</td>
<td>Health Communications &amp; Social Marketing</td>
<td>Patti Kiger, M.Ed.</td>
<td>1 cr. hr.</td>
<td>Existing Course</td>
</tr>
<tr>
<td>S</td>
<td></td>
<td></td>
<td>MPH-TBD</td>
<td>Resource Development</td>
<td>TBD</td>
<td>1 cr. hr.</td>
<td>New Course</td>
</tr>
<tr>
<td>S</td>
<td></td>
<td></td>
<td>MPH-674</td>
<td>Managing Data: SAS for the Non-Epidemiologist</td>
<td>Yueqin Zhao, M.S.</td>
<td>1 cr. hr.</td>
<td>Existing Course</td>
</tr>
<tr>
<td>S</td>
<td></td>
<td></td>
<td>MPH-673</td>
<td>GIS Mapping</td>
<td>Josh Behr, Ph.D./ Hua Liu, Ph.D.</td>
<td>1 cr. hr.</td>
<td>Existing Course</td>
</tr>
</tbody>
</table>
Certificate Course Descriptions

I. Currently Offered Courses:

- **MPH-670: Coalition and Partnerships in Community Health** - This course offers the essentials of building, maintaining and evaluating coalitions for health promotion and disease prevention.
  
  o **Instructor:** Fran Butterfoss, Ph.D., M.s.Ed.

- **MPH-673: GIS Mapping** - This course emphasizes the use of GIS as an applied tool for a better understanding of infectious disease and environmental health interactions, as well as brief exposure to approaches in modeling and simulation.
  
  o **Instructor:** Josh Behr, Ph.D. / Hua Liu, Ph.D.

- **MPH-674: Managing Data: SAS for the Non-Epidemiologist** - This course provides fundamental basics of developing databases and managing program data using EXCEL and ACCESS Software.
  
  o **Instructor:** Yueqin Zhao, M.S.

- **MPH-675: Health Communications & Social Marketing** - Various methods of communicating with a Public Health audience will center on a social marketing approach that uses marketing principles to build awareness and change behavior among intended audiences.
  
  o **Instructor:** Patti Kiger, M.Ed.
Certificate Course Descriptions

II. New Courses:

- **MPH-TBD: Leadership Essentials** - Offers basics of leadership styles and characteristics, facilitation, mentoring, decision-making and negotiation needed to implement effective Public Health programs.
  
  - **Instructor:** Donald Buckley, Ph.D., LFACHE (and guest lecturers)

- **MPH-TBD: Strategic and Action Planning** - Maximizing an organization’s ability to develop its vision, values and mission, construct achievable goals and objectives. Moving from strategic to action planning will be covered by focusing on resources and measurable outcomes.
  
  - **Instructor:** TBD

- **MPH-TBD: Community Assessment** - Principles of assessing needs and assets in communities, determining appropriate data sources, reliable informants, methods for gathering and presenting data and results.
  
  - **Instructor:** TBD

- **MPH-TBD: Developing Effective Programs & Interventions** - Solid theory and research-based literature will provide a foundation for the “how-to’s” of developing and implementing effective strategies and programs in Public Health settings that are responsive to diverse audiences.
  
  - **Instructor:** TBD

- **MPH-TBD: Resource Development** - In addition to grant-writing, this course will focus on conducting effective fund-raising campaigns and other events that bring tangible resources to an organization. Attention will be paid to promoting the organization’s image and credibility through websites and other educational materials. (Starting in 2010, this course will replace the existing MPH-795 Grant Writing course.)
  
  - **Instructor:** TBD

- **MPH-TBD: Project Outcome Evaluation** - This course presents the application of research methods to the evaluation of health programs, with the goal of measuring evaluation design, validity, and reliability and impact assessment.
  
  - **Prerequisite:** MPH-TBD: Community Assessment (1 credit hour)
  - **Instructor:** TBD
A. Purpose and Rationale

The Graduate Program in Public Health is charged by the Council on Education for Public Health (CEPH) to offer training to the Public Health workforce. This certificate is intended:

- to provide continuing education for professionals to expand their skill set and advancement opportunities; and
- to provide graduate level training for practicing professionals in Public Health settings;
- to provide diverse elective courses for students in the EVM S M PH Program;
- to introduce prospective students to the M PH program;

In November 2006, the M PH Program administrated a survey to seven regional health districts, to identify the continuing education requirements for the workforce. The survey was developed by a committee composed of Public Health workers and M PH Program faculty. Scott Secrist, Ph.D. in the College of Health Sciences at Old Dominion University administered the web-based survey. Principal data elicited by the survey included:

(a) years employed in the field of Public Health;
(b) employee age;
(c) areas of training that would benefit current job;
(d) areas of training that would have a positive difference on career enhancement; and
(e) preferred location to receive training.

The relevant results of this workforce survey are shown in Appendix A of this document. The areas of training that the workforce responded mostly positively to, when asked which skills would (a) benefit from additional training in, (b) make the most positive difference in your ability to perform your current job effectively and efficiently, (c) make the most positive difference in future options and career enhancement in Public Health, included:

<table>
<thead>
<tr>
<th>Areas of Training</th>
<th>Great Benefit (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Leadership skills</td>
<td>40.7</td>
</tr>
<tr>
<td>Public / Community Health program evaluation</td>
<td>31.8</td>
</tr>
<tr>
<td>Database design skills (SAS, SPSS, Excel)</td>
<td>30.1</td>
</tr>
<tr>
<td>Community/ program planning, needs assessment, setting goals and objectives</td>
<td>29.1</td>
</tr>
</tbody>
</table>

In addition, respondents identified the options below when asked to indicate their most preferred location to receive training.

<table>
<thead>
<tr>
<th>Location to Receive Training</th>
<th>Most Preferred</th>
</tr>
</thead>
<tbody>
<tr>
<td>On-site</td>
<td>61%</td>
</tr>
<tr>
<td>Regional</td>
<td>31%</td>
</tr>
</tbody>
</table>

The goal of the Public Health Leadership Certificate Program is to offer training in the areas listed above, in a set of courses intended to nurture leadership and community development in Public Health.
B. Admission Requirements

Applicants are not required to pursue an MPH degree (graduate or undergraduate) and will be registered as a Certificate Program-matriculated student.

- **Degree**: Baccalaureate degree from an accredited college or university;

- **GPA**: Undergraduate grade point average (GPA) of 2.5 or better; preference will be given to applicants whose GPA is 3.0 or better;

- **Official Transcripts**: Official transcripts of undergraduate and graduate coursework are required;

- **Standardized tests**: GRE or GMAT/MCAT are not required for Certificate Program matriculation;

- **Prerequisite courses**: The Project Outcomes Evaluation course requires completion of the Community Assessment 1-credit hour course. No other prerequisites are required;

- **Application**: Submit copies of official transcripts, 3 references and a statement of interest to the MPH Program Coordinator; online application to the Certificate Program may be available in the future;

- **Statement of Interest**: A personal statement, describing the prospective student’s interest in the Certificate Program and their goals, must be included in the application packet;

- **Other**: TOEFL score of >610 for the paper-based test and >108 for the internet-based test are required for applicants whose native language is not English.

C. Certificate Requirements

While the certificate can be completed in as little as 18 months, most students are anticipated to complete the program in approximately 2 years, and are required to complete the certificate in no more than 5 years. A cumulative GPA of 2.75 is required for completion of the certificate. Students may transfer a maximum of 3 transfer-course credit hours total to the LPHO graduate certificate, pending approval of the MPH Program Director. Up to 9 credit hours, taken as part of the LPHO certificate program may be transferred toward an MPH graduate degree.

D. Target Learners

The Certificate in Public Health Leadership will teach leadership skills and advanced knowledge of Public Health practices to the following audience of learners:

- Public Health workforce members
- Public Health practitioners (e.g. nurses, specialists)
- Social Service workforce members
- Prospective students considering a graduate degree in the MPH Program

In order to support this goal, members of the Public Health workforce, who are accepted as applicants will be considered certificate-matriculated students and the certificate-level tuition rate will be $120 per credit hour. Courses may be applied toward an MPH degree, for which the student will be required to pay the cost difference between the certificate-level tuition rate and the full degree-level tuition rate. In addition, plans include delivery of these courses via video conference to the Virginia Department of Public Health network, so that workforce members may have an option to attend the courses at their place of work.
E. Program of Studies

The approved Public Health Leadership Certificate Program is an 8-credit hour program of study, comprised of eight 1-credit hour courses, which focus on developing leadership skills, advanced comprehension of Public Health competencies, and applied knowledge of innovations and best practices in the field of Public Health.

All Certificate Program matriculates are advised to follow the recommended sequence of courses (see section on Approved Course Curriculum), with the option of selecting eight 1-credit hour courses from the set of optional certificate courses. With each course offered biannually, and an average of 2 certificate courses offered per term, most students can complete the certificate requirements in 18 months to 2 years. The maximum allowed time to complete the certificate is 5 years (12 terms). Certificate matriculates who have completed MPH-670: Coalition and Partnerships in Community Health, MPH-673: GIS Mapping, MPH-674: Managing Data: SAS for the Non-Epidemiologist, MPH-675: Health Communications & Social Marketing or MPH-795: Grant Writing may apply these courses to their certificate credits.

F. Benefits

The MPH Program is offering this certificate to meet the needs of the regional Public Health workforce. This program is designed to benefit workforce learners in the following ways:

- **Leadership Skills** - all certificate courses are designed to develop leadership skills by enhancing students’ understanding of strategic organizational processes, and by demonstrating effective management tools needed for community development projects and policy administration.

- **Written Communication** - all courses provide opportunities to develop professionalism and advanced communications skills in writing policy, planning and evaluation documents.

- **Technical Assistance / Consultation** - several courses address implementation of tools and processes that aid in developing technical competencies (e.g. GIS Mapping, Managing Data: SAS for Non-Epidemiologists), as well as professional competencies (e.g. Strategic and Action Planning, Resource Development) needed for consulting, collaboration and planning.

- **Survey Design / Implementation** - Following a model of assessment, design, development, implementation and evaluation, some courses provide instruction on procedures and best practices used for program design and project management (e.g. Community Assessment, Developing Effective Programs & Interventions).

- **Quality Improvement / Assurance** - Project evaluation, process management and performance improvement are taught in courses aimed at improving research and community development (e.g. Developing Effective Programs & Interventions, Project Outcome Evaluation).

- **Oral Communication / Public Speaking** - Several courses require students to develop presentation skills, group dynamics and public speaking expertise through various classroom experiences (e.g. Leadership Essentials, Health Communications & Social Marketing).

- **Mediation / Negotiation / Legislative / Policy Planning** - Several courses provide real-world examples of conflict resolution through mediation and negotiation, and introduce students to legislative advocacy and policy planning (e.g. Leadership Essentials, Coalition and Partnerships in Community Health, Strategic and Action Planning).
APPENDIX A: Community Assessment Results

Continuing Education and Training Needs Assessment of Community and Public Health Professionals in Hampton Roads, Virginia

Date:
Completed November, 2006

Purpose:
This survey was conducted to guide development of continuing education activities meant to serve the needs of the Public Health workforce in Hampton Roads.

Methods:
The survey was developed by a committee composed of Public Health workers and MPH Program faculty.

Dr. Scott Secrist in the College of Health Sciences at Old Dominion University administered the survey through a web-based tool that directed the survey to persons on email lists provided by the regional health districts. Dr. Secrist assembled the responses and de-identified them.

This summary includes the aggregated data for all of the Health Districts.
## APPENDIX A: Community Assessment Results (cont’d)

### Table 7. Areas of Training That Would Benefit the Current Job

<table>
<thead>
<tr>
<th>Area</th>
<th>Great Benefit (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td><em>In your current job, to what extent would you benefit from additional training in each of the following areas?</em></td>
<td></td>
</tr>
<tr>
<td>Computer software skills (Word, PowerPoint, Excel, Front Page, etc.)</td>
<td>49.4</td>
</tr>
<tr>
<td>Foreign language</td>
<td>45.1</td>
</tr>
<tr>
<td>Developing private/public speaking skills</td>
<td>41.5</td>
</tr>
<tr>
<td><strong>Leadership skills</strong></td>
<td></td>
</tr>
<tr>
<td>Oral communication/public speaking skills</td>
<td>40.7</td>
</tr>
<tr>
<td>Health promotion and disease prevention—theory and application</td>
<td>37.3</td>
</tr>
<tr>
<td>Interpersonal communication, including mentoring and coaching</td>
<td>35.3</td>
</tr>
<tr>
<td>Disease outbreak investigation</td>
<td>34.6</td>
</tr>
<tr>
<td>Participatory teaching/training skills</td>
<td>34.6</td>
</tr>
<tr>
<td>Cross-cultural and cross-age communication</td>
<td>33.6</td>
</tr>
<tr>
<td>Legal considerations in Public Health</td>
<td>32.0</td>
</tr>
<tr>
<td><strong>Database design skills (SAS, SPSS, Excel)</strong></td>
<td>31.8</td>
</tr>
<tr>
<td>Written communication, e.g., analytic writing and report generation</td>
<td>31.6</td>
</tr>
<tr>
<td>Health and risk communication strategies, e.g., media advocacy, video conferencing</td>
<td>31.0</td>
</tr>
<tr>
<td>Community involvement/mobilization, including under-served populations, public/private partnerships</td>
<td>30.3</td>
</tr>
<tr>
<td><strong>Public / Community health program evaluation</strong></td>
<td>30.1</td>
</tr>
<tr>
<td>Clinical skills</td>
<td>30.0</td>
</tr>
<tr>
<td>Group facilitation, including team building, lead meetings</td>
<td>29.2</td>
</tr>
<tr>
<td><strong>Community/ program planning, including needs assessment, setting goals and objectives</strong></td>
<td>29.1</td>
</tr>
<tr>
<td>Communicable disease follow-up</td>
<td>28.1</td>
</tr>
<tr>
<td>Grant writing</td>
<td>27.9</td>
</tr>
<tr>
<td>Environmental health skills</td>
<td>25.0</td>
</tr>
<tr>
<td>Overview of the community/Public Health system, including systems theory, financing and delivery</td>
<td>24.5</td>
</tr>
<tr>
<td>Electronic communication, including Internet and INPHO</td>
<td>24.5</td>
</tr>
<tr>
<td>Mediation and negotiation</td>
<td>22.9</td>
</tr>
<tr>
<td>Quality Improvement and assurance strategies</td>
<td>19.3</td>
</tr>
<tr>
<td>Data analysis and utilization, including statistics</td>
<td>18.9</td>
</tr>
<tr>
<td>Strategic planning</td>
<td>16.9</td>
</tr>
<tr>
<td>Finance and personnel management, and budgeting</td>
<td>16.1</td>
</tr>
<tr>
<td>Volunteer recruitment/ordinator</td>
<td>15.1</td>
</tr>
<tr>
<td>Survey design and implementation</td>
<td>15.0</td>
</tr>
<tr>
<td>Legislative/policy planning</td>
<td>14.5</td>
</tr>
<tr>
<td>Provision of technical assistance/consultation services</td>
<td>10.5</td>
</tr>
<tr>
<td>Laboratory skills</td>
<td>11.7</td>
</tr>
</tbody>
</table>
### APPENDIX A: Community Assessment Results (cont’d)

#### Table 8. Areas of Training, Most Positive Difference

<table>
<thead>
<tr>
<th>Area</th>
<th>Great Benefit (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>“Which of the training topics would make the most positive difference in your ability to perform your current job effectively and efficiently?” (33 categories)</td>
<td></td>
</tr>
<tr>
<td>Clinical Skills</td>
<td>12.2</td>
</tr>
<tr>
<td>Health promotion and disease prevention—theory and application</td>
<td>12.2</td>
</tr>
<tr>
<td>Environmental health skills</td>
<td>11.5</td>
</tr>
<tr>
<td>Foreign language</td>
<td>7.9</td>
</tr>
<tr>
<td>Computer software skills</td>
<td>5.8</td>
</tr>
<tr>
<td>Finance and personnel management, and budgeting</td>
<td>6.5</td>
</tr>
<tr>
<td>Community/Public Health overview</td>
<td>6.5</td>
</tr>
<tr>
<td>Cross-cultural/cross-age communication</td>
<td>2.9</td>
</tr>
<tr>
<td><strong>Leadership skills</strong></td>
<td><strong>5.8</strong></td>
</tr>
<tr>
<td>Community/program planning/needs assessment</td>
<td>-</td>
</tr>
<tr>
<td>Environmental health skills</td>
<td></td>
</tr>
<tr>
<td>“Which of the training topics would make the most positive difference in future options and career enhancement in Public Health?” (33 categories)</td>
<td></td>
</tr>
<tr>
<td>Health promotion and disease prevention—theory and application</td>
<td>13.1</td>
</tr>
<tr>
<td>Overview of the community/Public Health system, including systems theory, financing and</td>
<td>6.2</td>
</tr>
<tr>
<td>Clinical skills</td>
<td>4.8</td>
</tr>
<tr>
<td>Environmental health skills</td>
<td>6.9</td>
</tr>
<tr>
<td>Finance and personnel management, and budgeting</td>
<td>7.6</td>
</tr>
<tr>
<td><strong>Leadership skills</strong></td>
<td><strong>5.5</strong></td>
</tr>
<tr>
<td>Computer software skills (Word, PowerPoint, Excel, Front Page, etc.)</td>
<td>6.2</td>
</tr>
<tr>
<td>Foreign language</td>
<td>7.6</td>
</tr>
<tr>
<td>Community/program planning, including needs assessment, setting goals and objectives</td>
<td><strong>4.8</strong></td>
</tr>
<tr>
<td>Public/community health program evaluation</td>
<td>4.8</td>
</tr>
<tr>
<td>Oral communication/public speaking skills</td>
<td>3.5</td>
</tr>
</tbody>
</table>
### APPENDIX A: Community Assessment Results (cont’d)

#### Table 9. Location to Receive Training

<table>
<thead>
<tr>
<th>Location</th>
<th>Most Preferred*</th>
</tr>
</thead>
<tbody>
<tr>
<td>On-site</td>
<td>63.1%</td>
</tr>
<tr>
<td>Regional</td>
<td>32.7%</td>
</tr>
<tr>
<td>Computer-based</td>
<td>19.6%</td>
</tr>
<tr>
<td>Two-way audio</td>
<td>8.8%</td>
</tr>
<tr>
<td>Satellite downlink</td>
<td>6.9%</td>
</tr>
</tbody>
</table>

* Each location was queried separately, so responses across locations >100%.
APPENDIX B: Comparison of Graduate Public Health Certificates


University North Carolina Gillings School of Public Health

- Certificate in Public Health Leadership:
  - [$576 Out-of-state / $288 In-state tuition per credit hour]
  - 11-credit hours, all online, may be transferred into MPH degree program following matriculation;
    - Public Health Leadership Seminar (2 cr. hrs.)
    - Core Principles in Public Health Leadership (3 cr. hrs).
    - Project Management Principles & Practices (3 cr. hrs.)
    - Elective Courses (3 cr. hrs.)

Boston University School of Public Health

- Leading Organizations to Achieve the Millennium Development Goals for Health:
  - [$1042 Graduate rate / $680 Training rate, per credit hour]
  - 8-credit hours, taught during a 4-week intensive class.
    - The curriculum will integrate the Leadership and management practices of scanning, focusing, aligning/mobilizing, planning, organizing, implementing, and monitoring and evaluating.

- International Health on the Community Level:
  - [$1142 Graduate rate / $685 Training rate, per credit hour]
  - 8-credit hours, taught during a 4-week intensive class.
    - Evaluate the use of research methods in developing countries, nutrition, maternal and child health, reproductive health, sustainable development and environmental justice, community problem-solving for better health, and specific issues in political advocacy will be covered.
Name of Graduate Certificate: Certificate in Public Health Core Competencies (C-PHCC)

Program: Graduate Program in Public Health

Department: School of Health Professions

College: Eastern Virginia Medical School

Academic Requirements:

Total Credit Hours Required: 18 credit hours

Estimated time for Completion: 2 years

Time Limit for Completion: 4 years

Transfer Credit applicable to certificate:

Non-degree seeking students and transfer students may apply a maximum of 3 transfer-course credits total to the graduate certificate, pending approval of the MPH Program Director.

Certificate credit hours applicable toward a graduate degree:

A maximum of 18 hours of certificate course credits may be applied to a graduate degree with approval from the MPH Program Director.

Course Offering Schedule:

Currently, all courses required for completion of the certificate are offered on an annual schedule.

Financial Aid:

Students matriculated for the Certificate Program are not eligible for financial aid.

Registration:

An online application, copies of official transcripts, three references, and a statement of interest are required.

Tuition and Fees:

- Students are considered certificate-matriculated and will be required to pay the certificate-level tuition rate of $120 per credit hour. This rate is competitive with graduate schools offering comparable programs.
- Courses may be applied toward future MPH degree, for which the student will be required to pay the cost difference between the certificate-level tuition rate and the full degree-level tuition rate, at the time of matriculation into the degree program.

Delivery Methods:

All certificate courses will be taught in a classroom setting, with a term schedule determined by the faculty member and program; an alternate online video streaming option is being considered.
**Approved Course Curriculum:**

(MPH Program graduate courses eligible for completion of the certificate)

The certificate curriculum is designed to offer courses that develop a broad comprehension of Public Health practices and strategies. The seven required courses are sequenced to provide a comprehensive overview of the core areas of Public Health, as well as an introduction to the goals and strategies of Public Health and a scenario-based synthesis of concepts in an applied ethical framework.

<table>
<thead>
<tr>
<th>R=Req'd S=Select</th>
<th>Suggested Sequence</th>
<th>Course number</th>
<th>Course Title</th>
<th>Faculty Member</th>
<th>Term</th>
<th>Credit Hours</th>
<th>New or Existing Course</th>
</tr>
</thead>
<tbody>
<tr>
<td>R</td>
<td>1</td>
<td>MPH-601</td>
<td>Introduction to Public Health</td>
<td>Donald Buckley, Ph.D., LFACHE</td>
<td>FALL</td>
<td>1 cr. hr.</td>
<td>Existing Course</td>
</tr>
<tr>
<td>R</td>
<td>2</td>
<td>MPH-603</td>
<td>Principles of Epidemiology</td>
<td>Hind Baydoun, Ph.D.</td>
<td>FALL</td>
<td>3 cr. hr.</td>
<td>Existing Course</td>
</tr>
<tr>
<td>R</td>
<td>3</td>
<td>MPH-605</td>
<td>Health Administration and Organization</td>
<td>Clint Crews, M.P.H.</td>
<td>FALL</td>
<td>3 cr. hr.</td>
<td>Existing Course</td>
</tr>
<tr>
<td>R</td>
<td>4</td>
<td>MPH-602</td>
<td>Introduction to Biostatistics</td>
<td>Michael Doviak, M.S.</td>
<td>SPRING</td>
<td>3 cr. hr.</td>
<td>Existing Course</td>
</tr>
<tr>
<td>R</td>
<td>5</td>
<td>MPH-606</td>
<td>Environmental Health</td>
<td>James English, M.P.H.</td>
<td>SUMMER</td>
<td>3 cr. hr.</td>
<td>Existing Course</td>
</tr>
<tr>
<td>R</td>
<td>6</td>
<td>MPH-604</td>
<td>Health Education / Behavioral Science</td>
<td>Ben Dobrin, Ph.D.</td>
<td>FALL</td>
<td>3 cr. hr.</td>
<td>Existing Course</td>
</tr>
<tr>
<td>R</td>
<td>7</td>
<td>MPH-609</td>
<td>Ethics in Public Health Practice</td>
<td>Richard Vroman, M.S.</td>
<td>FALL</td>
<td>2 cr. hr.</td>
<td>Existing Course</td>
</tr>
</tbody>
</table>
CERTIFICATE COURSE DESCRIPTIONS

**MPH-601: Introduction to Public Health** (1 credit hour)
An introduction to the multi-disciplinary field of Public Health; will use a series of lectures, readings, discussions and interactive sessions to provide students with a framework for studies during the course of the program.

**MPH-605: Health Administration/Organization** (3 credit hours)
An introduction to the understanding of the structure and functions of the American health-care system, Public Health practice in the United States and basic managerial responsibilities. Emphasis is on management tasks and styles, structure and trends in the health-care system, legal and regulatory framework for Public Health, organizational and community assessment, Public Health settings and services. Lectures, reading and written assignments.

**MPH-603: Principles of Epidemiology** (3 credit hours)
An introduction to epidemiology as a body of knowledge and a method for analyzing community health problems. Emphasis is on how to measure and describe the health of populations, the natural history of diseases in population groups, standardization of rates, sources of data, study designs, measurements of risk, evaluation of screening tests, causal inferences and outbreak investigation. Lectures, reading and individual and group assignments.

**MPH-602: Introduction to Biostatistics** (3 credit hours)
An introduction to the use of statistics in the health field. Emphasis is on descriptive statistics, estimation, linear regression and contingency tables. Lectures, reading, demonstrations, experiential activities and written and oral assignments.
**MPH-606: Environmental Health Science** (3 credit hours)

An introduction to the chemical, physical and biological factors affecting human health and disease. Emphasis is on the skills to detect environmental factors in health problems and to determine methods of control to prevent disease and maximize environmental quality. Lectures, readings and required assignments.

**MPH-604: Health Education & Behavioral Science** (3 credit hours)

An introduction to the underlying principles of health education and behavioral science as used in Public Health. Emphasis on the primary social-psychological variables that may influence health and disease, strategies that can influence behavior change, community assessment, risk communication and evaluation designs to measure outcomes of health education efforts. Lectures, reading and individual assignments.

**MPH-609: Ethics in Public Health Practice** (2 credit hours)

An examination of the central principles, concepts and values in Public Health ethics. Emphasis is on identifying ethical issues in Public Health practice using lectures, readings and group discussions.
A. Purpose and Rationale

The Graduate Program in Public Health is charged, by Council on Education for Public Health (CEPH), with offering training to the Public Health workforce:

- to provide continuing education for professionals to expand their skill set and opportunities for advancement;
- to provide graduate level training for practicing professionals in Public Health settings;
- to provide diverse elective courses for students in the EVM S M PH Program;
- to introduce prospective students to the MPH program;

The goal of the Core Competencies in Public Health Certificate Program is to offer instruction in the training areas listed above, by providing opportunities for the application of these skills in real-world scenarios and case studies, intended to nurture an understanding of leadership and community development processes and best practices in the field of Public Health.

B. Admission Requirements

Applicants are not required to pursuing an MPH degree (graduate or undergraduate) and will be registered as a Certificate Program matriculated student.

- **Degree:** Baccalaureate degree from an accredited college or university;
- **GPA:** Undergraduate grade point average (GPA) of 2.5 or better; preference will be given to applicants whose GPA is 3.0 or better;
- **Official Transcripts:** Official transcripts of undergraduate and graduate coursework are required.
- **Standardized tests:** GRE or GMAT/MCAT are not required for Certificate Program matriculation;
- **Prerequisite courses:** No prerequisite courses required;
- **Application:** Submit copies of official transcripts, 3 references and a statement of interest to the MPH Program Coordinator; online application to the Certificate Program may be available in the future;
- **Statement of Interest:** A personal statement, describing the prospective student’s interest in the Certificate Program and their goals, must be included in the application packet;
- **Other:** TOEFL score of >610 for the paper-based test and >108 for the internet-based test are required for applicants whose native language is not English.
C. Certificate Requirements

While the certificate can be completed in as little as 12 months, it is anticipated that most students will complete the program in approximately 2 years, and are required to complete the certificate in no more than 4 years. A cumulative GPA of 2.75 is required for completion of the certificate. Students may apply a maximum of 3 transfer-course credits total to the PHCC graduate certificate, pending approval of the MPH Program Director. Up to 18 credit hours, taken as part of the PHCC certificate program may be transferred toward an MPH graduate degree.

D. Target Learners

The Certificate in Core Competencies in Public Health is aimed at providing leadership skills and advanced knowledge of for the following audience of learners:

- Public Health workforce members
- Public Health practitioners (e.g. nurses, specialists)
- Social Service workforce members
- Prospective students considering a graduate degree in the MPH Program

In order to support this goal, members of the Public Health workforce, who are accepted applicants will be considered certificate-matriculated students and the certificate-level tuition rate will be $120 per credit hour. Courses may be applied toward future MPH degree, for which the student will be required to pay the cost difference between the certificate-level tuition rate and the full degree-level tuition rate. In addition, plans include delivery of these courses via video conference to the Virginia Department of Public Health network, so that workforce members may have an option to attend the courses at their place of work.

E. Program of Studies

The approved Core Competencies in Public Health Certificate Program is an 18-credit hour program of study comprised of one 1-credit hour Introduction to Public Health course, five 3-credit hour courses, and one 2-credit hour Ethics in Public Health course. Combined, this certificate will focus on developing comprehension of Public Health competencies, and applied knowledge of innovations and best practices in the field of Public Health.

All Certificate Program matriculates are advised to follow the recommended sequence of courses (see section on Approved Course Curriculum). With each course offered annually, most students can complete the certificate requirements in 2 years (6 terms). The maximum time allowed to complete the certificate is 4 years (12 terms).
APPENDIX A: Comparison of Graduate Public Health Certificates


- **Johns Hopkins Bloomberg School of Public Health**
  - Training Certificate in Public Health Practice: 16-credit hours, both classroom and online, may be transferred into MPH degree program following matriculation;
    - Problem Solving in Public Health (4 cr. hrs.)
    - Public Health Practice (4 cr. hrs.)
    - Fundamentals of Epidemiology I (3 cr. hrs.)
    - Fundamentals of Epidemiology / I (3 cr. hrs.)
    - Social and Behavioral Aspects of Public Health (4 cr. hrs.)
    - Introduction to Persuasive Communications (4 cr. hrs)
    - Electives (6 cr. hrs.)

- **University North Carolina School of Public Health**
  - Certificate in Core Public Health Concepts: 11-credit hours, all online, may be transferred into MPH degree program following matriculation;
    - Principles of Epidemiology (3 cr. hrs.)
    - Principles of Statistical Inference (3 cr. hrs.)
    - Introduction to Health Policy and Administration (3 cr. hrs.)
    - Social and Behavioral Science in Public Health (3 cr. hrs.)
    - Environmental Health (3 cr. hrs.)

- **University of Minnesota**
  - Public Health Certificate in Core Concepts: 16-credit hours, both classroom and online, may be transferred into MPH degree program following matriculation;
    - Fundamentals of Epidemiology (3cr. hrs.)
    - Biostatistical Methods (3cr. hrs.)
    - Public Health Management (3 cr. hrs.)
    - Fundamentals of Social and Behavioral Science (3 cr. hrs.)
    - Issues in Environmental & Occupational Health (3 cr. hrs.)
    - Ethics in Public Health (1 cr. hr)

- **University of Michigan**
  - Public Health Certificate Program: 16-credit hours, all online, may be transferred into MPH degree program following matriculation;
    - Epidemiology (4 cr. hrs.)
    - Biostatistics (3 cr. hrs.)
    - Environmental Health Sciences (3 cr. hrs.)
    - Health Behavior and Health Education (3 cr. hrs.)
    - Health Management and Policy (3 cr. hrs.)
### Epidemiology Track

<table>
<thead>
<tr>
<th>Year</th>
<th>Fall</th>
<th>Spring</th>
<th>Summer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>• MPH-610: Introduction to Public Health Practice (3 cr.)</td>
<td>• MPHE-614: Principles of Epidemiology (3 cr.)</td>
<td>• MPHE-722: Methods of Program Evaluation (3 cr.)</td>
</tr>
<tr>
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<td>• MPHE-612: Introduction to Biostatistics (3 cr.)</td>
<td>• MPHE-611: Social and Behavioral Sciences for Public Health (3 cr.)</td>
<td>• MPHE-624: Data Management with SAS (3 cr.)</td>
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<td>• MPHE-615: Public Health Administration and Management (3 cr.)</td>
<td>• MPHE-613: Principles of Environmental Health Science (3 cr.)</td>
<td>+selective (1 credit)</td>
</tr>
<tr>
<td>2nd</td>
<td>• MPH-767: Introduction to Public Health Project Methods (2 cr.)</td>
<td>• MPHE-768: Practicum (2 cr.)</td>
<td>• MPHE-770: Capstone (3 cr.)</td>
</tr>
<tr>
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<td>• MPHE-711: Epidemiology Methods I (3 cr.)</td>
<td>• MPHE-718: Epidemiology Methods II (3 cr.)</td>
<td>• MPHE-715: Current Issues in Epidemiology (3 cr.)</td>
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<td>• MPHE-702: Biostatistics II (3 cr.)</td>
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<td>+selective (1 credit)</td>
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<td>• +selective (1 credit)</td>
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</tr>
</tbody>
</table>

**Black** = common courses across four tracks.  
**Blue** = Epidemiology Track courses.  
**Pink** = choice of three 1-credit selective or one 3-credit elective courses (to meet 46 credit requirement).

*Each semester a student must register for at least 6-credit hours per semester to be eligible for financial aid. (Note: Epidemiology students are advised to register for at least one credit hour in the Spring semester of their 2nd year in order to meet this requirement.)*

### Health Management Track

<table>
<thead>
<tr>
<th>Year</th>
<th>Fall</th>
<th>Spring</th>
<th>Summer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>• MPH-610: Introduction to Public Health Practice (3 cr.)</td>
<td>• MPHE-614: Principles of Epidemiology (3 cr.)</td>
<td>• MPHE-722: Methods of Program Evaluation (3 cr.)</td>
</tr>
<tr>
<td></td>
<td>• MPHE-612: Introduction to Biostatistics (3 cr.)</td>
<td>• MPHE-611: Social and Behavioral Sciences for Public Health (3 cr.)</td>
<td>• MPHO-727: Organizational Management (3 cr.)</td>
</tr>
<tr>
<td></td>
<td>• MPHE-615: Public Health Administration and Management (3 cr.)</td>
<td>• MPHE-613: Principles of Environmental Health Science (3 cr.)</td>
<td>+selective (1 credit)</td>
</tr>
<tr>
<td>2nd</td>
<td>• MPH-767: Introduction to Public Health Project Methods (2 cr.)</td>
<td>• MPHE-768: Practicum (2 cr.)</td>
<td>• MPH-770: Capstone (3 cr.)</td>
</tr>
<tr>
<td></td>
<td>• MPHE-723: Policy and Politics (3 cr.)</td>
<td>• MPHE-721: Healthcare Strategy (3 cr.)</td>
<td>• MPHE-736: Conflict Resolution and Negotiation (3 cr.)</td>
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<td>• MPHE-733: Financing Healthcare (3 cr.)</td>
<td>• +selective (1 credit)</td>
<td>+selective (1 credit)</td>
</tr>
<tr>
<td></td>
<td>• +selective (1 credit)</td>
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</table>

**Black** = common courses across four tracks.  
**Green** = Health Management Track courses.  
**Pink** = choice of three 1-credit selective or one 3-credit elective courses (to meet 46 credit requirement).

*Each semester a student must register for at least 6-credit hours per semester to be eligible for financial aid. (Note: Health Management students are advised to register for one credit hour in the Spring semester of their 2nd year in order to meet this requirement.)*
## Environmental Health Track

<table>
<thead>
<tr>
<th>Year</th>
<th>Fall</th>
<th>Spring</th>
<th>Summer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>• MPH-610: Introduction to Public Health practice (3 cr.)</td>
<td>• MPH-614: Principles of Epidemiology (3 cr.)</td>
<td>• HPRO-660: Program Planning and Evaluation (3 cr.)</td>
</tr>
<tr>
<td></td>
<td>• MPH-612: Introduction to Biostatistics (3 cr.)</td>
<td>• MPH-613: Principles of Environmental Health Science (3 cr.)</td>
<td>• ENVH-602: Environmental Health Administration and Law (3 cr.)</td>
</tr>
<tr>
<td></td>
<td>• ENVN566: Environmental Risk Assessment and Decision Analysis (3 cr.)</td>
<td>• MPH-615: Public Health Administration and Management (3 cr.)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• ENVH-643: Principles of Toxicology (3 cr.)</td>
<td>• + ENVH Elective (3 cr.)</td>
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</tr>
<tr>
<td>2nd</td>
<td>• MPH-767: Introduction to Public Health Project Methods (2 cr.)</td>
<td>• MPH-768: Practicum (2 cr.)</td>
<td>• MPH-770: Capstone (3 cr.)</td>
</tr>
<tr>
<td></td>
<td>• MPH-611: Social and Behavioral Sciences for Public Health (3 cr.)</td>
<td>• MPH-615: Public Health Administration and Management (3 cr.)</td>
<td>+ ENVH Elective (3 cr.)</td>
</tr>
<tr>
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<td>• ENVH Elective (3 cr.)</td>
<td>• + ENVH Elective (3 cr.)</td>
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</tbody>
</table>

Black = common courses across four tracks.  
Orange = Environmental Health Track required courses. 
Pink = choice of three 3-credit EVMH elective courses (to meet 46 credit requirement).

*Each semester a student must register for at least 6-credit hours per semester to be eligible for financial aid. (Note: Environmental Health track students are advised to register for at least one credit hour in the Spring semester of their 2nd year in order to meet this requirement.)*

## Health Promotion Track

<table>
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<tr>
<th>Year</th>
<th>Fall</th>
<th>Spring</th>
<th>Summer</th>
</tr>
</thead>
<tbody>
<tr>
<td>1st</td>
<td>• MPH-610: Introduction to Public Health practice (3 cr.)</td>
<td>• MPH-614: Principles of Epidemiology (3 cr.)</td>
<td>• MPH-660: Program Planning and Evaluation (3 cr.)</td>
</tr>
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<td></td>
<td>• MPH-612: Introduction to Biostatistics (3 cr.)</td>
<td>• MPH-613: Principles of Environmental Health Science (3 cr.)</td>
<td>• MPH-650: Health Promotion Education Methods and Materials (3 cr.)</td>
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<tr>
<td></td>
<td>• MPH-611: Social and Behavioral Sciences for Public Health (3 cr.)</td>
<td>• MPH-615: Public Health Administration and Management (3 cr.)</td>
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</tr>
<tr>
<td></td>
<td>• +HPRO Elective (3 cr.)</td>
<td>• +HPRO Elective (3 cr.)</td>
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<tr>
<td>2nd</td>
<td>• MPH-767: Introduction to Public Health Project Methods (2 cr.)</td>
<td>• MPH-768: Practicum (2 cr.)</td>
<td>• MPH-770: Capstone (3 cr.)</td>
</tr>
<tr>
<td></td>
<td>• HPRO 670: Cultural Issues in Health Promotion (3 cr.)</td>
<td>• MPH-672: Policy and Politics in Public Health (3 cr.)</td>
<td>+ HPRO Elective (3 cr.)</td>
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<td>• +HPRO Elective (3 cr.)</td>
<td>• +HPRO Elective (3 cr.)</td>
<td></td>
</tr>
</tbody>
</table>

Black = common courses across four tracks.  
Purple = Health Promotion Track required courses. 
Pink = choice of three 3-credit HRPO elective courses or a combination of three 1-credit selective and two 3-credit HRPO elective courses (to meet 46 credit requirement).

*Each semester a student must register for at least 6-credit hours per semester to be eligible for financial aid. (Note: Health Promotion track students are advised to register for at least one credit hour in the Spring semester of their 2nd year in order to meet this requirement.)*
## EVMS/ODU MPH Program Seminars, 2007-2011 (thru Apr 2011)

<table>
<thead>
<tr>
<th>Date</th>
<th>Location</th>
<th>Topic</th>
<th>Speaker</th>
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</thead>
<tbody>
<tr>
<td>Jan 12, 2007</td>
<td>EVMS</td>
<td>The Dynamics of Multiple Strain Infectious Disease Transmission Systems</td>
<td>J Lin PhD, Washington College Chestertown MD</td>
</tr>
<tr>
<td>Mar 9, 2007</td>
<td>EVMS</td>
<td>AIDS: After 25 Years</td>
<td>E Oldfield MD</td>
</tr>
<tr>
<td>Mar 20, 2007</td>
<td>EVMS</td>
<td>Structure and Culture in Faith-Based Substance Abuse Treatment Programs: A Developing Research Agenda</td>
<td>JA Neff PhD, ODU</td>
</tr>
<tr>
<td>Mar 23, 2007</td>
<td>EVMS</td>
<td>The Studies on Kaposi’s Sarcoma Herpes Virus (KSHV) Functional Genomics</td>
<td>S Zeichner MD PhD, G Washington Univ</td>
</tr>
<tr>
<td>Apr 20, 2007</td>
<td>EVMS</td>
<td>Drinking Water Disinfection By-Products and Miscarriage and Pre-Term Birth</td>
<td>DA Savitz PhD, Mount Sinai</td>
</tr>
<tr>
<td>Nov 9, 2007</td>
<td>EVMS</td>
<td>Latest developments on Viral Hepatitis in Mendoza, Argentina</td>
<td>C Espul PhD, Natl Univ Cuyo</td>
</tr>
<tr>
<td>Nov 9, 2007</td>
<td>ODU</td>
<td>Public Health and Emerging Infections: Lessons Learnt from Blood Donor</td>
<td>RJ Benjamin MD, PhD, American Red Cross</td>
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<tr>
<td>Nov 19, 2007</td>
<td>EVMS</td>
<td>Lessons Learned in Developing Scalable Agent-Based Epidemiological Simulations</td>
<td>S Eubank PhD, VA Bioinformatics Inst</td>
</tr>
<tr>
<td>Feb 15, 2008</td>
<td>ODU</td>
<td>Health Workforce Policy and the Future of Health Professions</td>
<td>Marcia Brand PhD, HRSA</td>
</tr>
<tr>
<td>Mar 10, 2008</td>
<td>EVMS</td>
<td>Diesel Exhaust Particles and Allergic and Respiratory Disease in Children: The Cincinnati Childhood Allergy and Air Pollution Study</td>
<td>PH Ryan PhD, Univ Cincinnati</td>
</tr>
<tr>
<td>Apr 16, 2008</td>
<td>EVMS</td>
<td>Los Angeles County Outbreak Investigations in the 21st Century</td>
<td>L Mascola MD MPH, LA Cty Health Distr</td>
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<tr>
<td>Apr 17, 2008</td>
<td>ODU</td>
<td>President’s Commission on Wounded Warriors: Improving Military and Veteran's Health Care</td>
<td>M Michnich, Inst of Medicine</td>
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<td>May 15, 2008</td>
<td>ODU</td>
<td>Promoting Health Care Innovation in Europe Eur Acad Sciences</td>
<td>F Unger MD</td>
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<tr>
<td>Jun 16, 2008</td>
<td>EVMS</td>
<td>Preventing Fetal Infection by Malaria in the Congo</td>
<td>M Eakes MPH/MD (candidate), Richard Heller PhD, ODU</td>
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<tr>
<td>Oct 23, 2008</td>
<td>ODU</td>
<td>Biomedical Applications of Pulsed Electric Fields</td>
<td>RC Brown MD MPH, EVMS</td>
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<tr>
<td>Jan 12, 2009</td>
<td>EVMS</td>
<td>The Global Food Crisis</td>
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<tr>
<td>Feb 11, 2009</td>
<td>EVMS</td>
<td>Public Health Entrepreneurship: A Case Example in Peru</td>
<td>J Goodwin RN NREMT, AMOR Projects Peru</td>
</tr>
<tr>
<td>Date</td>
<td>Institution</td>
<td>Title</td>
<td>Presenter</td>
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<tr>
<td>Mar 27, 2009</td>
<td>ODU</td>
<td>Infant Mortality – A Gap that Needs to Narrow</td>
<td>K Remley MD MBA</td>
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<tr>
<td>Apr 2, 2009</td>
<td>EVMS</td>
<td>International Health M &amp; M: Studying Malaria and Malnutrition in the Congo</td>
<td>L Mubikayi MD MPH</td>
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<tr>
<td>Apr 21, 2009</td>
<td>ODU</td>
<td>US Navy Humanitarian Assistance &amp; Disaster Relief</td>
<td>IMCK, W Kasai DRC</td>
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<tr>
<td>Apr 27, 2009</td>
<td>ODU</td>
<td>Dynamics of Glioma Growth &amp; Invasion: How Can Predicting Beyond the “Tip of the Iceberg” Advance Treatment of Brain Tumors?</td>
<td>Rear Adm AL Stocks USN Fleet Surgeon</td>
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<td>Jun 12, 2009</td>
<td>EVMS</td>
<td>The State of Public Health in the Commonwealth</td>
<td>KR Swanson PhD</td>
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<tr>
<td>Jul 20, 2009</td>
<td>EVMS</td>
<td>Household Survey of Malnutrition and <em>Moringa oleifera</em> Tree Location in Four Villages of Western Kasai</td>
<td>D MacLaurin MD/MPH (candidate)</td>
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<tr>
<td>July 20, 2009</td>
<td>EVMS</td>
<td>Clinical Findings in the AMOR Projects Swine Flu Preparedness: EVMS' Response to the H1N1 Public Health Threat</td>
<td>A Self, MPH (candidate)</td>
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<tr>
<td>Sep 21, 2009</td>
<td>EVMS</td>
<td>Transmissibility of HIV-2</td>
<td>Bruce Britton MD EVMS</td>
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<tr>
<td>Oct 7, 2009</td>
<td>EVMS</td>
<td>Local Public Health Assets</td>
<td>SSK Mfuné DMin Malawi</td>
</tr>
<tr>
<td>Oct 16, 2009</td>
<td>ODU</td>
<td>A Case Study in Medical Diplomacy</td>
<td>B Cohen, Capt Naval and Marine Public Health Center</td>
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<tr>
<td>Nov 5, 2009</td>
<td>EVMS</td>
<td>Challenges for Global Health</td>
<td>John Howe MD Project Hope</td>
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<tr>
<td>Nov 23, 2009</td>
<td>EVMS</td>
<td>Diseases, Democracy, and Deterioration: CDC Operations in Zimbabwe</td>
<td>RC Brown MD MPH - EVMS</td>
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<td>Jan 20, 2010</td>
<td>EVMS</td>
<td>Cost of Health Care: A Pediatric Care Study</td>
<td>R Walkup PhD CDC</td>
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<td>Feb 24, 2010</td>
<td>EVMS</td>
<td>Product and Organizational Innovation in the Lifesciences: Lifenet Health</td>
<td>BR Fine MD MPH</td>
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<td>Apr 1, 2010</td>
<td>ODU</td>
<td>How Understanding Infant Competence is Relevant to Public Health</td>
<td>R Thomas LifeNet Health</td>
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<td>Apr 29, 2010</td>
<td>EVMS</td>
<td>21st Century Tobacco Control: What the Future Holds in Store</td>
<td>CM Smillie MD IBCLC Yale Univ</td>
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<td>Jun 4, 2010</td>
<td>EVMS</td>
<td>Disability and Global Health</td>
<td>KE Warner PhD Univ Mich SPH</td>
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<td>Jan 10, 2011</td>
<td>EVMS</td>
<td>Addressing the Regional and Racial Differences in Stroke Mortality</td>
<td>S Girois MD MPH Handicapped Int</td>
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<td>Jan 24, 2011</td>
<td>EVMS</td>
<td>University-Community Partnerships to Make a Difference in the Health of Disadvantaged Populations</td>
<td>G Howard DrPH U Alabama/Birm SPH</td>
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<td>Feb 28, 2011</td>
<td>EVMS</td>
<td>A Gene-Centric Association Scan of Coagulation Factor VII Levels in Multi-Ethnic Populations</td>
<td>K Ferguson MS EdD EVMS</td>
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<td>Mar 10, 2011</td>
<td>EVMS</td>
<td>Power and Sample Size for Three Level Cluster Design</td>
<td>T Cunningham PhD UCLA</td>
</tr>
<tr>
<td>Apr 11, 2011</td>
<td>EVMS</td>
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<td></td>
</tr>
</tbody>
</table>
Appendix I

Eastern Virginia Medical School
Accreditation and Degree Programs

and

Old Dominion University
Regional and Specialized Accreditation
## EVMS and ODU Accreditations and Degree Programs

**Eastern Virginia Medical School**  
**Accreditation and Degree Programs**  
**August 2011**

<table>
<thead>
<tr>
<th>Academic Program (Year Initiated)</th>
<th>Academic Award</th>
<th>Accreditation Agency</th>
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<tbody>
<tr>
<td>DOCTOR OF MEDICINE (1973)</td>
<td>MD DEGREE</td>
<td>LIAISON COMMITTEE FOR MEDICAL EDUCATION</td>
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<tr>
<td>CLINICAL PSYCHOLOGY (1978)</td>
<td>PSYD DEGREE</td>
<td>AMERICAN PSYCHOLOGICAL ASSOCIATION</td>
</tr>
<tr>
<td>BIOMEDICAL SCIENCES (1980)</td>
<td>PHD DEGREE</td>
<td>N/A (THERE IS NO ACCREDITING AGENCY FOR THIS PROGRAM)</td>
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<tr>
<td>ART THERAPY (1973)</td>
<td>MS DEGREE</td>
<td>AMERICAN ART THERAPY ASSOCIATION</td>
</tr>
<tr>
<td>BIOMEDICAL SCIENCES RESEARCH TRACK (1996)</td>
<td>MS DEGREE</td>
<td>N/A (THERE IS NO ACCREDITING AGENCY FOR THIS PROGRAM)</td>
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<tr>
<td>CLINICAL EMBRYOLOGY &amp; ANDROLOGY (2003)</td>
<td>MS DEGREE</td>
<td>N/A (THERE IS NO ACCREDITING AGENCY FOR THIS PROGRAM)</td>
</tr>
<tr>
<td>MEDICAL MASTER'S (1995)</td>
<td>MS DEGREE</td>
<td>N/A (THERE IS NO ACCREDITING AGENCY FOR THIS PROGRAM)</td>
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<tr>
<td>PHYSICIAN ASSISTANT (1999)</td>
<td>MPA DEGREE</td>
<td>ACCREDITATION REVIEW COMMISSION ON EDUCATION FOR THE PHYSICIAN ASSISTANT</td>
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<tr>
<td>PUBLIC HEALTH (1997)</td>
<td>MPH DEGREE</td>
<td>COUNCIL ON EDUCATION FOR PUBLIC HEALTH</td>
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</table>
## Appendix I

### Old Dominion University

### Regional and Specialized Accreditation

#### Regional Accreditation

<table>
<thead>
<tr>
<th>Accrediting Organization</th>
<th>Acronym</th>
<th>Initial Accreditation</th>
<th>Last Affirmation</th>
<th>Next Self-Study Begins</th>
<th>Next Reaffirmation</th>
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</table>

#### Specialized Accreditation

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### Appendix I

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## Appendix I

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## Appendix I

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Appendix K

OLD DOMINION UNIVERSITY
COLLEGE OF HEALTH SCIENCES
ADMINISTRATIVE STRUCTURE
August 2011

Dean
Shelley C. Mishoe

Assistant Dean
Debbie Blythe Bauman

Administrative Assistant to the Dean
Connie Davis

Business Manager
Betsy Thomas

COHS Development
Elizabeth Aucamp

Associate Dean
Richardean Benjamin

College Advisor
Sandra Breeden

Admin & Program Specialist
Tammie Smith

Receptionist
Student Worker

System Support
Analyst
DJ Hemsley

Grant Writer
Helen Fillmore

School of Community & Environmental Health
Emmanuel Rudatsikira, Chair
Programs/Director:
- Graduate Programs/Director
PhD in Health Services, George Maihafer
- Master of Public Health, Jim English
- Bachelor of Science in Environmental Health, Jim English
- Bachelor of Science in Health Sciences, Jackie Sharpe
- Modeling and Simulation
Graduate Certificate, Gianluca DeLeo, Coordinator

School of Dental Hygiene
Michele Darby, Chair
Programs/Director:
- Master of Science in Dental Hygiene, Gayle McCombs
- Bachelor of Science in Dental Hygiene, Michele Darby
- Bachelor of Science in Dental Hygiene
Degree Completion Program Online, Sharon Stull

School of Medical Laboratory & Radiation Sciences
Sophie Thompson, Chair
Programs/Director:
- Bachelor of Science in Medical Technology, Faye Coleman
- Weekend College in Medical Technology, Faye Coleman
- Certificate in Molecular Diagnostics, Patricia Hentosh
- Bachelor of Science in Nuclear Medicine, Scott Sechrist
- BSHS/Certificates in Cyto technology & Histotechnician, Sophie Thompson
- Ophthalmic Technology, Lori Williams

School of Nursing
Karen Karklowicz, Chair
Programs/Director
- Doctor of Nursing Practice, Carolyn Rutledge
- Family Nurse Practitioner (FNP), Micah Scott
- Women’s Health Nurse Practitioner (WHNP) and Midwifery, Kathleen Putnam
- Nurse Administrator, Laurel Garzon
- Nurse Educator, Kim Curry-Lourengo
- Nurse Anesthesia, Beth Elya-Earge
- Bachelor of Science in Nursing, Kay Palmer

School of Physical Therapy
Martha Walker, Chair
Programs/Director
- Doctor of Physical Therapy, Martha Walker

Revised 10/07/2010
THE 2011-2012 OLD DOMINION UNIVERSITY
GRADUATE STUDENT CATALOG IS PROVIDED
UNDER SEPARATE COVER AS PART OF THIS SHIPMENT
The Graduate Program in Public Health

Eastern Virginia Medical School
and
Old Dominion University

Changing the world through public health

STUDENT HANDBOOK

2011 - 2012

Revised June 2011
Welcome to the Graduate Program in Public Health, a joint degree program of Eastern Virginia Medical School and Old Dominion University. This Handbook provides information you need to know about the program, what you can expect from us, and what we expect from you. If you have questions not addressed in the Handbook, please contact the Program office by phone or e-mail. We will find an answer for you. We are also here to assist you if you have problems, whether personal or academic, that affect your success in the Program. Do not hesitate to contact us.

**PROGRAM OFFICE**

**Faculty and Staff:**
- David O. Matson, MD PhD, Program Director & Professor matsondo@evms.edu
- A. James English Jr, MS, Associate Program Director jenglish@odu.edu
- Hind Baydoun, PhD, Assistant Professor baydouha@evms.edu
- James D. Blando, PhD, Assistant Professor jblando@odu.edu
- Charlene D. Brassington, MS, Lecturer cbrassin@evms.edu
- Kay L. Cherry, MS, RN, Assistant Professor cherrykl@evms.edu
- C. Donald Combs, PhD, Professor combscd@evms.edu
- Joseph G. Flannery, MS MHA, Assistant Professor flannejg@evms.edu
- Huei Wang (Anna) Jeng, DSc, Associate Professor hjeng@odu.edu
- James A. Neff, PhD, Professor janeff@odu.edu
- Emmanuel Rudatsikira, MD DrPH, Professor erudatsi@odu.edu
- Mariana Szkl-Coxe, PhD mkszlo@odu.edu
- Richard Vroman, M.S., Assistant Professor vromanrd@edms.edu
- Alfreda Kelly, Special Projects Coordinator a2kelly@odu.edu
- Michelle Knight, Administrative Support Coordinator knightmc@evms.edu
- Leslie Lipscomb, Special Projects Manager lipscolm@evms.edu
- Linda Pautz, MEd, Coordinator, Commonwealth Public Health pautzlm@evms.edu
- Training Center
  - Qi (Harry) Zhang, PhD, Assistant Professor qzhang@odu.edu

**Mailing Address:**
Graduate Program in Public Health
Room 416
Medical Education and Research Building
Eastern Virginia Medical School
Post Office Box 1980
Norfolk, Virginia 23501-1980

**Location:**
- Program Office: Room 415
- Office, ODU-Coordinated Tracks: Room 415

**Telephone:**
- 757-446-6120
- 757-446-6121

**Facsimile:**
- 757-446-6121
- 757-446-6121

Revised June 2011
Appendix N

TRACK CO-ORDINATORS

Epidemiology Track  David O. Matson, MD PhD
Room 416
Medical Education and Research Building
Eastern Virginia Medical School
Telephone: 757-446-6120
Email: matsondo@evms.edu

Health Management Track  Joseph G. Flannery, MS MHA
Room 416
Medical Education and Research Building
Eastern Virginia Medical School
Telephone: 757-446-xxx
Email: flannejg@evms.edu

Environmental Health Track  A James English, MS
[locationxxx] 757-xxx
Email: jenglish@odu.edu

Health Promotion Track  Mariana Szklo-Coxe, PhD
[locationxxx] 757-xxx
Email: mszklo@odu.edu

ACCREDITATION

The Graduate Program in Public Health is fully accredited by the Council on Education for Public Health, the national accrediting body for Schools and Programs in Public Health, and is an approved program by The State Council on Higher Education for Virginia.

MISSION STATEMENT

The mission of the joint Graduate Program in Public Health at EVMS and ODU is to train students in order to equip them with vibrant and dynamic public health knowledge and skills for serving health needs of populations and for improving the public’s health.

PROGRAM GOALS

- To provide instructional programs to students and local/regional health practitioners that enhance their ability to develop, promote, and strengthen public health practices in Hampton Roads.
- To ensure that all MPH Program graduates can demonstrate knowledge and skill in the core areas of public health.
- To prepare students to practice successfully in diverse health service, academic, and research settings.
- To offer opportunities for faculty and students to develop and participate in research targeted towards improving the public’s health and encourage the faculty to provide expertise in leadership and services to public health agencies, and enhance public health practice on a local, regional, and national basis.
- To collaborate and consult with community agencies and other organizations that are committed to improving the public’s health.
- To evaluate, assess, and improve continuously the education, research and service activities of the MPH Program.

Revised June 2011
VALUES AND BELIEFS

- We believe that students are our first priority.
- We believe that critical application of learning is a lifelong commitment.
- We believe in providing students with the tools for understanding and evaluating ethical conflicts in medicine and public health, and in nurturing their individual development as ethical practitioners.
- We believe that the health of individuals and populations can be improved through application of the principles of disease and injury prevention and health promotion.
- We believe that individuals who have skills and knowledge in the basic principles of public health can contribute to and provide leadership for the improvement of the public’s health.
- We believe that partnerships between the academic community and practicing public health professionals can enhance the education of students and the practice of public health.
- We believe that public health research should be based upon sound scientific principles and should meet identified needs of the community.
- We believe in being honest, fair, and ethical in all that we do, including recruiting students, faculty, and staff, and in teaching, research and service.
- We recognize and respect the diversity of individuals, both in their backgrounds and their needs.
- We believe in being accountable to the constituencies that support our program: students, alumni, community partners, faculty and staff, institutional administration, and funding agencies.

GENERAL POLICIES

THE EVMS STUDENT HANDBOOK contains policies applicable to all students admitted to EVMS programs. Please keep in mind that the EVMS Student Handbook supersedes this MPH Program Handbook when policies may overlap. The EVMS Student Handbook is available at (xxx check this link: http://www.evms.edu/students/index.html), the School of Health Professions (xxx check this link http:// www.evms.edu/hlthprof/index.html), and the EVMS Campus Intranet (http://info.evms.edu/students/). In particular, MPH students should note the following policies in the EVMS Student Handbook:

- Student Appeals and Grievance Process (Health Professions)
- Performance Deficiencies and Probation Procedures (Health Professions)
- Due Process Policy – Appeals and Grievance Procedures (Health Professions)
- Student Leave of Absence Policy
- Student Military Leave Policy
- Refund Policy

APPEALS and GRIEVANCE – A student may appeal any decision or register a complaint about the MPH Program by following the EVMS Office of Health Professions Appeals and Grievance Procedures (see EVMS Student Handbook for detailed information).

COMMITTEE SERVICE – Each MPH Program committee, except committees involved with review of individual students’ performance, will include at least one student member, who will serve for one year. Students are encouraged to volunteer for committee service (xxx check if this is correct: See Appendix 1)

COUNSELING SERVICES - Counseling services are available to all full-time students through the EVMS Student Mental Health Services Director. These services offer personal assessment, short-term individual counseling, crisis intervention, and referral for psychiatric services or long-term counseling. They are available to students and their spouses free of charge. Contacts are confidential. For an appointment or more information, contact the Department of Psychiatry at Revised June 2011
Appendix N

[xxx check this number] 446-5888 (see EVMS Student Handbook for detailed information). Counseling services are also available through ODU.

DRESS CODE – Because MPH classes on the EVMS campus occur in the evening and/or on Saturday, students may wear jeans or shorts but should be neat and clean in appearance. Short shorts, cut-offs, or exercise shorts will not be allowed. For formal MPH or EVMS events (professional program meeting or other activities), appropriate business attire should be worn. Students not properly attired will be asked to leave the campus. The same dress code shall be observed for the ODU campus.

ELECTRONIC MAIL COMMUNICATION – Students must utilize their EVMS electronic mail addresses when communicating with EVMS faculty and staff via e-mail. Official announcements, such as class cancellation due to weather, are sent to EVMS e-mail addresses. The MPH Program enforces this mandatory use of EVMS e-mail. All student e-mail communication to EVMS faculty and staff must be via the student’s EVMS e-mail address. **E-mail communications from non-EVMS addresses will be ignored or returned with a message to advise use of an EVMS e-mail address.**

FACULTY OFFICE HOURS AND ADVISING – During the term in which a faculty member is teaching a course in the MPH program, he or she will have regular office hours and will inform students of these hours in the course syllabus. The student will have as an academic advisor a faculty member in the student’s academic concentration, however, a student may request advice or assistance from any MPH Program faculty member.

HEALTH FEES – Students admitted to the MPH program are required to have health insurance and will automatically be billed for the EVMS Student Health Insurance. An MPH Student can, if they so desire, opt out of this coverage by presenting proof of insurance coverage at the time of registration. **This opt-out request must be renewed each year.** MPH students will also be billed the Occupational Health Fee and the Bloodborne Pathogen Fees that cover influenza vaccination, tuberculin skin testing, hepatitis B vaccination and antibody testing upon completion of the series, and evaluation and treatment, if indicated, of occupational health exposures.

IDENTIFICATION CARDS – EVMS identification cards will be issued during registration and must be worn at all times while on campus. Identification is required to enter EVMS buildings and to check out books in the library. Lost identification cards must be reported as soon as possible to the campus security office in Lewis Hall, Room 1028, and to Paula Swartz. Ms. Swartz will then advise Human Resources that a student has lost a badge and the student must report to the EVMS Human Resources Office located in Smith Rogers Hall, 358 Mowbray Arch, Norfolk, VA (located behind the Chrysler Museum off of Olney Road) to have another made. There will be a fee for issuance of a replacement. Please call the Human Resources Office at 446-6043 for hours to appear to have photos taken for badges.

INCLEMENT WEATHER – In the event of inclement weather, please tune to local TV stations 3, 10, 13 or 15 or listen to local radio stations to determine if the EVMS and/or ODU campuses are open. Also, if the EVMS campus is closed, it will appear on the Home Page of the EVMS Website (www.evms.edu) and by recorded message on the EVMS main telephone number (757) 446-5600. Keep in mind that if EVMS employees are sent home during the course of the day due to inclement weather, then the campus will remain closed during evening hours. If EVMS is open during regular business hours and it is necessary to cancel an evening or Saturday class, look to the above listed television stations, local radio stations, EVMS Website, a message on Blackboard for a particular class, EVMS main telephone number (757) 446-5600 or after regular business hours students may call the EVMS Security Desk at (757) 446-5199 to find out if class is cancelled. The Program will seek to notify individually each student through email and/or a phone tree.

Revised June 2011
Appendix N

LIBRARY PRIVILEGES – Students utilize their EVMS identification card for EVMS library privileges. At the EVMS library, MPH students may also obtain a consortium card that permits students to use libraries at ODU, Norfolk State University, and the College of William and Mary. (See Appendix 2 a iii)

MAIL BOXES – MPH students are provided with mailboxes located in Lewis Hall on the first floor adjacent to the Health Professions Suite, Room 1100. Students should check mailboxes regularly as various offices at EVMS, as well as faculty, will place important information in these mailboxes.

PARKING – At EVMS, MPH students are issued AVI Parking Access tags which gives each student parking access to the parking garage located across Olney Road from the Brickell Library.

Students must pay to park at ODU at the student’s expense or park on the side streets near the campus. The Program will facilitate use of facilities at ODU including the library.

REGISTRATION FOR CLASSES - Prior to the end of each term, students who have not completed the degree requirements must register for the next term’s classes. (See Appendix 2 a i) To register a student must:

1. Each student will receive an email advising them that it is time to meet with their Advisor to review and complete registration materials. Students will then contact their Advisor to schedule an appointment to review and complete registration materials.
   a. If the student agrees with the suggested courses listed on the registration materials, the student completes the form or forms and returns them to their Advisor. If the student has any questions regarding the courses listed on the registration forms, they should advise their Advisor and/or the Program Director to discuss any questions and possible revisions that are needed. If any revisions are made and new registration materials will be prepared at that time.

2. For any courses not offered at EVMS as part of the MPH curriculum but offered on the ODU campus, students will need to sign a Virginia Tidewater Consortium Student/Cross Registration Form and return it to the Program’s Administrative Support Coordinator (Paula Swartz). (See Appendix 2 a ii). After receipt of this form, the Program Director will review and sign. This form is then sent to ODU to register MPH students for any courses listed on the form.

STUDENT ACTIVITY FEES – All students admitted to the MPH program are required to pay an EVMS student activity fee. This fee includes the costs of the EVMS yearbook, rental for the cap and gown for graduation (in the second year’s fees), and a one-time fee to obtain official transcripts from EVMS. A portion of the fee paid goes into a Class account that is kept by the elected Class Treasurer for each Class and funds are used at the discretion of the Class.

STUDENTS IN OTHER DEGREE PROGRAMS and NON-DEGREE SEEKING STUDENTS – Students enrolled for a degree (other than MPH) at Old Dominion University or Eastern Virginia Medical School or qualified non-degree seeking students may take up to three courses (9 credit hours) in the MPH program. A student may transfer up to 6 credit hours from another graduate—level program upon matriculation into the MPH Program, upon approval of the Program Director. If that student seeks to enter and is accepted into the MPH program, the credit hours will be applied to the degree and the total tuition for the MPH degree adjusted to reflect the amount the student has already paid as a non-matriculating student.

STUDENT RESPONSIBILITY/HONOR CODE -- Enrollment in the Graduates Program constitutes a commitment to abide by the practices and regulations of EVMS and ODU as stated in catalogs or other published material. Enrollment also constitutes acceptance of the responsibility to know all academic requirements and a commitment to abide by the Eastern Virginia Medical School Honor Code as published in the EVMS Student Handbook.

Revised June 2011
The Eastern Virginia Medical School Honor Code assumes all students are honorable and honest. This assumption holds in all dealings between students and faculty, yet there is recognition that both faculty and students have a responsibility to maintain the academic integrity of the school. This means that both students and faculty have an obligation to take action whenever a breech of the code is suspected.

The Honor Code bars acts of lying, cheating, plagiarism, or stealing. Violations are punishable and may warrant, at a maximum, permanent dismissal from the school. The code is in effect for all examinations and other educational activities. Each degree-seeking student receives upon enrollment a copy of the Honor Code and the Honor Court enforcement procedures.

Enforcement of the Honor Code is upheld by the EVMS Honor Committee, which consists of students elected by their classmates from all academic programs at EVMS. When a student is charged with violating the Honor Code, the student charged may elect to plead not guilty and stand trial. In these cases, the EVMS Honor Court will adjudicate the case and return a final decision. In the case of a trial, at least one Honor Court member shall be from the same program (but not in the same graduate year class, if possible) as the student charged.

ACADEMIC POLICIES

ACADEMIC ADVISORS – Upon entrance to the Program each student will have as an academic advisor a faculty member in the student’s academic concentration, however, a student may request advice or assistance from any MPH Program faculty member. The academic advisor’s role is to assist the student in the selection of required courses and electives, to monitor the student’s progress, and to provide appropriate guidance and assistance when problems arise. The student should arrange meetings with their advisor as needed but at a minimum of once each term.

CITATION GUIDELINES FOR WRITTEN PAPERS – Work of others must be cited in any assignment, including oral presentations. Individual instructors may provide specific guidelines for their classes, however, if no guidelines are provided, the guidelines for citations given in the Appendix 3 should be used.

COMPLETION OF MPH DEGREE REQUIREMENTS – A student (except MD/MPH students) is expected to take two or three courses per term and complete the degree in two years (six terms). Any request to alter the schedule must be justified in writing, submitted to the Program Director, and may have Financial Aid implications. A student (except MD/MPH students) must complete all requirements for graduation, as presented in the Program Bulletin, within four years of the date of matriculation.

COMPUTER SKILLS – Students admitted to the MPH Program must have knowledge and skills in using computers for word processing, presentations, communications and information retrieval utilizing the Internet. Students lacking such knowledge and skills are expected to obtain training in these subjects prior to matriculation in the Program. Students considering the Epidemiology track should have familiarity with a programming language.

COURSE COMPLETION – The primary instructor for each course will determine the requirements for satisfactory completion of the course and the grades to be given. If a student receives a grade of Incomplete in a course, please see next paragraph entitled ‘INCOMPLETE GRADES’.

INCOMPLETE GRADES – The wording “In Progress” indicates assigned work yet to be completed in a given course or an approved absence from the final examination. When an instructor assigns a grade of “I”, a written agreement must be prepared and signed by the

Revised June 2011
instructor and student that specifies the work remaining to be completed and the time frame for doing so. The work must be completed as soon as possible, but not later than the mid-point of the following grading period/term unless special written approval is granted by the Course Director and Program Director for extraordinary circumstances. The student must petition the Course Director and the Program Director for such an extension at least two weeks before the end of the agreed upon deadline. Unless an extension has been approved by the Course Director and the Program Director, the “I” or “In Progress” will convert to either an “F” or the grade as specified in the written agreement after the mid-point of the term. Keep in mind MPH STUDENTS RECEIVING AN “F” IN ANY GRADED COURSE OR PASS/FAIL COURSE WILL BE DISMISSED FROM THE PROGRAM.

GRADING -- Students will receive letter grades in each course, using the system outlined below. The Internship will be graded on a Pass/Fail basis. For the MPH program, a grade lower than C- in any course is not considered passing and the course must be repeated. When the course is repeated and a grade of C- or higher is achieved, the GPA will be based upon the higher grade.

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<tr>
<td>B</td>
<td>3.00</td>
<td>86 – 84</td>
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<tr>
<td>B-</td>
<td>2.67</td>
<td>83 – 80</td>
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<tr>
<td>C+</td>
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<tr>
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GRADING

GRADES AFFECTING GPA

STUDENTS RECEIVING AN “F” IN ANY GRADED COURSE OR PASS/FAIL COURSE WILL BE DISMISSED FROM THE PROGRAM.

GRADE POINT REQUIREMENTS/ACADEMIC PROBATION – Students must maintain a cumulative 3.0 grade point average to remain in good academic standing. Failure to maintain a 3.0 grade point average will result in those students receiving a written Warning Notification. Failure to bring the GPA to 3.0 within one Term will place the student on Probation. Failure to bring the GPA to 3.0 within one Term after being placed on Probation will result in termination from the program.

GRADUATION REQUIREMENTS – To receive the Master of Public Health degree, a candidate must have satisfactorily completed all required academic courses with a minimum overall Grade Point Average of 3.0, paid all indebtedness to Eastern Virginia Medical School and Old Dominion University, and completed a clearance certificate and exit interviews with the Program Director, Registrar, and Financial Aid Director at EVMS.

DELAYED GRADUATION – A student who has not completed all requirements for the Master’s of Public Health degree by the date scheduled for his/her class’ commencement ceremony, may participate in the ceremony if it is anticipated that the student will complete the requirements within one Term after the ceremony. A student taking longer than one Term after graduation to complete the graduation requirements must enroll in MPH 795 for a minimum of one credit hour

Revised June 2011
Appendix N

at the current hourly tuition rate to complete course work. The diploma will reflect the date of the next formal graduation after the student completes all requirements for the degree.

LEAVE OF ABSENCE: A student may request a leave of absence because of an extenuating personal situation such as severe illness, death in the immediate family, or other compelling circumstances. A leave of absence may be granted in accordance with Federal Title IV Refund Regulations (see http://www.evms.edu/students/fin-aid/docs/title-iv-refunds.pdf). Only one leave of absence can be granted to a student in any 12-month period except as provided in the Federal Title IV Refund Regulations and a leave of absence cannot exceed 180 days for any 12-month period. At the end of the requested leave of absence, the student must return or is considered to have withdrawn for financial aid purposes. This policy is described in detail in the EVMS Student Handbook. Students receiving financial aid should also discuss the implications of a leave of absence on repayment obligations with the Director of Financial Aid at EVMS prior to formally submitting a request for leave (See Appendix 2b). For those MPH Students not receiving financial aid, the length of time you may be granted a leave of absence is up to one year.

MILITARY LEAVE OF ABSENCE: A student reservist who is called to active military duty or a member of the military who is deployed can be granted a leave of absence from EVMS until he/she is released from active duty or deployment. The student must furnish to the MPH Program Director a copy of his/her orders or other documentation. Depending upon the length of absence, the student will be eligible for a refund of tuition, credit against future enrollment, and/or the awarding of academic credit for work that is in progress.

OCCUPATIONAL HEALTH: The Occupational Health (OH) Department is located in Fairfax Hall, Suite 273. The OH staff review student health documentation prior to matriculation to assure the student meets the Center for Disease Control and Prevention (CDC) recommendations for immunizations and tuberculosis (TB) surveillance and the immunization requirements of Virginia law.

PAYMENT OF TUITION - Payment of tuition for each term is due the first day the term begins. Failure to pay tuition by the end of the first week of classes may result in late fees. Late payments incur a $50 late fee (added the day after tuition is due unless deferment was requested and approved). Students not paying their tuition by the end of the term will receive a grade of incomplete and will not be permitted to enroll for the next term.

TRANSFER OF CREDITS – Up to 6 credit hours of previously earned graduate credits that have not been applied toward another degree are eligible for transfer into the student’s current degree program if the following criteria are met (See Appendix 2 c):

1. The MPH Program must have an official transcript showing the courses on file.
2. Course content, preferably in the form of the course syllabus, must be provided to determine comparability.
3. The courses must be on a graduate level and the course grade must be a “B” or higher. Pass/fail courses are not eligible for transfer.
4. The courses must not have been used to complete another degree.
5. The courses must have been taken in the last five years.
6. Only courses from accredited schools or programs in public health will be accepted for replacement of MPH Program Core courses.
7. Transfer credits for MPH Program required non-core courses will be accepted for substantially similar courses from accredited graduate schools. Transfer credit for required courses is at the discretion of the MPH Program Director.
8. Elective courses in the MPH Program may be filled with transfer credits from accredited graduate schools or programs at the discretion of the MPH Program Director.

Revised June 2011
WAIVED OR SUBSTITUTED COURSES -- A student enrolled in the MPH Program may request a waiver from Internship (MPH 668) or Ethics in Public Health (MPH 609). There will be no reduction in tuition payment if the student receives an approved waiver of either of these courses. No other MPH courses may be waived. Students who have previously taken MPH 606 – Environmental Health Science at ODU will be allowed to substitute another course in environmental health for this core course. (See Appendix 2 f i and f ii)

WITHDRAWAL FROM COURSES -- Student may withdraw from courses at any time through the end of the regular Term (or its equivalent for non-semester courses). To withdraw from a course a written request must be submitted to the course instructor (See Appendix 2 d). A grade of Withdrawn Passing (WP) will be assigned if the withdrawal occurs during the first 8 weeks of the Term. Withdrawals after this period will be assigned either a WP or WF (Withdrawn Failing) depending on the students’ grade at the time of withdrawal. In the event of illness or other severe hardship beyond the student’s control, the student should submit, no later than the last day of class, a written request to withdraw to the instructor and the Program Director. If permission is granted by both, a grade of WP will be recorded. If permission is not granted by both, then the normal withdrawal guidelines apply. There is no tuition reimbursement for withdrawal from individual courses.

WITHDRAWAL FROM PROGRAM: Students may withdraw from the MPH program at any time and receive a proportionate refund for courses being taken during the term of withdrawal based upon the EVMS Student Withdrawal Refund Policy. At the time of withdrawal, a student must complete a withdrawal form, a clearance form and exit interview. (See Appendix 2 b) The date of withdrawal is determined by the date a withdrawal form is completed.

READMISSION - When a student has been dismissed from the program for failing to meet the academic requirements, readmission will be considered only with a recommendation from the faculty or Program Director. The student’s petition for readmission should be supported by a statement from the faculty/Program Director that justifies a readmission decision. (See Appendix 2 e) The statement should clearly set forth conditions that the student must meet in order to establish good standing. Students dismissed from the program for honor code violations will not be considered for readmission.

GRADUATION COMPETENCIES

At the conclusion of the degree program, all students should have knowledge and skills in the basic public health sciences, analysis, and communication, as measured by the following competencies. In addition, students will master a set of skills and knowledge in a specific discipline, in Epidemiology or Health Management/Policy, or a combination of the two.

Basic Public Health Sciences Skills
- Assess and understand the health status of populations, determinants of health and illness, factors contributing to health promotion and disease prevention, and factors influencing the use of health services
- Design, implement and/or interpret health status indicators and screening or surveillance programs for specific risk factors
- Develop a plan to address community health goals, including interventions based upon disease states, behavioral sciences, health education, wellness strategies and an understanding of environmental factors affecting human health
- Develop and implement a plan, including a budget, to research or address a public health issue or problem in a community setting
- Synthesize the historical development, structure, funding, and market dynamics of public, private, and not-for-profit health agencies
- Identify and evaluate structure types and management practices in health care institutions and organizations

Revised June 2011
Appendix N

- Identify the chemical, physical and biological factors that affect health and the environment
- Identify, and formulate ways to address, ethical issues in public health practice and research
- Develop and adapt approaches to health problems that consider cultural differences

Analytic Skills
- Define and assess a public health problem utilizing appropriate quantitative and qualitative data and pertinent literature
- Explain strengths, limitations and uses of various study designs
- Describe the appropriate use of statistical tests
- Develop and evaluate public health data, drawing appropriate inferences in scientific and health policy terms and identifying gaps in data sources
- Identify appropriate data sources for investigating a health problem or issue
- Interpret basic statistical results presented in medical and public health literature

Communication Skills
- Write a research or intervention plan describing a problem, possible interventions, and expected results
- Present accurate and effective demographic, statistical, and scientific information to professional, lay, and media audiences, using appropriate graphs and tables
- Lead, participate in, and obtain input from groups to address a health issues
- Use a computer to analyze data and provide summary results in written and graphic form
- Develop ways to use the media to communicate important public health information

Epidemiology Concentration
- Formulate a hypothesis and questions to be answered by a study
- Identify and apply appropriate epidemiologic methods to address a research question
- Demonstrate uses and limitations of different epidemiologic study designs
- Address concepts of cause, confounding, bias, and data quality in epidemiologic research
- Use appropriate biostatistical methods to analyze data
- Use computer systems and concepts to manage and analyze health data
- Select appropriate data collection methods
- Develop and evaluate public health data systems
- Explain the epidemiology of selected chronic and infectious diseases, injuries, and health behaviors
- Draw appropriate inferences from epidemiologic data in scientific and health policy terms
- Apply epidemiologic concepts to a wide variety of health problems

Health Management/Policy Concentration
- Evaluate and explain existing health care systems and practices
- Analyze economic trends as they relate to health issues
- Identify and explain policy options and their administrative, legal, social, and political implications
- Estimate and evaluate costs, efficacies, and benefits associated with alternative policy options
- Prepare policy statements and develop strategies for policy implementation and evaluation
- Identify methods for establishing collaborative relationships with constituent groups and community leaders
- Assess organizational structure, processes and performance for a health program or service
- Develop and evaluate quality improvement methods for a health program or service
- Identify, implement and evaluate best practices in human resource management
- Identify, contrast and evaluate methods for marketing and promotion of health services
- Prepare a proposal for grant or contract funding

Environmental Health Concentration
Appendix N

- Explain and identify Environmental Stressors as they pertain to the chemical, physical and biological agents affecting human health and well being
- Explain the process by which environmental policy and laws and regulations are developed
- Outline the mechanisms by which disease-causing agents are spread through the environmental
- Identify the methods utilized in detecting and measuring pathogenic agents
- Demonstrate the processes of anticipation, evaluation and control procedures used to protect public health and maintain environmental quality.
- Describe how risks are identified, evaluated, assessed, and managed in the environment and in public health settings
- Be able to quantify and characterize risks, differentiate between the uncertainty and probability, and define the various risk models
- Explain and apply the principles of exposure assessment, dosimetry and pharmacokinetics to various models
- Understand risk perception, public interaction, and the best practices of risk communication
- Evaluate and explain the mechanisms of toxicants, routes of exposure, and biostransformation within an organism
- Define and quantify the dose/response relationship and how it can be applied to toxicity studies
- Demonstrate an understanding of the basic mechanisms of carcinogenesis, mutagenesis, teratogenesis, and the effects of toxins on specific target organs
- Apply exposure data to mathematical models to assess risks and extrapolate toxic effects
- Evaluate and explain the official roles of the principal agencies and branches of government at various levels in managing environmental health programs
- Identify, contrast and evaluate the major Federal Environmental Statutes and evaluate the major Federal Environmental Statutes and their Virginia counterparts, where applicable, that affect human health and protect the environment

**Health Education Concentration**

- Assess individual and community needs for health education and health promotion
- Plan effective health education and health promotion strategies, interventions, and programs
- Implement health education and health promotion strategies, interventions, and programs
- Conduct evaluation and research related to health education and health promotion
- Administer health education and health promotion strategies, interventions, and programs
- Serve as a health education and health promotion resource person
- Communicate and advocate for health and both health education and health promotion

Revised June 2011
APPENDICES

1. MPH STUDENT LOCATOR INFORMATION AND COMMITTEE SELECTION

2. ACADEMIC PROCEDURE FORMS
   a. Registration Forms
      i. MPH Course Registration Form
      ii. Virginia Tidewater Consortium Student Cross Registration Form
      iii. Application for Consortium Libraries Borrowing Card
   b. Student Status Change Form
   c. Transfer Of Graduate Credit Request
   d. Withdrawal/Add MPH Courses Form
   e. Application For Readmission
   f. Course Waiver Forms
      i. MPH 609 – Ethics in Public Health
      ii. MPH 668 – Internship

3. CITATION GUIDELINES FOR WRITTEN PAPERS

4. EVMS INFORMATION TECHNOLOGY - POLICIES AND PROCEDURES

5. EVMS STANDARDS OF SATISFACTORY ACADEMIC PROGRESS TO DETERMINE FINANCIAL AID ELIGIBILITY

6. SCHEDULE OF COURSES ACADEMIC YEAR 2009-2010

7. SCHEDULE OF COURSES ACADEMIC YEAR 2009-2010 MD/MPH STUDENTS

8. EVMS CAMPUS MAP AND SURROUNDING AREA
MPH Student Locator Information

Please enter below the address to which you want MPH information sent, plus the telephone number(s) and e-mail address where you want the office or other students to contact you. Because several courses require group projects, students have found it useful to contact classmates outside the normal class times. The e-mail address will be used by the Program office to keep you informed of deadlines, course changes or class cancellations, Program news, and general announcements. By completing this information, you are giving the office permission to include your name and locator information on a student roster that will be distributed to other students in your class. If you do not want this information released to classmates, initial here ____

Name_________________________________ E-mail: _______________________________

Mailing address ______________________________________________________________

City, state, and zip code ______________________________________________________

Phone (home) _________________________Phone (work) _______________________
(Circle which telephone number you would prefer we use. If we should not contact you at work, do not list your work phone number.)

Emergency Contact: ___________________________________ Phone ______________________

MPH Committee Selection

The MPH Program is committed to having student input into major decisions and evaluations of the Program and EVMS. Therefore, we ask students to volunteer as committee members. Most committees meet no more than twice a year. The Curriculum Committee meets at least four times a year. All committees meet during the day; meeting times are set a month in advance. If you are willing to be a member of a committee, please indicate below which committee(s) would interest you.

_____ Curriculum Review and Approval: Assures that the curriculum meets the requirements for the graduation competencies; coordinates between courses; reviews course evaluations for needed changes

_____ Program Evaluation and Accreditation: Reviews a variety of measures used to evaluate the success of the Program in meeting its goals; recommends Program changes when indicated

_____ Recruitment and Admissions: Recommends strategies for recruiting applicants to the Program

EVMS Committees

_____ Graduation Committee: Chair meets with EVMS graduate committee and organizes any MPH Program graduation function. Meets once a year in December.

_____ Yearbook Committee: Chair meets with EVMS Yearbook Committee and organizes MPH Program committee to collect photographs for yearbook. Meets as needed.

_____ Honor Committee: Serve as a member of the Honor Code Court. Meets as needed.

_____ Pan Student Council: Participation by class officers only. Meets the first Wed. of each month.

_____ Phoenix: Program for assisting students who are impaired. Meets the third Wed. of each month.

Class Officers

During the orientation period, your class will elect class officers for the first academic year in the Program and select a member to take class photographs throughout your entering class’s time at EVMS. Officers are: President, Vice President, Secretary, and Treasurer.

Revised June 2011
EVMS MEDICAL AND HEALTH PROFESSIONS PROGRAMS

Course Registration Form

Student Name: _____________________________________________

Mailing Address: _____________________________________________

Phone: __________________________________ Email: __________________________

Program: (please check)

Art Therapy, MS
Surgical Assistant, Certificate
Graduate Surgical Assistant, Graduate Certificate
Public Health, MPH

Andrology, MS

♦ Epidemiology
♦ Clinical Embryology &

Biomedical Sciences, Ph.D.
Medical Master’s, MS
Biomedical Research, MS
Physician Assistant, MS

Health Management

Semester with year (e.g. Fall 2006): __________________________
Semester start date: __________ Semester end date: __________

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</table>

Student’s Signature: _______________ Date: __________

Advisor’s Signature: __________________ Date: __________

Director’s Signature: ___________________ Date: __________

Revised June 2011
CITATION GUIDELINES FOR WRITTEN PAPERS

References

The list of references should be arranged numerically in the order in which they appear in the text. Once a reference is cited in proper order, it can be cited repeatedly with the same number in the remainder of the text. The same number that is assigned to material in the text shall appear before the correct source listed in the list of references at the end of the manuscript. Reference formats for various sources shall follow those delineated in the *American Journal of Public Health Association* or other peer-reviewed Public Health journals. There are two key rules: 1) be consistent; 2) supply enough information so that anyone can find the reference from the information that has been given.

If individual faculty specify a specific format or guideline for references, that should replace these guidelines.

References should be cited in the first sentence in which they are discussed. The citation does not have to be repeated in the same paragraph unless: 1) another reference appears in that paragraph (properly cited) and the text returns to the first reference before the end of the paragraph, or 2) students add sentences that are their own thoughts and it is not clear whether their words are from the reference. If the text continues with the same reference in subsequent paragraphs, it should be cited at the beginning of those paragraphs.

Be cautioned about the proper use of references. Prefer to cite if in doubt. Proper credit for the work and ideas of others, which are incorporated into the research report, is required by professional ethics and EVMS Honor Code. The following are examples of materials that require a reference.

- Facts or statistics produced by another source
- Direct quotations
- Paraphrases of statement of others
- Ideas or opinions of others
- Material involving peculation or material found in only a few sources

Only primary references should be used; secondary references should only be used when an original document is not available. For example, do not cite a review article; rather, find, read and then cite the original work. The reliability of any secondary references is not always ideal.

Personal communications are allowed. If a student receives important original information via phone or correspondence, this should be cited as a personal communication. All personal communications should be approved by the research advisor prior to being cited and presented to the committee.

Web citations are as follows:

- Example of Citing a Document on the Web (APA Style)

- Example of Citing a Journal Article on the Web (APA Style)

Revised June 2011

- Example of Citing a Photograph on the Web

- Example of Citing a Recorded Sound on the Web

In conclusion, material that is considered common knowledge requires no references, however, the safest policy to follow is: if in doubt, reference.
GENERAL PRINCIPLES

Access to computer systems and networks owned or operated by Eastern Virginia Medical School imposes certain responsibilities and obligations and is granted subject to Medical School policies, and local, state, and federal laws. Acceptable use always is ethical, reflects academic honesty, and shows restraint in the consumption of shared resources. It demonstrates respect for intellectual property, ownership of data, system security mechanisms, and individuals’ rights to privacy and to freedom from intimidation and harassment.

In making acceptable use of Information Technology resources you must:

- use resources only for authorized purposes.
- protect your user id and system from unauthorized use. You are responsible for all activities on your user id or that originates from your system.
- access only information that is your own, that is publicly available, or to which you have been given authorized access.
- use only legal versions of copyrighted software in compliance with vendor license requirements.
- be considerate in your use of shared resources. Refrain from monopolizing systems, degrading services, or wasting connect time, disk space, printer paper, or other resources.

In making acceptable use of Information Technology resources you must NOT:

- use another person's system, user id, password, files, or data without permission.
- use computer programs to decode passwords or access control information.
- attempt to circumvent or subvert system or network security measures.
  - engage in any activity that might be purposefully harmful to systems or to any information stored thereon, such as creating or propagating viruses, disrupting services, or damaging files or making unauthorized modifications to Medical School data.
  - use Medical School systems for commercial or partisan political purposes such as using electronic mail to circulate advertising for products or for political candidates.
  - use Medical School systems for sectarian religious purposes, i.e., those which do not embrace all religious beliefs, but espouse particular perspectives only.
- make or use illegal copies of copyrighted software, store such copies on Medical School systems, or transmit them over Medical School networks.
- waste computing resources or network resources, for example, by intentionally placing a program in an endless loop, printing excessive amounts of paper, or by sending chain letters or unsolicited mass mailings.
- use the Medical School's systems or networks for personal gain; for example, by selling access to your user id or to Medical School systems or networks, or by performing work for profit with Medical School resources in a manner not authorized by the Medical School.
- engage in any other activity that does not comply with the General Principles presented above.

DISCIPLINARY PROCEDURES

Appropriate disciplinary action up to and including termination of employment will be taken when the provisions of this policy are violated. Refer to Human Resources Policies and Procedures – Disciplinary Action: Policy 4.50.

Revised June 2011
ELECTRONIC MAIL POLICY

The Medical School’s electronic mail system and services are the sole property of the Medical School. The Medical School will make reasonable efforts to maintain the integrity and effective operation of its electronic mail system, but users are advised that those systems should in no way be regarded as a secure medium for the communication of sensitive or confidential information. Because of the nature and technology of electronic communication, the Medical School can assure neither the privacy of an individual user’s use of the Medical School’s electronic mail resources nor the confidentiality of particular messages that may be created, transmitted, received, or stored thereby. Users expressly waive any right of privacy in anything they create, store, send or receive on the computer or through the Internet or any other computer network. By accepting an EVMS e-mail account, users consent to allowing EVMS personnel authorized by the President or Dean/Provost as advised by the Dean’s Information Services Subcommittee, Planning & Management Subcommittee to access and review all email materials users create, store, send or receive on computers or through the campus computer network.

In addition, Virginia law provides that communications of EVMS personnel that are sent by electronic mail may constitute correspondence and, therefore, may be considered public records subject to public inspection or subpoena by the legal system.

SERVICE RESTRICTIONS

Those who use EVMS’ electronic mail services are expected to do so responsibly, that is, to comply with state and federal laws, with this and other policies and procedures of the Medical School, and with normal standards of professional and personal courtesy and conduct. Access to EVMS’ electronic mail services, when provided, is a privilege that may be wholly or partially restricted by the Medical School without prior notice and without the consent of the e-mail user when required by and consistent with law, when there is substantiated reason to believe that violations of policy or law have taken place, or, in exceptional cases, when required to meet time-dependent, critical operational needs. Such restriction is subject to the approval of the President or the Dean/Provost or his/her designee.

PERMISSIBLE USES OF ELECTRONIC MAIL

- Authorized Users
  Only EVMS faculty, staff, residents, and students and other persons who have received permission under the appropriate Medical School authority are authorized users of the EVMS’ electronic mail systems and resources. Users are responsible for safe guarding their passwords for access to the computer system. Individual passwords should not be printed, stored online, or given to others. Users are responsible for all transactions made using their passwords. No user may access the computer system using another user’s password or account. Users may not disguise their identity while using the computer system. Users may be required to change passwords periodically.

- Purpose of Use
  The use of any EVMS resources for electronic mail must be related to the Medical School’s business, including academic pursuits. Incidental and occasional personal use of electronic mail may occur when such use does not impinge on work time or generate a direct cost for the Medical School. Any such incidental and occasional use of EVMS electronic mail resources for personal purposes is subject to all of the above provisions of this policy.

PROHIBITED USES OF ELECTRONIC MAIL

- Personal use that creates a direct cost for EVMS is prohibited; e.g., sending personal e-mail message during regular working hours.
Appendix N

- For personal monetary gain or for commercial purposes that are not directly related to EVMS business.
- Sending copies of documents in violation of copyright laws.
- Inclusion of the work of others into electronic mail communications in violation of copyright laws.
- Capture and opening of electronic mail except as required in order for authorized employees to diagnose and correct delivery problems.
- Use of electronic mail to harass or intimidate others or to interfere with the ability of others to conduct EVMS business.
- Use of electronic mail systems for any purpose restricted or prohibited by laws or regulations.
- “Spoofing,” i.e., constructing an electronic mail communication so it appears to be from someone else.
- “Snooping,” i.e., obtaining access to the files or electronic mail of others for the purpose of satisfying idle curiosity, with no substantial EVMS business purpose.
- Attempting unauthorized access to electronic mail or attempting to breach any security measures on any electronic mail system, or attempting to intercept any electronic mail transmissions without proper authorization.
- Purposes that could reasonably be expected to cause, directly or indirectly, excessive strain on any computing facilities, or unwarranted or unsolicited interference with others’ use of e-mail or e-mail systems. Such uses include, but are not limited to, the use of e-mail services to (i) send or forward e-mail chain letters; (ii) “spam”, that is, to exploit list servers or similar broadcast systems for purposes beyond their intended scope to amplify the widespread distribution of unsolicited e-mail; and (iii) “letter-bomb”, that is, to resend the same e-mail repeatedly to one or more recipients to interfere with the recipient’s use of e-mail.
- Broadcast messages, that is an e-mail sent to all e-mail users except when authorized by the President, Dean/Provost, Vice Presidents, Associate Dean for Information Technology, MIS Department Directors, and/or the Director of Human Resources.
- Use of electronic mail in a sexually explicit, profane, obscene, x-rated, defamatory or threatening manner.
- Use of e-mail to support a “for-profit” activity.

EVMS ACCESS AND DISCLOSURE

General Provisions

- To the extent permitted by law, the Medical School reserves the right to access and disclose the contents of faculty, employees, residents, students’ and other users’ electronic mail without the consent of the user. EVMS will do so when it believes it has legitimate business needs including, but not limited to, those listed in “Inspection and Disclosure of Communications” below and only after explicit authorization is obtained from the President of the Medical School or his/her designee.
- Faculty, employees, residents, students and other users are advised that EVMS’ electronic mail systems should be treated like a shared filing system with the expectation that communications sent or received may be made available for review by any authorized EVMS official for purposes related to EVMS business.
- Electronic mail of students may constitute “education records” subject to the provisions of the federal statute known as the Family Educational Rights and Privacy Act of 1974 (FERPA). EVMS may access, inspect, and disclose such records under conditions that are set forth in the statute.
- Any user of the EVMS’ electronic mail resources who makes use of any encryption device to restrict or inhibit access to his or her electronic mail must provide access to such encrypted communications when requested to do so under the authority of the Medical School President or Dean/Provost or his/her designee.

Revised June 2011
Monitoring of Communications

EVMS will not monitor electronic mail as a routine matter but it may do so to the extent permitted by law as the School deems necessary for purposes of maintaining the integrity and effective operation of the School’s electronic mail systems.

Inspection and Disclosure of Communications

EVMS reserves the right to inspect and disclose the contents of electronic mail:
- in the course of an investigation triggered by alleged misconduct or misuse,
- as needed to protect health and safety,
- as needed to prevent interference with the academic mission, or
- as needed to locate substantive information required for EVMS business that is not more readily available by some other means.

EVMS will inspect and disclose the contents of electronic mail when such action is necessary to respond to legal processes and to fulfill EVMS’ obligations to third parties.

Limitations on Disclosure and Use of Information Obtained by Means of Access or Monitoring.
- The contents of EVMS electronic mail communications may be disclosed without permission of the user. EVMS will attempt to refrain from disclosure of particular communications if disclosure appears likely to create personal embarrassment, unless such disclosure is required to serve a business purpose or satisfy a legal obligation.

Special Procedures to Approve Access to, Disclosure of, or Use of Electronic Mail Communications.
- Individuals needing to access the electronic mail communications of others, to use information gained from such access, and/or to disclose information from such access and who do not have the prior consent of the user must obtain approval in advance of such activity from the Medical School President or Dean/Provost or his/her designee.

POLICY VIOLATIONS

Appropriate disciplinary action will be taken, up to and including dismissal, against individuals found to have engaged in a prohibited use of EVMS’ electronic mail resources. Illegal acts involving EVMS’ computing resources may also subject users to prosecution by state and federal authorities.

MANAGEMENT OF ELECTRONIC MAIL SYSTEM

Users should review their messages every week and delete those that are not needed. E-mail accounts will be deleted when a user is no longer affiliated with EVMS. Accounts will be deactivated for the infringement of any written or implied policy or any violation of state or federal laws. Accounts that remain unused for periods longer than six months will be deleted unless specific arrangements have been made with the email system administrator.

Revised June 2011
Candidates for the Doctor of Medicine and students in the EVMS Health Professions programs must complete the courses of study as prescribed by the faculty. Academic evaluations for each course, clerkship, or elective are based upon the achievement of the course objectives. Grades of Honors, High Pass, Pass, or Fail are given to M.D. students. Health Professions programs will provide grades as assigned by the individual program. A student must successfully complete all of the educational objectives receiving a grade of Pass, High Pass, or Honors for M.D. students, or a grade of C or better for certificate students, or a B or better for graduate students enrolled in the Health Professions degree programs.

Determination of satisfactory academic progress for medical students is made by the Student Progress Committee, which reviews the progress of failing and marginal students at the end of each course or clerkship. This committee also reviews the progress of all medical students at the end of each academic year. The progress of Health Professions students will be monitored by individual program directors, who review course grades for each student in their programs and evaluate the overall progress of students at the conclusion of each academic year.

Continued matriculation as a full-time student, including enrollment for remedial work completion and/or the repeat of one or more courses, implies that the Student Progress Committee or Health Professions Program Director believes that the student is making satisfactory academic progress for financial aid eligibility. The M.D. student is reviewed by the Student Progress Committee on the basis of academic records and/or evaluations indicating deficiencies in personal qualifications and attributes necessary to perform the duties of the medical profession. Students who are judged to be unsatisfactory are required to withdraw from matriculation. Therefore, continued enrollment as a full-time student is in itself an indication that the student is maintaining satisfactory academic progress.

Eligibility for federal aid will not extend more than one academic year beyond the minimum required to complete the full course of study. The years do not have to be continuous.

EVMS is ready to respond to mitigating circumstances which may arise in individual situations. A medical degree student may appeal loss of eligibility for financial aid to the Associate Dean of Student Affairs who will present the case to the Student Progress Committee, and a Health Professions student may appeal a Program Director’s judgment to the Associate Dean for Health Professions. The Associate Dean of Student Affairs or the Associate Dean for Health Professions then advises the Director of Financial Aid of the decision as to whether or not eligibility for financial assistance is to be continued.

The Director of Financial Aid has primary responsibility for the enforcement of this policy and shall provide a copy of it at the time of enrollment. The Director of Financial Aid also ascertains if a student is maintaining satisfactory academic progress prior to the certification of a financial aid application, and at the time of each disbursement of funds.
## Epidemiology Track

<table>
<thead>
<tr>
<th>Year</th>
<th>Fall</th>
<th>Spring</th>
<th>Summer</th>
</tr>
</thead>
</table>
| 1<sup>st</sup> | MPH-610: Introduction to Public Health Practice (3 cr.)  
MPH-612: Introduction to Biostatistics (3 cr.)  
MPH-615: Public Health Administration and Management (3 cr.) | MPH-614: Principles of Epidemiology (3 cr.)  
MPH-611: Social and Behavioral Sciences for Public Health (3 cr.)  
MPH-613: Principles of Environmental Health Science (3 cr.) | MPH-722: Methods of Program Evaluation (3 cr.)  
MPH-624: Data Management with SAS (3 cr.)  
+selective (1 credit) |
| 2<sup>nd</sup> | MPH-767: Introduction to Public Health Project Methods (2 cr.)  
MPH-711: Epidemiology Methods I (3 cr.)  
MPH-702: Biostatistics II (3 cr.)  
+selective (1 credit) | MPH-768: Practicum (2 cr.)  
MPH-718: Epidemiology Methods II (3 cr.)  
+selective (1 credit) | MPH-770: Capstone (3 cr.)  
MPH-715: Current Issues in Epidemiology (3 cr.)  
+selective (1 credit) |

**Black** = common courses across four tracks.  
**Blue** = Epidemiology Track courses.  
**Pink** = choice of three 1-credit selective or one 3-credit elective courses (to meet 46 credit requirement).

*Each semester a student must register for at least 6-credit hours per semester to be eligible for financial aid. (Note: Epidemiology students are advised to register for at least one credit hour in the Spring semester of their 2<sup>nd</sup> year in order to meet this requirement.)*

## Health Management Track

<table>
<thead>
<tr>
<th>Year</th>
<th>Fall</th>
<th>Spring</th>
<th>Summer</th>
</tr>
</thead>
</table>
| 1<sup>st</sup> | MPH-610: Introduction to Public Health Practice (3 cr.)  
MPH-612: Introduction to Biostatistics (3 cr.)  
MPH-615: Public Health Administration and Management (3 cr.) | MPH-614: Principles of Epidemiology (3 cr.)  
MPH-611: Social and Behavioral Sciences for Public Health (3 cr.)  
MPH-613: Principles of Environmental Health Science (3 cr.) | MPH-722: Methods of Program Evaluation (3 cr.)  
MPH-727: Organizational Management (3 cr.)  
+selective (1 credit) |
| 2<sup>nd</sup> | MPH-767: Introduction to Public Health Project Methods (2 cr.)  
MPH-723: Policy and Politics (3 cr.)  
MPH-733: Financing Healthcare (3 cr.)  
+selective (1 credit) | MPH-768: Practicum (2 cr.)  
MPH-721: Healthcare Strategy (3 cr.)  
+selective (1 credit) | MPH-770: Capstone (3 cr.)  
MPH-736: Conflict Resolution and Negotiation (3 cr.)  
+selective (1 credit) |

**Black** = common courses across four tracks.  
**Green** = Health Management Track courses.  
**Pink** = choice of three 1-credit selective or one 3-credit elective courses (to meet 46 credit requirement).

*Each semester a student must register for at least 6-credit hours per semester to be eligible for financial aid. (Note: Health Management students are advised to register for one credit hour in the Spring semester of their 2<sup>nd</sup> year in order to meet this requirement.)*
## Environmental Health Track

<table>
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<tr>
<th>Year</th>
<th>Fall</th>
<th>Spring</th>
<th>Summer</th>
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</thead>
<tbody>
<tr>
<td>1&lt;sup&gt;st&lt;/sup&gt;</td>
<td>• MPH-610: Introduction to Public Health practice (3 cr.)&lt;br&gt;• MPH-612: Introduction to Biostatistics (3 cr.)&lt;br&gt;• ENVN566: Environmental Risk Assessment and Decision Analysis (3 cr.)</td>
<td>• MPH-614: Principles of Epidemiology (3 cr.)&lt;br&gt;• MPH-613: Principles of Environmental Health Science (3 cr.)&lt;br&gt;• ENVH643: Principles of Toxicology (3 cr.)</td>
<td>• HPRO-660: Program Planning and Evaluation (3 cr.)&lt;br&gt;• ENVH-602: Environmental Health Administration and Law (3 cr.)</td>
</tr>
<tr>
<td>2&lt;sup&gt;nd&lt;/sup&gt;</td>
<td>• MPH-767: Introduction to Public Health Project Methods (2 cr.)&lt;br&gt;• MPH-611: Social and Behavioral Sciences for Public Health (3 cr.)&lt;br&gt;• +ENVH Elective (3 cr.)</td>
<td>• MPH-768: Practicum (2 cr.)&lt;br&gt;• MPH-615: Public Health Administration and Management (3 cr.)&lt;br&gt;• + ENVH Elective (3 cr.)</td>
<td>• MPH-770: Capstone (3 cr.)&lt;br&gt;• + ENVH Elective (3 cr.)</td>
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</table>

- **Black** = common courses across four tracks.<br>- **Orange** = Environmental Health Track required courses.<br>- **Pink** = choice of three 3-credit EVMH elective courses (to meet 46 credit requirement).

*Each semester a student must register for at least 6-credit hours per semester to be eligible for financial aid. (Note: Environmental Health track students are advised to register for at least one credit hour in the Spring semester of their 2<sup>nd</sup> year in order to meet this requirement.)*

## Health Promotion Track

<table>
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<th>Spring</th>
<th>Summer</th>
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<tbody>
<tr>
<td>1&lt;sup&gt;st&lt;/sup&gt;</td>
<td>• MPH-610: Introduction to Public Health practice (3 cr.)&lt;br&gt;• MPH-612: Introduction to Biostatistics (3 cr.)&lt;br&gt;• MPH-611: Social and Behavioral Sciences for Public Health (3 cr.)</td>
<td>• MPH-614: Principles of Epidemiology (3 cr.)&lt;br&gt;• MPH-613: Principles of Environmental Health Science (3 cr.)&lt;br&gt;• MPH-615: Public Health Administration and Management (3 cr.)</td>
<td>• MPH-660: Program Planning and Evaluation (3 cr.)&lt;br&gt;• MPH-650: Health Promotion Education Methods and Materials (3 cr.)</td>
</tr>
<tr>
<td>2&lt;sup&gt;nd&lt;/sup&gt;</td>
<td>• MPH-767: Introduction to Public Health Project Methods (2 cr.)&lt;br&gt;• HPRO 670: Cultural Issues in Health Promotion (3 cr.)&lt;br&gt;• +HPRO Elective (3 cr.)</td>
<td>• MPH-768: Practicum (2 cr.)&lt;br&gt;• MPH-672: Policy and Politics in Public Health (3 cr.)&lt;br&gt;• +HPRO Elective (3 cr.)</td>
<td>• MPH-770: Capstone (3 cr.)&lt;br&gt;• +HPRO Elective (3 cr.)</td>
</tr>
</tbody>
</table>

- **Black** = common courses across four tracks.<br>- **Purple** = Health Promotion Track required courses.<br>- **Pink** = choice of three 3-credit HRPO elective courses or a combination of three 1-credit selective and two 3-credit HRPO elective courses (to meet 46 credit requirement).

*Each semester a student must register for at least 6-credit hours per semester to be eligible for financial aid. (Note: Health Promotion track students are advised to register for at least one credit hour in the Spring semester of their 2<sup>nd</sup> year in order to meet this requirement.)*
# Table of Contents

## INTRODUCTION

- Equal Opportunity/Affirmative Action Policy  
- Statement of Work Values

## EASTERN VIRGINIA MEDICAL SCHOOL

- Administration
  - Board of Visitors  
  - President  
  - Dean/Provost  
  - Vice Presidents and Other Officers and Employees
- Office of Faculty Affairs
- Office of Business Management
- Responsibilities of a Departmental Chair
- Guidelines for Chair’s Departmental Funds
- Dean’s Standing Committees
- Faculty Senate
  - Faculty Senate Bylaws
- EVMS Academic Physicians and Surgeons Health Services Foundation

## THE FACULTY

- Definition of Full-Time Faculty
- Process for Revising the Faculty Appointment and Promotion, Tenure, and Grounds for Dismissal Policies
- Appointments and Promotions Guidelines
  - Academic Faculty  
  - Community Faculty  
  - Faculty Roles
- Initial Faculty Appointment and Credentialing Procedure
  - Authorization of Faculty Positions  
  - Faculty Recruitment and Letter of Offer  
  - Appointment and Credentialing Process  
  - Appointment Nomination Package Checklist  
  - Notification and Employment Contracting  
  - Provisional Appointments  
  - Faculty Appointment and Credentialing Process Timeline
Appendix O

Conflict of Interest 57
   Business Matters 58
   Academic Matters 58
   Sponsored Research 59
   Consulting for Government Agencies or Other Contractors 62

Scientific Misconduct Guide 63
   Process for Handling Allegations of Misconduct 63
   Office of Research Integrity (ORI) 65
   Processing of Allegations of Misconduct Flow Chart 66

Policy on Consulting 68

Guidelines for Interaction between the Faculty, Staff and Trainees of EVMS 69
and Pharmaceutical and Medical Equipment Industries

Faculty Records 73

Faculty Grievance Policy 73

Anti-Harassment Policy and Procedures 78

Disruptive Behavior Policy 80

Confidentiality of Occupational Health Medical Records 80

Communications with the Board of Visitors 81

Guidelines for Space Management 81

Guidelines for Facilities Utilization 86

Annual Reports 88

Equipment Transfer 88

Identification Tags 89

RESEARCH

The Office of Research 90

Research Programs 90
   Approval of Research Activities by Regulatory Committees 91
   Institutional Review Board 91
   Institutional Animal Care and Use Committee 91
   Institutional Biosafety Committee 91
   Chemical and Environmental Safety Committee 91
   Radiation Safety Committee 92
   Employee Occupational Health Program 92
Affiliate Support Offices for Research-related Activities 92
  Division of Animal Resources (DAR) 92
  Office of Environmental Health and Safety/Radiation Safety 92
  Biostatistics Support Office 92

Extramural Programs in Support of Research 93
  Pre-award Review of Extramural Grants and Contracts 93
  Signature Authority for Grants and Contracts 93
  Maintenance of Documents and Records 93
  Management of Funded Sponsored Programs 94
  Establishment of a Research and Scholarly Incentive Fund 95
  Research & Scholarly Activity Merit/Bonus Policy 96
  Basic Science/Merit Bonus Incentive Policy 98

Intramural Support for Research: Institutional Grants Program 100
  New Investigator/Director Grant Program 100
  Bridge Grant Program 100
  Medical Student Summer Research Stipends 101
  Other Institutional Granting Programs 101

Intellectual Property Policy 102
  Patent Policy 102
  Copyright Policy 110
  Terms Applicable to All Intellectual Property Matters 115

CAMPUS AND FACILITIES 118

Environmental Health and Safety/Radiation Safety 118

Information Technology Policies and Procedures 120
  General Principles 120
  Disciplinary Procedures 120
  Electronic Mail Policy 121
  Internet Use Policy 125

Animals on Campus Policy 127
Posting of Signs and Advertisements Policy 127
Inclement Weather Procedure 128
Smoking Policy 128
Policy on Alcohol and Drugs 129
Weapons Policy 136
Nepotism 137

Financial Services 138

Human Resources 138

Materials Management 138

Auxiliary and Support Services Division 139
INTRODUCTION

The Eastern Virginia Medical School (EVMS) Faculty Handbook is designed to assist faculty members with the performance of their various duties and responsibilities in support of the mission of EVMS. The Faculty Handbook contains the major policies of EVMS and includes references to other sources of information.

Policies contained herein may be recommended for modification by the appropriate faculty body, council or committee, or by administrative staff. Such policy modifications must ultimately be approved by the Dean/Provost, President, and the EVMS Board of Visitors. Policies relating to Financial Affairs, Human Resources, Auxiliary Services, and Risk Management must also be approved by the Vice President for Administration and Finance.

EVMS adheres to a policy of non-discrimination, and statements in this manual are made without reference to age, race, color, religion, gender, national origin, disability, sexual orientation, or political affiliation. Because of the characteristics of the English language, however, male nouns and pronouns are used on occasion. It should be understood that such words are generic pronouns. When a term easily permits reference to either the male or female person (such as Chair) that term is used.

Descriptions of faculty and administrative officers are based upon three specific terms:

1. Delegation of Authority refers to the right of an officially approved representative to make certain decisions after consideration of all relevant data and possible available solutions. All authority at EVMS ultimately resides with the Board of Visitors. The Board delegates authority to the President, who further delegates authority to the Dean/Provost and other officers.

2. Participation in decision-making refers to the involvement of the members of the faculty in the process through which feasible alternatives are defined and potential implications of these alternatives explored. Because participation in decision-making is a means by which different members may contribute their expertise, knowledge or information to others actually engaged in the decision-making process, as well as to those individuals who have the final decision-making authority, the immediate office or committee to which such recommendations may be made is not always specified.

3. Functions refer to those activities which a person occupying a role at EVMS is expected to perform. Some of these functions are performed regularly, others at sporadic intervals. In general, these specified functions outline basic job descriptions and provide faculty members with guidelines concerning their regular duties.

The policies and procedures in the Faculty Handbook are effective immediately and subject to change at any time by the appropriate authorities. The policies and procedures described herein, and as modified or amended, are expressly incorporated in and made a part of the terms and conditions of appointment and reappointment.

For information pertaining to student issues, faculty should refer to the Catalog and/or Student Handbook.

For primary information pertaining to fringe benefits, vacation, retirement, and other human resources issues, faculty should refer to the Human Resources Policies and Procedures Manual to be used in conjunction with the Faculty/Unclassified Employee Handbook. The Human Resources Policies and
Appendix O

Procedures Manual can be found on the EVMS Intranet web site at http://info.evms.edu, which is currently accessible to all students, residents, faculty and staff from computers on the EVMS network.

For primary information pertaining to payroll, purchasing, budgets, travel, business related expenses, and other financial issues, faculty should refer to the Financial Affairs Policies and Procedures Manual, which is available through the Office of the Vice President for Administration and Finance.

For primary policy and procedure information pertaining to Risk Management Insurance and Professional Liability Claims, faculty should refer to the Risk Management Policies and Procedures Manual, which is available through the Office of the Vice President for Administration and Finance.

For primary policy and procedure information pertaining to Auxiliary Services, Security, Maintenance, Disaster Plan, Parking, etc., faculty should refer to the Auxiliary and Support Services Policy and Procedures Manual, which is available through the Office of the Vice President for Administration and Finance.

The Faculty Handbook is also located on the EVMS Intranet web site at http://info.evms.edu. Changes in policies and procedures will be updated on the web site as soon as practicable. In addition, paper copies of policy changes are available for distribution by the Office of Faculty Affairs.

The President and the Dean/Provost retain the right to make exceptions to EVMS policies and procedures when such an exception is determined to be in the best interest of the institution.
EQUAL OPPORTUNITY/AFFIRMATIVE ACTION POLICY

EVMS strives to hire the best-qualified applicants, with consideration of such factors as education, experience, skills, and professional ability.

EVMS is an Affirmative Action/Equal Opportunity Employer. Human Resources Policy will be administered without regard to age, race, color, religion, gender, national origin, disability, sexual orientation, or political affiliation. EVMS is committed to equal opportunity in all Human Resources activities, including but not limited to recruitment, hiring, training, transfers, promotions, compensation, benefits, and all other terms and conditions of employment.

Inquires may be directed to the Title IX and Section 504 Coordinator:
Director of Human Resources
Smith Rogers Hall
358 Mowbray Arch
Norfolk, VA 23507
Telephone Number: 446-6043

STATEMENT OF WORK VALUES

High standards of performance are expected of all faculty and staff. Responsive, dependable, and courteous service to students, parents, and other members of the school community are primary responsibilities of all employees. Individual and collective initiatives to enhance performance and improve the work environment are encouraged and will be rewarded. EVMS will assist faculty and staff to perform well by providing training, support, and a safe and healthful work environment. All faculty and staff should promote a work environment in which:

Individual freedom and dignity are respected and supported while each member pursues the school’s work goals and mission;

Personal and career development are emphasized and understood so that employees will be satisfied and productive in their work and have a sense of pride in Eastern Virginia Medical School;

Trust is fostered by truthful working relationships;

All staff are treated equitably with affirmative action and equal employment opportunities emphasized; and

Adequate communication, including clearly defined work goals, exists to support the mission of the work unit.

Managers have a special obligation to support and translate broad mission goals into operational objectives. Managers may expect:

Training and development opportunities to improve their management leadership role;
Support of decisions which are aligned to the school Statement of Work Values; and
Corrective action when the school Statement of Work Values is not followed.
ADMINISTRATION

Board of Visitors
EVMS is governed by a Board of Visitors as specified in its Enabling Act. The Board is composed of seventeen (17) members, eleven (11) of whom are appointed by their respective City Councils, as follows: 1 each from Chesapeake, Hampton, Newport News, Portsmouth, Suffolk; 2 from Virginia Beach; and 4 from Norfolk. Six (6) members are appointed by the Eastern Virginia Medical School Foundation.

President
The President is the Chief Executive Officer of EVMS and reports to the Board. The President shall have the following powers and duties:

a. The President shall have responsibility for the operations of EVMS in accordance with the Enabling Act, the Bylaws, and policies and resolutions of the Board;
b. The President shall act as an advisor to the Board and shall have responsibility for recommending to the Board for its consideration such policies and programs which will best promote the interests of EVMS;
c. The President shall assure the financial integrity of EVMS and develop and recommend to the Board an annual financial plan and budget;
d. The President shall assure that EVMS maintains current strategic, financial, and operational plans, and establishes policies and procedures that support those plans;
e. The President shall have the power to establish and modify the internal administrative structure of EVMS;
f. The President shall appoint the Dean/Provost and all Vice Presidents, subject to the approval of the Board;
g. The President shall appoint or provide for the appointment of other administrative and academic officers and such professors, teachers, staff members and agents as necessary and according to the processes adopted by the Board;
h. The President shall serve as an ex-officio member of all committees of the Board;
i. The President shall have such other powers and perform such other duties as given, assigned or delegated by the Board; and,
j. The President may designate another EVMS officer or employee to exercise, in whole or in part, the authority of the President, provided that the President shall be responsible to the Board for the actions of his designee.

Dean/Provost
The Dean/Provost is the Chief Academic Officer of EVMS and reports and is responsible to the President. The Dean/Provost shall have the following powers and duties:

a. The Dean/Provost shall serve as the President when the President is unavailable or indisposed, unless otherwise directed by the Board;
b. The Dean/Provost shall manage EVMS clinical and academic services in accordance with policies of EVMS and the Board;
c. The Dean/Provost shall share responsibility with the Vice President for Administration and Finance for approving and signing all clinical or academic contracts, and for approving all proposals/requests for proposals for clinical or academic services, negotiations with outside parties, and other business proposals of EVMS faculty;
d. The Dean/Provost shall design, implement, manage, and recommend final approval to the President and Board all faculty promotion and tenure, compensation and incentive plans;
e. The Dean/Provost shall prepare and administer the academic plan for EVMS, which meets all requirements for accreditation and the service needs to the public;
f. The Dean/Provost shall oversee all academic and student affairs;
g. The Dean/Provost shall recruit, appoint and reappoint assistant/associate deans, department chairs, center directors, and other academic faculty administrative staff with concurrence of the President and the Board;

h. The Dean/Provost shall develop, coordinate and oversee the basic, clinical and research programs of EVMS; and,

i. The Dean/Provost shall have such other powers and perform such other duties as given, assigned or delegated by the Board or the President.

Vice Presidents and Other Executive, Administrative and Academic Officers and Employees

Vice Presidents shall report to and be responsible to the President. The Vice Presidents shall be responsible for the coordination, supervision and direction of those activities assigned by the President. Upon appointment of other executive, administrative and academic officers and employees, the President shall prescribe their duties and responsibilities and the terms of their employment. The compensation established for executives, officials, faculty, or other employees shall be in conformity with the approved budget and the terms of employment shall be in conformity with EVMS regular personnel policies.

OFFICE OF FACULTY AFFAIRS

The mission of the Office of Faculty Affairs is to maintain and insure the integrity of the Eastern Virginia Medical School faculty records database and to administer and facilitate the faculty appointment/reappoint process.

The Office of Faculty Affairs is responsible for maintaining comprehensive records of all staff holding faculty appointments in the basic science and clinical departments. The faculty database maintained by this office is crucial in providing statistical data about Eastern Virginia Medical School requested for reports from institutional, state and national data gathering entities.

Specific responsibilities include:

- Administer the new faculty appointment and credentialing procedure.
- Review and process all nominations for appointment, promotion and tenure to insure completeness and accuracy.
- Provide staff support for the Appointments and Promotions Committee, Tenure Committee, and the Dean's Faculty Achievement Awards Committee.
- Verify professional credentials of faculty and prospective faculty.
- Manage the faculty reappointment process.
- Prepare, distribute and maintain faculty compensation contracts for all full and part-time salaried faculty.
- Maintain computerized faculty roster information system (demographics, rank and education) used by the institution and various accrediting bodies.
- Maintain individual faculty files as the official faculty record for Eastern Virginia Medical School.
- Respond to all inquiries regarding appointment/promotion and provide accurate faculty data for EVMS Departments, and executive leadership.
- Serve as resource to Dean/Provost, faculty, and staff regarding interpretation and application of faculty policies.
- Coordinate and organize Dean’s Standing Committees.
- Facilitate applications of faculty nominated for local, state and national awards.
- Plan for the presentation of four General Faculty Meetings per year.
- Administer recruitment and placement of college work-study students for state funded work-study program.
- Respond to external surveys and questionnaires requesting faculty-related information.
OFFICE OF BUSINESS MANAGEMENT

The mission of the Office of Business Management is to provide high quality, customer focused business and financial management, and general administrative support services to the education, research, and academic support programs of the medical school. The primary goal of the Office of Business Management is to ensure the financial integrity of the school through prudent application of sound business practices.

The office reports to the Dean/Provost and liaisons with the Vice President for Administration and Finance.

Responsibilities include:
Plan, develop, implement, and monitor the operating budgets of EVMS.
Preparation of financial proforma, analyses, and special studies. Provide management information to assist executive management with strategic planning and operational decisions.
Liaison between educational and clinical practice plan components for coordination of business management and practice management services within departments.
Manage the medical school position control procedures. Maintain accurate position costing in accordance with the operating budget. Coordinate with Human Resources in regard to faculty and staff compensation, benefits, and human resource policy.
Coordinate with research administration components in regard to grants and contracts management.
Faculty recruitment and employment processes.
Provide support to the departments for program planning and new business development. Assist departments with budget management decisions.
Policies and procedures development, implementation, and evaluation.
Preparation of external financial questionnaires and surveys.
Contract management support.

RESPONSIBILITIES OF A DEPARTMENTAL CHAIR

The Chair of any academic department of the Eastern Virginia Medical School will be responsible for developing, implementing, and administering the faculty and the programs (or components thereof) which will contribute to the achievement of the missions of the Department and Eastern Virginia Medical School, including area-wide cooperation in regional program development.

Specific responsibilities of the Departmental Chair are to:

Departmental

Develop and accomplish departmental goals which are supportive of the policies and mission of the school in promotion of a regional approach to education, research and patient care.

Establish departmental policies with the Faculty that will assist in the achievement of departmental goals, or develop a departmental strategic plan which includes goals that are supportive of the policies, mission,
and strategic plan of the Eastern Virginia Medical School, including area-wide cooperation and regional program development.

Hold regular faculty meetings for full-time faculty and at least two meetings a year for all departmental faculty. While Medical School policy makes the Chair responsible for the department, it also implies collegial departmental decision-making.

Establish an effective mechanism for communication within the department in order to discuss school policies and educational philosophy with all members of the department.

Represent, or ensure representation, of the department at all relevant School and other meetings.
Provide professional leadership and example in the department.
Submit an annual report on departmental activities to the Dean/Provost.

Academic

Implement the courses of study and portions of the integrated undergraduate/graduate medical education curriculum related to the department. The learning objectives of the curriculum will be developed by the department and/or interdepartmental curriculum planning groups and be approved by the Joint Curriculum Committee.

1. Determine and recommend to the Dean/Provost the number of faculty (full and part-time), facilities (clinical and laboratory), and services required to implement the department's component of the agreed upon academic program. In addition, the clinical Chair shall endeavor to develop the appropriate clinical base necessary for the academic mission. The Chair will collaborate in the establishment of School priorities for the acquisition of these resources.

2. Establish academic standards with respect to the courses of study and portions of the integrated curriculum related to the department. The system of evaluation of individual student competence will be based on assessment of achievement of the specific previously agreed upon learning objectives of the courses or integrated curriculum and the general educational goals of the School. Evaluation of each component of the curriculum will adhere to the School policy developed by the Committee on Evaluation, recommended by the Dean's Council and approved by the Dean/Provost.

Provide assistance to students in academic difficulty in planning and implement remediation.
Provide assistance to students in exploring possible career choices within the discipline.
Provide assistance and management of scholarly endeavors.

Faculty Affairs

Recruit and orient new faculty members whose qualifications are in accordance with School and department priorities.

Assist and encourage faculty growth and high performance in teaching, research, and other professional activities; and in particular, to assist faculty in obtaining research and/or teaching grants.

Oversee faculty responsibilities and protect academic freedom.
Establish written expectations for each of the faculty members in the department on a yearly basis and make documented recommendations to the Dean/Provost for their retention, tenure, promotion and annual salary increments where appropriate.

Budgetary Affairs
Develop the annual departmental budget request to be recommended to the Dean/Provost.
Administer and control budgetary allocations (authorize expenditures, ensure expenditures are correctly coded, maintain records).

Office Management
Hire, supervise and evaluate staff personnel (practice managers, office managers, administrative assistants, secretaries, clerks, and laboratory assistants).

Administer, allocate and maintain departmental facilities, space and equipment and other departmental properties.

Integrate clinical business activities with Health Services.

GUIDELINES FOR CHAIR'S DEPARTMENTAL FUNDS
These funds are handled as cumulative funds with the remaining fund balance at the end of any fiscal period being carried over to the next period.

While these funds are appropriated for the discretionary use of the Chair, they are public funds to be used for educational purposes within overall EVMS guidelines (reference Financial Affairs Policy and Procedure Manual, Section 14, Board Designated Funds).

Due to the expenditure of these funds for operating purposes, approximation should be made by each Chair as to how much of their fund balance will be spent in the fiscal year. Every attempt should be made by each Chair to hold expenditures within the approximation, but the expenditures will not be limited within the EVMS budget control procedures to that amount. The only strict limitation will be total available fund balance.

The exception categories listed under (4) below will require prior approval of the Dean/Provost before the expenditure takes place.

Guidelines for Expenditure - Prior Approval Needed

Tuition Reimbursement - only when necessary for employee job-related skills or knowledge. Documentation of satisfactory completion must be presented after completion of course.

Recruiting
Foreign travel - All foreign travel must be approved by the Dean/Provost.
New Faculty Salaries (not to exceed two fiscal years for any individual)
Alteration and Renovation of Departmental Space
APPENDIX O

DEAN’S STANDING COMMITTEES

Admissions Committee
Charge: To recommend to the Dean criteria for admission and to implement the selection process leading to a recommendation to the Dean of the students to be admitted.

Animal Care and Use Committee
Charge: To assure that the institution's animal care facilities and policies for humane care and use of animals meet all the criteria established by accrediting bodies and federal and state laws. This includes semiannual inspections of the facilities and submission of reports on the findings, review of all protocols to use animals for research or teaching, ensuring that all animal users are properly trained, and advising the administration on the utilization and needs of space to house animals.

Appointments and Promotions Committee
Charge: To periodically review and recommend criteria for faculty appointments and promotions, and to evaluate faculty members for appointment and promotion.

Chemical and Environmental Safety Committee
Charge:

1. Review and develop and promote institutional standards, practices and policies that promote institutional health and safety in relationship to laboratory and chemical safety issues such as:
   1.1. OSHA laboratory standard compliance
   1.2. Flammable liquids and other fire hazards in laboratories
   1.3. Safe laboratory design, engineering and ventilation
   1.4. Chemical inventory and reporting
   1.5. Laboratory and chemical security

2. Review, develop and promote institutional policies and procedures in relationship to sustainability and environmental impact reduction. This would include issues such as:
   Chemical and materials recycling
   Pollution prevention
   Greenhouse emissions
   Environmental management systems
   Sustainable practices

3. Monitor and ensure that hazardous wastes are disposed of properly

4. Conduct meetings at least once every three months; maintain written minutes of each meeting and distribute copies of the minutes to the Dean and each committee member or other relevant persons or committees

5. Submit formal written recommendations on behalf of the committee to the Dean
6. Review specific committee charges not less than every three years to assure their continued relevance to the goals of the committee and needs of the institution.

Committee on Committees

Charge: To recommend annually to the Dean, the names of faculty members (or in some cases other than faculty) to serve on Standing Committees of EVMS.

Conflict of Interest Committee

Charge: Review and take action to manage and/or reduce or eliminate significant financial interests disclosed by faculty, students and staff.

Continuing Medical Education Committee

Charge: To advocate for and support professional development of physicians and other health care professionals by assessing needs, planning and reviewing educational programs, and designating credit.

Through the Office of CME, the Eastern Virginia Medical School offers a range of evidence-based educational activities that enhance a practitioner’s level of knowledge, competence, performance/skills, and patient outcomes.

Outcome measures will assess how these activities influence professional behavior for the purpose of improving health care outcomes and patient care.

Faculty Achievement Awards Committee

Charge: To identify and present to the Dean faculty who have achieved significant accomplishments as a member of the Eastern Virginia Medical School.

Institutional Biosafety Committee

Charge: To ensure that (a) registrations involving human and animal pathogens, tissues, and toxins are reviewed and found to comply with all federal, state, and local requirements; (b) all recombinant DNA registrations and research are in compliance with the National Institute of Health’s Guidelines for Research Involving Recombinant DNA Molecules and establish policies and procedures ensuring biological materials are handled and disposed of safely and in the proper manner.

1st Thursday Institutional Review Board & 3rd Tuesday Institutional Review Board

Charge: The EVMS Institutional Review Board is responsible for protection of the rights and welfare of human research subjects, as defined in the regulations of the United States Department of Health and Human Services Office of Human Research Protections, the Food and Drug Administration, the Belmont Report, the Declaration of Helsinki-Ethical Principles for Medical Research for Research Involving Human Subjects, and the Nuremberg Code. In addition to living human individuals, human research subjects include tissues, specimens, records and data sets from living human individuals. The EVMS IRB will prospectively approve all research activities with living human subjects, specimens, records or data, or make the determination that the activities meet the
Appendix O

constrained definition of “not human subject research.” The EVMS IRB will also serve as the EVMS “Privacy Board” for the use of “Protected Health Information” for research purposes as established in the Health Insurance Portability and Accountability Act (HIPAA) and in accordance with the United States Department of Health and Human Services regulations and applicable to both living and decedent individuals.

Medical Education Committee

Charge: The Medical Education Committee is responsible for development of the design and management, implementation, and evaluation of the curriculum prescribed for matriculants of the Doctor of Medicine at the Eastern Virginia Medical School.

Library Committee

Charge: To provide faculty overview of the library's development and operating policies.

Minority Affairs Committee

Charge: To assess and develop procedures to address the academic, social and economic concerns of the ethnic minority populations of the Eastern Virginia Medical School.

Phoenix Committee

Charge: (a) To provide effective prevention of student impairment through a well-publicized self-referral system whereby a student who thinks he or she is at risk can volunteer into the program, and

(b) To provide assistance by early detection and referral for evaluation and/or treatment in such a way as not to endanger the student's career.

Radiation Safety Committee

Charge: To perform the duties and functions of oversight, regulation and guidance of all aspects of radiation safety at EVMS according to our U.S. Nuclear Regulatory Commission Material License, and all applicable regulations.

Research and Advisory Committee

Charge: To assess the research environment of EVMS and recommend strategies for its improvement; facilitate research-related activities; review the use of all institutional research funds and make recommendations for their distribution; cultivate and update the Dean on research-related fund raising opportunities.

Student Affairs Committee

Charge: To assist the students regarding administrative matters, personal and social concerns, and maintenance of health.
Appendix O

Student Progress Committees

Charge: (1) To review, evaluate and develop policies and procedures concerning the progress and promotion of students enrolled in EVMS; (2) To recommend to the Dean, and the Faculty, the promotion of students within the instructional program; (3) To recommend to the Dean and the Faculty those students to be awarded the appropriate degrees.

Tenure Committee

Charge: To evaluate faculty at the Eastern Virginia Medical School for Tenure and Post-Tenure review

FACULTY SENATE

Purpose of the Faculty Senate

A Faculty Senate shall be established at EVMS to represent the Faculty in specified areas of its responsibilities and concerns in order to:

A. Initiate, develop, and participate in the formulation of academic or educational policies of the school and make recommendations to the Dean.

B. Consider such policies, programs, and other matters as the Dean, the President, the administration, the Dean's Executive Committee, the Dean's Council of Chairmen, Health Services, various student organizations, or individual members of the Faculty may propose.

C. Review proposed changes to the Faculty Handbook and provide a written position statement to the Dean and the appropriate Standing Committee of EVMS outlining support or any suggested revisions prior to presentation at the Dean’s Executive Committee.

D. Help create, maintain, and protect an environment conducive to the growth of scholarship, creativity, learning, teaching, research, clinical excellence, service and respect for human rights and dignity.

E. Accept and share responsibilities with the administration and students in order to improve the stature and effectiveness of the School.

2. Representation of the Faculty Senate

A. A Faculty Senator will represent each of the following Departments or Divisions:

<table>
<thead>
<tr>
<th>Anatomy/Pathology</th>
<th>Pediatrics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency Medicine</td>
<td>Physical Medicine and Rehabilitation</td>
</tr>
<tr>
<td>Family Medicine</td>
<td>Physiological Sciences</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>Psychiatry</td>
</tr>
</tbody>
</table>
Appendix O

<table>
<thead>
<tr>
<th>Microbiology</th>
<th>Radiation Oncology</th>
</tr>
</thead>
<tbody>
<tr>
<td>Obstetrics and Gynecology</td>
<td>Radiology</td>
</tr>
<tr>
<td>Otolaryngology</td>
<td>Surgery</td>
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<td>Urology</td>
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</tbody>
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B. Quorum for Senate meetings is set at 51% (8 of the 15 Departments or Divisions must be represented).

C. Each Faculty Senator must have an Alternate.

D. Each Department/Division represented will carry a Vote; motions will pass if 51% of the votes of the Departments/Divisions represented are in favor of the motion.

E. Faculty Senators will be elected by their Departmental or Divisional Peers.

F. Department Chairpersons may only serve as Faculty Senators or Alternates for Departments or Divisions with a total faculty roster of three or less.

G. Individual Faculty Senators will be responsible for choosing their Alternate. For Departments or Divisions with Senators on the Executive Committee, the Alternate should be elected rather than chosen by the Senator.

3. The Executive Committee of the Faculty Senate

A. An Executive Committee will overview the Faculty Senate ("Senate") functions in accordance with the above stated purpose. The Executive Committee will be elected at the Senate meeting in June and begin their service on July 1.

B. The Executive Committee is composed of:

1. The President of the Senate who is in charge of:
   a. Presiding over the meetings of the Senate
   b. Meeting monthly with the Dean
   c. Representing the Senate at the Board of Visitors’ meetings
   d. Presenting the Senate reports at the General Faculty Meetings
   e. Representing the Senate on the Dean's Executive Committee

2. The President-Elect of the Senate who is in charge of:
   a. Presiding during the meetings of the Senate in the absence of the President of the Senate
   b. Meeting monthly with the Dean in the absence of the President of the Senate
   c. Assisting the President in all of his responsibilities
   d. Presenting the Senate Reports at the General Faculty Meetings in the absence of the President of the Senate
   e. Representing the Senate on the Dean’s Executive Committee in the absence of the President of the Senate.
   f. Representing the Senate on the Academic Affairs Committee
3. The Immediate Past President of the Senate who is in charge of:
   a. Representing the Senate on the Committee on Committees
   b. Selecting and chairing the Nominating Committee

4. The Secretary who is in charge of:
   a. Assisting the President during the Senate meetings
   b. Composing and submitting the minutes of the Senate meetings
   c. Representing the Senate on the Finance Committee

5. A Member at Large who is in charge of:
   a. Assisting the Secretary
   b. Chairing the Grievance Committee
   c. Representing the Senate on the Appointments and Promotions Committee.

C. The Executive Committee will meet periodically, typically in the week prior to Full Senate meetings. The Executive Committee will exceptionally hold additional meetings, to deal with emergency issues that are important to the Faculty and to the Faculty Senate.

D. Quorum for the Executive Committee is set at 60% (3 of 5 members).

F. All decisions taken by the Executive Committee will be submitted to the Faculty Senate before being formally adopted

4. Election to the Faculty Senate
   A. Each Department or Division will hold yearly elections in the spring (typically May or June) for the office of Senate Representative. Interim elections will be held when necessary.
   B. For Faculty Senate Representatives who will be staying on the Executive Committee, an election will be held for the office of Alternate.
   C. The Faculty Senate will elect the Executive Committee in June. In August, a preliminary listing of Senators and Alternates will be made available for the following Academic Year. In September, a final listing of Senators and Alternates will be made official.

5. Senate Faculty Representatives
   A. Faculty Senate representatives to the Dean's Executive Committee, the Administration and Services Committee, the Academic Affairs committee, the Committee on Committees and the Finance Committee are as above (See Executive Committee).
   B. The Faculty Senate will also have official representatives on the following Committees:
Appendix O

Fringe Benefits Committee
Library Committee
Space Committee
Ad Hoc Committees (when appropriate)

The representative may already be a member of the Committee in question.

6. Faculty Senate Meetings

A. The Faculty Senate will meet monthly, usually on the third Monday of each month; the alternate date is the fourth Wednesday or the fourth Monday.

B. Exceptional meetings may be convened; they will be called by the President, when appropriate, upon the recommendation of a Senator or other Faculty member if determined appropriate by the Executive Committee of the Faculty Senate.

7. Grievance Committee

A. The Member at Large of the Senate will preside over the Committee.

B. The rest of the membership will be selected by the Faculty Senate President.

The President, Dean/Provost, and Board of Visitors must approve any changes to the Faculty Senate Bylaws.
EVMS ACADEMIC PHYSICIANS AND SURGEONS HEALTH SERVICES FOUNDATION

Mission Statement

The EVMS Academic Physicians and Surgeons Health Services Foundation (the “Foundation”) exists to further the mission and goals of the Eastern Virginia Medical School (“EVMS”). The Foundation will strive to enhance the capacity of the faculty of EVMS to provide excellence in their education, research, and service roles. It aspires to help EVMS to attract and retain the best clinical faculty available in each of the several Departments by supporting clinical practice and research, in conjunction with teaching under working conditions comparable to those prevailing in comparable academically oriented medical centers within the Commonwealth of Virginia and elsewhere. The Foundation will sponsor the clinical practice of medicine in the academic setting to provide the faculty the opportunity to teach excellence in health care delivery to students at all levels of training. The Foundation’s support of the medical practice activities will additionally provide an improved environment which allows for the provision of truly excellent patient service.

In its clinical and research activities, the Foundation will assist EVMS in assembling a faculty which constitutes a critical mass of talented clinicians dedicated to reinforcing each other’s ability to perform clinical services, and to educate students of medicine and the healing arts to perform at the highest standards of excellence and ever to uphold and enhance the reputation of EVMS and each of its Departments. In carrying out the above-stated purposes, the Foundation shall engage the services of full-time faculty members involved in clinical activities in such number as may be required from time to time by the Bylaws of the Foundation, and may engage the services of non-full-time faculty members of EVMS, all pursuant to the terms, provisions, covenants, and conditions of an Initial Affiliation Agreement dated as of July 1, 1989, between the Foundation and EVMS, as the same may from time to time be amended, modified, extended, or replaced (the “Affiliation Agreement”).
DEFINITION OF FULL-TIME FACULTY

The full-time faculty members are those whose salaries are paid by EVMS or who are designated such by the Board of Visitors and who devote their primary activities to academic pursuits.

PROCESS FOR REVISING THE FACULTY APPOINTMENT AND PROMOTION, TENURE, AND GROUNDS FOR DISMISSAL POLICIES

Among the most important policies that an academic institution maintains are those concerning the appointment and promotion of faculty, the process for awarding tenure, and the grounds for dismissal of faculty. EVMS recognizes both the centrality of these policies in the relationship between the institution and the faculty and the need for an open process whenever there is a need to revise the policies.

Therefore, the following process will be employed whenever a revision to these policies is necessary:

A request for revision is made by the Board of Visitors, the President, the Dean, the appropriate standing committee of the school, the Faculty Senate or any other member of the faculty and administration.

The Dean shall consider whether such a request is appropriate. If a determination to consider a policy revision is favorable, the Dean shall charge the appropriate standing committee, or an ad hoc committee if there is no appropriate standing committee, with proposing a recommendation concerning the request for revision.

The committee shall consider the issue and forward its recommendation to the Dean, who shall then share the committee’s recommendation with the Faculty Senate for review.

The Faculty Senate shall forward its review and commentary to the Dean. If there are substantial differences of opinion between the Faculty Senate and the committee, the Dean may request that representatives from both entities meet and attempt to reach a consensus. The Dean will then consider the various recommendations and forward them, with or without comment, to the Dean’s Executive Committee for consideration.

The Dean’s Executive Committee shall review the various recommendations and make a recommendation to the Dean.

The Dean shall then, after considering all points of view, make a recommendation to the President.

1. The President shall consider the points of view raised during the revision process and make a recommendation to the appropriate committee of the Board of Visitors.

The Committee shall consider the points of view raised during the revision process and make a recommendation to the Board of Visitors, who will make a final decision on the proposed revisions. The intent of this process is to balance the need for broad discussion among the faculty and administration with the need to revise policies in a timely manner.
APPOINTMENTS AND PROMOTIONS GUIDELINES

INTRODUCTION

An effective academic medical center requires a diverse faculty. Accordingly, the guidelines contained within this document pertain to the initial appointment and subsequent promotion of all faculty at Eastern Virginia Medical School engaged in the diverse areas of clinical practice, education, research, and service.

A. Academic Faculty

The criteria for appointment and promotion of academic faculty at EVMS require that faculty fulfill their assigned responsibilities in clinical practice, education, research, and/or service, with a level of expertise befitting the rank. Full-time (academic) faculty may seek appointment or promotion in the unmodified tract or, in unusual circumstances, in the modified tract with agreement from the faculty member and the Chair.

This document outlines the institution's expectations for scholarly accomplishments and expertise in order to justify a recommendation for appointment or promotion to the ranks of Assistant Professor, Associate Professor, and Professor. These expectations remain general so as to be appropriate for faculty in all departments. Some overlap of activities across the categories of clinical practice, education, research and service is intentional. In the Appointments and Promotions Committee's evaluation of a candidate's activity, the primary consideration is not quantity, but quality. In turn, when discerning the quality of faculty activity, the Committee will consider the faculty member's present rank, level of responsibility, and percentage of time devoted to these activity categories. Finally, criteria for appointment and promotion have been developed to reflect the mission statement of the Eastern Virginia Medical School.

Community Faculty

Founded by physicians and other citizens of Hampton Roads, EVMS has benefited throughout its history from the substantive contributions of its community faculty. Community faculty are essential in many departments, and for interdisciplinary programs, and without these faculty members’ generous sharing of their time, efforts, and expertise, EVMS would not have been successful in its development and still would not be able to meet its mission.

The appointment and promotion process for community faculty is generally similar to that for academic faculty. Community faculty, however, may seek appointment or promotion in either an unmodified rank (e.g., Assistant Professor) or a modified rank (e.g., Assistant Professor of Clinical Department). Candidates who select the unmodified rank are expected to meet the same criteria as those listed in this document for academic faculty, including scholarly accomplishments and expertise in education, clinical practice, research, and/or service. Candidates who select the modified rank are expected to meet the standards of excellence for each rank as outlined in Section V, but are not held to a requirement to provide evidence of scholarly activity as listed in Section IV A.
In general, community faculty are expected to commit at least 50 hours to EVMS per year. This time commitment can be met by actively participating in grand rounds or other department conferences, serving on a committee, delivering didactic lectures, providing ward attending coverage, precepting students or residents, participating in other teaching activities at EVMS, or by participating in other activities agreed to by the faculty member and the Department Chair.

C. Faculty Roles

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

II. INITIAL FACULTY APPOINTMENT AND CREDENTIALING PROCEDURE

A. Authorization of Faculty Positions

New Faculty Position Establishment

The Dean must authorize and approve all requests of Department Chairmen for the establishment of new faculty positions. The request and approval process normally occurs during the annual operating budget development process but may also occur outside of the budget process in response to emergent situations. In either case, the Department Chairman must provide the following information and any other pertinent information the Chairman feels necessary to support and facilitate the approval process. For new clinical faculty, the approval process includes the presentation of a business plan and financial pro-forma to the Health Services Professional Services Committee. The Professional Services Committee forwards its recommendation to the Health Services Executive Committee. Justification for the education, research and/or patient care need and the percent or amount of effort estimated for each area. Description of the primary responsibilities of the position.

Anticipated effective date for the new position.
Proposed/recommended faculty rank.
Indicate whether the faculty appointment is to have any co-terminus condition(s) such as grant or contract funding, administrative function, etc.

Anticipated salary compensation for the new position including faculty rank base salary and clinical or other supplemental compensation above faculty base salary.

Proposed funding source(s) such as patient care revenue projections, grant or contract funding, hospital support, core funding requirements, program funding, etc.

Additional needs for the new position such as space, support staff, equipment, research start-up costs, exceptional recruitment costs, etc.
After consideration of all information, documentation and recommendations, the Dean notifies the Chairman through approval of the departmental operating budget proposal or other written notification of approval or disapproval of the new position.

If the new faculty position is approved, the Office of Business Management will establish the position by assigning a position number in accordance with applicable position control procedures (Financial Affairs Policies and Procedures, section 1.11 Position Control).

Authorization to Fill An Existing Vacant Faculty Position

Vacant positions are positions that have been previously approved and have assigned position numbers. If no previous position number exists, utilize the procedures described above for New Faculty Position Establishment. The Dean must authorize and approve all requests of Department Chairman to fill vacant faculty positions. For vacant clinical faculty positions, approval may also be required by the Health Services Professional Services Committee and Executive Committee. In requesting permission to fill a vacant faculty position the Department Chairman must provide the following information to support and facilitate the approval process.

a) List the position number previously assigned.
b) Describe any changes in the primary responsibilities of the position including changes in the percent or amount of effort originally approved for education, research, and/or patient care.
c) Anticipated effective date of filling the vacant position.
d) Proposed/recommended faculty rank.
e) Affirm any co-terminus condition(s) previously attached to the faculty position and/or indicate new co-terminus condition(s).
f) Anticipated salary compensation for the vacant position including faculty rank base salary and clinical or other supplemental compensation above faculty base salary.
g) Proposed funding source(s) such as patient care revenue projections, grant or contract funding, hospital support, core funding requirements, program funding, etc.
h) Additional needs for the vacant position such as space, support staff, equipment, research start-up costs, exceptional recruitment costs, etc.

After consideration of all information, documentation, and recommendations, the Dean notifies the Chairman in writing regarding approval or disapproval to fill the vacant faculty position.

B. Faculty Recruitment and Letter of Offer

Upon approval of the Dean for the establishment of a new faculty position or permission to fill an existing vacant faculty position, the Department Chair will initiate the recruitment effort utilizing established methods for recruitment of faculty. If a prospective new faculty member will require a non-immigrant visa, in accordance with INS regulations, the Chair shall cause the description of the faculty position to be posted in two separate building locations at the Medical School which notice shall remain for a period of ten (10) consecutive business days.
All candidates for initial appointment to the faculty are expected to meet certain basic criteria as outlined in Section V, “Standards of Excellence for Each Rank.” Section V also provides examples of excellence standards appropriate for each academic rank. These standards guide the Chairman when recommending candidates for initial faculty appointment.

Refer to the Financial Affairs Policies and Procedures for guidance concerning recruitment expenditures (Recruitment Expense 5.40) and employee moving (Moving/Relocation 6.10).

Upon completion of the interview process and selection of a candidate for a faculty position, the Chairman prepares a Letter of Offer. The Letter of Offer must include the following components:

1. Proposed faculty rank to be recommended.
2. Indicate any co-terminus condition(s).
3. Anticipated start date subject to satisfactory completion of the faculty appointment and credentialing process. If the candidate is a foreign national, the offer shall also be subject to the school’s ability to obtain the necessary approval from the Immigration and Naturalization Service for appropriate non-immigrant classification and work authorization and issuance by appropriate governmental agencies of the working visa, if necessary.
4. Salary compensation. Specify salary components including faculty rank base salary, administrative base salary, and clinical or other supplemental compensation.
5. Make reference to the Faculty Fringe Benefits Attachment for the candidate’s review (attachment provided by the Office of Faculty Affairs). Include description of departmental perquisites such as allowance for professional dues and travel, continuing education opportunities, etc.
6. Make reference to the Moving/Relocation Policy, where applicable (attachment provided by the Office of Faculty Affairs).
7. Describe the primary duties and responsibilities of the position. Summarize the departmental expectations and goals.
8. Describe provisions for space, support staff, equipment, research start-up funding, etc., as appropriate.
9. Indicate that all new faculty (clinical faculty) are required to sign a Standard Employment and Non-Competition Contract, which will be attached for the candidate’s review (attachment provided by the Office of Faculty Affairs).
10. Make reference to the Applicant’s Consent and Release Agreement and the Questionnaire for Appointment to EVMS Faculty forms for completion and signature by the candidate upon acceptance of the offer (attachments provided by the Office of Faculty Affairs).
11. Make reference to the EVMS Curriculum Vitae form for completion by the faculty candidate (attachment provided by the Office of Faculty Affairs).
12. Include the following non-binding paragraph in all letters of offer:

   “The intention of this offer letter is to outline the key provisions of our mutual discussions and should not be interpreted as your formal approved faculty appointment or contract. This offer is subject to the Faculty Appointment and Credentialing and Contracting policies and procedures utilized by the Eastern Virginia Medical School.”

13. Requested response date from the candidate.
14. Signature lines for execution by the Chairman, Dean/Provost, and Vice President for Administration and Finance.
15. Candidate acceptance signature line.

**Process for Letter of Offer**

a) Chairman prepares Letter of Offer, signs and forwards to Associate Dean for Business Management.
b) Associate Dean for Business Management reviews the Letter of Offer.
c) Faculty Affairs performs a preliminary verification of candidate’s terminal degree and licensure before letter of offer is processed.
d) Associate Dean for Business Management obtains Draft Non-Compete from the Office of Faculty Affairs.
e) Letter of Offer is delivered to the Dean, Vice President for Administration and Finance and Chief Executive Officer EVMSHS for signature.
f) Dean, Vice President and CEO sign Letter of Offer and return to the Associate Dean for Business Management.
g) Associate Dean returns signed Letter of Offer with attachments to Chairman. Copies are provided to the Office of Faculty Affairs, Office of Business Management, and Health Services for clinical faculty.
h) The Chairman sends the Letter of Offer to the candidate.
i) Candidate signs Letter of Offer accepting position, attaches signed Applicant’s Consent and Release Agreement, Questionnaire for Appointment to EVMS Faculty, and completed CV on EVMS form, and returns the documents to the Chairman.
j) The Chairman notifies the Office of Faculty Affairs by providing the original signed acceptance letter, signed Consent and Release Agreement, completed Questionnaire for Appointment to EVMS Faculty, and EVMS formatted CV.
k) The Office of Faculty Affairs notifies the Office of Business Management and, for clinical faculty, the Health Services Credentialing Coordinator by providing copies of the above documents.
l) The Chairman, Office of Faculty Affairs, and Health Services initiate the process of faculty appointment and credentialing.

**C. Appointment and Credentialing Process**

1. **Verification of Credentials**

Following receipt of the accepted Letter of Offer, signed Applicant’s Consent and Release Agreement, completed Questionnaire for Appointment to EVMS Faculty, CV on EVMS form and documentation for faculty appointment from Chairman, the Office of Faculty Affairs will initiate the verification of the applicant’s credentials.

The Office of Faculty Affairs verifies the following academic credentials:

a) Degree
b) Graduate training
c) Virginia State Medical License or State Certification appropriate to the profession
d) Board Certification or eligibility

The Health Services Credentialing Coordinator verifies the following clinical credentials:
Appendix O

a) Virginia State Medical License or State Certification Appropriate to the Profession (copy provided by applicant)
b) DEA Certificates (Federal and State)
c) Hospital Privileges (as required for clinical activity)
d) The applicant is not included in the DHHS Office of Inspector General List of Excluded Individuals/Entities

The references used to verify the professional status and qualifications of all applicants for faculty appointment include:

a) American Board of Medical Specialties Directory
b) American Medical Directory
c) World Directory of Medical Schools and the ECFMG (for graduates of foreign schools)
d) State Board of Medicine
e) Academic Institution awarding the degree
f) Residency Training Program
g) DHHS Office of Inspector General List of Excluded Individuals/Entities

Issues identified during the verification of credentials that may hinder the faculty appointment and credentialing process are brought immediately to the attention of the Chairman and Dean.

2. Faculty Appointment Process

Initial appointments at the ranks below Associate Professor are not considered by the Appointments and Promotions Committee. At these levels, appointments are approved by the Dean/Provost following receipt of the appropriate materials from the Department Chair. Nominations for appointment at the Associate Professor and Professor ranks are considered by the Appointments and Promotions Committee. Following is an outline of the general process for initial faculty appointment.

a) Candidate submits required documents to the Department Chair.
b) Department Chair obtains letters of reference.
c) [Optional] Nomination sent to Departmental Appointments Committee for consideration.
d) [Optional] Recommendation from Departmental Appointments Committee to Chair of Department.
e) Nomination package forwarded by Chair of Department to the Dean/Provost in care of the Office of Faculty Affairs.
f) Nomination reviewed by the Office of Faculty Affairs to assure necessary information is submitted.
g) Nominations at the ranks of Assistant Professor and below are considered directly by the Dean/Provost.
h) For the ranks of Associate Professor and Professor, the Dean/Provost forwards the nomination package to the Appointments and Promotions Committee.
i) Nomination considered by the Appointments and Promotions Committee and recommendation forwarded to the Dean/Provost.
j) Nomination forwarded by the Dean/Provost to the Academic Affairs Committee for review and recommendation.
k) Academic Affairs Committee forwards to Board of Visitors for approval.
l) Board of Visitors sends letter of appointment to new faculty member at the rank of Associate Professor and Professor.
m) Dean/Provost sends letter of appointment to new faculty member at the rank of Assistant Professor and below.

3. Clinical Credentialing Process

In conjunction with the faculty appointment process, clinical faculty are required to have the following before the appointment process can be finalized.

a) Virginia State Medical License or State Certification Appropriate to the Profession.
b) DEA Certificates (Federal and State)
c) Hospital Privileges (as required for clinical activity)
d) Provider Agreements with Issuance of Provider Numbers
e) Verification that the applicant is not included in the DHHS Office of Inspector General List of Excluded Individuals/Entities.

If the candidate does not have a valid License and DEA Certificates to practice medicine in Virginia, the Health Services Credentialing Coordinator will facilitate the process by assisting the candidate with obtaining and completing these applications. If Hospital Privileges are required, the Health Services Credentialing Coordinator will assist the candidate with the completion of the appropriate applications, supporting documentation, letters of reference, and process for payment of fees. Completed applications are delivered to the appropriate Hospital Medical Staff Office. The Credentialing Coordinator will monitor the status of the hospital privileges and follow-up as needed.

The Credentialing Coordinator will facilitate the process of obtaining participating Provider Agreements and Provider Numbers. The Credentialing Coordinator will deliver a partially completed provider package to the candidate with instructions for completion and request for additional information as needed. Provider package is mailed or delivered to the insurance carrier. The Credentialing Coordinator will coordinate with the EVMS Risk Management Office. The Credentialing Coordinator will monitor the status of the provider numbers and follow-up as needed.

The Health Services Credentialing Coordinator notifies the candidate, the Department Chairman, and the Office of Faculty Affairs when the clinical credentialing process is complete.

D. Appointment Nomination Package Checklist

1. Chair’s Letter

a) Rank at which candidate is being proposed.
b) Time in current rank.
c) Descriptions of candidate’s assigned duties, job description, annual breakdown of percentage of time allocated to the following areas: education, clinical practice, research and service.
d) Chair’s evaluation of candidate’s ability, experience, and accomplishments in each of the four areas mentioned above.

2. Letters of Recommendation
Three external letters of recommendation requested and obtained by the Chair of the Department. For Assistant Professor level, the letters should be obtained from training directors, other faculty members at the training institution or other professionals, where appropriate, who are familiar with the candidate’s activity or expertise. For Associate and full Professor, the letters should be from individuals at an equivalent or higher rank than that for which the candidate is being proposed. In general, such letters should document a candidate’s qualifications for an appointment. Collectively, the letters should address the following points:

a) For how long and in what capacity the individual knows the candidate.

b) The candidate’s professional expertise.

c) For Assistant Professor, document the candidate’s potential in one or more of the four areas of academic activity (i.e., education, clinical practice, research and service). For Associate Professor or Professor, address accomplishments in one or more of the four areas of assigned responsibility.

d) Address recognition by peers in the candidate’s accomplished area. For Associate Professor, address how the candidate is recognized regionally or nationally. For Professor, address how the candidate is recognized nationally or internationally.

3. Curriculum Vitae and Additional Required Information

For the purpose of appointments, the candidate should provide the information requested on the EVMS Curriculum Vitae form, available from the Office of Faculty Affairs. In addition, the candidate for an unmodified rank should provide additional information not already included in the Curriculum Vitae format as required for documentation of scholarly activity as outlined in Section IV for the unmodified rank. All candidates should compile and attach a portfolio on each area (clinical practice, education, research and/or service) in which the individual has time allotted, documenting evidence of quality of teaching, assessments of clinical service and research, and contributions to the department.

4. AAMC Faculty Roster Form

Candidate completes AAMC Faculty Roster Form (only required for full-time faculty). This form is available from the Office of Faculty Affairs.

5. Original Transcript of Terminal Degree

Candidate must provide an original transcript, with raised seal, from the institution that awarded his/her terminal degree (only required for full-time faculty).

E. Notification and Employment Contracting

The Office of Faculty Affairs notifies the Department Chairman when the faculty appointment has been approved. The Chairman receives a copy of the letter of appointment to the new faculty member. The Health Services Credentialing Coordinator notifies the candidate, the Department Chairman, and the Office of Faculty Affairs when the clinical credentialing process is complete. Final faculty employment contracts will be issued only after the entire appointment and credentialing process has been completed.

29
1. Faculty Employment Contracts

The Office of Faculty Affairs will initiate the completion of the faculty employment documents. The Office of Faculty Affairs issues the following documents to the new faculty member.

a) Faculty Compensation Agreement
   The Faculty Compensation Agreement will be for a fiscal year (July 1 – June 30) or a partial year in cases of mid-year appointments. The compensation details will be derived from the accepted letter of offer and other documentation as may be required to specify the applicable compensation components. The format and wording of the Compensation Agreement will be standard depending on the specific arrangements for the faculty position. The contract language and/or modifications made from time to time must be approved by the Dean and Vice President for Administration and Finance. Co-terminus faculty appointment contracts will so indicate with the reasons stated. The Faculty Compensation Agreement is signed by the Dean, Vice President for Administration and Finance, and the Department Chairman. The faculty member must sign and return the contract within a specified period of time. Failure to sign by the date indicated will render the contract null and void.

b) Faculty Fringe Benefits
   Attachment A to Faculty Compensation Agreement. The fringe benefit attachment appropriate to the position (i.e., full or part-time, Basic or Clinical faculty) is included.

c) Standard Employment and Non-Competition Contract
   All new clinical faculty are required to sign a Standard Employment and Non-Competition Contract. This contract is made by and among the EVMS Academic Physicians and Surgeons Health Services Foundation (Health Services), the Eastern Virginia Medical School, and the clinical faculty member. The specifics of the restrictive non-competition covenant will be specified in accordance with Health Services policy. The Standard Employment and Non-Competition Contract is signed by Health Services, the Dean, the Vice President for Administration and Finance, and the Department Chairman. The faculty member must sign and return the contract within the time specified in the Faculty Compensation Agreement.

The Office of Faculty Affairs issues the above faculty employment contracts to the new faculty member for execution. The fully executed documents are returned to the Office of Faculty Affairs. The Office of Faculty Affairs notifies the Department Chairman, Health Services, and Risk Management that the employment contracts are complete. The Office of Faculty Affairs sends the Verification of Employment form to Risk Management.

No faculty member will be placed on the payroll until the faculty appointment and credentialing and contracting procedures are completed.

In order for the Medical School to provide professional liability insurance coverage to EVMS clinical faculty, the individual must be licensed/certified by the Commonwealth of Virginia. The Commonwealth of Virginia determines specifics as to professions requiring certification or licensure. Without professional liability insurance coverage, clinical faculty cannot perform any clinical duties and responsibilities including, but not
limited to, direct patient care, clinical consultations, and/or precepting fellows, residents, and students.

Provisional Appointments

For initial salaried faculty appointments only to all faculty ranks, the Dean may approve in emergency situations a provisional appointment provided:

1. The Department Chairman must provide to the Dean, in writing, the reason for requesting provisional status for a potential new faculty member. The Dean must be given at least five (5) working days to respond with approval or disapproval.
2. The maximum provisional appointment period will not exceed three (3) months. In special situations the Dean may approve one extension of ninety (90) days.
3. The required clinical credentials under Section II.C.3 of the faculty handbook must be complete prior to the beginning of any clinical activity including direct patient care, consultation or preceptorship.
4. The Dean notifies the prospective faculty member by letter of the provisional appointment stating: a) termination date, b) that the full appointment/credentialing process must be completed by such date, and c) compensation payments will automatically cease by such date and EVMS will have no continued contractual obligation beyond such date unless a permanent appointment has been approved.
5. The non-binding offer letter (Section II.B) MUST NOT suggest the possibility of provisional appointments.
6. The provisional appointments approved by the Dean will each be reviewed by the Dean at the next Academic Affairs Committee of the Board of Visitors.
7. New Faculty will not be added to the EVMS payroll until the Dean has approved provisional status and the letter referred to in 4. above has been sent to the prospective faculty member. Retroactive pay (prior to the date of Dean’s approval) will not be granted.

G. Faculty Appointment and Credentialing Process Timeline

See Dean’s Procedure Memorandum – “Initial Faculty Appointment and Credentialing Process Timeline”.

III. PROMOTION PROCEDURES

A. Introduction

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

B. Time Frame

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

Promotions Process

Promotions at the ranks of Instructor and Assistant Professor are not considered by the Appointments and Promotions Committee. At these levels, promotions are approved by the Dean/Provost, following receipt by the Dean/Provost’s Office of the appropriate materials from the Department Chair. Nominations for promotion at the Associate Professor or Professor ranks are considered by the Appointments and Promotions Committee. Following is an outline of the general process for promotion to all ranks.

1. Initial and annual evaluation by the Chair. Documentation should include time allocation to the areas of education, clinical practice, research and service.
2. Candidate identified for promotion in a Department.
3. Candidate submits required documents to the Chair.
4. Department Chair obtains letters of reference.
5. [Optional] Nomination sent to Departmental Promotions Committee for consideration.
6. [Optional] Recommendation from Departmental Promotions Committee to Chair of Department.
7. Nomination package forwarded by Chair of Department to the Dean/Provost in care of the Office of Faculty Affairs.
8. Nomination reviewed by Office of Faculty Affairs to assure necessary information is submitted.
9. Nominations at the Instructor/Assistant Professor ranks are considered directly by the Dean/Provost.
10. For the ranks of Associate Professor and Professor, the Dean/Provost forwards the nomination package to the Appointments and Promotions Committee.
11. Nomination considered by Appointments and Promotions Committee and recommendation forwarded to Dean/Provost.
12. Nomination forwarded by the Dean/Provost to the Academic Affairs Committee for review and recommendation.
Academic Affairs Committee forwards recommendation at Associate Professor and Professor ranks to Board of Visitors.

Board of Visitors sends letter of confirmation to faculty member and to Department Chair.

C. Appointment Nomination Package Checklist

Chair’s Letter

a) Rank at which candidate is being proposed.

b) Time in current rank.

c) Description of candidate’s assigned duties, job description, annual breakdown of percentage of time allocated to the following areas: education, clinical practice, research and service. Also comment on major changes, if any, in time allocation in these four areas during the candidate’s time in current rank.

d) Chair’s evaluation of candidate’s ability, experience, accomplishments and performance (i.e., outstanding, excellent) in each of the four areas mentioned above.

Letters of Recommendation

Three external letters of recommendation requested and obtained by the Chair of the Department. For Assistant Professor level, the letters should be obtained from training directors, other faculty members at the training institution or other professionals, where appropriate, who are familiar with the candidate’s activity or expertise. For Associate and full Professor, the letters should be from individuals at an equivalent or higher rank than that for which the candidate is being proposed. In general, such letters should document a candidate’s qualifications for an appointment. Collectively, the letters should address the following points:

For how long and in what capacity the individual knows the candidate.

The candidate’s professional expertise.

For Assistant Professor, document the candidate’s potential in one or more of the four areas of academic activity (i.e., education, clinical practice, research and service). For Associate Professor or Professor, address accomplishments in one or more of the four areas of assigned responsibility.

Address recognition by peers in the candidate’s accomplished area. For Associate Professor, address how the candidate is recognized regionally or nationally. For Professor, address how the candidate is recognized nationally or internationally.

1. Curriculum Vitae and Additional Required Information

For the purpose of promotions, the candidate should provide the information requested on the EVMS Curriculum Vitae form, available from the Office of Faculty Affairs (446-8422). In addition, the candidate for an unmodified rank should provide additional information not already included in the Curriculum Vitae format as required for documentation of scholarly activity as outlined in Section IV for the unmodified rank. All candidates should compile and attach a portfolio on each area (clinical practice, education, research and/or service) in which the individual has time allotted,
documenting evidence of quality of teaching, assessments of clinical service and research, and contributions to the department and Medical School.

IV. FACULTY ACCOMPLISHMENTS TO BE DOCUMENTED

Scholarly Activity

1) Definition

Scholarship is the generation of new knowledge or mastery and application of existing knowledge aimed to advance one of the following: (1) the understanding of basic scientific principles; (2) the practice of clinical medicine; or (3) the effectiveness of educators. Scholarship can occur in each area of faculty responsibility: clinical practice, education, research, and service. In addition, scholarship requires the dissemination of such knowledge/application for the benefit of others in a fashion that is tangible and can be peer-reviewed and documented.

2) Evidence of Scholarly Activity

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

a) Publications

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

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

(2) Presented Abstracts
   (a) Peer-reviewed articles
   (b) Non-peer-reviewed articles

Presentations

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

1) Oral presentations
   (a) Plenary
   (b) Workshop
Appendix O

(c) Seminars
2) Poster presentations
3) Discussant
4) Session Chairs

b) Patents
List patent applications and the status of each, providing the following:
1) Title
2) Inventors
3) Brief description
4) Disposition
5) Impact

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

Development of Original Clinical Programs and/or Techniques
1) Brief description, including goals
2) Target population
3) Impact
4) Nature of dissemination

Development of Original Teaching Tools, Methods
1) Description of product, including objectives
2) Level of involvement
3) Target audience
4) Copyright status
5) Impact
6) Nature of dissemination

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

Level of trainee mentored
(a) Student (if an advisory committee is involved, the candidate will indicate whether he/she was the Chair or a member of the committee)
   (i) Thesis (Dissertation)
   (ii) Non-thesis
(b) Resident
Appendix O

(c) Fellow
(d) Visiting Scientist

Duration of mentoring
Accomplishment of scholarly activity by the trainee during the training interval
Current position of the trainee

c) Scholarly Involvement in Professional Societies/Organizations
Provide the level of involvement:
1) Officer/director of a scholarly society
2) Membership on advisory boards
3) Membership on editorial boards
4) Reviewer for journal
5) Reviewer for funding agency
6) Member of organizing committee for a scholarly meeting

Consultancies

Serving as a Visiting Professor

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

d) Recognition for Scholarship

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

A. Expertise in the Four Faculty Roles

1. Education

Introduction

In the area of education, teaching is defined as time spent in direct contact with learners, by using techniques which deliver and/or reinforce information, stimulate thinking, and result in learning. Individual faculty members may distinguish themselves as teachers while others excel in the design, production, or evaluation of courses, examinations, and/or instructional materials.

Evidence of Expertise

The following criteria may be used to assess the teaching activities of all candidates:
Quantity and Type of Teaching

To indicate the amount and type of teaching done, list teaching activities by course (or other relevant unit) and date (year). If feasible, and not self-evident, indicate:

Type of learners;
Primary teaching methods used; and
Contact time.

1) Quality of Teaching

To substantiate the quality of teaching, the candidate should include a broad range of evidence. Examples of evidence of teaching expertise include:

Evidence of desired outcomes in learners: test scores; evidence of preparation or subsequent educational activities; documentation of changes in physicians’ practice patterns; etc.
Systematic peer reviews: by colleagues, departmental or other institutional committees, Department Chair, or peers from other institutions who have observed the teaching;
Systematic reviews by learners and graduates, including ratings and/or written evaluative comments;
Number of students who sign up for an elective;
Reviews by external or internal education specialists;
Awards received for teaching.

3) Advising

Advising comprises those activities most closely related to career counseling and supporting students in their professional development. Career counseling may encompass assistance in selection of preceptor placements and research advisors, selection of clinical electives, and decisions regarding clinical residency training and other postgraduate education programs. Documentation of advising activities includes:

List of formal advisees and current status;
List (or summary) of informal advisees;
Letters from former advisees acknowledging value of the advisory process;
Lists or examples of work performed by advisees while under the candidate’s guidance, including, where feasible, evidence of the quality of that work.

4) Curriculum Development

Curriculum (or program) development is the process of planning, conceptualizing, outlining, and organizing educational courses, clerkships, electives, etc., or parts thereof. While these activities are
often the responsibility of course or clerkship directors, other faculty may be involved. Evidence to support curriculum development activities and expertise include:
List of the curricular components developed, including a description of the candidate’s role in each, with samples selected from those for which the candidate had primary responsibility;
Evaluation data and written comments from learners;
Evaluative reviews from peers, external subject matter specialists, and education specialists;
Dissemination of curricular materials to, and use at, other institutions;
Successful grant proposals involving the curricular components designed.
List, description, and/or samples of patient education methods or materials created.

5) Funded Educational Projects

The candidate will list each funded project and provide the following information for each:

Title
Primary or co-investigators, administrators and percent of effort
Concise description of aims and results
Source of funding
Site(s)
Dates of duration
Direct costs

2. Clinical Practice

a) Introduction
Candidates may distinguish themselves in the clinical arena through professional excellence, integrity, and empathy in treating patients.

b) Evidence of Expertise
The candidate should document the quantity and quality of clinical activity, and, where feasible, the impact on a target patient population.

Commitment to Patient Care

a) Meeting productivity standards set by Division/Department
b) Patient volumes
c) Clinical hours/year, how time is spent
d) Description of special patient or community recognition

1) Clinical Competency and Quality of Care
Results of periodic patient satisfaction surveys or complaints.
Patient referrals and respect from colleagues as an expert clinician.
Results of periodic assessment of clinical practice by colleagues.
Letters from patients, families, staff and peers
Other quality assessment monitoring of clinical activity

2) Continuing Education

3) Recognition for Clinical Excellence or Practice

4) Consultant for Clinical Service to Other Institutions or Agencies

5) Demonstration of Excellence in Some Aspect of Clinical Practice Such that the Candidate's Work Advances Practice in that Area

6) Published Case Reports and Case Series

3. Research

a) Introduction
Candidates may carry out research that is recognized by other scholars for its contribution of new information for a field of study. The following criteria may be used to assess the research activities of candidates.

b) Evidence of Expertise

1) Evidence of Active and Past Research Activities
For each, provide:
   a) Title
   b) Principal or co-investigators, administrators and percentage of effort
   c) Source of funding
   d) Site(s)
   e) Dates of duration
   f) Direct costs

2) Documentation of Research Results
   a) Peer-reviewed abstracts and presentations at national meetings
   b) Invited presentations at scientific symposia
   c) Publications in national and international peer-reviewed journals
   d) Invitations to write chapters on area of research expertise

3) Consultantships
   a) Reviewer for granting agency
   b) Editorial boards, journal reviewers
   c) Advisory committees

4) Grants Received
   a) Number of applications submitted
   b) Types of agencies
   c) Percentage funded

5) Research Mentorship
   a) Graduate students

Appendix O
Appendix O

i. advisor (number of M.S., Ph.D.)
ii. dissertation committees
iii. research rotations

b) Postdoctoral fellows
c) Residents and fellows
d) Medical students (summer fellows)
e) Others (e.g., undergraduates, magnet high school students
f) Percentage funded

4. Service

b) Introduction
Service encompasses a broad range of non-clinical professional activities through which faculty members advance the overall mission of their department, and/or provide personal time and service to the institution, their profession and/or the community as a whole. Service includes both leadership and active participation in various administrative committees and organizations.

c) Evidence of Contributions to:

1) Pre- and Post-Doctoral Students
   a) Faculty advisor, counseling
   b) Advisor to student organizations
   c) Member of student-faculty committees, ad hoc or standing
   d) Preceptorships

2) Department
   a) Committees and subcommittees
   b) Administrative responsibilities

3) Medical School
   a) Dean's Standing Committees and subcommittees
   b) Faculty Senate
   c) Ad hoc committees and task forces
   d) Promotion of interaction with academic / non-academic institutions in the area
   e) Administrative responsibilities
   f) Participation in school-sponsored events

4) Affiliated Hospitals or Health Institutions
   a) Committees and subcommittees
   b) Administrative responsibilities
   c) Service on ethics board

5) Community
   a) Program development, symposia organization, initiation of professional meetings for community education
   b) Support and assistance to existing community groups
   c) Advisor to federal, state, and local decision-making groups
d) Consultantships to hospitals, nursing homes, and other health care facilities

e) Expert witness

f) Invited presentations on area of expertise to schools, civic groups, and agencies

g) Representing interests of institution on civic, local government, or politically appointed boards or advisory groups

V. STANDARDS OF EXCELLENCE FOR EACH RANK

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

All candidates for appointment or promotion at the rank of Assistant Professor or above will be expected to have met certain basic criteria. These are:

Candidates will hold an earned doctoral degree or equivalent, or other appropriate terminal degree in their field of expertise.

Candidates will have completed appropriate residency and/or post-doctoral fellowship programs.

Candidates involved in clinical practice will hold appropriate current board certification. Initial appointments (usually at the Assistant Professor level) may be granted to candidates not yet board certified, but continued appointment or promotion will require that board certification be obtained within an appropriate time as determined by the Dean/Provost with the advice of the Department Chair.

All candidates are expected to demonstrate expertise commensurate with their academic rank in all of their assigned activities (education, research, clinical practice or service). In addition, each candidate for unmodified rank must demonstrate accomplishment in scholarly activity as outlined in Section IV A.2.

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

A. To Rank of Assistant Professor

Education

Is a regular participant in teaching activities. This may include responsibility for (but is not limited to): lectures and small group presentations to medical students, graduate students and residents; clinical bedside teaching; mentoring students; and participation in grand rounds and other continuing medical education activities.

Is considered an excellent teacher by students and faculty. This may be documented by student evaluations and peer review by Chairs and other faculty. Teaching awards from students and peers are noteworthy.
Appendix O

Begins to develop a local or regional reputation as a teacher. This may be documented by evaluations from participants in CME courses or by invitations to speak at local or regional CME courses and meetings. Repeat invitations are noteworthy.

Is a regular and effective participant in curriculum development and administration. Service on course committees, service as a course director, preparation of course syllabi, etc., on a local or regional level are appropriate.

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

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

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

2. To Rank of Associate Professor

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

   2. Research
      a. Has a demonstrated sphere of expertise through first/senior authorships in peer-reviewed journals.
      b. Has had continuing success in generating financial resources necessary to undertake scholarly activity.
      c. Is recognized beyond the local community as documented by national meeting presentations, key articles, invited lectures or national awards.
      d. Is a peer reviewer at the local or regional level.
3. Clinical Practice
a. Has developed new clinical programs recognized and adapted at the local and regional level.
b. Has significantly improved ongoing clinical activity.
c. Has devised or implemented a new diagnostic or therapeutic procedure, instrument, or system.
d. Has developed innovative infrastructure such as patient databases for patient tracking.
e. Has developed clinical pathways or outcome measures utilized at the local or regional level.
f. Is actively involved in clinical investigation and/or trials.
g. Has appropriate publications in clinical journals.

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

C. To Rank of Professor

1. Education
a. Is continually recognized as an outstanding teacher and educator. Candidate should present outstanding evaluations from students, peers, and others, as appropriate. Teaching awards from students, faculty, or state or national organizations provide additional evidence of excellence.
b. Has widespread regional and national recognition for excellence as teacher or educator. Regular participation as a presenter in national review courses and professional meetings is expected.
c. Contributes to Board examination in specialty or subspecialty. Gives or administers oral examinations in specialty or subspecialty.
d. Course materials, syllabi, etc., should be widely respected by peers at other institutions. Candidates should serve as consultants in the design and evaluation of educational programs and curricula at the national level.
e. Has developed educational methods or protocols recognized at the local, regional and national level.
f. Is recognized as an authority by peers and invited to speak or chair sessions at national meetings.
g. Has had visiting professorships.
h. Provides mentoring at regional and national level.

2. Research
a. Has continually demonstrated expertise as first/senior author in peer-reviewed journals.
b. Has been editorial board member and peer reviewer on the national level.
c. Has had sustained and continuing success in generating financial resources necessary to undertake scholarly activity.
d. Is invited to speak at national specialty meetings.
3. Clinical Practice
   a. Has developed a new clinical program recognized at the regional and national level.
   b. Has significantly improved an ongoing clinical activity.
   c. Has devised or implemented a new diagnostic or therapeutic procedure, instrument or system.
   d. Has developed an innovative infrastructure such as patient databases for patient tracking.
   e. Has developed clinical pathways which are used on the local, regional or national levels.
   f. Has developed outcome measures which are used at the local, regional or national levels.
   g. Has a continuing active role in clinical investigation and clinical trials.
   h. Has had a major impact on the development of national standards for patient care.
   i. Establishes, consults and/or tracks patients on a regional, national or international level.

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

EASTERN VIRGINIA MEDICAL SCHOOL GUIDELINES FOR APPOINTMENT AND PROMOTION IN THE ADMINISTRATION AND SERVICE TRACK

1. Promotion Procedures

   A. Introduction

   Each Departmental Chair should make promotion expectations explicit for each faculty member at the time of initial recruitment and appointment, with reiteration and/or modification of these expectations at subsequent annual reviews. These explicit expectations should guide faculty toward their promotion. For these expectations to be achievable, there should be demonstrable opportunity for faculty members to allocate necessary time to these objectives, and promotion should be considered within a reasonable period of time. A faculty member’s progress toward meeting these objectives will be judged in accordance with the faculty member’s percentage of effort directed toward research, education, and service/administration. Annual reviews at which Departmental Chairs meet with individual faculty to discuss faculty accomplishments, plans for the coming year, and progress toward promotion, are critical to this process. The annual meeting between Chair and faculty member should result in documentation of all explicit agreements regarding allocation of effort, goals, plans, and performance expectations. At the time a candidate is proposed for appointment and/or promotion, the Chair’s letter for the faculty candidate should summarize departmental expectations and goals, and clearly indicate the faculty member’s percentage of allocated effort in education, research, and service/administration. The following are meant to be guidelines. It is at the discretion of the promotions committee to take into account that if a candidate far exceeds his or her peers in one or some of the guidelines, this can compensate for “deficiencies” in fulfilling all the requirements and provide enough weight to justify recommendation for promotion.
Appendix O

B. Time Frame

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

Promotions Process

Promotions at the ranks of Instructor and Assistant Professor are not considered by the Appointments and Promotions Committee. At these levels, promotions are approved by the Dean/Provost, following receipt by the Dean/Provost’s Office of the appropriate materials from the Department Chair. Nominations for promotion at the Associate Professor or Professor ranks are considered by the Appointments and Promotions Committee. Following is an outline of the general process for promotion to all ranks.

1. Initial and annual evaluation by the Chair. Documentation should include time allocation to the areas of education, clinical practice, research and service.
2. Candidate identified for promotion in a Department.
3. Candidate submits required documents to the Chair.
4. Department Chair obtains letters of reference.
5. [Optional] Nomination sent to Departmental Promotions Committee for consideration.
6. [Optional] Recommendation from Departmental Promotions Committee to Chair of Department.
7. Nomination package forwarded by Chair of Department to the Dean/Provost in care of the Office of Faculty Affairs.
8. Nomination reviewed by Office of Faculty Affairs to assure necessary information is submitted.
9. Nominations at the Instructor/Assistant Professor ranks are considered directly by the Dean/Provost.
10. For the ranks of Associate Professor and Professor, the Dean/Provost forwards the nomination package to the Appointments and Promotions Committee.
11. Nomination considered by Appointments and Promotions Committee and recommendation forwarded to Dean/Provost.
12. Nomination forwarded by the Dean/Provost to the Academic Affairs Committee for review and recommendation. Academic Affairs Committee forwards recommendation at Associate Professor and Professor Ranks to Board of Visitors.
13. Board of Visitors sends letter of confirmation to faculty member and to Department Chair.

2. GUIDELINES FOR DIFFERENT RANKS

A. Instructor

● Works collaboratively with students, faculty, and staff to accomplish the goals of a program or grant project
● Serves on Divisional or Department committees
● Serves on committee in professional organizations or boards of health care organizations
● Documents satisfaction with administrative activities by peer or supervisor evaluations.
● Maintains competence in area of expertise through continuing education

B. Assistant Professor

● Documents excellent administrative skills through peer and supervisor evaluations
● Enhances professional knowledge in areas important to administration and service
Appendix O

- Promotes and models collegiality and interdisciplinary approaches to administration and service
- Serves on Divisional, Department, School Committees
- Is invited to speak at local, state, or national meetings on professional issues
- Effectively demonstrates and communicates administrative skills to students
- Develops innovative approaches to solving administrative and professional problems

C. Associate Professor
- Documents excellence in administrative services through self, peer, and supervisor evaluations.
- Serves as an officer or committee chair in a local or state professional organization
- Is invited to speak at local, state or national meetings on issues related to professional administrative and service.
- Assumes a leadership position in the Division or Department in administration
- Serves as a mentor for students in professional administration and service
- Conducts workshops on professional leadership and administration
- Publishes articles on innovative approaches to administration or on important professional issues in peer-reviewed journals or books
- Receives funding to support innovative administrative or service projects

D. Full Professor
- Publishes articles in peer-reviewed journals that make a significant and lasting contribution to the profession.
- Is invited to speak at national meetings on professional leadership, service or administration
- Serves in a leadership role in national professional organizations
- Serves as a consultant outside of the institution
- Is recognized as an effective mentor to students and faculty
- Serves in a leadership role on Departmental, or EVMS committees related to administration
- Establishes a consistent record of excellence in professional leadership and administration
- Receives national recognition for administrative or service contributions

3. DEFINITIONS

A. PROFESSIONAL SERVICE:
- Consultantships to governments, health policy groups, health advocacy groups, national/international public health organizations, health services research and policy organizations.
- Identification and coordination of responses to health needs in the surrounding communities, the District, and the nation, including increasing public awareness of disease prevention and health maintenance, organizing the provision of continuing education to practicing health care professionals, and devising strategies to provide health care to underserved and underfinanced populations.
- Initiation of or participation in health care delivery and/or research that is oriented to rural populations, minority or geriatric populations, or any other targeted population with documented health care needs.
- Leadership in national/international groups dealing with health care policy, health care planning, health care reform, and health care legislation.
- Evidence of a positive impact on communities and populations.
Appendix O

- Leadership and active participation in continuing education to health professionals at the local, regional, or national level.

B. PUBLIC SERVICE:
- Community-based service, including guest lecturers and/or preparation of materials for paraprofessionals and/or health professionals.
- Consultation, education, and public speaking outside the university that brings credit to the university.

C. INSTITUTIONAL SERVICE (DIVISION, DEPARTMENT, SCHOOL):
- Participation or leadership in divisional, departmental, hospital, school, and/or university committees.
- Contributions to the academic management of the division, department, school, and/or medical center, including recommending or developing, for example, policy that relates to faculty affairs, student affairs, academic records, and academic fiscal activities.
- Direction of a section, service, or laboratory considered to benefit the division, department, hospital, school, medical center and/or university.

JOINT FACULTY APPOINTMENTS

This is an appointment an individual faculty member may hold in addition to the academic department of primary faculty appointment. An individual may not hold academic rank in a secondary appointment higher than that in the primary appointment.

ADJUNCT FACULTY APPOINTMENTS AND PROMOTION POLICY

EVMS benefits from the expertise of faculty employed by other academic institutions that are regionally accredited (e.g., Old Dominion University, Norfolk State University, William & Mary, Virginia Wesleyan, and Hampton University) and who are participants in EVMS academic programs. Extending adjunct appointments to faculty of those institutions on a reciprocal basis is an effective and appropriate mechanism for recognizing and encouraging collaboration in education and research endeavors. The purpose of this policy is to streamline the process for making adjunct appointments based on an acceptance of the faculty review processes at the faculty member’s home institution and to eliminate the requirement for external letters of support/recommendation for full-time faculty members at a regionally accredited institution. The policy recognizes that these institutions already extend similar courtesies to EVMS faculty.

1. For initial appointment, the EVMS department chair or Associate Dean for Planning and Health Professions recommends the appointment to the Dean/Provost after consultation with the program director and faculty of the department. The candidate must complete the EVMS Curriculum Vitae form, which is available from the Office of Faculty Affairs. If the Dean/Provost approves the appointment, he/she notifies the faculty member and the department chair or Associate Dean for Planning and Health Professions. The faculty rank at EVMS will be commensurate with the faculty rank at the faculty member’s home institution.
Appendix O

2. For promotion based on a promotion received at the faculty member’s home institution, a letter and updated CV must be submitted by the appropriate EVMS department chair or Associate Dean for Planning and Health Professions to the Dean/Provost documenting the rationale for promotion. The candidate must complete the updated EVMS Curriculum Vitae form. If the Dean/Provost approves the promotion, he/she notifies the faculty member and the department chair or Associate Dean for Planning and Health Professions.

EMERITUS FACULTY APPOINTMENTS

A faculty member, upon retirement, may be granted the title EMERITUS by action of the Board of Visitors.

Eligibility

- The title emeritus/emerita faculty may be awarded upon retirement for distinguished or exceptional service and outstanding dedication to the Medical School
- Normally, eligibility is limited to faculty members who have retired at the rank of professor or associate professor and who have served the medical school for a period of not less than ten consecutive years prior to retirement.
- To be eligible for an appointment, a faculty member shall be nominated to the Dean by the Chair, and with the concurrence of the departmental faculty. The nomination then requires approval by the Dean and Provost and President before submission to the Board of Visitors by the President.

Privileges

Emeritus appointments carry the following lifetime privileges:

- Use of the library as a faculty member
- Attendance at faculty meetings (non-voting), receptions, banquets, and academic processions, including commencement
- Listing in medical school publications on the same basis as active faculty
- Receipt of all medical school informational publications that are received by active faculty
- Attendance at lectures, seminars, conferences, etc. and use of medical school facilities, including parking lots, on the same basis as active faculty
- Office and laboratory space, on a temporary, space-available basis, but priority will be given to active faculty, staff, and students when space is limited.

APPPOINTMENT AND CONTRACTS FOR FACULTY WITHOUT TENURE

A. The Board of Visitors, with the recommendation of the Dean/Provost and the President, may appoint faculty without tenure for a term not to exceed three (3) years, as follows:

1. Instructors without tenure shall be appointed for a term of one (1) year or less.

2. Assistant Professors without tenure shall be appointed initially for a term of one (1) year or less.
3. Assistant Professors without tenure who have previously served for one probationary term at this Medical School may thereafter be appointed for one (1) or more terms of two years each.

4. Associate Professors without tenure shall be appointed for one (1) or more terms of three (3) years each.

5. Full Professors without tenure shall be appointed to one (1) or more terms of three (3) years each.

B. Annual Compensation for non-tenured faculty shall be made on a fiscal year basis from July 1 to June 30.

C. Renewal of contractual appointments for non-tenured faculty appointed for one (1) year or less shall be made by December 31 of such employment year.

D. Renewal of contractual appointments for non-tenured faculty with term appointments for more than (1) year shall be made by December 31 of the last year of such term appointment.

E. Contractual appointments made after July 1 but before December 31 of the appointment term shall be counted as one (1) year for the purpose of qualifying Assistant Professors for advancement toward tenure as provided in sections A-2 and A-3 above.

F. Contractual faculty without tenure shall be subject to dismissal during the term of their appointment on any of the grounds specified on pages 31 and 32, or as may be specified in the Faculty Handbook.

TENURE

A. Definition of Tenure

1. Tenure relates to faculty rank and salary and is the status granted to qualified faculty members which is reviewed at five-year intervals and which protects faculty from dismissal, except for:

   a. Cause, as determined by formal hearing, and as hereinafter specified on page 32; or

   b. Reallocation of institutional resources, when determined as hereinafter specified beginning on page 32, or

   c. Severe institutional financial distress, when determined as hereinafter specified beginning on page 33.

2. Tenure: Basic Science Departments. Subject to the respective terms of service requirements set forth in section C, full-time faculty in the Basic Science Departments at the rank of Associate Professor or Professor are eligible to be considered for tenure and with full base salary. Full base salary is defined as the current level of compensation (not including incentive or bonus pay) for a faculty member, but not to exceed the average salary of the tenured faculty within the relevant rank and department.
3. **Tenure: Clinical Science Departments.** Subject to the respective terms of service requirements set forth in section C, full-time faculty in the Clinical Science Departments (including Pathology) at the rank of Associate Professor or Professor are eligible to be considered for tenure. For the purposes of tenure, the base salary for clinical faculty is defined as the current average base salary support provided to the appropriate rank and department by the Medical School.

4. The word “current” and the phrase “average salary of tenured faculty” in sections A-2 and A-3 above refer to the level of compensation whenever severe institutional financial distress might be invoked, as specified on page 33.

5. The ceiling for the number of tenured positions for full-time faculty is established by the Dean’s Executive Committee and the Dean/Provost from time to time with the approval of the President and Board.

**B. Criteria for Tenure Appointment**

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

2. The criteria used for awarding tenure include a higher level of effectiveness in four (4) areas:
   a. Research and publication;
   b. Teaching;
   c. Patient care; and
   d. Administration.

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

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

**C. Length of Service Requirements for Tenure Appointment**

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

2. Initial appointees at the rank of Professor may be considered for tenure at that rank after two (2) years of service as Professor at this Medical School.
3. Chairs at the professorial level may be considered for tenure at the time of initial appointment.

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

D. Post-Tenure Review

1. All tenured faculty will undergo a post-tenure review at five-year intervals. The criteria for evaluation and approval of tenure for an additional five-year period are as specified below but will also include an assessment with documentation by the Department Chair of whether the tenured faculty member’s performance was consistent with the criteria for tenure. For a Department Chair, post-tenure review will include an assessment with documentation by the Dean/Provost of whether the tenured Chair’s performance was consistent with the criteria for tenure.

2. Should tenure not be awarded after review, faculty will have a grace period not exceeding two years to redress tenure deficiencies. If after this grace period, the faculty member cannot redress his/her deficiencies, contractual obligations as outlined in “Policies and Procedures for Contractual Faculty Without Tenure Holding Term Appointments”, shall apply.

E. Tenure Committee and Initial and Post-Tenure Review Appointment Procedures

1. The Tenure Committee shall be appointed by the Dean/Provost and shall consist of nine (9) tenured faculty members who serve for three-year terms. Four (4) of the members shall be recommended by the Dean’s Executive Committee and four (4) of the members shall be recommended from the general faculty by the Faculty Senate. One (1) member shall be appointed by the Dean/Provost.

2. Each nomination for an initial review of faculty tenure status must originate with a letter from the Department Chair addressed to the Dean/Provost for consideration of submission to the Appointment and Promotions Committee to ensure that faculty nominated for tenure meet the guidelines for promotion/rank. Upon approval of the Appointments and Promotions Committee, the nomination will be sent to the Tenure Committee for approval or disapproval. Recommendations of the Tenure Committee will be sent to the Dean/Provost for approval or disapproval. Nominations approved for tenure will be forwarded to the President for approval and then to the Board of Visitors for final approval and action.

3. Each nomination for post-tenure review must originate with a letter from the Department Chair addressed to the Dean/Provost for submission to the Tenure Committee. Recommendations of the Tenure Committee shall be submitted to the Dean/Provost as outlined in E-2 above.

4. Each letter of nomination should contain the following documentation.
Appendix O

a. Description and evaluation of the candidate’s teaching abilities and responsibilities.

b. Evaluation of the quality, originality, and significance of the candidate’s research. A description of work in progress and relevant sources of funding should be included.

c. Description and evaluation of administrative and other services to the department and the Institution.

d. Description of the role of the candidate in the department’s program and the effect of the Institution’s long-term commitment to the faculty member on the balance of skills required for a well-ordered department.

e. For faculty undergoing Post-Tenure review, the Chair’s letter should outline the basis for the original (or previous) award of tenure and the faculty member’s accomplishments in this regard.

f. Letters from faculty/students of EVMS knowledgeable of the faculty member’s qualifications should accompany the letter of the Chair. In addition, a list of four professional colleagues, external to EVMS, knowledgeable of the candidate’s qualifications should be provided. The Dean/Provost will contact at least two of them for recommendation relating to the nominee’s candidacy for tenure. The Dean/Provost will also have the option of contacting additional external faculty for recommendations.

g. Summation of the grounds on which the recommendation is based.

GROUND FOR DISMISSAL OF FACULTY

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

A. Dismissal for “Just Cause”

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

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

1. Neglect of duty, including, but not limited to, serious violation of faculty rules for governance or corporate by-laws, rules, and regulations.

2. Violation of generally accepted standards of professional ethics.
3. Material breach of contract with the Medical School.

4. Conviction of a crime deemed to render the faculty member unfit to carry out his or her professional activities.

5. Professional incompetence.

6. Refusal to perform legitimate work assigned by the faculty member’s supervisor or Department Chair, as specified in the annual letter of agreement.

B. Dismissal Because of Reallocation of Institutional Resources

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

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

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

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

Dismissal for Severe Institutional Financial Distress

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

1. In the event the President and the Dean/Provost determine that, in their opinion, a financial situation exists which places the institution in such financial jeopardy that the termination of tenured and non-tenured faculty positions may be necessary, then the Dean/Provost shall discuss such financial condition with the Dean’s Executive Committee and the Faculty Senate.
2. In the event the Dean’s Executive Committee, after consultation with the Faculty Senate, concur that termination of non-tenured faculty contracts and/or termination of tenured faculty positions should solely (and/or in addition to other solutions) be involved in eliminating such financial distress, then the Dean/Provost, in consultation with individual Department Chairs, will proceed to make the decision concerning which, if any, non-tenured faculty will be subject to termination and which, if any, tenured faculty will be terminated.

3. In the event the Dean’s Executive Committee does not concur with the President and the Dean/Provost that a severe institutional financial distress exists, then a special meeting of the Dean’s Executive Committee, the Dean/Provost, the President, and the Board of Visitors will be convened to fully consider whether or not there exists a severe institutional distress requiring tenured and/or non-tenured faculty positions to be terminated. The decision of the Board following such joint meeting will be final.

4. The determination of which non-tenured faculty positions shall be terminated and/or which tenured faculty positions shall be terminated will be made by the Dean/Provost, whose decision shall be final. A report of the Dean/Provost’s decision shall be made to the Dean’s Executive Committee, and the Dean/Provost’s decision will be reported for approval to the President and the Board of Visitors.

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

SABBATICAL LEAVE

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

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

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

Activities during Sabbatical Leave

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

Approval of Request for Sabbatical Leave

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

Upon Conclusion of the Sabbatical Leave

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

FACULTY RIGHTS, ETHICS, AND RESPONSIBILITIES

ACADEMIC FREEDOM

Academic freedom of the faculty is indispensable to the institution in fulfilling its obligations to students and to other members of the community at large. Institutions of higher education are conducted for the common good and not to further the interest of either the individual faculty member or the institution as a whole. The common good depends upon the free search for truth and its free exposition.
Academic freedom is essential to these purposes and applies to both teaching and research. Freedom in research is fundamental to the advancement of truth. Academic freedom in its teaching aspect is fundamental for the protection of the rights of the teacher in teaching and of the student to freedom in learning. It carries with it responsibilities correlative with rights.

The teacher is entitled to full freedom in research and in the publication of the results, subject to the adequate performance of other academic duties, but publication or research for pecuniary return should be based upon an understanding with the authorities of the institution.

The teacher is entitled to freedom in the classroom in discussing the subject, but should be careful not to introduce into the teaching matter which has no relation to the subject, nor should the teacher fail to present the subject matter of courses as announced to students and as approved in setting up the appropriate curriculum.

The college or university teacher is a citizen, a member of a learned profession, and an officer of an educational institution. When speaking or writing as a citizen, the teacher should be free from institutional censorship or discipline, but one's special position in the community imposes special obligations. Faculty members should remember that the public may judge the teaching profession and the institution by faculty comments. Hence, faculty should at all times be accurate, should exercise appropriate restraint, should show respect for the opinions of others, and should make every effort to indicate that they are not speaking on the behalf of the institution.

REGULATION OF OFF-CAMPUS SPEAKERS INVITED BY ORGANIZED STUDENT AND FACULTY GROUPS RECOGNIZED BY THE PRESIDENT OF EVMS

The freedoms of speech and assembly guaranteed by the First and Fourteenth Amendments to the United States Constitution and the Constitution of the Commonwealth of Virginia shall be enjoyed by the students and faculties of the Eastern Virginia Medical School (EVMS) with respect to the opportunity to hear off-campus, or outside or inside speakers or groups at EVMS. Free discussion of subjects of either a controversial or noncontroversial nature shall not be curtailed merely because of their content.

However, as there is no absolute right to assemble or to make or hear a speech at any time or place regardless of the circumstances, content of speech, purpose of assembly, or probable consequences of such meeting or speech, the issuance of invitations to outside speakers shall be limited in the following particulars, but only in the manner set forth herein:

A request to invite an outside speaker will be considered only when made by an organized student or faculty group, which is recognized by the President of EVMS.

No invitation by such organized group shall be issued to an outside speaker without prior written concurrence by the President of EVMS, the Dean/Provost, or his/her authorized designee, for scheduling of speaker dates and reservation of campus facilities.

Any speaker request shall be made in writing to the President of EVMS, the Dean/Provost, or his/her authorized designee by an officer of the student or faculty organization desiring to sponsor the proposed speaker not later than ten calendar days prior to the date of the proposed speaking engagement. This request shall contain the name of the sponsoring organization, the proposed date, time and location of the meeting, the expected size of the audience and topic of presentation. Any request not acted upon by the President of EVMS, the Dean/Provost, or his/her authorized designee, within four days after submission shall be deemed granted.
A request made by a recognized student or faculty organization, may be denied if the President of EVMS, the Dean/Provost, or his/her authorized designee determines, after proper inquiry, the proposed speech will constitute a clear and present danger to EVMS's orderly operation by the speaker's advocacy of such actions as:

The violent overthrow of the government of the United States, the Commonwealth of Virginia, or any political subdivision thereof;

The willful damage or destruction, or seizure and subversion, of EVMS's buildings or other property; or

The forcible disruption of impairment of, or interference with EVMS's regularly scheduled classes or other educational functions; or

The physical harm, coercion, intimidation, or other invasion of lawful right of EVMS's officials, faculty members or students; or

Other campus disorder of a violent nature. In determining the existence of a clear and present danger, the President of EVMS, the Dean/Provost, or his/her authorized designee, may consider all relevant factors, including whether such speaker has previously incited violence resulting in the destruction of property of any educational or research institution or has willfully caused the forcible disruption of regularly scheduled classes, education functions, or research activities at any such institutions.

a) Where the request for an outside speaker is granted and the speaker accepts the invitation, the sponsoring organization shall inform the President of EVMS, the Dean/Provost or his/her authorized designee, in writing immediately of such acceptance. The President, the Dean/Provost, or his/her authorized designee, may, at his/her discretion, require that the meeting be chaired by a member of EVMS's administration or the EVMS faculty, and he/she may further require a statement be made at the meeting that the views presented are not necessarily those of EVMS or of the sponsoring group. By acceptance of the invitation to speak, the speaker shall assume full responsibility for any violation of law committed by him/her while on the EVMS campus and shall leave the EVMS facilities used in the same condition as they were found.

STUDENT-FACULTY RELATIONSHIP AND PROVISION OF HEALTH CARE

Background
EVMS places a high value on protecting the student-faculty relationship that is a hallmark of higher education. Because clinical faculty may periodically provide health care services to EVMS students, the institution recognizes that provision of care could jeopardize the student-faculty relationship. This could be especially problematic in situations in which the treating faculty member also serves in an educational capacity, such as a course or clerkship director. Furthermore, it is essential that protected health information always be maintained separately from a student’s academic records.

Policy
Students and faculty have the right and are encouraged to request that a change be facilitated in either the provision of care or the educational experience if one or both parties conclude that circumstances may impede the student-faculty educational relationship.

Procedure
Students or faculty initiating request for such a change should contact the Associate Dean for Education (for medical students) or their Program Director (for health professions students) and explain the
Circumstances. The Associate Dean for Education or the Program Director will then make a
determination as to whether or not a change is warranted, and take such steps as deemed appropriate to
resolve the situation. As a general rule, the preferential resolution will result in changing an aspect of the
educational component if possible (e.g., assigning a student to a different preceptor and/or facility) so as
to avoid disrupting a student’s continuity of care. The matter will be treated in a confidential manner, and
the student and faculty member will be notified by the proper official as soon as an arrangement has been
finalized.

Approved by EVMS Board of Visitors 2/10/09

CONFLICT OF INTEREST

The following four-part policy addresses potential conflicts of interest involving the medical school, its
officers, employees and agents. The four broad areas covered are business matters, academic matters,
sponsored research and consulting.

Business Matters

Purchasing
The Eastern Virginia Medical School does not enter purchasing contracts with students, faculty, staff or
members of their immediate families other than those who are specified in the conditions of employment.
If an unusual situation arises which might warrant consideration of such a transaction, it must be reviewed
and approved by the Vice President for Administration and Finance or designee.

Acquisitions from a business in which an employee has an interest are prohibited unless full disclosure of
the background facts is presented in writing to the Materials Management Department and approved by
the Vice President for Administration and Finance.

Gifts
It is the policy of the Eastern Virginia Medical School to refuse gifts or gratuities offered in connection
with the purchasing function. Medical School faculty and staff may not accept personal gifts or gratuities
from any current or potential supplier of goods or services to the Medical School.

Sales
The medical school does not sell goods, materials, or services to its employees for their personal use
except for items which are normally sold or services provided by the medical school bookstore, food
services, or activities provided by our health care system.

Refer also to the Financial Affairs Policy and Procedures Manual, Section 2.10.3.

Academic Matters

Tutoring
As a matter of professional practice, it is understood that no member of the faculty shall accept payment
for tutoring any EVMS student. When it is desirable to recommend that a student seek the help of a tutor,
the student may be referred to the Chair of the department offering the work in which help is needed. The
Chair of the department can recommend a qualified tutor who is not a member of the faculty.
Appendix O

Teaching
Full-time faculty members and other employees are not permitted to teach for additional compensation at other institutions during the academic year other than individual lectures, except with the approval of the Dean/Provost.

Faculty Produced Teaching Materials
The medical school encourages faculty to produce text materials, experimental textbooks, and laboratory manuals designed for the medical school's curricular program.

Whenever it is possible to absorb the production costs of medical school printed material in the department's budget, the materials should be given to the student without charge. However, when the production costs of medical school printed material exceed budget, it is permissible to sell such materials to students through the EVMS Matthews Bookstore at a price designed to recover only the cost. The author(s) or department may not receive royalties or other compensation from the sale of such material to our students.

Another method of production is the assumption of initial full publication costs by EVMS and sale through the Matthews Bookstore. If this is done, the author shall receive through the medical school no royalties or other compensation from the sale. The cost of manuscript preparation may be recovered as part of the publication cost.

Private printings are permissible provided these do not obligate the College financially. Students cannot be required to purchase such materials.

Decisions to use faculty-produced material in medical school courses shall be made by the usual academic procedures. If it is material for a single section class, the decision shall be made by the instructor or by the department and approved by the Department Chair; if for a multiple section class, by course director.

Sponsored Research

Faculty members of the Eastern Virginia Medical School may not participate in sponsored activity arrangements which may lead to either a real or apparent conflict of interest. In the conduct of research, conflict of interest is possible with regard to the acquisition of funding and in the relationships that faculty might develop with outside entities or private firms through consultation relationships. One component of this potential conflict is with regard to financial interests that a faculty member might achieve with respect to potential funding sources. A policy for significant financial interest revised October 1, 1995, is available from the Institutional Office of Research. This policy, which reflects federal and applicable state requirements, as well as those of the Eastern Virginia Medical School, is applicable to all faculty and sets forth guidelines and due process with the specific aim of avoiding and/or resolving, the appearance of, or potential for, conflicts of interest. Below, the principles of this policy are summarized in order that faculty may recognize the hallmarks of potential conflict of interest in their sponsored research activities.

The Role of Disclosure. Because potential conflicts of interest in most instances can be resolved through public disclosure, this policy requires disclosure whenever a faculty member perceives or is concerned that such potential exists. Upon disclosure, the activity is reviewed by the Director- Office of Research and designated as either acceptable or unacceptable and recommendations solicited as to how the potential conflict would be best managed. It is the responsibility of the faculty member to ensure that conflict of interest does not exist with regard to activities performed within or for the institution. The institution must ensure that investigators provide a listing of significant financial interests, prior to submitting an application for funding, to the Office of Research that discloses all financial interests likely to be directly affected by the proposed research. All financial disclosures must be updated during the
interval of the award, either on an annual basis or as new reportable Significant Financial Interests are obtained. Documents pertaining to disclosure of a significant financial interest shall be treated as privileged communications.

Types of Potential Conflict.

Soliciting or Accepting Sponsored Research. Soliciting or accepting funding for privately conducted research when the research to be performed could be accomplished through the utilization of available medical school resources, or when the research to be performed places the medical school member in competition with the medical school, its manpower, or facilities.

Favoring of Outside Interests. A faculty member undertaking or engaging in sponsored work, who has a significant financial interest in, or a consulting arrangement with a private business concern, must avoid actual conflicts of interest between sponsored medical school research obligations and the faculty member’s outside interests and other obligations. Examples of such activities are:

Undertaking of research to serve the research or other needs of a private firm without disclosure of such undertaking to the Dean/Provost and to the sponsoring agency.

Purchase of major equipment, instruments, materials, or other items for medical school research from a private firm in which the faculty member has an interest, without approval by the Dean/Provost.

Transmission to a private firm or other use for personal gain of work products from programs sponsored by other agencies, as well as results, materials, records, or information that are not made generally available. Excluded from this provision are appropriate licensing arrangements for inventions, discoveries, or consulting work on the basis of sponsored research results where there is significant additional work by the member independent of their sponsored research.

Influencing transactions involving the Institution for private gain. Conflicts in this area generally result from faculty influence in the purchase of goods or services, or other financial transactions, involving the Institution.

Conflicts arising from significant financial interest in a business entity. When faculty have significant financial interest in a business entity, there is a special obligation to ensure that their Institutional responsibilities do not conflict with, or provide special benefit to, that private business activity(ies). Approval in these situations would normally be (1) based on the proponent's demonstration that the activity significantly benefits the Institution and does not involve an unacceptable risk of mis-allocation of Institutional funds and other resources; and (2) conditioned on technical and financial oversight of the project and any related activities, as well as reimbursement of all costs for use of Institutional resources that primarily benefit private entities. Research projects sponsored by a business entity in which an involved employee has a significant financial interest, or has authority over expenditure of funds, is not acceptable unless and until the issue, upon review, is satisfactorily resolved and an official determination of acceptability is made. The faculty are referred to the detailed policy and procedures, available in the Office of Research regarding this.

Distribution of Effort. There are competing demands on the energies of medical school faculty, including research, teaching, patient care, and service to the institution. The way in which faculty divide their efforts among these functions does not raise ethical concerns unless the agency supporting research is misled in its understanding of the amount of professional effort actually devoted to the research in question. If the agreement contemplates that a member will devote a certain fraction of effort to
Appendix O

sponsored research, a demonstrable relationship between the indicated effort or responsibility and the actual extent of involvement is to be expected.

*Inappropriate Use of Information.* Use for personal financial gain or other unauthorized use of privileged information acquired in connection with the faculty member’s sponsored activities. (The term “privileged information” includes, but is not limited to, medical, personal, or security records of individuals; anticipated material requirement or price actions; possible new sites for a sponsor’s operations; knowledge of forthcoming programs or of selection of contractors or subcontractors in advance of official announcements; and academic principles, ideas, or processes discovered or improved upon as a result of sponsored activity).

*Undue Influence.* Negotiations or influence upon the negotiation of contracts relating to the faculty member’s sponsored research between the medical school and private organizations in which there is a consulting or other significant relationship without disclosure of such negotiation to the Dean/Provost.

*Interference with Student Progress.* Sponsored projects that restrict (1) student publication or communication rights, with respect to research or other work that will be the basis of evaluation of the student, or (2) fulfillment of degree requirements, require review. These restrictions must be reasonably necessary to obtain and maintain protection of intellectual property rights and to prevent the unauthorized publication of student research. Secrecy or confidentiality requirements beyond the scope of a project that will be the basis of evaluation of the student or fulfillment of degree requirements are not acceptable. In addition, involvement of students in conducting or supporting research with the potential to substantially benefit a business entity in which a faculty member has a significant financial interest requires review.

*Findings of a Potential Conflict.* If an actual or potential conflict of interest is found, the institution will certify that actions are being taken, prior to the award of funding, to manage, reduce, or eliminate that interest in accordance with this policy. Each faculty member at the institution has a duty to work closely with the institution to report and help manage situations involving a potential conflict of interest. Collaborators from other institutions must either comply with the EVMS policy, or provide certification that their institutions are in compliance with Federal policies regarding investigator significant financial interest disclosure and that their portion of the project is in compliance with their institutional policies.

*Management of Conflict.* If a disclosure of Significant Financial Interest is made, a strategy for managing, reducing, or eliminating the actual or potential conflict will be adopted, utilizing the Institutional policy and procedures on file. The Investigator and any other co-investigator(s) shall record in writing their mutual agreement on a management strategy. The agreed management strategy will become part of the official record maintained by the Office of Research.

**Consulting for Government Agencies or Other Contractors**

When medical school faculty are engaged in government-sponsored research and also serve as consultants to a federal agency, their conduct is subject to the provisions of the Federal Conflict of Interest Statutes (18 U.S.C. 202-209, as amended). For a copy of these statutes, contact the Office of Research (446-).
The following policies and procedures have been established as a way to deal fairly, expeditiously, and effectively with all allegations or evidence of scientific misconduct and as a mechanism to maintain and promote integrity in the research environment at EVMS. The intent is not to create an atmosphere of oppressive regulation, but to assure careful, confidential, and thorough handling of allegations of misconduct.

It is expected that all authors named on a collaborative study accept full responsibility for their work, including their conduct of research at EVMS and the work they publish. It is the role of the Principal Investigator to ensure that laboratory personnel are familiar with this Scientific Misconduct Guide.

Process for Handling Allegations of Misconduct

1. It is the responsibility of an Investigator’s technician, peers, or others involved in the research community, to bring to the attention of an Investigator’s immediate supervisor documented or well-founded suspicions of possible scientific misconduct. The term “scientific misconduct” as used in this Guide is defined as falsification, fabrication, plagiarism, or other practices that seriously deviate from those that are commonly accepted within the scientific community for proposing, conducting, or reporting research. Misconduct does not include honest error or honest differences in interpretations or judgments of data.

2. The Investigator’s immediate supervisor should then notify the appropriate Department Chair, Director of Research, and the Dean/Provost of the Medical School of the allegation. An immediate inquiry of the allegation shall take place. “Inquiry” as used in this Guide is defined as information gathering and initial fact-finding to determine whether an allegation or apparent instance of misconduct warrants an investigation. During the course of the inquiry, the Chair, Director of Research, and Dean/Provost will meet with the accused Investigator and, separately with the individual making the allegation of scientific misconduct, to determine if, in fact, there is any basis to the allegation which warrants an investigation. Strict confidentiality will be maintained during this process, and the privacy of those who, in good faith, report apparent misconduct and those accused of possible misconduct will be protected. The inquiry must be completed within 60 calendar days of its initiation unless circumstances clearly warrant a longer period. A written report shall be prepared which includes evidence that was reviewed, summaries of relevant interviews, and the conclusions of the inquiry. The individual(s) against whom the allegation was made shall be given a copy of the report of the inquiry. If they comment on that report, their comments may be made part of the record. If the inquiry takes longer than 60 days to complete, the record of the inquiry shall include documentation of the reasons for exceeding the 60-day period.

A written report of the inquiry findings will be securely maintained in the Office of Research for at least three (3) years after the termination of the inquiry, and shall, upon request, be provided to authorized HHS personnel.

3. If the conclusions of the inquiry are that there is no sufficient basis for conducting an investigation as hereinabove defined, the Chair will so notify the Investigator. In addition, the Chair, Director of Research, and Dean/Provost will attempt to determine if there was a malicious or dishonest intent behind the initial allegation of misconduct and, if found, appropriate actions will be taken. If the institution determines that an investigation is not warranted, the reasons for the decision and the findings of the inquiry will be documented in sufficient detail to permit later assessment of the decision, if necessary. Diligent efforts will be undertaken, as appropriate, to restore the reputations of person(s) alleged to have engaged in misconduct when allegations are not confirmed.
4. If the findings of the inquiry indicate that there is sufficient basis for conducting an investigation, the Dean/Provost will officially notify in writing the accused Investigator, appropriate co-investigators, appropriate external agencies, and if PHS research is involved, the Office of Research Integrity (ORI), that certain allegations of misconduct have been made concerning the accused Investigator’s research and that a formal investigation is warranted and is being initiated. This notification will take place on or before the date the investigation begins. The notification to ORI will include the name of the person(s) against whom the allegations have been made, the general nature of the allegations, and the PHS application or grant number(s) involved. The term “investigation” as used herein shall be defined as the formal examination and evaluation of all relevant facts to determine if misconduct has occurred. This investigation will begin within thirty (30) days after completion of the inquiry. During the inquiry and/or the investigation, interim administrative actions may be taken by the Dean/Provost, as appropriate, to protect federal or other research funds and to ensure that the purposes of the federal or other financial assistance are carried out and generally to protect the interests of the institution and the public.

5. The Dean/Provost will establish a five (5) member ad hoc Review Panel composed of four (4) professorial level faculty members from EVMS and one (1) professorial level faculty member from another institution to conduct the investigation. All members of the Review Panel will possess appropriate scientific expertise to assure a sound knowledge base from which to work. The Review Panel is authorized to secure, if necessary, any additional expertise to carry out a thorough and authoritative evaluation of the relevant evidence in the inquiry or the investigation. Precautions should be taken against real or apparent conflicts of interest on the part of those involved in the inquiry or investigation and to ensure that the members of the Review Panel do not have any personal involvement in the work to be investigated. Confidentiality must be maintained throughout the process, and the privacy of those reporting the apparent misconduct and those accused of misconduct must be protected. ORI will be promptly advised of any development during the course of the investigation which discloses facts that may affect current or potential DHHS funding for the individual(s) under investigation or that PHS needs to know to ensure appropriate use of federal funds and otherwise protect the public interest.

6. The Review Panel, during the course of the investigation, will be charged with the responsibility of determining whether or not the allegations of scientific misconduct on the part of the accused Investigator are substantiated. It will perform its investigation by reviewing the data that the Review Panel may request and by investigating the matter with both the accused Investigator and the accuser. The investigation normally will include examination of all documentation, including but not limited to, relevant research data and proposals, publications, correspondence, and memoranda of telephone calls. Whenever possible, interviews should be conducted of all individuals involved, whether in making the allegation or to whom the allegation is made, as well as other individuals who might have information regarding key aspects of the allegation. Complete written summaries of these interviews should be prepared and provided to the interviewed party for comment or revision, and be included as part of the investigation file. During the investigation, the accused Investigator will have the right to be present when oral testimony is received by the Review Panel, the right to cross-examine witnesses, and to present evidence and testimony on his/her own behalf, and the right to receive, review and file written comments regarding all documentation and summaries to be considered by the Review Panel, all of which shall be made a part of the record of the investigation. The findings and conclusions reached by the Review Panel, together with all documentation substantiating such findings, will be reported to the Dean/Provost in writing as soon as possible, consistent with a thorough review process, but not later than 120 days from its initiation, unless extended. The findings of the Review Panel shall also be reported to the accused Investigator with the opportunity afforded to
comment on the allegations and findings. The findings must also be reported to ORI, if PHS research is involved, and the final report must describe the policies and procedures under which the investigation was conducted, how and from whom information was obtained relevant to the investigation, the findings, and the basis for the findings, and include the actual text or an accurate summary of the views of any individual(s) found to have engaged in misconduct, as well as a description of any sanctions taken by the institution.

7. If the Review Panel finds that the allegation of misconduct against the accused Investigator is not confirmed, the Dean/Provost will officially notify in writing the Investigator, appropriate co-investigators, the department chair, the funding agencies, and ORI, if necessary. Diligent efforts will be made to restore fully the reputation of the person(s) alleged to have engaged in misconduct. Additionally, the Dean/Provost will request the Review Panel to investigate the basis for the initial charges. Following the submission of a written report by the Review Panel, appropriate action will be taken against any, and all, accusers whose involvement in the initial charges can be demonstrated to have been malicious or intentionally dishonest. With regard to both the inquiry and the investigation, diligent efforts will be undertaken to protect the positions and reputations of those persons who, in good faith, make an allegation.

8. If the Review Panel finds that the accusation of scientific misconduct against the accused Investigator is substantiated by its investigation, the Dean/Provost will notify in writing the Investigator, the sponsors of the Investigator’s work, and those agencies previously notified, of the Review Panel’s findings. Pending abstracts and papers that resulted from the work under question should be withdrawn. Editors of journals in which previous abstracts and papers relating to work in question will also be notified. The actions of the accused Investigator should be considered a breach of contract with the institution as delineated in the yearly letter of appointment from the President of the EVMS, and the appropriate action will be taken, together with the imposition of any other sanctions as the Review Panel may feel appropriate under the circumstances.

9. The investigation should ordinarily be completed within 120 days of its initiation. This 120 days include conducting the investigation, preparing the report of findings, making the report available for comments by subjects of the investigation, and submitting the report to ORI, if PHS research is involved. A written request for an extension, if PHS research is involved, must be submitted to ORI when it appears that an investigation cannot be completed within 120 days. Accompanying this extension request to ORI, must be an explanation for the delay that includes an interim report on the progress-to-date and an estimate for the date of completion of the report and other necessary steps. Any consideration for an extension must balance the need for a thorough and rigorous examination of the facts versus the interest of the subject(s) of the investigation and the PHS in a timely resolution of the matter. If the request is granted by ORI, the Review Panel must file periodic progress reports as requested by ORI. If satisfactory progress is not made in the Review Panel’s investigation, ORI may undertake an investigation of its own. Records of the investigation will be maintained in a secure manner in the Office of Research for a period of at least three (3) years after the termination of the investigation. The records may be provided to authorized Department of Health and Human Services personnel upon request.

10. If an inquiry or a later investigation involving PHS research is planned to be terminated for any reason without completing all relevant requirements as set forth above, a report of such planned termination, including a description of the reasons for such termination, shall be made to ORI which will then decide whether further investigation should be undertaken.
11. Within fifteen (15) days following receipt of the Review Panel’s complete report by the accused Investigator, a written appeal may be filed by the accused Investigator to the Review Panel’s final decision and report. The appeal is to be filed with the Dean Provost and should be restricted and limited to the body of evidence already presented. The grounds for appeal should be limited to failure to follow appropriate procedures in the inquiry or in the investigation or on the basis of arbitrary and capricious decision making by the Review Panel. Newly discovered evidence not available to the accused Investigator during the course of the inquiry and the investigation may warrant grounds for the initiation of a new investigation of the allegations of misconduct.

12. A Vice President of EVMS, who has not been involved in any way in the inquiry or investigation or the work under investigation, will hear and decide the appeal. After this appeal is concluded, a final review shall be made by the President of EVMS, if requested by the accused Investigator, within ten (10) days after receipt of the decision or appeal. The decision of this review is final and the President shall implement all decisions made upon his final review.

Office of Research Integrity (ORI)

While the primary responsibility for conducting inquiries and investigations of all allegations of scientific misconduct lies with the institution, the U.S. Department of Health and Human Services (HHS) reserves the right, where such allegations involve PHS research, to perform its own investigation any time prior to, during, or following the institution’s inquiry and investigation, and to monitor and be involved in the institution’s inquiry and investigation of such allegations through ORI.

In addition to sanctions EVMS may impose, the HHS also may pose sanctions of its own upon investigators or the institution, if such action is deemed appropriate.

The institution is also responsible for notifying ORI if it ascertains at any stage of the inquiry or investigation, that any of the following exist:

1. There is an immediate health hazard involved;
2. There is an immediate need to protect federal funds or equipment;
3. There is an immediate need to protect the interest of the person(s) making the allegation or of the individual(s) who is the subject of the allegation as well as his/her co-investigators and associates if any;
4. It is probable that the alleged incident is going to be reported publicly; and
5. There is reasonable indication of possible criminal violation. In that instance, the institution must inform ORI within 24 hours of obtaining that information. ORI will immediately notify the Office of the Inspector General.
PROCESSING OF ALLEGATIONS OF SCIENTIFIC MISCONDUCT

Inquiry begins within 60 days of initiation

Suspected Misconduct

Referred to PI's immediate supervisor

Immediate Supervisor notifies Dept. Chair, Dir. of Research and EVMS Dean and inquiry phase begins

Chair, Dir. of Research and Dean meet with accused investigator

Possible basis to allegation

Dean notifies Investigator, co-investigators, agencies, and ORI

Dean establishes a five member panel to conduct investigation

Review Panel decides if misconduct and reports in writing to Dean

Scientific Misconduct

Dean notifies Investigator, agencies, co-investigators, ORI, sponsors, editors

Misconduct considered a breach of contract with MCHR

Appropriate action will be taken

Investigator may appeal to MCHR Vice-President

Final decision made by MCHR President

No Scientific Misconduct

Dean notifies Investigator, agencies, co-investigators, ORI, sponsors, editors

Effort made to restore reputation of Investigator

Review Panel investigates the basis of initial charges

No malicious intent

Malicious Intent

Chair, Dir. of Research and Dean determine if malicious intent

Chair notifies Investigator

Dean establishes a five member panel to conduct investigation

Review Panel reports within 120 days from initiation

Appendix O
POLICY ON CONSULTING

Definition

Consultation is defined as services performed for organizations or individuals for which remuneration is received in addition to a faculty member's institutional salary. Included are professional services rendered for business, industry, private individuals, government, other academic institutions, or foundations. Time committed to the EVMS HS program is not considered to be consultation services.

Applicability

This policy shall be applicable to all full-time salaried faculty members of EVMS.

Introduction

In general, reasonable consultation activities are mutually advantageous to the institution and the faculty member, since they encourage the faculty to remain professionally competent and up-to-date. However, the advantages to the institution and faculty accrue only to the extent that time devoted to consultation activities does not impinge upon the ability of the faculty member to successfully carry out his or her institutional and departmental responsibilities, and when the consultation activity does not involve any potential conflict of interest with such responsibilities.

Classification of Consultation Activities

Consultation may be classified into several types of activities, each of which should be considered individually.

1. Faculty Related Consultation Activities:
   a. The presentation of lectures, seminars, research reviews, etc. to groups associated with EVMS is considered to be an integral part of the normal responsibility of the faculty. Honoraria, if any, associated with such activities shall be transferred to the appropriate Chair’s Fund, less any applicable travel reimbursement or, in the case of members of EVMS HS, in accordance with EVMS HS by-laws.
   b. The presentation of lectures, seminars, research reviews, etc., to groups at other institutions is an appropriate faculty-related activity. Honoraria associated with such presentations shall be retained by the faculty member.
   c. The participation of faculty members on research review panels, study sections, regulatory boards, etc., for governments or foundations (e.g., the American Cancer Society), is also considered an appropriate faculty-related activity. Honoraria associated with such participation shall be retained by the faculty member.

2. Private Consultation Activities:
   a. Other consultation services provided by faculty members to businesses, individuals, other institutions, government agencies, etc., on an hourly, per diem, contractual or other fee basis are considered to be private consultation activities. It will ordinarily be deemed appropriate for faculty members to devote not more than twenty (20) days per year to these activities with approval of the faculty member's Department Chair. Additional time
devoted to private consulting activities may be appropriate in unusual circumstances but only with the prior approval of the Department Chair and the Dean/Provost. Fees received in connection with private consulting activities will ordinarily be retained by the faculty member. Department Chairs shall maintain an accurate record of the time that each faculty member of the department devotes to private consultation activities.

b. Eastern Virginia Medical School assumes no responsibility for private consulting services rendered by faculty members. The faculty member must make it clear to the organization or individual to whom such services are provided that the services are private and not related to EVMS.

c. Use of EVMS Resources:

i. Faculty members may not commit institutional materials or supplies, facilities, library resources, or personnel for use in private consulting activities.

ii. Permission to use institutional facilities or other resources may be granted to a faculty member by the Dean/Provost, but only under the following conditions: (1) evidence that the work of such faculty member will make a significant contribution to the educational effort of the institution, (2) the initial period of such work will not exceed one year, and (3) the renewal period of such work will not exceed two years.

iii. In instances where a faculty member is granted permission to use facilities or other resources of EVMS in order to carry out consulting activities, the appropriate disposition of applicable fees shall be decided by the Department Chair and Dean/Provost after discussions with the faculty member.

GUIDELINES FOR INTERACTION BETWEEN THE FACULTY, STAFF AND TRAINEES OF EASTERN VIRGINIA MEDICAL SCHOOL (EVMS) AND PHARMACEUTICAL AND MEDICAL EQUIPMENT INDUSTRIES

1) Provision of Compensation or Gifts from Industry to EVMS Faculty, Staff and Trainees

a) Personal gifts of minimal value (defined as less than $100) that are directly related to professional responsibilities (e.g., pens, notepads, etc.) are permitted but discouraged. If accepted, individual gifts that exceed $25 should be reported to the Chair and must conform with State and Federal Tax law. The use of any vendor’s material with the vendor’s name or logo is strongly discouraged in public or patient care areas.

b) Any meals, desserts, snacks, etc. that are provided by an industry representative must be in the context of an organized, scheduled educational and/or scientific activity (e.g., grand rounds, journal club, etc.) The meals or receptions should be modest and be conducive to discussion among faculty and attendees, and the amount of time at the meals or receptions should be clearly subordinate to the amount of time spent at the educational activities of the meeting. All meals, desserts, snacks, etc. that are provided by industry representatives must be approved in advance by the appropriate program director and/or division director, and with the approval of the department chair. Although not required, it is recommended that industry representatives provide support for such meals, desserts, snacks, etc. directly to the division/department in the form of an unrestricted educational grant to then be spent by the department on food for educational activities at their discretion. Appropriate recognition of the industry representative’s contribution should be given by the recipient.
c) An EVMS faculty member may accept only fair market compensation for specific, legitimate services provided by him or her to pharmaceutical companies. Payment must be commensurate with time and effort. The terms of the arrangements, services provided and compensation must be set forth in writing. Faculty should also refer to the consultation policy in the Faculty Handbook.

d) EVMS faculty may not accept monetary compensation for listening to a sales pitch (e.g., detailing) by an industry representative.

e) EVMS faculty who are simply attending a continuing medical education (CME) or other instructional activity and are not speaking or otherwise actively participating or presenting at the meeting, should not accept direct compensation from companies either for attending or defraying costs related to attending the meeting.

f) EVMS Conflict of Interest policies cover the management of business matters, academic matters and sponsored research. Please refer to the following policies.
http://www.evms.edu/research/office/docs/conflict-of-interest.pdf

g) All educational activities related to graduate medical education programs must be in compliance with the Accreditation Council for Graduate Medical Education Institutional Requirements http://www.acgme.org/acWebsite/irc/irc_IRCpr07012007.pdf and the EVMS Graduate Medical Education Council’s policy on Relationships with Entrepreneurial Entities.

h) EVMS faculty may not receive any form of compensation for changing a patient’s prescription

i) Industry representatives are generally discouraged in patient care areas. In situations where industry presence is appropriate in pursuit of patient care (i.e. some equipment by its very nature requires the presence of the industry representative), institutional guidelines should apply (i.e. hospital and/or EVMS).

2) Provision of Scholarships and Other Funds to EVMS Trainees

EVMS faculty should ensure that support of EVMS clinical trainees by the pharmaceutical and equipment industries through funding mechanisms such as scholarships, reimbursement of travel expenses, or other non-research funding in support of scholarship or training are free of any actual or perceived conflict of interest. Industry funding of trainees should comply with all of the following:

a) The trainee is selected by their Eastern Virginia Medical School department or by a recognized regional, national or international selection process.

b) The department, section or program has determined that the conference or training has educational merit.

c) The recipient of the funds is not subject to any implicit or explicit quid pro quo (i.e., “no strings are attached”)

This guideline is not intended to preclude industry support for EVMS faculty to travel to evaluate major clinical equipment for prospective acquisition by the school or by its clinical partners.
3) Provision of Free Drug, Equipment or Supply Samples to Faculty
   a) EVMS faculty may accept free drug, equipment or supply samples from industry solely for distribution to their patients or for research applications.
   b) Since distribution of non-formulary drugs or supplies to patients may encourage use of costlier medications, EVMS faculty should be judicious in distributing medications.
   c) Free samples may never be sold.
   d) Samples should be used by EVMS faculty within a bona-fide doctor-patient relationship or research project.

4) Support of Industry Specific Treatment Modalities, Medical/Surgical Devices and/or Equipment, and Listing on Industry Websites
   a) EVMS faculty may not receive any form of compensation to promote specific treatment modalities, medical/surgical devices and/or equipment unless full disclosure is provided.
   b) Any agreement with an industry to promote and/or support specific treatment modalities or utilize specific medical/surgical devices and/or equipment must be approved in advance by the appropriate division director, department chair and institutional official. Agreements must not release protected health information and must comply with governmental privacy regulations.
   c) The agreement cannot be an exclusive one and must allow the prescription/use of comparable treatment modalities, medical/surgical devices and/or equipment, etc.
   d) The agreement cannot preclude the faculty/organization from participation in similar clinical studies of any competitive product or technique.
   e) The faculty/organization must disclose any financial relationships with industry in the course of any direct or indirect contact with the patient for the specific treatment modality, medical/surgical device and/or equipment, and/or putting of their titles on an industry website.

5) Industry Support for Education Events on the EVMS Campus

EVMS faculty should be aware of the Standards for Commercial Support established by the Accreditation Council for Continuing Medical Education that apply to any EVMS educational program providing CME credit to attendees. A complete description of the Standards of the ACCME to ensure independence in CME activities is available at [http://www.accme.org/dir_docs/doc_upload/68b2902a-fb73-44d1-8725-80a1504e520c_uploaddocument.pdf](http://www.accme.org/dir_docs/doc_upload/68b2902a-fb73-44d1-8725-80a1504e520c_uploaddocument.pdf) The EVMS policies for CME are available on the intranet at [http://www.evms.edu/cme/policy/index.html](http://www.evms.edu/cme/policy/index.html)

Other educational events supported by industry on the EVMS campus should comply with the following provisions:

   a) Personal gifts of minimal value (defined as less than $100) that are directly related to professional responsibilities (e.g., pens, notepads, etc.) are permitted but discouraged. If accepted, individual gifts that exceed $25 should be reported to the Chair and must conform with State and Federal
Appendix O

Tax law. The use of any vendor’s material with the vendor’s name or logo is strongly discouraged in public or patient care areas.

b) Funds to pay for the specific educational activity are provided to the department, program, or section and not to an individual faculty member.

c) Programs should be directed by appropriate EVMS personnel, not sponsored and directed by industry personnel.

6) Guidelines for Delivering Industry-Sponsored Lectures or Participating in Conferences and Meetings of Faculty off the EVMS Campus

Clinical meetings and scientific meetings sponsored by professional societies frequently derive a portion of their support from industry. Grants for meetings and conferences that originate from the company’s marketing division may be particularly problematic. Industry sponsorship generally takes one of two general forms and different standards apply in each case.

a) First, industry may partially support meetings run by professional societies. EVMS faculty are expected to participate in meetings of professional societies as part of their CME and professional obligations. Nonetheless, faculty should be aware of the potential influence of industry on these meetings and attentive to the guidelines set forth below in evaluating whether and how to attend or participate in these meetings.

b) A second type of meeting is fully sponsored and run by industry. The following guidelines apply in that case. These guidelines apply to all lectures, meetings, and related publications sponsored directly by industry or by intermediate educational companies subsidized by industry.

EVMS faculty should actively participate (e.g., by giving a lecture, organizing the meeting) in such meetings or lectures only if:

i) Financial support by industry is fully disclosed at the meeting by the sponsor;

ii) The meeting or lecture’s content presented by the EVMS faculty, including slides and written materials, are reviewed and approved by that faculty member;

iii) The lecture provides a balanced assessment of therapeutic options promoting objective scientific and educational activities and discourse;

iv) The EVMS faculty is not required by the company sponsor to accept advice or services concerning teachers, authors, or other education matters including content as a condition of the sponsor’s contribution of funds or services;

v) The EVMS faculty receives compensation only for expenses and the services provided and the compensation is reasonable;

vi) The lecturer explicitly describes all his or her related relevant financial interests (past, existing, or planned) to the audience if disclaimers are not otherwise provided;

vii) The lecturer makes clear to the audience that the content of the lecture reflects the view of the lecturer and not Eastern Virginia Medical School; and
viii) EVMS faculty should not facilitate the participation of EVMS trainees in industry-sponsored events that fail to comply with these standards.

7) Disclosure of Consulting Relationships with Industry

a) The EVMS Research Office outlines the policy on faculty consulting and disclosure. Please refer to that policy at http://www.evms.edu/research/office/docs/interests-disclosure.pdf.

Approved by the EVMS Board of Visitors
Nov. 13, 2007
Proposed Revisions: December, 2008
Revision approved by EVMS Board of Visitors 2/10/09

FACULTY RECORDS

The EVMS Faculty Records Administrator has primary responsibility for maintaining the security and confidentiality of all Faculty records related to appointment and promotion. Information from these records may be obtained upon signed request by one of the following: President, Dean/Provost, Associate Dean for Educational Affairs, Associate Dean for Health Professions, or Departmental Chairs for faculty in their respective departments and programs. Such information may also be furnished to the Appointments and Promotions Committee for their review of a faculty member's nomination for appointment and promotion.

FACULTY GRIEVANCE POLICY

I. General

A. Purpose

The purpose of this policy is to supplement the administrative and academic procedures of EVMS and to provide a grievance procedure that will ensure academic due process and fair treatment for faculty employed by EVMS.

B. Application

Faculty with teaching and research contracts may use the procedure described in this policy.

C. Definition of Grievance

As used in this policy, a grievance is an allegation by a faculty member that he or she has suffered direct injury as a result of the following:

1. An action by an administrative officer of the medical school which deviated materially from the existing policies or procedures of the school; or
2. An action by an administrative officer of the school which was arbitrary, capricious, unreasonable, or contrary to the facts.

"Action", as used in this policy, includes the failure or refusal of an administrative officer of the medical school to take an action. "Administrative officer", as used in this policy, refers to any individual exercising administrative authority, including, but not limited to, a Department Chair, a program director, or an institute director.

D. Remedies

1. Except as otherwise provided herein, a faculty member who chooses to grieve under this policy may seek any remedy appropriate to the grievance that the college has the authority to provide.

2. The remedy available to a faculty member who chooses to grieve a personnel action, i.e., a non-reappointment, promotion, evaluation, salary increment, or a decision not to award tenure, is the initiation of a proper reconsideration of that decision through the applicable procedures of the school.

E. Limitations Upon the Application of the Grievance Policy

1. A faculty member must exhaust existing administrative or academic procedures for review of an action about which the faculty member chooses to grieve prior to filing a grievance under this policy.

F. Composition and Term of Service

1. The Grievance Committee shall consist of 5 members of the Faculty Senate appointed by the President of the Senate.

2. A new Grievance Committee should be formed for each grievance.

3. All members of the Grievance Committee will continue to serve until the completion of grievance process.

II. Informal Resolution of a Grievance

A. A faculty member who chooses to grieve under this policy shall first discuss the matter with the administrative officer whose decision or failure to decide is the basis for the grievance.

B. If, as a result of the faculty member's discussion with the administrative officer, the matter is not resolved to the faculty member's satisfaction, the faculty member shall discuss the matter with the immediate supervisor of the administrative officer whose action is the basis of the grievance. The faculty member shall not discuss the matter with the immediate supervisor of the administrative officer if that immediate supervisor is the President. In the event that the grievant is a Chair, then he will proceed directly to the Grievance Committee should his grievance not be adequately resolved with the Dean/Provost.
C. If, as a result of these discussions, the matter is not resolved to the faculty member's satisfaction, the faculty member may proceed to formal resolution of the grievance.

III. Formal Resolution of a Grievance

A. Written Statement of Grievance

1. A faculty member shall initiate formal resolution of a grievance by filing a written statement of grievance with the Chair of the Faculty Grievance Committee.

2. The written statement filed by the faculty member shall contain, as a minimum, the following:

   a. description of the action about which the faculty member is grieving;

   b. the grounds upon which the faculty member is grieving the action including an identification of the applicable policy or procedures, if any;

   c. a description of the event leading to the action about which the faculty member is grieving;

   d. a statement of the injury suffered by the faculty member and the date thereof; and

   e. a statement of the remedy sought by the faculty member.

3. The written statement should be no longer than 1,000 words.

4. The faculty member must attach to the written statement copies of relevant documentation. Failure to provide full documentation may result in rejection or inappropriate evaluation of the grievance.

5. Except in cases involving personnel actions, the written statement of grievance shall be filed with the Chair of the Faculty Grievance Committee within ninety (90) calendar days of the date that the faculty member suffers the alleged injury. In those exceptional cases when the faculty member can demonstrate that he or she did not know, or have reason to know, of the grievance within ninety (90) days, the Grievance Committee may extend this period to one hundred eighty (180) calendar days. If the faculty member's grievance concerns a series or pattern of injurious decisions, the period shall run from the date of the latest alleged injury; however, the Committee may review all of the decisions in the alleged pattern and the Committee may make recommendations concerning all of the decisions in the alleged pattern if it finds that such a pattern occurred within the number of days specified herein.

6. In a case involving a personnel action, i.e., a non-reappointment, promotion, evaluation, salary increment, or a decision not to award tenure, the written statement of grievance shall be filed with the Chair of the Faculty Grievance Committee within thirty (30) calendar days of the date that the faculty member is provided written notice of action taken after administrative and academic review procedures have been exhausted.

B. Procedures for Review of a Faculty Grievance
1. Within thirty (30) calendar days of the Committee's receipt of a written statement of a faculty grievance, the Committee shall determine whether the written statement was filed in a timely manner, is adequate in that it meets the requirements of the Faculty Grievance Policy, and describes a matter which the Committee has the authority to review under the Faculty Grievance Policy.

   a. If the Committee should decide that the written statement of grievance is inadequate in that it does not meet the requirements of Section III (A) (2) of the Faculty Grievance Policy, the grievant shall be advised of the deficiencies in that statement and shall have ten (10) working days within which to forward an adequate statement to the Chair. If the faculty member does file a statement within the ten (10) working days, the Committee shall have fourteen (14) calendar days from the Chair's receipt of the adequate statement within which to determine whether the grievance was filed in a timely manner and whether the Committee has authority to review the matter described in the statement. The timeliness of the filing of the grievance shall be determined by the date the initial statement was filed, although the Committee may have determined it to be inadequate, so long as the Committee has not closed the matter by deciding not to review the grievance.

   b. If the Committee should decide that the written grievance was not filed in a timely manner or that the matter described in the grievance is not within the authority of the Committee to review, the Committee shall decide not to review the grievance. The faculty member shall be notified of the Committee's decision and the reasons therefore.

   c. If the Committee should decide that the written statement was filed in a timely manner, is adequate, and describes a matter over which the Committee has authority, the grievant and the administrative officer against whom the grievance was filed shall be notified that the Committee will review the grievance, and the administrative officer shall be provided a copy of the written statement filed by the grievant.

2. Within twenty-one (21) calendar days of receipt of the Committee's decision that it will review a grievance, the administrative officer against whom the grievance was filed shall provide to the Chair and to the grievant a written response to the written statement of grievance. The response should be no more than 1,000 words in length and should include, as attachments, copies of relevant documentation. Other parties of whom pertinent information is requested shall respond in writing within twenty-one (21) calendar days to the Chair.

3. A hearing shall be held no less than fourteen (14) working days and no more than forty-five (45) working days after the Chairs’ receipt of the administrator's response.

C. At the Hearing

1. The hearing shall be attended by (a) the Faculty Grievance Committee, excluding any that are involved in the grievance,* (b) the grievant and/or his designated representative, and (c) the administrative official against whom the grievance has been filed.
2. The administrative official and the faculty member in the case before the Committee shall present evidence by calling and questioning witnesses by introducing the documentary evidence, or otherwise. Each party shall have the right to ask questions of witnesses called by the other party or by the Committee.

3. The burden of proving the allegations of the grievance shall be upon the grievant.

*NOTE: In the event a majority of the Committee is not available to attend the hearing, the President of the Faculty Senate will appoint alternates to serve in the place of absent members, to comprise at least a majority.

4. The hearing shall be closed. The faculty member may request that the faculty and administrative staff of the school be invited to attend the hearing. If the faculty member so requests, the hearing shall be open to as many members of the faculty and administrative staff as can be accommodated in the hearing room. The site of the hearing will be determined by the Committee.

5. In conducting the hearing, the Committee shall admit all evidence determined by it to be relevant and not cumulative and shall accord such evidence the merit it deserves. The Committee may limit the number of witnesses to prevent repetitive or cumulative testimony and may grant adjournments as it deems necessary.

6. The Committee may determine, on its own motion, the necessity of calling witnesses additional to those called by the parties and of examining documentary evidence additional to that presented by the parties.

7. If the faculty member in the case retains a licensed attorney as an advisor, the Medical School shall provide a licensed attorney as an advisor to the administrator. Neither attorney may participate in the proceedings except as an advisor. In addition the Medical School shall provide independent counsel to the Grievance Committee.

8. A transcript or recording shall be made of the hearing and made available to the grievant and the Committee in a timely fashion.

D. After the Hearing

1. At the close of the presentation of evidence, the Committee shall adjourn the hearing and shall reconvene with only members of the Committee present to make its findings and to arrive at its conclusions and recommendations for dismissal or remedy of the grievance.

2. Within thirty (30) calendar days of the close of the hearing, the Committee shall create a report which shall include the following:

   a. Copies of statements and attached documentation filed by the parties in the matter before the Committee;

   b. The names of the parties;

   c. The names of witnesses appearing before the Committee;
d. The findings and conclusions of the Committee; and

e. The recommendations of the Committee and the reasons therefore.

3. The report shall be certified as correct by each Committee member who participated in the decision.

4. The Chair of the Grievance Committee shall transit, the report and recommendations of the Grievance Committee to the President of the College.

IV. Decision by the President of the College

A. Upon the conclusion of the applicable procedures of the Grievance Committee and upon the President's receipt of the Committee's report and recommendation issued as described therein, the President may decide to accept, alter, or reject the recommendation of the Committee as the President sees fit.

B. Before deciding whether to accept, alter, or reject the recommendation of the Committee, the President may request and consider written or oral statements from the parties to the grievance or their designated representatives. Each party must be provided a copy of the written statement filed by the other party and each party must be provided the opportunity to be present when an oral statement is made by the other party. The President shall not discuss the matter with either party prior to making a decision except provided herein.

C. If the President decides to alter or reject the recommendation of the Committee, the President must state in writing the reasons for that decision.

D. The President must provide notice to the grievant and to the Grievance Committee of the President’s decision and, if required, the reasons therefore, within thirty (30) calendar days of the President’s receipt of the Committee's recommendation and report. If the President fails to forward notice to the grievant and to the Committee within thirty (30) calendar days, the President shall be deemed to have accepted the Committee's recommendation. In the event of illness or prolonged absence of the President, additional time may be provided at the discretion of the Grievance Committee.

E. The President shall cause the implementation of any remedy provided to the grievant as a result of the President's decision.

ANTI-HARASSMENT POLICY AND PROCEDURES

Policy

It is the policy of the Eastern Virginia Medical School to prohibit all forms of harassment on the basis of race, color, national origin, sex, age, religion, or disability. Harassment in any form will not be tolerated. One aspect of this policy that may require emphasis is the prohibition against sexual harassment, which is considered to be a form of sex discrimination. Sexual harassment does not refer to occasional compliments of a socially acceptable nature. It refers to behavior that is not welcome, that is personally offensive, or that interferes with work effectiveness.
Relationships involving sexual harassment have no place at EVMS and are prohibited. Harassment and intimidation, whether sexual or otherwise, of EVMS students and employees by anyone, including any supervisor, co-worker, vendor, or patient, is strictly prohibited.

The policies and procedures set forth herein are intended to provide an avenue of redress for individuals who feel that they have been subjected to harassment. These policies and procedures also prohibit retaliation against individuals making a complaint or supplying information concerning a complaint about harassment.

**Definition**

Sexual harassment can take a variety of forms, ranging from subtle pressure for sexual activity to certain types of physical assault. Specific examples of the kinds of conduct that may constitute sexual harassment include the following: sexual advances or propositions; sexual flirtations or suggestive comments; sexually explicit or offensive jokes; sexually degrading words used to describe an individual; graphic or verbal remarks about gender-specific traits; foul or obscene language or gestures; displays of pornographic materials; and unnecessary physical contact of a sexual nature, such as patting, pinching or brushing against another's body. Sexual harassment can occur between members of the same sex as well as members of the opposite sex.

Conduct of the type described above is prohibited when:

1. Submission to such conduct is made either directly or indirectly as a term or condition of an individual's education, training, or employment (for example, employment status, promotion, training, pay levels, performance reviews, work and shift assignments, etc.);

2. Submission to or rejection of such conduct is used as a basis for making employment decisions; or

3. The conduct has the purpose or effect of substantially interfering with a person's work performance or creating an intimidating, hostile or offensive work environment.

**Complaint Procedure**

Employees who believe they have experienced or witnessed any form of discriminatory harassment, sexual or otherwise, should bring the matter to the immediate attention of the Director of Human Resources who is located at 358 Mowbray Arch, Suite 101, telephone number 446-6043, or the Associate Director of Human Resources. Following receipt of a complaint, it will be promptly investigated in as confidential a manner as possible, and appropriate corrective action to remedy the situation will be taken, as warranted.

All investigation findings and mediation efforts of the Director of Human Resources or his delegate shall be kept as confidential as practicable.

**False Accusations**

False accusations of harassment can have as great an impact on the accused as actual harassment can have on the complainant. The procedures set forth in this policy are therefore applicable to protect the rights of those who are falsely accused, to the extent possible. Therefore, the accused will have the right to complain and pursue a resolution in order to redress what he or she believes to be a false accusation of harassment.
Non-Retaliation

Any retaliation or threat of retaliation against an individual for presenting a complaint of harassment or testifying as a witness to the alleged harassment is strictly prohibited and will be treated as a separate incident, to be handled in the same manner and subject to the same procedures as the complaint itself. In other words, no employee will suffer any adverse employment action or be subjected to retaliation for complaining in good faith about harassment or participating in an investigation.

See also Human Resources Policy 4.52

DISRUPTIVE BEHAVIOR POLICY

Ensuring workplace safety is of vital importance. All members of the Eastern Virginia Medical School community have an investment in fostering productive working relationships. Disruptive behavior will not be condoned by any faculty member or administrator.

Disruptive behavior may include verbal threats, harassment, nonverbal inferences which are viewed as intimidating, stalking, and other activity which interferes with the safe and effective operation of EVMS. Faculty members and administrators who engage in disruptive behavior will be sanctioned under the appropriate standards of conduct.

CONFIDENTIALITY OF OCCUPATIONAL HEALTH MEDICAL RECORDS

It is the policy of Eastern Virginia Medical School (E.V.M.S.) to use information obtained in interactions with the Employee Occupational Health staff for medical purposes only. Medical records are the property of E.V.M.S. and information contained in them will be released after specific consent of the employee or student or as required by statute.

Procedure:

1. All information obtained from post-offer medical examinations and inquiries will be collected and maintained on separate forms, in separate medical files, and will be treated as confidential medical records.
2. Persons having access to these medical records are limited to: the Employee Occupational Health Medical Director, the Employee Occupational Health staff or contract physician, and the Occupational Health nursing staff.
3. All medical information will be kept confidential, with the following exceptions:

   A. Supervisors and managers will be informed about necessary restrictions on the work or duties of an employee or student and necessary accommodations.
   B. First aid and safety personnel may be informed, when appropriate, if the disability might require emergency treatment or if any specific procedures are needed in the case of a fire or other evacuations.
   C. Government officials investigating compliance with the Americans with Disability Act (ADA) and other federal and state laws prohibiting discrimination on the basis of disability or handicap should be provided relevant information on request. Other federal laws and regulations, for example the Occupational Safety Administration (OSHA), also may require disclosure of relevant medical information.
   D. Other relevant information may be provided to state workers’ compensation offices, in accordance with state workers’ compensation laws.
E. Relevant information may be provided to accrediting organizations, including but not limited to, the Association for Assessment and Accreditation of Laboratory Animal Care (AAALAC).

COMMUNICATIONS WITH THE BOARD OF VISITORS

1. It is the policy of the Board of Visitors that there shall be useful exchange of information between the Board and the various constituencies served by the school. The purpose of this policy is to enable the Board to make informed judgments in taking actions that affect the governance of the school. To that end, the President, as chief executive officer, is charged with the responsibility of maintaining communication between the Board and the various school constituencies, including faculty, staff, students, alumni, and members of the communities served by the school, as appropriate.

2. The President is expected to inform the Board in an accurate and timely fashion of the views of various school constituencies and to apprise and educate the Board concerning significant issues, opportunities, achievements, and concerns that have or will confront the school and those constituencies. To aid in that process, the President is encouraged to invite other members of the school community to attend and participate in meetings of the Board or its committees. The President, in choosing representatives of constituencies to participate in meetings, may select representatives from existing support organizations now serving the school, such as: Faculty Senate, Student Senate, Alumni Association, and school-affiliated foundations. In addition, when relevant and appropriate, the President may, from time to time, arrange for other informed faculty, staff, students, alumni, benefactors, friends, and interested parties to present views to the Board or its committees.

3. Members of any school constituency who desire to make their views known to the Board on a particular issue should request the President to present those views to the Board, or request the President to provide them with the opportunity to do so in person at a future meeting of the Board or one of its committees. It is within the discretion of the President to determine the most appropriate way for those views to be communicated to the Board.

4. In order to ensure that the Board is conversant with the wide variety of issues, opportunities, achievements, and concerns that exist in the school community, the President is encouraged to provide the Board with broadest possible exposure to school life. In addition to the foregoing, this may be accomplished by presentations by members of the school community at the meetings of the Board or its committees, and on-site meetings or informational sessions held in a variety of school facilities and locations, both on and off the main campus.

GUIDELINES FOR SPACE MANAGEMENT

Summary

Space is allocated to institutional functions based on established guidelines, current needs of the school, and detailed evaluation of specific program and operational requests. All requests for, or modification of, space will be made on the appropriate form and submitted to the Space Committee of the building in which new space or change in space is requested.
Appendix O

Procedure for Requesting Space

A. A Request for Space (Exhibit 1) will be completed and forwarded to the Chair of the Space Committee of the building in which space is requested. The departmental chair, as well as other appropriate individuals affected by the space request, will be invited to meet with the Committee. Any person affected by the recommendation of the Space Committee has a right to make an appeal. All appeals must be received within ten (10) working days of the date of notification of the recommendation. The Space Committee will then review any additional pertinent information and deny or uphold the appeal. If the request is denied by the Space Committee, an appeal may be sent to the Dean/Provost within five (5) working days of the final decision of the Space Committee. The decision of the Dean/Provost is final.

B. New or additional space needs cited in new grant applications or in proposed contracts, including faculty contracts, will require review by the Space Committee prior to submission.

C. Evaluation of existing allocation of space will be conducted by the Space Committees as needed and according to the stated guidelines. Appropriate recommendations will then be made to the Dean for review and approval or disapproval.

D. When large areas of space are requested, a time schedule with projected dates of faculty and staff hiring, phases of the program, and other relevant information will be attached to the request.

E. Requests for space will indicate projected starting and termination dates. In general, laboratory space should not be assigned for a period longer than 5 years, with renewal of space assignments being related to research productivity.

F. Storage areas, instrument laboratories, multiple use laboratories, or general service laboratories should be requested by a single department even if used by several groups.

G. Allocation of laboratory space will be contingent upon the actual time that the laboratory is used by appropriate personnel.

H. All proposed renovations of space will be referred to the Space Committees for review and approval. All such requests will include a written justification and the signed approval of the departmental chair.

Faculty Assignment Priorities

A. Those full-time faculty with externally funded research.
B. New full-time faculty for a space of up to three (3) years.
C. Full-time faculty with funded and/or revenue generating service projects.
D. Full-time faculty with special equipment or project needs.

Space Standards

Allocation of space will be based on the following guidelines:

Chair’s Office: 140 SF
Faculty Office: 120 SF
Graduate Student Area: 60 SF per student
Clerical Workstations: 80 SF per person.
Other Non-faculty Office: 100 SF
Exam Rooms: 120 SF
Basic Lab Module: 700 SF
Support “Core” Space: (if department’s space is greater than 5,000 SF)
  Environmental Rooms (3)
  Special Labs (2 at 300 NSF)
  Darkroom (90 NSF)
  Glasswash (150 NSF)
  Equipment Storage (16% of lab space)
  Conference Rooms:
    Basic Sciences: 400 NSF
Clinical Areas: Depends on existing space and proximity to group rooms. Department should have 7-8 FTE faculty before assigning a conference room for the department.

Retention of Laboratory Space

A. At approximately 3-5 years intervals, a review will be conducted by the Space Committee of each investigator’s use of space. The individual researcher will demonstrate a continued need for assigned space.

B. Consideration will be extended to researchers who are between granting periods upon demonstration of their continuing need.

C. To facilitate space planning, Departmental Chairs will annually report on the utilization of all assigned space.

Office Space

Office space will be assigned in the following order of priority:

  Full-time faculty (with rank of Assistant Professor and above) with need for primary office
  Other full-time faculty with need for primary office.
  Full-time postgraduate (postdoctoral fellows).
  Full-time secretarial and administrative personnel.
  Full-time support personnel.
  Full-time faculty with need for secondary offices and postgraduates.
  Full-time graduate students.

Restrictions Regarding Use of Space

A. Laboratory and office space will not be used for storage of equipment or supplies.

B. Dishwashing rooms will include the addition of other compatible functions.

C. Scheduling and utilization of conference rooms and classrooms will be reviewed periodically by the Space Committee.

D. Post-doctoral staff will not be allocated a separate laboratory.
E. Technicians may be assigned office space upon approval of the Space Committee.

F. Faculty researchers will be assigned only one laboratory; requests for exceptions will be reviewed by the Space Committee on a case-by-case basis.

G. Access to walk-in coolers will be available to all researchers on a school-wide basis.

**Reallocation of Space**

Reallocation of space within a department or office does not require approval of the Space Committee. However, this information will be forwarded to the Space Committee.
### REQUEST FOR SPACE
Exhibit 1

<table>
<thead>
<tr>
<th>Department:</th>
<th>Date: __________________________</th>
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<tbody>
<tr>
<td>New Space</td>
<td>Additional Space</td>
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</table>

<table>
<thead>
<tr>
<th>Type of Space Requested</th>
<th>Approximate Sq. Ft.</th>
<th>Location (Building)</th>
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</thead>
<tbody>
<tr>
<td>Office</td>
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<tr>
<td>Laboratory</td>
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<td>Clinical</td>
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<tr>
<td>Storage</td>
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<tr>
<td>Other (Describe):</td>
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</table>

<table>
<thead>
<tr>
<th>Projected Starting Date:</th>
<th>Projected Termination Date:</th>
</tr>
</thead>
</table>

<table>
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<tr>
<th>Space to be used by:</th>
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<tbody>
<tr>
<td>Name</td>
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</table>

Source of Financial Support (e.g. grants, departmental or program sources, contracts, etc.):  
______________________________________________________________________________________
______________________________________________________________________________________
______________________________________________________________________________________

Dates of Award(s)  Beginning:  Ending:  
______________________________________________________________________________________
______________________________________________________________________________________

ATTACH JUSTIFICATION AND ANY ADDITIONAL RELEVANT INFORMATION.

Requested by: ____________________________ Date: ____________________________

Approved by: ____________________________ Date: ____________________________  
(Chair)
GUIDELINES FOR FACILITIES UTILIZATION

Requests for Use of Facilities and Priorities

All requests for the use of educational space within the EVMS Campus must be submitted for approval through the SCHED program maintained by the Academic Computer Center. EVMS educational space is designed to be used solely for educational activities for EVMS affiliated students, physicians, other health professionals, and the community. The priority for use of these facilities is as follows:

A. Student education has priority over all other activities. All decisions to move students from a regularly scheduled activity in any room within the EVMS Campus must have the written permission of the Dean/Provost or his/her designee.

B. Education activities sponsored by Eastern Virginia Medical School or any of its departments or programs have priority over activities sponsored by community health care organizations or other educational institutions.

C. Continuing education activities sponsored by the EVMS-CME program have priority over all other continuing education activities sponsored and/or presented by any other groups.

D. Other activities must be approved in writing by the Dean/Provost or his/her designee.

Fee Schedule

Sponsors of activities within EVMS facilities will pay rental fees for educational space, audiovisual equipment use and operator time. The current fee schedule may be obtained from Educational Media Services (446-5898).

An additional fee of thirty percent (30%) over the regular fee will be charged for weekend utilization of rooms requiring additional service in the form of security, housekeeping and/or audiovisual support. This surcharge does not cover staff involvement and will not pertain to any audiovisual equipment rented specifically for the occasion.

CME activities, which are presented by an EVMS department, but sponsored by other than the EVMS-CME Office for Continuing Medical Education, will be charged an additional fee equal to 20% of gross revenues.

All fees are payable by check or money order made out to Eastern Virginia Medical School.

All groups utilizing the school's (EVMS) facilities will be financially responsible for loss or damage to equipment or the facility.

Restrictions and Limitations

All conference rooms and MDL rooms within the EVMS Campus will be closed to the staff, students, public and/or private organizations over the weekend and after 5:00 p.m. Utilization of these facilities over a weekend or on a holiday or after 5:00 p.m. requires written permission from the Department Chair who is responsible for that space or from the Dean/Provost or his/her designee.

Food functions present special problems for educational facilities. Coffee, soft drinks, and other light fare only can be served. The Dean/Provost may make exceptions under unusual circumstances.
When class is in session concurrent with an outside meeting, (i.e., a class in Lecture Hall and an outside meeting in the Auditorium), all refreshment breaks and food functions must be held within an area that does not impede the free movement of students or cause a noise disturbance to the on-going educational activities.

It is the responsibility of the host organization to notify EVMS concerning the serving of food or beverage during the intended function. The following information is needed:

A. Proposed location
B. Name of catering company
C. Number of people to be served
D. Food and drinks to be served
E. Serving time

Arrangements will be made with housekeeping to supply trashcans to accommodate waste materials from the food service. It is the responsibility of the host organization to ensure a clean and orderly disposal of waste material.

**Rental to For-Profit Agencies**

Drug companies, medical equipment companies, and publishers may exhibit within the EVMS Campus under the following conditions:

Appropriate forms are completed and submitted to Educational Media Services (446-5898) and to the host organization.

Exhibits are educational and offer information about new products or a product's proven effectiveness.

Exhibits are confined to six-foot long tables and should not include noisy or offensive audio and/or visual effects.

A. Tables will be provided by EVMS. Two chairs will accompany each table ordered.

B. Exhibitors will be required to cover the table with a clean tablecloth or a company banner.

C. Exhibitors will be allowed in the building one-hour before the program starts in order to setup and will be able to remain one hour after the program in order for disassembly and cleanup. An authorized representative of the sponsoring group must be present during setup and cleanup.

D. Upon special request, a freestanding display will be permitted. It will be charged as one, two, or three table spaces as appropriate.

A company representative must be present at all times.

Drug companies and medical equipment companies must rent exhibit areas according to the rental schedule. Publishers must agree to sell books through the EVMS bookstore.

Location of exhibits is restricted to specific areas within the institution. Location is assigned on first come - first serve basis on the first morning of the scheduled activity.
Exhibits must be consistent with the philosophy and goals of EVMS.

Procedures for the Reservation and Use of Educational Space in Lewis and Hofheimer Halls

I. Requests

Educational and selected administrative spaces within Lewis Hall, Hofheimer Hall, The Jones Institute, and Andrews Hall are available for reservation under the following circumstances:

A. The reservation is for an appropriate educational or academic activity.
B. The space has not been previously reserved for another educational or administrative activity.

All requests to reserve educational space and appropriate audiovisual equipment are to be submitted via the room scheduling program (SCHED) available through the Academic Computer Center to authorized users within the institution (faculty, staff and students). This program lists all reservable space within the institution and, in selected cases, indicates the specific method through which it may be reserved. In those instances in which space is reservable by the requester through SCHED, the requester will be informed of confirmation of the request via E-Mail. If the request does not appear to fall within the policy for the reservation of space or if the space must be reserved through a separate mechanism, the requester will be informed. This SCHED program is maintained by Educational Media Services (446-5898).

Individuals submitting requests that have not been approved may appeal the decision by forwarding a memo to the Associate Dean for Continuing Education. This memo should state the reason why the request should be approved.

II. Schedule Of Fees: Audiovisual Equipment/Operation

In-house projection services are provided at no cost for normal business hours. Fees for projection services for outside groups are available from Educational Media Services (446-5898).

ANNUAL REPORTS

The Chair of each department and Dean/Director of special programs are required to submit an annual report to the Office of the Dean/Provost by September 30th of each year. These reports should cover activities for the fiscal year (July 1 through June 30). These reports are reviewed and discussed with each manager and consolidated into the Dean’s annual report to the President. The report format guide is available from the Office of the Dean/Provost (446-5800).

EQUIPMENT TRANSFER

This policy addresses the transfer of equipment to EVMS from another institution at the request of a new faculty member. When a new faculty member has equipment to transfer from his previous institution to EVMS, transportation costs for moving the equipment will be paid by EVMS under the following conditions.

Prior to the move, an inventory of the equipment must be sent to the Department Chair together with a separate cost estimate from two moving companies, for the Chair’s approval. If the equipment is considered to be acceptable, EVMS will authorize the transfer of the equipment and approve the payment
of the transportation costs. The department must notify Materials Management and they provide the equipment listing for inventory and tagging purposes.


IDENTIFICATION TAGS

EVMS and its affiliated hospitals require that all personnel wear an identification tag on their outer clothing whenever they are in one of the hospitals or in one of the school's buildings. The EVMS Human Resources department provides all personnel with an official identification tag. Each new faculty member must visit the Human Resources department in Smith-Rogers Hall to receive an identification tag prior to assuming duties at the school. Faculty members are asked to remind their students that the student identification tag is to be worn, especially when the students are in one of the affiliated hospitals. Faculty identification tags are to be returned to the EVMS Human Resources department when the faculty member's association with EVMS is terminated.
THE OFFICE OF RESEARCH

Mission: To provide service to the faculty and staff for all administrative and regulatory features of research activity at EVMS, with the exception of fiscal administration of sponsored research programs.

Function: 1. Administration of all pre-award functions for grants and contracts.

2. Administrative direction of and support for three regulatory committees related to research including the Institutional Review Board (IRB), Institutional Animal Care and Use Committee (IACUC), and Institutional Biosafety Committee.

3. Administration of intramural funding programs, including the administrative direction and support of the Institutional Research Committee.

4. Administrative support for the Ph.D. program and research track of the Master’s program in the Biomedical Sciences, including support of the Biomedical Sciences Program Joint Executive Committee, and the Biomedical Sciences Ph.D. stipend program.

5. Management and support of policies related to intellectual property, including information management and record-keeping.


7. Management and oversight of all policies that comprise Institutional assurances to the federal government and accrediting bodies for the conduct of research, including Conflict of Interest, Scientific Misconduct, Civil Rights, and others.


RESEARCH PROGRAMS

General

Most services related to the institutional administration of extramural and intramural sponsored research programs are provided through the Office of Research. The mission of this office is to provide service to the faculty and staff for all administrative and regulatory features of research activity at EVMS, with the exception of fiscal administration of sponsored research programs, which is administered by Grants Accounting in the Financial Services Office.

Approval of Research Activities by Regulatory Committees

It is the institutional policy that all research activity at EVMS shall be governed by the regulatory policies and guidelines promulgated by the U.S. Department of Health and Human Services, regardless of the funding source. Regulatory approval of research activities is achieved through submission of protocols to relevant committees, the membership of each being appointed by the Dean/Provost. Institutional guidelines and procedures for submission to these committees are necessarily dynamic since they reflect
changes in law, science, technology, universal ethical principles, and interpretation of each by
government agencies. Therefore, awareness by the faculty of the most recent policies and procedures in
place is important.

The following regulatory committees have oversight for the conduct of research. The documents
containing governing principles, specific guidelines and procedural requirements for submission to these
committees, as well as general guidance, may be obtained by contacting the Office of Research or, for the
use of chemicals and/or radiation, the Office of Environmental Health and Safety/Radiation Safety.

A. Institutional Review Board (IRB): EVMS has a Multiple Project Assurance on file with the
National Institutes of Health, Office of Protection from Research Risks (OPRR) which allows the
institution to receive federal funding for research activities. As part of this assurance, the IRB is
charged with the review and oversight of all research protocols involving the use of human
subjects. This committee, is made up of faculty having expertise in the areas of research that are
locally relevant, as well as members from the non-scientific community and health care
institutions affiliated with EVMS. The IRB, rather than the faculty member, determines whether
a protocol might be exempt from review, and therefore, any faculty member who is unsure as to
whether their activities require review by the IRB should contact the Office of Research for
guidance. IRB approval should be obtained prior to submission of grant and contract materials,
and must be obtained prior to the actual conduct of research. Specific guidelines for the timing of
approvals put forth by funding agencies need also to be adhered to.

B. Institutional Animal Care and Use Committee (IACUC): EVMS has a formal assurance on file
with the National Institutes of Health, Office of Protection from Research Risks for the use of
animals in research. In addition, the EVMS Division of Animal Resources is certified and
monitored by the United States Department of Agriculture (USDA), and accredited by the
Association for the Assessment and Accreditation of Laboratory Animal Care (AAALAC). In
compliance with these entities, the IACUC is charged with the review and oversight of all
research protocols involving the use of animals. This committee is made up of faculty having
scientific or medical expertise in the areas of research or species utilized, representation from the
non-scientific community and from outside of EVMS, as well as the Institutional Veterinarian.
IACUC approval should be obtained prior to submission of grant and contract materials, and must
be obtained prior to the actual conduct of research. Specific guidelines for the timing of
approvals put forth by funding agencies need also to be adhered to.

C. Institutional Bio-Safety Committee (IBC): The IBC was created to conform to guidelines put
forth by the Office of Recombinant DNA Activities at the National Institutes of Health, and is
charged with the review and oversight of activities and laboratories in which biohazards are
utilized. Biohazards are defined in this case as cultures of human or animal pathogens, laboratory
induced infection of a human or animal with a pathogen, any human tissue cultures, and primary
animal tissue cultures. In many cases, IBC approval must be obtained prior to conduct of the
activities under review. This committee does not review the use of materials falling under the use
of “universal precautions” put forth by OSHA (e.g. human blood or its products, body fluids, or
tissues for potentially infectious materials).

D. Chemical and Environmental Safety Committee (CESC): The CESC is charged to review and
develop policies and procedures for the safe use, storage, and disposal of chemicals at EVMS. In
addition, this committee ensures compliance with the Laboratory Standard, Hazard
Communication Standard and other regulations issued by the Occupational Safety and Health
Administration (OSHA) for laboratory and ancillary employees. The CESC is composed of
EVMS faculty physicians and scientists as well as representatives from outside of the institution.
Appendix O

This committee, administered through the Office of Environmental Health and Safety, maintains and oversees an inventory of chemicals in EVMS buildings and consults with faculty when developing protocols using unique chemicals.

E. Radiation Safety Committee (RSC): The RSC is responsible for establishing policies and procedures to ensure control of procurement and use of radioactive material and radiation producing machines, completion of safety evaluations of proposed uses and users, and overall development and implementation of the institutional radiation safety program. The committee is composed of faculty and staff with experience in the use of radioactive material or radiation producing machines. RSC approval must be obtained prior to proposed use of radioactive materials. EVMS maintains licenses with the Nuclear Regulatory Commission and the Commonwealth of Virginia for possession and use of radioactive material in research which require strict compliance with license conditions and radiation safety procedures.

F. Employee Occupational Health Program: The Employee Occupational Health office is located in suite 506 of Andrews Hall. The office is open from 8:00 a.m. to 5:00 p.m. Monday through Friday. This new program will coordinate tuberculosis surveillance for EVMS faculty, staff, and students, manage blood/body fluid exposures, schedule medical surveillance, coordinate Hepatitis B immunizations, and conduct pre-placement health evaluations for new employees. The program also manages the Occupational Health and Safety Program for staff that work with lab animals or lab animal products. The occupational health nurses are available to assist in training for lab animals/animal product users including non-human primates, tuberculosis, and blood borne pathogens. The Employee Occupational Health program is coordinated by Lisa Lee, RN and is overseen by Dr. Bruce Britton, who also serves as Chairman of the Employee Occupational Health Advisory Committee. Lisa Lee can be reached at 446-5870. Refer to the section on Faculty Rights, Ethics, and Responsibilities for the policy on Confidentiality.

Affiliate Support Offices for Research-related Activities

A. Division of Animal Resources (DAR): The DAR exists to assist EVMS investigators in the purchase, housing, husbandry, and veterinary care of research animals. Policies and procedures for the appropriate care and use of animals is provided through the DAR, the IACUC, and the Office of Research. The Director of the DAR, the Institutional Veterinarian, provides management of the facility. DAR staff are available to consult with faculty and assist in special surgical or handling procedures, as needed.

B. Office of Environmental Health and Safety/Radiation Safety: This office provides a resource to faculty with respect to support for the regulatory committees (d and e above), and also for the provision of training courses and procedure manuals for the safe use of chemical and biohazardous materials. The Office Director is the Environmental Safety Officer and Radiation Safety Officer for the Institution.

C. Biostatistics Support Office: The Biostatistics Office is a core resource whose mission is to provide faculty, students and staff with appropriate advice on research design and statistical analysis. Consultation services cover a wide variety of research and statistical issues including the initial conceptualization of a study, design, sampling and randomization strategies, questionnaire construction, data collection and coding procedures, determination of the subject numbers, and statistical analysis of data.
EXTRAMURAL PROGRAMS IN SUPPORT OF RESEARCH

Pre-award Review of Extramural Grants and Contracts

The Office of Research provides administration of “pre-award” functions for grants and contracts. All grants and contracts are submitted to the Office of Research for review prior to submission in the case of grants and contract proposals, or during drafting of the document in the case of pre-negotiated contracts. This review is necessary regardless of the funding source, and includes assessment of the administrative requirements for submission, as well as an evaluation of the relevant regulatory features for the conduct of research, including the use of human subjects, animals, biohazards, intellectual property, and potential conflict of interest. In order to assure that this review is complete and timely, investigators are required to accompany their submissions with an Office of Research Checklist, a form that extracts specific information about the regulatory, budgetary, and contractual features of the submission. This document requires signature by the investigator and their Department Chair, who accepts responsibility for the scientific merit of the proposed work as well as assuring that the resources and facilities necessary for the project will be made available. In addition to the checklist, investigators are required to submit, for all key personnel on a project, a completed and signed financial disclosure form in compliance with the institutional policies for the avoidance of conflict of interest described earlier in this manual. Both the Office of Research Checklist form and the financial disclosure form are available from the Office of Research (446-8480).

Signature Authority for Grants and Contracts

The Director – Office of Research has final signature authority for all grant applications submitted by faculty, unless specifically required to be otherwise by the funding agency. This signatory role of the Director – Office of Research carries with it a responsibility for the assurances to relevant government and accrediting agencies of all regulatory features of the research described in the submissions. All contracts and subcontracts require both the signature of the Director – Office of Research, for regulatory matters, and the Vice President for Administration and Finance as the authorized contracting officer for the Institution. This requirement holds true for all outgoing subcontracts as well.

Maintenance of Documents and Records

Following review of applications by the Office of Research and submission to the funding agency, a copy of the application and the appended forms is maintained in the Office of Research until notification by the agency of funding outcome. Should the application be funded, these records will be re-evaluated for regulatory assurances and then forwarded to the Grants Accounting Office for release of an account. The files for funded grants will be maintained in Office of Research throughout the funding interval and for two years following completion of funding, after which they are archived. Non-funded applications are kept on file for 1 year. Investigators should also maintain a copy of their applications for reference purposes. All materials will be managed as confidential.

Management of Funded Sponsored Programs (Summary)

Refer to Financial Affairs Policy and Procedure Manual, Section 13 for complete list of policies and procedures.

Most of the research conducted at EVMS is funded by various external sources including the federal government, the Commonwealth of Virginia, private not-for-profit foundations and private for-profit companies.
All grants and contracts awarded to EVMS where the principal investigator is a full-time faculty member, part-time faculty member, community faculty member, fellow, staff or student must be processed through the Office of Research, Business Management and Financial Services departments. EVMS grants may not be processed through Eastern Virginia Medical School Health Services, Children’s Specialty Group, Pediatric Faculty Associates, Center for Pediatric Research, Eastern Virginia Medical School Foundation, Jones Institute Foundation, Diabetes Institutes Foundation, or any of the affiliated hospitals.

The Vice President for Administration and Finance has delegated signature authority for grant proposals to the Director - Office of Research to sign as the “Institutional Official” with the exception of CONRAD Agreements. The Vice President for Administration and Finance retains signature authority on all CONRAD agreements and all contracts.

All grant and contract proposals should be submitted to the Office of Research for review within 3 weeks of the proposal due date even if the grant does not require institutional signature. The Office of Research verifies information provided in the proposal and confers with Business Management and Financial Services, when necessary, regarding financial report requirements, salaries, fringe benefits, and indirect cost recoveries.

EVMS has a fiduciary responsibility to ensure that externally funded grant and contract expenditures are in accordance with the guidelines established by the awarding agency, all applicable laws and regulations, and EVMS policies and procedures. EVMS is required to produce and maintain detailed financial expenditure reports for all grants and contracts to substantiate compliance with the awarding agency’s guidelines.

The Grants Accounting Office is responsible for the “Post Award” accounting for grants and contracts received by EVMS and subcontract awards made by EVMS to sub-recipient organizations. These responsibilities include:

- Post award monitoring of a random sample of expenditures of all grant and contract accounts for compliance with the guidelines established by the awarding agency, all applicable laws and regulations, and EVMS policies and procedures
- Monthly accounting entries to record fringe benefit allocations and indirect cost recoveries
- Tracking applicable matching/cost-sharing requirements
- All financial reporting on externally funded grants and contracts
- Review and follow-up of sub-recipient A-133 audit compliance reports
- Cash management related to grants and contracts
- Review and final approval of all expenditures for: budget availability, validity of the costing, and compliance with the guidelines established by the awarding agency, all applicable laws and regulations, and EVMS policy and procedures

Contributions are processed through the EVMS Foundations (see Financial Affairs Policy and Procedure Manual, Section 11.14, Grant Versus Contribution).
Establishment of a Research and Scholarly Activity Incentive Fund

Eligibility:

Full-time faculty in the Hampton Roads area, who are engaged in investigator initiated extramurally funded basic or clinical research or education/training, may receive incentive funds. For the extramural grant or contract to be eligible, it must provide facilities and administrative (F&A) cost recoveries. For a faculty member to be eligible, he/she must be funded a minimum of 20% on the extramural funds for the grant contract year/period and be listed as Principal Investigator. Twenty-five percent (25%) of the F&A costs will be shared with the department/Principal Investigator (P.I.) at the end of the fiscal year.

Principal Investigators engaged in pharmaceutical initiated research grants must be funded (i.e., salary) at a minimum of 10% of total costs on the extramural funds for the grant contract year / period. Twelve and a half percent (12.5%) of the F&A costs will be shared with the department / Principal Investigator (P.I.) at the end of the fiscal year.

Program Projects - Principal Investigators who administer the program project are required to be funded 5% and project / support core P.I.s are required to be 20% funded. Twenty-five percent (25%) of F&A cost from the total program project will be distributed to the participating departments / PIs based on the percentage of total direct cost budget at the end of the fiscal year.

The incentive amount returned to the faculty member’s department will be spent under a plan developed by the faculty member and the Department Chair in accordance with EVMS policy.

1. These funds will be cumulative with the remaining fund balance at the end of any fiscal year being carried over to the next year.
2. While these funds are appropriated by the Medical School for discretionary use of the department/faculty who generate the funds, they are to be considered public funds and are to be used for research or educational purposes within overall EVMS guidelines.
3. An estimated budget for the expenditure of these funds shall be developed annually in conjunction with the EVMS budget process by the faculty member and the Department Chair.
4. Expenditures of these funds for the items listed below will require prior approval of the Department Chair.
   A. Stipends for postdoctoral fellows, graduate and undergraduate students.
   B. Equipment
   C. Research, education and office supplies
   D. Travel to professional meetings
   E. Scientific journals, book acquisitions
   F. Teaching and research aids, e.g. audiovisual, computers, and computer supplies
   G. Professional society dues and memberships
   H. Official receptions, etc., for 1) Visiting professors; 2) Interdepartmental organizational meetings; Departmental meetings
   I. Consultant fees associated with research or educational programs
   J. Tuition reimbursement - non-degree - for employee job-related skills or knowledge
      (Documentation of satisfactory completion must be presented after completion of course)
   K. Salary for support personnel, e.g. secretaries, laboratory technicians
   L. Merit/bonus incentive award payment of up to 30 percent of the funds returned to the faculty member’s department. Whether a faculty member receives a merit/bonus payment and the amount of the merit/bonus will be established by the Chair with approval of the DeanProvost (the incentive payment does not apply to the faculty member’s base salary).
5. Use of incentive funds for anything not listed in 4 will require prior approval by the Dean/Provost, for example foreign travel, faculty salaries, alterations and renovations of space, etc.

Research and Scholarly Activity Merit/Bonus Incentive Policy

A. Purpose:

To recognize and reward exceptional faculty performance, to stimulate research/education productivity, and to aid in recruiting and retaining outstanding faculty.

B. Eligibility:

Faculty who are eligible under the “Research and Scholarly Activity Incentive Fund” policy and who obtain a facilities and administrative cost recovery bearing research or education/training grant in which 20% of their salary is funded by the grant. The department/faculty will receive 25% of the F&A cost recoveries generated from the grant. The faculty research and scholarly activity incentive fund will be spent under a plan developed by the faculty member and department chair in accordance with EVMS policies.

C. Award:

Eligible faculty may receive a bonus which could be up to a maximum of 30% of the F&A cost recoveries returned to the faculty member’s incentive for the fiscal year obtained from each eligible grant. The amount of this award will be determined by the chair and will reflect how well the faculty member is meeting his/her academic responsibilities (See Awarding of Merit, section D3 below). The amount of the merit/bonus will remain confidential and must be approved by the Dean/Provost.

The bonus does not apply to the faculty member’s base salary. The bonus continues for eligible faculty each year provided the faculty member continues to receive facilities and administrative cost recovery bearing research or education/training funds that meet the eligibility requirements stated above. The bonus is terminated when facilities and administrative cost recovery bearing research or education/training funding ceases. Although the amount of the bonus award in subsequent years of facilities and administrative cost recovery bearing research or education/training funding may increase or decrease depending on the faculty member’s overall academic performance, the bonus cannot exceed 30 percent.

Academic performance will be measured using the criteria developed by the Chair for evaluating faculty productivity.

D. Awarding Merit

1. Awarding of merit/bonus incentive is based on the percent effort a faculty member devotes to the funded research or education/training project as the Principle Investigator. Example: Faculty member receives 20% salary support on a facilities and administrative cost recovery bearing research or education/training grant, the grant’s total F&A cost recovery for the fiscal year is $100,000. Twenty-five (25%) of the $100,000 ($25,000) is placed in his/her research and scholarly activity incentive fund account.

A 10% merit/bonus incentive could apply to all facilities and administrative cost recovery bearing
research and education/training grants/contracts in which a minimum 20% of the faculty member’s salary is budgeted. In the above example, the faculty member would receive a merit incentive payment of $2,500 (10% of $25,000).

2. Faculty/investigator is eligible to receive the merit/bonus incentive on each facility and administrative cost recovery bearing research and education/training grant with 20% of their salary funded by the grant. It is mandatory that all faculty investigators charge the grant the amount of their salary that is equivalent to the time and effort they will devote to the grant.

3. Merit/bonus incentives will depend on the faculty member’s overall scientific productivity as determined by the chair. All awards must be approved by the Dean/Provost.

4. Faculty is eligible to receive a merit/bonus based on incentive funds received in the prior fiscal year. The amount of the merit/bonus may vary from year to year depending on changes to the percent effort the faculty member devotes to the grant, how well the grant is progressing (i.e., are the objectives, specific aims, goals being met), the productivity of the faculty member (i.e., publications, other grants/contracts, etc.), and amount of funds in the faculty member’s incentive account.

E. Considerations:

In recommending an award, the departmental chairs and faculty members must carefully determine what impact using incentive funds for bonuses will have on their overall continued research and education productivity. Previously, incentive funds have been used solely for purchase of equipment, technician and post-doctoral salaries, supplies, pilot research studies, and in some cases, to support a faculty member’s research program between extramural grants. The use of funds for a bonus award must be carefully considered as funds from the department, Research Office or from the Dean/Provost to support a faculty member’s research program should they lose grant funding may be limited and perhaps unavailable.

F. Effective Date:

The effective date of the Merit/Bonus incentive is July 1, 1997. Research grants/contracts obtained/awarded on July 1, 1997 and thereafter will be eligible. Incentive funds accumulated prior to July 1, 1997 are not eligible. Education/training grants obtained/awarded/renewed on July 1, 2004 and thereafter will be eligible.

Approved by the Board of Visitors on 2/10/09
Basic Science Merit/Bonus Incentive Policy

A. Purpose

To recognize and reward outstanding faculty performance, to stimulate research/education productivity, and to aid in recruiting and retaining outstanding basic science faculty.

B. Eligibility

Faculty who obtain an indirect-cost bearing grant as the principal investigator in which a percentage of their salary is budgeted in the grant. The faculty salary from the grant would be subjected to the 70/30 incentive policy. For example, if $10,000 faculty salary is received, then $7,000 would be available as incentive, i.e. 70% of $10,000. The faculty incentive fund will be spent under a plan developed by the investigator and department chair.

C. Award

Eligible faculty may receive a bonus of 10%, which could be increased to a maximum of 30% of the 70% of the faculty member’s incentive obtained from each eligible grant. Whether an award above 10% is made and the amount of this award will be determined by the chair and will reflect how well the faculty member is meeting his/her academic responsibilities (See Awarding of Merit, section D3 below). The amount of the merit/bonus will remain confidential and must be approved by the Dean/Provost.

The bonus does not apply to the faculty member’s base salary. The bonus continues for eligible faculty each year provided the faculty member continues to receive extramural research funds that meet the eligibility requirements stated above. The bonus is terminated when extramural funding ceases. Although the amount of the bonus award in subsequent years of extramural funding may increase or decrease depending on the faculty member’s overall academic performance, the bonus cannot exceed 30 percent.

Academic performance will be measured using the criteria for evaluating faculty productivity as described in the Basic Science Evaluation Committee Report (available from the Office of the Dean/Provost).

D. Awarding Merit

1. Awarding of merit/bonus incentive is based on the percent effort a faculty member devotes to the research project as the investigator.

   Example: Faculty member will devote 50% effort and receives 50% salary on an NIH grant. Faculty member’s total salary is $100,000 of which 50% is $50,000. Applying the 70/30 incentive policy, the faculty member would receive $35,000 (70% of $50,000) placed in his/her incentive account.

   A 10% minimum merit/bonus incentive could apply to all extramural research grants/contracts in which a percentage of the faculty member’s salary is budgeted. In the above example the faculty member would receive a merit incentive payment of $3,500 (10% of $35,000).
If the grant budget is subject to reduction by the granting agency prior to an award and such reduction decreases the amount requested for the faculty member’s salary, but does not decrease the percent effort on the grant, the chair can at his/her discretion (and availability of other funds) award the full merit/bonus amount (in this example, $3,500).

For example, the granting agency reduces the requested salary from $50,000 to $25,000. 70% incentive would be $17,500, and a 10% merit/bonus of $1750. The chair, with the approval of the Dean/Provost, could make up the $1750 difference from non-institutional funds, e.g. 20% of the 70% incentive that goes into the department chair’s account, and any other research/contract generated moneys available in that basic science department, including accumulated faculty incentive accounts.

2. Faculty/investigator is eligible to receive the minimum merit/bonus incentive on each extramural research grant having a percentage of their salary budgeted in the grant. It is mandatory that all faculty investigators charge the grant the amount of their base salary that is equivalent to the time and effort they will devote to the grant.

3. Merit/bonus incentives above the 10% minimum will depend on the faculty member’s overall scientific productivity as determined by the chair using the criteria listed in the Basic Science Evaluation Committee Report (available from the Office of the Dean/Provost). The department chair will determine whether an award above the 10% minimum is to be made and for what amount. All awards must be approved by the Dean/Provost.

4. Faculty are eligible to receive a merit/bonus each year of the total grant period as long as the faculty member’s salary is budgeted in the grant. The percentage of the merit/bonus may vary depending on a change in the percent effort of the faculty devoted to the grant, how well the grant is progressing (i.e., are the objectives, specific aims, goals being met), the productivity of the faculty member (i.e., publications, other grants/contracts, etc.), and amount of funds in the faculty member’s incentive account.

E. Considerations

In recommending an award, the departmental chairs and each faculty member must carefully determine what impact using incentive funds for bonuses will have on their overall continued research productivity. Previously, incentive funds have been used solely for purchase of equipment, technician and post-doctoral salaries, supplies, pilot research studies, and in some cases, to support a faculty member’s research program between extramural grants. The use of funds for bonus award must be carefully considered as funds from the basic science department, Research Office or from the Dean/Provost to support a faculty member’s research program should they lose grant funding may be limited and perhaps unavailable.

F. Effective Date:

The effective date of the Merit/Bonus incentive is July 1, 1997. Research grants/contracts obtained on July 1st and thereafter will be eligible. Incentive funds accumulated prior to July 1, 1997 are not eligible, except as described in section D 1, paragraph 5). Educational grants are not eligible.
INTRAMURAL SUPPORT FOR RESEARCH: INSTITUTIONAL GRANTS PROGRAMS

General

Intramural research grants are made available through several programs, the structure and mission of which are subject to change as the needs of the institution and the faculty evolve. At present, two such programs rely on funds allocated by the Dean/Provost on a yearly basis. One of these programs has the mission of helping new investigators and established investigators that are changing research direction, to pursue pilot projects that will allow them to be more competitive for extramural funding mechanisms. A second program supplies bridge grants to faculty who have a history of continuous funding, but are experiencing a temporary lapse in support. The details of these programs are subject to change, and more information should be obtained from the Office of Research.

Additional small grant programs are occasionally available through special grants from extramural sources (e.g. the NIH, professional societies) that allow the institution to distribute grants to investigators as deemed appropriate. These programs, when granted to a program director or faculty member, are usually administered through a specific programmatic format that may reside outside of the Office of Research. However, the Office can serve as a basic resource on the availability of such programs, their emphasis, and one’s eligibility to apply.

New Investigator/Director Grant Program

One year grants for a maximum of $15,000 are made available through institutional research funds to faculty with an appointment at the level of assistant professor and above. There are two funding cycles for these grants: Spring submissions are considered for funding on a July 1-June 30 cycle, and Fall submission are considered for a January 1-December 31 cycle. Calls for proposals are issued in each case, usually two months before the submission deadline. The purpose of this program is to encourage and support the development of high quality research endeavors in the medical sciences. Applications are reviewed for scientific merit by the Research Committee and, on occasion, selected ad hoc members from the medical school faculty. The Research Committee generally follows standard peer review procedure used by NIH study sections. All applications are evaluated on the basis of scientific merit, publications, and implications for extramural funding. The appropriateness and justifications of the budget are also to be considered in the review of grants. An eligible faculty member may submit only one application during each review period as principal investigator, but there is no limit on the number of applications on which an eligible individual may appear as a co-investigator. Awarded funds will not be made available for use until approval by the appropriate regulatory committees, and therefore it is highly recommended that protocols be submitted to those committees prior to submission of the grant application.

During the interval of funding of an Institutional Grant, if funding is obtained for the project from an extramural source, the Director – Office of Research, in consultation with the Research Committee, may request the return of unexpended funds. At the conclusion of the grant period, progress reports are required within thirty days of the expiration date of the project and at one and two year intervals following the end of the award. This allows tracking of the effectiveness of the program.

Bridge Grant Program

Bridge grants are a targeted funding mechanism and are awarded to faculty members to allow them to retain continuity of their research program while in the process of preparing a re-submission of a competing renewal for extramural grant funds. Eligibility for bridge grants is restricted to faculty preparing a re-submission of an extramural, indirect cost-bearing grant for the NIH, NSF, or equivalent
granting agency that includes a potential for long term funding through competitive continuation. These
grants are restricted to those faculty in the process of applying for a competing renewal, as opposed to a
new grant. A faculty member who is not awarded funding on an initial competing renewal application is
eligible to apply. This includes all full-time faculty members in the clinical or basic science departments.

Bridge grant applications are accepted anytime during the year. These applications are reviewed for both
scientific merit and financial need. Criteria that are particularly important for successful submission
include evidence of an ability to sustain a productive and funded ongoing research program, productivity
during the previous granting cycles, level of enthusiasm for the project described by the Summary
Statement or equivalent review (i.e., priority score, percentile, etc.), and the strategy and potential of the
investigator to correct the deficiencies in the grant application.

Financial need is assessed with regard to the current funds available to the investigator to support the
study, the effort made by the investigator to obtain other funding, and departmental support of the project.
While there is no specific limit on the amount that can be requested through this program, budget requests
are expected to represent the minimum that will allow the investigator to remain productive during the
gap associated with an extramural agency’s review cycle.

**Medical Student Summer Research Stipends**

Another institutionally supported program provides a stipend to medical students during the summer
between their first and second years that allows them to conduct research with a designated faculty
mentor. These funds also include a small appropriation to the faculty member to defer the costs of
supplies needed for the project. Applications for these awards are competitive as the numbers of awards
are limited. Applications are submitted in early spring, for funding that begins in late May or early June.
Review of applications is provided by the Research Committee. This is a 10 week program and the
faculty sponsor plays an active role in the application process. Faculty who are interested in participating
in this program are invited to file an abstract describing their research efforts with the Office of Research.
These materials are made available to students during the interval following the call for proposals to aid
students in identifying potential mentors.

**Other Institutional Granting Programs**

Other programs for supporting faculty or students, but which are dependent on extramural sources are
variable in their availability. Faculty are informed of them as they become available. Faculty should
contact the Office of Research to determine what programs may be available for them to obtain funding
of their research efforts.

Any funds remaining at the end of the award period revert back to the institutional research funds.
Expenditures must be in accordance with the General Spending Policy located in Section 14.11 of the
INTELLECTUAL PROPERTY POLICY

The purpose of this Intellectual Property Policy is to establish rules and procedures applicable to patentable inventions, works subject to copyright protection and other intellectual property conceived or developed in the course of performance of work and research under the auspices of Eastern Virginia Medical School (EVMS). It does so by defining (a) how intellectual property developed or created by EVMS faculty and others working under the auspices of EVMS will be identified and protected; (b) how ownership and usage rights in such intellectual property will be shared among EVMS, the inventors and creators of such intellectual property, and third parties that might sponsor or be involved in its creation or development; and (c) how such intellectual property will be managed and how revenues from its commercialization will be shared. This Intellectual Property Policy is comprised of a Patent Policy (Section I below), a Copyright Policy (Section II below) and Terms Applicable to both Patent and Copyright Matters (Section III below).

I. PATENT POLICY

The policy of Eastern Virginia Medical School (EVMS) is to consider and, where deemed appropriate by the EVMS Office of Technology Transfer pursue the patenting, licensing, and commercialization of any Invention to which EVMS has or acquires ownership rights.

A. Goals

By adopting this Patent Policy EVMS intends to:

1. Stimulate basic and applied research within the educational, research, and clinical activities of the School and enhance collaboration.

2. Motivate discovery of practical applications of research by rewarding Inventors for their Inventions.

3. Evaluate all EVMS Inventions and acquired Independent Inventions for development, patentability, and licensing potential.

4. Insure that EVMS and EVMS Inventors receive equitable shares of the financial returns from Inventions resulting from EVMS Activity.

5. Coordinate and evaluate the use of EVMS Inventions in the public interest.

B. Purpose

It is the purpose of this Patent Policy to set forth the rules governing the relationship of EVMS Inventors, EVMS, other associated Inventors, and outside sponsors supporting research within EVMS. This policy governs the ownership and disposition of rights in EVMS Inventions and related intellectual property and applies to all EVMS Members.
C. Objectives

In general, EVMS objectives include the dissemination of existing knowledge, the acquisition of new knowledge and understanding, the training of students, residents and fellows, and the stimulation of a spirit of inquiry. However, useful Inventions may result from EVMS Activity. When this occurs, EVMS will, where deemed appropriate by the EVMS Office of Technology Transfer, endeavor to protect and control the use of such Inventions under this Patent Policy and, the patent laws of the United States and other countries.

The Director of the EVMS Office of Technology Transfer, under the direction of the EVMS President, may exercise broad discretion for the development and protection of EVMS Inventions, patents, and other intellectual discoveries and may act for EVMS in all matters involving intellectual properties, including the making of contracts and the waiving, assigning, or transferring of EVMS rights consistent with law and this Patent Policy.

D. Definitions

Wherever they are used in this Patent Policy the following terms have the following meanings:

1. “EVMS Activity” is defined as any activity conducted under circumstances in which any one or more of the following conditions are present.
   a. Research, educational, clinical or other activity conducted by any EVMS Member(s) in connection with their employment or engagement by or other association with EVMS; for example, work performed by EVMS Members acting in the course of, and within the scope of, their employment; or
   b. Research, educational, clinical or other activity conducted by any EVMS Member(s) using EVMS funds, time, facilities, equipment, materials or proprietary information; for example, work carried out by EVMS Members within facilities owned, operated or controlled by EVMS; or
   c. Research, educational, clinical, or other activity conducted by any EVMS Member(s) in the course of projects or undertakings sponsored or supported in whole or in part by funds or other resources provided or administered by or through EVMS; for example, work carried out by EVMS Members under a grant obtained by EVMS.

2. “EVMS Expenses” is defined, with respect to any Invention, as EVMS’ expenses related to the research, testing, development, licensing, marketing or commercialization of such Invention, or to pursuing, obtaining, maintaining or defending patent and other legal protections and rights in or for such Invention, to the extent such expenses are not reimbursed to EVMS from grant, sponsor or other third party sources, as well as such other expenses as may be allocated to any Invention by agreement of EVMS and the EVMS Inventor(s) of such Invention. EVMS Expenses with regard to any Invention shall in each case be determined in good faith by the Director of Finance in consultation with the Office of Technology Transfer whose determinations with regard to EVMS Expenses shall be conclusive.
3. “EVMS Invention” is defined as an Invention which resulted in whole or in part from EVMS Activity, or is invented, discovered, conceived, created, made or first reduced to practice as a part or in the course of EVMS Activity by an EVMS Inventor.

4. “EVMS Inventor” is defined as an EVMS Member who invents, discovers, conceives, creates, makes or reduces to practice any Invention.

5. “EVMS Member” is defined as any individual within one or more of the following groups: EVMS full-time and part-time faculty, EVMS community faculty, EVMS classified and unclassified employees, EVMS administrative staff, paid EVMS student assistants, EVMS students, residents, fellows and trainees, EVMS visiting faculty and researchers, EVMS employees and visitors covered by sponsored program agreements or other contractual arrangements, and any other person or group that uses or is aided by EVMS resources.

6. “Improvement” is defined, with respect to any Invention, as any change or modification to such Invention that could improve or enhance its functionality, efficiency or commercial value, or any new Invention that is derived in whole or in part from such original Invention, or includes any or all of the features of such Invention or is otherwise directly related to such Invention.

7. “Independent Invention” is defined as an Invention which did not result in whole or in part from EVMS Activity and is not invented, discovered, conceived, created, made or first reduced to practice as a part or in the course of EVMS Activity by an EVMS Inventor.

8. “Invention” is defined as any trade secret, know how, technology, process, machine, article of manufacture or composition of matter, or any idea that enhances the functioning of research, educational, clinical or administrative practices, or any Improvement of any of the foregoing. An Invention may or may not be patentable.

9. “Invention Assignment Form” is defined as the form required to be filed with the Office of Technology Transfer, which assigns each EVMS Invention to EVMS. The Invention Assignment Form is located on the internet at http://www.evms.edu/research/technology/docs/assignment-form.pdf.

10. “Invention Disclosure Form” is defined as the form required to be filed with the EVMS Office of Technology Transfer after any Invention is identified by an EVMS Member. The Invention Disclosure form is located on the internet at http://www.evms.edu/research/technology/docs/disclosure.pdf.

11. “Invention Income” is defined, with respect to any Invention, as any value received by EVMS with respect to such Invention, or by any EVMS Inventor before or after disclosure to EVMS of such Invention in consideration for licensing or other commercial exploitation or for use of such Invention, or for any transfer of any right, title or interest in or to such Invention. Invention Income includes, but is not limited to, expense reimbursements, option fees, license fees, patent application and progress fees, registration fees, and royalty income.

12. “Inventor” is defined as any person who invents, discovers, conceives, creates, makes or reduces to practice any Invention.
13. “Net Invention Proceeds” is defined, with respect to any Invention, as gross Invention Income less EVMS Expenses.

E. Assignments and Disclosures

1. Each EVMS Invention shall be deemed to be the property of EVMS, shall be disclosed to EVMS by its EVMS Inventor(s) in an Invention Disclosure Form prescribed by the EVMS Office of Technology Transfer, and shall be assigned to EVMS using an Invention Assignment Form prescribed by the Office of Technology Transfer.

2. Within thirty (30) days after any Invention is identified by its EVMS Inventor(s), the EVMS Inventor(s) shall notify the EVMS Office of Technology Transfer that an Invention has been made, by completing and filing the prescribed Invention Disclosure Form, which requires the signatures of the Chair(s) of the Inventor(s) primary department(s) and the Dean of EVMS.

3. As part of the Invention Disclosure Form filing, all EVMS Inventors should agree on their respective percentage contributions to inventorship of the Invention, and all EVMS Inventors should agree on how they would like their share of Net Invention Proceeds from the Invention shared among them. If a disagreement exists among co-Inventors with regard to their respective percentage contributions to inventorship, or if disagreement exists among joint EVMS Inventors with regard to their desired sharing of Net Invention Proceeds, it should be so stated in the Invention Disclosure Form for later resolution in accordance with this Intellectual Property Policy.

4. If there are any Inventors who are not EVMS Inventors involved in the invention, discovery, conception, creation or reduction to practice of any Invention with an EVMS Inventor, the EVMS Inventor(s) of such Invention shall ask each non-EVMS co-Inventor to complete and sign the Invention Disclosure Form along with the EVMS Inventor(s), and make all reasonable efforts to obtain their signatures on the Invention Disclosure Form. For any non-EVMS co-Inventors who do not sign the Invention Disclosure Form, the EVMS Inventor(s) involved shall fairly estimate the inventorship contribution of each such non-EVMS co-Inventor for purposes of the Invention Disclosure Form. EVMS Inventors shall also disclose in the Invention Disclosure Form, to the extent known to them, each such non-EVMS Member’s employment or other relationship with any non-EVMS educational institution(s) or other organization(s).

5. At any time after the filing of the Invention Disclosure Form, EVMS Inventors may submit a directive to the Office of Technology Transfer that is contrary to the initial Invention Disclosure Form and which modifies the desired sharing of Net Invention Proceeds.

6. Within thirty (30) days of the filing of an Invention Disclosure Form, the Office of Technology Transfer will notify the EVMS Inventors of its decision whether the Invention is an EVMS Invention. If the Office of Technology Transfer determines that an Invention is an EVMS Invention, the EVMS Inventor(s) shall assign all of their rights to such EVMS Invention to EVMS within thirty (30) days of notice by the Office of Technology Transfer that the Invention is an EVMS Invention, by executing and filing with Office of Technology Transfer an Invention Assignment Form. Each EVMS Inventor who is or may be a co-Inventor or a contributor to the invention, discovery,
conception, creation or reduction to practice of the EVMS Invention must sign the Invention Assignment Forms.

7. If an EVMS Inventor believes that an Invention is an Independent Invention, EVMS Inventors should be prepared to provide documentation of the independence of such Inventions before a final determination is made by the EVMS Office of Technology Transfer. Disagreement with any such determination by the Office of Technology Transfer must be noted by the Inventor(s) in writing to the Office of Technology Transfer within thirty (30) days after notification of the determination, and will then be resolved in accordance with pertinent provisions of this Intellectual Property Policy.

8. If any Invention is determined to be an Independent Invention, the Inventor(s) may voluntarily assign it to EVMS, but no Inventor is under any obligation to do so and EVMS is under no obligation to accept any such assignment. Should EVMS not accept assignment of any Independent Invention, the Inventor(s) will be free to patent, license, manufacture, and market the Independent Invention at their own expense. However, should any Improvement be made to the Invention in the course or as a result of EVMS Activity, the Improvement will be an EVMS Invention under, and treated as such in accordance with, this Patent Policy. EVMS reserves the right to assert its rights to such Improvements, and each EVMS Member is responsible for notifying EVMS of all such Improvements promptly upon becoming aware of them by filing a new Invention Disclosure Form.

9. Following its receipt of the Invention Assignment Form for any EVMS Invention, the EVMS Office of Technology Transfer will undertake an evaluation of the commercial potential of the EVMS Invention utilizing the information provided with the disclosure, discussions with the Inventor(s) and other means or resources the Office of Technology Transfer deems appropriate. The Office of Technology Transfer may, but will in no case be obligated to, elect to seek an evaluation from an outside patent assessment/administration group with regard to the commercial potential of any EVMS Invention.

10. After evaluation of the EVMS Invention, if the decision to retain the assignment of any Invention is made by the EVMS Office of Technology Transfer, the EVMS Office of Technology Transfer will pursue patent protection. The patent application(s) will be written by EVMS’ patent counsel in association with the Inventor(s), using Invention Disclosure Form information and other information obtained from the Inventor(s). The Office of Technology Transfer may consider and pursue other alternatives, apart or simultaneous with patent application, such as licensing and/or options to third parties, and take such other actions as the Office of Technology Transfer may deem appropriate to promote and exploit any assigned Invention.

11. If after the evaluation of the EVMS Invention the decision to not retain the assignment of any Invention is made by the EVMS Office of Technology Transfer, the Office of Technology Transfer shall reassign such EVMS Invention to the assigning Inventor(s). If EVMS makes an election to reassign, the Office of Technology Transfer will give the Inventor(s) written notice of this decision within ninety (90) days after submission to the Office of Technology Transfer of the completed Invention Disclosure and Invention Assignment Forms relating to the EVMS Invention. The ninety (90) day time-frame for reassignment may be extended at the discretion of the Director of the EVMS Office of

Appendix O
Technology Transfer, in which event the Inventor(s) shall be notified in writing of the extension.

12. EVMS may decide to discontinue pursuit of any patent application on any EVMS Invention at any time, for any reason, in which case EVMS may reassign such EVMS Invention back to its Inventor(s) and may elect to retain certain or continuing rights in reassigned Inventions. Following reassignment of any Invention, the Inventor(s) will be free, at their own expense, to take appropriate actions to obtain patent protection for the Invention and otherwise exploit and develop the Invention.

13. If it is subsequently determined that there is an Improvement to a reassigned Invention, or that additional know how, technology or other value has been added in the process of perfecting the Invention for patenting or commercial exploitation, EVMS may exercise these rights. EVMS Inventors are responsible for disclosing and assigning such subsequent Improvements to EVMS to the Office of Technology Transfer by filing updated Invention Disclosure and Invention Assignment Forms with the Office of Technology Transfer.

14. If the EVMS Office of Technology Transfer deems it appropriate at any time with respect to any EVMS Invention, the Office of Technology Transfer will review and may revise allocations of inventorship and Net Invention Proceeds set forth in the Invention Disclosure Form for the Invention. If such review results in revision of the inventorship or distribution percentages set forth in the Invention Disclosure Form, the Office of Technology Transfer will give written notice of such revision(s) to the EVMS Inventors listed in the form. Such revisions will become effective and binding on all the Inventors thirty (30) days after such notice, unless within such 30-day period the Office of Technology Transfer receives written notice from any of the Inventors of his or her disagreement with the revisions. Any such disagreement will be resolved in accordance with applicable provisions of this Intellectual Property Policy.

15. Determination of inventorship for any Invention involves application of patent law rules and principles to the facts and circumstances of any given case. A patent application must correctly identify and name all co-Inventors, and may not name as an Inventor any party who is not such based on proper application of patent law rules and principles. Final determinations of inventorship will in all cases be made by the EVMS Office of Technology Transfer with assistance of EVMS’ patent counsel. In some cases these determinations of inventorship may result in changes to the allocations of inventorship contributions and Net Invention Proceeds specified in Invention Disclosure Forms.

16. Early peer-reviewed publication of results is a major objective of every academic institution. However, premature publication of any Invention could jeopardize its future licensing and patent potential. EVMS Inventors must defer all public disclosure and publication of any Invention until such time as disclosure to and review by EVMS has been completed in accordance with this Patent Policy. All public disclosures of EVMS Inventions through press announcements, conference presentations, grant or sponsorship applications or any other means must be approved in advance by the EVMS Office of Technology Transfer. Any public use of or commercial activity (for example, an offer to sell) with regard to an Invention can also jeopardize its future licensing and patent potential. Consequently, all such activities related to EVMS Inventions must also be approved in advance by the EVMS Office of Technology Transfer.
F. Distribution of Income

1. Whenever it receives Invention Income with regard to an EVMS Invention, EVMS will first deduct/recover all EVMS Expenses with regard to the EVMS Invention, and then determine the Net Invention Proceeds available for distribution. In determining EVMS Expenses, the Office of Financial Services may utilize assistance and data obtained from the Inventor(s), Department Chair(s), and other sources the Office of Financial Services deems necessary or appropriate.

2. After EVMS has recovered any and all EVMS Expenses, the Net Invention Proceeds will be allocated and distributed as follows:
   a. To the Inventor(s) (1/3)
   b. To the Inventor(s) primary department at the time of Invention (1/3)
   c. To EVMS (1/3)

3. For any EVMS Invention, EVMS may enter into an agreement with another entity or entities that addresses the intellectual property arrangement between the parties, including, but not limited to, intellectual property ownership, patent prosecution, marketing, licensing, license management, expense recovery, and revenue distribution. When EVMS is the recipient and administrator of the Invention Income, EVMS shall pay any amounts due to the other party under the terms of the agreement prior to the internal distribution of Net Invention Proceeds in accordance with Section F.2 above.

4. The Office of Financial Services and the Office of Technology Transfer will calculate Invention Income, EVMS Expenses and Net Invention Proceeds and distribute any share of Net Invention Proceeds to which any Inventor is entitled within sixty (60) days after the receipt of Invention Income. Together with each distribution, EVMS will provide the Inventor with a statement showing calculation of his/her distribution, and pertinent information regarding licensing or other commercial activity that resulted in the distribution. These payments are subject to the Internal Revenue Service regulations.

5. EVMS’ President, with the advice of the Dean/Provost and the approval of the EVMS Board of Visitors, and utilizing information and recommendations from other sources as the President deems necessary or appropriate, may change the allocations of Net Invention Proceeds as between the Inventor(s) primary department(s) and EVMS from those set forth in Section F.2 above. The Inventor(s) proportional share of Net Invention Proceeds will not be changed by any such action.

6. Should this Patent Policy be revised or changed at any time the Inventor(s) rights under this Patent Policy, including the fractional portion of Net Invention Proceeds to which each is entitled, will remain the same as when the first Invention Disclosure and Invention Assignment Forms were submitted for the Invention involved in accordance with this Patent Policy, subject, however, to any revisions of such entitlements made in accordance with this Patent Policy.

7. With respect to the departmental portion of any Net Invention Proceeds, the Department Chair shall have final utilization and allocation authority within all applicable EVMS policies, rules and regulations, subject, however, to any action by EVMS’ President pursuant to Section F.5 above.
8. With respect to the EVMS portion of any Net Invention Proceeds, EVMS’ President will have final utilization and allocation authority within all applicable EVMS policies, rules and regulations.

G. Contracts and Grants

1. Whenever EVMS Activity is conducted under a grant approved by EVMS, if any part of this Patent Policy conflicts with any term or requirement of such grant, the terms of such grant shall govern. Likewise, if any part of this Patent Policy conflicts with any applicable law or governmental regulation, the terms of such law or regulation shall govern. It is the policy of EVMS that all nongovernmental private sponsored research contracts must be in compliance with all applicable laws and regulations and to the extent feasible under the specific circumstances in any case, consistent with this Patent Policy and all other EVMS policies, rules and regulations. However, contracts with private sponsors may grant ownership interests or other rights in Inventions developed in the course of privately sponsored research to the private sponsors, in any case where EVMS deems such arrangements to be in the overall best interests of EVMS. In such cases the rights of the Inventor(s) will be subject to the terms of the arrangements between EVMS and the private sponsors, and may be less than the Inventor(s) would otherwise have received under this Patent Policy.

2. EVMS Members must be careful to avoid situations which could be considered conflicts of interest or violations of this Patent Policy when entering into agreements to provide consulting or other services to third parties, or agreements establishing joint venture or other relationships with third parties. Such situations might include, but are not limited to, ones which require EVMS Members to disclose or use proprietary EVMS knowledge, technology or licensing or patent information, and/or involve the assignment or allocation of licensing, ownership or other rights in Inventions to third parties. All such situations and agreements must be disclosed to and approved in advance in writing by the Director of the EVMS Office of Technology Transfer. EVMS Members may not enter into any agreements with outside persons or organizations that are inconsistent with EVMS’ rights and interests with regard to patents and other intellectual property as stated in or established pursuant to this Patent Policy, nor transfer any rights or materials relating to or embodying intellectual property subject to this Patent Policy, without the express prior written consent of the Director of the EVMS Office of Technology Transfer.

3. Cooperative or sponsored research agreements carried out by EVMS Members within any EVMS Activity must not transfer, assign or license ownership or other rights to any existing or potential Invention in consideration for research funds or otherwise unless approved by the Director of the EVMS Office of Technology Transfer. Any sponsor must pay a competitive price for the use of the Invention, which shall be determined by the EVMS Office of Technology Transfer at the time the technology is available for use and not earlier.

4. EVMS Inventors may not obtain, sell, assign, transfer or license any Invention or obtain any Invention Income with respect to any Invention, or attempt to do any of these things, prior to disclosure and assignment (if required by this Patent Policy) of the Invention to EVMS. After disclosure and assignment of any Invention to EVMS, the Inventor(s) may do these things in conjunction with the EVMS Office of Technology Transfer, but not independently.
5. EVMS Inventors must fully disclose to EVMS any economic and/or other relationship they may have with any third party, individual or entity to which Invention rights may be assigned or licensed, or which might otherwise have grounds to claim rights in or to any EVMS Invention based on such relationship. In such situations, the distributions of Net Invention Proceeds under paragraph F.2 above may be changed by the Director of the EVMS Office of Technology Transfer, with the concurrence of EVMS’ President, after review of the facts underlying such relationships.

II. COPYRIGHT POLICY

It is the policy of EVMS to foster and encourage the creation of copyrightable works by its faculty and others associated with the School, to leave ownership of such works and the copyrights in them with their creators in appropriate cases, but to retain rights for EVMS to use all such works in connection with its educational and research missions. Copyrights in certain works created by EVMS faculty and others associated with the School will be owned by EVMS, and ownership of copyrightable works will depend in each case on the category of the work and the status of its creator, as detailed more fully in this Copyright Policy. This Copyright Policy applies to all works of any type that are protectable under United States or other applicable copyright laws, other than computer software and programs and other copyrightable materials within the definition of “Inventions” in the EVMS Patent Policy (Section I above). Rights and obligations with regard to those materials are governed by the Patent Policy and not by this Copyright Policy.

A. Definitions. Wherever they are used in this Copyright Policy, terms defined in the EVMS Patent Policy have the meanings given to them there, and the following terms have the following meanings:

1. “Directed Works” are defined as works that are specifically funded by or created at the direction of EVMS. Such funding need not constitute Exceptional Use of EVMS Resources in order for the work to be considered a Directed Work. Directed Works also include works created by Faculty Members in an institute, center, department, or other unit that, with approval of EVMS’ President, has adopted rules providing that copyright in materials prepared by faculty in the course of their professional work or in the course of study with that unit vests in EVMS and not in the creator of the materials.

2. “Exceptional Use of EVMS Resources” is defined as EVMS support for the creation of a work with resources of a degree or nature not routinely made available to Faculty Members. Exceptional Use of EVMS Resources may include but is not limited to:

   a. Waiver of fees normally required to use specialized EVMS resources or facilities, such as equipment, production facilities, service laboratories, specialized computing resources, and studios;
   b. EVMS funding or gifts in support of the work’s creation; and
   c. Reduction in levels of teaching, service or other typical EVMS activities (e.g., course load, student advising responsibilities, division meetings, office hours, administrative responsibilities) specifically to facilitate creation of the work.
Ordinary or limited use of computers, laboratory space, libraries, office space or equipment, routine secretarial services at routine levels, telephones, and other informational resources shall not be considered Exceptional Use of EVMS Resources.

3. “Faculty Member” is defined as any full-time or part-time EVMS faculty employee.

4. “Non-Faculty Employee” is defined as any full-time or part-time employee of EVMS who is not a Faculty Member. Non-Faculty Employees include but are not limited to EVMS classified and unclassified employees, EVMS administrative staff and paid EVMS student assistants.

5. “Sponsored or Externally Contracted Works” are defined as works developed using funds supplied under contracts, grants and other arrangements between EVMS and third parties, including sponsored research agreements.

6. “Student” is defined as any EVMS student, resident, fellow or trainee.

7. “Student Works” are defined as papers, theses, dissertations, artistic and musical works, and other creative works made by Students.

8. “Traditional Non-Directed Works” are defined as pedagogical, scholarly, literary, or aesthetic (artistic) works resulting from non-directed effort. Such works may include, but are not necessarily limited to, textbooks, manuscripts, scholarly works, fixed lecture notes, distance learning materials not falling into one of the other categories of this Copyright Policy, works of art or design, musical scores, poems, films, videos, audio recordings, or other works of the kind that have historically been deemed in academic communities to be the property of their creators.

9. “Traditional Non-Directed Work Involving Exceptional use of EVMS Resources” is defined as any Traditional Non-Directed Work the creation of which was supported by, or utilized, or received the benefit of, or otherwise involved, Exceptional Use of EVMS Resources.

10. “Works Made for Hire” are defined as:

   a. Any work prepared by a Non-Faculty Employee within the scope of his or her employment;

   b. Any work specifically ordered or commissioned for use as a contribution to a collective work, as a part of a motion picture or other audiovisual work, as a translation, as a supplementary work, as a compilation, as an instructional text, as a test, as answer material for a test, as an atlas, or as any other type of work, if the creator of the work expressly agrees in writing that the work will be considered a work made for hire; and

   c. Any work produced for EVMS by an independent contractor.
B. Works Created by Faculty Members.

   a. Traditional Non-Directed Works.

      a. Ownership.

         i. The Faculty Member creator of a Traditional Non-Directed Work shall own the copyright in the work unless it is a Traditional Non-Directed Work Involving Exceptional Use of EVMS Resources, a Directed Work, a Sponsored or Externally Contracted Work requiring EVMS’ ownership of copyright or a Work Made for Hire.

         ii. As a condition of employment, each Faculty Member creator of a Traditional Non-Directed Works shall be deemed to have granted EVMS a non-exclusive, non-transferable, royalty-free license to use and permit others to use the work for EVMS’ own educational and research purposes, unless such a license will impede scholarly publication or similar activities.

         iii. Traditional Non-Directed Works for which authorship cannot be attributed entirely to one or more identifiable authors but instead resulted from simultaneous or sequential contributions over time by multiple authors, some of whom cannot be specifically identified, shall be owned by EVMS.

      b. Commercialization; Assignment to EVMS. Where an EVMS Faculty Member creator of a Traditional Non-Directed Work desires assistance from EVMS in commercializing the work, the creator shall report the work to the EVMS Office of Technology Transfer using such forms and procedures as the Office may require. The Office will not be obligated to accept any such work for commercialization, but if in its discretion it does so in any case, it will undertake reasonable efforts to commercialize the work. If EVMS is to be involved in commercializing a Traditional Non-Directed Work, the creator shall assign the work to EVMS using an assignment form provided by the EVMS Office of Technology Transfer, which will include provisions outlining the commercialization responsibilities of EVMS and a mechanism for the sharing of commercial proceeds with the creator.

      c. Allocation of Commercialization Proceeds. When any Traditional Non-Directed Work is assigned to EVMS and commercialized by EVMS, income from such commercialization shall be apportioned and distributed as though the work was an EVMS Invention under the EVMS Patent Policy.

   b. Traditional Non-Directed Works Involving Exceptional Use of EVMS Resources.

      a. Ownership. Traditional Non-Directed Works Involving Exceptional Use of EVMS Resources shall be owned by EVMS. Whether any given work involves Exceptional Use of EVMS Resources shall be determined initially by the Chair of the Department in which the creator has principally been involved or from which the creator has received resources to fund the work, taking into account the nature and amount of resources customarily made available to faculty in that Department for similar work.

      b. Release to Creator. The President of EVMS, with support from the Department Chair involved, may release or transfer EVMS’ rights in a Traditional Non-Directed Work Involving Exceptional Use of EVMS Resources to the work’s creator through
an appropriate written agreement.

c. Release Agreement. Any agreement for release or transfer to a creator of EVMS’ rights in a Traditional Non-Directed Work Involving Exceptional Use of EVMS Resources shall include provisions that:

i. EVMS shall have a non-exclusive, non-transferable, royalty-free license to use and permit others to use the work for EVMS’ own educational and research purposes; and

ii. If commercialization of the work generates income, either (a) the creator shall reimburse EVMS for the Exceptional Use of EVMS Resources involved in creation of the work, or (b) the creator shall share income from such commercialization with EVMS in an amount to be negotiated between the creator and the EVMS Office of Technology Transfer. Proceeds to EVMS from commercialization shall be allocated as directed by EVMS’ President or his designee.

d. Selection of Release Options. The Director of the EVMS Office of Technology Transfer, after consultation with the creator’s Department Chair, shall determine which of the options available under paragraph (c)(ii) above is to be selected in conjunction with the release of any work to its creator.

e. Joint ownership. In addition to discretionary release or transfer to the creator of a Traditional Non-Directed Work Involving Exceptional Use of EVMS Resources under paragraphs (c) and (d) above, the EVMS Office of Technology Transfer may alternatively negotiate with the creator for joint ownership of the work and sharing of income from the work. The Office will consult with the department chair involved in advance of, and keep such Department Chair(s) apprised of developments in, any such joint ownership negotiation.

f. Appeal. Disputes regarding whether a work is a Traditional Non-Directed Work Involving Exceptional Use of EVMS Resources shall be resolved under the dispute resolution procedures specified below. However, decisions regarding financial terms made under paragraph (c)(ii) above shall not be subject to appeal. In the event that the creator and EVMS are unable to reach agreement regarding such financial terms, ownership of the work at issue shall remain with EVMS.

c. Directed Works.

a. Ownership. EVMS shall own the copyrights in all Directed Works created by Faculty Members. Where practicable in the estimation of the creator’s Department Chair, and subject to any additional terms or limitations made necessary by EVMS licensing agreements or other obligations, the creator shall be granted a non-exclusive, non-transferable, royalty-free license to use the work for the creator’s own educational and research use.

b. Release. EVMS may release or transfer EVMS’ rights in a Directed Work to the work’s creator or agree to joint ownership of the Directed Work, subject to the same requirements, process and procedures as are applicable to release or joint ownership of Traditional Non-Directed Works Involving Exceptional Use of EVMS Resources under paragraphs 2(b)-(e) above.
Appendix O

c. Appeals. Disputes regarding whether a work is a Directed Work shall be resolved under the dispute resolution procedures specified below. However, decisions regarding financial terms with regard to any Directed Work released to its creator shall not be subject to appeal. In the event that the creator and EVMS are unable to reach agreement regarding such financial terms, ownership of the work at issue shall remain with EVMS.

d. Sponsored or Externally Contracted Works.

a. Ownership.

i. Unless the agreement under which a work is created expressly requires copyright ownership by EVMS or conveyance of rights to a third party, the Faculty Member creator of a Sponsored or Externally Contracted Work shall own the copyright in the work.

ii. As a condition of employment, each Faculty Member creator of a Sponsored or Externally Contracted Work shall be deemed to have granted EVMS a non-exclusive, non-transferable, royalty-free license to use and permit others to use the work for EVMS’ own educational and research purposes.

iii. EVMS will own a Sponsored or Externally Contracted Work where the relevant agreement requires copyright ownership by EVMS or conveyance of rights to a third party, in which case EVMS will convey rights to the third party as required. In each such case the creator of the work shall be required to report the work to the EVMS Office of Technology Transfer and assign all his or her rights in the work to EVMS, using such forms and procedures as the Office may require. Where a proposed sponsored research agreement or research grant will require that copyrightable works be owned by EVMS or a third party, the EVMS Office of Technology Transfer should inform the relevant Faculty Member(s) of the copyright provisions and secure the consent(s) of such Faculty Member(s) to such provisions before the agreement is signed or the grant accepted.

b. Release. EVMS may release or transfer EVMS’ rights in a Sponsored or Externally Contracted Work owned by EVMS to the work’s creator if EVMS has ascertained that such release or joint ownership will not conflict with the terms of the relevant agreement or grant, or has obtained the written consent of the other party to the agreement or grant to such release or joint ownership. Any such release, transfer or joint ownership shall be subject to the same requirements, process and procedures as are applicable to release or joint ownership of Traditional Non-Directed Works Involving Exceptional Use of EVMS Resources under paragraphs 2(b)-(e) above.

C. Works Created by Non-Faculty Employees.

Ownership. Copyright and all other rights in Works Made for Hire by Non-Faculty Employees shall be owned by EVMS. Exceptions to EVMS ownership may occur where:

a. EVMS, with approval of its President or his designee, enters into an agreement with a Non-Faculty Employee in advance of creation of a work specifying that the work shall be owned in whole or in part by the Non-Faculty Employee;
b. EVMS ownership is waived by the President or his designee; or

c. The work is a Traditional Non-Directed Work for which the EVMS Office of Technology Transfer waives EVMS ownership to the extent necessary to allow the Non-Faculty Employee creator(s) to assign rights to academic publishers for publication made with no more than nominal consideration to the creator(s).

D. Works Created by Independent Contractors.

Works produced for EVMS by independent contractors shall be considered Works Made for Hire and copyright and all other rights in such works shall be owned by EVMS. No EVMS unit or department shall enter into an arrangement for any work to be produced by an independent contractor without a written contract, signed by the independent contractor giving EVMS ownership of all copyrightable works produced by the independent contractor and requiring the independent contractor to execute assignments to EVMS of copyright and other rights in such works, as deemed necessary and advisable by the EVMS Office of Technology Transfer.

E. Works Created by EVMS Students.

Ownership and Use.

a. Students shall own copyrights in Student Works except in the following cases:

i. Copyrights to Traditional Non-Directed Works, Traditional Non-Directed Works Involving Exceptional Use of EVMS Resources and Directed Works created by any Faculty Member(s) with Student assistance shall be owned by the Faculty Member(s) and/or EVMS, as specified in Section B above.

ii. EVMS shall own the copyright in any Student Work that is a Sponsored or Externally Contracted Work.

iii. EVMS shall own the copyrights in all Student Works created in the course of Students’ paid employment or engagement by EVMS, except in any case where one of the exceptions set forth in Section C.1 above applies.

b. Student Works that constitute classroom, laboratory, and other academic materials generated by Students in the instructional process shall not be used for commercial purposes by the Students generating such materials. Students have a limited right to use these materials for personal, educational purposes.

III. TERMS APPLICABLE TO ALL INTELLECTUAL PROPERTY MATTERS

A. The EVMS Office of Technology Transfer will be responsible for managing and administering patent processing and other actions to secure and protect rights with regard to all Inventions, copyrightable works and other intellectual property in which EVMS has or acquires any right, title or interest under this Intellectual Property Policy. EVMS’ President may designate an alternative office to handle the administrative process for a specific kind of Invention, work or other intellectual property. In any case, the Director of the EVMS Office of Technology Transfer, acting under the direction of the EVMS President and in accordance with EVMS contracting policies and procedures, will have final signature authority.
concerning transfer and licensing of EVMS’ interests in all patents, Inventions, copyrightable works and other intellectual property.

B. All EVMS full-time and part-time employees shall be required to agree in writing to this Intellectual Property Policy by executing an EVMS PARTICIPATION/CONFIDENTIAL NON-DISCLOSURE AGREEMENT.

C. Questions of interpretation and disputes arising under this Intellectual Property Policy shall be submitted in writing to the EVMS Office of Technology Transfer, which will attempt to provide the requested interpretation and/or to assist in resolution of the dispute. If any question or dispute is not resolved within thirty (30) days after its written submittal to the Office of Technology Transfer, the party or parties involved may request its consideration by the Director of the Office. If the Director is unable to resolve the matter within sixty (60) days after its submittal to him, he may submit the matter to EVMS’ President for consideration.

The President, in his sole discretion, may (a) forward his recommended decision on the question or dispute to the appropriate EVMS Grievance Committee, or (b) establish a dispute resolution panel to conduct a hearing into the matter or make a recommendation based upon the written record, provided that all parties to the dispute shall in each case be given an opportunity to present evidence and arguments in support of their respective positions. Each party shall provide each other party to any dispute with a copy of any written materials submitted to the panel simultaneously with submission of such materials to the panel. Any hearing will be conducted following procedures established by the panel. No party shall have the right to be represented by counsel before the panel, but any party may be accompanied at a panel hearing by an advisor of such party’s choosing, who shall not participate in the hearing.

Each panel shall report its findings and conclusions to the President in writing along with a written recommendation for disposition of the matter within forty-five (45) days after appointment of the panel by the President; provided, however, that for good cause the President may extend the time period for such report by not more than an additional thirty (30) days. Copies of all findings, conclusions and recommendations of the panel shall be provided to all parties to the dispute. On receipt of such findings, conclusions and recommendations, the President shall issue a written decision in the matter to each of the parties to the dispute. The President’s decision shall be final and binding on all parties to the dispute and conclusive unless any party appeals such decision in writing to the EVMS Board of Visitors within fifteen (15) days after such party’s receipt of the President’s decision. The Board of Visitors shall review the appeal and shall render its decision in writing. The determination of the Board of Visitors shall be final, conclusive and binding on all parties to the dispute.

D. The EVMS Office of Technology Transfer may from time to time establish such processes and procedures as it deems necessary or desirable for implementation of this Intellectual Property Policy. It is recognized that situations, circumstances and issues relating to intellectual property subject to or other matters covered by this Policy may arise that are not specifically addressed by its terms and provisions or by processes or procedures established pursuant to it. In each such case the EVMS Office of Technology Transfer will determine how the situation, circumstance or issue should be addressed or resolved in keeping with the intent of this Policy and the overall best interests of EVMS, and address the situation, circumstance or issue in accordance with such determination.
E. In any case where EVMS owns or obtains ownership of an Invention or creation pursuant to either the EVMS Patent Policy (Section I above) or Copyright Policy (Section II above), if the EVMS Office of Technology Transfer believes such Invention or creation is or may be subject to protection under both patent law and copyright law, the Inventor(s)/creator(s) of such Invention/creation shall assign all of their patent, copyright and other rights in such Invention/creation to EVMS using such assignment form(s) as the Office may require. On commercialization of such works, the Inventor(s)/creator(s) shall be compensated in accordance with the provisions of the EVMS Patent Policy. The EVMS Office of Technology Transfer may on its own initiative investigate whether any Invention reported to it under the EVMS Patent Policy might also be subject to copyright protection and/or whether any work reported to it under the EVMS Copyright Policy might also be an Invention subject to the EVMS Patent Policy.

F. This Intellectual Property Policy shall take effect upon its adoption by the EVMS Board of Visitors and shall cover all Inventions, copyrightable works and other intellectual property in which EVMS has or could obtain rights pursuant to the terms of this Policy, for which no previous agreements or assignments have been entered into by EVMS with the Inventor(s) or creators of same.

For more information on this Intellectual Property Policy and its implementation at EVMS, please contact:

EVMS Office of Technology Transfer
504 Andrews Hall
Eastern Virginia Medical School
721 Fairfax Ave.
Norfolk, VA 23507
(757) 446-5099

Approved Board of Visitors, November 14, 2006
ENVIRONMENTAL HEALTH & SAFETY/RADIATION SAFETY

Eastern Virginia Medical School (EVMS) is committed to providing a safe teaching and research environment consistent with State and Federal regulations. Regulations from the Nuclear Regulatory Commission (NRC), Occupational Safety and Health Administration (OSHA), Environmental Protection Agency (EPA) and various State and local agencies mandate vigilant use and disposal of hazardous materials. This is accomplished through a series of training courses, procedures manuals (Biosafety Manual, Chemical Hygiene Plan and Radiation Safety Manual) and laboratory evaluations performed by Environmental Health & Safety/ Radiation Safety (EH&S/RS).

1. **Bio-Safety.** Manipulation of microorganisms and primary tissue samples can be done with minimal risk to employees by observing basic microbiology techniques. The *EVMS Biosafety Manual* presents a set of procedures to safely use microorganisms and recombinant DNA while the *EVMS Exposure Control Plan* provides procedures for handling and disposing blood and blood products required by the OSHA Bloodborne Pathogen Standard. Regulated Medical Wastes may only be disposed by incineration through authorized commercial vendor or steam sterilization at specific temperature, pressure and time.

2. **Chemical Safety.** Issuance of the OSHA “Laboratory Standard”, a performance standard, required development of a set of procedures to use and dispose of hazardous chemicals. Hazardous chemicals are those for which there is significant evidence based on at least one study that acute or chronic health effects may occur in exposed employees. Included are chemicals that are carcinogens, toxic or highly toxic agents, reproductive toxins, irritants, sensitizers, corrosives, hepatotoxins, neurotoxins, respirotoxins, agents which act on the hematopoietic system, and agents which may cause damage to the lungs, eyes skin, or mucous membranes.

The *EVMS Chemical Hygiene Plan (CHP)* establishes responsibilities for principal investigators, employees and the Environmental Health & Safety Office in regard to laboratory safety. By applying CHP procedures along with use of engineering controls, personal protective equipment and work practices commensurate with the risk of the hazardous chemical, a safe working environment can be maintained. Principal investigators must be aware of acute and chronic health hazards associated with hazardous chemicals used in their protocols and this information must be conveyed to their laboratory employees. Health hazard information is available in Material Safety Data Sheets (MSDS’s) prepared by the manufacturer for each chemical.

Chemicals must also be disposed properly. The MSDS provides general information about disposal; however, more specific information is available from EH&S. At EVMS, hazardous materials may not be disposed “down the drain”, they must be segregated and identified by chemical and concentration in each container. Hazardous chemicals are collected by EH&S and prepared for shipment to facilities permitted to treat hazardous wastes. When developing research proposals, investigators must consider the types of hazardous materials involved and then include adequate safety equipment and practices to perform the procedure with minimal risk to laboratory personnel. Waste minimization must be considered during protocol development by using micro techniques and purchasing smaller quantities of chemicals. Some chemicals are also very costly to dispose.

3. **Radiation Safety.** EVMS is authorized to use radioactive materials by the NRC and Virginia Department of Health. To possess these materials, individuals must have training and experience commensurate with their proposed use. The *EVMS Radiation Safety Manual* lists procedures for requesting authorization to use radioactive materials as well as laboratory procedures to ensure
control of the material and minimal exposure to users. Faculty members may become “Authorized Users” that extends privileges to possess and use radioactive materials after adequate training and experience are demonstrated via application to the Radiation Safety Committee.

Radioactivity may only be purchased by Authorized Users. Central ordering and receipt are conducted at the Radiation Safety Office in Lewis Hall. Radioactive waste must be disposed by procedures described in the \textit{EVMS Radiation Safety Manual} and training courses offered by Radiation Safety.

4. \textbf{Emergencies}. In the event of a laboratory emergency, such as fire, spill, loss of containment or explosion, etc., immediately notify other workers in the area, EH&S/RS and Security. Prior to vacating the immediate area, take initial steps to contain a spill or smother a small fire, then evacuate the room. In the event of fire, pull the nearest fire alarm. If you or a coworker are contaminated, remove your outer protective clothing and go to the nearest eyewash or safety shower and rinse the material from the skin. After initial emergency actions, remain in the area until assistance arrives. If injury has occurred, contact Human Resources for guidance on seeking medical attention. Biological, chemical or radioactive materials can be tracked from the area of a spill, so remain near the incident to prevent the spread of contamination.
INFORMATION TECHNOLOGY POLICIES AND PROCEDURES

GENERAL PRINCIPLES

Access to computer systems and networks owned or operated by Eastern Virginia Medical School imposes certain responsibilities and obligations and is granted subject to Medical School policies, and local, state, and federal laws. Acceptable use always is ethical, reflects academic honesty, and shows restraint in the consumption of shared resources. It demonstrates respect for intellectual property, ownership of data, system security mechanisms, and individuals' rights to privacy and to freedom from intimidation and harassment.

In making acceptable use of Information Technology resources you must:

- use resources only for authorized purposes.
- protect your user id and system from unauthorized use. You are responsible for all activities on your user id or that originates from your system.
- access only information that is your own, that is publicly available, or to which you have been given authorized access.
- use only legal versions of copyrighted software in compliance with vendor license requirements.
- be considerate in your use of shared resources. Refrain from monopolizing systems, degrading services, or wasting connect time, disk space, printer paper, or other resources.

In making acceptable use of Information Technology resources you must NOT:

- use another person's system, user id, password, files, or data without permission.
- use computer programs to decode passwords or access control information.
- attempt to circumvent or subvert system or network security measures.
- engage in any activity that might be purposefully harmful to systems or to any information stored therein, such as creating or propagating viruses, disrupting services, or damaging files or making unauthorized modifications to Medical School data.
- use Medical School systems for commercial or partisan political purposes, such as using electronic mail to circulate advertising for products or for political candidates.
- use Medical School systems for sectarian religious purposes, i.e., those which do not embrace all religious beliefs, but espouse particular perspectives only.
- make or use illegal copies of copyrighted software, store such copies on Medical School systems, or transmit them over Medical School networks.
- waste computing resources or network resources, for example, by intentionally placing a program in an endless loop, printing excessive amounts of paper, or by sending chain letters or unsolicited mass mailings.
- use the Medical School's systems or networks for personal gain; for example, by selling access to your user id or to Medical School systems or networks, or by performing work for profit with Medical School resources in a manner not authorized by the Medical School.
- engage in any other activity that does not comply with the General Principles presented above.

DISCIPLINARY PROCEDURES

Appropriate disciplinary action up to and including termination of employment will be taken when the provisions of this policy are violated. Refer to Human Resources Policies and Procedures – Disciplinary Action: Policy 4.50.
ELECTRONIC MAIL POLICY

The Medical School’s electronic mail system and services are the sole property of the Medical School. The Medical School will make reasonable efforts to maintain the integrity and effective operation of its electronic mail system, but users are advised that those systems should in no way be regarded as a secure medium for the communication of sensitive or confidential information. Because of the nature and technology of electronic communication, the Medical School can assure neither the privacy of an individual user’s use of the Medical School’s electronic mail resources nor the confidentiality of particular messages that may be created, transmitted, received, or stored thereby. Users expressly waive any right of privacy in anything they create, store, send or receive on the computer or through the Internet or any other computer network. By accepting an EVMS e-mail account, users consent to allowing EVMS personnel authorized by the President or Dean/Provost as advised by the Dean’s Information Services Subcommittee, Planning & Management Subcommittee to access and review all email materials users create, store, send or receive on computers or through the campus computer network.

In addition, Virginia law provides that communications of EVMS personnel that are sent by electronic mail may constitute correspondence and, therefore, may be considered public records subject to public inspection or subpoena by the legal system.

SERVICE RESTRICTIONS

Those who use EVMS’ electronic mail services are expected to do so responsibly, that is, to comply with state and federal laws, with this and other policies and procedures of the Medical School, and with normal standards of professional and personal courtesy and conduct. Access to EVMS’ electronic mail services, when provided, is a privilege that may be wholly or partially restricted by the Medical School without prior notice and without the consent of the e-mail user when required by and consistent with law, when there is substantiated reason to believe that violations of policy or law have taken place, or, in exceptional cases, when required to meet time-dependent, critical operational needs. Such restriction is subject to the approval of the President or the Dean/Provost or his/her designee.

PERMISSIBLE USES OF ELECTRONIC MAIL

- Authorized Users

Only EVMS faculty, staff, residents, and students and other persons who have received permission under the appropriate Medical School authority are authorized users of the EVMS’ electronic mail systems and resources. Users are responsible for safe guarding their passwords for access to the computer system. Individual passwords should not be printed, stored online, or given to others. Users are responsible for all transactions made using their passwords. No user may access the computer system using another user’s password or account. Users may not disguise their identity while using the computer system. Users may be required to change passwords periodically.

- Purpose of Use

The use of any EVMS resources for electronic mail must be related to the Medical School’s business, including academic pursuits. Incidental and occasional personal use of electronic mail may occur when such use does not impinge on work time or generate a direct cost for the Medical School. Any such incidental and occasional use of EVMS electronic mail resources for personal purposes is subject to all of the above provisions of this policy.
PROHIBITED USES OF ELECTRONIC MAIL

- Personal use that creates a direct cost for EVMS is prohibited; e.g., sending personal e-mail message during regular working hours.
- For personal monetary gain or for commercial purposes that are not directly related to EVMS business.
- Sending copies of documents in violation of copyright laws.
- Inclusion of the work of others into electronic mail communications in violation of copyright laws.
- Capture and opening of electronic mail except as required in order for authorized employees to diagnose and correct delivery problems.
- Use of electronic mail to harass or intimidate others or to interfere with the ability of others to conduct EVMS business.
- Use of electronic mail systems for any purpose restricted or prohibited by laws or regulations.
- “Spoofing,” i.e., constructing an electronic mail communication so it appears to be from someone else.
- “Snooping,” i.e., obtaining access to the files or electronic mail of others for the purpose of satisfying idle curiosity, with no substantial EVMS business purpose.
- Attempting unauthorized access to electronic mail or attempting to breach any security measures on any electronic mail system, or attempting to intercept any electronic mail transmissions without proper authorization.
- Purposes that could reasonably be expected to cause, directly or indirectly, excessive strain on any computing facilities, or unwarranted or unsolicited interference with others’ use of e-mail or e-mail systems. Such uses include, but are not limited to, the use of e-mail services to (i) send or forward e-mail chain letters; (ii) “spam”, that is, to exploit list servers or similar broadcast systems for purposes beyond their intended scope to amplify the widespread distribution of unsolicited e-mail; and (iii) “letter-bomb”, that is, to resend the same e-mail repeatedly to one or more recipients to interfere with the recipient’s use of e-mail.
- Broadcast messages, that is an e-mail sent to all e-mail users except when authorized by the President, Dean/Provost, Vice Presidents, Associate Dean for Information Technology, MIS Department Directors, and/or the Director of Human Resources.
- Use of electronic mail in a sexually explicit, profane, obscene, x-rated, defamatory or threatening manner.
- Use of e-mail to support a “for-profit” activity.

EVMS ACCESS AND DISCLOSURE

General Provisions

- To the extent permitted by law, the Medical School reserves the right to access and disclose the contents of faculty, employees, residents, students’ and other users’ electronic mail without the consent of the user. EVMS will do so when it believes it has legitimate business needs including, but not limited to, those listed in “Inspection and Disclosure of Communications” below and only after explicit authorization is obtained from the President of the Medical School or his/her designee.
- Faculty, employees, residents, students and other users are advised that EVMS’ electronic mail systems should be treated like a shared filing system with the expectation that communications sent or received may be made available for review by any authorized EVMS official for purposes related to EVMS business.
Electronic mail of students may constitute “education records” subject to the provisions of the federal statute known as the Family Educational Rights and Privacy Act of 1974 (FERPA). EVMS may access, inspect, and disclose such records under conditions that are set forth in the statute.

Any user of the EVMS’s electronic mail resources who makes use of any encryption device to restrict or inhibit access to his or her electronic mail must provide access to such encrypted communications when requested to do so under the authority of the Medical School President or DeanProvost or his/her designee.

Monitoring of Communications

EVMS will not monitor electronic mail as a routine matter but it may do so to the extent permitted by law as the School deems necessary for purposes of maintaining the integrity and effective operation of the School’s electronic mail systems.

Inspection and Disclosure of Communications

EVMS reserves the right to inspect and disclose the contents of electronic mail:
- in the course of an investigation triggered by alleged misconduct or misuse,
- as needed to protect health and safety,
- as needed to prevent interference with the academic mission, or
- as needed to locate substantive information required for EVMS business that is not more readily available by some other means.

EVMS will inspect and disclose the contents of electronic mail when such action is necessary to respond to legal processes and to fulfill EVMS’ obligations to third parties.

Limitations on Disclosure and Use of Information Obtained by Means of Access or Monitoring.

- The contents of EVMS electronic mail communications may be disclosed without permission of the user. EVMS will attempt to refrain from disclosure of particular communications if disclosure appears likely to create personal embarrassment, unless such disclosure is required to serve a business purpose or satisfy a legal obligation.

Special Procedures to Approve Access to, Disclosure of, or Use of Electronic Mail Communications.

- Individuals needing to access the electronic mail communications of others, to use information gained from such access, and/or to disclose information from such access and who do not have the prior consent of the user must obtain approval in advance of such activity from the Medical School President or DeanProvost or his/her designee.

POLICY VIOLATIONS

Appropriate disciplinary action will be taken, up to and including dismissal, against individuals found to have engaged in a prohibited use of EVMS’ electronic mail resources. Illegal acts involving EVMS’ computing resources may also subject users to prosecution by state and federal authorities.
MANAGEMENT OF ELECTRONIC MAIL SYSTEM

Users should review their messages every week and delete those that are not needed. E-mail accounts will be deleted when a user is no longer affiliated with EVMS. Accounts will be deactivated for the infringement of any written or implied policy or any violation of state or federal laws. Accounts that remain unused for periods longer than six months will be deleted unless specific arrangements have been made with the email system administrator.

INTERNET USE POLICY

Certain employees may be provided with access to the Internet to assist them in performing their jobs. The Internet can be a valuable source of information and research. In addition to e-mail, it can provide an excellent means of communicating with other faculty, staff, students, outside vendors, and other businesses. Use of the Internet must be tempered with common sense and good judgment. If you abuse your right to use the Internet, it will be withdrawn. In addition, you may be subject to disciplinary action, including possible termination, and civil and criminal liability. Your use of the Internet is governed by this policy.

DISCLAIMER OF LIABILITY FOR USE OF INTERNET

Eastern Virginia Medical School is not responsible for material viewed or downloaded by users from the Internet. The Internet is a worldwide network of computers that contains millions of pages of information. Users are cautioned that many of these pages include offensive, sexually explicit, and inappropriate material. In general, it is difficult to avoid at least some contact with this material while using the Internet. Even innocuous search requests may lead to sites with highly offensive content. In addition, having an Internet e-mail address may lead to the receipt of unsolicited e-mail containing offensive content. Users accessing the Internet do so at their own risk.

EMPLOYEE’S DUTY OF CARE

Employees should endeavor to make each electronic communication truthful and accurate. You should use the same care in drafting Internet or intranet documents as you would for any other written communication.

EMPLOYEE’S DUTY NOT TO WASTE COMPUTER RESOURCES

Employees must not deliberately perform acts that waste computer resources or unfairly monopolize resources to the exclusion of others. These acts include, but are not limited to, sending mass mailings or chain letters, spending excessive amounts of time on the Internet, playing games, engaging in online chat groups, printing multiple copies of documents, or otherwise creating unnecessary network traffic. Because audio, video, and picture files require significant storage space, files of this sort may not be downloaded unless they are business-related.

NO EXPECTATION OF PRIVACY

The computers and computer accounts given to employees are to assist them in performing their jobs. Faculty, staff, and students should not have an expectation of privacy in anything they create, store, send, or receive on the computer system. The computer system belongs to Eastern Virginia Medical School and may only be used for business purposes.
Faculty, staff and students should never consider electronic communications to be either private or secure. Internet e-mail may be stored indefinitely on any number of computers, including that of the recipient. Copies of your messages may be forwarded to others either electronically or on paper. In addition, Internet e-mail sent to nonexistent or incorrect user names may be delivered to persons that you never intended.

**MONITORING OF COMPUTER USAGE**

Eastern Virginia Medical School has the right, but not the duty, to monitor any and all aspects of its computer system, including, but not limited to, monitoring sites visited by employees on the Internet and news groups, reviewing material downloaded or uploaded by users to the Internet, and reviewing e-mail sent and received by users.

**BLOCKING OF INAPPROPRIATE CONTENT**

Eastern Virginia Medical School may use software to identify inappropriate or sexually explicit Internet sites. Such sites may be blocked from access by Eastern Virginia Medical School network system. In the event you nonetheless encounter inappropriate or sexually explicit material while browsing on the Internet, immediately disconnect from the site.

**PROHIBITED ACTIVITIES**

Material that is fraudulent, harassing, sexually explicit, profane, obscene, intimidating, defamatory, or otherwise unlawful or inappropriate may not be sent by e-mail or other form of electronic communication (bulletin board systems, newsgroups, chat groups), downloaded from the Internet, or displayed on or stored on Eastern Virginia Medical School’s computers. Employees encountering or receiving this kind of material should immediately report the incident to their supervisors.

**GAMES AND ENTERTAINMENT SOFTWARE**

Employees may not use the company's Internet connection to download games or other entertainment software or play games over the Internet.

**ILLEGAL COPYING**

Employees may not illegally copy material protected under copyright law or make that material available to others for copying. You are responsible for complying with copyright law and applicable licenses that may apply to software, files, graphics, documents, messages, and other material you wish to download or copy. You may not agree to a license or download any material for which a registration fee is charged without first obtaining the express written permission of your supervisor.

**ACCESSING THE INTERNET**

To ensure security and avoid the spread of viruses, employees accessing the Internet through a computer attached to Eastern Virginia Medical School’s network must do so through an approved Internet firewall. Accessing the Internet directly by modem is prohibited unless the
computer you are using is not connected to the school’s network.

**VIRUS DETECTION**

Files obtained from sources outside Eastern Virginia Medical School (EVMS), including disks brought from home; files downloaded from the Internet, newsgroups, bulletin boards, or other online services; files attached to e-mail; and files provided by customers or vendors, may contain dangerous computer viruses that may damage the school’s network. Employees should never download files from the Internet, accept e-mail attachments from outsiders or use disks from non-EVMS sources, without first scanning the material with EVMS approved virus-checking software. If you suspect that a virus has been introduced into the School’s network, immediately notify the Eastern Virginia Medical School Network Center (446-5871).

**ALTERING ATTRIBUTION INFORMATION**

Employees must not alter the "From" line or other attribution-of-origin information in e-mail messages, or postings. Anonymous or pseudonymous electronic communications are forbidden. Employees must identify themselves honestly and accurately when making postings to newsgroups, sending e-mail, or otherwise communicating online.

**ATTORNEY-CLIENT COMMUNICATIONS**

E-mail sent from or to an attorney representing EVMS should include this warning header on each page: "ATTORNEY CLIENT PRIVILEGED; DO NOT FORWARD WITHOUT PERMISSION." Communications from attorneys may not be forwarded without the sender's express permission.

**USE OF ENCRYPTION SOFTWARE**

Faculty, staff and students may not install or use encryption software on any of Eastern Virginia Medical School’s computers without first obtaining written permission from their supervisor. You must not use encryption keys that are unknown to your supervisor. The encryption software provided as part of approved browsers such as Netscape and Internet Explorer is allowed.

**AMENDMENTS AND REVISIONS**

Violations of this policy will be taken seriously and may result in disciplinary action, including possible termination, and civil and criminal liability.
ANIMALS ON CAMPUS POLICY

Dogs, cats, and other animals, except Seeing Eye dogs, dogs that assist the physically challenged, and animals authorized for laboratory or research purposes, are prohibited in all EVMS buildings, offices, and classrooms, and are subject to being removed from the campus and impounded by the City of Norfolk Animal Protection Department.

Dogs, cats, and other animals are permitted on campus grounds as long as they are accompanied by an attendant. Animals found unattended on the campus, including animals found tied or leashed to trees, poles, or other objects on the campus, are subject to being impounded by the City of Norfolk Animal Protection Department.

The Director of Public Safety is responsible for the administration and implementation of this policy.

The owner of any animal impounded by the City of Norfolk Animal Protection Department is responsible for all resulting fines and fees. Civil litigation may result if injuries or damages are inflicted by the animal.

POSTING OF SIGNS AND ADVERTISEMENTS POLICY

No materials shall be posted on trees, windows, walls, doors, or glass panels either inside or outside medical school buildings. The only exceptions are (1) materials relating to fire, health, or safety (such materials must be approved for posting by the Director of Public Safety) and (2) materials posted on bulletin boards.
INCLEMENT WEATHER PROCEDURE (Human Resources Policy 3.43)

Policy

It is the policy of the Eastern Virginia Medical School to provide paid time off to eligible employees when operations cease due to severe inclement weather.

Procedure

1. The President or his designated representative will be solely responsible for making the decision to cancel or cease operations due to weather conditions.

2. If the decision is made prior to normal working hours, the announcement will be made over local TV and radio stations.

3. If the decision is made during normal working hours, the Human Resources Department will notify all departments. In addition a broadcast E-mail to all staff will be sent.

4. Eligible employees (see Policy 1.10) who were normally scheduled to work during the closing will receive their regular pay for the time missed. Employees scheduled for vacation or who are on sick leave will still be charged for vacation/sick leave, not inclement weather.

5. In the absence of an official closing, employees failing to report for work or leaving work early will have the absence charged against their vacation time (if available) or considered unpaid time. In the event of an official early closing, employees who reported to work and who remained at work until or after time of official closing, will not be charged vacation or unpaid leave for the duration of the day. Employees who did not report to work will have the full day charged to their vacation time (if available) or will be considered unpaid time. Employees leaving prior to official closing will be charged vacation (if available) or leave without pay for the balance of the day.

6. The nature and mission of our organization dictates that certain services are provided on a continuing basis without interruption due to bad weather. The Supervisor will identify such personnel. These employees will receive paid time off within the same pay period or additional pay for non-exempt employees, in accordance with the provisions of the Fair Labor and Standards Act (FLSA).

SMOKING POLICY (Human Resources Policy 4.54)

Policy

Effective August 1, 1990, it is the policy of the Eastern Virginia Medical School to provide a smoke-free environment for all employees. Smoking is prohibited in all facilities operated by the Medical School. The purpose of this policy is to provide a healthier and safer environment for employees, students, patients and visitors.

Procedure

Compliance is expected by all employees, students, patients and visitors. Employees who violate the policy are subject to disciplinary action (Reference Policy No. 4.50).
Responsibility

It is the responsibility of every employee, student, patient and visitor to ensure adherence to this policy.

Designated smoking areas will be provided outside all EVMS facilities. Benches and sand urns will be located as follows:

1. Hofheimer Hall - under front portico on either side of the main doors.
2. Lewis Hall - under the west portico (CHKD side).
3. Andrews Hall - back courtyard.
4. Smith-Rogers Hall - outside main entry.
5. Portsmouth Family Practice - outside main entry.
6. South Campus - under front portico (north side of building) and under main entry portico (east side of building).
7. Auxiliary Services - 154 Colley Avenue - on west side of building.
8. Materials Management - 711 South Hampton - under main entry portico.

POLICY ON ALCOHOL AND DRUGS (Human Resources Policy 4.53)

Policy

It is the policy of Eastern Virginia Medical School (EVMS) in compliance with the Drug Free Workplace Act of 1988, covering all Federal grantees, and the Drug Free Schools and Communities Act of 1989 to provide a safe and drug free environment for its students, employees, patients and visitors. This includes an environment free of unlawful or unauthorized manufacture, distribution, dispensation, possession, sale, transfer, or use of an illegal drug, e.g., a substance controlled under Section 202 of the Controlled Substances Act. Provisions of this policy 4.53 relate to all students, residents, faculty and employees with the exception of pre-placement testing which does not apply to students.

Procedures

A. Pre-Placement Testing

EVMS complies with the provisions of the Omnibus Transportation Act of 1991, the Drug Free Schools and Communities Act of 1989 and the Drug Free Workplace Act of 1988. This policy is intended to attract and maintain a workforce free of alcohol and drug abuse that may impair judgment and job performance and may result in an accident or injury to self or others. Therefore, it is the policy of EVMS to perform a drug-screen and, if indicated, an alcohol screen on all individuals prior to commencing employment.
1. All applicants will be notified that positions at EVMS require pre-placement substance abuse screening. These individuals will be asked to sign a statement authorizing testing. Persons who refuse will not be hired.

2. The Employee Occupational Health Department (EOHD) will perform a pre-placement alcohol and/or drug-screen prior to the commencement of employment.

3. If the test is positive, he/she will have the opportunity to discuss the results with the Medical Review Officer (MRO). The MRO or his/her designee will report verified positive test results to the Director of Human Resources who in turn will notify the appropriate authority. The employment offer will be withdrawn for “conditional new hires” who have had a verified positive alcohol and/or drug-screen.

4. The individual will be eligible to reapply for employment in twelve months. However, to be reconsidered for employment, the individual must show evidence that a drug abuse intervention or counseling program has been successfully completed or is ongoing by a Substance Abuse Professional. The individual must also successfully complete another pre-placement alcohol and/or drug-screen.

5. Upon successful completion of testing, EOHD will notify Human Resources to continue with the hiring process.

B. Employees and Reasonable Suspicion Testing

1. An employee legitimately using or being under the influence of medications (legal drugs) during working hours must candidly notify his/her supervisor and/or the Employee Occupational Health Department of this prior to commencing work if the medication may impair his/her performance, judgment, or coordination.

2. The School may perform a “Work Fitness Impairment Evaluation” (WFIE), including drug and alcohol testing, to determine compliance with this policy:
   a. Based on a suspicion of violation of this Drug and Alcohol Policy
   b. In conjunction with other legitimate physical examinations or detection programs.
   c. Following work-related accidents/incidents requiring medical care.
   d. Randomly for all drivers covered by Department of Transportation regulations.
   e. In follow-up to a rehabilitation program.
   f. As required by law.

3. Supervisors are required to monitor and document the behavior and work patterns of their staff. Significant emotional, mood or behavior changes, repeated absenteeism, errors, or general behavior or signs consistent with the use of alcohol or drugs should be documented and reported to Human Resources and Employee Occupational Health immediately.

4. When possible, a second supervisor should observe the employee’s behavior, and both supervisors document their observations independently.

5. The employee will be informed by their supervisor that they are being asked to submit to a WFIE and the reason for the testing.

6. The supervisor will escort the employee to the EOHD.
7. Consent will be obtained to perform the WFIE and to release the results of the evaluation to the Director of Human Resources and to the Dean/Provost. Student results will be released to the Associate Dean of Student Affairs. Refusal to consent will result in disciplinary action up to and including discharge.

8. Appropriate chain-of-custody procedures will be followed to protect the integrity of the specimen and to protect the dignity of the employee.

9. An employee will be placed on administrative leave pending results of alcohol and drug testing. Leave will be with pay if test results are negative.

10. Results of the drug and alcohol testing will be referred to a Medical Review Officer (MRO). If the results of testing are positive, the MRO will discuss the results with the employee, and the employee will have an opportunity to explain positive results. The MRO, or his/her designee, will communicate all final results to Human Resources.

11. The School follows Department of Transportation (DOT) standards for classification of results of alcohol tests. In addition, results indicating motor impairment will require that the individual undergo an evaluation by a Substance Abuse Professional.

12. Positive results violate this policy and will result in action up to and including discharge. Disciplinary actions of health professionals will be reported to the appropriate entity as required by law.

13. Following the WFIE, employees will either be recommended to return to work, go home, or to go to another facility. If the recommendation is made to the employee to return home or to another medical facility, transportation arrangements will be made for the employee.

14. Supervisors should not attempt to use force in seeking compliance with requests. Security should be notified if the supervisor determines the employee should leave the work area and the employee refuses.

15. Supervisors should limit conversations concerning possible violations of this policy to those persons who are participating in any questioning, evaluations, investigation, or disciplinary action and have a strict need to know.

16. After appropriate action is taken following alcohol and/or drug impairment, or return to duty after completion of professional treatment of substance abuse, the supervisor, in conjunction with the Director of Human Resources, will coordinate with the appropriate institutional authority to determine conditions for continued employment. Such conditions may include periodic unannounced follow-up testing as recommended by a Substance Abuse Professional.

C. Random Drug Testing

EVMS will implement and schedule random drug and substance abuse testing for drivers in compliance with Omnibus Transportation Act of 1991.
D. Education

1. Effects of Alcohol

Alcohol is a depressant that reduces activity in the central nervous system. A person under the influence of alcohol shows loose muscle tone and loss of fine motor skills. The person’s eyes appear glossy and slow to response. Alcohol can decrease the heart rate, lower blood pressure and respiration rate, and slow reaction time. Sweating, staggering stance and speech, and odor on the breath are all common to a person under the influence of alcohol.

2. Blood Alcohol Level

- An individual Blood Alcohol Concentration (BAC) is a good indication of how intoxicated an individual may be. A person’s weight, tolerance and consumption can affect the BAC level. These are some effects related to BAC:
  - 0.02-0.03: No loss of coordination, slight relaxation, and loss of shyness. Depressant effects are not apparent (one 12-ounce beer consumed in one hour).
  - 0.04-0.06: Feeling of well-being, relaxation, lower inhibitions, a sense of warmth and relaxation some minor impairment of reasoning and memory, lowering of caution.
  - 0.07-0.09: Slight impairment of balance, speech, vision, reaction time, and hearing. Judgment and self-control are reduced, and caution, reason and memory are impaired.
  - 0.10-0.125: Significant impairment of motor coordination and loss of good judgment. Speech may be slurred: balance, vision reaction time and hearing will be impaired. It is illegal to operate a motor vehicle at this level of intoxication (four 12-ounce beers consumed in one hour).
  - 0.13-0.15: Gross motor impairment and lack of physical control. Blurred vision and major loss of balance. Euphoria is reduced.
  - 0.16-0.20: Anxiety, restlessness, and nausea.
  - 0.25: Needs assistance in walking, total mental confusion, and nausea.
  - 0.30: Loss of consciousness.
  - 0.40-up: Onset of coma, possible death due to respiratory arrest.

3. Risks of Alcoholism

There are numerous effects on the body due to the over consumption of alcohol.

- Gastrointestinal system can be affected when large amounts of alcohol are consumed which increases the amount of hydrochloric acid that is secreted from the stomach lining. This can cause gastritis, ulcers and severe bleeding.
Fatty liver disorder is caused by a decreased breakdown of fatty acids by the liver and occurs when 30 to 50 percent of the drinker’s dietary calories consist of alcohol.

Alcoholic hepatitis occurs when the liver becomes inflamed, damaging the liver cells, and metabolism is seriously disturbed. A person may become weak and experience loss of appetite, nausea, fever and mild weight loss.

Cirrhosis of the liver is a condition in which there is major destruction of liver cells and a build-up of scar tissue. One in ten long-term drinkers will develop cirrhosis and may die within five years.

Moderate drinking can significantly increase a person’s blood pressure which increases the risk of a heart attack and stroke. As little as two drinks a day can increase this risk.

Mothers who drink frequently during pregnancy may have children born with serious birth defects. These defects are known as Fetal Alcohol Syndrome (FAS). This can cause a baby to be born with a low birth weight, physical deformities, heart defects, and mental retardation.

4. Drugs and their Risk

a. Amphetamines- Developed to treat narcolepsy, obesity, fatigue, Parkinsonism, depressive syndromes, petitmal epilepsy and behavior disorders. Amphetamines are usually ingested orally and effect the central nervous system with increased alertness, exhilaration, a feeling of self-confidence, and increased motor activity. The performance of physical and mental tasks is improved. A prolonged use of the drug can have reverse effects with individuals feeling fatigued and depressed. Side effects include headache, dizziness, confusion, anxiety and commotion.

b. Phencyclidine(PCP)- Also known as Angel Dust, Peace pill, Dust, Crystal, Rocket fuel and Super grass, PCP was originally used as an anesthetic. PCP can be smoked, taken orally or injected. While having no major physical dependency, the psychological dependency is very high. It causes delusions, hallucinations, poor perception of time and distance, and hyperactivity. Its effects can cause numbness, cramps, and loss of muscle coordination, nausea, problems speaking and a decreased sensitivity to pain. Over the long term PCP can cause loss of memory, stuttering, depression, anxiety and brain damage. There are over 10,000 emergency room visits each year because of PCP.

c. Marijuana- Also known as the cannabis plant, marijuana has a chemical called Delta-9-THC. Tests have shown that a number of problems can come from overuse of the drug. THC can cause a loss of memory, increase heart rate by 50%, and develop bronchitis, emphysema, and cancer. One marijuana cigarette does the damage of an entire pack of cigarettes. Men who smoke THC can have lower sperm counts, while women may have a disrupted menstrual cycle. It can also delay normal sexual development and can cause permanent infertility. Pregnant women can pass THC to their unborn children causing underweight, deformation, and stillborn. THC can also reduce the body’s ability to fight off infection, leaving individuals more frequently ill. Marijuana does cause chemical dependency, but it can also have a high psychological addiction.
d. Opiates- This is a narcotic that contains Opium which can be taken orally or inhaled. Opium is an ingredient in Morphine Codeine Thebaine which is used solely in hospitals as a pain reliever. It is injected intramuscularly or intravenously. Codeine is produced from morphine and is found in several over the counter drugs such as Robitussin, aspirin and Cheracol. Drowsiness, respiratory depression, and nausea are possible effects of opium. An overdose of opium can cause slow breathing, clammy skin, convulsions, coma, and possible death.

e. Cocaine- this drug comes from the Coca leaf grown in South America. After a chemical process, the drug is made in a powder form. It is also known as coke, snow, C, blow and lady. Cocaine is addictive and can cause a number of physical and mental complications to the user. Some signs of cocaine use include dilation of pupils, runny or stuffed-up nose, less need for food or rest, an individual will be more talkative and sociable. Cocaine can cause anxiety, irritability, aggressiveness, paranoia, violence, apathy, confusion, and memory problems, just to name a few. High-dosage can cause personal neglect, extreme depression, panic attacks, rupture of blood vessels, seizures and heart failure- all leading to possible death.

f. Schedule 1 drugs- there are other natural, semi-synthetic and synthetic drugs of abuse that have their own mental and physiological effects and complications. Further information on these drugs can be obtained through the educational resources listed later in this document.

E. Violation and Penalties

EVMS is subject to the State and Federal laws regarding manufacture, distribution, possession with intent to manufacture or distribute, and simple possession of drugs and alcohol. Individuals must be aware of and follow these laws or face legal prosecution.

1. Alcohol

The Virginia Alcohol Beverage Control Act is required to follow all laws and regulations under the Federal Drug-Free Schools and Communities Act of 1989.

- It is illegal for any person under the age of 21 to purchase or possess any alcoholic beverage. Violation of the law exposes the violator to a misdemeanor conviction for which the punishment is either confinement in jail for up to 12 months, a fine of up to $2,500 or both. An individual’s Virginia driver’s license can also be suspended for up to a year.
- It is illegal for any person to sell alcoholic beverages, or buy alcoholic beverages for a person under the age of 21. Violation of the law results in a misdemeanor conviction with punishment up to 12 months in jail, a $2,500 fine or both.
- It is illegal for any person to consume alcoholic beverages in unlicensed public places. Violation of the law can result in a $250 fine.

2. Drugs

a. Virginia State Laws

Under the Virginia Drug Control Act, it is unlawful for the possession, distribution and use of controlled substances and illicit drugs. Controlled
substances are classified under schedules ranging from I-VI, as defined in sections 54.1-3446 through 54.1-3456 of the Code of Virginia. Violations include the following:

- Possession of a controlled substance in schedules I-III can result in misdemeanor or felony conviction with a punishment up to 10 years, $2,500 fine or both.
- Possession of a controlled substance classified in schedule IV, can result in a misdemeanor conviction with punishment up to 6 months in jail, a fine up to $1,000 or both.
- Possession of controlled substances in schedule V and VI can result in a fine up to $500.
- Possession of a controlled substance under schedule I or II with the intent to sell or distribute can result in a felony conviction with 5-40 years in prison and a fine up to $100,000.
- Possession of a controlled substance under schedule III, IV or V with the intent to sell or distribute can result in a misdemeanor conviction with up to one year in jail, a fine of $2,500 or both.
- Possession of marijuana can result in 30 days in jail, a fine of $500 or both. Possession with the intent to sell or distribute can result in up to 30 years in jail and a fine of $2,500.

b. Federal Laws

Under the Controlled Substances Act 21 U.S.C Section 841, 843, 844, 846. The law sets the following sentences for first-time offenders:

- A minimum of ten years and a maximum of life imprisonment or $4,000,000 fine or both for the knowing or intentional manufacture, sale or possession with intent to sell, of amounts of any narcotic, including heroin, morphine, or cocaine, or of phencyclidine or of LSD or marijuana (1,000 kilograms or more).
- A minimum of five years and maximum of 40 years or $2,000,000 fine or both for similar actions involving smaller amounts of any narcotic, including heroin, morphine, or cocaine, phencyclidine, LSD, and marijuana (100 kilograms or more).
- A maximum of five years or $250,000 fine or both for similar actions involving smaller amounts of marijuana (less than 50 kilograms).
- Four years or $30,000 fine or both for using the mail, telephone, radio or any other public or private means of communication to commit acts that violate the laws against the manufacture, sale and possession of drugs.

Distribution within 1,000 feet of school or playground or within 100 feet of youth center, public pool, etc. penalty doubles. The meaning of “School” includes public or private place of learning, including adult education centers and institutions of higher learning.

F. Employee Assistance Program

EVMS will assist employees in overcoming drug and alcohol abuse problems. There are numerous organizations and facilities that are available to those who need them. Students with alcohol and drug issues can contact the Phoenix Committee at (757) 647-0480.
Residents and clinically licensed staff facing drug and alcohol issues can contact Virginia Monitoring at 1-800-827-7559. Other substance abuse professionals that can be contacted include:

- Al-Anon 1-800-356-9996
- National Council on Alcoholism and Drug Dependence 1-800-622-2255
- National Clearinghouse for Alcohol & Drug Information 1-800-729-6686
- Center for Substance Abuse Treatment 1-800-662-4357
- Alcoholics Anonymous 1-757-490-3980

G. Notification of Conviction

Any employee who is convicted of any drug or alcohol related incident occurring at EVMS must notify his Supervisor within 5 days of conviction. The Supervisor must then notify the appropriate agency, along with the Director of Human Resources, within 10 days if the employee is paid from federal funds.

WEAPONS POLICY (Human Resources Policy 4.57)

Policy

It is the policy of the Eastern Virginia Medical School to promote a weapons free environment for the safety of all. The Medical School prohibits the possession of any handguns or other weapons, concealed or not, in any facilities, parking areas, or any other properties owned or operated by the Medical School.

Possession of a concealed handgun permit shall not exempt any person from the provisions of this policy. Pursuant to Virginia Code 18.2-308(a)(1995) and to the Norfolk City Code 47-1(0), "the granting of a concealed handgun permit shall not thereby authorize the possession of any handgun or other weapon on property or in places where such possession is otherwise prohibited by law (schools, churches, courthouses, bars, etc.) or is prohibited by the owner of private property".

Definition

"Weapons" includes an array of harmful devices including but not limited to handguns, shotguns, pistols, switchblades, knives, slingshots, metal knucks, blackjacks, clubs, explosive devices, and all other weapons as described in Virginia Code 18.2-308(a)(1995).

Procedure

Compliance is required by all employees, students, patients and visitors. Employees and students who violate the policy will be required to remove their weapons from the Medical School premises and are subject to disciplinary action (see policy 4.50). Visitors and patients found carrying weapons at the Medical School will be asked to leave the premises with their weapons. Anyone refusing to do so will be subject to arrest and prosecution. Campus Security Department and any other law enforcement officers, in the line of duty, are permitted to carry weapons at the Medical School.

Responsibility

It is the responsibility of every employee, student, patient and visitor to insure adherence to this policy. Anyone noticing a person carrying a weapon should report it immediately to the EVMS Security Department.
NEPOTISM (Human Resources Policy 1.23)

Policy

It is the policy of the Eastern Virginia Medical School to avoid the hiring, transfer, or promotion of relatives or dependents of employees or to whom the employee is a relative or dependent, into situations where the possibility of conflict of interest or favors may exist or appear to exist. The Eastern Virginia Medical School prohibits its faculty and employees from initiating, participating in or influencing directly or indirectly, in any way, departmental or Medical School wide decisions involving a benefit to relatives or other dependents.

Persons related by family or marriage or others living in the same household who are dependents may be employed by the Medical School provided: 1) such individuals meet the appropriate employment standards; and 2) that neither would have any influence involving a direct or indirect benefit over the other; and 3) be employed in separate departments; or 4) the employee and the immediate family member are engaged in teaching or research in the same department at the Medical School and the President and Dean/Provost finds that this is in the best interest of the Medical School for such dual employment to exist. After such finding, the Dean/Provost ensures that such employee, or the immediate family member does not supervise, evaluate, or otherwise participate in personnel or other decisions regarding the other.

Employees who become related while already employed are subject to this policy.

Definitions

Relative is defined as spouse, parent (or legal guardian), parent-in-law, brother, brother-in-law, sister, sister-in-law, son, son-in-law, daughter, daughter-in-law, aunt, uncle, niece, or nephew.

Dependent is defined as any of the above or any other person living in the same household and/or receives from the employee, or provided to the employee, more than one-half of his/her financial support.

Supervisory responsibility includes, but is not limited to, authority to hire, transfer, suspend, assign, reward, discipline, fire, evaluate, promote, demote or grievance advantage.

Direct/indirect benefit includes, but is not limited to, authority to initiate faculty appointment, retention, promotions, tenure, salary, leave of absence, grievance advantage, etc.
FINANCIAL SERVICES

The mission of the Financial Services Department is to provide high quality, effective and cost-efficient financial support services to the Eastern Virginia Medical School and its related organizations. The following are the primary components of the Financial Services Department.

- Accounts Payable (757) 446-6083
- Cash Receipts/Accounts Receivable (757) 446-6067
- Finance Computer Center (757) 446-6031
- General Accounting (757) 446-6065
- Grants Accounting (757) 446-6024
- Payroll (757) 446-6075
- Software Applications (757) 446-6072
- Student Loans (757) 446-6056

For information pertaining to payroll, purchasing, budgets, travel, business-related expenses, and other financial issues, faculty should refer to the Financial Affairs Policy and Procedure Manual.

HUMAN RESOURCES

The Human Resources Department (446-6043) is responsible for administering employment policy and the Affirmative Action Plan. For information pertaining to fringe benefits, vacation, retirement, and other human resources issues, faculty should refer to the Human Resources Policies and Procedures Manual to be used in conjunction with the Faculty/Unclassified Employee Handbook.

MATERIALS MANAGEMENT

Policy

Materials Management is a department within the Eastern Virginia Medical School Administration Division reporting to the Office of the Vice President for Administration and Finance.

All procurement negotiations and purchases are handled by the Director of Materials Management (446-5221). Materials Management is also responsible for mail services, deliveries, equipment inventory, storage, facilities, central stores, design services, minor office moves and furniture repairs, and all special procurement needs and services.

All purchase commitments must be handled in accordance with the Medical School’s institutional procurement policies.

The allocation of budget funds to a department provides only an authority to requisition, not to purchase.

The Medical School is not responsible for payment of any invoice received where a purchase order was not obtained.

AUXILIARY AND SUPPORT SERVICES DIVISION

Public Safety

It is a policy of the Eastern Virginia Medical School that all persons visiting EVMS buildings be properly identified and that the buildings be locked outside of normal business hours. During normal business hours, security officers are strategically located in areas that allow observance of everyone entering the main part of buildings. The wearing of identification is required in these buildings. Visitors entering certain buildings without appropriate identification are issued a Visitor’s Pass after identification is established from other sources. During non-business hours, access to buildings is controlled through a card access system. The same procedures for identification apply as during business hours. Additional information is available in the EVMS Campus Security Act, which is distributed to all faculty and staff annually. A copy of the Act can be obtained from Human Resources (446-6043).

The phone number for EVMS Security is 446-5199. The phone number for Fire, Police and Paramedics is 9-911.

EVMS utilizes a combination of in-house security, contract security, and Norfolk Sheriff’s Office deputies to provide continuous security coverage to the campus. The EVMS Director of Security reports directly to the Vice President for Administration and Finance.

Maintenance

The Maintenance Department, under the Director of Maintenance, is comprised of engineering maintenance and physical facilities maintenance. The Director of Maintenance reports to the Director of Auxiliary and Support Services.

The engineering maintenance staff includes an administrative support coordinator, eight maintenance engineers, a painter, and a carpenter working out of the Lewis Hall maintenance shop. They perform preventative maintenance on all building HVAC and related equipment. They also work on mechanical, pneumatic and refrigeration jobs. Staff members work from 7:30 a.m. until 5:30 p.m., Monday through Friday. Engineering maintenance may be reached by calling 446-5874. A staff member is on call from 5:30 p.m. until 7:30 a.m., Monday through Friday as well as weekends and holidays.

The physical facilities maintenance staff includes a construction manager, locksmith/signmaker, auto mechanic, and a bioengineering/tech support individual. Physical Facilities staff perform preventative maintenance functions, repair work, and minor building renovations. Major building renovations are contracted out under the supervision of the Director of Auxiliary and Support Services. This satellite office is located at 154 Colley Avenue and can be reached by calling 446-5233. Staff members work from 7:30 a.m. until 5:30 p.m., Monday through Friday.

In addition to the above, the bioengineering technician provides support and repair in the areas of medical and computer equipment and provides in-service training in these areas. Bioengineering services also include:

1. Repair and calibration of medical and computer equipment.
2. Routine electrical safety inspections to insure the certification process of laboratories and facilities.
3. Maintain repair and inspection records on the equipment serviced.
4. Provide consultation to the purchasing agents on equipment selection.
Appendix O

5. Build and upgrade computers to departmental specifications.
6. Install new software and troubleshoot software problems.
7. Install network cabling and network devices.
8. Design and fabricate electronic systems as needed: alarm, audio, video, nurse call, etc.
9. Maintain small parts selection to expedite repairs.
10. Converse with manufacturers on warranty repairs and returns.

Safety

All major EVMS buildings are equipped with audible fire alarm systems. Lewis Hall, Jones Institute, Andrews Hall, South Campus, Hofheimer Hall, and Smith Rogers Hall have systems, which, through MGI, automatically notify the Norfolk Fire Department in the event of activated fire alarm conditions. Fire evacuation procedures have been established for each facility. Lewis Hall, Hofheimer Hall, Andrews Hall, Jones Institute, South Campus and Smith Rogers Hall have biannual fire drills and monthly maintenance testing on standpipes and fire extinguishers. Annual fire extinguisher training is conducted during Fire Prevention Week. The Norfolk Fire Department also participates in periodic fire inspections and fire drill observations.

The Fire and Safety Coordinator for EVMS is available for fire and safety inspections. He may also be called on to help coordinate or implement various safety procedures throughout EVMS. The Fire and Safety Coordinator reports to the Director of Auxiliary and Support Services. He is located in Lewis Hall and can be reached by calling 446-5874.

Communications

The Communications department maintains telecommunications equipment and cable systems necessary to provide communication services. These services also provide faculty, staff and students with access to the Campus Computer Network from local and remote locations. The Communications department provides local area network connections to telephone cable lines and fiber runs within and between campus buildings. Existing telephone cable runs between campus buildings and dedicated data lines for dial in access facilitate terminal emulation traffic to campus computer centers. Installation of network cabling must be arranged through the Communications department.

The Communications department is located in suite 118 on the first floor of Hofheimer Hall. Office hours are 8:00 A.M. until 5:00 P.M. You may reach the office by calling 446-5217. The director of Communications reports to the Director of Auxiliary and Support Services.

Housekeeping

The purpose of the EVMS Housekeeping Department is to provide services that maintain and preserve the appearance, cleanliness, and in certain areas, sanitation throughout nine EVMS facilities. The housekeeping staff is responsible for cleaning approximately 425,000 square feet throughout the school. Currently the Housekeeping Department includes a director, a housekeeping specialist whose main function is heavy floor care (carpet shampooing and tiled floor stripping and waxing), a team leader whose main function is assisting the director with organizing conference set-ups, and 25 custodians. The housekeeping director reports to the Director of Auxiliary and Support Services.

The housekeeping central office is located in suite 118 on the first floor of Hofheimer Hall. General office hours are 8:00 A.M. until 5:00 P.M., Monday through Friday. The office can be reached by calling 446-7496.
In general, the housekeeping staff works three shifts, Monday through Friday, with services offered on the weekends in Lewis Hall and Hofheimer Hall public areas. The housekeeping staff is considered essential personnel and as such is required to respond to facility emergencies after hours, on weekends and holidays, and must work as directed in the event of inclement weather. The housekeeping staff is responsible for ice and snow removal around the building exteriors as needed.

Housekeeping responsibilities include, but are not limited to daily trash removal, cleaning of restrooms, offices, exam rooms, labs, classrooms/conference rooms, public areas and stairwells. Duties include dusting, vacuuming, dust/wet mopping, bi-monthly buffing of tiled floors, quarterly scrubbing and waxing exam/lab floors, shampooing public area carpets, shampooing carpets and tile care in private areas as requested. In keeping with EVMS safety procedures, the housekeeping staff is not responsible for removing biohazard trash. This function is contracted to Incindere, Inc. by each department needing such service. In addition, the housekeeping staff is not responsible for cleaning free flowing blood spills. This function is performed by the clinical staff in the affected area.

All housekeeping supplies for the facilities are purchased through Materials Management by the housekeeping director and charged to the housekeeping budget. Material Safety Data Sheets on each cleaning chemical used is maintained by the housekeeping director and available in each building.

Parking

Eastern Virginia Medical School faculty, staff and students are provided free assigned parking within the medical center 4,300 space, surface and multi-level parking system. The 2,300 EVMS controlled spaces include lot # 2, a 784 space 6 level visitors’ garage, lots # 4 and # 17, 2 additional visitor/staff surface lots, and 8 card controlled surface lots. All available land suitable for parking in the medical center is leased to EVMS. Parking operations is contracted by EVMS to Edison Parking Management. The Edison Parking office is located on the first level of the parking garage and can be reached at 446-5618.

General EVMS parking procedures include:

1. Each EVMS employee is issued a control parking card and assigned, space permitting, to a parking lot nearest to the work place. The cost of employee parking is borne by the individual institution. Currently the cost to EVMS is $23.00 per card, per month. You may call 446-7496 for employee parking assistance.
2. Students (1st through 4th), the Graduate Master’s Program, and Surgical Assistants, park in the lot # 2 visitor garage. Contact the Edison Parking office at 446-5618 for assistance.
3. Residents and interns are assigned parking in the lot # 2 visitor garage. EVMS departments may contact the Office of Graduate Medical Education, located in Smith Rogers Hal room 203, at 446-6190, for assistance.
4. No card deposit is required.
5. Parking cards are the property of EVMS and must be returned to the place of issue.
6. There is a $10.00 card replacement fee.
7. EVMS parkers, assigned to the lot # 2 visitor parking garage are NOT AUTHORIZED to park on the surface lot.
8. A perimeter lot shuttle bus system operates nine hours daily to transport employees to and from the South Campus parking lots to the work place.
Appendix O

Bookstore

The purpose of the EVMS Bookstore is to provide specific text materials and products to the students, faculty, staff and visitors of the medical school. The bookstore was organized by the medical students in 1976 to fill their need for a convenient medical text retailer. In 1984 the operation of the bookstore was turned over to the Director of Auxiliary and Support Services. Currently the bookstore is operated under a lease management agreement with Matthew’s Medical Book Company. A manager, assistant manager and cashier staff the bookstore. All personnel are employees of Matthew’s Medical Book Company.

The bookstore stocks required and recommended texts and reference books for Eastern Virginia Medical School. Faculty may order books for classes by submitting a "text adoption form" available through the bookstore. Also available are school and office supplies, medical equipment, clothing, novelties and snack items. Special orders are accepted. In addition, the bookstore can arrange medical equipment repairs.

The bookstore is located on the first floor of Lewis Hall. The hours of operation are 8:30 A.M. until 5:30 P.M., Monday through Friday and 10:00 A.M. until 2:00 P.M. on Saturday. You may contact the bookstore by calling 446-5818.
Student Handbook

Office of Student Affairs
Appendix P

Last Revision: August, 2010

The policies contained herein are provided to give a general understanding of the regulations governing Eastern Virginia Medical School. They are subject to revision at any time with little or no advance notification. EVMS assumes no responsibility for errors in or misrepresentation of these policies. For more information on the official policies of EVMS, contact the Office of Student Affairs. Current policies and procedures will be located on the EVMS Intranet at http://info.evms.edu/students.

EVMS does not discriminate on the basis of race, color, national origin, gender, religion, age, sexual orientation, or disability in its programs, activities, or employment practices as required by Title VI, Title IX and Section 504. Inquiries may be directed to the Title IX and Section 504 Coordinator:

Associate Dean for Student Affairs
Lewis Hall, 700 West Olney Road
Norfolk, VA 23507
Telephone (757) 446-5638
# Table of Contents

Message to Students from the Dean ........................................... 5  
Statement on Diversity in Medical and Health Professions Education 5  
**Student Administrative Matters**  
  Academic Calendar ......................................................... 6  
  Criminal Background Check Policy .................................... 6  
  Disabilities ................................................................. 7  
  Discrimination ............................................................. 7  
  Enrollment Status Change Policy and Procedures ................. 8  
  Graduation Policy .......................................................... 10  
  HIPAA Training and Certification Procedure ....................... 11  
  School of Record ............................................................ 11  
  Student Identification Policy .......................................... 11  
  Student Registration ....................................................... 11  
  Student Records ............................................................. 11  
  Student Services ............................................................. 12  
**Student Finances**  
  Financial Aid ................................................................. 13  
  Policy on Students’ Failure to Meet Financial Obligations .... 13  
  Federal Aid to International Students ............................... 14  
  Student Withdrawal Refund Policy ................................... 14  
  General Student Billing information .................................. 15  
**Student Health and Well Being**  
  Student Health Services ................................................... 16  
  Occupational Health ......................................................... 16  
  Occupational Health Requirements .................................... 16  
  Blood/Body Fluid Exposures .............................................. 19  
  Bloodborne Pathogen Training ......................................... 19  
  Health Insurance Policy ................................................... 19  
  Mental Health Services .................................................... 19  
  Phoenix Program ............................................................. 19  
  EVMS Neuropsychology Center ......................................... 20  
  Athletic Facilities ............................................................ 20
Appendix P

Student Rights and Responsibilities

Non-Academic Policies and Procedures

Code of Student Conduct
Student Dress Code
Sexual Harassment Policy and Procedures
Smoking and Tobacco Policy
Policy on Alcohol and Other Drugs
Social Media Policy
Weapons Policy
Housing Policy for Hague Club Apartments
Medical Student Non-Academic Grievance and Appeals Procedure
Health Professions Non-Academic Grievance and Appeals Procedure

Academic Policies and Procedures

Medical Student Evaluation and Progress
Medical Student Academic Grievance and Appeals Procedure
Health Professions Student Evaluation and Academic Progress
Health Professions Student Academic Grievance and Appeals Procedure

EVMS Honor Code

Miscellaneous

Library Regulations
Student Advising Policy
Student-Faculty Relationship and Provision of Health Care
Student Government and Activities
Suspected Preceptor or Health Professional Misconduct
Student Publication Policy
Inclement Weather Procedure
Use of Campus Facilities Policy
Animals on Campus Policy
Posting of Signs and Advertisements Policy

Frequently Used Phone Numbers

Campus Map

Appendix of Forms for Students
MESSAGE TO STUDENTS FROM THE DEAN

Welcome to EVMS. Over the past few decades, the medical and health professions have seen advances in medical research that continue to improve our ability to prevent, diagnose, and treat disease. Research in human genetics has created new frontiers in gene therapy; new surgical techniques have reduced risks and recovery times; improved diagnostic tests have led to early and more effective treatment; and a greater awareness of the impact of lifestyle choices on health has made patients essential partners in their own health care.

These changes have created new expectations and put new demands on medical and health professionals and the health care system – challenges that EVMS is firmly positioned to meet.

EVMS is the cornerstone of the region’s health care system and, through its many partnerships, offers students and residents a wide variety of academic and practice experiences. While providing outstanding training and experience for students entering the full range of medical specialties, EVMS also is committed to help meet the nation’s need for more primary care physicians and other health professionals.

Since its inception in 1973, EVMS has earned a reputation for its focus on the broader health issues of the surrounding communities as well as a side of medicine that has not changed since the days of Hippocrates – the human side. While responding to change, EVMS remains true to its original mission to train physicians and other health professionals who are compassionate as well as competent.

This student handbook provides an overview of institutional policies and procedures that apply to students during their enrollment at EVMS. These policies and procedures are occasionally supplemented by other program specific policies and procedures.

Gerald J. Pepe, Ph.D.
Dean, EVMS

STATEMENT ON DIVERSITY IN MEDICAL AND HEALTH PROFESSIONS EDUCATION

Eastern Virginia Medical School is committed to fostering a diverse educational and academic program within a supportive and respectful environment. This commitment includes the recruitment, admission, retention and graduation of a diverse student body. EVMS implements this commitment by providing the opportunity for the open exchange of ideas and the incorporation of cultural competence in the curriculum. A diverse student body promotes cross-cultural understanding, an essential tool for all health care givers, and prepares students to function in a heterogeneous society.
STUDENT ADMINISTRATIVE MATTERS

ACADEMIC CALENDAR

Policy:
EVMS will establish and post on the institution’s web site an academic calendar for two successive academic/fiscal years (i.e., July 1 – June 30) for all degree and certificate granting programs for which EVMS serves as the school of record. The Associate Dean for Student Affairs (MD program) and the Vice Provost for Planning and Health Professions (Health Professions programs) are responsible for confirming the necessary information. The academic calendar provides information for the Fall/Spring/Summer semesters/terms and includes the following dates for each enrolled class: orientation, beginning of classes, institutional holidays, breaks, end of classes, final exams, and graduation.

Procedure:
On or about February 1, the Associate Dean for Student Affairs and the Vice Provost for Planning and Health Professions will request that the appropriate program officials provide their respective information for the designated academic year. Programs are expected to respond by March 1, and a consolidated academic calendar will be prepared by April 1. The updated academic calendar will be posted to the designated EVMS web site by July 1, in conjunction with the electronic Catalog and the EVMS Student Handbook.

CRIMINAL BACKGROUND CHECK POLICY

Policy:
It is the policy of Eastern Virginia Medical School to perform criminal background checks on all incoming (including transferring) students. The criminal background check will be initiated when an applicant returns their completed Conditions of Acceptance form and deposit to EVMS or at the request of the Associate Dean for Student Affairs (or designee) for programs that maintain a wait list for prospective students. Decisions about the matriculation of an accepted applicant whose criminal background check reveals information of concern will be made by an Ad Hoc Committee appointed by the EVMS Dean/Provost.

All transferring students are required to agree to a criminal background check prior to the beginning of their clinical rotations. A decision about the continuation of a student’s educational experience whose criminal background check reveals information of concern will be made by the Ad Hoc Committee described above.

A student who revokes or cancels his/her consent for a criminal background check will be considered in non-compliance of this policy and his/her student status will be terminated immediately.

Visiting students must provide evidence of a criminal background check performed by their home institution or agree for EVMS to initiate the check that will be paid for by the student.

Procedure:

1) All student criminal background checks will include a disclosure from the student of any misdemeanors or felony convictions, other than minimal traffic violations, including deferred adjudication, with a statement that non-disclosure/falsification may lead to dismissal.

2) The criminal background check is not a component of the application, interview, or decision-making process for entry into an EVMS educational program. It is a mandatory component of the pre-matriculation process. The letter sent by a designated EVMS official to each accepted applicant in a given educational program (and, at times, to selected wait-listed students) will include information about this requirement, with the contingency that the final decision about matriculation will be made after institutional review of the accepted applicant’s criminal background check report.

3) Appropriate authorization, with pertinent identifying information necessary to initiate a criminal background
Appendix P

check, must be received from each accepted applicant prior to initiating the check. This authorization will inform the accepted applicant that he/she will have access to criminal background check data about himself/herself to ensure the accuracy of the criminal background check report. Refusal to provide adequate/correct information or to provide consent for investigation will result in withdrawal of acceptance.

4) The Office of the Registrar will send a list of all incoming students, which will include each student’s social security number, the addresses where the student had resided over the past seven years, and the signed Authorization for Background Investigation consent form to the Human Resources Department. The Human Resources Department will send the appropriate information to the agency that will perform the criminal background check.

5) The Director of Human Resources or his designee will review the findings of the criminal background check and if it reveals information deemed to be relevant to the student’s suitability for matriculation, the Director of Human Resources or his designee will notify the student in writing. The student will be asked to review any adverse information and to provide a written response within ten calendar days to the Director of Human Resources. The Director of Human Resources or his designee will set up a meeting with the Ad Hoc Committee to review the information provided (including the student’s response). Where appropriate, the student may be asked to meet with the Ad Hoc Committee for further clarification/details. The Ad Hoc Committee will make the final decision on the student’s matriculation.

6) No information derived from a criminal background check will automatically disqualify any accepted student from matriculation. A final decision regarding matriculation will be made only after a careful review of factors including:
   a. The nature, circumstances, and frequency of any offense(s)
   b. The length of time since the offense(s)
   c. Documented successful rehabilitation
   d. The accuracy of the information provided by the student in his/her application materials.

7) The criminal background reports will be maintained in the Human Resources Department.

8) Information obtained will only be used in accordance with state and federal laws.

9) Reasonable efforts will be made to ensure that results of criminal background checks are kept as confidential as possible with a limited number of persons authorized to review results.

10) Enrolled students are required to disclose any misdemeanor or felony convictions other than minimal traffic violations, including deferred adjudication, within thirty days of occurrence to the Office of Student Affairs. Non-disclosure or falsification may be grounds for dismissal or degree revocation.

DISABILITIES

It is the goal of EVMS to provide access to needed resources for students with disabilities; so that these students are afforded every opportunity to do their best work. A disability is understood to be any medically documented impairment that substantially limits an individual in one or more major life activities (e.g., walking, seeing, hearing, or learning).

The procedure for students with disabilities is described in the Student Disability Policy (http://info.evms.edu/). Students with medically documented permanent or temporary disabilities in need of special services are advised to contact the Student Disability Officer, the Associate Dean for Student Affairs, as early as possible.

DISCRIMINATION

EVMS is committed to the achievement, through its programs, activities and facilities, of equality of opportunity in education, professional training, athletic programs and recreation, and career advancement of its students without regard to race, color, religion, sex, sexual preference, national origin, age, disability or veteran status. In order to ensure that this policy is carried out, affirmative action will be taken to remedy the effect of any discriminatory act or practice for which EVMS is responsible. Every student at EVMS is free to seek answers to any questions and seek adjustment of any grievance arising out of alleged discrimination on the basis of race, color, religion, sex, national origin, age or handicap without being restrained or subjected to interference, coercion, or reprisal because of, or as a
Appendix P

result of, having filed a grievance or having made an inquiry or allegation of discrimination.

Faculty and administrative personnel are expected to see that allegations of discrimination receive prompt, impartial and sympathetic treatment and that the person or persons making the allegation(s) are not restrained or subjected to interference, coercion or reprisal because of, or as a result of, having made allegation(s) of discrimination.

ENROLLMENT STATUS CHANGE POLICY AND PROCEDURES

Enrollment status change policy and procedures
The Office of the Registrar at EVMS is responsible for verifying the status of all students. Any change in student status must follow the procedures outlined in the policy. The Office of the Registrar will report the effective date of students’ status changes monthly to National Student Clearinghouse. EVMS will report the following enrollment statuses to the NSLDS.

- Full-time
- Half-time
- Less than Half Time
- Leave of Absence
- Withdrawn
- Graduated

Procedure for when a student is making a change in enrollment status or being asked to withdraw:
1) The student must schedule an appointment with the Program Director (for Health Professions students) or the Associate Dean for Student Affairs (for Medical students) and submit the Status Change form for approval.
2) The Program Director (for Health Professions students) or the Associate Dean for Student Affairs (for Medical students) will forward the signed form to the Registrar. The Registrar will then forward Status Change form to the Program Director or Associate Dean for Student Affairs for approval.
3) If the student is withdrawing or graduating (off schedule), the Registrar will contact the student and provide the student with the Student Status Change Form. The Registrar will contact the appropriate offices and get clearance to clear the student for graduation or withdrawing.
4) For all status changes, the Registrar will modify the Oracle database accordingly, report the change to the Clearinghouse or NSLDS if warranted, and provide a copy of the Status Change form to the Director of Financial Aid, the Program Director (for Health Professions students), and Financial Services (Accounts Receivable and Student Loans).
5) Exit interviews are required by the Office of Financial Aid and Financial Services (Student Loans) for all status changes if students received federal student aid and/or institutional loans.

Withdrawal Policy for All Students
Withdrawals may be of four types:
1) Voluntary Withdrawal - at the request of the student
2) Medical Withdrawal - on recommendation of a physician
3) Academic Withdrawal - by action of the Student Progress Committee
4) Administrative Withdrawal - by action of the Dean’s Office

When a student withdraws, is asked to withdraw, or takes a leave of absence from the Eastern Virginia Medical School (EVMS), he or she must complete a Status Change Form available from the Office of the Registrar http://info.evms.edu/registrar_html/. The Registrar will sign and forward the Request to all appropriate parties. For more information on the refund of any unearned tuition or fees, refer to the student withdrawal refund policy located in the Student Finances section below.

Upon determination of student’s withdrawal date, EVMS will calculate and refund any unearned tuition and fees within 30 days. Depending upon the withdrawal date, the student may be required to repay all or part of the financial assistance he/she received.
Tuition and fees will be charged on a percentage basis, based on the class week during which the student withdraws. A class week is defined as the period beginning on Sunday and ending on the succeeding Saturday. A separate schedule of refund percentages exits for each class year of each program. Acceptance deposits will not be refunded.

**Student withdrawal refund policy**

When a student contemplates withdrawing from EVMS, he/she must first consult with the Associate Dean for Student Affairs (for M.D. students) or the respective Program Director (for health profession students). Upon approval, when a student withdraws or is asked to withdraw from EVMS, he/she must complete a Student Status Change Form which is available from the EVMS Registrar’s web page and included in the Appendix to this Handbook. The Office of the Registrar will sign and forward the Request to all appropriate parties. The date listed on the Student Withdrawal Request Form will be considered the withdrawal date. The student will not be officially withdrawn until the Accounts Receivable Office receives notification of the withdrawal and has completed. If a student withdraws without notifying the program, the withdrawal date will be the last known date of attendance. Once the completed Student Status Change Form is received by Accounts Receivable, EVMS has 30 days to calculate and refund any unearned tuition and fees. Depending upon the withdrawal date, the student may be required to repay all or part of the financial assistance he received.

**Withdrawal and Readmission Policy for MD Students**

Students in the MD program wishing to arrange a voluntary or medical withdrawal should consult with the Associate Dean for Student Affairs to obtain information about the necessary administrative procedures.

Students who wish to be readmitted after a withdrawal must notify the Associate Dean for Student Affairs in writing at least sixty days prior to the date requested by the student for readmission. A longer period of notification is desirable if scheduling of clerkships or electives is involved. Acceptance for readmission will also depend on the enrollment availability. Applications for readmission will be kept on file and will be considered in the ordered received and as positions become available.

Students without academic deficiencies who withdrew within the previous 12 months may be readmitted at the discretion of the Associate Dean for Student Affairs. Students without academic deficiencies, who have withdrawn for medical reasons within the previous 12 months, must also provide documentation of clearance to attend classes from a physician.

Requests for readmission from students who had academic deficiencies at the time of voluntary or medical withdrawal, or whose period of withdrawal is greater than one year but less than two years, will be acted upon by the Student Progress Committee. Those on medical withdrawal must also obtain documentation of clearance to attend classes from a physician. A subcommittee of the Student Progress Committee will interview the student and review his/her request for readmission. The subcommittee will make a recommendation to the Student Progress Committee, which will make a final decision regarding readmission of the student.

Students whose period of withdrawal is greater than 2 years must reapply through the Office of Admissions.

Students whose requests for readmission are denied will have the right of appeal to the Dean of EVMS.

**Leave of Absence Policy:**

A leave of absence may be granted in accordance with Federal Title IV Refund Regulations (see [http://www.evms.edu/students/fin-aid/docs/title-iv-refunds.pdf](http://www.evms.edu/students/fin-aid/docs/title-iv-refunds.pdf)). An Enrollment Status Change Form (see [http://www.evms.edu/students/fin-aid/docs/student-status-change.pdf](http://www.evms.edu/students/fin-aid/docs/student-status-change.pdf)) must be completed and signed by the student. If however, due to unforeseen circumstances, a student is prevented from completing the Enrollment Status Change Form, the institution may grant the student's request for a leave of absence provided that it documents the reason for its decision and then later collects the signed form from the student.

Health professions students should complete the form and present it to the appropriate program director. The program director shall review and sign the form, either approving or disapproving the request, and then forward the form to the Associate Dean for Student Affairs. Medical students should complete the form and present it directly to the Associate Dean for Student Affairs.

Only one leave of absence can be granted to a student in any 12-month period except as provided in the Federal Title
Appendix P

IV Refund Regulations, and a leave of absence cannot exceed 180 days for any 12-month period. At the end of the requested leave of absence, the student must return or is considered to have withdrawn for financial aid purposes. Please refer to EVMS Withdrawal Refund Policy.

Privileges granted to students on leave of absence are as follows:

1) The use of library and other learning resources.

2) Attendance at and participation in classroom activities, excluding laboratories. A student may not participate in the professional skills program or sit in for examinations and will not, under any circumstances, receive credit, including elective credit, for any work done while on leave of absence.

Military Leave Policy:
A student reservist who is called to active military duty or a member of the military who is deployed will be granted a leave of absence from EVMS until he/she is released from active duty or deployment. The student must furnish to his/her program director (for health professions students) or to the Associate Dean for Student Affairs (for M.D. students) a copy of his/her orders or other documentation. Depending on the length of absence, the student will be eligible for a refund of tuition, credit against future enrollment, and the awarding of academic credit for work that is in progress.

GRADUATION POLICY

EVMS confers formal academic degrees at an annual Graduation Ceremony. The Ceremony is generally conducted on the third Saturday in May. The Ceremony will include all students in degree granting programs* that have been recommended for graduation by the faculty and subsequently approved by the Dean/Provost, the Academic Affairs Committee of the Board of Visitors, and the full Board of Visitors.

The Ceremony follows the traditional order for commencement exercises. The President of EVMS is the official host for the Ceremony and confers the degrees upon presentation of the candidates by the Dean. All graduating students will be recognized by name as they cross the stage to receive their diploma and hood. Appropriate dress for all participants in the Ceremony is the traditional academic attire (i.e., cap and gown) specific to the degree being conferred. *A Guide to Academic Protocol* by M. K. Gunn (Columbia University Press, 1969) is a useful reference.

Graduating students from all programs are required to attend the rehearsal a few days before the Ceremony. The Senior Assistant Marshal will direct the rehearsal. Academic dress for students is distributed only at the rehearsal. Students may participate in commencement exercises before the completion of all academic requirements only with the faculty approval of the individual program and only if the graduation requirements are expected to be fulfilled within approximately 90 days of the Ceremony. Students participating under these conditions will not receive their diplomas until all requirements are completed.

Commencement exercises are part of a larger academic tradition. Commercial activity is incompatible with these exercises (e.g., purchase of class photographs). Such activities are appropriately conducted during the rehearsal or at class receptions. Any public displays of graduation information and events must be approved by both the Chief Marshal and the Office of Marketing and Communications.

* Academic degrees include:

<table>
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<tr>
<th>Degree</th>
<th>Title</th>
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<tbody>
<tr>
<td>MD</td>
<td>Doctor of Medicine</td>
<td>MS</td>
<td>Master of Science in Art Therapy and</td>
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<td>Counseling</td>
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<tr>
<td>PhD</td>
<td>Doctor of Philosophy</td>
<td>MS</td>
<td>Master of Science in Biomedical Science</td>
</tr>
<tr>
<td>PsyD</td>
<td>Doctor of Psychology</td>
<td>MS</td>
<td>Master of Science in Clinical Embryology</td>
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<td>and Andrology</td>
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<tr>
<td>MPA</td>
<td>Master of Physician Assistant</td>
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<tr>
<td>MPH</td>
<td>Master of Public Health</td>
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Although degrees are conferred in the graduation ceremony, EVMS may award and issue degrees to qualified students at any time during the year. Such students must be recommended for graduation by the faculty and subsequently approved by the Dean/Provost, the Academic Affairs Committee of the Board of Visitors, and the full Board of Visitors.
HIPAA TRAINING AND CERTIFICATION PROCEDURE

1. All incoming EVMS students at orientation will receive a HIPAA presentation, and take an online HIPAA quiz. The presentations will be the responsibility of the Office of Student Affairs. The responsibility for verification of successful completion of the online quiz resides with the Office of Registrar for MD program and Health Professions Administration for Health Professions programs.

2. All full time EVMS students in all programs will take an online refresher course and quiz annually. Notification of the requirement and verification of successful completion of the online refresher course and quiz resides with Office of Registrar for MD program and Health Professions Administration for Health Professions programs.

The HIPAA policy can be found on the EVMS Intranet at http://info.evms.edu/.

SCHOOL OF RECORD

Unless otherwise noted, the information contained in this handbook applies to all programs where EVMS is the school of record. EVMS is not the school of record for The Virginia Consortium Program in Clinical Psychology and the Ophthalmic Technology Program. For these two programs, the information in this handbook applies to student behavior and grade grievances associated with courses taken at EVMS, while program specific policies and procedures provide guidelines for broader issues of student evaluation, comprehensive examinations, and performance and probation procedures.

STUDENT IDENTIFICATION POLICY

Each EVMS student, upon matriculation at EVMS, is issued a photo identification badge with student’s name and program designation. This badge must be worn prominently at all times for access to EVMS facilities, affiliated hospitals, and when engaged in any school activity involving patient contact. It is also necessary for use of library facilities, obtaining student discounts at hospital cafeterias, etc.

STUDENT REGISTRATION

All students for which EVMS is the school of record are required to complete all registration forms (as required by the Registrar) including, but not limited to, pre-printed EVMS Registration Form (which includes SEVIS information), Student Access Form, the FERPA Directory Information Form (required by FERPA), as well as classes to be taken within two weeks of the official registration date. Failure to meet this requirement will cause the student to be considered as having withdrawn from EVMS.

STUDENT RECORDS

Student records are protected and maintained by the Registrar. The Office of the Registrar will maintain the permanent records and documents that pertain to each student’s progress during matriculation. Students have the right to review their records. In addition, the Family Educational Rights and Privacy Act (FERPA) afford students certain rights with respect to their education records. For more information about your rights under FERPA, please visit http://info.evms.edu/registrar_html/.

Students have the right to file a complaint with the U.S. Department of Education concerning alleged failures by the School to comply with the requirements of FERPA.

The name and address of the Office that administers FERPA is:

Family Policy Compliance Office
U.S. Department of Education
400 Maryland Avenue
S.W. Washington, D.C. 20202–4605
ENTERING AND CHANGING GRADES IN A STUDENT TRANSCRIPT:
EVMS is committed to maintaining confidential and accurate student records that document academic performance in the official transcript. Protecting the integrity of those records is a shared responsibility between the educational programs and selected infrastructure units including the Registrar and the Academic Computer Center.

Policy:
Each educational program must assign one or more persons who are authorized to enter or change grades in the institutional database used to create student transcripts. The Registrar may enter or change a grade for students in any educational program if requested to do so by a program director or other designated official with oversight authority for the program.

Procedure:
1) Grades for all students must be entered into the Oracle database by a designated program representative no later than one week after the end of the course.
2) Programs may change a student grade in Oracle until the mid-point of a program’s subsequent grading period based on appeals, completion of assignments, or other circumstances deemed appropriate by the program director or designated official. After the mid-point, the program director or designated official must send a written notice to the Registrar explaining the circumstances and requesting the Registrar to change a grade.
3) Program officials are responsible for establishing procedures for sharing course grades with their students in a timely manner and in such a way that supports this policy and helps ensure accuracy.
4) Random audits of grade entries and grade changes will be conducted not less than annually by the Registrar and will be reported to the Associate Dean for Student Affairs (medical students) or the Executive Director of Operations and Compliance for the Health Professions, and the Director of Financial Services.

ELECTRONIC RECORD STORAGE:
Upon completion of all graduation requirements, the Registrar will electronically store the student’s documents listed below and permanently store hard copies of each student academic file at an off campus location. The Registrar’s Office will have computer access to obtain any of the electronically stored documents. The only permanently archived student documents retained at EVMS under the custodial care of the Registrar include the following:

1. Personal identification, such as the student’s photograph and a document containing the student’s signature
2. Official dates of enrollment at EVMS, dates of leaves of absences or withdrawal, and graduation date
3. Official transcript of all medical school work
4. USMLE scores, ID number, exam date and notation of pass or fail (MD only).
5. Student’s clinical clerkship performance evaluations written by faculty (MD only)
6. Documentation of grade changes.
7. Documentation of dismissal, withdrawal on Student Status Change Form or any disciplinary action
8. Copy of diploma

STUDENT SERVICES
The Office of Student Affairs exists for the purpose of enhancing the quality of student life by creating an environment that will support student academic, physical, emotional, and social development, while challenging them to develop their abilities to the fullest. Committed to this idea, the office complements the instructional program by providing services that help students to enter and enjoy, excel and exit from the Eastern Virginia Medical School. Students are offered opportunities to develop their basic academic skills, to expand their interpersonal leadership and career related skills, and to obtain support services designed to help them cope with educational, personal, health, and social problems.

Find out more information about the Office of Student Affairs at [http://www.evms.edu/students/index.html](http://www.evms.edu/students/index.html).
STUDENT FINANCES

FINANCIAL AID

The primary purpose of the Student Financial Aid Program administered by Eastern Virginia Medical School is to provide an opportunity for students who, without financial assistance, might otherwise be unable to attend EVMS.

Preparing for postsecondary education is a large endeavor. The goal of the Office of Financial Aid is to assist students in preparing financially for attending school as well as assisting in locating outside sources of grants and scholarships. The financial aid process begins with the student filing the Free Application for Federal Student Aid. Based on the FAFSA data, and students’ need for the Federal Stafford loan program will be determined. Students must also provide parental information and signature on the FAFSA to be considered for school-administered scholarships and loans.

Due to limited funding availability, students may rely on credit-based educational loans. Prospective aid recipients should assure they have a good credit rating or they may be ineligible for some forms of financial assistance.

Additional information is available from the EVMS Office of Financial Aid at 757-446-5804 or by email at finaid@evms.edu. The office is located in Lewis Hall, Room 1172.

POLICY ON STUDENT’S FAILURE TO MEET FINANCIAL OBLIGATIONS

Tuition and fees are set by the Board of Visitors, which reserves the right to revise tuition and fees at any time for students currently enrolled as well as for new students. Tuition and fees are due the first day of class of each academic term.

If the required tuition and fees are not paid by the due date, a late charge of $50 may be imposed. If payment has not been received at the end of two weeks and a reasonable explanation has not been accepted by the Dean, the student will have all academic privileges withdrawn and no academic credit will be given for the period. In addition, the student will be charged 1 ½ percent of the amount due per month until payment in full has been received. Reinstatement is at the discretion of the Dean, following receipt of a written application for readmission and evidence of payment of all obligations. No official transcripts, certificates, or diplomas will be issued to any student who has not satisfied his or her financial obligations.

Failure to complete scheduled payments of tuition, fees, and other charges by EVMS and its components will result in:

1) Failure to grant degree(s);
2) Withholding issuance of diplomas;
3) Withholding issuance of transcripts of the permanent record;
4) Withholding certifications;
5) Withholding other student information; and
6) Discontinuing all academic pursuits at EVMS.

A discharge by bankruptcy does not automatically restore eligibility for transcripts or certifications. Examples of other charges are:

1) Payments of principal and/or interest on schedule to EVMS;
2) Payment for “bad checks” offered to EVMS; and/or
3) Delinquent/defaulted student loans

The Office of Financial Aid will contact all former students and graduates who are more than 90 days delinquent on federal student loans. They will be advised of the hold status on academic transcripts and certifications until the delinquent/default status is resolved. It is the responsibility of the borrower to provide the school with documentation from the lender, holder or servicer when a default has been satisfactorily resolved in order to have the academic transcript or certification released. The Student Loan office is responsible for the billing and collection of
in institutional student loans. The Student Loan office will adhere to the terms and conditions in accordance with the institutional loan promissory notes.

FEDERAL AID TO INTERNATIONAL STUDENTS

Non-U.S. citizen applicants are not eligible for federal financial aid due to foreign status, and may be issued a conditional acceptance under the following terms:

1) Applicants with or applying for an F-1 VISA are required to submit current financial information that demonstrates the applicant has readily available funds to pay all tuition, fees, and living expenses for the first year of study, and documentation that adequate funds will be available for each subsequent year of study. (Note: M-1 VISA holders/applicants must demonstrate readily available funds for the entire period of study.)

2) Current financial information is defined as documentation no more than 60 days old from a financial institution. If the account is in the name of someone other than the student, a signed affidavit from the account holder expressing intent and ability to support the student’s educational expenses will be required to be submitted with the financial information. Financial information that is not in U.S. dollars is required to be converted to U.S. dollars by a financial institution.

3) It is the responsibility of the student to submit the required financial information on an annual basis to the Director, Financial Aid one month prior to the start of classes.

4) It is the responsibility of the student to keep his/her VISA status in good standing and provide documentation of VISA status annually to the Associate Director of Human Resources one month prior to the start of classes.

5) The student will be required to comply with all federal immigration regulations.

6) Once the funds have been paid for the academic period, per Institutional policy, the funds will not be refunded if the student withdraws, is expelled, allows his/her VISA to expire, or leaves for any other reason during that period.

This policy applies to all residential programs offered at Eastern Virginia Medical School. Please direct payment questions to the Director of Financial Aid (byersmd@evms.edu) and VISA status questions to the Director of Human Resources (schenkmr@evms.edu).

STUDENT WITHDRAWAL REFUND POLICY

When a student contemplates withdrawing from EVMS, he/she must first consult with the Associate Dean for Student Affairs (for M.D. students) or the respective Program Director (for health profession students). Upon approval, when a student withdraws or is asked to withdraw from EVMS, he/she must complete a Student Withdrawal Request Form which is available from the EVMS Registrar’s web page and included in the Appendix to this Handbook. The Office of the Registrar will sign and forward the Request to all appropriate parties. The date listed on the Student Withdrawal Request Form will be considered the withdrawal date. The student will not be officially withdrawn until the Accounts Receivable Office receives notification of the withdrawal and has completed the EVMS Clearance Certificate. If a student withdraws without notifying the program, the withdrawal date will be the last known date of attendance. Once the completed Clearance Certificate is received by Accounts Receivable, EVMS has 30 days to calculate and refund any unearned tuition and fees. Depending upon the withdrawal date, the student may be required to repay all or part of the financial assistance received.

Tuition and fees will be charged on a percentage basis, based on the class week during which the student withdraws. A class week is defined as the period beginning on Sunday and ending on the succeeding Saturday. A separate schedule of refund percentages exits for each class year of each program. Refund Schedules are available from EVMS web page at http://www.evms.edu/students/financial-aid/refund-schedules.html or the Office of Finance. The student should refer to the Withdrawal procedures described in this Handbook.

Determining the Refund Amount:

The following procedures are used to calculate the amount of tuition and fees to be refunded:

1) The refund percentage is obtained from the appropriate refund schedule and applied to the total amount of tuition and fees charged for the enrollment period. This is the amount to be refunded to lenders of non–Title IV funds and/or the student.
2) Unless mandated otherwise, the refund of non–Title IV funds is then distributed in the following order:
   a. Primary Care Loans (PCL)
   b. Loans for Disadvantaged Students
   c. Military Scholarships
   d. Tuition Assistance Grant (TAG) (LDS)
   e. Institutional Funds
   f. Alternative Loan Program (ALP)
   g. Student

3) If the student was the recipient of any Title IV funds, a separate calculation will be performed to determine
the amount to be refunded to Title IV lenders, as prescribed by the Department of Education. See Title IV

4) The appropriate refund percentage obtained in #1 above is also applied to any Title IV funds. If this amount
is less than the amount actually refunded to Title IV lenders, the student may be liable for the difference.

Leave of Absence
Students who are on an approved leave of absence are not considered to have withdrawn. If, however, the leave of
absence is not approved or they fail to return from a leave of absence, they will be considered to have withdrawn.
See Leave of Absence Policy.

GENERAL STUDENT BILLING INFORMATION

Overall policy:
Tuition and fees are due by first day of classes.

Overall delinquent policy:
Accounts are considered past due if not paid in full by the close of business on the first day of classes. Unpaid
account balances 30 days after the start of classes are considered delinquent.

Overall timeline:
- 30 days in advance of classes—paper bill placed in student box
- First day of classes—tuition and fees are due
- Weekly on Monday—updated electronic financials statement posted to the myEVMS portal.
- 7 days after the start of classes—Reminder letter about past due balance.
- 14 days after the start of classes—Reminder letter about past due balance. Past due account subject to a late
fee of $50.
- 21 days after the start of classes—Reminder letter about past due balance and note to set up meeting
immediately with the Associate Dean for Student Affairs (Dr. Solhaug) or the Executive Director of
Operations and Compliance (Jeff Johnson).
- 30 days after the start of classes—Unpaid account balances are considered delinquent and must be paid
immediately or be the student may be suspended from classes.

Have a question or concern about billing, where should I go?
✓ Check the myEVMS portal for account balance to make sure all charges and loan proceeds look correct.
Instructions are:
   ❖ Go to http://myevms.evms.edu
   ❖ Log in to myevms.evms.edu using same Username and Password as used for logging onto
Blackboard. Select financial statement under the Applications header.
   ❖ For any problems logging onto myevms.evms.edu, contact the EVMS Network Center at (757)
446-5871. If you have successfully logged onto the site but cannot find your financial statement or
you have questions about your statement, contact the Student Billing department at (757) 446-6063.
   ❖ Go to EVMS public website http://www.evms.edu/fin-svcs/acctsrec.html and select FAQ
or see below.
✓ Call or go to Student Billing department located in Suite 307 at Smith Rogers Hall. Direct phone number is
446-6063.
✓ Still not satisfied, bring your concern to the Associate Dean for Student Affairs (medical students) or the
Executive Director of Operations and Compliance (Health Professions).
Appendix P

STUDENT HEALTH AND WELL BEING

STUDENT HEALTH SERVICES

The health fee paid by full-time students covers professional services rendered by the EVMS Department of Family and Community Medicine. Services are provided at either the Ghent Family Medicine Center or the Portsmouth Family Medicine Center. For an additional fee, this coverage may extend to the student’s immediate family. Laboratory or other diagnostic tests, outlined as a covered service in the Department of Family and Community Medicine Student Health Brochure, are not covered if performed outside of the Ghent or Portsmouth Family Medicine Centers. These services may be covered (at least in part) by your individual hospitalization or major medical insurance plan if the studies are ordered by physicians at Ghent Portsmouth Family Medicine Centers. Students are advised to review their own policies carefully for details. All full-time students must participate in this program. See below for Mental Health Services.

OCCUPATIONAL HEALTH

The Occupational Health (OH) Department is located in Fairfax Hall–Suite 506; http://www.evms.edu/occ-health/index.html. The OH staff reviews student health documentation prior to matriculation to ensure that the student meets the Centers for Disease Control and Prevention (CDC) recommendations for immunizations and tuberculosis (TB) surveillance and the immunization requirements required by Virginia law. Services performed by OH include: annual tuberculin skin tests or TB Symptom Surveillance Questionnaires for student’s with a previous positive tuberculin skin test, Hepatitis B vaccine and antibody titers if indicated, blood/body fluid exposure management (i.e. contaminated needle sticks, blood splashes, etc.), and other vaccines such as influenza. You can request copies of your immunization record by email fax or in writing to the OH staff.

OCCUPATIONAL HEALTH REQUIREMENTS

1) PRE–MATRICULATION HEALTH REQUIREMENTS

a. Detailed information about pre-matriculation health requirements can be found at: http://www.evms.edu/occ-health/index.html.

b. Eastern Virginia Medical School adheres to the Centers for Disease Control and Prevention (CDC) recommendations for immunizations and tuberculosis surveillance for health care workers. EVMS will provide each student with the Student Health Requirement Form: http://www.evms.edu/occ-health/students.html. The completed Student Health Requirement Form must be submitted to the Occupational Health Department no later than 30 days prior to matriculation. Applicants accepted less than 30 days before the first day of classes will receive an additional 2 weeks to complete the Student Health Requirement Form.

c. Failure to comply with the completion of pre-matriculation health requirements may result in withdrawal of acceptance to Eastern Virginia Medical School or suspension from classes.

2) IMMUNIZATION REQUIREMENTS FOR MEDICAL AND HEALTH PROFESSIONS STUDENTS

a. Purpose:

i) Because of their contact with patients or infectious material from patients, many medical and health professions students are at risk for exposure to and possible transmission of vaccine–preventable diseases. Maintenance of immunity, therefore, is an essential component of infection control to safeguard the health of medical and health professions students and protect patients from possible infection by medical and health professions students.

b. Policy:

i) Medical, health professions (except Clinical Embryology) and visiting students must provide evidence of immunity (immunization records or results of serologic testing). Detailed information about the immunization requirements is located: http://www.evms.edu/occ-health/students.html. Failure to comply with this policy will result in suspension from classroom and clinical experiences.
Appendix P

ii) The student must attach a copy of the immunization record and/or titer results for proof of immunization. If a student cannot obtain all or part of his/her records, he/she must be revaccinated or have positive blood titers for measles, mumps, rubella and varicella prior to matriculation. Students needing special consideration because of disabilities must notify the Associate Dean for Student Affairs in writing.

3) HEPATITIS B IMMUNIZATION PROGRAM

a. Purpose:
   i) Nosocomial transmission of Hepatitis B virus (HBV) is a serious risk for health care personnel. Hepatitis B vaccination of medical and health professions students who have contact with blood and body fluids can prevent transmission of HBV and is strongly recommended.

b. Policy:
   i) Hepatitis B vaccine is available to students through the Occupational Health Department. The vaccine is available at no charge for programs that have included the fee for the vaccine in addition to the student health fee (i.e. Medical Students, Art Therapy Students, Physician Assistant Students, Surgical Assistant Students and M.P.H. students). Students with possible exposure to blood who refuse the vaccine must sign a Declination Form.

4) TUBERCULOSIS SURVEILLANCE FOR MEDICAL AND HEALTH PROFESSIONS STUDENTS

a. Purpose:
   i) Medical, health professions, and visiting students will comply with current recommendations from the Centers for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA) for medical surveillance related to the prevention of tuberculosis transmission in health care facilities.

b. Policy:
   i) Incoming students will be required to provide documentation to the Occupational Health Department of a two-step tuberculin skin test (TST) within 12 weeks prior to matriculation. If the student can provide documentation of a negative TST performed in the previous 12 months, a single step TST will be required. Students with a previous positive TST must complete a Tuberculosis Surveillance Form and provide documentation of a negative chest x-ray and documentation of prophylactic treatment or reason it was contraindicated.

   ii) Students who convert to TST positive must have a chest x-ray performed within one week of conversion. Students with negative chest x-rays must submit documentation from their treating physician regarding an evaluation for INH therapy. If INH therapy is not initiated, documentation from the treating physician must be provided stating the reason therapy was not started. This documentation must be provided to the Occupational Health office within thirty days of the conversion. Documentation from the treating physician regarding completion of nine months of INH therapy must be provided to the Occupational Health office as well.

   iii) All students will be required to have a TST on an annual basis thereafter. Students with a previous positive TST must complete a Tuberculosis Surveillance Form annually. Students can schedule a testing through the Occupational Health Office by calling 757-446-7427.

   iv) Visiting students must provide documentation of a negative TST within the previous 12 months to the Occupational Health Office. If the student has a positive TST, they must complete a Tuberculosis Surveillance Form, provide documentation of a negative chest x-ray, and documentation regarding an evaluation for INH prophylaxis.

   v) Failure to comply with this policy will result in suspension from classroom and clinical experiences.

5) WORK RESTRICTIONS DUE TO COMMUNICABLE DISEASES

a. Purpose:
Appendix P

i) To decrease the risk of transmission of communicable diseases from medical and health professions students to patients, students with signs and symptoms of communicable diseases will be evaluated and may have work restrictions imposed. Work restrictions will be based on the Centers for Disease Control and Prevention (CDC) “Recommendations for prevention of infections in health care personnel”.

b. Procedure:
   i) Students exhibiting signs and symptoms of communicable diseases and not under a physician’s care will be restricted from patient contact until receiving medical clearance from their private physician and Occupational Health. Signs and symptoms of communicable diseases include, but are not limited to, the following:

   (1) Fever of 100.5 degrees F (38 degrees C) or greater
   (2) Open, draining wounds or weeping dermatitis
   (3) Cough > 2 weeks
   (4) Infectious skin lesions/rash
   (5) Conjunctivitis, drainage from one or both eyes
   (6) Jaundice
   (7) Acute diarrhea
   (8) Active herpes simplex lesions
   (9) Vomiting
   (10) Varicella (chicken pox)

   ii) Documentation from the student’s private physician must be presented to Occupational Health before the student can be cleared to return to class or clinical activities.

   iii) The nature of the student’s illness will be kept confidential by the Occupational Health staff.

6) CONFIDENTIALITY OF OCCUPATIONAL HEALTH MEDICAL RECORDS

a. Policy:
   i) It is the policy of EVMS to use information obtained in interactions with the Occupational Health staff for medical purposes only. Medical records are the property of EVMS and information contained in them will be released only after written consent of the student and in accordance with the provisions of the Patient Health Records Privacy Act of Virginia.

b. Procedure:
   i) All information obtained from pre-matriculation medical health forms will be collected and maintained on separate forms, in separate medical files, and will be treated as confidential medical records.

   ii) Persons having access to these medical records are limited to: the Occupational Health Medical Director, the Occupational Health staff or contract physician, the Occupational Health nursing staff, and select administrative staff.

   iii) All medical information will be kept confidential, with the following exceptions:

   (1) Supervisors will be informed about necessary restrictions on the work or duties of a student and necessary accommodations.
   (2) First aid and safety personnel may be informed, when appropriate, if the disability might require emergency treatment or if any specific procedures are needed in the case of a fire or other evacuations.
   (3) Government officials investigating compliance with the Americans with Disability Act (ADA) and other federal and state laws prohibiting discrimination on the basis of disability or handicap should be provided relevant information on request. Other federal laws and regulations, for example the Occupational Safety and Health Administration (OSHA), may also require disclosure of relevant medical information.

BLOOD/BODY FLUID EXPOSURES
Appendix P

Students who have an unprotected blood/body fluid exposure (e.g., needle stick, scalpel cut, splash to eyes, nose, mouth, or to non-intact skin) should immediately wash the wound or skin site with soap and water. Mucous membranes should be flushed thoroughly with water. The student should then contact the Occupational Health staff at pager 757-584-0550 or 757-533-2595 if during business hours and EVMS Exposure Pager at 757-669-1157 during nights or weekends. The exposure should also be reported as soon as possible to their supervising clinician. The “Bloodborne Pathogens Exposure Card” is a laminated instruction card that should be attached to the student’s identification badge. The card gives specific instructions for the protocol to be followed post exposure. Replacement cards can be obtained from the Occupational Health staff. For further information, please refer to the Occupational Health website: http://www.evms.edu/occ-health/exposures.html.

BLOODBORNE PATHOGEN TRAINING

Medical and health professions students (except M.P.H.) are required to successfully complete Bloodborne Pathogen Training during orientation and prior to beginning their formalized clinical rotations. This course is available on Blackboard (http://evms.blackboard.com). If you need additional information, please contact the Occupational Health Department at 757-446-7427.

HEALTH INSURANCE POLICY

All full-time matriculated (degree/certificate) students of EVMS must have hospitalization, medical/surgical, and major medical coverage. Applications for the student plan are available in the Office of Student Affairs. Students may elect to obtain their own coverage but must provide the Office of Student Affairs with proof of insurance which includes the name, identification numbers, and expiration date of the hospitalization and medical/surgical plan in which they and their dependents are enrolled. Married students are strongly urged to be certain that their spouses have medical/surgical insurance coverage.

MENTAL HEALTH SERVICES

Counseling services are available to all full-time students through EVMS Student Mental Health Services offered by the Department of Psychiatry and Behavioral Sciences. These services offer personal assessment, short-term individual counseling, crisis intervention, and referral for psychiatric services or long-term counseling. They are available to help students and their spouses free of charge. Contacts are completely confidential. For an appointment or more information, contact the Department of Psychiatry and Behavioral Sciences at 757-446-5888.

PHOENIX PROGRAM

PHOENIX is an assistance program for students and their family members who are having difficulty coping because of alcohol or other drug abuse, domestic abuse, family concerns, financial challenges, or various forms of stress or emotional/anxiety problems. PHOENIX Committee is comprised of students elected by their peers as well as faculty appointed by the Dean. All encounters with any member of the committee are STRICTLY CONFIDENTIAL.

General Goals:

a) To provide compassionate assistance to those in need
b) To provide help in strictest confidence, fully protecting the rights of students to receive treatment
c) To assure that recovering students are able to continue their education without stigma or penalty

Contact: Catherine Pearman, MPAS,PA-C at 446-7158 or PearmaCB@evms.edu, or a member of the committee. Student committee members are listed on the Student Portal at evms.collegiatelink.net

EVMS NEUROPSYCHOLOGY CENTER
Appendix P

Formal evaluation of students for learning disabilities, attention-deficit hyperactivity disorders, emotional problems, etc., is provided by EVMS Neuropsychology Center (757-446-8400). A discussion with the student is followed, when appropriate, by an individualized battery of standardized achievement, aptitude, and other instruments, concluding with a session in which the results are interpreted for the student. Results are considered confidential unless the student grants permission or a third party payer requires information (about which student is informed in advance). Reports are written as needed (e.g., to NBME for accommodations during board exams for students with disabilities). Although students may contact the Center directly, they are highly encouraged to obtain a referral from a Course Director or the Student Progress Committee. The cost is to be paid by student or third party, with discounts possible.

ATHLETIC FACILITIES

The Office of Marketing and Communications negotiates with various athletic facilities in the nearby area to provide reasonable membership fees for students. A list of possible facilities, their location, and membership fees will be provided to students at Orientation. Membership fees are the responsibility of the student, and are not included in student tuition or other activities fees.

STUDENT RIGHTS AND RESPONSIBILITIES

EVMS expects its students to assume the responsibility for their own behavior, to follow the standards of conduct of academic communities, to conduct themselves in the highest traditions of health professionals who are engaged in the pursuit and application of knowledge, and to abide by the laws of the United States, the Commonwealth of Virginia, and the rules and regulations of EVMS. Special emphasis is placed on honesty and integrity in testing, research, patient care, and on the appropriate acknowledgement of the contributions of others to one’s own work. Any student who violates the following general standards of conduct may be subject to administrative and/or disciplinary action as hereinafter provided. More specific guidance concerning student rights and responsibilities can be found in this Student Handbook, and in the Policies and Procedures for Medical Student Evaluation or the Policies and Procedures for Health Professions Students Evaluation and Progress.

NON-ACADEMIC POLICIES AND PROCEDURES

CODE OF STUDENT CONDUCT

EVMS students shall conduct themselves in a manner compatible with the educational mission of EVMS and shall be disciplined for misconduct or unprofessional behavior. Specifically, students are subject to disciplinary action for the following:

1) Forgery, alteration, or misuse of EVMS or other official documents, records, or identification;
2) Knowingly furnishing false information to EVMS;
3) Obstruction or disruption of EVMS operations;
4) Obstruction or disruption of EVMS-authorized activities;
5) Physical or violent verbal abuse of any person on property owned or controlled by EVMS or at functions sponsored or supervised by EVMS;
6) Conduct that threatens or endangers the health or safety of any person, including oneself, on property owned or controlled by EVMS or at functions sponsored or supervised by EVMS;
7) Theft of or damage to EVMS property;
8) Theft of or intentional damage to private property on premises owned or controlled by EVMS;
9) Unauthorized entry of EVMS facilities or property;
10) Unauthorized access, use or misuse of EVMS property, including, but not limited to: attempting to leave the library with library materials which have not been properly borrowed; unauthorized use or misuse of computer equipment, computer software and hardware; or misuse of EVMS telephones;
11) Violation of EVMS regulations or campus policies approved by the Board of Visitors, the President, or the Dean and described in official EVMS publications;
12) Use or possession of alcohol, marijuana, narcotics, or illicit drugs (except as expressly permitted by law or EVMS regulations) on property owned or controlled by EVMS;
13) The sale or distribution of marijuana, narcotics, or dangerous drugs (except as expressly permitted by law) on property owned or controlled by EVMS or at functions sponsored or supervised by EVMS;
Appendix P

14) Violations of EVMS housing policies;
15) Lewd, indecent, or obscene conduct on property owned or controlled by EVMS or at functions sponsored or supervised by EVMS or EVMS–related organizations;
16) Drunken or disorderly behavior on property owned or controlled by EVMS or at functions sponsored or supervised by EVMS or EVMS–related organizations;
17) Intimidating behavior directed toward any student, faculty member, staff member, or administrator;
18) Failure to comply with the directions of an EVMS official acting in the performance of his/her duties;
19) Violation of EVMS firearms policy;
20) Circulating a report or warning that property under EVMS control or supervision may be subject to a bombing, fire, crime, emergency, or other catastrophe, knowing that the report or warning is false;
21) Tampering with safety equipment or the inappropriate use or possession of safety equipment on property owned or controlled by EVMS;
22) Giving false testimony or evidence at any official EVMS hearing or to any EVMS official;
23) Conduct deemed unlawful by the criminal statutes of the Commonwealth of Virginia or the United States of America and conduct that endangers or threatens the security of EVMS community;
24) Violations of the conditions of a sanction imposed through EVMS disciplinary procedures;
25) Violation of EVMS’ sexual harassment policy;
26) Any student who conspires to commit, or who participates in an action that results in a violation of the Code of Student Conduct, shall be bound by the acts of every person participating in such an action and shall be disciplined accordingly; and
27) Falsifying medical records while on a clinical rotation.

The EVMS Code of Conduct (the “Code”) is a statement of our collective commitment to upholding the policies, standards, laws and regulations that guide and govern our daily work. Each member of the EVMS community is individually accountable for his or her own actions and collectively accountable for ensuring that EVMS remains compliant and with principle.

STUDENT DRESS CODE

Introduction
Patients, family members and visitors to our practice judge us in part by the image we present to them. This image is formed by the service we provide, by the way we look and by the way we speak. Sloppy appearance implies sloppy care. These guidelines are published to ensure that we are creating a visual image that tells our patients we are a quality organization to which they can entrust their health care.

These guidelines are for use by the physicians, providers, residents and students of EVMS Health Services while in the workplace.

Compliance and Enforcement
Each physician, non–physician provider, resident and student shall comply with the professional image standards as a work ethic obligation to foster a positive work environment and professional public image. During orientation the chair, division director, residency training program director, clerkship coordinator or designee will review the professional image standards with and clarify any questions with each new provider, resident, or student.

The follow–up practice will be to monitor compliance and to provide immediate feedback to the individual when variances are noted. Counseling for non–compliance with the standards may result in progressive disciplinary action. The chair, division director, residency training program director or clerkship coordinator will make the final determination of “appropriate” for their respective areas.

Unusual situations or emergencies may be evaluated by the chair, division director, residency training program director or clerkship coordinator regarding variances from appropriate attire (examples: moving, severe weather, crisis, etc.).

Students
Students will wear clothing appropriate to a business office and/or scrubs and should be neat and clean. Hair shall be appropriately styled and groomed.

Students are expected to wear a short, clean, white lab coat with their name and appropriate EVMS logo.
Glossary of Terms:

APPROPRIATE: as defined by the professional image standard for EVMS Health Services.

BUSINESS ATTIRE: street clothing worn by physicians, non–physician providers, residents, and/or medical students is defined as career dress/skirt, dress slacks (no jeans, stirrup pants, denim, spandex, tights), skirt and blouse, sweaters, split skirts below the knee for female physicians, non–physician providers, residents, and/or medical students; suit or shirt, tie and dress slacks for male physicians, non–physician providers, residents, and/or medical students (sweaters and vests are optional). Skirt/dress is to be no shorter than 2 inches above the knee.

CLEAN: non –soiled, non–stained, and pressed.

CLINICAL SETTING: direct and indirect patient care areas.

COORDINATED: clothing that is in proper relation and appropriately matched; scrub jackets and tops should match in design or be color coordinated.

FOOTWEAR: described as shoes and socks or hose worn with either clinical or business attire; business type shoes serviceable for walking (excludes tennis shoes); hosiery is preferred to be worn with shoes by female physicians, non–physician providers, residents, and/or medical students; socks to be worn with shoes by male physicians, non–physician providers, residents, and/or medical students.

GROOMING: maintenance of professional exterior appearance which includes hair (below shoulder length pulled back in clinical settings), beards/mustaches (neatly trimmed), nails (neatly trimmed no greater than ½ inch beyond fingertip); nail color shall be appropriate to the clinical and business environment. Hair accessories are to be color coordinated with attire and conservative in style; hair color shall be appropriate to the clinical and business environment.

IDENTIFICATION: EVMS badges shall be displayed while in medical school facilities/buildings.

IMAGE: the overall appearance projected by the individual to other physicians, non–physician providers, residents, and/or medical students and customers.

JEWELRY: defined as either clinical or business jewelry.

CLINICAL JEWELRY: professional jewelry; minimal in number and size; earrings (one to two in number, no moving parts, no hoops larger than the size of a quarter); rings shall number no more than three; no bangle bracelets; no body piercing jewelry to be visible at any time.

MAKE–UP: make–up shall be in keeping with portraying professional image.

NEAT: attire and appearance characterized as wrinkle–free, non–frayed, hemmed, non–faded, appropriately mended, tucked in, etc.

NON–UNIFORM: career clothes worn in patient care areas.

PERFUME/COLOGNE: perfume/cologne is discouraged for all physicians, non–physician providers, residents, and/or medical students who have direct patient contact.

PERSONAL CLEANLINESS: personal hygiene which prevents body odor, dirt accumulation on the body, nails or hair.

PROFESSIONAL: career clothing, jewelry, hair accessories and grooming styles which are in good taste, non–seductive, modest, not exotic or extreme in style, appropriate length, free of patches or slogans; excludes wearing casual clothes such as jeans, overalls, tank tops, t–shirts, sweat shirts/pants, halter tops, shorts, sun dresses, etc.

PROPER FIT: clothing that is proportionally correct for the body size (not too tight, oversized, too long, etc.).
Appendix P

SCRUBS: non-traditional uniforms worn by clinical staff, which is either unit provided or employee provided.

UNIT PROVIDED SCRUBS FOR AMBULATORY OR FACILITIES: scrubs that are the required uniform for infection control reasons; scrubs are provided and laundered by the unit and are not to be worn to and from work; this type of scrub shall only be worn in emergency situations such as soiling of employee provided scrubs, etc.

STREET CLOTHES: appropriate career clothing worn in the clinical and business setting; professional attire which can also be worn outside of the organization.

TATTOOS: No tattoos may be visible at any time.

UNDERCLOTHING: clothing to be present but not visible (example: colors, prints, etc.); worn under the exterior garments.

UNIFORM: traditional white uniform or scrub uniform clothing.

SEXUAL HARASSMENT POLICIES AND PROCEDURES

Policy:
EVMS prohibits sexual harassment within the organization. Sexual harassment subverts the mission of the institution and threatens the academic performance, learning environment, educational experience, careers, and well-being of students, faculty, and staff. Harassment in any form is considered reprehensible and will not be tolerated. Relationships involving sexual harassment have no place in EVMS and are prohibited. These policies and procedures provide for a prompt and equitable resolution of sexual harassment complaints. Accordingly, the policies and procedures are intended not only to prevent sexual harassment, but also to prevent retaliation against complainants or those supplying information regarding a complaint. Upon notification of alleged sexual harassment, a thorough and impartial investigation of complaints will be initiated, including the opportunity to present witnesses and other evidence. Protection for a person who considers himself/herself falsely accused has also been incorporated.

Definition:
Sexual Harassment is defined as any unwelcome verbal exchange (e.g., jokes, innuendoes, or slurs) or physical conduct (e.g., touching or gesturing of a sexual nature), including unwelcome sexual advances, request for sexual favors or other verbal or physical conduct of a sexual nature that creates a hostile or offensive educational environment or limits a student’s ability to participate in or benefit from an educational program or activity. Such conduct violates EVMS policy and subjects the offender to disciplinary action when:

1) Submission to such conduct is made either explicitly or implicitly a condition of an individual’s education and training.

2) Submission to or rejection of such conduct by an individual is used as a factor affecting the individual’s education, including but not limited to any evaluation, schedules, or promotions.

3) Exposure to such conduct limits a student’s ability to participate in or benefit from an academic, educational, extracurricular, athletic, and/or other program of the school, regardless of whether it takes place on school property, at a class or training program sponsored by the school at another location, or elsewhere.

Sexual intimidation is a blatant misuse of power and authority that undermines academic freedom and is inimical to a fair and humane environment. An immediate and appropriate investigation will be undertaken when incidents of sexual harassment or intimidation are alleged.

False accusations of harassment can have as great an impact on the accused as actual harassment can have on the complainant. These procedures are therefore intended to protect the rights of both the complainant and the accused to the fullest extent possible. The accused will have the right to pursue the same options as the complainant in order to redress what he or she believes to be a false accusation of harassment.

Any retaliation or threat of retaliation against an individual for presenting a complaint of harassment or testifying as a
Appendix P

witness to the alleged harassment is prohibited and will be treated as a separate incident, to be handled in the same manner and subject to the same procedures as the complaint itself.

All EVMS officials, including the President, the Dean, and Department Chairpersons, shall take appropriate steps to disseminate this policy statement and to inform employees and students of procedures for lodging complaints. All members of the student body, faculty, and staff are expected to assist in implementing this policy. The scholarly, educational, or artistic content of any written, oral, or other presentation or inquiry shall not be limited by this policy. It is the intent of this paragraph to assure that academic freedom is allowed to all members of the academic community. Accordingly, this provision shall be liberally construed but shall not be used as a pre-textual basis for violation of this policy.

Any medical or health professions student with a complaint of sexual or discriminatory harassment should contact the Associate Dean for Student Affairs or another member of the administrative staff. In addition, students with these complaints should feel free to contact the Associate Dean for Student Affairs to obtain information on EVMS Procedure for handling such complaints.

Procedure:

Any complaint of harassment brought by a student against any other member of EVMS community shall be governed by the following procedures. The procedures for EVMS as set forth shall be equally applicable to the accused to redress what he or she believes to be a false accusation of harassment.

1) A complaint of harassment or inquiry may be informally presented either verbally or in writing by an individual who claims to have been harassed to the Associate Dean for Student Affairs. The Associate Dean for Student Affairs shall have the right to delegate responsibilities as individually or collectively outlined in this document (excluding student appeals) to another faculty member of EVMS. A charge of misconduct can originate from various sources and come to the attention of the Dean in a number of ways. The Associate Dean for Student Affairs and/or his/her designee, in order to follow the general principals outlined above and upon hearing the complaint, should promptly investigate all pertinent sources of information. This can include seeing the accused and the accusers alone or in concert. The Director of Health Professions or his/her designee can seek advice and assistance as needed to determine whether the evidence is sufficient and/or the charge serious enough to warrant a formal hearing. If it is decided that no formal hearing is required, the Associate Dean for Student Affairs or the Dean’s designee may counsel the parties concerned regarding improving their future behavior and/or clarifying the issues initiating the original complaint. If it is decided that the charge warrants a formal hearing, then the formal hearing procedures will be observed.

2) If the complaint of harassment or inquiry is presented by someone other than the complainant, the individual shall be informed of the institutional policies and procedures regarding harassment and shall be advised that:
   a. The initial complaint or inquiry shall be kept confidential.
   b. A complaint cannot be processed further without the complainant’s specific consent.
   c. The complainant should contact the Associate Dean for Student Affairs if he/she wishes to proceed.

3) In the first conversation with the complainant, the Associate Dean for Student Affairs shall discuss the institutional policies and procedures regarding harassment and the confidentiality of the initial complaint or inquiry. The complainant shall also be apprised of the following four options available to promote internal resolution of a complaint:
   a. Informal, direct discussion between the complainant and the accused;
   b. Written communication (letter) from the complainant to the accused describing the incident(s), indicating the writer’s reaction to the incident(s), and recommending an appropriate remedy;
   c. Investigation and mediation of the complaint by the Associate Dean for Student Affairs.
   d. Filing a formal written grievance.

Each option in this section may be exercised independently. The selection of one option does not prevent the use of another option at a later date. The complainant will be encouraged to pursue the options sequentially, but any formal grievance must be filed within 10 business days of the date of the incident.

4) In pursuing Options 4a or 4b, the complainant may seek the advice of the Associate Dean for Student Affairs. The complainant has the choice of whether or not to inform the accused that the Associate Dean for Student Affairs has been contacted.

5) If option 4c is pursued by the complainant, the Associate Dean for Student Affairs, before proceeding with investigation and mediation, shall inform the complainant that the accused must be notified of the complaint
including the specific allegations and the identity of the complainant. Should the individual decide not to continue the investigation and mediation process after receiving this information, the Associate Dean for Student Affairs will respect the right of the complainant to withdraw consent to proceed.

a. As part of the investigation, the Associate Dean for Student Affairs will talk with the person directly involved in the complaint to obtain relevant facts and opinions. If it is necessary to speak to any persons other than the complainant and the accused, the Associate Dean for Student Affairs shall do so only after informing the complainant and the accused of the intended inquiry. If it appears appropriate, the Associate Dean for Student Affairs may arrange a mediation meeting with the complainant and the accused in an effort to resolve the issue and explore reasonable remedies.

b. All investigation findings and mediation efforts of the Associate Dean for Student Affairs shall be kept confidential and shall not be disclosed to anyone other than the complainant and the accused, except that the investigation findings shall be made available if a grievance is subsequently filed and is subject to formal legal action. Records shall be maintained in a separate file.

6) A formal grievance must be filed in writing by the complainant within 10 business days of the alleged harassment, utilizing the student grievance process either as a medical student or as a health professions student, as the case may be. In any grievance hearing on a charge of sexual harassment, the following additional procedures shall apply:

a. During a hearing, no evidence may be presented which pertains to the past sexual history of the accuser or of any witnesses.

b. During a hearing, unrelated past sexual history of the accused may not be entered as evidence or discussed in the hearing.

c. The accused and accuser will be notified in writing of the outcome of disciplinary proceedings, any sanctions imposed, and of the final action taken by the Dean on any appeal.

d. In cases where a sanction of disciplinary suspension or dismissal is imposed, a notation of the sanction will be recorded on the student’s official school transcript.

e. The accuser shall have the right to have an accompanying advisor throughout a hearing.

f. The accuser shall be informed of all witnesses to be called, to the extent known, during a hearing.

g. A hearing involving charges of sexual assault shall be closed.

h. All proceedings in cases involving sexual assault will be treated confidentially, to the extent provided by law, and the identities of any involved party will not be disclosed to anyone not directly involved with the School’s disciplinary process.

SMOKING AND TOBACCO POLICY

It is the policy of EVMS to provide a smoke-free environment for its students, faculty, staff, residents, and contractors. Effective January 1, 1009 the Medical School shall be a tobacco-free campus including satellite offices. This includes smoking and smokeless tobacco products. The tobacco-free zone includes the parking garages and lots. Tobacco use will not be permitted in school vehicles and in private cars parked on school property (Eastern Virginia Medical Center and satellite offices). Enforcement of this policy is a responsibility for all faculty, staff, residents and students of EVMS, who are expected to be positive role models and good ambassadors of the Tobacco Free initiative to non-EVMS persons on campus. Those who violate the policy are subject to disciplinary action.

POLICY ON ALCOHOL AND OTHER DRUGS
(For EVMS Students only, not residents or fellows)

Policy:

It is the policy of EVMS to maintain an alcohol and drug free work and learning environment. Drugs are defined as those controlled substances identified in the Federal Controlled Substances Act (a copy of the Act is available in EVMS Human Resources Department (757-446-6043). The use of drugs and/or alcohol results in increased absenteeism, a lowered educational performance, an increased risk to patients, and decreased productivity. In addition, there are serious health risks associated with the illicit use of drugs and alcohol and as a medical school it is vitally important that we maintain a healthy educational environment.
Appendix P

Procedure:

1) All student incidents of possession, use, or distribution of alcohol (on campus or in clinical training facilities) and illegal drugs will be reported to the Associate Dean for Student Affairs. The student may be counseled, required to seek treatment, dismissed from the institution, or subject to other disciplinary action depending on the circumstances.

2) If a member of the faculty, staff, or student body has reasonable suspicion through direct observation that a student appears to be under the influence of alcohol or illegal drugs in an academic setting, which includes clinical rotation facilities, the student will be referred to the Associate Dean for Student Affairs who will then determine if testing is warranted and if the student should be removed from class and/or clinical activities. Refusal to be tested may be grounds for immediate dismissal from the institution. Students who test positive will be referred to the Phoenix Committee. Refusal to seek treatment or failure to follow the treatment/rehabilitation program as outlined by the Phoenix Committee may result in immediate dismissal from the institution.

3) Students convicted of a drug offense must notify the Associate Dean for Student Affairs within five days. Such conviction may be grounds for disciplinary action, including immediate dismissal from the institution. The Associate Dean for Student Affairs must notify the appropriate federal agency within ten (10) days if the student is receiving federal loans, along with: (a) the Vice Provost for Planning and Health Professions and appropriate program director for health professions students, or (b) the Associate Dean for Education for medical students. EVMS will adhere to procedures outlined in the institutional Criminal Background Check policy.

4) Some clinical training sites may require students to have a drug screening test before beginning a rotation at their facility. All EVMS students are expected to comply with the requirements of the training facility. If a student refuses a test, the student will be referred to Associate Dean for Student Affairs. The academic program will be responsible for the cost of a test. If a student agrees to the test, they must sign a release form authorizing an appropriate site official to convey positive test results to the applicable program director for health professions students. The program director will report positive test results to the Associate Dean for Student Affairs, who in turn will follow the procedures outlined above in Section 1).

5) Additional information regarding Alcohol and Drug policies applicable for EVMS students is found in the EASTERN VIRGINIA MEDICAL SCHOOL, HUMAN RESOURCES POLICIES AND PROCEDURES, EMPLOYEE RELATIONS, and ALCOHOL AND DRUGS POLICY 4.53
http://info.evms.edu/humanresources/postdocs/policies_employeerelatio_/453update030806/default.htm
Relevant Sections applicable to EVMS Students are the following: GENERAL STATEMENT OF PURPOSE, Page 1; PROCEDURES D. EDUCATION, Page 6; PROCEDURES E. VIOLATION AND PENALTIES, Page 9.

SOCIAL MEDIA POLICY
The emergence of new online collaboration and social networking platforms is changing the way we interact with one another. Eastern Virginia Medical School (EVMS) and many of its academic, clinical, and research departments may participate in various social media platforms to engage the public and communicate worthwhile information from and about the school. In addition, EVMS considers the use of social media by its employees, students, and affiliates to be an important component of the EVMS Quality Enhancement Plan, which enhances education, communication, collaboration, and information sharing through technology. While the EVMS community is encouraged to join a global conversation through social media, it is important for those who choose to do so to understand what is recommended, expected, required, and prohibited while participating. The EVMS Social Policy governs the creation and participation in social media, for both professional and personal use by EVMS students, employees and affiliates at EVMS and when discussing EVMS related topics. For the purposes of this policy, “Social Media” means any platform for online publication and commentary, including without limitation blogs, wiki’s, and social networking sites such as Facebook, Twitter, YouTube, LinkedIn, Blogger, flickr, FourSquare, Ning, and Orkut.


WEAPONS POLICY
Appendix P

It is the policy of EVMS to promote a weapons free environment for the safety of all. EVMS prohibits the possession of any handguns or other weapons, concealed or not, in all EVMS facilities, including and without limitation, all buildings, grounds, student apartments, parking areas, or any other properties owned or operated by EVMS. The only persons permitted to carry weapons at EVMS are Campus Security Department and any other law enforcement officers in the line of duty.

Possession of a concealed handgun permit shall not exempt any person from the provisions of this policy. Pursuant to Virginia Code 18.2-308(a) (2001) and to the Norfolk City Code 47-1(7), “the granting of a concealed handgun permit shall not thereby authorize the possession of any handgun or other weapon on property or in places where such possession is otherwise prohibited by law (schools, churches, courthouses, bars, etc.) or is prohibited by the owner of private property.”

Definition:
"Weapons" includes an array of harmful devices including but not limited to handguns, shotguns, pistols, switchblades, knives, slingshots, metal knucks, blackjacks, clubs, explosive devices, and all other weapons as described in Virginia Code 18.2-308(a) (2001).

Procedure:
Compliance is required by all students, employees, patients, and visitors. Students and employees who violate the policy will be required to remove their weapons from EVMS premises and are subject to disciplinary action. Visitors and patients found carrying weapons at EVMS will be asked to leave the premises with their weapons. Anyone refusing to leave will be subject to arrest and prosecution.

Responsibility:
It is the responsibility of every student, employee, patient, and visitor to ensure adherence to this policy. Anyone noticing a person carrying a weapon should report it immediately to EVMS Security Department at 446-5198.

HOUSING POLICY FOR HAGUE CLUB APARTMENTS

EVMS owns and operates the Hague Club Apartments, which offers one and two bedroom apartments, as well as one bedroom loft apartments to EVMS students and residents. The purpose of the Housing Policy is to establish a clear understanding and agreement between the student and EVMS with regard to the terms and conditions of occupancy in medical school housing. The execution of the housing agreement represents acceptance of these terms and conditions. It is the student’s responsibility to know these terms. All of the policies in this handbook, including the policies on alcohol and drugs, smoking and weapons, apply to The Hague Club Apartments. For additional information on the Hague Club apartments, contact the manager of the apartments at 757-446-5961 or 757-446-9236.

MEDICAL STUDENT NON-ACADEMIC GRIEVANCE AND APPEALS PROCEDURE

Students in the MD program at EVMS have the right to due process involving grievance and appeals procedures for non–academic grievances

1) Any medical student who has a non–academic grievance should follow the steps listed below to have his or her grievance addressed.
   a. The initial step is for the student to discuss the grievance with his or her faculty advisor and/or departmental chairman.
   b. If this does not lead to a resolution of the problem, the faculty advisor and/or the departmental chairman will discuss the situation with the Associate Dean for Student Affairs.

2) If the grievance is not resolved at this level, a standing committee of five members acting as a Grievance Committee will, upon request of the student, address the problem. This Grievance Committee will have three student representatives, one from the Student Affairs Committee, one from the Student Progress Committee and one from the Office of Education and two faculty members, the latter two to be named by the Faculty Senate.

3) Written recommendations for the Grievance Committee will be forwarded to the Dean for his/her final resolution of any student grievance.

HEALTH PROFESSIONS STUDENT NON-ACADEMIC GRIEVANCE AND APPEALS PROCEDURE
Students in the Health Professions programs at EVMS have the right to due process involving grievance and appeals procedures for non-academic grievances

1) The student should discuss the grievance with his or her Health Professions Program Director.
2) If the grievance is not resolved at the Program Director level, a student may file a written appeal to the Vice Provost for Planning and Health Professions within seven working days of the student’s notification of the program director’s decision. Upon receipt of the appeal, the Vice Provost for Planning and Health Professions or designee will review all pertinent material and meet with the student. The Vice Provost for Planning and Health Professions will convene a Grievance Committee composed of three members to include program directors, faculty, and/or chairs of departments not directly involved in the grievance issues. All testimony, evidence, and witnesses relevant to the appeal shall be made available to this committee. The student has the right to appear before the committee, present testimony and such witnesses or evidence as is deemed relevant by the committee. The student shall not have the right to be represented by counsel at these Committee meetings.
3) After completion of the review, the Committee shall submit its recommendations to the Vice Provost for Planning and Health Professions. On behalf of the Grievance Committee, the Vice Provost for Planning and Health Professions will notify the student within ten working days of his/her decision. These recommendations may include, but are not limited to, reinstatement, retention, probation, termination, suspension, special academic assignments, or other interventions deemed appropriate to the situation. The judgment of the Vice Provost for Planning and Health Professions concerning the grievance shall be final and binding on all parties with the exception of recommending the termination a student’s participation in an academic program.
4) In the case of termination of an individual form an academic program, the student may file a written appeal to the Dean within five working days of the student’s notification from the Vice Provost for Planning and Health Professions. The Dean will review all pertinent material and notify the student within ten days of receipt of the appeal of his/her decision. The decision of the Dean is final.

ACADEMIC POLICIES AND PROCEDURES

MEDICAL STUDENT EVALUATION AND PROGRESS

The following policies and procedures for student evaluation and progress are subject to change and should not be construed as a contract between the student(s) and the Eastern Virginia Medical School.

EVALUATION POLICY

1. General Principles:
   a. Candidates for the degree of Doctor of Medicine must demonstrate the requisite knowledge and skills to complete the prescribed course of study and must also demonstrate the personal characteristics and qualities necessary for the safe and effective practice of medicine. Therefore, students will be regularly evaluated during their training, both with regard to their academic performance and with regard to their professional development. Satisfactory academic accomplishment and professional development are both essential requirements for graduation.
   b. The purpose of academic evaluation is to certify students for graduation from EVMS by documenting their competence in the biological, behavioral, and clinical sciences. Evaluations:
      i. Assure adequate competence of students in the knowledge, skills, and attitudes essential for the practice of medicine.
      ii. Will be based on the goals and objectives of the curriculum and will assess the mastery of fundamental concepts as well as the ability to integrate knowledge and skills.
      iii. Provide early detection of unsatisfactory or marginal performance in order to assist students to meet acceptable academic standards, or if necessary, to redefine educational and career goals.
      iv. Document distinguished performance in a manner that benefits students’ further educational and career planning.
Document institutional progress toward educational goals and objectives and provide the
information necessary to modify and strengthen the curriculum.

c. The purpose of evaluation of professional behavior is to certify students for graduation by
documenting judgment, attitudes, and behavior appropriate for the practice of medicine. Students
will be evaluated with regard to respect for ethnic and cultural diversity; professional demeanor and
conduct; concern for the welfare and dignity of patients, colleagues, and coworkers; trustworthiness
and responsibility to duty; and other such personal and professional characteristics deemed
appropriate by the faculty.

d. The evaluation of students' academic progress and professional development is a corporate
responsibility of the faculty of the medical school.
   i. The Student Progress Committee, appointed annually by the Dean of the Medical School,
      has overall responsibility for assessing student performance and progress, and for
      recommending appropriate remediation or corrective action when necessary.
   ii. Evaluation of students' performance in each course is the responsibility of each course
director; reports of student performance will be regularly forwarded to the Associate Dean
for Student Affairs, the Associate Dean for Education, and the Student Progress
Committee for review.

2. Specific Principles:

a. Course goals and objectives, standards for acceptable performance, and evaluation methods are
   communicated in writing to students by course directors and faculty at the beginning of each
course. Written objectives will be provided for all educational activities to be evaluated, including
laboratory exercises.

b. Requirements for grades are determined by individual course policy within institutional guidelines.
   These requirements are communicated to students in writing at the beginning of each course.

c. The only grades recorded by the Registrar's Office on student transcripts are Honors, High Pass,
   Pass, or Fail. “Incomplete” is not a grade but a temporary notation indicating that a grade could not
be determined because the student had not completed a course because of extenuating
circumstances (e.g., personal illness, family emergency, etc.). An “Incomplete” not converted to
another grade within 120 days becomes a grade of Fail.

d. Clinical Courses (Clerkships and Electives)
   i. Standard evaluation instruments are used in all clerkships to measure the achievement of
      shared objectives and for measurement of objectives specific to each clerkship.
      Evaluation instruments will include regular assessments of patient encounter and
procedure logs maintained by students.
   ii. Clerkship directors communicate regularly during the clerkship with the appropriate
faculty and residents at each site to:
       1. Discuss student progress
       2. Document the progress of each student
       3. Identify problem areas
       4. Plan supplementary strategies, if necessary
       5. Assess the effectiveness of supplementation
       6. Ensure active student participation in the above process
   iii. Each clerkship will provide a mid-clerkship evaluation that is communicated to the
student that documents performance and enumerates any improvements necessary to
achieve satisfactory evaluation at the end of the clerkship.

3. Institutional, Course Director, and Student Responsibility for Evaluation:

a. EVMS is responsible for:
   i. Developing an integrated evaluation system that gives the student an opportunity to build
on strengths and correct weaknesses, particularly in relation to skills that are common to
several disciplines; e.g., problem-solving and physical examination skills.
ii. Providing regular review of the guidelines for evaluation and recommending necessary changes to the Associate Dean for Education for review and implementation.

iii. Providing a systematic, legally acceptable appeals process for reviewing a student's failure to meet the institution's academic and/or professional standards.

b. The course director is responsible for developing and overseeing the evaluation process for students for that course. This responsibility includes:
   i. Developing written goals, objectives, standards of acceptable performance, and a systematic objective evaluation policy that are communicated in writing to students and faculty and upon which all evaluation is based.
   ii. Predetermining and communicating in writing the relative weight of each evaluation (e.g., written, practical, quizzes, and laboratory) used to determine the course grade.
   iii. Informing students of their performance in the course, giving each an opportunity to respond to any identified deficiencies.
   iv. Documenting student progress, outstanding accomplishments, and deficiencies in writing with specific examples.
   v. Providing course faculty with the results of the course and their personal faculty evaluation.

c. Each student at EVMS is responsible for:
   i. Obtaining the written goals, objectives, standards of acceptable performance, and evaluation policy for each course.
   ii. Complying with evaluation requirements of each course and with the comprehensive evaluation requirements established by the institution.
   iii. Ascertaining his/her own evaluation results.
   iv. Seeking faculty assistance in correcting unsatisfactory or marginal performance.
   v. Initiating the institutional appeals process if the student objects to the institution's response to his/her failure to meet the institution's academic and professional standards.
   vi. Completing an evaluation of each course and of the faculty who are responsible for a significant amount of teaching in each course.

d. The Office of Education:
   i. Will receive final course grades from course directors and distribute grades to appropriate course directors, department chairs, Deans, and the Registrar.
   ii. The Registrar will maintain an accurate and current transcript of each student's academic performance.

4. Evaluation Methodology:
   a. Standards of acceptable performance for individual course evaluations are communicated to students at the beginning of each course. Standards of acceptable performance for other evaluations considered in student progress decisions (e.g., United States Medical Licensing Examinations, Clinical Skills Assessment, professional conduct, etc.) will be communicated to students in advance of such evaluations.

   b. Examinations:
      i. Test achievement of stated course objectives.
      ii. Are constructed according to recognized principles of test design.
      iii. Are consistent with institutional standards for length and difficulty.
      iv. Meet reasonable criteria for reliability and validity.
      v. Are reviewed by faculty course directors and their designees prior to administration and later for item analysis.

   c. For clinical performance evaluation, the specific behavioral criteria for each clerkship and elective are distributed to students at the beginning of the clerkship or elective. Unified competency objectives for the M4 Skills Assessment exam are distributed at the beginning of the M3 year.

   d. For oral examinations, reliability is maximized through a structured process with written criteria and training of the examiners.
Appendix P

EVALUATION PROCEDURES

1. Preparation of Examinations
   a. Examinations are administered at the end of each course and, at the course director's option, periodically throughout the course in consultation with the group of concurrent course directors at dates and times specified in the course calendar. Quizzes are scheduled at the beginning of the course with consideration of their effect upon the other scheduled courses.
   b. Examinations may cover any material included in the course, and may be derived from any learning activity in the course. The number of questions will be based on the course director's and faculty's assessment of the relative importance of the material covered.
   c. The course director and faculty will ensure that examination questions are written with consideration for:
      i. Appropriateness of content
      ii. Effective item construction
      iii. Types and levels of skills tested—e.g., problem-solving, synthesis, analysis, attitudes.
   d. Office of Education staff is available to assist with review of examinations with sufficient pre-administration lead-time.

2. Administration of Examinations
   a. The course director is responsible for administering the examination. Students will not be permitted to ask questions during the examination. A sheet for comments and/or questions will be attached to each examination.
   b. The Office of Education is responsible for administering the NBME subject examinations. Departmental staff will help to administer NBME examinations and will comply with NBME regulations.
   c. Examination scores will be posted via electronic mail as soon as possible following the examination. If scores are not posted electronically, they will be posted in Lewis Hall using an anonymous identifying number for each student. The posting of scores may be delayed if faculty members are unavailable to review exam results or if all students have not taken an examination. NBME subject examination (“shelf exam”) scores will be posted in a timely manner.

3. Scoring of examinations
   a. Students’ optical scan answer sheets are the official record of the students’ examination performance.
   b. Optical scan answer sheets must be clearly and legibly identified by each student’s unique identifying number. Answer sheets not so identified will not be scored.
   c. Optical scan answer sheets will not be returned to the student and may not be altered in any way after submission.
   d. Double-answered questions will be scored as incorrect.
   e. Answers marked in examination books will not be scored.
   f. Optical scan answer sheets marked other than as directed will not be scored.

4. Review of examination items
   a. Item analysis and overall evaluation results are reviewed by the course director. The course director has the final authority on the content of the examination and the results.
b. The answer key will be posted by the course director, with the exception of NBME subject examinations, and a copy of the examination will either be returned to the students or made available for review by the students following the examination with explanatory key.

c. A student who fails an examination is required to make an appointment with the course director or designee to review his/her performance on the test and plan appropriate remedial action.

5. Procedure for Faculty Review of Examination Questions (excluding NBME subject examinations)

a. A student may comment on or request a review of any test question at the time of an examination by writing the request on a sheet appended to each examination for this purpose.

b. Following the examination, the key and a copy of the examination are posted for student review. Students may request review any item within one working day of the posting of the key. Items will be reviewed by the course director who has the final authority regarding the content of any examination item and the correct answer.

c. Scores for all evaluations contributing to the course grade will be posted for three days prior to the computation of final grades. Students may challenge any score within this time but not individual examination questions. Challenges must be made to the course director who has responsibility for the accuracy of examination scores and course grades.

d. After the final grades for a course have been reported, no challenges will be permitted.

6. Reporting of Course Grades

a. After entering all evaluation scores into the grade data base for Year 1–2 courses, the Office of Academic Affairs will compute the cumulative course score according to weights provided by the course director. Grades of Honors, High Pass, Pass, and Fail are calculated based either on predetermined (criterion-based) scores or on institutional (norm-based) guidelines, as described by each course syllabus at the beginning of the course. Either the standard deviation formula (0.5 or 1.1 SD above the mean) or a specified percentage score may serve as a mechanism to determine such.

b. The course director will review these data and will provide the final grades to the Office of Academic Affairs for Year 1–2 courses.

c. The Offices of Academic Affairs enter the grades for Year 1–2 courses into the grade database and they are transferred onto student transcripts.

d. Clerkship, elective grades, and written evaluation forms will be completed and filed with the Office of Academic Affairs within two weeks, but no later than four weeks after the final day of the clerkship.

e. Students may request an individual summary of the course results from the Office of Academic Affairs. If requested, a summary report will be sent to the student’s faculty advisor by the Office of Academic Affairs.

7. Policy Concerning Absence or Lateness for Scheduled Examinations

a. Examination schedules are published in the course calendar and will be distributed at the beginning of each course. Examinations may include written, practical, laboratory evaluations, or quizzes. All students are expected to take examinations on the scheduled day and time unless specifically authorized to take an examination at another date or time as outlined in “b” and “c.” Make-up examinations will not be provided for students missing examinations except as specified below.

b. When absence from an examination is anticipated for a valid reason (e.g., important personal business which cannot be rescheduled, family or personal illness, etc.), specific written approval must be sought from the Associate Dean for Student Affairs in advance. If such approval is obtained, the student is responsible for contacting the course director at the earliest feasible moment to arrange a make-up
examination. The Associate Dean for Student Affairs may consult with the course director to determine the feasibility of providing a rescheduled examination.

Note: Travel arrangements for scheduled EVMS holidays, personal, or family events scheduled without due regard for the EVMS academic calendar will not be considered valid reasons to take examinations at other than the scheduled dates and times.

c. In the event that absence from an examination can not be anticipated (e.g., emergent illness), the student should notify the course director as soon as is practicable, if possible, prior to the examination. The student must then consult with the course director to arrange an appropriate date and time for the examination. Such absences will be reported to the Associate Dean for Student Affairs for review and approval before the make-up examination is administered. Repeated failure to take examinations as scheduled may be considered to represent unprofessional behavior.

d. Students are expected to be present at the specified site and ready to begin the examination at the scheduled time. Students arriving late may be excluded from the examination at the discretion of the course director. Students who are admitted late to an examination will ordinarily be expected to complete the examination by the end of the scheduled examination period and may not be permitted extra time to complete the examination. Such students may not have access to information or examination materials provided prior to their late arrival.

e. Students arriving late for examinations will be reported to the Associate Dean for Student Affairs. Repeated tardiness will be considered evidence of unprofessional behavior.

f. The course director will post in a conspicuous place the names of students who are not taking the examination at the time scheduled. The honor code does not allow seeking or sharing evaluation-related information or coaching another student regarding the content of an evaluation.

STUDENTS EXPERIENCING ACADEMIC DIFFICULTY

1. The Student Progress Committee, appointed annually by the Dean of EVMS, has overall responsibility for the assessment of student performance and progress as well as for recommending to the appropriate remediation or other action when a student’s performance is not satisfactory. The Student Progress Committee will consist of faculty appointed by the Dean and four student representatives elected by the respective medical student classes.

2. The Student Progress Committee will review the overall record of each student who fails or withdraws from a course. A majority of the membership of the Committee will constitute a quorum. A simple majority vote of those present is required for any action of the Committee.

   a. The course director will submit a remediation plan for each student who fails a course. Additional information regarding a student beyond that contained in the academic record may be obtained from advisors or other sources as the Committee deems appropriate, and the Committee will usually interview the student.

   b. On the basis of its review, the Student Progress Committee will make a recommendation for resolving the deficiency. This recommendation will be forwarded, with all pertinent background information, to the Dean. A copy of the Student Progress Committee's recommendation will be sent to the student, to the director(s) of the relevant course(s), and to the relevant department chair(s). This written notification will include a statement of the decision and the consequences of failure to complete the remedial plan successfully.

3. In its consideration of each student’s progress, the Student Progress Committee examines and considers all information at its disposal, including a student's academic performance in other courses, and attitudinal and other personal or extenuating factors. Marginal or failing performance in other courses will be considered. In arriving at its recommendations, the Committee will use the following guidelines, but is not obligated to adhere strictly to these guidelines:

   a. A student who fails one course will generally be required to take and pass an appropriate remedial course approved by the course director and by the Student Progress Committee before proceeding to the next academic year.
b. A student who fails two or more courses may be required to repeat the year or may be dismissed from EVMS. A decision between these options will be made by the Student Progress Committee, based on the student’s overall performance and any relevant extenuating circumstances. A student required to repeat a year will ordinarily be required to repeat all courses for that year, including those courses in which his or her performance was otherwise satisfactory.

c. A student that demonstrates marginal performance (e.g., scoring more than 1.5 s.d. below the class mean or in the bottom 10% of class performance in a course) will be reviewed by the Student Progress Committee. A student that demonstrates continuing marginal performance in multiple courses may be dismissed from EVMS at the discretion of the Student Progress Committee.

d. A student who fails a repeated course or any course in a repeated year will be subject to dismissal from EVMS.

e. No student may repeat more than one year in his/her tenure at EVMS. A student is expected to satisfy all of the requirements for the M.D. Degree in no more than five academic years.

f. A student who is dismissed from EVMS and who desires reinstatement must reapply for admission. The Student Progress Committee may accompany its recommendation for dismissal with advice about readmission, but this advice is not binding on the Admissions Committee. No student may reapply more than one time during an academic year.

4. A student may appeal to the Dean of EVMS for a review of the Student Progress Committee’s recommendation. The appeal must be submitted in writing within five working days of the student’s notification of the Student Progress Committee's decision and must state in detail the reasons for the appeal and the relief the student requests. If an appeal is not lodged within five days, the Student Progress Committee's decision becomes final.

a. Upon receipt of an appeal of the Student Progress Committee's decision, the Dean or designee, will review all pertinent material and meet with the student. The Dean or his/her designee may also contact the department chair, course director, the Student Progress Committee chairman and/or members, the student's advisor, and/or other persons as deemed necessary. The Dean also has the prerogative to constitute an advisory group to assist in this review.

b. No later than 15 working days after receipt of the appeal, the Dean will render a decision either supporting or modifying the Student Progress Committee's recommendation. This decision by the Dean is final.

**PROCEDURE FOR DROPPING A COURSE**

1. A student who wishes to drop a course must present a request to do so to the course director and to the Associate Dean for Student Affairs. The request must state the reason for dropping the course and the student’s plans for retaking the course. In order for the request to be accepted, it must be approved by both the course director and the Associate Dean for Student Affairs.

2. No student may drop a course after the eighth week of the semester except for documented medical reasons.

3. A student may not drop more than one course in any year. The dropped course must be passed before the student can proceed to the next year's course work.

4. If a student drops a course, the notation withdrew (W) will be placed on the transcript with the date of withdrawal. No indication will appear as to whether the individual withdrew passing or withdrew failing.

5. The Associate Dean for will send notification of approval of a student's request to drop a course to the:

   - Dean
   - Registrar
   - Curriculum Coordinator
   - Department Chair
GRADING POLICY

1. Grading System

a. A grade of Pass signifies satisfactory course performance. The passing grade for all courses in the first and second years is 70% or, at the discretion of the course director, 1.5 standard deviations below the mean, whichever is lower. This standard may be further adjusted downward upon the agreement of the course director and the Office of Education. Standards to be used for determining a passing grade will be published at the beginning of each course.

b. Students' raw scores are converted into corresponding percentage scores (P) that are subsequently used in assigning grades. If the final course grade is based on scores from more than one evaluation:

   i. A percentage score (P) is calculated for each evaluation for each student.
   ii. Each evaluation is pre-assigned a weight by the course director.
   iii. A composite percentage score (Pc) is calculated for each student, equal to the sum of each evaluation's percentage score (Pi) multiplied by its respective weight (a). \[ P_c = \sum aP_i \]
   iv. Course grades are assigned according to the composite percentage score (Pc) distribution.

c. A Fail grade is assigned if the Pc is below the Pass/Fail cut point as determined in above.

d. A grade of Honors may be awarded by the course director to students who demonstrate distinguished understanding of the course material. The determination of distinguished performance may be based upon the attainment of either a particular score or a score at or above 1.1 standard deviations from the mean. Standards to be used for attainment of Honors will be published at the beginning of each course.

e. A grade of High Pass may be awarded by the course director to students who demonstrate excellent understanding of the course material. The determination of excellent performance may be based upon attainment of either a particular score or a score at or above 0.50 standard deviations above the mean but not qualifying for Honors. Standards to be used for attainment of High Pass will be published at the beginning of each course.

f. Minor adjustments in the standards for Honors and High Pass (e.g., adjustments for number of significant figures and rounding) may be made by the course director after review of class performance.

2. Promotion Guidelines

a. A student must pass all components of each year of the curriculum before proceeding to the next year. A student who fails any component must successfully remediate as prescribed by the Student Progress Committee before proceeding to the next year.

b. Normally, remediation of a course may occur only during scheduled vacations. Remediation should not occur while the student is taking other class work.

3. Records

a. The official student transcript records only the grades of Honors, High Pass, Pass, Fail, and Withdrew.

b. In the event of a Failure, which the student successfully remediates, the notation of F/P is made.

c. In the event of failure of remediation, the notation F/F appears.

d. If a student repeats a year, the second set of course grades also becomes part of the transcript.
e. The transcript will provide no ranking of students or numerical scores.

f. Summary information from clerkships may contain numerical scores only when there are published criteria for the scores and these criteria are applied to all students regardless of clerkship site.

4. Review of Progress for Graduation

The Student Progress Committee, after complete review of a student’s academic and non-academic performance, will certify to the faculty that the student has or is expected to meet all of the requirements for graduation within 3 months of the date of graduation. This recommendation will be presented at a regular faculty meeting. The faculty in turn will recommend to the Academic Affairs Committee of the Board of Visitors that a student has met or will meet all of the requirements for graduation. The Academic Affairs Committee in turn will make the recommendation to the Board of Visitors, who is empowered to grant the Doctor of Medicine degree.

5. United States Medical Licensing Examinations (USMLE) Step 1 and Step 2

a. Students must take USMLE Step 1 before the first day of their M3 orientation. Illness or other extraordinary circumstances may be considered as reasons for a delayed examination. Only the Associate Dean for Student Affairs may grant permission for a delay in examination date. Permission for late examinations will not be granted to accommodate vacation plans, planned personal events, etc.

b. Students must take USMLE Step 2 CK (Clinical Knowledge) and Step 2 CS (Clinical Skills) before December 31 of their M4 year.

c. Students must pass Step 1 and Step 2 CK (Clinical Knowledge) of the USMLE Examinations before graduation. At this time, a passing grade on Step 2 CS is not required for graduation from EVMS.

d. Students who fail USMLE Step 1 must meet with the Associate Dean for Education to determine their course of action. Students failing Step 1 on their first attempt will ordinarily be withdrawn from their clinical clerkships until they have retaken the examination but will be allowed to start their next scheduled clerkship before their scores are reported. Students failing Step 1 for a second time will not be permitted to resume their M3 year until they have obtained a passing score on the examination. Students failing the examination for a third time may be dismissed from EVMS.

Note: Any clerkship(s) missed as a result of failure on USMLE Step 1 must be completed prior to beginning the M4 year. This may result in delayed graduation from EVMS.

e. Students who fail USMLE Step 2 CK must meet with the Associate Dean for Education to determine their course of action.

f. Students are responsible for registering for the USMLE. Registration deadlines are posted by the Office of Academic Affairs.

MEDICAL STUDENT ACADEMIC GRIEVANCE AND APPEALS PROCEDURE

Students in the MD program at EVMS have the right to due process involving grievance and appeals procedures for academic grievances.

1) Students experiencing difficulties within the medical academic program or feel they are being unfairly treated should first address these issues with the faculty member involved, the course director for basic science courses, and the clerkship director for clinical science rotations or department chair if appropriate.

2) If the issue is not satisfactorily resolved at the faculty level or with the course director or clerkship director, the student may appeal to the Associate Dean for Education. The appeal must be submitted in writing within seven days after the student is notified of the course director or clerkship director’s decision and must state in detail the reasons for the appeal and the action the student requests. If no appeal is lodged within seven days, the student’s grievance will be considered resolved.

3) Upon receipt of an appeal to the course director or clerkship director’s decision, the Associate Dean for Education or designee will review all pertinent material and meet with the student. The Associate Dean for
Appendix P

Education may also contact the faculty member, course director, clerkship director, or other persons as necessary. The Associate Dean for Education also has the prerogative to constitute an advisory group to assist in this review. No later than 15 days after receipt of the appeal, the Associate Dean for Education will render a decision either supporting or modifying the course director or clerkship director’s decision. This decision will be transmitted to the student in writing, with a copy forwarded to the course director or clerkship director. 4) The student may file a further written appeal to the Dean of EVMS within five working days of the student’s notification from the Associate Dean for Education. The Dean will review all pertinent material and notify the student within ten days of receipt of the appeal of his/her decision. The decision of the Dean is final.

HEALTH PROFESSIONS STUDENT EVALUATION AND ACADEMIC PROGRESS

This section specifies the general policies and procedures applicable to all of the health professions programs. In addition to the policies listed here, each program may have additional requirements that are communicated to students in writing at the initiation of their first semester or at other times as deemed necessary.

Background

The EVMS School of Health Professions provides an administrative structure for a variety of academic programs, including Art Therapy and Counseling (MS), Biomedical Sciences (PhD), Biomedical Sciences Master’s Research Track (MS), Master of Public Health (MPH), Master of Physician Assistant (MPA), Medical Master’s (MS), Surgical Assistant (Certificate or Graduate Certificate), Clinical Embryology and Andrology (MS), Ophthalmic Technology (Certificate), and the Virginia Consortium Program in Clinical Psychology (PsyD). EVMS serves as the school of record for all programs shown above except Ophthalmic Technology and Clinical Psychology.

GRADING SCALE POLICY

Health professions programs for which EVMS serves as the school of record will use the following grading scale for those courses in which grades affect the Grade Point Average (GPA).

<table>
<thead>
<tr>
<th>Grade</th>
<th>Grade Points</th>
<th>Grades not affecting GPA:</th>
</tr>
</thead>
<tbody>
<tr>
<td>A</td>
<td>4.00</td>
<td>AU = Audit</td>
</tr>
<tr>
<td>A−</td>
<td>3.67</td>
<td>I = Incomplete</td>
</tr>
<tr>
<td>B+</td>
<td>3.33</td>
<td>P = Pass</td>
</tr>
<tr>
<td>B</td>
<td>3.00</td>
<td>W = Official Withdrawal</td>
</tr>
<tr>
<td>B−</td>
<td>2.67</td>
<td>WF = Unofficial Withdrawal</td>
</tr>
<tr>
<td>C+</td>
<td>2.33</td>
<td></td>
</tr>
<tr>
<td>C</td>
<td>2.00</td>
<td></td>
</tr>
<tr>
<td>C−</td>
<td>1.67</td>
<td></td>
</tr>
<tr>
<td>D+</td>
<td>1.33</td>
<td></td>
</tr>
<tr>
<td>D</td>
<td>1.00</td>
<td></td>
</tr>
<tr>
<td>D−</td>
<td>0.67</td>
<td></td>
</tr>
<tr>
<td>F</td>
<td>0.00</td>
<td></td>
</tr>
</tbody>
</table>

A grading policy that is consistent with program or departmental guidelines will be established for each class by the instructor. The requirements for grades are based on course policy and institutional guidelines. These requirements, along with the goals and requirements for each course, the nature of the course content, and the methods of evaluation, are communicated to students at the initiation of each course. Programs are responsible for sending grade reports to students at the end of each term.

Grade Point Calculation Policy

The grade point average is calculated by dividing the accumulated number of grade points earned by the accumulated number of credit hours attempted. Grades of “F” and repeats are included, but official withdrawals, audits, and grades on non-credit courses, non-degree credit courses, and pass/fail degree courses are not. If a student is required to repeat a course or receives permission from a program director to repeat a course, the grade point average will be calculated using only the repeated course grade and the corresponding point value. However, the original grade assigned for that course must remain on the transcript.

Grades in courses accepted for transfer credit are generally not counted in the computation of grade point average.
Appendix P

Students must have a cumulative grade point average of 3.00 or higher for graduation. Students falling below the minimum GPA requirement may be placed on probation or suspended in accordance with the regulations established by each program.

Incomplete Grade Policy

The grade “I” indicates assigned work yet to be completed in a given course or an approved absence from the final examination.

Incomplete Grade Procedure

When an instructor assigns a grade of “I,” a written agreement is prepared and signed by the instructor and student that specifies the work remaining to be completed and the time frame for doing so. The work should be completed as soon as possible, but not later than the mid-point of the following grading period/semester unless special written approval is granted by the Course Director and Program Director for extraordinary circumstances. The student must petition the Course Director and the Program Director for such an extension at least two weeks before the end of the agreed upon deadline. Unless an extension has been approved by the Course Director and the Program Director, the “I” will convert to either an “F” or the grade as specified in the written agreement after the mid-point of the semester. An “I” grade may not be changed to a “W” under any circumstances.

Withdrawal Policy

A student can withdraw from a course up until the mid-point of the grading period/semester and receive a W grade. Withdrawal after the midterm is not permitted without special approval. However, in the event of an illness or severe hardship beyond the student's control, the student should submit a written petition for permission to withdraw from the course to the instructor and program director no later than the last day of classes. If permission is granted by both the instructor and program director, a grade of W is recorded. If permission is not granted by both, then the student cannot withdraw from the class. A student who stops attending classes without withdrawing is assigned a WF grade, unless the student's performance was failing, in which case a grade of F will be assigned. The grade of WF will carry no grade points and will be computed in the grade point average as a grade of F.

PROGRESS REVIEW

Policy

Regular assessment of students and feedback to them is essential to effective teaching and learning. All possible effort should be extended to identify students whose performance is unsatisfactory and establish remedial intervention. Course instructors and program directors will regularly review the academic progress of their designated students and evaluate the overall progress of each student at the conclusion of each grading term and academic year.

Procedure

Each program will establish policies and procedures for completing assessments, communicating results to students, and documenting outcomes. Procedures for addressing performance deficiencies or circumstances that may prohibit students from successfully completing a program are outlined in subsequent pages in the Performance Deficiencies and Probation Procedures. Programs may have additional remediation policies and procedures and students should contact the appropriate program office or director for this information.

Grade Appeals Policy

Students may appeal or seek remediation of a grade based on the policies and procedures established by the applicable program. Students who desire an appeal or seek remediation of a grade should first address the issue directly with the appropriate course instructor and follow all program specific policies and procedures. If the issue is not satisfactorily resolved with the course instructor, the student may appeal the decision to the program director. If the issue is still not resolved, the student may appeal to the Vice Provost for Planning and Health Professions. This will begin the “Due Process Policy: Appeals and Grievance Procedures” process described heretofore.

Additional Grading Policies and Procedures

Additional information regarding policies and procedures not listed in this Handbook, including elective, pass/fail, and audit course options and procedures for evaluating, dropping a course, and reporting of grades, vary for each program and will be communicated to students at the initiation of their first semester and other times as deemed necessary.
Appendix P

Student Progress Policy

Health professions programs are responsible for monitoring student progress on a regular basis, including providing timely feedback to students, developing remediation plans or related action steps to assist students experiencing academic difficulty, or assigning disciplinary action as deemed appropriate by the faculty and the program director. Program directors shall provide an annual report at a Health Professions Leadership Team meeting that summarizes student progress issues for their respective programs. The report will generally occur near the end of the academic year.

Satisfactory Academic Progress Policy

EVMS health professions students are expected to attain a term Grade Point Average of at least 3.0 to be considered in good academic standing and a cumulative GPA of at least 3.0 to graduate. Students who do not meet these criteria are subject to formal warnings, probation and/or dismissal. Students who receive a warning or are placed on probation must demonstrate sufficient academic progress in the following term, as determined by the program director and faculty, to remain in the program. Students on probation who fail to demonstrate academic progress in the following term will be subject to dismissal. The program director and faculty should consider the extent to which a student is performing at a level necessary to attain the knowledge, skills, and competencies required to succeed in the program, including ability to meet the cumulative GPA and other graduation requirements. All programs must review the academic progress of their students on a regular basis and at such intervals deemed appropriate but not less than once at the end of each grading term.

HEALTH PROFESSIONS PROGRAMS TRANSFER CREDIT

Policy

Transfer of credit may be allowed for course work taken at a regionally accredited institution of higher learning, such as the Southern Association of Colleges and Schools, for courses in which a grade of B (3.0) or higher was received or a passing grade was achieved in a pass/fail course. Doctoral programs may accept a maximum of 12 transfer credits, and master’s programs may accept a maximum of 9 transfer credits. Course grades obtained from another institution will not be counted in the GPA. Programs must establish and publish their criteria for accepting transfer credits as well as their policies on accepting experiential learning, advanced placement, and/or professional certificates toward curriculum requirements. It is the responsibility of each program to determine a student’s comprehension of the requisite material and to ensure that the course work and/or learning outcomes are comparable to that offered by the applicable EVMS program. EVMS assumes responsibility for the academic quality of any course work or credit recorded on the institution’s transcript.

Procedure

Applicants seeking to transfer academic credits or any other type of learning experience into an EVMS program should follow program procedures, including the submission of transcripts and other detailed information such as syllabi, course descriptions, learning objectives, or other materials that will assist the program in determining equivalence of course requirements. Decisions regarding applicability of transfer courses/credits are made by the program director in consultation with the faculty as deemed appropriate. Transfer applicants should contact the program for special application or credential requirements.

Assigning Credit Hours Policy

EVMS health professions programs use the calculus in the table below to assign course credit hours.

<table>
<thead>
<tr>
<th>Type of Course</th>
<th>Credit/Contact Hours</th>
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<tbody>
<tr>
<td>Lecture, Seminar, Independent Study</td>
<td>1 credit = 15 contact hours</td>
</tr>
<tr>
<td>Laboratory</td>
<td>1 credit = 30 contact hours</td>
</tr>
<tr>
<td>Clinical Rotations, Internship</td>
<td>1 credit = 80 contact hours</td>
</tr>
</tbody>
</table>

PERFORMANCE DEFICIENCIES AND PROBATION PROCEDURES

Procedures for addressing academic and non-academic deficiencies that may impede student progress or prohibit students from successfully completing a program are defined below. A process for appealing adverse decisions
Affecting students is also provided to ensure appropriate due process. The following guidelines will apply to programs in which EVMS is the school of record.

Deficiencies

Deficiencies, which may result in probation or dismissal/termination of a student, include both academic and non-academic areas. The Vice Provost for Planning and Health Professions or designee may intervene to address academic and non-academic deficiencies and may impose such remedies as are determined to be in the best interests of EVMS.

a) Academic Deficiencies include but are not limited to an inadequate knowledge base; a lack of information gathering ability; problem solving difficulties; poor clinical and technical skills; or errors in judgment.

b) Non-Academic Deficiencies include but are not limited to any action or behavior that is considered unacceptable to the training program faculty; poor professional relationships; moral and ethical values unacceptable to the profession; failure to comply with the standards of student behavior including the Code of Student Conduct set forth herein, the rules, regulations and bylaws of EVMS and/or affiliated practicum sites or the laws which govern the healing arts in the Commonwealth of Virginia; and/or a lack of abilities and talents that are necessary for the performance of expected duties for that health profession.

Stages of Intervention

Each academic program has its own probation policies and procedures. Some may require a written or verbal notification and/or warning from an instructor, advisor, or program director to convey concern about student performance and/or to inform the student of the risk of probation unless performance improves. In all programs, a student placed on probation will be informed in writing and his or her performance will be monitored. The written notification must specify if termination in the educational program is a potential outcome of the probationary status. Academic credit may or may not be given for the probationary period and extension of training time is at the discretion of the program director.

Intervention strategies for addressing academic and non-academic deficiencies are classified into three stages: Stage 1 – Notification/Warning, Stage 2 – Probation, and Stage 3 – Dismissal.

Stage 1 – Notification/Warning: Stage 1 deficiencies are those which are deemed to be disruptive to the program or to other students, faculty, or staff involvement in the program and are severe enough to warrant counseling by the program director. A Stage 1 notification requires written documentation in the student’s file.

Stage 2 – Probation: Continued disruptive behavior will result in Stage 2 probation status. Students may also be placed directly on probation by the program director if their behavior so warrants. Stage 2 probation requires written documentation in the student’s file, and the student must be notified in writing that non-remediation may result in dismissal from the program.

Stage 3 - Dismissal: Continued disruptive behavior as defined in Stage 2 deficiencies may result in dismissal from the program. Students may also be dismissed by the program director without prior notification or warning if their behavior so warrants. Any Student dismissed from the program must be notified in writing and made aware of his/her right to appeal the decision through the Grievance Policy process.

Where the conduct of a student represents a serious compromise to acceptable standards of patient care or jeopardizes the welfare of patients under his/her care, the program director has the option of immediately suspending the student from clinical duties until such time as an appropriate investigation of the allegations or situation may be investigated. The student must be informed in writing if termination of his/her participation in the educational program is a potential outcome of the probationary status. The Vice Provost for Planning and Health Professions, and the Associate Dean for Student Affairs must be notified when a student is placed on probation.

Probationary status will be defined by the program’s faculty and/or program director. While on probation, the student will be provided close faculty supervision and may or may not be given credit for the time period during which the probationary status is in effect. If the probationary period is not creditable toward the required time for the educational program, an extension of training time (within timeliness for the degree) may be considered at the discretion of the program director.

Identification and Remediation of Deficiency Areas
Appendix P

Faculty and other professional staff will promptly notify the program director of areas of concern regarding a student’s professional behavior and development. Upon notification of a potential problem, the program director or a designee will investigate the report and, if the concern appears to be warranted, will proceed with the formal procedures described below. Program faculty and program directors should use their reasonable judgment in documenting academic and non-academic student issues including remediation plans, progress reports, and supervision meetings. Written documentation is required if a student is placed on probation or dismissed from the program. The following steps serve as general guidance for addressing student problems.

1) The Issue is reported and investigated.

2) A remediation plan is developed.

3) Program director or designee meets with the student to discuss the issue(s), remediation activities, plan a schedule, and potential outcomes.

4) The remediation plan is implemented, supervision meetings are conducted to review progress, and progress report(s) are written.

5) At the agreed upon time, the progress of the student is evaluated and a determination of the success of remediation is ascertained. The program director or designee meets with the student to review the remediation and a report is provided to the student regarding his/her status. If applicable, a report (Stage 2 and Stage 3) is provided to the Program’s faculty and/or program director. If a Stage 3 (probation) deficiency is not successfully remediated and the program director chooses to terminate the student’s participation in the program, the student must be notified of this in writing and made aware of his/her right to appeal the decision through the Grievance Policy.

Right to Appeal

Students have the right to appeal any adverse decision made regarding their professional and educational development. Please refer to the “Due Process Policy: Appeals and Grievance Procedures” process in the next section.

HEALTH PROFESSIONS STUDENT ACADEMIC GRIEVANCE AND APPEALS PROCEDURE

Students have the right to due process involving grievance and appeals procedures for both academic and non–academic grievances.

1) Students experiencing difficulties within the academic program or who feel that they are being unfairly treated should first address these issues with the course instructor, the program director, or the department chair if appropriate.

2) If the issue is not satisfactorily resolved at the program level, the student may appeal the program director’s decision to the Vice Provost for Planning and Health Professions. The appeal must be submitted in writing within seven days of the student’s notification of the program director’s decision and must state in detail the reasons for the appeal and the requested action(s). If no appeal is lodged within seven days, the program director’s decision becomes final.

3) Upon receipt of an appeal of the program director’s decision, the Vice Provost for Planning and Health Professions or designee will review all pertinent material and meet with the student. The Vice Provost for Planning and Health Professions may also contact the program director, course director, the student’s advisor, and/or other persons as necessary. The Vice Provost for Planning and Health Professions also has the prerogative to constitute an advisory group to assist in this review. No later than 15 days after receipt of the appeal, the Vice Provost for Planning and Health Professions will render a decision either supporting or modifying the program director’s decision. This decision will be transmitted to the student in writing, with a copy forwarded to the program director. The decision of the Vice Provost for Planning and Health Professions is final in all issues of academic grievance, with the exception of the action of terminating a student’s participation in an academic program.

4) In the case of the termination of an individual from an academic program, the student may file a written appeal to the Dean within five working days of the student’s notification from the Vice Provost for Planning and Health Professions. The Dean will review all pertinent material and notify the student of his/her decision within ten days of receiving the appeal. The decision of the Dean is final.
EVMS HONOR CODE

Introduction
The Student Body of EVMS conducts its affairs by means of an Honor Code. This is done in the belief that responsible self-government in later life is developed and nurtured in a maturing process of student self-government. In the spirit of the human values in medicine philosophy and implicit in such an Honor Code is the fostering of a sense of trust in the EVMS community. Under this code, every student is assumed trustworthy and averse to participating in any dishonorable or dishonest act in all medical school matters.

The students, faculty, and administration of EVMS join together in support of this Honor Code for the purposes of (a) providing an atmosphere of mutual trust, concern, and respect; (b) fostering honorable and ethical behavior; and (c) cultivating lifelong professional conduct. Any student who fails to abide by the Honor Code or live up to its principles is subject to disciplinary action by the Honor Court. All students are obligated to support the Honor Code and report any violation thereof to the Honor Council. Each student subscribes to the Honor Code by signing in writing his/her support at the time of matriculation.

Article I: Honor Code Acknowledgement and Student Signature

It shall be the duty of the Chairperson of the Honor Council to see that each matriculant is provided with a copy of information to access the Honor Code before matriculation. All students, matriculating and returning must annually sign the acknowledgement below to indicate that they have read and understand the Honor Code. The Honor Code is located in the EVMS Student Handbook and is available at: http://www.evms.edu/students/handbook/index.html.

“I, the undersigned, have read the Honor Code of the Student Body of EVMS. I understand what is expected of me as a student of that institution and I hereby pledge my word of honor that I will support the Honor Code in all of its details including possible jury duty.”

Article II: Violations of the Honor Code

Any action indicating lack of integrity in all matters related to being an EVMS student is considered both a violation of ethics and an act of dishonesty and will be considered a violation of the Honor Code. Such offenses include, but are not limited to, lying, stealing, engaging in or attempting to engage in cheating, plagiarism, sabotage, falsifying or manipulating data, or knowingly passing off work of another as one’s own while enrolled as a student at EVMS, regardless of whether the act occurs while the student is on the property of EVMS, or elsewhere.

It is essential that the EVMS Honor Code concerns itself solely with what the current student generation finds dishonorable and/or academic dishonesty, as described above and defined below, as opposed to undesirable. Therefore, any action which constitutes a violation of the EVMS Code of Student Conduct or of the laws of the United States or of the Commonwealth of Virginia shall fall, unless otherwise indicated herein, under the general jurisdiction of the President and the Dean of EVMS to be handled as disciplinary matters, and/or where indicated, the appropriate prosecutorial bodies and judicial forums of the Commonwealth of Virginia and its political subdivisions or those of the United States.

Acts observed that appear to be in violation of the Honor Code must be reported to the Honor Council. Failure on the part of a student to report such apparent violation will itself be considered a violation of the Honor Code. Lack of knowledge of the aforementioned principles will not be considered as a defense in a trial.

Violations of the Honor Code are defined as follows:

Section A – Lie:
It is considered a violation of this Honor Code for a student to:

1) Make an oral or written statement which the student knows to be false.
Appendix P

2) Offer any oral statement or initials/signs any written statement which is known by the student to be false, misleading, or fraudulent.

Section B – Cheat:
It is considered a violation of this Honor Code for a student to:

1) Knowingly obtain or give unauthorized assistance from any source in work submitted as one's own individual efforts.

2) Intentionally prevent equal access to educational materials by another member or members of EVMS community.

3) Knowingly acquire, receive, or pass on information about the content of an examination prior to its authorized release or during its administration; provision or utilization of unauthorized aids; or impermissible collaboration.

Section C – Steal:
It is considered a violation of this Honor Code for a student to:

1) Wrongfully take, obtain, or withhold property from the possession of the true owner with the intention of permanently or temporarily depriving said owner of the use or possession of the property.

2) Take the personal property of another individual without the owner's expressed or implied permission.

Section D – Plagiarize:
It is considered a violation of this Honor Code for a student to deliberately steal, appropriate, or use passages or ideas from another and fails to properly acknowledge (e.g., footnote) the source of these ideas.

Section E – Sabotage:
It is considered a violation of this Honor Code for a student to intentionally impair another student's academic performance.

Section F – Falsification:
It is considered a violation of this Honor Code for a student to falsify or manipulate data by creating, enhancing, or otherwise changing actual results or information in academic, clinical, research, or administrative matters.

Section G – Failure to complete Honor Council sanctions:
It is considered a violation of this Honor Code when any student who is assigned community service hours or other sanctions by Honor Council action fails to complete required hours in the time allotted. New charges may be filed and would be considered a second offense of the Honor Code which would carry Class VI sanctions.

Article III: Structure of the Honor Council

Section A – Honor Council Members:
One Honor Council member for every thirty (30) students from each class of each degree or certificate program of EVMS shall be elected, with a minimum of one member per class per degree.

Section B – Chairperson of the Honor Council:
The Chairperson of the Honor Council shall be a member of the Honor Council and shall be a fourth-year medical student. He/she shall be elected by the Honor Council and shall serve for a term of one year.
Appendix P

Section C – Vice Chairperson of the Honor Council:
The Vice–Chairperson of the Honor Council shall be a member of the Council, elected by the Council and shall serve a term of one year. He/she shall fulfill the role of Chairperson in the Chairperson’s absence.

Section D – Secretary of the Honor Council:
The Secretary of the Honor Council shall be a member of the Council, elected by the Council and shall serve a term of one year.

Section E – Election of Council Members:
Honor Council members shall serve for a term of the duration of his/her degree or certificate program. Election of class representatives of the Honor Council will take place concurrently with the election of class officers. Replacements shall be elected from the class of the member(s) being replaced.

Section F – Duties and Responsibilities of the Council Members:
Honor Council members are elected representatives of their respective classes who shall uphold the Honor Code, act fairly and impartially and only upon evidence formally presented during the course of trial or other appropriate hearing. Such Council Members shall act in a manner befitting the trust accorded by their class and in conformity with the provisions and spirit of the Honor Code.

Section G – Removal from the Honor Council:
No member shall be involuntarily removed from the Honor Council without evidence and proof of improper conduct, including, by way of examples, acceptance of personal favors, gratuities or bribes, perjury, or other conduct of a manner not befitting a member of the Honor Council. Any student who believes an Honor Council member may have been involved in improper conduct may bring the matter to the attention of the Chairperson of the Honor Council. The Chairperson of the Honor Council shall investigate all complaints of an Honor Council member’s improper conduct and shall present the evidence to the entire Honor Council. The Honor Council shall vote on whether to remove the accused Honor Council member. A vote of 75% of the Honor Council shall be required to remove an Honor Council member. This vote shall be supervised by the Advisor to the Honor Council.

Article IV: Structure of the Honor Court

Section A – Chairperson:
The Chairperson of the Honor Council shall preside over the Honor Court unless he/she is disqualified pursuant to Article IV, Section I below.

Section B – Jury:
The jury, which shall be the body responsible for hearing and determining violations of the Honor Code, shall consist of the following members:

1) An eleven member jury shall be composed of seven Honor Council members and four jurors selected from the student body by random sample. However, the Advisor to the Honor Court will ensure that at least one juror shall be from the same program as the student charged. If one of the seven Honor Council members selected for the jury, or one of the four randomly selected jurors is not from the same program as the student charged, then the Advisor to the Honor Court shall replace one of the randomly selected jurors with a randomly selected juror from the same program as the student charged.

2) Any member of the Honor Council who is of the same class as the student charged may excuse himself/herself from the jury if the member believes that he/she will be unable to carry out the duties of a juror in an unbiased manner. The excused Honor Council member may serve the Court with collection and presentation of evidence.

3) Should a juror, however selected, be unable to serve for a good cause, the Honor Council or the Advisor to the Honor Court shall select a replacement in the same manner as his/her predecessor was selected as provided for in
Article IV, Section B (2) above. Should a juror be absent on the date(s) of trial, the presiding member of the Honor Court shall appoint an alternative juror in the same manner provided in Article IV–B (2) above.

Section C – Clerk of the Court:
During each trial conducted by the Honor Court, the Secretary of the Honor Council shall serve as Clerk of the Court and shall be present throughout any trial with the responsibility of keeping accurate records of all proceedings, including a recording of the trial proceedings.

Section D – Prosecution Counsel:
The Honor Council member who investigated the alleged violation as specified in Article V, Section B must serve as prosecution counsel for the student body. Failure to fulfill this duty will require a resignation of the Honor Council member from the Honor Council unless extenuating circumstances, as judged by the Chairperson, exist.

Section E – Defense Counsel:
Prior to each trial, the student charged may choose any currently enrolled student at EVMS, including any Honor Council member (with the exception of the Chairperson) to act as his/her defense counsel. If the student cannot or does not make a decision regarding defense counsel, the Honor Council shall appoint a member to serve as defense counsel for the student charged. Failure of an Honor Council member to fulfill this duty if requested by the student charged will require a resignation from the Honor Council unless extenuating circumstances, as judged by the Chairperson, exist. The student charged may elect not to have a defense counsel. The student may use a member of EVMS faculty or administration or a licensed attorney in an advisory capacity prior to trial, but these advisors may not serve as counsel or be present during the trial.

Section F – Advisors to the Honor Court:
The Honor Council shall select a member of the faculty or administration to serve as the Advisor to the Honor Council during any Honor Court trial. This Advisor shall act only in an advisory capacity and shall not participate in the trial except as an advisor.

Section G – Courtroom Participants and Witnesses:
All members of the Honor Council not otherwise participating in the Honor Court or trial shall be present in the courtroom for the presentation of evidence and witnesses. Unless the student charged exercises his/her right to demand a public trial, no person other than those specified in this Article shall be allowed in the courtroom during a trial without the prior permission of the Chairperson of the Honor Council.

Section H – Honor Court Quorum:
The entire membership of the Jury (eleven members) shall constitute a quorum.

Section I – Eligibility of Chairperson of the Honor Court:
The Chairperson of the Honor Council shall automatically be disqualified from serving on the Honor Court at any trial in which he/she is called as a witness for the prosecution or the defense, or if said Chairperson is connected with the student charged by any ties which might render him/her partial.

If the Chairperson is ineligible to serve as Chairperson for a given trial or must be absent for any other reason, the Vice-Chairperson of the Honor Council shall assume the responsibilities of the Chairperson for the conduct of the trial. If the Vice-Chairperson is also ineligible to serve as Chairperson of the Honor Court or is otherwise unavailable for any reason, then the Honor Council shall choose a temporary Chairperson from among the remaining eligible Council Members or from among the Pan Student Council members.

Article V: Pre–Trial Procedures

Section A – Reporting a Breach of Honor:
Any student believing that a violation of the Honor Code has been committed has a duty to report the suspected violation of the Honor Code to the Chairperson of the Honor Council or a single Honor Council representative no later than two (2) week days past the date of the accuser's discovery of the alleged incident. In cases where an Honor Council representative is contacted first, that representative and the accuser shall report to the Chairperson as soon as possible but within 24 hours of the initial report to the representative. Upon report of the suspected violation to the
Chairperson, the Chairperson and the accuser shall meet the accused student within twenty-four (24) hours of the report of the suspected violation to the Chairperson. At this meeting, the accuser will inform the accused of the accusation. The Chairperson shall explain the process that will follow to the accused to ensure his/her understanding. The Chairperson shall emphasize the importance of confidentiality of the process to both the accused and the accuser. The accuser shall not discuss the suspected violation with anyone other than the Chairperson of the Honor Council at this time.

Section B – Investigation:
The Chairperson of the Honor Council shall designate an Honor Council member to act as investigator, who shall interview all parties and investigate the alleged violation quickly, confidentially, and without prejudice. Failure of an Honor Council member to fulfill this duty if requested by the student charged will require a resignation from the Honor Council unless extenuating circumstances, as judged by the Chairperson, exist. The Honor Council member investigating the accusation shall not discuss the investigation with anyone except the Chairperson. If the investigator requires assistance with the investigation, the Chairperson may appoint another Honor Council member at his or her discretion to assist in the investigation. Such investigation shall include, but not be limited to, collection of signed, written statements from all persons interviewed with respect to the alleged Honor Code violation. All persons interviewed should be advised that they are bound by confidentiality and are not to discuss that they were interviewed or anything to do with the investigation with anyone, including the accused or any other members of the Honor Council. Investigators should make contacts for interviews in the most discrete manner possible.

Section C – Presentation of Evidence for Charges:
The investigator shall present all evidence from the investigation to a voting panel consisting of the Chairperson, the Advisor to the Honor Council, the Secretary, a randomly Honor Council member not of the same academic class as the accused, and a randomly chosen student not of the same academic class as the accused. The panel shall determine if there is sufficient evidence to bring charges against the accused student. The purpose of this panel is not to determine guilt or innocence, but merely to determine if there is sufficient evidence to proceed with charging the student. The voting members of the panel include the Chairperson, the Secretary, the Advisor to the Honor Council, the random Honor Council member, and the random student present at the meeting. A majority vote is needed to proceed with charging the student (see Section D below). If the panel determines that there is insufficient evidence of a suspected violation of the Honor Code to go forward, the student accused shall be deemed exonerated and all records of the initial report and subsequent investigation shall be destroyed. The accused student will be notified immediately regarding the decision of this panel.

Section D – Student Options and Formal Notification of Charge:
If the panel determines that the evidence is sufficient to proceed with a trial, then the student shall be charged and shall be orally advised by the Chairperson of the initial classification of the offense and the alternative pleas available to him/her under the Honor Code, which are as follows: (i) to plead guilty and accept the consequences within Article VIII; (ii) to plead not guilty and elect to stand trial; or (iii) to leave school. At this meeting, the Chairperson shall present to the accused the following written notice of charge:
Section E – Time Limit on Plea:
The student charged must file with the Chairperson of the Honor Council a written plea to the written charge received from such Chairperson as provided in Article V, Section D above. The plea must be one of the following three (3) alternatives:

1) Plead guilty as charged; or
2) Plead not guilty; or
3) A written statement of the student's decision (and intention) to leave school without a trial, which will be indicative of guilt, whereupon the Dean will be notified accordingly. Should a student elect to leave school, he/she accepts imposition of any punishment which the Honor Court may impose under Article VIII below.
Appendix P

A written plea cannot be changed without the prior written consent of the Honor Council Chairperson. The student's initial plea must be received by the Honor Council Chairperson within ten (10) calendar days after receiving Notice of Charge as provided by Article V, Section D above. The Honor Council will thereafter proceed to act upon the written plea of the student charged. If no plea is received within the ten (10) calendar days as specified above, then the student charged will be deemed to have elected to plead not guilty and to stand trial.

Section F – Trial:
Should the student charged plead not guilty and elect to stand trial, the Chairperson or his/her representative shall, within two (2) week days, mail to the student charged a notice in writing of the following:

1. The specific Honor Code violation(s) and a brief statement of the facts which support the charge(s) brought against him;
2. The right to remain silent;
3. The right to have a student counsel appointed from the Honor Council to act as defense counsel;
4. The right of the student to choose alternative defense counsel from the EVMS student body or the Honor Council to assist in his/her defense;
5. The right to use a member of EVMS faculty or administration or a licensed attorney in an advisory capacity prior to trial, but that these advisors may not act as counsel or be present during the trial;
6. The name of the student body prosecutor appointed pursuant to Article IV, Section D; and
7. The right to have a public or closed trial.

The student charged may elect to have a public trial by the Honor Court open to the entire EVMS community. Unless the student charged exercises his/her right to demand a public trial, a closed trial will be conducted within thirty (30) days of the formal charge. Discovery meetings shall be conducted between the defense counsel, prosecution counsel, and the Chairperson as deemed necessary in preparation for the trial. The final discovery meeting will be five (5) days prior to the trial. All witnesses' identities and evidence will be presented for all parties to review. Full disclosure of information to be used must be made at this time. No material shall be entered at a later date except at the discretion of the Chairperson. Written statements are required of all witnesses who are going to be called to testify. No changes may be made to any original written statement after the final discovery meeting except as an addendum to the original statement. All addenda must be made in writing prior to the start of the trial. If any party feels additional time for preparation is needed, a request may be made at this time. The Chairperson has the discretion to grant an extension and determine its length.

Section H – Absence of the Student Charged:
Failure of the student charged to be present or otherwise participate for his/her trial at the time and place specified by the Honor Court shall not be considered indication or admission of his/her guilt or innocence. Evidence shall be presented by the prosecution, and a verdict shall be rendered accordingly. If the excuse given by the student charged for non–attendance at the trial is both deemed satisfactory and acceptable by the Honor Council, a new trial may be granted by the Honor Council.

Article VI: Trial Procedures

Section A – Time and Place:
Trials will be held on the date, time, and place determined by the Honor Council. The student charged shall be given written notice of the trial at least seven (7) days in advance. The parties may agree to an earlier trial date.

Section B – Confidentiality:
All members of the Honor Council, the Honor Court, and all persons involved in investigating, prosecuting, defending, serving as a witness, juror, page, or participating in any other capacity in connection with any charge, investigation, trial or punishment provided under this Honor Code shall hold in the strictest confidence and not discuss information learned during such service or participation. They shall not discuss or disclose any information concerning the merits of the charge either with faculty, members of the student body, officials of EVMS, or any person not associated with EVMS, or among themselves, before or after a trial, except as otherwise provided in this Code. They shall keep such information confidential except as may be expressly required to be discussed or revealed in connection with the appeals specified in this Honor Code.
Appendix P

Not withstanding anything in this section or the Honor Code, members of the Honor Court may request procedural guidance from the Chairperson, the Advisor to the Honor Council or the EVMS General Counsel at any time.

Section C – Record of Procedures:
The Clerk of the Honor Court shall record the entire trial. Such recordings shall be kept in a secure place by the Associate Dean for Student Affairs for the protection of both the student charged and EVMS until a verdict is rendered. Only the jury, the Honor Court, the Chairperson and the Clerk of the Honor Court shall have access to said recording, except that in the event of an appeal by the student of either the guilty verdict or the punishment imposed. In this case, the recording will be made available through the Chairperson of the Honor Court to the officials or body to whom the matter may be appealed, to the prosecutor, and to the student charged and/or his/her counsel.

Section D – Pages:
Pages (when necessary) shall be selected from Honor Council members by the Chairperson to usher witnesses to and from the trial proceeding.

Section E – Instruction to the Court:
The Chairperson of the Honor Council shall read the following statement at the beginning of each trial:

“...The Court is instructed that the Honor Code presumes every person charged with a violation to be innocent until his/her guilt is established beyond a reasonable doubt that an Honor Code violation was committed. The presumption of innocence applies to the student charged at every stage of and throughout this entire proceeding, in reference to the entire case or to any fact essential to proving the charge made against him/her in the written notice. Unless the evidence presented against the student charged establishes beyond a reasonable doubt that an Honor Code violation was committed, it is the duty of this Honor Court to give the student charged the benefit of that doubt and find the student charged not guilty."

Section F – Presentation of Evidence:
All witnesses shall be sworn in by the Chairperson before giving testimony. Opening statements may be given first by the prosecution and then by the defense. The prosecution will then call witnesses. After examination of a witness by the prosecution, the defense has the privilege of cross-examination. As long as relevant evidence is elicited, the Chairperson will allow examination and cross-examination to continue.

The defense counsel for the student charged will then call witnesses for the student charged. After examination of a witness by the defense counsel for the student charged, the prosecution has the privilege of cross-examination. As long as relevant information is elicited, the Chairperson will allow examination and cross-examination to continue.

After completion of testimony from witnesses and at the discretion of the Chairperson, either counsel has the right to recall any witness for questioning to clarify any statement which the counsel considers unclear in the light of testimony presented by another witness. All witnesses must stay until the completion of the trial and are excused by the Chairperson.

During the course of the trial, any juror may ask the Chairperson of the Honor Court to have any witness clarify or enlarge upon his/her testimony.

At the conclusion of the evidence presentation, the prosecution and the student charged (or his/her counsel) will be allowed to make any closing statement or argument that they deem appropriate. The prosecution will proceed to make its initial closing statement or argument, whereupon the student charged or his/her counsel shall make his/her closing statement or argument. The prosecution will be permitted to make the final closing response, but, in such response, the prosecution may only comment on matters which were raised or argued in the response or closing argument of the defense.

Following the closing arguments, the jury shall be sequestered for private deliberations to determine the verdict, at which time the Chairperson of the Honor Court shall again read to the jurors the instruction set forth in Article VI,
Appendix P

Section E above. During these deliberations, the jury shall have access to all trial materials presented as evidence and the recording of the trial. No recording shall be made of jury deliberations.

Section G – Rendering a Verdict:
The jurors shall vote by secret or closed ballot. Voting by “open” ballot (e.g., raising hands) is not permitted under any circumstances. To find the student charged guilty of a charge, a total of nine (9) of the eleven (11) members of the jury must vote “guilty as charged.” Alternately, the student charged shall be acquitted if three (3) or more of the eleven (11) members of the jury vote “not guilty.”

When the jury has reached its decision, the Chairperson will recall the Court back into session and state the decision (verdict).

If the student is found guilty or pleads guilty before or during a trial, all records of the charge or trial shall be retained and stored by the Honor Council Chairperson through the Associate Dean for Student Affairs for a five (5) year period, to ensure the protection of the student charged, after which these records will be destroyed.

If the student charged is exonerated of the violation(s) charged the Clerk of the Court shall destroy all records relating to the case. However, one (1) copy of all information and recordings shall be kept by the Associate Dean for Student Affairs in a secure location for a five (5) year period, after which these records will be destroyed. Furthermore, if the verdict of not guilty was rendered in a public trial, written notice of such verdict shall be posted on a public bulletin board in the student lounge for a period of seven (7) days after trial.

Article VII: Classification of Offenses

Section A – Classifications:
Offenses are classified into one of six categories (Class I, II, III, IV, V, and VI) depending upon the severity of the offense and the circumstances of its occurrence:

1) Cases involving lying, cheating, and plagiarism are Class II Offenses.
2) Those involving falsification, sabotage, and stealing are Class IV offenses.
3) Offenses, other than those already classified as Class VI, may be elevated one class for each of the following:
   a. Endangering another student or faculty member,
   b. Threatening personal harm to another student or a faculty member,
   c. Recruiting another student to violate the Honor Code,
   d. Premeditation.
   e. and/or ambiguous or extenuating circumstances.
4) Multiple elevations are acceptable.
5) Class VI offenses are reserved for second offenses of the Honor Code. Thus, the maximum classification for first offenses is Class V.
6) Offenses may be reduced one class for ambiguous or extenuating circumstances.

Section B – Definitions:
Endangerment is defined as the probability that an innocent student is exposed to academic harm or physical or psychological injury as a result of another person's Honor Code violation.

Premeditation is the preparation to do an act before it is carried out.

Section C – Determination of Classification:
The default classification before any reductions or elevations are considered shall be reported to the accused at the time of charges by the Chairperson. The default classification is set forth in Article VII, Sections A-1-3.

The seven (7) Honor Council members who were present on the jury shall make final determination of classification. A majority vote is required for each elevation or reduction of classification for the offense. Failure to receive a
Article VIII: Punishment

Section A – Punishment:
If the jury renders a verdict of guilty or the student charged makes an oral plea of guilty upon the record during trial, the punishment for the violation of the Honor Code shall be determined by the seven (7) Honor Council members who serving on the jury. Prior to establishing the punishment, the Honor council members may review all evidence and the recording of the trial.

If the Honor Council receives a written plea of guilty by the student charged before a trial, seven (7) Honor Council members shall be randomly chosen to determine the punishment. Prior to establishing the punishment, the Honor council members may review all evidence. The student charged may also address the seven (7) members of the Honor Council prior to the determination of punishment.

Minimum punishments are set forth according to the classification of the offense. All offenses will result in probation for the duration of the student's enrollment at EVMS.

**Class I:** Recommended zero (0) on any affected assignments, 25-50 hours of university service, plus any reparations deemed necessary by the council.

**Class II:** Recommended zero (0) on any affected assignments, 50-75 hours of university service, plus any reparations as deemed necessary by the council.

**Class III:** Failure of any affected course with notation of such on the transcript, citing Honor Council action, 75-100 hours of university service, plus any reparations as deemed necessary by the council.

**Class IV:** Failure of any affected course with notation of such on the transcript, citing Honor Council action, 100-125 hours of university service, plus any reparations as deemed necessary by the council.

**Class V:** One academic year suspension from EVMS, failure of any affected course with notation of such on the transcript, citing Honor Council action, plus any reparations as deemed necessary by the council.

**Class VI:** Permanent expulsion from EVMS and notation of failure of any affected course by Honor Council action on transcript, plus any reparations as deemed necessary by the council.

Affected assignments and/or courses are those on which or in which the Honor Code violation occurred. In cases where no assignment was involved or the Honor Code violation was outside of a course, no zeros on affected assignments or failure of course(s) is necessary.

If the seven (7) Honor Council members determine that the minimum punishment as outlined above is not sufficient, they may elect to add additional sanctions from those outlined above from other classifications. For example, additional university service hours may be imposed; failure of a course for Class I-III offenses implemented, or in the case of stealing, equitable restitution to the injured party or parties may be added. All punishments must have a majority vote. Failure to receive a majority vote for changes results in the minimal punishment for the classification, as outlined above, being maintained.

Section B – Time Frame:
In the event that the charged student pleads guilty before or during his/her trial, or in the event the jury returns a verdict of “guilty,” a punishment shall be established and the student charged shall be notified of the punishment imposed within forty-eight (48) hours of the guilty plea or verdict.

Section C – Enforcement of Punishment:
Appendix P

The Advisor to the Honor Council and the Chairperson shall see that the sanctions imposed are carried out appropriately.

In the case of university service, the Associate Dean for Student Affairs and Chairperson shall determine the nature of the activities to be performed and the time frame they will be completed. All university service hours shall be documented by the guilty student and signed by a supervisor at the activity. This documentation shall be turned in promptly through the Office of Student Affairs. Any false documentation by the guilty student or supervisors shall be considered an Honor Code violation and will result in charges being filed under the Honor Code.

The Associate Dean for Student Affairs shall ensure that any notations on transcripts are made and that suspensions and expulsions are carried out. A report shall be given to the Chairperson of these actions.

Article IX: Appeal

Section A – Right to Appeal:
The student charged has the right to appeal to the Dean of EVMS or his/her designee any guilty verdict and/or any punishment imposed either as a result of a jury trial or a plea of guilty.

Section B – Written Request for Appeal and Time for Filing:
To appeal, the student must file a written request for appeal to the Dean within seven (7) calendar days of receiving the official notification of the jury’s verdict and/or of the punishment imposed. The Dean will have seven (7) week days in which to respond to the appeal.

Section C – Scope of the Appeal:
On the appeal, the Dean of EVMS shall review the full record made before the Honor Court to determine whether the Honor Court and Honor Council provided the student charged with a fair trial on the charge(s) made and the evidence presented, and whether the Honor Court and Honor Council acted in conformity with the authorities granted and procedures established by this Honor Code both in determining guilt and in imposing punishment. The Dean shall grant an appeal only if at least one of the following conditions is established:

1) Overwhelming new and relevant evidence not available at the time of trial.
2) Procedural misconduct resulting in compromise of due process.
3) Disproportion of punishment to crime.

In the event that one or more of these conditions are met, the Dean will grant an appeal. The matter will then be returned to the Honor Council Chairperson who will convene an Appeal Board to hear the case.

Section D – Prosecution’s Right to Appeal:
The prosecution shall not have a right to appeal, absent a showing that the trial was tainted by misrepresentation, perjury, fraud, mutual mistake, or duress, as determined by the Dean.

Section E – Appeal Board:
The Appeal Board will consist of five (5) randomly chosen members of the Honor Council excluding the following participants in the original trial: the Chairperson, defense counsel, prosecution counsel, or any member of the jury. If any of the five (5) Honor Council members on the Appeal Board were at the trial for any reason, they shall review the recording of the trial in its entirety before the appeal.

Section F – Chairperson:
The Chairperson of the Honor Council shall act as the Chairperson of the appeal hearing and is a non-voting member.

Section G – Counsel:
Appendix P

The defense counsel and prosecution counsel shall retrain their roles for the appeal hearing. If either is not available, the Chairperson shall appoint another Honor Council member to fill the role. The student charged may seek outside counsel from EVMS faculty, EVMS administration, and/or any outside source, including licensed attorneys. EVMS shall provide a licensed attorney as an advisor for the appeal process if the student charged has retained and/or is being advised by a licensed attorney. Licensed attorneys may be present at the Appeal Board, but they may not address the Appeal Board directly.

Section H – Time and Place:
The appeal hearing will be held on a date, time, and place determined by the Honor Council but not later than thirty (30) calendar days past the initial granting of the appeal. The student charged shall be given written notice of the date, time, and place of such hearing at least seven (7) days in advance of the hearing.

Section I – Presentation of Case:
The student charged or his/her counsel other than a licensed attorney shall have the right to comment on the trial proceedings, the evidence in the record, and what final disposition the Appeal Board should make of the case. In addition, if the Dean granted the appeal based on overwhelming new evidence not present at trial, the student charged or his/her counsel may present any new evidence that has been discovered and may call witnesses to present the new evidence. New evidence shall be made available to the prosecution at the time of the request for an appeal. Prosecution shall have an equal opportunity to comment in the same manner as the defense. Each side shall limit their remarks to thirty (30) minutes unless the Chairperson has granted an extension.

After completion of the statements by all parties or, if applicable, the presentation of new evidence, the Appeal Board members may request additional information, explanation or clarification from either party.

At the conclusion of the questioning by the Appeal Board, the prosecution and the student charged or his/her counsel will then be allowed to make a closing statement or argument.

Following closing arguments, the Appeal Board shall be sequestered for private deliberations.

Section J – Rendering a Verdict:
The Appeal Board will deliberate on the merits of the appeal presented and review the grounds on which the appeal was granted by the Dean. The Appeal Board may also review the evidence presented and recordings of the trial and/or request additional information contained in the record as they feel necessary to decide on the appeal.

The Appeal Board will have the option to uphold a verdict, reverse the verdict, or modify the punishment based on the evidence presented in the appeal hearing. Punishment may consist of only those available as provided in Article VIII, Section A. If the Dean granted the appeal based on procedural misconduct resulting in a compromise of due process, the Appeal Board will also have the option to grant a new trial.

The Appeal Board will vote by closed ballot. A majority vote is required to uphold the verdict, reverse the verdict modify the punishment or grant a new trial, as applicable.

Section K – Disposition:
The outcome of the Appeal Board hearing will then be forwarded to the Dean of EVMS and the Honor Council. The Dean will notify the student charged of the outcome of the appeal hearing and implement the final decision rendered. No further appeal shall be considered.

Section L – Status of Student Charged During Appeal:
While any appeal is pending, a student charged who has been found guilty and sanctioned with suspension or expulsion shall nevertheless be allowed to attend classes while the appeal is pending and shall remain a student in good standing at EVMS with all rights, privileges, and duties attendant thereto, unless, in the judgment of the Dean, the retention of these rights are not in the best interest of the institution.
Article X: Review Board

After each Honor Court trial, all members of the Honor Council will meet at a time set forth by the Chairperson to discuss the case. Persons not elected to the Honor Council may not attend. The Chairperson, at his/her discretion, may ask the Advisor to the Honor Council to attend. The purpose of this Review Board is to review the investigation, the trial, the determination of guilt or innocence, the determination of classification and punishment, and any appeal process that may have taken place. This meeting is for the education of Honor Council members on the execution of this Honor Code and to address any questions or concerns that any member may have. No changes to the verdict, classification, punishment, or appeal will be made as a result of this Review Board. All discussions will be confidential and no report shall be made of this proceeding.

Article XI: Report to EVMS Community

Section A — Guilty Verdict:
In the event the student charged is found guilty, the Honor Council Chairperson shall report the name of the convicted student and the offense of which he/she was found guilty to the Dean. If the trial was public, the verdict and punishment shall be made public. If the trial was not public, the offense and punishment imposed may be made public if deemed advisable by the Chairperson.

Section B — Verdict of Not Guilty:
If the student charged is exonerated of the violation(s) charged the Clerk of the Court shall destroy all records relating to the case. However, one (1) copy of all information and recordings shall be kept by the Associate Dean for Student Affairs in a secure location for a five (5) year period, after which these records will be destroyed. If the verdict of not guilty was rendered in a public trial, written notice of such verdict shall be posted on a public bulletin board in the student lounge for a period of seven (7) days after trial.

Article XII: Faculty Involvement

Section A — Faculty Cooperation:
The cooperation of the faculty is essential in carrying out the spirit of the Honor Code.

Section B — Monitoring:
During examination, the instructor(s) of the course or member(s) of that department may at his/her discretion remain in the room.

Section C — Reporting a Violation:
The faculty should report any violation of the Honor Code to the Honor Council through the Chairperson. If the faculty does not know the Chairperson, they may ask the Dean for the Chairperson's contact information but shall not give any report of the violation to the Dean. Upon the faculty member's belief that an Honor Code violation has occurred, the Honor Council shall implement the same procedures as set forth beginning in Article V through the subsequent Articles of this Honor Code. The Chairperson shall then assign an Honor Council member to act as investigator.

Section D — Confidentiality:
The faculty member making an accusation shall uphold confidentiality in all matters and not discuss the situation with any other member of the faculty at EVMS.
Appendix P

Article XIII: Accusations

Honor Code violation accusations can be made by any member of the faculty, staff, or student of EVMS through the Honor Council.

Article XIV: Amendments

Section A – Amendment Proposals:
An amendment to this Honor Code may be proposed by either of the two following methods:

1) A two-thirds (2/3) affirmative vote of the Honor Council, or

2) A petition signed by twenty-five (25) members of the student body setting forth the proposed amendment(s), which shall be presented to the Honor Council.

Section B – Notifications:
At least two (2) weeks prior to a referendum, any proposed amendment shall be made public by distribution and discussion of the proposed amendment(s) to the student body.

Section C – Vote Procedures:
Proposed amendments may be submitted for approval to the Board of Visitors after a 2/3 affirmative vote by the Honor Council and a 2/3 affirmative vote by the Pan Student Council.
LIBRARY REGULATIONS

The Edward E. Brickell Medical Sciences Library collection contains over 25,000 books, offers access to over 2,000 journals online totaling over 95,000 volumes, plus 1,800 audiovisual programs. Its scope encompasses basic and biomedical sciences, clinical medicine, and health care. The online catalog (WebCat) can be searched by author, title, subject, or keyword, and gives the location of materials in the collection. Books are shelved by the National Library of Medicine classification scheme.

Collections:
The Reserve collection is located behind the circulation desk on the first floor. It contains required materials for courses or clerkships including review texts, core texts, photocopied articles, AVs, and computer software. Some materials are restricted to in-library use. Submission of materials for reserve is limited to faculty and staff.

The Reference collection is located on the first floor and contains directories, dictionaries, handbooks, and indexes, plus:

- Information for patients and their families in the Lay Health collection
- EVMS theses and dissertations
- Facsimiles of classic medical texts in the St. Jude collection

REFERENCE MATERIALS CANNOT BE CHECKED OUT.

The following collections can be found on the first floor next to the reference collection:

- **Student Resource Collection (SRC)** containing textbooks, study guides and handbooks donated by students. Materials can be checked out by students for six weeks.

- **Cultural Awareness Collection** containing books, CDs, DVDs, and other multimedia materials. Books may be checked out for two weeks; AV materials may be checked out for one week.

Journals are shelved alphabetically by title and divided by date of publication:

- Current unbound issues – first floor. Many of our current journals are available in electronic format only.
- Journals published from 1990 through the latest bound – second floor.
- Journals published 1979–1989 are on the third floor.
- Journals published before 1979 are on the fourth floor (during evening and weekend hours, library staff will retrieve journals from the fourth floor as needed).

Held titles, volumes, and issues are listed in the online catalog WebCat.

The Audiovisual (AV) collection is located on the first floor of the library. It contains slides, videos, audiocassettes, and computer programs (CDs). AVs can be checked out for one week. AV equipment is available for use in the library study rooms.

The Historical collection is located on the fourth floor. The Dr. and Mrs. J. Thiemeyer, Jr., Medical History and Reading Room houses a special collection of over 1,000 books, journals, and medical artifacts, in large measure a gift from the Norfolk Academy of Medicine. Many of the books were in the personal libraries of prominent Norfolk physicians, some as far back as the American Revolution. The historical collection may be consulted by appointment only. To schedule an appointment, call 757-446–5842.

Location:
The Edward E. Brickell Medical Sciences Library opened in March of 2000 on the west side of Lewis Hall, at 740 West Olney Road (at the corner of Olney and children’s Lane, across from the Children’s Hospital of the King’s Daughters). The mailing address is P. O. Box 1980, Norfolk, VA 23501–1980.
Appendix P

Hours of Service
Monday – Thursday  8:00 a.m. – 12:00 midnight
Friday             8:00 a.m. –  6:00 p.m.
Saturday           9:00 a.m. – 7:00 p.m.
Sunday             1:00 p.m. – 12:00 midnight

Changes in the library hours will be posted in advance on the library door. Access to the library during special study-hall hours is limited to EVMS students.

The computer laboratory is open 24 hours a day, seven days a week. When the library is closed entry to the Computer Laboratory is through Lewis Hall.

Telephone Numbers

Reference/Information  757-446–5851
Circulation           757-446–5850/5845
Administration        757-446–5841
Interlibrary Loan     757-446–5848/5861
Computer Laboratory   757-446–5294
Fax                   757-446–5134

Circulation of Library Materials
To borrow materials, clients must be registered in the library information system (SIRSI). Each client is assigned a unique barcode. A bar-coded ID badge or library card should be presented when borrowing materials.

Materials must be checked out at the first floor circulation desk.

Loan Periods:
● Books – 2 weeks
● Journals – 1 week
● Audiovisuals (AV) – 1 week
● AV equipment – Overnight
● Reserves – Varies, usually 2 hours
● Laptop computers – 2 hours (in library use only)

Renewals:
Materials may be renewed at the circulation desk or by phone unless a hold request has been placed on an item. A maximum of three renewals is allowed. Laptops may be renewed once.

Hold Requests:
You may request that circulating materials be held for you when they are returned; holds may not be placed on reserve materials. Items needed urgently may be recalled and must be returned immediately. You may request that books or journals be pulled and placed on the hold shelf for you. A maximum of five requests at one time will be taken per individual. Materials will be held for seven working days. If not picked up within that time, they will be returned to the collection and will not be pulled a second time. Such requests are handled at no charge on a limited basis.

Returning Library Materials:
All library borrowers are responsible for the safe and prompt return of items checked out in their names. To ensure that you are properly credited for returning your library materials, return them through the book drop at the circulation desk. Do not leave materials on the top of the circulation desk. If the library is closed, return your books and journals through the book drop located in the wall outside the front door of the library. Do not return AVs, CDs, videos, AV equipment or laptop computers through the book drop; return them to the circulation desk. You will be responsible for damage to these fragile items.
Appendix P

Overdue or Lost Library Materials:
Having overdue library materials will result in the loss of borrowing privileges. Borrowers who lose or fail to return library materials are liable for replacement cost plus a $10.00 processing fee.

Fines:
- Fines are charged for overdue reserve materials.
- The fine rate is $1 per item per hour or any increment thereof, to a maximum $5 per item per day.
- Daily fines are cumulative (i.e., three days overdue = $15).
- Fines for overnight and other authorized loan periods are calculated from one hour after the library opens on the due date (i.e., from 9:00 a.m. Monday–Friday, from 10:00 a.m. Saturday and holidays, and from 1:00 p.m. Sunday).
- Fines are due at the time of return.
- Unpaid overdue fines automatically accrue against the borrower’s checkout record, semi–annual loan refunds, and affect ability to graduate.

Fax Service:
The library will send and receive faxes for students. Outgoing local calls are free, but there is a $1.00 charge for long distance faxes. All incoming faxes must have an accompanying cover sheet.

Photocopiers:
Self–service photocopiers are located on the first, second, and third floors of the library. Copiers on the first floor accept coins; however, all copiers accept debit cards sold at the circulation desk in $2.50, $5.00, $10.00, and $20.00 increments. Copies are $.05 each and library staff cannot provide change. Copying is at the user’s risk.

Computer Services:
The library contains a computer laboratory and classroom open only to EVMS students, staff, and faculty, and requires a network account. Each venue contains 30–networked stations and a shared laser printer. Computer–assisted instruction (CAI) programs in the basic and clinical sciences; word processing, graphics, and spreadsheet programs; e–mail; and the Internet are also available. Headphones may be checked out at the circulation desk.

- No software may be installed on Lab and Classroom computers.
- Files must be saved on diskettes or network drives (files saved on computers are deleted frequently).
- The library assumes no responsibility for lost, damaged, or deleted data.
- Copying lab software is a violation of licensing agreements and is strictly forbidden.

Plug–in and wireless connections are available throughout the library (carrels, tables, and in study rooms) for all EVMS network account holders. Five laptop computers are available for checkout for in–library use. Student–owned laptops must be configured for use with the network by the EVMS Academic Computer Center.

Group Study Rooms:
Sixteen group study rooms of varying sizes are located on the second and third floors of the library and are generally available for use on a first–come, first–served basis. Priority is given to those using curriculum–related AVs. Groups have priority over one or more people studying individually, and individuals must yield or share the space. Only faculty may reserve these rooms for EVMS instruction.

Food and Drink Policy:
The library permits food and drinks, within reason, to be consumed in most locations. All food/drink containers and wrappers must be disposed of in the large, black food–disposal receptacles and aluminum–can recycling bins located on each floor of the library. Do NOT dispose of these items in the wastebaskets located throughout the library. Food/drink is prohibited in the Historical collections area and is discouraged in the computer lab and classroom where damage to equipment could easily result. Food delivery, catered events, and cooking in the library are not permitted.
STUDENT ADVISING POLICY

All EVMS faculty are accessible to students for academic advising at stated times outside regularly scheduled class hours. For additional information, medical students should contact the Office of Education, and health professions students should contact their program director.

STUDENT-FACULTY RELATIONSHIP AND PROVISION OF HEALTH CARE

Background
EVMS places a high value on protecting the student-faculty relationship that is a hallmark of higher education. Because clinical faculty may periodically provide health care services to EVMS students, the institution recognizes that provision of care could jeopardize the student-faculty relationship. This could be especially problematic in situations in which the treating faculty member also serves in an educational capacity, such as a course or clerkship director. Furthermore, it is essential that protected health information always be maintained separately from a student’s academic records.

Policy
Students and faculty have the right and are encouraged to request that a change be facilitated in either the provision of care or the educational experience if one or both parties conclude that circumstances may impede the student-faculty educational relationship. The implementation of this policy and procedure should in no way delay or deny the provision of essential or urgent care required by a student.

Procedure
Students or faculty initiating a request for such a change should contact the Associate Dean for Education (for medical students) or their Program Director (for health professions students) and explain the circumstances. The Associate Dean for Education or the Program Director will then make a determination as to whether or not a change is warranted, and take such steps as deemed appropriate to resolve the situation. As a general rule, the preferential resolution will result in changing an aspect of the educational component if possible (e.g., assigning a student to a different preceptor and/or facility) so as to avoid disrupting a student’s continuity of care. The matter will be treated in a confidential manner, and the student and faculty member will be notified by the proper official as soon as an arrangement has been finalized.

If a student arrives at an EVMS clinical site for a scheduled or unscheduled appointment and is not comfortable with being seen by the assigned treating faculty member, the student should request to see a different health professional at that time. Every effort should be made to accommodate the student’s request in a manner that causes the least possible disruption to the facility’s provision of health services.

STUDENT GOVERNMENT AND ACTIVITIES

Each student class in every educational program annually elects class officers. This generally includes a President, Vice President, Secretary, and Treasurer. In addition, each class elects representatives to the Phoenix Committee, the Honor Committee, as well as other committees as appropriate. The class officers comprise the Pan Student Council (PSC). Annually, the PSC elects an executive council including a President, Vice President, Secretary and Treasurer. The PSC meets on a monthly basis with the Dean/Provost and the Associate Dean for Student Affairs to ensure that there is appropriate communication between the administration and our student body. The PSC also coordinates various student activities, and it is responsible for the review and acceptance or rejection of the charter for each of our student organizations annually. The Student Organizations and Clubs are coordinated through the following link: http://evms.collegiatelink.net.

SUSPECTED PRECEPTOR OR HEALTH PROFESSIONAL MISCONDUCT

All licensed health care professionals have a duty to conduct themselves appropriately and provide health care services in an ethical, safe, and professional manner. Students in the medical and health professions may interact with physicians, nurses, physician assistants, and many other professionals during the course of their education and
Appendix P

training, including didactic and clinical settings. In the unlikely event that you observe unethical, unsafe, or unprofessional behavior from a licensed health professional, even if that person is not serving as your preceptor, it is important that you understand how to respond.

Whereas licensed health professionals have a duty to report unethical, unsafe, or unprofessional conduct that they observe in other licensed health professionals to the appropriate Board in the Department of Health Professions, students have no such requirement. Students are generally less experienced and may be less capable of identifying certain types of actions such as the accuracy of a diagnosis or the safety of a treatment plan, but are certainly in a position to recognize inappropriate or possibly illegal behavior such as assault or sexual harassment. The hypothetical range of possible misconduct or inappropriate behavior is vast. Students are expected to exercise reasonable judgment based on specific circumstances and the degree of urgency, but as a general rule should follow the guidelines below if you witness or suspect misconduct on the part of a licensed health professional:

1. Initially, and if reasonable under the circumstances, ask the preceptor or health professional about the incident. If this doesn’t resolve your concerns.

2. Discuss the incident or behavior with an appropriate school official, particularly the Program Director (for health professions students) or the Associate Dean for Education (for medical students). You may provide a written description of the incident prior to, during, or after the discussion with a proper official. Written remarks should be as specific as possible without violating HIPAA regulations regarding patient identifiers and information.

3. While you are not encouraged to submit a formal complaint directly to the Virginia Board of Health Professions or any other agency or institution, if you choose to do so please provide a copy of that complaint to the appropriate school official.

School officials will take such actions as are deemed appropriate and lawful, and will determine if the student(s) initiating a complaint or reporting an incident should be informed about such actions.

STUDENT PUBLICATION POLICY

Publications originated by EVMS students that are directly related to a student's curriculum or academic work must follow institutional and/or program policies and procedures. For example, publications resulting from research projects may require review and approval by the Institutional Review Board or other appropriate EVMS regulatory committees. Medical students should consult the Associate Dean for Education or a designated faculty advisor/mentor for guidance. Health professions students should consult their Program Director or a designated faculty advisor/mentor for guidance.

INCLEMENT WEATHER POLICY

The nature and mission of EVMS dictate that certain services are provided on a continuing basis without interruption due to inclement weather.

In extreme weather conditions, the President of EVMS or his official designee may make the determination to close the medical school. Such decisions will be announced on local television and radio stations and posted on the EVMS web site.

Depending on the severity of the weather conditions, the school may close to any of the following extents:

- **Open, but student lectures delayed**
  (Students/residents on clinical rotations report to their clinical rotations on time. No student lectures before 10:00 a.m. – full class schedule after 10:00 a.m.)

- **Close the school completely**
  (No student lectures, no clinical or resident operations in EVMS facilities. Students/residents assigned to non-EVMS facilities follow policies/procedures of the facilities.)
PROCEDURES

1) Communicating EVMS status in the event of inclement weather

Should weather conditions be so extreme that the President makes the decision to close the school or to delay student lectures, he instructs the Director of Physical Facilities to communicate the decision. The following chart outlines the methods used for communicating the school’s status in the event of inclement weather:

<table>
<thead>
<tr>
<th>Status</th>
<th>Announcements</th>
</tr>
</thead>
<tbody>
<tr>
<td>Open</td>
<td>No announcements will be made.</td>
</tr>
</tbody>
</table>
| Open, but student lectures delayed (students or residents on clinical rotations report to their clinical rotations on time. No student lectures before 10:00 a.m. – full class schedule after 10:00 a.m.) | 1. An email will be sent to all EVMS students informing them that classes scheduled before 10:00 a.m. are canceled and classes starting at 10:00 a.m. or later will convene as scheduled.  
2. Message will be posted on the home page of the EVMS website (www.evms.edu) and on the recorded message for the EVMS main telephone number (757-446-5600).  
3. There will be NO announcements on radio or TV. Students are responsible for checking their email, the website, or calling the main number to determine school status. |
| Close the school completely (No student lectures, no clinical or resident operations in EVMS facilities. Students/residents assigned to non-EVMS facilities follow policies/procedures of the facilities.) | 1. Announcements on radio and TV will indicate “EVMS Closed.”  
2. Message will be posted on the home page of the EVMS website (www.evms.edu) and on the recorded message for the EVMS main telephone number (757-446-5600). |

2) Decision to Close Early Made During Working Hours:

a. The Human Resources Department notifies all departments, via telephone, as to the closing time.  
b. In addition, a broadcast email is sent to all EVMS employees and students, and notice is posted on the EVMS website.  
c. When appropriate, the Office of Marketing and Communications will contact the media for closing notification.

USE OF CAMPUS FACILITIES POLICY

All requests for the use of educational space within EVMS campus must be submitted for approval through the SCHED program maintained by the Academic Computer Center. EVMS educational space is designed to be used solely for educational activities for EVMS affiliated students, physicians, other health professionals, and the community. The priority for use of these facilities is as follows:

1) Student education has priority over all other activities. All decisions to move students from a regularly scheduled activity in any room within EVMS campus must have the written permission of the Dean or his/her designee.
Appendix P

2) Education activities sponsored by EVMS, Eastern Virginia Graduate School of Medicine, or any of the respective departments or programs have priority over activities sponsored by community health care organizations or other educational institutions.

3) Continuing education activities sponsored by EVMS–CME program have priority over all other continuing education activities sponsored and/or presented by any other groups.

4) Student activities must be scheduled and approved in writing by the Office of Academic Affairs.

ANIMALS ON CAMPUS POLICY

Dogs, cats, and other animals, except Seeing Eye dogs, dogs that assist those who are physically challenged, and animals approved for laboratory or research purposes, are prohibited in all EVMS buildings, offices, and classrooms, and are subject to being removed from the campus and impounded by the Bureau of Animal Control.

Dogs, cats, and other animals are permitted on campus grounds as long as they are accompanied by an attendant. Animals found unattended on the campus, including animals found tied or leashed to trees, poles, or other objects on the campus, are subject to being impounded by the Bureau of Animal Control.

The Director of Public Safety is responsible for the administration and implementation of this policy.

The owner of any animal impounded by the Bureau of Animal Control is responsible for all resulting fines and fees. Civil litigation may result if injuries or damages are inflicted by the animal.

POSTING OF SIGNS AND ADVERTISEMENTS ON CAMPUS POLICY

Posting:
No materials shall be posted on trees, windows, walls, doors, or glass panels either inside or outside medical school buildings. The only exceptions are:
1) Materials relating to fire, health, or safety (such materials must be approved for posting by the Director of Public Safety) and
2) Materials posted on bulletin boards.

Assigned Bulletin Boards:
Bulletin boards in Lewis Hall are provided for the posting of signs, papers, posters, advertisements, etc., and are subject to the following regulations:
1) Bulletin boards are assigned by the Associate Dean for Student Affairs for the exclusive use of students.
2) Assigned bulletin boards are labeled and are the responsibility of the student club to which they are assigned.
3) No materials may be posted on assigned bulletin boards without authorization of the assigned student club.
4) The student club is responsible for removal of unauthorized material and for keeping posted materials updated.

General Bulletin Boards:
1) General bulletin boards are posted in various campus locations and are available for the use and benefit of the campus community.
2) Material posted on general bulletin boards is subject to approval by the President or an authorized representative.
3) Areas designated for the posting of materials are designed to provide a means to advertise campus events, publicize services for students, and inform students, faculty, and staff of interesting off-campus activities. All individuals and organizations posting notices are expected to design and display their materials in a manner respectful of the diverse beliefs, opinions, and attitudes that exist in an institution of higher learning. Posted items must be educational or informative in nature. Items advocating an infraction of any law, ordinance, or official EVMS regulation may not be displayed and are subject to removal by the President or an authorized representative.
<table>
<thead>
<tr>
<th>FREQUENTLY USED PHONE NUMBERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alumni Relations</td>
</tr>
<tr>
<td>Anatomy</td>
</tr>
<tr>
<td>Behavioral Medicine Clinic</td>
</tr>
<tr>
<td>Doctor/Patient Course Director</td>
</tr>
<tr>
<td>Financial Services</td>
</tr>
<tr>
<td>Ghent Family Practice</td>
</tr>
<tr>
<td>Graduate Medical Education</td>
</tr>
<tr>
<td>Office of Student Affairs</td>
</tr>
<tr>
<td>Associate Dean</td>
</tr>
<tr>
<td>Admissions</td>
</tr>
<tr>
<td>Financial Aid</td>
</tr>
<tr>
<td>Minority Affairs</td>
</tr>
<tr>
<td>Registrar</td>
</tr>
<tr>
<td>Research &amp; Evaluation</td>
</tr>
<tr>
<td>Student Activities</td>
</tr>
</tbody>
</table>

**Library and Learning Resources**

<table>
<thead>
<tr>
<th></th>
<th>446–5845</th>
</tr>
</thead>
<tbody>
<tr>
<td>Circulation</td>
<td>446–5294</td>
</tr>
<tr>
<td>Computer Laboratory</td>
<td>446–5841</td>
</tr>
<tr>
<td>Director</td>
<td>446–5848/5861</td>
</tr>
<tr>
<td>Interlibrary Loan</td>
<td>446–5848</td>
</tr>
<tr>
<td>Learning Resource Center</td>
<td>446–7485</td>
</tr>
<tr>
<td>Reference</td>
<td>446–5851</td>
</tr>
<tr>
<td>Technical Services</td>
<td>446–5842</td>
</tr>
<tr>
<td>Neuropsychology Center</td>
<td>446–8400</td>
</tr>
<tr>
<td>Portsmouth Family Medicine</td>
<td>446–7400</td>
</tr>
<tr>
<td>Psychiatry</td>
<td>446–5888</td>
</tr>
<tr>
<td>Security Department</td>
<td>446–5198</td>
</tr>
<tr>
<td>Student Health Services</td>
<td>446–5951</td>
</tr>
</tbody>
</table>
APPENDIX OF FORMS FOR STUDENTS

Office of the Registrar  http://info.evms.edu/registrar_html

* Address Changes Form
* Request for transcript of record Form
* Request for Name Change Instructions and Form
* Student Status Change Form
* Release of Directory Information Form
* Request for Release of Information/Enrollment Verification Form
* Request to Inspect and Review Education Records Form
* Request to Amend Education Records Form
* Request for Tutor Form
* Annual FERPA Notice

Office for Student Affairs  http://www.evms.edu/students/index.html

Occupational Health Department  http://www.evms.edu/occ-health/students.html

* Student Health Requirements Form
The complete ODU Faculty Handbook may be viewed by visiting the ODU website at:

http://odu.edu/ao/facultyhandbook/facultyhandbook.pdf
Table of Contents

I. THE UNIVERSITY ......................................................................................................................... 1
    History ........................................................................................................................................ 1
    Mission of the University .......................................................................................................... 2
    Major Goals of the University .................................................................................................. 4
    Code of Ethics ............................................................................................................................ 6
    Reaffirmation of University Policy Prohibiting Discrimination ................................................ 7
    Administrative Organization ..................................................................................................... 8
        The Board of Visitors ........................................................................................................... 8
        President ............................................................................................................................... 8
        Provost and Vice President for Academic Affairs .............................................................. 8
        Vice President for Administration and Finance ................................................................. 8
        Vice President for Human Resources .................................................................................. 8
        Vice President for Research ............................................................................................... 8
        Vice President for Student Engagement and Enrollment Services .................................. 9
        Vice President for University Advancement ..................................................................... 9
    Academic Organization .............................................................................................................. 10
        Colleges and Departments of Instruction ........................................................................... 10
            College of Arts and Letters .............................................................................................. 10
            College of Business and Public Administration ............................................................ 10
            Darden College of Education ....................................................................................... 10
            Frank Batten College of Engineering and Technology .................................................. 11
            College of Health Sciences ............................................................................................. 11
            College of Sciences ......................................................................................................... 11
    University Governance ............................................................................................................. 12
        Consultative and Deliberative Bodies .................................................................................. 12
    University Organizational Chart ............................................................................................... 13

II. THE FACULTY ............................................................................................................................ 14
    Resolution Concerning Employment ....................................................................................... 14
    Hiring Procedures for Instructional and Administrative Faculty ............................................. 15
    Academic and Professional Preparation Requirements for Faculty ........................................ 18
    Initial Appointment of Teaching and Research Faculty ............................................................ 19
    Joint Appointments ................................................................................................................. 23
    Special Appointments ............................................................................................................. 24
    Reappointment or Nonreappointment of Faculty ..................................................................... 25
    Academic Rank and Promotion in Rank .................................................................................. 27
    Policy on Conversion of a Non Tenure Eligible Position to Tenure-Eligible and Appointment to the Rank of Assistant Professor ................................................................. 35
    Tenure-Track Positions Funded by Research Centers ............................................................. 37
    Eminent Scholars .................................................................................................................... 38
    University Professors .............................................................................................................. 41
    Guidelines for Selection of Named Chairs .............................................................................. 42
    Guidelines for Selection of Named Professorships ................................................................. 43
    Emeritus/Emerita Appointments ............................................................................................... 44
    Administrative and Professional Faculty .................................................................................. 45
    Administrators Returning to Faculty Positions ....................................................................... 48
    Guidelines for Appointment and Promotion of Librarians ...................................................... 49
    Tenure ....................................................................................................................................... 52
    Evaluation of Faculty ............................................................................................................... 58
    Policy and Procedures on Post-Tenure Review ....................................................................... 63
    Post-Tenure Review Grievance Timeline ................................................................................. 65
    University Policy on the Evaluation of Teaching .................................................................... 66
    Faculty Salary Increments ......................................................................................................... 70
Appendix Q

Evaluation of Academic Deans ........................................................................................................... 71
Policy for Department Chair Evaluation .............................................................................................. 72
Faculty Administrator Performance Appraisal ......................................................................................... 74
Compensation and Human Resources Administration Plan for Administrative and Professional Faculty ........................................... 75
Declaration of a State of Bona Fide Financial Exigency or Severe Financial Difficulty ................................. 76
Dismissal of Faculty from Employment Due to Financial Exigency or Discontinuance of a Program of Study or a Department of Instruction ...................................................................................................................................... 77
Faculty Sanctions .................................................................................................................................. 79
Faculty Grievance Policy ........................................................................................................................ 82
Faculty Grievance Committee and Hearing Panels: Composition and Procedures ......................................... 85
Grievance Policy for Faculty Administrators .............................................................................................. 92
Voluntary Phased Separation Program for Tenured Faculty ........................................................................... 95
Separation Process for Faculty and Staff ........................................................................ 97
Academic Freedom .................................................................................................................................. 99
Professional Ethics .................................................................................................................................... 100
Statement on Freedom of Expression ..................................................................................................... 101
Resolution Supporting Intellectual Diversity .......................................................................................... 102
Faculty Performance Period .................................................................................................................. 103
Faculty Teaching Load .......................................................................................................................... 104
Policy on Workload and Compensation for Televised Instruction .................................................................... 105
Academic Advising .................................................................................................................................. 106
Academic Advising Mission Statement .................................................................................................. 107
Class Audit (Non-Formal) by Faculty, Spouses, and Retired Faculty ....................................................................... 108
Class Attendance by Guests .................................................................................................................. 109
Full-Time Faculty Member as a Degree Candidate ..................................................................................... 110
Faculty Class Attendance ...................................................................................................................... 111
Final Examinations .................................................................................................................................. 112
Faculty Office Hours ............................................................................................................................. 113
Course Outlines ...................................................................................................................................... 114
Class Rosters .......................................................................................................................................... 115
Grades and Grade Sheets ...................................................................................................................... 116
Academic Functions .............................................................................................................................. 117
Remunerative Outside Employment ........................................................................................................ 118
Faculty Responsibilities: Outside Employment .......................................................................................... 119
Extra Compensation ............................................................................................................................ 120
Faculty Incentive Options Policy ............................................................................................................. 122
Extra Compensation for Administrators with Faculty Rank ........................................................................... 123
Procedures for Compliance with the Virginia State and Local Government Conflict of Interests Act .......... 124
Policy for Conflicts of Interests Arising from an Employee's or Family Member's Financial Interests, Employment at, or Representation of Old Dominion University ............................................................................................ 125
Personal Use of University Materials or Funds ......................................................................................... 128
University Telephone System Usage ....................................................................................................... 129
Faculty Records ...................................................................................................................................... 131
Discrimination Complaint Procedure ...................................................................................................... 132
General Harassment Policy .................................................................................................................... 136
Sexual Harassment Policy and Procedures ............................................................................................. 139
Disruptive Behavior Policy for Faculty and Faculty Administrators ........................................................................ 143
Communications With The Board of Visitors ......................................................................................... 144
The University's Name and Identification .............................................................................................. 145
Authority to Act on Behalf of the University ............................................................................................. 146
Development Policy .............................................................................................................................. 147
Advisory Councils .................................................................................................................................... 149
Institutional and Individual Memberships in Professional or Civic Organizations and Social Clubs ................. 150
ODU Faculty Receiving Nationally Competitive Fellowships ........................................................................ 152
Faculty Exchange Between Norfolk State University and Old Dominion University ........................................ 153
Appendix Q

Emergency/Disaster Leave ................................................................. 238
Recognition Leave ........................................................................... 239
School Assistance and Volunteer Service Leave .................................. 240
Leave of Absence Without Compensation ............................................... 241
Telework Policy .................................................................................. 242
Tuition Assistance Policy ...................................................................... 244
Policy for Faculty Development Funds .................................................. 248
Participation in Learned Societies ......................................................... 249
Fee Waivers for Full-time Faculty, Staff and Dependents ....................... 250
Federal and Commonwealth Policies ..................................................... 251
Virginia Sickness and Disability Program .............................................. 251
Family and Medical Leave Act Policy .................................................... 252
Payroll Deductions ............................................................................. 258
  Income Tax Withholding ..................................................................... 258
  Social Security Tax ........................................................................... 258
  Fringe Benefits ................................................................................ 258
Virginia Retirement System ................................................................. 258
Optional Retirement Plans .................................................................... 258
Virginia Retirement System Group Term Life Insurance ......................... 259
Optional Benefits Through Payroll Deduction ......................................... 260
  Health Insurance Benefits ............................................................... 260
Pre-Tax Program ................................................................................... 260
Flexible Spending Accounts ..................................................................... 260
Health Insurance Coverage ...................................................................... 260
Tax Sheltered Annuities ....................................................................... 260
Deferred Compensation Plan (DCP) ......................................................... 260
Employer Cash Match Program ............................................................. 261
Optional/Additional Life Insurance ......................................................... 261
Short-Term Disability Insurance ............................................................ 261
Long-Term Disability Insurance ............................................................. 261
Personal Accident Insurance .................................................................... 261
Long-term Care Insurance ...................................................................... 261
Prepaid Legal Assistance Plan ............................................................... 261
Changing Beneficiaries ......................................................................... 261
Workers’ Compensation ....................................................................... 262
Child Support Withholding Disclosure .................................................. 263
Liens and Garnishments ....................................................................... 264
Unemployment Compensation ............................................................... 265
Insurance ............................................................................................. 266
  Personal Property Insurance .............................................................. 266
  Liability Insurance .......................................................................... 266
VI. OTHER INFORMATION ................................................................ 267
Immigration Reform and Control Act ..................................................... 267
Manner and Schedule of Payment to Faculty and Faculty Administrators .............................................. 268
Extra Compensation in Off-Term Sessions ............................................. 268
Responsibility of Budget Unit Directors ................................................ 269
University-Related Travel ..................................................................... 270
  Motor Vehicle Requests ..................................................................... 270
Breakdowns .......................................................................................... 270
Accidents ............................................................................................ 270
State Employee Safety Seat Belt Policy ................................................ 270
Travel Policy ........................................................................................ 270
Travel Regulations .............................................................................. 271
Travel Arrangements ............................................................................ 273
Internet Usage to Purchase Travel Services ........................................... 273
July 2011
Appendix Q

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>American Express Corporate Travel Charge Cards</td>
<td>274</td>
</tr>
<tr>
<td>Nonrefundable Airline Tickets</td>
<td>274</td>
</tr>
<tr>
<td>Estimated Cost of Proposed Travel</td>
<td>275</td>
</tr>
<tr>
<td>Business-Related Travel Allowance</td>
<td>276</td>
</tr>
<tr>
<td>Business Travel Policy</td>
<td>276</td>
</tr>
<tr>
<td>Convention and Conferences (Attendee Limit)</td>
<td>278</td>
</tr>
<tr>
<td>Policy on the Use of Computing Resources</td>
<td>280</td>
</tr>
<tr>
<td>Information Technology Access Control Policy</td>
<td>281</td>
</tr>
<tr>
<td>Information Technology Infrastructure, Architecture, and Ongoing Operations Policy</td>
<td>283</td>
</tr>
<tr>
<td>Data Classification Policy</td>
<td>286</td>
</tr>
<tr>
<td>Electronic Messaging Policy for Official University Communication</td>
<td>289</td>
</tr>
<tr>
<td>Smoking Policy</td>
<td>293</td>
</tr>
<tr>
<td>University Drug and Alcohol Policy</td>
<td>295</td>
</tr>
<tr>
<td>Drug-Free Workplace</td>
<td>296</td>
</tr>
<tr>
<td>Firearms, Weapons, and Certain Related Devices</td>
<td>302</td>
</tr>
<tr>
<td>Policy on Children in the Workplace</td>
<td>303</td>
</tr>
<tr>
<td>Use of Facilities</td>
<td>305</td>
</tr>
<tr>
<td>Use of University Equipment Off Campus</td>
<td>305</td>
</tr>
<tr>
<td>Webb Center Scheduling Policy and Procedures</td>
<td>306</td>
</tr>
<tr>
<td>Reserving Space in Academic Buildings for Temporary Use</td>
<td>307</td>
</tr>
<tr>
<td>Bulletin Boards and Posting of Materials</td>
<td>308</td>
</tr>
<tr>
<td>Solicitation Policy</td>
<td>309</td>
</tr>
<tr>
<td>Issuing of University Facilities Keys</td>
<td>311</td>
</tr>
<tr>
<td>Old Dominion University Identification Card Program</td>
<td>313</td>
</tr>
<tr>
<td>Threat Assessment</td>
<td>314</td>
</tr>
<tr>
<td>Procedures for Student Suicidal and Emotionally Disruptive Behavior</td>
<td>315</td>
</tr>
<tr>
<td>Guidelines and Policy on Dealing with Disruptive Students</td>
<td>317</td>
</tr>
<tr>
<td>Student AIDS Policy</td>
<td>318</td>
</tr>
<tr>
<td>Sexual Assault Policy</td>
<td>319</td>
</tr>
<tr>
<td>Stalking Policy</td>
<td>320</td>
</tr>
<tr>
<td>Student Complaint Procedure</td>
<td>321</td>
</tr>
<tr>
<td>Student Disciplinary Policies and Procedures</td>
<td>322</td>
</tr>
<tr>
<td>Interim Suspension</td>
<td>324</td>
</tr>
<tr>
<td>Student Record Policy</td>
<td>325</td>
</tr>
<tr>
<td>Certificate of Recognition or Achievement for Terminally Ill and Deceased Students</td>
<td>326</td>
</tr>
<tr>
<td>APPENDIX</td>
<td>327</td>
</tr>
<tr>
<td>Schedules for Faculty Personnel Actions</td>
<td>340</td>
</tr>
<tr>
<td>Schedule of Reappointment/Nonreappointment of Nontenured Faculty Members in the First Year of Service and Lecturers and Senior Lecturers in their First Year of Employment</td>
<td>340</td>
</tr>
<tr>
<td>Schedule of Reappointment/Nonreappointment of Nontenured Faculty Members in the Second and Subsequent Years of Service (Non-Tenured and Non-First Year Faculty) Only</td>
<td>341</td>
</tr>
<tr>
<td>Schedule of Reappointment/Nonreappointment of Lecturers (Beyond Their First Year of Employment) and Senior Lecturers (Every Three Years Beyond Their First Year of Employment)</td>
<td>342</td>
</tr>
<tr>
<td>Schedule For Faculty Seeking Conversion of a Non-Tenure Eligible Position to Tenure-Eligible and Appointment to the Rank of Assistant Professor</td>
<td>343</td>
</tr>
<tr>
<td>Schedule for Pre-Tenure Review (Non-Tenured and Non-First Year Faculty)</td>
<td>344</td>
</tr>
<tr>
<td>Schedule for Pre-Tenure Review for Faculty Appointed at Mid-Year (Non-Tenured and Non-First Year Faculty)</td>
<td>345</td>
</tr>
<tr>
<td>Schedule for Faculty Seeking Tenure</td>
<td>346</td>
</tr>
<tr>
<td>Schedule For Faculty Seeking Tenure Mid-Year</td>
<td>348</td>
</tr>
<tr>
<td>Schedule of Tenured Faculty For Eminent Scholar Designation</td>
<td>350</td>
</tr>
<tr>
<td>Schedule of Tenured Faculty For University Professor Designation</td>
<td>351</td>
</tr>
<tr>
<td>Schedule For Faculty Seeking Promotion In Rank</td>
<td>353</td>
</tr>
<tr>
<td>Schedule for Lecturers Seeking Promotion to Senior Lecturer</td>
<td>354</td>
</tr>
<tr>
<td>Schedule Of Annual Evaluation For Tenured Faculty</td>
<td>355</td>
</tr>
</tbody>
</table>
I. THE UNIVERSITY

History

Old Dominion University began its tradition of excellence when it was founded in 1930 by the College of William and Mary, the second oldest university in the United States. Established as an extension of William and Mary in Williamsburg, Virginia and Virginia Polytechnic Institute in Blacksburg, Virginia, Old Dominion began educating teachers and engineers. The two-year school rapidly evolved into a full four-year institution, and was granted independence in 1962 as Old Dominion College.

Considerable growth in enrollment, the expansion of research facilities and preparation for the addition of graduate programs led the Board of Visitors to approve the name change to Old Dominion University. Now Old Dominion is a powerhouse for higher education with six colleges: Arts and Letters, Business and Public Administration, Education, Engineering and Technology, Health Sciences and Sciences. Old Dominion has offered master's degrees since 1964 and Ph.D.'s since 1971. Students currently choose from 69 baccalaureate programs, 55 master's programs, two education specialist programs and 41 doctoral programs. The University has achieved designation as a Research University (high research activity) from the Carnegie Foundation for the Advancement of Teaching.

Proud of its past, Old Dominion looks to the future and prides itself on its constantly expanding research and teaching programs. An ever-evolving university, Old Dominion is an agent of change for its students, for the region and the nation it serves. Old Dominion is Virginia's forward-focused, public doctoral research university for students from around the world who want a rigorous academic experience in a profoundly multicultural community. Our nationally recognized faculty use real-world expertise and innovative teaching methods to challenge students to achieve their highest goals. Our determined entrepreneurial approach to problem-solving drives cutting-edge research, eminent scholarship and strategic partnerships with government, business, industry, organizations and the arts.
Mission of the University

Mission

Old Dominion University, located in the City of Norfolk in the metropolitan Hampton Roads region of coastal Virginia, is a dynamic public research institution that serves its students and enriches the Commonwealth of Virginia, the nation and the world through rigorous academic programs, strategic partnerships, and active civic engagement.

Background

Old Dominion University is located in Hampton Roads, one of the world's major seaports. Since the early seventeenth century, Hampton Roads has been the state's gateway to the rest of the world and the world's gateway to Virginia in commerce and industry, in recreation and culture, and in national security. Now a complex of seven major cities, it is a microcosm of the opportunities and challenges of contemporary urban America. It is also a major center for research and development and a home for extensive scientific and technological activities in marine science, aerospace, ship design and construction, advanced electronics, and nuclear physics.

The university takes its unique character from Hampton Roads as it provides leadership to the state and nation in teaching, research, and service. Thus the university has a special mission for the Commonwealth in commerce, and in international affairs and cultures. It has a significant commitment in science, engineering and technology, particularly in fields of major importance to the region. As a metropolitan institution, the university places particular emphasis upon urban issues, including education and health care, and upon fine and performing arts.

As one of America's major ports, Hampton Roads is the locus of national and international military commands, and the home of a culturally diverse population. The university therefore has natural strengths in activities having international outreach. Faculty members in such fields as business, economics, international studies, geography and the sciences strive to design curricula, teach courses, and encourage foreign exchanges that enhance the university's role as Virginia's international institution.

The Hampton Roads scientific environment provides special opportunities for science and engineering faculty to emphasize research and graduate programs in such fields as marine science, aerospace, and advanced electronics. Global ocean studies and cooperative research at NASA receive particular attention, as university researchers collaborate with U.S. and foreign engineers and scientists.

Urban issues are addressed by programs in public administration, education, the social sciences, and the health professions. The richness of Hampton Roads' artistic life gives great vitality to the university's programs in the visual arts, music, theater, and dance.

Mission Support

Old Dominion University serves the needs of several internal and external constituents with its resources. These include: current and prospective students seeking undergraduate, graduate, and continuing education programs; business and industry; government agencies at all levels; the military; research organizations; and the community at large regionally, state-wide, nationally, and internationally. These constituencies are discussed in greater detail in the following paragraphs.

Old Dominion University offers a wide array of undergraduate programs, all of which meet national standards of excellence. Every Old Dominion undergraduate student follows a general education program that is designed to develop the intellectual skills of critical thinking and problem solving and to encompass the breadth of understanding needed for personal growth and achievement and for responsible citizenship. This general education program places special emphasis upon appreciation of the arts and upon understanding the perspectives of women, minorities, and non Western cultures. Each undergraduate chooses a major program in the liberal arts or sciences or in a technological or professional field.

Old Dominion University's graduate offerings are focused on society's need for advanced professional education and on specialized programs at the master's and doctoral levels for which the institution is prepared through unusual strength of faculty or special geographic advantages. All graduate programs meet national standards of excellence.

As a national leader in the field of technology-delivered distance learning, the university strives to enhance the quality of the educational experience, wherever education is delivered, by applying emerging technologies; it also supports research to explore the impact of these technologies on the teaching-learning process. By utilizing these technologies and by partnering with institutions of higher education, corporations, and governmental entities, the university is able to provide undergraduate and graduate degree programs to students across time and geographic boundaries.

Because of its commitment to Hampton Roads and its emphasis on creative innovation, Old Dominion University offers life long learning opportunities through credit and non credit courses and brings educational services and programs to the people of Hampton Roads at several off campus centers. The university has a responsibility to serve the many members of the military services and their families. The military forms a unique combination of national and international
MPH Faculty Support of Students

Introduction:

As stated in the September 2009 EVMS/ODU MOA, “The mission of the joint Master of Public Health Program at EVMS and ODU hereafter referred to as the “Program” is to train students in order to equip them with vibrant and dynamic public health knowledge and skills for serving health needs of populations, and for improving the public’s health.”

With respect to faculty support of our students, our primary goal is to assist students in their pursuit of successful completion of the academic goals of the program. To achieve that goal, we will provide our students with prompt and courteous support in all aspects of their academic program activity, assist students with understanding their responsibilities, make students aware of available resources, maintain and monitor student progress routinely throughout each term, offer expertise via consultation and objective guidance when needed, and demonstrate professionalism in all interactions with students through encouragement, recognition, communication, and respect.

The MPH Program’s tone for working with students can be expressed with three words:

1. hypomone – diligence, perseverance, being a rock.
2. logizomai – We will treat students with respect, envisioning them in the place we want them to be (and where they want to be) and crediting them now the status of being one of our graduates.
3. vision – We will provide vision for the students. “Where there is no vision the people perish.”

Definitions:

- Faculty Advisor – a member of the faculty who is assigned the responsibility of advising and assisting students through their two year MPH Program.
- Practicum Advisor – a member of the faculty who is responsible for guiding students through their Practicum projects.
- Course Director – a member of the faculty who is responsible for the scheduling and content of a course in the MPH Program. A Course Director may or may not teach the course for which they are the director.
- Teacher – a member of the faculty who is responsible for teaching one or more of the courses in the MPH curriculum
- Preceptor – the person at the site where a student is conducting a Practicum project or Internship who is responsible for approving the project, providing the student guidance, and grading the student’s performance.
- Administrative Support Personnel – members of the MPH Program staff who support the faculty with admissions, student registration, academic tracking, program budgeting and finance, program accreditation, and curriculum design.
Guidelines:

- All Faculty and Administrative Support Personnel
  - Be prompt in responding to communications from students. Phone calls should be returned in less than 24 hours. Emails should be responded to in less than 48 hours.
  - Be professional (courteous and helpful) in all encounters with a student, even if the student is not. We should lead by example.
  - We need to remember that this is an “after work hours” graduate program. Most students are working during the day; therefore we should be available to them during the hours of 4:00 - 6:00PM when possible. Faculty should publish office hours in course announcements for courses they instruct, often in this 4:00 – 6:00 PM window.

- Faculty Advisors
  - As the key individuals to the success of the students in the MPH Program, should feel responsible for students having a successful and rewarding experience at EVMS.
  - Advise the students regarding EVMS procedures and academic requirements.
  - Meet in person with students soon after matriculation. The purpose of the first meeting is to establish rapport with the student and to build a relationship that feels comfortable for the student. The first meeting should cover the student’s background and goals for their academic experience and career.
  - At a minimum, meet with students each Term to discuss their academic progress and determine the courses the students will take during the next Term.
  - Work closely with students having academic or other difficulties.
  - Be a source of information for the student with respect to career opportunities. The Faculty Advisors should educate themselves on where the MPH degree can be utilized, along with information about where recent graduates have been employed. Pertinent handouts and resources should be available in the advisors’ offices.

- Practicum Advisors
  - Role is similar to the Faculty Advisors, except it is only for the period of time the student is involved with their community Practicum.
  - Meet with each student as soon as they are assigned the role of Practicum Advisor. The first meeting should be to establish a rapport with the student and learn about he student’s Practicum project. Make contact with each student’s site preceptor soon after meeting with the student to be sure the preceptor understands the Practicum Advisor’s role and to confirm that the student, the Practicum Advisor and the preceptor understand what is expected of the student and preceptor during the Practicum. Contact the
preceptor periodically throughout the Practicum to ensure the student is meeting the preceptor’s expectations. Notify the preceptor whenever there is a change to the goals, objectives or methods of the student’s project, e.g. IRB directed.

- Responsible for monitoring students’ progress on all assignments and grading the students’ assignments. Ensure timely turnaround of draft assignments and prompt grading of final assignments.
- Attend all presentations made by their students, i.e. proposal and final report presentations.

- Teachers/Professors
  - Advise students of their office hours and the location of their office at EVMS. The MPH Program will provide suitable office space for teachers to meet with students. Office hours should be every week when possible, and for at least 2 hours. In some cases teachers will need to offer special or extended hours for student consultations.
  - Course materials should be posted on Black Board, preferably prior to the start of the course, but no later than three days prior to the class in which the material will be used if possible.
  - Blackboard should be used to record student assignments and for timely posting of student grades.
Constitution of the
Eastern Virginia Medical School and Old Dominion University
Master of Public Health Program

Article I: NAME & PURPOSE

Section B: The purpose of this government shall be to formally represent the members of the Master of Public Health Class to:

Subsection 1: The Administration, Faculty and Staff of Eastern Virginia Medical School and Old Dominion University

Subsection 2: The Eastern Virginia Medical School and Old Dominion University

Subsection 3: Any other organization or person(s) whether they are under the auspices of the Eastern Virginia Medical School or Old Dominion University or not.

Article II: MEMBERSHIP

Any student enrolled at Eastern Virginia Medical School or Old Dominion University in pursuit of the Master of Public Health (MPH) degree as determined by the Eastern Virginia Medical School Registrar may be a member of the organization.

Article III: OFFICERS

Section A: The executive officers of this organization shall include the: President, Vice President, Secretary and Treasurer; hereafter collectively referred to as the Executive Council. In addition, the class shall elect a Social Chair, Yearbook Coordinator, and an Information Technology Representative at Eastern Virginia Medical School who will not be part of the Executive Council. The Executive Council and the Social Chair, Yearbook Coordinator, and Information Technology Representative will be hereafter referred to collectively as the Student Council. All Student Council members are elected to one year terms. All officers of the class shall be members of the class as defined in Article II and must be students attending class on EVMS campus. Student Council members must maintain regular contact with students by being present on campus for classes and meetings.

Section B: The duties of the officers shall be:

Subsection 1: President

a) The President shall set the agenda and determine the order of business for all class meetings except those called for by petition as described in Article IV, Section A.
b) The President shall be the official representative of the class to the administration and staff of
Eastern Virginia Medical School and Old Dominion University, and all other organizations or persons outside the auspices of the class.

   c) The President shall maintain a regular liaison with the Dean, Associate Dean, and the Registrar of the Eastern Virginia Medical School.

d) The President shall convey all complaints, questions, suggestions and directions of the class to the administration. He or she shall keep the class informed of all actions taken by the administration which are of concern to the class.

e) The President shall guide the actions of the other class officers. The President shall ensure that all class representatives properly fulfill their duties.

f) The President shall be a cosigner on class accounts with the Treasurer, unless the Treasurer is unable to fulfill his or her duties and then with the Secretary.

g) The President shall be a member of the Pan Student Council.

h) In the event that the President is temporarily unable to fulfill the responsibilities of his/her office, the Vice President shall assume the duties of the President until such time as the President is again able to resume his or her office. Should the President be permanently unable to fulfill his or her duties, the Vice President shall serve as president pro tempore until such time as an election for President can be held as directed in Article III, Section C of this constitution.

i) The President shall assume the duties of an Honor Council representative and fulfill all the duties of this position.

   1). The President, as the Honor Council Representative, will uphold the EVMS Honor Code.

   2). The President, as the Honor Council Representative, will manage and maintain the integrity of class elections of their respective classes unless the class does not currently have an Executive Council.

   3). The President, as the Honor Council Representative, will act as the contact for their peers to report honor code violations.

   4). The President, as the Honor Council Representative, will attend Honor Council meetings with Honor Council Representatives from other classes.

   5). The Honor Council Representative position will be held by the President of the MPH class until the class is of sufficient size to have an additional representative (1 for every 30 members in the class). The term of the Honor Council Representative will end at the end of the presidential term and will resume at the beginning of the next presidential term.

j) The President shall assume the duties of a Phoenix Committee Representative and fulfill all the duties of this position.

   1). The President, as the Phoenix Committee Representative, shall attend all Phoenix Committee meetings that take place once a month.

   2). The Phoenix Committee Representative position shall be held by the President until the end of the Presidential term and will resume at the beginning of the next Presidential term.

k) The President shall attend all faculty meetings set on the first Thursday of every month.
l) The President shall assume the duties as course representative for each class and serve as the student liaison between the class and the faculty.
m) The President shall be accessible to the class on a daily basis whether by e-mail or in person and shall respond to questions and concerns of the respective class, administration or faculty members in a timely fashion.
n) The Presidential term for the MPH I class shall begin in the fall semester of the first year and end at the end of the spring semester of the first year so that the President may be eligible for running for Pan Student Council Executive Office.
o) The Presidential term for the MPH II class shall begin in the summer semester of the first year and end at the end of the summer semester of the second year.

Subsection 2: Vice President
a) The Vice President shall monitor the actions of the class representatives to the Eastern Virginia Medical School committees, faculty departments, and all other committees. The Vice President shall keep the class properly informed of the committee actions.
b) The Vice President of the MPH II class shall serve as the President pro tempore of the MPH I class until the MPH I class elects its own President as directed by Article III, Section C, of this constitution.
c) The Vice President shall, at the discretion of the President, assist the President in executing the responsibilities of the office of the President.
d) The Vice President shall be the class representative to the Office of Development.
e) The Vice President shall be a member of the Pan Student Council.
f) The Vice President shall join the President at all faculty meetings set on the first Thursday of every month.
g) The Vice President shall put together the big brother/ big sister list before the beginning of the fall semester; pairing up second year students with incoming first year students.
h) The Vice President shall assume the duties of the Human Values in Medicine Representative and represent the class at all such meeting pertaining to the position.
i) The Vice President shall be the leader of community outreach, which includes the Community Gardens project. The Vice President will coordinate trips and act as the liaison between faculty, community and students for community outreach.
j) The Vice President shall be accessible to the class on a daily basis whether by e-mail or in person and shall respond to questions and concerns of the respective class, administration or faculty members in a timely fashion.
k) The Vice Presidential term for the MPH I class shall begin in the fall semester of the first year and end at the end of the spring semester of the first year so that the Vice President may be eligible for running for Pan Student Council Executive Office.
l) The Vice Presidential term for the MPH II class shall begin in the summer semester of the first year and end at the end of the summer semester of the second year.

Subsection 3: Treasurer
a) The Treasurer shall be the holder of the class monies and be responsible for its management.
b) The Treasurer shall keep proper record of income and expenditure, such records being available for examination by any member of the class within 48-72 hours of a written request being submitted to the Treasurer. He or she shall present a report of current financial status and any income or expenditures since the last class meeting on the MPH collegiatelink website.
c) The Treasurer shall direct fundraising activities of the class or designate a fundraising committee. The Treasurer shall oversee principle aspects of any fundraising projects initiated by the class.

d) In the event that the Treasurer is unable to fulfill the responsibilities of his or her office, the Secretary shall assume the duties and responsibilities of the Treasurer until such time as the Treasurer is again able to resume his or her office. During such times, the Secretary will be a cosigner of the class account with the President. Should the Treasurer be permanently unable to fulfill his or her duties, the Secretary shall assume all duties of the Treasurer until such time as an election for Treasurer can be held as directed in Article III, Section C of this Constitution.

e) The Treasurer shall be accessible to the class on a daily basis whether by e-mail or in person and shall respond to questions and concerns of the respective class, administration or faculty members in a timely fashion.

f) The Treasurer term for the MPH I class shall begin in the fall semester of the first year and end at the end of the spring semester of the first year.

Subsection 4: Secretary

a) The Secretary shall keep a written record of the proceedings of each class meeting. The Secretary will make the minutes for the most recent class meeting available within one week of that meeting. He or she shall maintain a file of the minutes of all class meetings and other pertinent papers and make this available upon request to all members of the class. Two paper printouts of said minutes shall be printed. Each copy will be dual signed by the Secretary and the President. One copy shall be maintained by the Secretary and the other by the President.

b) The Secretary shall post prominent notices of forthcoming class meetings upon being informed of such meetings by those empowered under this Constitution to call meetings.

c) The Secretary shall correspond with persons or organizations outside the class when the class or the class president authorizes such contact.

d) The Secretary will maintain logs of class minutes and other items pertinent to the class.

e) In the event that the Secretary is temporarily unable to fulfill the responsibilities of his/her office, the Treasurer shall keep the minutes of the class meeting and assume all other duties of the Secretary until such time as the secretary is again able to resume his or her office. Should the Secretary be permanently unable to fulfill his or her duties, the Treasurer shall assume all duties of the Secretary until such time as an election for the secretary can be held as directed in Article III, Section C of this Constitution.

f) The Secretary is responsible for providing a weekly newsletter to the class about new updates for the respective MPH class, social activities and student organization events.

g) The Secretary shall be accessible to the class on a daily basis whether by e-mail or in person and shall respond to questions and concerns of the respective class, administration or faculty members in a timely fashion.

h) The Secretarial term for the MPH I class shall begin in the fall semester of the first year and end at the end of the spring semester of the first year.

i) The Secretarial term for the MPH II class shall begin in the summer semester of the first year and end at the end of the summer semester of the second year.

Section C: Election of Officers
Subsection 1: Elections
Elections will be run by the class President who is also the Honor Council representative. If the President is not available, representatives from a different class should be approached in the following order and will oversee elections.
- President— of year ahead or behind;
- Secretary— of year ahead or behind;
- Vice President— of year ahead or behind;
- Treasurer— of year ahead or behind;

Should the class not have an Executive Council elected, the Vice President of the class with an Executive Council shall run the elections as stated in Article III, Section B, Subsection 2 in the duties of the Vice President.

Subsection 2: Votes Required for a Successful Election:
All officers and representatives will be elected by a plurality of votes cast. A quorum as described in Article III, Section C, Subsection 4 must be reached. Only class members are allowed to vote.

Subsection 3: Runoff Election
If a direct tie occurs, a runoff election will be held after the initial vote is tabulated within 1 week of the tie between the candidates in the tie.

Subsection 4: Definition of a Quorum
a) During MPH I and MPH II elections, a quorum shall consist of 60% of the class members, including proxies;
   - Proxy votes are defined in Article IV, Section D, Subsection 2.
   - Establishing a quorum in an online election is tabulated by the total number of students voting by the close of the election.

Subsection 5: Speeches
Speeches are required by all candidates if the candidate is running opposed. Speeches are no more than one minute, except the president and vice president whom are allotted two minutes. Question and answer sessions after speeches will be allowed at the discretion of those running the election.

Subsection 6: Dates for Elections
a) MPH class officers will be elected in two different elections. The first election will be for the positions of the Executive Council which includes the President, Vice President, Treasurer, and Secretary. Nominations for both elections will open at the beginning of week one of the first semester, with elections being held on Friday of week 2. Those not elected are able to be nominated for the remaining Student Council positions.
Nominations for the second election which includes the Social Chair, Yearbook Coordinator and Information Technology Representative will be closed on Tuesday of week 3, with elections taking place on Friday of week 4.
   - Elections shall occur no sooner than one week after nominations are made. Nominees shall be
given the opportunity to address the class as mentioned in Subsection 5.
c) Election of the remaining Student Council class officers shall be made by secret ballot. Results 
shall be tabulated by the President who is the Honor Council representative running the election. 
Write in candidates are not valid and will be considered abstentions.

d) MPH II class officer elections shall take place the second to last week of February of the 
Spring Semester prior to the Pan Student Council (PSC) elections. The elected Student Council 
member shall begin their term at the end of the Spring Semester.

Subsection 7: Candidate Eligibility
When a candidate is nominated, he or she must be notified verbally or electronically by the 
persons running the election. He or she must accept the nomination verbally or electronically 
prior to the election.

Subsection 8: Election Results
The names of the candidates who have won the election shall be made public after verification 
by the officers in charge of the election. The numerical tallies for each election shall remain 
confidential. All ballots and data shall be kept by the officers in charge of the election for a 
period of one month after the election date. Any challenges to the validity of the election may 
only be made by class members allowed to vote in the specified election and shall be made to the 
officers in charge of the election within three business days of the election. The officers in 
charge along with the Associate Dean of Student Affairs will resolve challenges.

Subsection 9: Office Nomination Limits
Any eligible student as defined in Article III, Section C, Subsection 7 may accept a nomination 
for only one position, except for those candidates running for either the President or Vice 
President position. A candidate nominated for President or Vice President may also accept one 
other nomination, so long as it is not one of the other aforementioned positions.

Section D: Class Representatives

Subsection 1: Social Chair – 1 representative

Election of the Social Chair shall be run by the President of the respective MPH classes 
a. Social Chair – 1 representative
b. The Social Chair Representative will be responsible for planning social events for the 
respective class throughout the school year.
c. The Social Chair Representative will plan and notify the class and Secretary of upcoming 
  events.
d. The Social Chair Representative will work with a committee of volunteers to plan such events.
e. The Social Chair Representative will be involved with helping the Treasurer organize and plan 
  fundraisers for the class.
f. The Social Chair Representative and his/her committee will meet weekly with each other to 
  discuss upcoming events.
g. The Social Chair Representative will report relevant and appropriate issues to the Executive 
  Council.
h. The Social Chair Representatives of the MPH I and MPH II will be responsible for
coordinating and planning National Public Health Week events. He/she may create a committee of class members to help in the planning and setup.

i. The Social Chair term for the MPH I class shall begin in the fall semester of the first year and end at the end of the spring semester of the first year.

j. The Social Chair term for the MPH II class shall begin in the summer semester of the first year and end at the end of the summer semester of the second year.

Subsection 2: Yearbook Coordinator
Election of the Yearbook Coordinator shall be run by the President of the respective MPH classes

a. Yearbook Coordinator – 1 representative
b. The Yearbook Coordinator shall be responsible for putting together the respective MPH class portions of the yearbook.
c. The Yearbook Coordinator shall be responsible for representing all students in the program in the yearbook.
d. The Yearbook Coordinator will work with a committee of volunteers to plan and design his/her respective class’ MPH yearbook pages.
e. The Yearbook Coordinator will report relevant and appropriate issues to the Executive Council.
f. The Yearbook Coordinator term for the MPH I class shall begin in the fall semester of the first year and end at the end of the spring semester of the first year.
g. The Yearbook Coordinator term for the MPH II class shall begin in the summer semester of the first year and end at the end of the summer semester of the second year.

Subsection 3: Information Technology Representative
Election of the Information Technology Representative shall be run by the President of the respective MPH classes

a. Information Technology – 1 representative
b. The Information Technology Representative will attend to student suggestions and complaints regarding the school’s information technology services.
c. The Information Technology Representative will work with the EVMS Academic Computing Center to address and resolve students’ needs.
d. The Information Technology Representative will research and implement IT tools and resources that are beneficial to student learning.
e. The Information Technology Representative will attend Student Council meetings and report on relevant and appropriate issues.
f. The information technologies representative will serve under the direct guidance of the Pan Student Council Student Director of Information Technologies.
g. The Information Technology Representative term for the MPH I class shall begin in the fall semester of the first year and end at the end of the spring semester of the first year.
h. The Information Technology Representative term for the MPH II class shall begin in the summer semester of the first year and end at the end of the summer semester of the second year.

Section E: Office Vacancies

Should an office remain vacant after elections due to lack of valid nominations, the office shall
remain vacant until such time as a valid nomination is offered. If less than 3 months remain in
the term of office, no nominations shall be accepted. On motion of the class council, the class
shall be notified of intent to fill the vacant position. A period of 1 week shall be allowed for any
further nominations to be offered. Within 2 weeks of the close of nominations a secret ballot
shall be held as per Article III, Section C, Subsections 1 and 2 of this Constitution and the class
notified of the newly elected official. If the election is uncontested the nominee shall be
considered elected in the vacant position and the class notified. The newly elected official shall
serve only for the remaining duration of the position's term of office

Section F: Resignation of Office

A class representative may resign their position at anytime. The Executive Council, as delineated
in Article III: Section A, will appoint an interim replacement from the MPH class. A permanent
replacement will be elected during the next regularly scheduled election.

Article IV: MEETINGS

All meetings are joint meetings of both the MPH1 and MPH II Executive Councils, Student
Councils, or the entire MPH Program, whatever the case may be.

Section A: Meetings may be called by:

Subsection 1: The President of the MPHI or MPHII classes

Subsection 2: Petition if at least 15% of the class members in a petition stating a list of reasons
for calling a meeting, and they present that petition to the class President. The President shall call
the requested meeting within five business days of receipt of said petition unless both the
President and the writer(s) of the petition agree upon a later date.

Section B: Quorum requirements

A quorum of class representatives, defined in Article III, Section C, Subsection 4, must be
present in order to conduct business of the class. The Secretary will be charged with tallying the
number of students present if a quorum is needed. If the Secretary is not present, the Vice
President and Treasurer shall fill in for this duty.

Section C: Meetings

The MPH I and MPH II Executive Councils shall meet together twice a month to coordinate
MPH Program activities. The Student Council of both classes shall meet together at least once a
semester and more often as necessary.

Section D: Order of business

The suggested order of business shall be:

a) Call to order
b) Approval of minutes posted by the Secretary
c) Treasurer’s report
d) Old business
Section E: Rules for running a meeting

Subsection 1:
All class meetings should be conducted in accordance with Robert’s Rules of Order. In the event that this Constitution and Robert’s Rules of Order conflict, this Constitution shall take precedence.

Subsection 2: Proxy Votes

a) Members who will knowingly be absent from a class meeting may designate another member of the same class to be their proxy for voting purposes. They may entrust the proxy to vote in a specific manner or they may allow the proxy to vote his/her conscience. The proxy must be in writing, specifying the name of the absent member, the name of the proxy, the meeting in question and how the proxy is to vote. A class member may hold more than one proxy position and does not lose his or her own vote when acting as a proxy. In the case of an election, a proxy vote may be given to the Honor Council Representative before the said election with the aforementioned specificities.

b) Members who will knowingly be absent from an election or class meeting and do not designate a proxy will forfeit their voting position for that election or meeting.

Subsection 3: A class meeting shall be advertised by the Secretary 48 hours prior to the meeting. This formality may be suspended and a meeting may be called at any time with sufficient notice at the discretion of the President who called the meeting.

Subsection 4: Attendance at class meetings is mandatory for all class representatives, unless excused by a member of the Executive Council. Requests to be excused should be submitted to the class Secretary no later than 24 hours prior to a scheduled meeting.

Article V: COMMITTEES

Section A: The President of the MPH II class may appoint standing or temporary committees to fulfill such duties as deemed necessary by the President. Said committees shall stand only to the end of the academic year in which they were appointed; they may be terminated at any time prior to this date if so ordered by the President.

Article VI: FUNDRAISING

Section A:

Any fundraising activities proposed to benefit the MPH class shall be subject to approval by the Executive Council and the Office of Development via the Student Affairs Office. The MPH class
shall not accept any monies raised by a non-sanctioned fundraiser, unless approved by the Executive Council. Once endorsed by the Executive Council, a fundraising committee led by the Social Chair shall be formed and financially supported in order to perform the activity. Endorsement shall be granted by a majority vote during a class officers’ meeting.

Section B:

An endorsed fundraiser will be financially supported by the MPH Program only if proper receipt documentation is provided by the fundraising committee. Receipts must be itemized and clearly represent items necessary for completion of the fundraiser.

Article VII: AMENDMENTS

Section A:

This Constitution may be amended. Any member of the MPH Program as defined in Article II may propose an amendment. The amendment must be submitted in writing to the Secretary of the respective class. Should the Executive Councils of the MPH I and MPH II classes approve the amendment with a simple majority vote, the amendment shall be submitted to the entire class in writing. This submission should occur within two weeks of the amendments passage by the said committee. The class will vote upon the proposed amendment no sooner than three days and no later than fourteen days after its submission to the class. The vote shall be by secret ballot, and supervised according to Article III, Section C, Subsections 1 and 2 of this constitution.

Section B:

The Executive Council, consisting of the President, Vice President, Secretary, and Treasurer will resolve any issues not addressed in this Constitution.

Article VIII: RATIFICATION OF THE CONSTITUTION

The MPH I and MPH II Executive Councils, as delineated in Article III: Section A, shall draft a Program Constitution or adopt the already existing Constitution. The Executive Council of the MPH I and MPH II classes shall approve the Constitution with a simple majority vote and the Constitution shall then be submitted to the entire class via electronic format. The class will vote upon the proposed Constitution no sooner than three business days and no later than ten business days after its submission to the class. Ratification of the Constitution shall require a simple majority vote of the students in the MPH program. A quorum as described in Article III, Section C, Subsection 4 must be reached. The vote may be held electronically via the student portal, and supervised according to Article III, Section C, Subsections 1 and 2 of this Constitution.

Article IX: IMPEACHMENT AND REMOVAL

Section A: If a Student Council officer fails to execute the duties of their position as enumerated in the Constitution, that officer is subject to impeachment and removal.
Section B: Requirement of Written Notice. Pursuant to Article III, Section B, Subsection 1, the President of the respective class will provide the officer in question with written notice of their failure to properly fulfill their duties and offer them an opportunity for improvement. In the event that the officer in question is the President, written notice will be provided by the Vice President of the respective class. Following two written notices, the President or Vice-President can bring a motion to impeach.

Section C: Pursuant to Article IV, Section A, Subsection 1, 15% of students may submit a petition of complaint to the President unless the petition is regarding the President in which case it will be submitted to the respective Vice President.

Section D: For the purposes of impeachment and removal, a quorum is defined as eighty percent of the respective Student Council members or eighty percent of the respective MPH class members.

Section E: A motion to impeach includes a statement describing how the officer in question failed to execute their duties and documentation of the two required notices. The officer in question will be allotted reasonable time to reply to the motion.

Section F: A two-thirds vote of the respective Student Council members present is required for impeachment. If after two attempts of meeting for an impeachment vote and quorum is not met, a two-thirds vote of the respective MPH class will result in impeachment.

Section G: A vote for removal will take place one week after the impeachment vote. A two-thirds vote of the respective MPH class will result in removal. A replacement will be selected by the process described in the Constitution for that position.

Section H: The removed officer is not eligible for reelection.

Section I: If a Student Council officer is accused of an Honor Code violation, the officer must temporarily step down from their position until a decision is made by the Honor Council through the methods detailed in the Honor Code. If the Student Council officer is not convicted of an Honor Code violation, the officer can resume their position. If the Student Council officer is convicted of an Honor Code violation, the officer must immediately resign from their position. Honor Council officers are responsible for enforcing the resignation in a confidential manner. A replacement will be selected by the process described in the Constitution for that position.

Section J: Honor Council members are subject to the disciplinary procedure in the EVMS Honor Code.
EASTERN VIRGINIA MEDICAL SCHOOL
HEALTH PROFESSIONS ALUMNI ASSOCIATION
BY-LAWS

Adopted June 17th, 2008
ARTICLE I
NAME, LOCATION, & MISSION

SECTION 1: Name & Location - The name of this organization shall be the Eastern Virginia Medical School Health Professions Alumni Association (the “Association”). The principle address of the Association shall be c/o Office of Alumni Relations, P.O. Box 1980, Norfolk, VA 23501-1980.

SECTION 2: Mission - The mission of the Association is to strengthen the relationship between Eastern Virginia Medical School (“EVMS”) and its alumni and to encourage and promote improved educational enterprises, programs and services for the EVMS Health Professions Programs.

ARTICLE II
AUTHORITY OF THE ASSOCIATION

SECTION 1: Under EVMS Authority - The Association shall operate under the authority of EVMS through the Office of Alumni Relations. The Association shall be recognized as the parent organization of any chapter. Chapters are any group established under the authority of the Association and may include, but are not limited to, regional and local alumni clubs and special interest alumni associations.

SECTION 2: Incorporation and Tax Status - Neither the Association nor any of its chapters shall seek or may be granted separate incorporation status or separate tax-exempt status.

ARTICLE III
MEMBERSHIP

SECTION 1: Membership - Membership is open to any graduate of EVMS’ Health Professions Programs and/or graduate of a shared degree/certificate health profession program sponsored by EVMS (“General Members”)

SECTION 2: Dues - Dues will not be collected from members.

ARTICLE IV
BOARD OF TRUSTEES

SECTION 1: General Powers & Duties - The Association shall be managed by the Board of Trustees (the “Board”) whose primary responsibility shall be to represent the Association, establish policies and procedures to govern the Association and its chapters, and to ensure the timely and effective functioning of the Association.

SECTION 2: Trustees; Number - The Board shall consist of not less than ten nor more than fifteen Trustees, as shall be fixed by resolution of the Board from time to time. Trustees need not be residents of the Commonwealth of Virginia. The Board shall include the Officers of the Association, the President of each Health Professions Academic Program, and up to six members at large (“At Large Trustees”).

SECTION 3: At Large Trustees
A. One-half of the At Large Trustees shall be elected on alternate years.

B. At Large Trustees shall hold office for a term of two years, and there shall be no limit on the number of non-consecutive terms that may be served. Unless having resigned or been removed, each At Large Trustee shall hold office until his successor has been duly elected and has taken office.

C. The Nominating Committee will issue a call for nominations to the General Members for At Large Trustees vacancies no later than sixty days prior to the Annual Meeting. Any potential nominee must submit 1) a biography or curriculum vitae of the nominee; 2) the signed consent or other confirmation by the nominee to enter the election; and 3) a statement of why the nominee desires to serve on the Board. The Nominating Committee will submit the list of candidates who supplied the above information for approval to the Board. Thereafter and no less than 30 days prior to the Annual Meeting, the Nominating Committee will announce the slate of At Large Trustee nominations to the General Members, along with a biography/curriculum vitae of each nominee on the Association Website.

D. General Members shall be entitled to vote for the vacant At Large Trustees either in person at the annual meeting or prior to the Annual Meeting on the Association Website. Each General Member shall be entitled to cast one vote. The results of the election shall be announced at the Annual Meeting and the newly elected Trustees shall assume office on the first regular meeting of the Board following the Annual Meeting.

E. If in any election for At Large Trustees, the number of vacancies for At Large Trustees equals the number of nominees, the nominees shall be deemed automatically elected effective the date of the Annual Meeting of the Association and will assume office on the first regular meeting of the Board following the Annual Meeting.

SECTION 4: Regular Board Meetings - There shall be regular, quarterly meetings of the Board at a day and time to be determined by the President with at least ten (10) days’ prior written notice via regular or electronic mail of the meeting and the proposed agenda, to be mailed to each Trustee.

SECTION 5: Special Meetings - Special meetings of the Board may be called at the request of the President or upon written request of not less than a majority of the then serving Trustees. The persons authorized to call special meetings may fix the time and place for said meeting with at least five (5) days’ prior written notice via regular or electronic mail specifying the purpose of the special meeting to each Board member.

SECTION 6: Attendance - Trustees will be required to attend a minimum of two meetings a year.

SECTION 7: Quorum - At all meetings of the Board, one-third of the Trustees shall constitute a quorum for the purpose of transacting business, but any number less than a quorum at a meeting may adjourn the meeting from time to time until a quorum is present.

SECTION 8: Majority - With the exception of changes to the By-Laws, the act of a majority of the Trustees present at a meeting in which a quorum is present, shall be the act of the Board.
SECTION 9: Resignation, Removal of Trustees - Notice of resignation by any Trustee shall be made in writing or electronic mail to the Board. If any Trustee fails to fulfill his/her duties, he/she may be removed from the Board at any time with a majority vote of the Board. Vacancies on the Board may be filled by the President, with the approval of the remaining Trustees at any meeting, to serve the unexpired term(s).

SECTION 10: Compensation - Trustees shall not receive any salaries or compensation for their services on the Board.

ARTICLE V
OFFICERS OF THE ASSOCIATION

SECTION 1: Officers & Duties of Officers - The Officers of the Association shall be:

A. President. The President shall supervise the affairs of the Association under the direction of the Board. The President shall:
   i. Serve as chairperson of the Executive Committee, and may serve as an ex-officio member of any committees of the Association;
   ii. Preside at all meetings of the Board and the Association and will be the principle representative of and spokesperson for the Association;
   iii. Appoint a Nominating Committee and any ad hoc committee(s) as needed; and
   iv. Be present at and participate in official functions of EVMS, including Graduation Banquets and Graduation Day.

B. President-Elect. A General Member, once elected by the Association for the position of President, shall first serve a term as President-Elect, which term shall become effective upon the current President-Elect taking office as President. The President Elect shall:
   i. Serve as Vice Chairperson of the Executive Committee;
   ii. In the absence of the President, shall preside and perform all of the duties of the President; and
   iii. In the event of the President’s resignation, removal, or death, the President-Elect shall succeed to that office for the remaining unexpired term of such President, in addition to the term of President for which the President-Elect was selected.

C. Past President. The Past President shall be the most recent President to have served to the end of his or her term. The Past President shall serve on, and act as Chairperson of, the Nominating Committee.
Appendix T

D. Executive Director. The EVMS Director of Alumni Relations shall serve as the Executive Director of the Association, concurrent with his or her employment as Director of Alumni Relations, and can neither be appointed nor removed by the Board. Should the position of Director of Alumni Relations be vacant, the Vice President for External Affairs may appoint an individual to serve as Interim Executive Director until the vacancy is filled. The Executive Director shall, at a minimum:

i. Be the chief administrative officer of the Association and will manage, coordinate and oversee the day to day functions of the Association.

ii. Set the agenda for meetings of the Board with input from the President.

iii. Attend all meetings of the Board and will serve as an ex-officio member of the Board, all committees of the Association, and Executive Committee, without voting privileges and shall not constitute a part of the quorum.

SECTION 2: Nomination and Election of President

A. With the exception of the first year of the Association’s existence, the Nominating Committee will issue a call for presidential candidate nominations to the General Members no later than the last meeting of a sitting President’s elected term and which shall be no less two years prior to the when the presidential candidate will take office. Any potential nominee must submit 1) a biography or curriculum vitae of the nominee; 2) the signed consent or other confirmation of the nominee to enter the election; and 3) a statement of why the nominee desires to serve as President. The Nominating Committee will submit the list of candidates who supplied the above information for approval to the Board. Thereafter and no less than 30 days prior to the Annual Meeting, the Nominating Committee will announce the slate of Presidential nominees to the General Members, along with a biography/curriculum vitae of each nominee on the Association Website.

B. General Members shall be entitled to vote for President either in person at the annual meeting or prior to the Annual Meeting on the Association Website. Each General Member shall be entitled to cast one vote. The results of the election shall be announced at the Annual Meeting and the newly elected President shall assume the position of President-Elect effective as of the date the then current President-Elect takes office as President.

C. If in any election for President, there is only one nominee, that nominee shall be deemed unopposed and automatically elected effective the date of the Annual Meeting of the Association and shall assume the position of President-Elect effective as of the date the then current President-Elect takes office as President.

SECTION 3: Terms of Office

A. Except as otherwise provided herein, Officers shall serve two-year terms with each term to commence on the first regular Board meeting date after the Annual Meeting of the Association. There shall be no limit on the number of non-consecutive terms that an Officer may serve.
Unless removed, each officer shall hold office until his successor has been duly elected and/or has taken office.

SECTION 4: Resignation and Removal of an Officer – Unless otherwise stated herein, if any Officer fails to fulfill the responsibilities of that office, he/she may be removed from office at any time by a majority vote of the Board. With the exception of the President, a vacant unexpired term may be filled by an Interim Officer who shall be nominated by the Nominating Committee and subsequently elected by a two-thirds vote of the Board. Such Interim Officer will serve until such time as the requisite elections can be held to fill the vacant office.

ARTICLE VI
EX-OFFICIO MEMBERS

The EVMS Associate Dean for Health Professions and EVMS Associate Dean for Student Affairs shall serve as ex-officio members of the Board and Executive Committee and shall not have a vote in Board matters.

ARTICLE VII
ANNUAL MEETING

The Association shall hold the annual meeting of the Association (“Annual Meeting”), at such time and place as selected by Board with at least fifteen (15) days’ prior written notice, via regular or electronic mail, of the meeting and the proposed agenda to be mailed to each General Member and Trustees. The election of At Large Trustees and the President shall be concluded and announced at the Annual Meeting. One of the regular meetings of the Board will also be in conjunction with the Annual Meeting.

ARTICLE VIII
COMMITTEES

SECTION 1: The Nominating Committee

A. There shall be a Nominating Committee composed of three members: 1) the Past President; 2) a non-officer member of the Board; and 3) a General Member who is not a Board member. In the absence of a Past President, the President will act as Chairperson of the Nominating Committee. The second and third members shall be appointed by the President. It shall be the duty of the Nominating Committee to call for nominees for At Large Trustees vacancies and the position of President.

B. In the Association’s first year of existence, the original members of the Alumni Steering Committee will act as the Interim Nominating Committee (the “INC”) as follows:

i. The INC will call for nominees for At Large Trustees, the 2008-2010 President and the 2010-2012 President (who, upon election, shall be the President-Elect) no less than sixty days prior to the Annual Meeting. Any
potential nominee must submit 1) a biography or curriculum vitae of the nominee; 2) the signed consent or other confirmation of the nominee to enter the election; and 3) a statement of why the nominee desires to serve as an At Large Trustee or President. The INC will submit the list of candidates who supplied the above information for approval to the Board. Thereafter and no less than 30 days prior to the Annual Meeting, the INC will announce the slate of At Large Trustees and Presidential nominees to the General Members, along with a biography/curriculum vitae of each nominee on the Association Website.

ii. General Members shall be entitled to vote for At Large Trustees and the President either in person at the annual meeting or prior to the Annual Meeting on the Association Website. Each General Member shall be entitled to cast one vote. The results of the election shall be announced at the Annual Meeting and the newly elected At Large Trustees and the 2008-2010 President shall assume their respective office effective the date of the Annual Meeting. The 2010-2012 President shall assume the office of President-Elect effective the date of the Annual Meeting.

SECTION 2: Executive Committee – The Executive Committee shall be composed of the Officers of the Association. The Executive Committee shall meet at the call of the President and have the authority to act on matters between regular meetings of the Board with such action to be reported to the Board at the next regular Board meeting. The President may call an Executive Committee meeting with two (2) days’ prior written notice. The agenda is to be sent to all Trustees of the Board and minutes of the Executive Committee meetings shall be distributed at the next regular meeting of the Board.

SECTION 3: Ad Hoc Committees - The President shall appoint, with the approval of the Board, any additional standing and ad hoc committees that the Board deems appropriate and shall meet as deemed necessary by the chair of the committee. When a new committee is appointed, the duties and objectives of said committee shall be created by the Board.

ARTICLE IX
ROBERTS RULE OF ORDER

The rules contained in the current edition of Robert’s Rule of Order Newly Revised shall govern in all cases to which they are applicable and to such end that they are not inconsistent with these By-Laws or any special rules of order that may be adopted by the Association or the Board.

ARTICLE X
AMENDMENTS TO BYLAWS

In order for these By-Laws to be repealed, revised, or amended, in whole or in part, at least 50% of the Board must be present to constitute a quorum. For any Bylaws changes, a minimum two-thirds vote of those Board members present is required, provided that the amendment has been
submitted to the Board members in writing via regular or electronic mail at least ten (10) days prior to the meeting.
Appendix U

<table>
<thead>
<tr>
<th>EXECUTIVE OVERSIGHT</th>
<th>ACADEMIC PROGRESS</th>
<th>CURRICULUM</th>
<th>PROGRAM EVALUATION &amp; ACCREDITATION</th>
<th>RECRUITMENT &amp; ADMISSIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>The committee will meet twice annually, in August and March and then as needed during the remainder of the academic year.</td>
<td>The Committee will meet as needed during regular weekly faculty meetings.</td>
<td>The committee will meet at the end of each term (three times a year) and as needed during the academic year.</td>
<td>The Committee will meet twice annually, and then as needed during the remainder of the academic year.</td>
<td>The committee will meet twice annually, at the end of the first term (Fall Term) and at the start of the third term (Summer Term).</td>
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</tbody>
</table>

| C. Donald Combs [Chair] (EVMS) | David Matson [Chair] (EVMS) | David Matson [Chair] (EVMS) | Ben Dobrin [co-Chair] (EVMS-ODU) | Kay Cherry [Chair] (EVMS) |
| Dr. Deanne Shuman (ODU) | Jim English (ODU) | Richard Harris (EVMS) | David Matson [co-Chair] (EVMS) | David Matson (EVMS) |
| Demetria Lindsay (VDH) | Jim Neff (ODU) | Christine Matson (EVMS) | Kay Cherry (EVMS) | Jim English (ODU) |
| David Matson (EVMS) | Charlene Brassington (ODU) | David Trump (VDH) | Yueqin Zhao (EVMS) | Anna Jeng (ODU) |
| Jim English (ODU) | Anna Jeng (ODU) | Richard Benjami (ODU) | Nancy Welch (VDH) | Holly Gaff (ODU) |
| Mariana Szklo (ODU) | Jim English (ODU) | Paula Swartz (EVMS) | Jeff Johnson (EVMS) | |
| Kay Cherry (EVMS) | Jim Neff (ODU) | Hind Baydoun (EVMS) | Rick Vroman (EVMS) | |
| Harry Zhang (ODU) | Charlene Brassington (ODU) | Jeffrey Johnson (EVMS) | Dr. Venita Newby-Owens (VDH) | |
| Yueqin Zhao (EVMS) | Yueqin Zhao (EVMS) | | Rose Mwayungu (EVMS) | |
| Hind Baydoun (EVMS) | Kay Cherry (EVMS) | | | |
| Clint Crews (EVMS) | Clint Crews (EVMS) | | | |
| Rick Vroman (EVMS) | Leslie Lipscomb (EVMS) | | | |
Eastern Virginia Medical School
Old Dominion University
Graduate Program in Public Health

THE COMMUNITY PRACTICUM

MPH-767 Introduction to Public Health Project Methods

MPH-768A/B: Community Practicum

2010-2011
The Community Practicum Manual

Citation Information

Permission is not required to reference this Manual; however, we would be interested in knowing by whom and for what purpose the information has been used. Please utilize the following reference, when referring the Practicum Manual.

*The Community Practicum Manual.* Kay Cherry, Assistant Professor, and Program Faculty, 1st to 7th editions, 2002-2008; Richard Vroman, Assistant Professor, and Program Faculty, 8th and 9th edition, 2010. Graduate Program in Public Health, Eastern Virginia Medical School, Norfolk, Virginia.
## TABLE OF CONTENTS

<table>
<thead>
<tr>
<th>SUBJECT</th>
<th>PAGE</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Section 1:</strong> Introduction</td>
<td>1</td>
</tr>
<tr>
<td><strong>Section 2:</strong> Practicum Requirements by Term</td>
<td>4</td>
</tr>
<tr>
<td><strong>Section 3:</strong> Practicum Components</td>
<td>5</td>
</tr>
<tr>
<td>A. CITI Training</td>
<td>5</td>
</tr>
<tr>
<td>B. Annotated Bibliography</td>
<td>5</td>
</tr>
<tr>
<td>C. Proposal</td>
<td>6</td>
</tr>
<tr>
<td>D. Institutional Review Board (IRB)</td>
<td>10</td>
</tr>
<tr>
<td>E. Portfolio</td>
<td>12</td>
</tr>
<tr>
<td>F. Final Paper</td>
<td>14</td>
</tr>
<tr>
<td>G. Platform Presentation</td>
<td>16</td>
</tr>
<tr>
<td>H. Evaluation of Peer Presentations</td>
<td>17</td>
</tr>
<tr>
<td>I. Evaluation by Site Preceptor</td>
<td>17</td>
</tr>
<tr>
<td>J. Evaluation of Site by the Student</td>
<td>17</td>
</tr>
<tr>
<td>K. Presentation of Project to APHA</td>
<td>17</td>
</tr>
<tr>
<td><strong>Section 4:</strong> Resources</td>
<td>18</td>
</tr>
<tr>
<td><strong>Section 5:</strong> Competencies</td>
<td>19</td>
</tr>
<tr>
<td>References</td>
<td>21</td>
</tr>
</tbody>
</table>
TABLE OF CONTENTS (cont’d)

FORMS

Practicum Student Competency Self-Assessment
Practicum Proposal Cover Sheet
Portfolio Entry for Meetings with Preceptor or Advisor
Student Evaluation of Practicum Site and Project
Preceptor Evaluation of Master of Public Health Student
Faculty – Student Evaluation of Platform Presentations

Note: The Practicum Manual is a guide and a resource for students; it is not an agreement or contract. The MPH faculty may determine that some revisions are necessary during the course sequence
Section 1:
Introduction

The Community Practicum will provide the opportunity to apply concepts learned in MPH Program courses in a real work environment, under the supervision of a Preceptor. The Practicum will be a hypothesis-based research project, a management project(s), or a combination of both. The Practicum experience has been designed as a three-term sequence of courses; however, if the student desires, and if the Practicum Advisor, Preceptor and Practicum Course Director concur, a fourth term may be included. The Practicum has been designed to foster a mastery of the knowledge, skills and abilities related to certain public health competencies. Those competencies are outlined in Section 5 of this Manual.

(Note: The Manual frequently utilizes the term “project” to indicate the entire Practicum experience for both the hypothesis-based project and the management project. Greater specificity is provided where required.)

PRIMARY LEARNING OBJECTIVES:

- Identify a specific public health problem to be researched or project(s) to be accomplished that meets Practicum criteria;
- Conduct a literature review to develop an understanding of the topic or project(s) to be researched or addressed;
- Write a proposal focused on the identified public health research or management project(s);
- Make an oral presentation of the proposal in class;
- Apply and integrate concepts, methods, and skills acquired in MPH courses in addressing the health problem or the identified project(s);
- Apply critical thinking and creativity to the project;
- Participate as a team member in a public health work environment;
- Prepare a written report in the form of a publishable article describing the results of the project(s);
- Make an oral presentation of the project to colleagues.
Appendix V

COURSE COMPETENCIES

Course competencies are contained in the Forms Section. Students are expected to fill out a competency form at the beginning of Practicum and at the end of each term, indicating their mastery of the competencies. The forms should be filed in the student’s portfolio. At the end of practicum there will be four completed forms in their portfolio...one from the start of MPH 767, one from the end of MPH 767, and one from the end of both Practicum A and B.

ROLES

It is very important that the student understand his/her responsibilities and the role of the Site Preceptor, Practicum Advisor and Practicum Instructor.

Student Responsibilities:
- Develop a proposal for the project to be accomplished
- Present the proposal to their Practicum Advisor and Site Preceptor for approval
- Complete the project within the timeline developed by the student and approved by the Practicum Advisor and Site Preceptor
- Keep the Practicum Advisor and Site Preceptor advised as to the status of their project
- Seek assistance from their Practicum Advisor and Site Preceptor when required

Site Preceptor Role:
- Define the project to be completed, including the final work product and desired timeframe for completion
- Provide guidance to the student throughout the execution of the project
- Evaluate the student’s performance at the end of Practicum A and B

Practicum Advisor Role:
- Assist the Site Preceptor in defining the project to be accomplished
- Monitor the student’s performance throughout the project execution
- Periodically contact the Site Preceptor to discuss the student’s performance and discuss any necessary changes to the student’s project
- Grade all assignments and post grades to Black Board

Practicum Instructor
- Define the Practicum requirements
- Train students so they may execute all Practicum assignments
- Assist the Site Preceptor and Practicum Advisor in defining the project to be accomplished
- Provide guidance to the student, Site Preceptor and Practicum Advisor throughout the project execution
- Coordinate with the Practicum Advisors all matters related to the Practicum
Appendix V

GENERAL REQUIREMENTS FOR SITES AND PROJECTS

PRACTICUM SITE QUALIFICATIONS: To qualify for a Practicum project, a site must be willing to do the following:

- Sign a formal Affiliation Agreement with the MPH Program;
- Designate a Preceptor who will provide guidance to the student, meet regularly with the student, and provide feedback on student performance;
- Identify a project(s) that meets the criteria for the Practicum.

PROJECT QUALIFICATIONS: The MPH Program provides a list of suitable projects; however, a student may also find a project of special interest and request program approval. To qualify for the Practicum, a project must meet the following:

1. Relate to the student’s specialty track;
2. Require the student to demonstrate knowledge and skills gained from MPH courses;
3. Permit the student to blend theory and practice in depth;
4. Permit the student to work as a member of a work team;
5. Have a specific timeline that will allow the student to accomplish the project within the timeframe of the Practicum;
6. Encompass work that has been requested by, and will be useful to, the site.

It is possible for a student to satisfy the Practicum requirements at the student’s place of employment if the project and the site meet all the criteria stated above and the work is outside the scope of the student’s normal job responsibilities and work hours. It is not acceptable for a student to earn Practicum credit for doing his or her usual job.
Section 2: Practicum Deliverables by Term

**MPH 767 – Introduction to Public Health Project Methods:**
1. Human Subjects Protection (CITI) training certificate
2. Annotated bibliography
3. Proposal - Part 1 - Introduction and Background (Draft and Final)
4. Proposal - Part 2 – Purpose of the Project (Draft and Final)
5. Proposal – Part 3 - Methods (Draft)
6. Begin Application for Institutional Review Board (IRB) approval of project, if required
7. Portfolio

**MPH 768A – Practicum A**
1. Proposal Part 3 – Methods (Final)
2. Proposal Part 4 – Project Evaluation Plan (Draft and Final)
3. Proposal presentation
4. Institutional Review Board (IRB) package
5. Portfolio

**MPH 768B – Practicum B**
1. Final paper (publishable article)
2. Project Presentation
3. APHA abstract submission (optional)
4. Portfolio

(Note: If the student has Program Director approval for a 4-term Practicum, the final paper and presentation will be interim work products and should reflect the status of the project at that time.)

**MPH 795 - Research Project** (elective for extended Practicum project)

1. Same work products as Practicum B
Appendix V

Section 3:
Practicum Components

A. HUMAN SUBJECT PROTECTION (CITI) TRAINING

INSTRUCTIONS FOR WEB-BASED TRAINING:

1. Take the CITI BASIC training course for Group 2, Social and Behavioral Research Investigators and Key Personnel, using the CITI website. The CITI Website is best viewed using Internet Explorer.

   Go to: https://www.citiprogram.org/default.asp

   The training takes 6 to 8 hours, but does not have to be done in one session. Complete the training and print the certificate when you have completed the tests.

2. Place a copy of the certificate on Black Board under the assignment “CITI Training”, and in your portfolio.

B. ANNOTATED BIBLIOGRAPHY (AMA CITATION)

ANNOTATED BIBLIOGRAPHY

Once you have defined a project, you will make a search of peer reviewed literature, and identify at least 3 articles for an annotated bibliography. (The final reference section of your paper will include additional peer reviewed and non-peer reviewed articles.)

You may develop the annotated bibliography as a synthesized summary of the source articles or as a discussion of each article. In either case, the bibliography must include:

1. The article citation, using the AMA citation format;
2. A concise summary of the relevant information in the article;
3. A concluding observation regarding how, or if, the article was helpful.

These articles will assist you in becoming conversant with the vocabulary and concepts utilized by professionals in the field. These articles will provide the basis for Part 1 of your proposal, Introduction and Background, help you define the purpose of your project, and frame primary question(s) or develop a hypothesis.
Appendix V

AMA CITATION STYLE

The American Journal of Public Health and biomedical journals utilize the American Medical Association/AMA Citation Style for references. The source publication is the American Medical Association Manual of Style: A Guide for Authors and Editors. 10th ed. Cheryl Iverson (Chair), [et al]. Baltimore: Williams & Wilkins; 2007.2

Tables and figures utilized in the proposal and final paper must also conform to the citation style. Refer to the Journal of the American Medical Association for examples.

There are numerous Web sources for this style, including the following:

- The Index Medicus contains the list of abbreviations for journal titles http://www2.bg.am.poznan.pl/czasopisma/medicus.php?lang=eng3
- Long Island University: http://www.liu.edu/cwis/cwp/library/workshop/citama.htm4
- University of Washington: http://healthlinks.washington.edu/hsl/styleguides/ama.html5
- University of Evansville: http://libraries.evansville.edu/style/ama.html6

C. PROPOSAL

Developing the proposal is an iterative process. Students will prepare and the Practicum Advisor will review, a draft and a final document for each of the four parts of the proposal.

You may want to utilize the expertise of the English tutor while writing the proposal and related assignments. Practicum faculty will assign you to meet with the tutor during the course as required. You may also seek tutorial assistance without faculty involvement.

Drafts must be easily readable by the Practicum Advisor. If there are numerous grammatical, typographical, spelling, punctuation or other errors, the Practicum Advisor may refuse to review the draft until the student provides a readable version.

PART 1: INTRODUCTION AND BACKGROUND

This section should be approximately 3 pages in length, summarizing the 3 peer reviewed articles, and at least 3 other sources to support the proposal. You will utilize literature
Appendix V

sources to identify the issue, provide background information, and explain why the issue itself is important. You will synthesize what is published in the professional literature concerning the issue, and why it is important to the project.

The student must have a clear understanding of what constitutes the project topic. For example, a student may be conducting their project in an organization that provides cancer support to patients; however the actual topic might be managing a not-for-profit organization, or recruitment of volunteers. The research should be primarily on the topic, not just the organization where the work is being done.

Early in Part 1 include a clearly written statement about the purpose of the project or the hypothesis being tested. This should not be a discussion of what is presented in Part 2 (Purpose), but a statement to provide a bridge to Part 2. Be sure to include your bibliography.

PART 2: PURPOSE OF THE PROJECT

In this section, you will state the primary goal of the project and discuss why this project is needed by the site. You must describe precisely what the work product is to be that you will develop and produce. You will describe the population the organization serves, the population a project addresses (if different from that the organization serves), and who the project will benefit. You will state a primary question, any secondary questions, as well as the hypothesis, if appropriate.

The work of a project may be an element of a larger work, in which case you will identify that larger work; however, your goal must relate to your work.

PART 3: METHODS

This section describes precisely how the student will accomplish the project, including the milestones and timeline. Include only those methods that the student will carry out. Again, if a work is part of a larger project, provide information concerning that project’s methods as necessary.

Methods address:
- How the project will be done (i.e. the sequential steps you will take to execute your project.) and by whom;
- Sample or population involved (described briefly in Part 2);
- Tools/evaluation methods, including copies of instruments;
- Model of tables, charts or figures that will be used to display data in final paper;
- How the results will be analyzed, how conclusions will be drawn or how the hypothesis will be proved;
- Time line or Gantt chart showing the time frame for the project, including each objective and activity.
Appendix V

The methods section should be detailed and precise so that another person could replicate a project by using the methods presented. You may find it helpful to utilize articles from the Journal of the American Public Health Association as models for this section.

PART 4: PROJECT EVALUATION PLAN

In this section, discuss how you intend to evaluate or critique your project plan and execution. After providing a narrative, provide a detailed plan to evaluate the project.

- Develop measurable criteria, including measures of quality, regarding a goal, objectives and activities plan. Without these measures, one cannot perform critical, useful evaluation of a work.
- Describe your plan to evaluate whether and how well a primary goal and related objectives are met;
- Describe your plan to evaluate the success of the activities planned to achieve the goal and objectives;

In order to develop measurable criteria through which to evaluate success in these areas, build the criteria around the specific objectives and methods established for the project.

Base the evaluation methods on the conceptual framework of the MPH Program courses. The examples below illustrate the questions that might be asked in order to develop measurable criteria. THESE ARE NOT THE CRITERIA, merely a means through which you can develop criteria.

In evaluating a project relative to the primary goal, you might formulate objectives specific to your practicum that address:

- How well did you define the primary problem/issue?
- Were the data sources you identified relevant and useful?
- Could you define the health status of the population served by the site?
- What factors contributed to health promotion and disease prevention?
- What factors influenced the use of health services?
- What principals of behavioral health did you observe?
- Could you identify community partners of the site organization?

As you develop evaluation plan, ask whether you could evaluate the project or experience utilizing this plan if you were someone other than the primary investigator.

REFERENCES

This is not a section per se. It is a list of the sources you cited in a literature research. You should utilize the AMA citation style. In-text citations must be in concurrence with the AMA style and with the reference list.
Appendix V

SETTING UP THE PROPOSAL: A proposal will conform to the following specifications:

1. Practicum Proposal Cover Sheet, signed by the student, the Preceptor and the Practicum Advisor
2. Length: 10 to 15 double spaced pages, not including reference list
3. Type: Times New Roman, or a similar serif type
4. Font: 12 for Times New Roman, similar if a different type is selected
5. Margins: one inch top, bottom, and sides
D. INSTITUTIONAL REVIEW BOARD (IRB) APPLICATION

INSTITUTIONAL REVIEW BOARD (IRB) – Human Subjects Review Committee

Part of your Practicum experience will be to complete Human Subjects Protection (CITI) training (see p. 5). It is the policy of Eastern Virginia Medical School that all faculty, students and staff who conduct research will complete required human subject protection training. The training is required by federal legislation in response to past abuse of people who were utilized in research.

In the United States and the world, unethical and harmful research has been conducted utilizing people who did not give valid consent. Some of these people were unaware that they were being utilized as subjects in research. Others were deliberately misinformed about the risks of the research. Still others did not have the power to refuse research, such as prisoners and members of minority groups. Finally, some people were used as subjects who did not have the capacity to understand the research, such as the mentally ill.

The committee that oversees all research at EVMS is the Institutional Review Board (IRB). Federal laws and regulations govern the procedures of the IRB. The IRB requires that investigators apply for approval of any research prior to the research being undertaken.

Mission of the Institutional Review Board (IRB):

“The Institutional Review Boards (IRBs) at Eastern Virginia Medical School (EVMS) have the fundamental charge of protecting the rights and welfare of human subjects in medical or health-related research studies.”  

The IRB functions to assure that research is performed in accordance with ethical and legal standards. The review committees must act and maintain records as mandated by the federal government. The procedures required by the IRB are not to be considered as pro forma. The standards and ethics from which they arise are central to the practice of public health.

The term “human subject” pertains to a wider population than those people who volunteer for clinical medical trials. You will be working with human subjects if you administer a questionnaire, participate in interviews or focus groups, or review medical records. Human subjects are any persons you may potentially utilize as subjects in a research, be they patients, clients, employees, or family members.

Due to the nature of some projects students will be required to write an application to the IRB in order to conduct their project. Some students will submit Parts 2 and 3 of their proposals to the IRB to confirm that their projects do not involve human subjects research. And finally, if a project is one that clearly does not involve humans, such as testing water samples; you will not be required to submit anything to the IRB.
Appendix V

IRB APPLICATION PACKET:

Your application packet will consist of the following information, in the order given.

- Letter to IRB signed by Preceptor/other worksite representative authorizing you to perform the project at the site;
- Application for Approval of Research Involving Human Subjects;
  - You will be the Principal Investigator unless otherwise directed
  - Your Practicum Course Director will be the person preparing the submission
- Consent Form or Application for Waiver of Consent;
- Waiver of Authorization for Use of Protected Health Information (PHI);
- Detailed protocol, including timeline;
- Data collection sheets or tools;
- Advertisements or signage you will use to announce the project or attract participants;
- Investigator’s Assurance Form;

All required sections must be completed. Assemble with clips, not staples, and the MPH Program will make copies. Once IRB approval has been granted, any change in a research must be submitted to the IRB on an Amendment form.

IRB APPROVAL

IRB approval can take 6 to 10 weeks after the application has been submitted, so you must consider this in developing your time line. If any further documentation is required of you by the IRB, approval may take longer.

All IRB forms are posted on the BLACKBOARD in the “Course Information” section. The Standard Operating Procedures booklet is online; however, you will not utilize all forms in the booklet. As a reference, go to

- [http://www.evms.edu/research/protections/docs/sop.pdf](http://www.evms.edu/research/protections/docs/sop.pdf)
E. PORTFOLIO

DEVELOPING A PORTFOLIO

The Portfolio will serve as a dossier through which you can present tangible evidence of your work. The portfolio will be a multi-purpose vehicle that has specific goals:

- To provide structure and continuity for Practicum activities;
- To serve as a repository for research, assignments and the self-evaluation of work;
- To provide a vehicle to document progress in meeting goals and objectives;
- To assist you in professional development through continued examination of research, consultation notes, faculty input and other portfolio entries;
- To assist a Practicum Advisor in evaluating a progress.
- To record your competency self assessments.

The Portfolio is comprised of:

- All Practicum assignments;
- For management students, the secondary goal related to management and leadership observed at the site and the results/discussion of that goal.
- Project notes;
- Notes from meetings with your Preceptor and others (see form in Forms Section);
- A record of observations regarding the knowledge, skill and abilities developed related to the practice of public health;
- Self Evaluation;
- Competency Self Assessments;
- All emails and correspondence concerning your project.

The entries should be both analytical and reflective in nature, and are designed to help you benefit from the merger of academic and experiential learning that constitute the Practicum.

The entries you make when meeting with a Preceptor or others should include the date, place, time and duration of the meeting. You should note the purpose of the meeting. You must have an agenda prepared and work ready for review before any meeting with your Preceptor. You must have specific objectives planned when you begin any meeting.

When you meet with groups, you can make entries in your Portfolio regarding leadership and group dynamics. You should not utilize names or titles in these observations. After any meeting, note the results of the meeting, including how/whether the objectives were met, and what objectives or recommendations require follow-up and by whom. You can also make entries about the site that did not necessarily result from a meeting. For example:

- What style(s) of leadership did you observe? Authoritarian? Permissive?
Appendix V

- Did they appear to be effective in helping accomplish the mission of the department and/or organization? Explain why or why not?
- Did policy issues of the site affect a work product? If so, how?

You will reflect on meetings and activities in regard to project goals, professional goals and the public health competencies. (You need not include all three of these in the same entry.) These reflective entries are those that you should discuss with your Practicum Advisor during a monthly and term meetings. These entries will be evaluated according to the manner and depth of your observations. This type of entry should not be included in the sections of the Portfolio you might utilize to demonstrate a work to professionals in the field.

You will enter a self evaluation in the portfolio at the end of each Term. This type of evaluation is a new skill for most students. The self evaluation should focus on how well you think you have managed the project. For Practicum A and B your Proposal Part 4 will provide the criteria for this evaluation. As part of your self evaluation, include the competency self assessment found in the forms section. Conduct a competency self assessment at the beginning of the Practicum, at the end of each semester, and at the end of the Practicum. Compare the beginning and ending assessments and comment on the competencies you gained during the Practicum.

It is recommended that you assemble your Portfolio in a hard binder with tabs. It will grow over the 3 Terms, and it will be easier to keep it organized if you do that.
Appendix V

F. FINAL PAPER

At the completion of the Practicum project, summarize the project and results in a final written paper. Utilize the format below to write the report. This format duplicates that of research articles published in the American Journal of Public Health, and you should write the paper as if it was to be submitted for publication - some papers actually will be submitted. If a document (a brochure, a plan, or a report to an agency) was created as part of the project, include the document as an attachment. The report should be no more than 20 double spaced pages of narrative, with additional pages for references, data display, or other appendices. Utilize Times New Roman, 12 point. Format the paper with a one inch margin at the top, bottom and sides.

ABSTRACT
A paragraph that briefly states the purpose/objectives, methods, results and conclusions of your project. (1/2 – 1 page)

INTRODUCTION
This section includes information from the Proposal Parts 1 and 2 which is used to introduce the public health issue, problem or project; the purpose of the project or work; the organization where the project was conducted; nature of the project, why this project was performed at the organization at this time; and additional background research (from Proposal Part 1) that establishes the importance of the issue, problem or project.

METHODS
This section contains specific information regarding HOW the project was carried out by the student: who, what, where, when, how, and with whom. State if this was part of a larger project, but only include information regarding the larger project, if essential. State any omissions or revisions of the methods included in the original proposal, and the reason for the omission or revision. Include instruments used, variables studied and analyses performed. Methods and approach should be presented in the past tense. This requires careful reading to assure correct grammar and agreement of subjects/verbs as well as tense.

RESULTS
This is the presentation of the data and results of the work. Do not include qualifiers, explanations, discussion or opinion in this section. Tables, figures and other graphics are included to provide focus, but do not replace narrative discussion of important findings.

DISCUSSION
This is where you provide your explanation and interpretation of the results of your project. You summarize the project, provide comments on any limitations encountered, draw conclusions and
Appendix V
make recommendations. Include any new pertinent literature related to the issue or the project design, problems encountered in carrying out the project, and how those problems and obstacles were addressed.

REFERENCES

References should be in AMA Format (see page )

The final paper will be evaluated by the Practicum Advisor based upon the student’s understanding of the health issue and project; understanding and application of the theoretical framework upon which the work is based, selection of appropriate methods and approaches utilized to address the project or issue; the quality of the work produced for the organization; grammar, punctuation, and spelling in all written work; and the ability to meet time requirements.

Copious examples of published papers will be provided on Black Board.
Appendix V

G. PLATFORM PRESENTATIONS

You will make a presentation of your proposal during Practicum A and a presentation of your final report during Practicum B. Three or more class sessions will be dedicated to student presentations of work. You are expected to attend all class sessions and presentations.

Prior to each presentation you should review your Power Point slides with your Preceptor and Practicum Advisor to be sure you are accurately reporting what you will be doing or have done. **THIS IS VERY IMPORTANT.**

Presentations:

A manner of dress and deportment during a presentation should reflect the standards required in a professional forum.

The time allotted for the oral presentation of your proposal is 10 minutes and 20 minutes for your final report, including a period for questions. Brevity is considered a key element in professional platform presentations; consequently, you should practice your presentation aloud to assure it remains within time limits.

The proposal presentation should consist of about 10 slides, and be a synopsis of the 4 parts of your proposal. It should have an introductory slide with the project title, your name, your Preceptor’s name, the site where you are doing your project, your Practicum Advisor’s name, and the date.

The final report presentation should consist of 15 to 20 PowerPoint slides and include:

- An introductory slide with the project title, your name, your Preceptor’s name, the site where you are doing your project, your Practicum Advisor’s name, and the date
- Introduction and Background
- Purpose of the project
- Project Methods
- Results
- Discussion
- Summary of your evaluation of how well you conducted the project. (from your Proposal Part 4)

**Student and faculty questions:**

You should be prepared to ask questions of other presenters, based on the advance materials and the presentation. You should expect to be interrupted by the questions, because it is more useful to clarify issues as they are presented than to go back after the conclusion of the complete presentation.
Appendix V

H. EVALUATION OF PEER PRESENTATIONS

As a matter of courtesy students should attend platform presentations of proposals and final papers given by their peers. The student will make observations and provide evaluations of peer presentations utilizing the format included in the Forms Section.

I. EVALUATION BY SITE PRECEPTOR

Evaluations made by site Preceptors of students and their work are instrumental in determining student progress. The Preceptors will evaluate the students’ ability to work as team members, to remain focused on the work assigned and to perform at the expected level of a professional in the field.

J. EVALUATION OF PRACTICUM BY THE STUDENT

Each student will evaluate the Practicum course including the site where their project was conducted using the form in the Forms Section. This provides valuable feedback for the MPH Program which will benefit students in following classes.

K. PRESENTATION OF PROJECT TO THE AMERICAN PUBLIC HEALTH ASSOCIATION (APHA) OR THE VIRGINIA PUBLIC HEALTH ASSOCIATION (VAPHA)

Students are encouraged to submit their projects for presentation at the annual meetings of APHA and VAPHA held each year. Students selected to present their projects will receive an all expense paid trip to the APHA meeting, gain a great bullet for their resume, and be exposed to an incredible network of public health practitioners.
Section 4: Resources

MPH FACULTY

MPH Practicum Course Director: The EVMS faculty member who is the primary classroom instructor for the Practicum courses and who is the liaison with all Practicum sites, Preceptors and Practicum Advisors.

MPH Practicum Advisor: The EVMS faculty member who provides project guidance and to whom you submit Practicum assignments. This Advisor will evaluate your work and assign grades. For some students, this Advisor and the Practicum Instructor will be the same person.

Site Preceptor (or Preceptor): The community-based health professional whose project you have accepted, and who has agreed to be an advisor and guide. The Preceptor will evaluate you and the work product you deliver.

EVMS EPIDEMIOLOGY-BIOSTATISTICS CORE

The EVMS Epidemiology-Biostatistics Research Support fosters excellence in research by providing epidemiologic and biostatistical expertise and education to the academic health center. The Epi-Bio Core offers the following services:

- **Study Design:** protocol and methods development, drafting of research plans, timeline creation, sample size calculations.
- **Data Analysis and Interpretation:** writing analysis plans, conducting statistical analysis, creating data presentations, writing results sections.
- **Database Design and Management:** creation of relational and flat file databases for data collection using techniques to maximize data quality and built-in data quality checks.
- **Survey Design:** survey creation, survey review and consultation, validation/pilot testing.
- **Protocol Development:** assist investigators in preparing protocols for observational studies or large multi-center trials.

To make an appointment, email EpiBio@evms.edu or go to http://www.evms.edu/hlthprof/epi-bio.

EVMS LIBRARY EDUCATIONAL CONSULTANT

April Adams Pace or, contact the EVMS Library for Educational Coordinator questions or search requests at:
(757) 446-5851 (757) 446-5846
paceaa@evms.edu library@evms.edu
Section 5:
Public Health Competencies

FOUNDATIONS OF THE MASTER OF PUBLIC HEALTH COMPETENCIES

In order to derive full benefit from the Practicum, you should understand how and why a competency requirement was instituted and how it fits into the MPH curriculum.

In 1988, the Institute of Medicine issued a report that highlighted the inadequacies of the field of public health in the United States. In the early 1990’s, efforts to institute broad reform and reorganization in the U.S. health care system faltered. Impelled by these and other issues, national, state and local public health leaders collaborated to define the framework for public health service in the United States. The work was completed in 1994, and produced the fundamental obligations of public health and the 10 essential public health services. These are provided below:

A. The Purpose of Public Health (What Public Health Does)

The fundamental obligation of agencies responsible for population-based health is to:

- Prevent epidemics and the spread of disease
- Protect against environmental hazards
- Prevent injuries
- Promote and encourage healthy behaviors and mental health
- Respond to disasters and assist communities in recovery
- Assure the quality and accessibility of health services

B. Essential Public Health Services

1. Monitor health status to identify community health problems
2. Diagnose and investigate health problems and health hazards in the community
3. Inform, educate, and empower people about health issues
4. Mobilize community partnerships to identify and solve health problems
5. Develop policies and plans that support individual and community health efforts
6. Enforce laws and regulations that protect health and ensure safety
Appendix V

7. Link people to needed personal health services and assure the provision of health care when otherwise unavailable

8. Assure a competent public health and personal health care workforce

9. Evaluate effectiveness, accessibility, and quality of personal and population-based health services

10. Research for new insights and innovative solutions to health problems

The Association of Schools of Public Health (ASPH) developed the competencies for Master of Public Health degree programs based upon the obligations of public health practice and the essential public health services. In 2006, the competencies were revised to include inter-disciplinary and crosscutting competencies.

The specific competencies related to the Practicum Course are contained in the Forms Section. The Competency List also provides for a competency self assessment for the Practicum. You are required to fill out the assessment at the beginning of the Practicum, at the end of each Term and at the end of the Practicum. Comparing the beginning assessment with the ending assessment will give you (and us) a picture of how the Practicum added to your competency in public health. You should make the self assessments part of your portfolio and be sure to comment on them in your self evaluation.

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**CONFIDENTIALITY**

You may have access to protected healthcare information of clients, employees, or others. Such information is protected by state and federal statutes and is strictly confidential.

Anyone violating these statutes is subject to disciplinary action within the MPH Program, as well as to a civil suit by the person violated. Federal regulations regarding mental illness and substance abuse are especially stringent.

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REFERENCES


Appendix V

FORMS
Appendix V

THE GRADUATE PROGRAM IN PUBLIC HEALTH
MPH-767/768A and B: COMMUNITY PRACTICUM
STUDENT COMPETENCY SELF ASSESSMENT

Note: An asterisk (*) in front of a competency means that competency is for MPH 768A/B only.

<table>
<thead>
<tr>
<th>COMPETENCY</th>
<th>Aware</th>
<th>Knowledgeable</th>
<th>Proficient</th>
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<tbody>
<tr>
<td><strong>EPIDEMIOLOGY</strong></td>
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<tr>
<td>Epidemiology is the study of patterns of disease and injury in human populations and the application of this study to the control of health problems.</td>
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<tr>
<td>1. Identify key sources of data for epidemiologic purposes.</td>
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<tr>
<td>*2. Identify the principles and limitations of public health screening programs.</td>
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<tr>
<td>3. Describe a public health problem in terms of magnitude, person, time and place</td>
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<tr>
<td>5. Comprehend basic ethical and legal principles pertaining to the collection, maintenance, use and dissemination of epidemiological data</td>
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<tr>
<td>*6. Apply the basic terminology and definitions of epidemiology</td>
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<td>*7. Calculate basic epidemiology measures</td>
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<tr>
<td>*8. Communicate epidemiologic information to lay and professional audiences.</td>
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<tr>
<td>*9. Draw appropriate inferences from epidemiologic data.</td>
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<tr>
<td>*10. Evaluate the strengths and limitations of epidemiologic reports.</td>
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</table>
### HEALTH MANAGEMENT

Health policy and management is a multidisciplinary field of inquiry and practice concerned with the delivery, quality and costs of health care for individuals and populations. This definition assumes both a managerial and a policy concern with the structure, process and outcomes of health services including the costs, financing, organization, outcomes and accessibility of care.

1. Identify the main components and issues of the organization, financing and delivery of health services and public health systems in the US.

3. Explain methods of ensuring community health safety and preparedness.

4. Discuss the policy process for improving the health status of populations.

5. Apply the principles of program planning, development, budgeting, management and evaluation in organizational and community initiatives.

6. Apply principles of strategic planning and marketing to public health.

7. Apply quality and performance improvement concepts to address organizational performance issues.

8. Apply "systems thinking" for resolving organizational problems.

9. Communicate health policy and management issues using appropriate channels and technologies.

10. Demonstrate leadership skills for building partnerships.
<table>
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<th>Appendix V</th>
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<tbody>
<tr>
<td><strong>BIOSTATISTICS</strong></td>
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<tr>
<td>Biostatistics is the development and application of statistical reasoning and methods in addressing, analyzing and solving problems in public health; health care; and biomedical, clinical and population-based research.</td>
</tr>
<tr>
<td>2. Describe basic concepts of probability, random variation and commonly used statistical probability distributions.</td>
</tr>
<tr>
<td>3. Describe preferred methodological alternatives to commonly used statistical methods when assumptions are not met.</td>
</tr>
<tr>
<td>4. Distinguish among the different measurement scales and the implications for selection of statistical methods to be used based on these distinctions.</td>
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<tr>
<td>*5. Apply descriptive techniques commonly used to summarize public health data.</td>
</tr>
<tr>
<td>7. Apply descriptive and inferential methodologies according to the type of study design for answering a particular research question.</td>
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<tr>
<td>*8. Apply basic informatics techniques with vital statistics and public health records in the description of public health characteristics and in public health research and evaluation.</td>
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<tr>
<td>9. Interpret results of statistical analyses found in public health studies.</td>
</tr>
<tr>
<td>*10. Develop written and oral presentations based on statistical analyses for both public health professionals and educated lay audiences.</td>
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</tbody>
</table>
**ENVIRONMENTAL HEALTH SCIENCES**

Environmental health sciences represent the study of environmental factors including biological, physical and chemical factors that affect the health of a community.

1. Describe the direct and indirect human, ecological and safety effects of major environmental and occupational agents.

2. Describe genetic, physiologic and psychosocial factors that affect susceptibility to adverse health outcomes following exposure to environmental hazards.

3. Describe federal and state regulatory programs, guidelines and authorities that control environmental health issues.

4. Specify current environmental risk assessment methods.

5. Specify approaches for assessing, preventing and controlling environmental hazards that pose risks to human health and safety.

6. Explain the general mechanisms of toxicity in eliciting a toxic response to various environmental exposures.

7. Discuss various risk management and risk communication approaches in relation to issues of environmental justice and equity. (MPH 767 only)

8. Develop a testable model of environmental insult.
### SOCIAL AND BEHAVIORAL SCIENCES

The social and behavioral sciences in public health address the behavioral, social and cultural factors related to individual and population health and health disparities over the life course. Research and practice in this area contributes to the development, administration and evaluation of programs and policies in public health and health services to promote and sustain healthy environments and healthy lives for individuals and populations.

*1 Identify basic theories, concepts and models from a range of social and behavioral disciplines that are used in public health research and practice.

*2. Identify the causes of social and behavioral factors that affect health of individuals and populations.

*3. Identify individual, organizational and community concerns, assets, resources and deficits for social and behavioral science interventions.

*4. Identify critical stakeholders for the planning, implementation and evaluation of public health programs, policies and interventions.

5. Describe steps and procedures for the planning, implementation and evaluation of public health programs, policies and interventions.

*6. Describe the role of social and community factors in both the onset and solution of public health problems.

*7. Describe the merits of social and behavioral science interventions and policies.

8. Apply evidence-based approaches in the development and evaluation of social and behavioral science interventions.

9. Apply ethical principles to public health program planning, implementation and evaluation.

*10. Specify multiple targets and levels of intervention for social and behavioral science programs and/or policies.
### COMMUNICATION AND INFORMATICS

The ability to collect, manage and organize data to produce information and meaning that is exchanged by use of signs and symbols; to gather, process, and present information to different audiences in-person, through information technologies, or through media channels; and to strategically design the information and knowledge exchange process to achieve specific objectives.

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<tbody>
<tr>
<td>1. * Describe how the public health information infrastructure is used to collect, process, maintain, and disseminate data.</td>
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<tr>
<td>2. * Describe how societal, organizational, and individual factors influence and are influenced by public health communications.</td>
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<tr>
<td>3. * Discuss the influences of social, organizational and individual factors on the use of information technology by end users.</td>
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<tr>
<td>4. Apply theory and strategy-based communication principles across different settings and audiences.</td>
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<tr>
<td>5. Apply legal and ethical principles to the use of information technology and resources in public health settings.</td>
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<tr>
<td>6. Collaborate with communication and informatics specialists in the process of design, implementation, and evaluation of public health programs.</td>
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<tr>
<td>7. * Demonstrate effective written and oral skills for communicating with different audiences in the context of professional public health activities.</td>
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<tr>
<td>8. Use information technology to access, evaluate, and interpret public health data.</td>
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<tr>
<td>9. Use informatics methods and resources as strategic tools to promote public health.</td>
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<tr>
<td>10. Use informatics and communication methods to advocate for community public health programs and policies.</td>
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### PROFESSIONALISM

The ability to demonstrate ethical choices, values and professional practices implicit in public health decisions; consider the effect of choices on community stewardship, equity, social justice and accountability; and to commit to personal and institutional development.

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<tbody>
<tr>
<td><strong>2.</strong> Apply basic principles of ethical analysis to issues of public health practice and policy.</td>
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<tr>
<td><strong>3.</strong> Apply evidence-based principles and the scientific knowledge base to critical evaluation and decision-making in public health.</td>
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<td><strong>4.</strong> Apply the core functions of assessment, policy development, and assurance in the analysis of public health problems and their solutions.</td>
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<td><strong>5.</strong> Promote high standards of personal and organizational integrity, compassion, honesty and respect for all people.</td>
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<td><strong>6.</strong> Analyze determinants of health and disease using an ecological framework.</td>
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<tr>
<td><strong>7.</strong> Analyze the potential impacts of legal and regulatory environments on the conduct of ethical public health research and practice.</td>
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<tr>
<td><strong>8.</strong> Distinguish between population and individual ethical considerations in relation to the benefits, costs, and burdens of public health programs.</td>
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<tr>
<td><strong>10.</strong> Appreciate the importance of working collaboratively with diverse communities and constituencies (e.g. researchers, practitioners, agencies and organizations).</td>
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</table>
DIVERSITY AND CULTURE

The ability to interact with both diverse individuals and communities to produce or impact an intended public health outcome.

1. * Describe the roles of, history, power, privilege and structural inequality in producing health disparities.

2. * Explain how professional ethics and practices relate to equity and accountability in diverse community settings.

5. * Use the basic concepts and skills involved in culturally appropriate community engagement and empowerment with diverse communities.

6. Apply the principles of community-based participatory research to improve health in diverse populations.

7. * Differentiate among availability, acceptability, and accessibility of health care across diverse populations.

8. Differentiate between linguistic competence, cultural competency, and health literacy in public health practice.

9. * Cite examples of situations where consideration of culture-specific needs resulted in a more effective modification or adaptation of a health intervention.

10. * Develop public health programs and strategies responsive to the diverse cultural values and traditions of the communities being served.
## LEADERSHIP

The ability to create and communicate a shared vision for a changing future; champion solutions to organizational and community challenges; and energize commitment to goals.

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<table>
<thead>
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<tbody>
<tr>
<td>1. * Describe the attributes of leadership in public health.</td>
<td></td>
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<tr>
<td>2. Describe alternative strategies for collaboration and partnership among organizations, focused on public health goals.</td>
<td></td>
</tr>
<tr>
<td>4. * Engage in dialogue and learning from others to advance public health goals.</td>
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<tr>
<td>5. Demonstrate team building, negotiation, and conflict management skills.</td>
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<tr>
<td>6 Demonstrate transparency, integrity, and honesty in all actions.</td>
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</tr>
<tr>
<td>7 Use collaborative methods for achieving organizational and community health goals.</td>
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</tr>
<tr>
<td>8. * Apply social justice and human rights principles when addressing community needs.</td>
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<tr>
<td>9. Develop strategies to motivate others for collaborative problem solving, decision-making, and evaluation.</td>
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</tbody>
</table>
### PROGRAM PLANNING

**The ability to plan for the design, development, implementation, and evaluation of strategies to improve individual and community health.**

<table>
<thead>
<tr>
<th>1.</th>
<th>* Describe how social, behavioral, environmental, and biological factors contribute to specific individual and community health outcomes.</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.</td>
<td>Describe the tasks necessary to assure that program implementation occurs as intended.</td>
</tr>
<tr>
<td>3.</td>
<td>* Explain how the findings of a program evaluation can be used.</td>
</tr>
<tr>
<td>4.</td>
<td>Explain the contribution of logic models in program development, implementation, and evaluation.</td>
</tr>
<tr>
<td>5.</td>
<td>Differentiate among goals, measurable objectives, related activities, and expected outcomes for a public health program.</td>
</tr>
<tr>
<td>7.</td>
<td>Differentiate between qualitative and quantitative evaluation methods in relation to their strengths, limitations, and appropriate uses, and emphases on reliability and validity.</td>
</tr>
<tr>
<td>8.</td>
<td>* Prepare a program budget with justification.</td>
</tr>
<tr>
<td>9.</td>
<td>* In collaboration with others, prioritize individual, organizational, and community concerns and resources for public health programs.</td>
</tr>
<tr>
<td>10.</td>
<td>* Assess evaluation reports in relation to their quality, utility, and impact on public health.</td>
</tr>
</tbody>
</table>
## SYSTEMS THINKING

The ability to recognize system level properties that result from dynamic interactions among human and social systems and how they affect the relationships among individuals, groups, organizations, communities, and environments.

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<table>
<thead>
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<tbody>
<tr>
<td>1.</td>
<td>* Identify characteristics of a system.</td>
</tr>
<tr>
<td>2.</td>
<td>Identify unintended consequences produced by changes made to a public health system.</td>
</tr>
<tr>
<td>3.</td>
<td>* Provide examples of feedback loops and “stocks and flows” within a public health system.</td>
</tr>
<tr>
<td>5.</td>
<td>* Explain how systems models can be tested and validated.</td>
</tr>
<tr>
<td>6.</td>
<td>* Explain how the contexts of gender, race, poverty, history, migration, and culture are important in the design of interventions within public health systems.</td>
</tr>
<tr>
<td>7.</td>
<td>Illustrate how changes in public health systems (including input, processes, and output) can be measured.</td>
</tr>
<tr>
<td>8.</td>
<td>* Analyze inter-relationships among systems that influence the quality of life of people in their communities.</td>
</tr>
<tr>
<td>9.</td>
<td>* Analyze the effects of political, social and economic policies on public health systems at the local, state, national and international levels.</td>
</tr>
<tr>
<td>10.</td>
<td>* Analyze the impact of global trends and interdependencies on public health related problems and systems.</td>
</tr>
<tr>
<td>11.</td>
<td>Assess strengths and weaknesses of applying the systems approach to public health problems.</td>
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</tbody>
</table>
# PUBLIC HEALTH BIOLOGY

The ability to incorporate public health biology – the biological and molecular context of public health – into public health practice.

1. * Specify the role of the immune system in population health.


3. * Identify the ethical, social and legal issues implied by public health biology.

4. * Explain the biological and molecular basis of public health.

6. * Explain how genetics and genomics affect disease processes and public health policy and practice.

7. * Articulate how biological, chemical and physical agents affect human health.

8. * Apply biological principles to development and implementation of disease prevention, control, or management programs.

9. * Apply evidence-based biological and molecular concepts to inform public health laws, policies, and regulations.

10. * Integrate general biological and molecular concepts into public health.
### Appendix V

**EASTERN VIRGINIA MEDICAL SCHOOL**  
**GRADUATE PROGRAM IN PUBLIC HEALTH**  
**MPH 768 – Community Practicum**  
**PRACTICUM PROPOSAL COVER SHEET**

<table>
<thead>
<tr>
<th>Student Name:</th>
<th>First</th>
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<th>Title of Practicum:</th>
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<th>Academic Advisor:</th>
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<th>Site Preceptor:</th>
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**Required Signatures**

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**Practicum project approved**:  
____ Yes  
____ No

**Project may be performed at my work site, named above**:  
____ Yes  
____ No

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<th>Preceptor Signature:</th>
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**Practicum Advisor Signature**:  

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Appendix V

EASTERN VIRGINIA MEDICAL SCHOOL
GRADUATE PROGRAM IN PUBLIC HEALTH
MPH 768 – Community Practicum
Portfolio Entry for Meetings with Preceptor or Advisor

Date:

Place:

Attendees:

Time/Duration of Meeting:

Student Agenda:

Objectives: (Note if this is related to a specific competency)

Results of Meeting:

Objectives Met:

Objectives Continuing:

Preceptor Recommendations:

Follow-up Actions to be taken: Person to Take Action:

============================

In the reflection/analysis entry, consider/reflect on these or other questions, as applicable:

- Did the meeting move my project forward? If not, why?
- Were my agenda and my objectives adequate for the meeting?
- What issues/actions did I handle as well as I would desire?
- What issues/actions could I handle differently in the future?
- How can I relate the meeting and results to concepts learned in the course work?
- What have I learned that has helped in my professional development?
EASTERN VIRGINIA MEDICAL SCHOOL
MPH 768: Community Practicum
Student Evaluation of Practicum

Student Name: ___________________________ Date: ________________

Preceptor Name: ___________________________

Preceptor Title: ___________________________

Organization: _______________________________

Estimate how many hours you spent at the Practicum site: ________________

Evaluate the Practicum site/organization and project you completed by circling the number that reflects a level of agreement with the statements.

1=Strongly disagree  2=Mildly disagree  3=Mildly agree  4=Strongly agree

<table>
<thead>
<tr>
<th>Statement</th>
<th>Agreement Level</th>
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<tbody>
<tr>
<td>Guidelines for the following were clear and useful</td>
<td>1</td>
</tr>
<tr>
<td>IRB Application Process</td>
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<tr>
<td>Written Proposal</td>
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<tr>
<td>Oral Report</td>
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<tr>
<td>Final Written Report</td>
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<tr>
<td>The selection of Practicum opportunities offered by the MPH Program was adequate.</td>
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<tr>
<td>I would have liked to have spent more hours at the site.</td>
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<tr>
<td>Due to my schedule, I found it difficult to find the required hours to spend at the Practicum site.</td>
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<tr>
<td>The preceptor took time to assist me, when necessary.</td>
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</tr>
<tr>
<td>The preceptor had the skills and knowledge to assist me.</td>
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<tr>
<td>Staff at the site/organization understood what I was doing there.</td>
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<tr>
<td>The organization willingly provided the information I needed to carry out my project.</td>
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<tr>
<td>If needed, I was provided with space in which to work.</td>
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<tr>
<td>If needed, I was provided with equipment with which to work.</td>
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<tr>
<td>Statement</td>
<td>Agreement Level</td>
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<td>---------------------------------------------------------------------------</td>
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<tr>
<td>Having the public health competencies related to the Practicum was helpful:</td>
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<tr>
<td>In writing the proposal and preliminary assignments</td>
<td>1 2 3 4</td>
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<tr>
<td>In bringing focus to the actual work of the project/externship</td>
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<tr>
<td>In writing an evaluation of my work at the conclusion of the practicum</td>
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<tr>
<td>In bringing focus to overall practicum experience</td>
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<tr>
<td>The Blackboard site was:</td>
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<tr>
<td>well organized</td>
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<tr>
<td>Helpful in introducing the Practicum process</td>
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<tr>
<td>Helpful during the process</td>
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<tr>
<td>The time required to complete the project was reasonable.</td>
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<tr>
<td>I had the necessary knowledge and skills for this project.</td>
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<tr>
<td>The Practicum provided a “real world” experience for using skills and knowledge learned in the MPH Program.</td>
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<tr>
<td>Presenting the Practicum results to the seminar class was a useful experience to me.</td>
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<tr>
<td>Overall, the Practicum experience was worthwhile.</td>
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</table>

### III. Please provide comments below on:

- Any item above that needs clarification.

- Any area where you believe you were not well prepared for the Practicum.

- Any particularly positive aspect of the experience, the organization, or the preceptor.

- Any suggestions that you have for improving the Practicum experience.
Student Name: ________________________________  Term: ________________

Preceptor Name: ______________________________________________________

Preceptor Title: ________________________________________________________

Organization: __________________________________________________________

Using the rating scale below, please check the student’s level of performance during the Practicum experience on the criteria listed.

1 = Failed to meet expected performance level
2 = Met expected performance level
3 = Exceeded expected performance level

<table>
<thead>
<tr>
<th>Criteria</th>
<th>Rating</th>
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<tbody>
<tr>
<td>Student met time commitment as agreed upon at the beginning of the practicum.</td>
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<tr>
<td>Student was dependable and responsible in carrying out agreed-upon project.</td>
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<tr>
<td>Student exhibited drive and initiative appropriate for work at a graduate level.</td>
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<tr>
<td>Student functioned well within the organization.</td>
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<tr>
<td>Student was able to identify sources of data and information for the project.</td>
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<tr>
<td>Student was able to analyze and/or synthesize data and information.</td>
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<tr>
<td>Student completed the necessary background research.</td>
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<tr>
<td>Student completed the project in the agreed-upon time frame.</td>
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<tr>
<td>Student’s written work was complete and well prepared.</td>
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<tr>
<td>Student developed the necessary knowledge and skills for this project.</td>
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</tbody>
</table>
Appendix V

Comments: Please provide comments on the following items:

♦ Any of the previous criteria on which the student was rated as 1.

♦ An overall impression of the student’s work on this Practicum project.

♦ Any areas where this student’s academic preparation for the assigned work could be improved.

♦ How the results from this project will be used for an organization.

Please assign a letter grade for the student using the scale below: __________ (grade)

<table>
<thead>
<tr>
<th>Grade</th>
<th>Description</th>
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<tbody>
<tr>
<td>A</td>
<td>Student performs at a level of excellence for graduate work</td>
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<td>A-</td>
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<tr>
<td>B+</td>
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<tr>
<td>B</td>
<td>Student performs at a level expected for graduate work</td>
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<tr>
<td>B-</td>
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<tr>
<td>C+</td>
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</tr>
<tr>
<td>C</td>
<td>Student performs at a level below that expected for graduate work</td>
</tr>
<tr>
<td>C-</td>
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<tr>
<td>D+</td>
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<tr>
<td>D</td>
<td>Student performs at a level such that the course should be repeated</td>
</tr>
<tr>
<td>D-</td>
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</tr>
<tr>
<td>F</td>
<td>Student performs at a level of failure for the course</td>
</tr>
</tbody>
</table>

Thank you for serving as a preceptor for this student’s Practicum project and for completing this assessment of the student. A ratings and comments will be useful in preparing this student for future work and in improving the Practicum assignments for other students.

Please return this completed form to: vromanrd@evms.edu OR mail to:

The Graduate Program in Public Health (Attn: Professor Vroman)
Eastern Virginia Medical School
PO Box 1980
Norfolk, VA 23501-1980
Appendix V

THE GRADUATE PROGRAM IN PUBLIC HEALTH
EASTERN VIRGINIA MEDICAL SCHOOL
MPH-768: COMMUNITY PRACTICUM
Faculty or Student Evaluation of Oral Presentations

Rating Scale: 0 = No, 1 = Partial, 2 = Yes

Presenter’s Name:__________________________________________________________

1. Was the purpose of the project clearly defined in the presentation?
   a. Rating (0-2):____
   b. Comments:

2. Was sufficient background information given to describe the nature of the issue?
   a. Rating (0-2):____
   b. Comments:

3. Are the methods appropriate for the type of project?
   a. Rating (0-2):____
   b. Comments:

4. Will the Project Evaluation Plan provide for a good retrospective evaluation of how the project was conducted?
   a. Rating (0-2):____
   b. Comments:

5. Were the PowerPoint slides easy to read and well designed?
   a. Rating (0-2):____
   b. Comments:

6. Did the presenter speak clearly and effectively?
   a. Rating (0-2):____
   b. Comments:

Additional comments:

Faculty Evaluator:__________________________________________________________
If faculty evaluator, assign grade (0-100):__________
### Appendix W

**MPH PROGRAM COURSE COMPETENCIES MATRIX 2007/2008-2010/2011**

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<tbody>
<tr>
<td>1. Assess and understand the health status of populations, determinants of health and illness, factors contributing to health promotion and disease prevention, and factors influencing the use of health services.</td>
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<td>X</td>
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<tr>
<td>2. Design, implement and/or interpret health status indicators and screening or surveillance programs for specific risk factors.</td>
<td>X</td>
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<tr>
<td>3. Develop a plan to address community health goals, including interventions based on disease states, behavioral sciences, health education, wellness strategies and an understanding of environmental factors affecting human health</td>
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<td>4. Develop and implement a plan, including a budget, to research or address a public health issue or problem in a community setting.</td>
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<td>5. Synthesize the historical development, structure, funding, and market dynamics of public, private, and not-for-profit health agencies.</td>
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<td>6. Identify and evaluate structure types and management practices in health care institutions and organizations.</td>
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<td>7. Identify the chemical, physical and biological factors that affect health and the environment.</td>
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<td>8. Identify and formulate ways to address ethical issues in public health practice and research.</td>
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<td>9. Develop and adapt approaches to health problems that consider cultural differences.</td>
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## Analytical Skills

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<tr>
<td>1. Define and assess a public health problem using appropriate quantitative and qualitative data and pertinent literature.</td>
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<td>2. Explain strengths, limitations and uses of various study designs.</td>
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<td>3. Describe the appropriate use of statistical tests.</td>
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<td>4. Develop and evaluate public health data, drawing appropriate inferences in scientific and health policy terms and identifying gaps in data sources.</td>
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<td>5. Identify appropriate data sources for investigating a health problem or issue.</td>
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<td>6. Interpret basic statistical results presented in medical and public health literature.</td>
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<tr>
<td>1. Write a research or intervention plan describing a problem, possible interventions, and expected results.</td>
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<td>2. Present accurate and effective demographic, statistical, and scientific information to professional, lay, and media audiences, using appropriate graphs and tables.</td>
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<td>3. Lead, participate in, and obtain input from groups to address a health issue.</td>
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<td>4. Use a computer to analyze data and provide summary results in written and graphic form.</td>
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<td>5. Develop ways to use the media to communicate important public health information.</td>
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<td>Formulate a hypothesis and questions to be answered by a study.</td>
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<tr>
<td>Identify and apply appropriate epidemiologic methods to address a research question.</td>
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<td>Demonstrate uses and limitations of different epidemiologic study designs.</td>
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<tr>
<td>Address concepts of cause, confounding, bias, and data quality in epidemiologic research.</td>
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<td>Use appropriate biostatistical methods to analyze data.</td>
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<td>Use computer systems and concepts to manage and analyze health data.</td>
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<td>Select appropriate data collection methods.</td>
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<td>Develop and evaluate public health data systems.</td>
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<td>Explain the epidemiology of selected chronic and infectious diseases, injuries, and health behaviors.</td>
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<tr>
<td>Draw appropriate inferences from epidemiologic data in scientific and health policy terms.</td>
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<tr>
<td>Apply epidemiologic concepts to a wide variety of health problems.</td>
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## Appendix W

### MPH PROGRAM COURSE COMPETENCIES MATRIX 2007/2008-2010/2011

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<tr>
<td>Evaluate and explain existing health care systems and practices.</td>
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<td>Analyze economic trends as they relate to health issues.</td>
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<tr>
<td>Identify and explain policy options and their administrative, legal, social, and political implications.</td>
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**MPH PROGRAM COURSE COMPETENCIES MATRIX 2007/2008-2010/2011**

|----------------------|-----------------------------|-------------------|--------------------|-------------------------------|--------------------------|-------------------------|--------------------------------|----------------------------------|

**Communication Skills**

1. Write a research or intervention plan describing a problem, possible interventions, and expected results.

2. Present accurate and effective demographic, statistical, and scientific information to professional, lay, and media audiences, using appropriate graphs and tables.

3. Lead, participate in, and obtain input from groups to address a health issue.

4. Use a computer to analyze data and provide summary results in written and graphic form.

5. Develop ways to use the media to communicate important public health information.
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<td>Use appropriate biostatistical methods to analyze data.</td>
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<td>Use computer systems and concepts to manage and analyze health data.</td>
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### Health Management Skills

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### Epidemiology Skills

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</tr>
<tr>
<td>Develop and evaluate quality improvement methods for a health program or service.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Identify, implement and evaluate best practices in human resource management.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Identify, contrast, and evaluate methods for marketing and promotion of health services.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
</tr>
<tr>
<td>Prepare a proposal for grant or contract funding.</td>
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</tbody>
</table>
## Appendix W

### MPH PROGRAM COURSE COMPETENCIES MATRIX 2007/2008-2010/2011

<table>
<thead>
<tr>
<th></th>
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</tr>
</thead>
<tbody>
<tr>
<td>1. Assess and understand the health status of populations, determinants of health and illness, factors contributing to health promotion and disease prevention, and factors influencing the use of health services.</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2. Design, implement and/or interpret health status indicators and screening or surveillance programs for specific risk factors.</td>
<td>X</td>
<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>3. Develop a plan to address community health goals, including interventions based on disease states, behavioral sciences, health education, wellness strategies and an understanding of environmental factors affecting human health</td>
<td></td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>4. Develop and implement a plan, including a budget, to research or address a public health issue or problem in a community setting.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>5. Synthesize the historical development, structure, funding, and market dynamics of public, private, and not-for-profit health agencies.</td>
<td></td>
<td></td>
<td>X</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>6. Identify and evaluate structure types and management practices in health care institutions and organizations.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>7. Identify the chemical, physical and biological factors that affect health and the environment.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
</tr>
<tr>
<td>8. Identify and formulate ways to address ethical issues in public health practice and research.</td>
<td>X</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>9. Develop and adapt approaches to health problems that consider cultural differences.</td>
<td>X</td>
<td></td>
<td></td>
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</tbody>
</table>

16
## Analytical Skills

### MPH PROGRAM COURSE COMPETENCIES MATRIX 2007/2008-2010/2011

<table>
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<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>1. Define and assess a public health problem using appropriate quantitative and qualitative data and pertinent literature.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2. Explain strengths, limitations and uses of various study designs.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
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</tr>
<tr>
<td>3. Describe the appropriate use of statistical tests.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>4. Develop and evaluate public health data, drawing appropriate inferences in scientific and health policy terms and identifying gaps in data sources.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>5. Identify appropriate data sources for investigating a health problem or issue.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>6. Interpret basic statistical results presented in medical and public health literature.</td>
<td>X</td>
<td>X</td>
<td>X</td>
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</table>
### Communication Skills

<table>
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</tr>
</thead>
<tbody>
<tr>
<td>1. Write a research or intervention plan describing a problem, possible interventions, and expected results.</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>2. Present accurate and effective demographic, statistical, and scientific information to professional, lay, and media audiences, using appropriate graphs and tables.</td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
<td></td>
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</tr>
<tr>
<td>3. Lead, participate in, and obtain input from groups to address a health issue.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
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</tr>
<tr>
<td>4. Use a computer to analyze data and provide summary results in written and graphic form.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td></td>
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</tr>
<tr>
<td>5. Develop ways to use the media to communicate important public health information.</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>X</td>
<td>X</td>
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</tbody>
</table>
### Epidemiology Skills

<table>
<thead>
<tr>
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</tr>
</thead>
<tbody>
<tr>
<td>Formulate a hypothesis and questions to be answered by a study.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Identify and apply appropriate epidemiologic methods to address a research question.</td>
<td></td>
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<tr>
<td>Demonstrate uses and limitations of different epidemiologic study designs.</td>
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<tr>
<td>Address concepts of cause, confounding, bias, and data quality in epidemiologic research.</td>
<td></td>
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<tr>
<td>Use appropriate biostatistical methods to analyze data.</td>
<td>X</td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Use computer systems and concepts to manage and analyze health data.</td>
<td>X</td>
<td></td>
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</tr>
<tr>
<td>Select appropriate data collection methods.</td>
<td>X</td>
<td></td>
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<td></td>
<td></td>
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<td></td>
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</tr>
<tr>
<td>Develop and evaluate public health data systems.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
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<td></td>
<td></td>
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</tr>
<tr>
<td>Explain the epidemiology of selected chronic and infectious diseases, injuries, and health behaviors.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Draw appropriate inferences from epidemiologic data in scientific and health policy terms.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Apply epidemiologic concepts to a wide variety of health problems.</td>
<td>X</td>
<td>X</td>
<td>X</td>
<td></td>
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</tr>
</tbody>
</table>
### Health Management Skills

**Evaluate and explain existing health care systems and practices.**

- Identify and explain policy options and their administrative, legal, social, and political implications.
  - X
  - X
  - X
- Estimate and evaluate costs, efficacies, and benefits associated with alternative policy options.
  - X
  - X
- Prepare policy statements and develop strategies for policy implementation and evaluation.
  - X
  - X
- Identify methods for establishing collaborative relationships with constituent groups and community leaders.
  - X
  - X
- Assess organizational structure, processes and performance for a health program or service.
  - X
  - X
  - X
- Develop and evaluate quality improvement methods for a health program or service.
  - X
  - X
- Identify, implement and evaluate best practices in human resource management.
  - X
  - X
- Identify, contrast, and evaluate methods for marketing and promotion of health services.
  - X
- Prepare a proposal for grant or contract funding.

|------------------------------------------------------------------------------------------|-------------------------------------------|---------------------------------------|-----------------------------------|-----------------------------|-------------------------------------------|------------------------------------------------|[-----------------] |-----------------------------|-------------------|-----------------------------|
Appendix X

Epidemiology and Biostatistics Core
Time and Effort Estimation in Year 2010

There are 34 new requests for service in Epi-Bio core between Jan 1st and June 30th, 2010, compared to 50 new requests in the whole year of 2009. It is expected to have 36% of increase demands in terms of number of projects. The complexity of service also increases, measured by the size of study and type of service requested. Adjusted by the average time & effort took for each service, it is expected to take 4390 hours in 2010, 133% increase compared to 1886 hours in 2009. The time of effort for GA in 2010 is expected to be 2350 hours, 124% increase from 1050 hours in 2009. (Table 1) The projects titles can be found in the Appendix I.

Table 1: Summary of projects supported by Epi-Bio Core in year 2009 and 2010

<table>
<thead>
<tr>
<th>Time Frame</th>
<th>Number of new projects</th>
<th>Estimated Time and Effort in Hours*</th>
<th>Estimated Graduate Assistant Hours**</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan 1st, 2009—Dec 31st, 2009</td>
<td>50</td>
<td>1886</td>
<td>1050</td>
</tr>
<tr>
<td>Jan 1st, 2010—June 30th, 2010</td>
<td>34</td>
<td>2195</td>
<td>1175</td>
</tr>
<tr>
<td>Jan 1st, 2010—Dec 31st, 2010</td>
<td>68</td>
<td>4390</td>
<td>2350</td>
</tr>
<tr>
<td></td>
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</tr>
</tbody>
</table>

*See details in Table 3; **See details in Table 4.

The clients in Epidemiology and Biostatistics Core are from departments of family medicine, OB/GYN, CEA master program, surgery, Jones institute, etc. The clients are composed of faculties, fellows, residents and students. There are more faculties using service in 2010 than 2009 (26 out of 50 in 2009 and 20 out of 34 in first half of 2010). There are only three faculties and one GA working in Epi-bio core to provide consulting support to the EVMS researchers. (Table 2)

Service provided in Epi-Bio core varied from the research planning stage, such as study design, protocol development, grant application, to the implementation and evaluation stage, such as survey and database design, data management and analysis, through the stage of finding dissemination as abstract and publication preparation. Teaching and advising is also available in single lecture, short course and full course formats. The time and effort spent on each project varied and after weighted by number of hours required in each type of service, it is projected to take 2195*2=4390 hour in year of 2010, which is 133% increase than 1886 hour in year of 2009. (Table 3)

With guidance and supervision, Graduate Assistant (GA) can provide support in service of data analysis, database management, presentation development and publication preparation. With the increasing of demands in these services, it is projected that 1175*2=2350 hour of GA will be needed in year of 2010, which is 124% increase from 1150 hour in year of 2009. (Table 4)
# Appendix X

## Table 2: Breakdown of projects by departments, type of PI and consultants in year 2009 and 2010

<table>
<thead>
<tr>
<th>Time Frame</th>
<th>Jan 1(^{st}), 2009—Dec 31(^{st}), 2009</th>
<th>Jan 1(^{st}), 2010—June 30(^{th}), 2010</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Departments</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family Medicine</td>
<td>7</td>
<td>6</td>
</tr>
<tr>
<td>OB/GYN</td>
<td>6</td>
<td>4</td>
</tr>
<tr>
<td>CEA Master Degree Program</td>
<td>4</td>
<td>8</td>
</tr>
<tr>
<td>Surgery</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Other</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>Jones Institute</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>MPH</td>
<td>5</td>
<td>0</td>
</tr>
<tr>
<td>Dermatology</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Emergency Medicine</td>
<td>1</td>
<td>3</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>3</td>
<td>1</td>
</tr>
<tr>
<td>Microsurgery</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Pediatrics</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>Otolaryngology</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Psychiatry</td>
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<td>2</td>
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<tr>
<td>Art Therapy</td>
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<td>0</td>
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<tr>
<td>Maternal and Fetal Medicine</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Microbiology</td>
<td>0</td>
<td>1</td>
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<tr>
<td>Physiology</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Proteomics</td>
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<td>1</td>
</tr>
<tr>
<td><strong>Type</strong></td>
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<tr>
<td>Faculty</td>
<td>26</td>
<td>20</td>
</tr>
<tr>
<td>Resident</td>
<td>13</td>
<td>5</td>
</tr>
<tr>
<td>Student</td>
<td>8</td>
<td>7</td>
</tr>
<tr>
<td>Fellow</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>Other</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td><strong>Consultants</strong></td>
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<td></td>
</tr>
<tr>
<td>Yueqin Zhao</td>
<td>42</td>
<td>24</td>
</tr>
<tr>
<td>Hind Baydoun</td>
<td>4</td>
<td>5</td>
</tr>
<tr>
<td>Sathish Indika (GA)</td>
<td>3</td>
<td>5</td>
</tr>
<tr>
<td>David Matson</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td><strong>Total number of new projects</strong></td>
<td><strong>50</strong></td>
<td><strong>34</strong></td>
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</table>
### Appendix X

#### Table 3: Estimated Time & Effort by service types in year 2009 and 2010

<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
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<tbody>
<tr>
<td>Abstract Preparation</td>
<td>3</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Data Analysis</td>
<td>30</td>
<td>22</td>
<td>19</td>
</tr>
<tr>
<td>Database Management</td>
<td>15</td>
<td>14</td>
<td>19</td>
</tr>
<tr>
<td>Database Design</td>
<td>20</td>
<td>13</td>
<td>21</td>
</tr>
<tr>
<td>Grant Submission</td>
<td>10</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td>Presentation Development</td>
<td>20</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td>Publication Preparation</td>
<td>20</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td>Protocol Development</td>
<td>10</td>
<td>14</td>
<td>15</td>
</tr>
<tr>
<td>Teaching(Single Lecture)</td>
<td>30</td>
<td>2</td>
<td>1</td>
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<tr>
<td>Teaching(Short Course)</td>
<td>100</td>
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<td>1</td>
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<tr>
<td>Teaching(Full-inclusive Description)</td>
<td>300</td>
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<td>Study Design</td>
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<td>21</td>
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<tr>
<td>Survey Design</td>
<td>20</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td><strong>Total number of service requested</strong></td>
<td><strong>103</strong></td>
<td><strong>123</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Total Time and Effort (Hour)</strong></td>
<td><strong>1886 hour</strong></td>
<td><strong>2195 hour</strong></td>
<td></td>
</tr>
</tbody>
</table>

#### Table 4: Estimated GA Time & Effort by service types in year 2009 and 2010

<table>
<thead>
<tr>
<th>Type of Service GA can work on:</th>
<th>T&amp;E (hour)</th>
<th>Jan 1st, 2009—Dec 31st, 2009</th>
<th>Jan 1st, 2010—June 30th, 2010</th>
</tr>
</thead>
<tbody>
<tr>
<td>Data Analysis</td>
<td>30</td>
<td>22</td>
<td>19</td>
</tr>
<tr>
<td>Database Management</td>
<td>15</td>
<td>14</td>
<td>19</td>
</tr>
<tr>
<td>Presentation Development</td>
<td>20</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td>Publication Preparation</td>
<td>20</td>
<td>5</td>
<td>7</td>
</tr>
<tr>
<td><strong>Total Time and Effort (Hour)</strong></td>
<td><strong>1050 hour</strong></td>
<td><strong>1175 hour</strong></td>
<td></td>
</tr>
</tbody>
</table>
## Appendix I: List of Projects in Year 2009 and 2010

<table>
<thead>
<tr>
<th>YEAR</th>
<th>PROJECT TITLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>2009</td>
<td>Does Gravitational Urinary Incontinence Correlate with Intrinsic Sphinctor Deficiency?</td>
</tr>
<tr>
<td>2009</td>
<td>Physician For Peace Project Evaluation</td>
</tr>
<tr>
<td>2009</td>
<td>Infant Mortality Study in Eastern Region, Virginia</td>
</tr>
<tr>
<td>2009</td>
<td>Is Glucose Variability in the ICU a Marker for Outcome?</td>
</tr>
<tr>
<td>2009</td>
<td>Do Socioeconomic Factors Influence Suntanning and Leisure Time of Sun-Related Activities</td>
</tr>
<tr>
<td>2009</td>
<td>Physician For Peace Project Evaluation</td>
</tr>
<tr>
<td>2009</td>
<td>Sperm Morphology, Motility and Concentration in Fertile and Infertile Men</td>
</tr>
<tr>
<td>2009</td>
<td>Emergency medicine Resident Project</td>
</tr>
<tr>
<td>2009</td>
<td>Quality of Life and Treatment Choices by race in prostate Cancer Patients</td>
</tr>
<tr>
<td>2009</td>
<td>Centering Pregnancy</td>
</tr>
<tr>
<td>2009</td>
<td>Urodynamics: Flow Parameters and Measures of Urethral Resistance</td>
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<td>2009</td>
<td>caregiver support group placement criteria for Alzheimer's Association</td>
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<td>2009</td>
<td>It is not a razor bump but rather Molluscum contagiosum: a case-series and selective review of the literature</td>
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<td>2009</td>
<td>Didatic Lecture</td>
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<td>2009</td>
<td>Genetic, Epigenetic and Functional Changes in Pancreatic Islets of Insulin Resistant Lean and Obese Mice Induced by Exposure to Ambient Ultrafine Particles with Oxidative Potential</td>
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<td>2009</td>
<td>Sleep Related Side Effect of SSRI therapy</td>
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<td>2009</td>
<td>Qualitative and Quantitative Upper Extremity Comparative Analysis of the Pharmacological treatment of Spasticity in Stroke Patients</td>
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<td>2009</td>
<td>The effect of Moringa Trees on Children's Malnutrition status in Congo, Africa</td>
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<tr>
<td>YEAR</td>
<td>PROJECT TITLE</td>
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<tr>
<td>------</td>
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<tr>
<td>2009</td>
<td>Otolaryngology Resident Project</td>
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<tr>
<td>2009</td>
<td>Infant Mortality Study in Eastern Region, Virginia</td>
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<td>2009</td>
<td>Good Health is at Hand Program</td>
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<td>2009</td>
<td>Combined 1st Trimester U/S Screening for Fetal Malformatum in Pregestational Diabetes Using Nuchal Translucency Thickness Ductus Venosus Dopoler</td>
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<td>2009</td>
<td>Study Design for Biomedical science students</td>
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<td>2009</td>
<td>Use of FK506 in Polyglycolic Acid Neuro-tubes With Schwann Cells for Nerve Regeneration Across a Long Gap Model</td>
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<td>2009</td>
<td>Liberian Youth HIV/AIDS Awareness Survey</td>
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<td>2009</td>
<td>Family Medicine Resident Project</td>
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<td>2009</td>
<td>Utilizing Underserved Populations to Teach Cultural, Contextual and Literacy Awareness to Medical Students</td>
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<td>2009</td>
<td>The Progression of Labor in Obese Women in Comparison to the Friedman Curve</td>
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<td>2009</td>
<td>VTE patients Chart Reviewed Risk Factors</td>
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<td>2009</td>
<td>Evidence-Based Medicine Teaching-Biostat</td>
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<td>2009</td>
<td>Incidence of Catheter Related Venous Thrombosis in Hospitalized Children</td>
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<td>2009</td>
<td>Clinical Trial</td>
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<td>2009</td>
<td>Microsurgery fellow project</td>
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<td>2009</td>
<td>Ethics and Preconception Gender Selection Practices in US IVF Clinics</td>
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<td>Botox Relaxation of Abdominal Wall Musculature Allows Healing of a Ventral hernia Defect in Rabbits</td>
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<td>2009</td>
<td>Teen Driving Study</td>
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<td>2009</td>
<td>Mobile micro-games for effective health awareness</td>
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<td>2009</td>
<td>The Effect of Art Therapy on the Working Memory of Children with Attention Deficit Hyperactivity Disorder</td>
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### Appendix X

<table>
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<tr>
<th>YEAR</th>
<th>PROJECT TITLE</th>
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<tbody>
<tr>
<td>2009</td>
<td>A retrospective pilot study to assess the prevalence of thyroid dysfunction (sub-clinical hypothyroidism and Overt hypothyroidism) in women with pregnancies complicated by preexisting diabetes and the impact on perinatal outcome</td>
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<td>2009</td>
<td>MPH Practicum Project</td>
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<td>2009</td>
<td>Effect of Hippotherapy and Therapeutic Riding on Selected Medical Outcomes in Cerebral Palsy</td>
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<td>2009</td>
<td>The effect of three treatments at 1 and 3 hour concentration on PAI-1, tPA and uPA outcomes</td>
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<td>2009</td>
<td>Prevalence of Imprinting Disorder among IVF patients</td>
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<td>2009</td>
<td>Phase II clinical trial: develop a non-hormonal female contraceptive</td>
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<td>2009</td>
<td>The efficacy of umbilical cord milking on the reduction of RBC transfusion rates in infants 24-28 weeks</td>
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<td>2009</td>
<td>Implementing an Anticoagulation Clinic in the Patient-Centered Medical Home</td>
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<td>2009</td>
<td>Statistical Review for Annals of Surgery</td>
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<td>2009</td>
<td>The effect of maternal and child immigration status on health insurance status and health care status measures among Asian-American and Pacific Islander (AAPI) children in the united states</td>
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<td>2009</td>
<td>Practicum</td>
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<td>2009</td>
<td>AAPI children's Dental and Mental health</td>
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<td>2010</td>
<td>Centering Pregnancy Program</td>
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<td>2010</td>
<td>Demographic information in atopic dermatitis clinical trial study</td>
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<td>2010</td>
<td>Centering Weight Management Group</td>
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<td>2010</td>
<td>Edward N. and Della L. Thome Memorial Foundation, Bank of America, N.A., Trustee, Awards Program in Alzheimer’s Disease Drug Discovery Research</td>
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<tr>
<td>2010</td>
<td>Accuracy of MRCP for diagnosing common bile duct stones in patients with a positive intraoperative cholangiogram</td>
</tr>
<tr>
<td>2010</td>
<td>Will the addition of either vitamin C or vitamin E to the cryopreservation media of morula-stage mouse embryos improve the post-thaw development?</td>
</tr>
</tbody>
</table>
### Appendix X

<table>
<thead>
<tr>
<th>YEAR</th>
<th>PROJECT TITLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>Evidence-Based Medicine Teaching-Biostat</td>
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<td>2010</td>
<td>Central Centrifugal Alopecia in Southeastern Virginia and Possible Correlation of Hair Care Practices with its Prevalence</td>
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<td>2010</td>
<td>Resection of the primary site may benefit elderly patients with metastatic colorectal cancer</td>
</tr>
<tr>
<td>2010</td>
<td>A retrospective study of cystic hygromas (fetal neck mass) detected on ultrasound during first trimester screening at EVMS (Correlation of cystic hygroma outcomes with nuchal translucency measurements)</td>
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<tr>
<td>2010</td>
<td>Active Surveillance Prostate Cancer Biomarkers in Prostatic Fluids</td>
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<td>2010</td>
<td>Does simulated driving with sleepy patients predict highway car crash?</td>
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<td>2010</td>
<td>Identify proteins that are biomarkers within each population</td>
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<td>2010</td>
<td>Measurement of the natural orientation of the uterus utilizing 3-Dimensional Ultrasound Technology-A pilot study</td>
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<td>2010</td>
<td>SCSA relevance in clinical setting during infertility treatment</td>
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<tr>
<td>2010</td>
<td>Fetal cardiac axis in the first trimester of pregnancy</td>
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<tr>
<td>2010</td>
<td>A formative evaluation study of learning outcomes for a family medicine residency training</td>
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<td>2010</td>
<td>Phase II Study of Meloxicam: A Non-Hormonal Female Contraceptive to Inhibit Ovulation in Normal Women not at Risk of Pregnancy</td>
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<tr>
<td>2010</td>
<td>The correlation between axonal load through Cross facial nerve grafts on eye sphincter functional recovery</td>
</tr>
<tr>
<td>2010</td>
<td>OB/GYN resident project</td>
</tr>
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<td>2010</td>
<td>Attitudes regarding the use of digital clinical photography as an aid in dermatopathologic diagnosis</td>
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<td>2010</td>
<td>NMDA Receptor Interventions to Improve Sociability in the Balb/c Mouse</td>
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<td>2010</td>
<td>Hormone levels and how they relate to IVF treatment and outcomes</td>
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<tr>
<td>2010</td>
<td>Anti-Müllerian hormone serum levels predict response to controlled ovarian hyperstimulation but not embryo quality or pregnancy outcome in oocyte donation</td>
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<tr>
<td>2010</td>
<td>Evaluation of the association of ploidy status and two treatment groups</td>
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### Appendix X

<table>
<thead>
<tr>
<th>YEAR</th>
<th>PROJECT TITLE</th>
</tr>
</thead>
<tbody>
<tr>
<td>2010</td>
<td>Use Standard Patients to Teach Cultural, Contextual and Literacy Awareness to Medical Students</td>
</tr>
<tr>
<td>2010</td>
<td>EC-PCMH: Establish an Educational Quality Improvement (EQI) team to develop, Implement, evaluate and enhance the component parts of EC-PCMH curriculum.</td>
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<tr>
<td>2010</td>
<td>To evaluate the volume of patients who come in on Friday the 13th</td>
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<tr>
<td>2010</td>
<td>To compare different teaching methods to 3rd year medical students in ACLS (Advanced Cardiac Life Support).</td>
</tr>
<tr>
<td>2010</td>
<td>Predictive value of Anti Mullerian Hormone on the Number of oocytes retrieved, Fertilization rate, Pregnancy rate, Live Birth rates and Embryo Quality relative to Day 3 FSH and Age</td>
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<tr>
<td>2010</td>
<td>The Influence of Severe Teratozoospermia on Pronuclear Pattern, Embryonic Cleavage and Genomic Activation in ICSI Cycles Pattern, Embryonic Cleavage and Genomic Activation in ICSI Cycles</td>
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<tr>
<td>2010</td>
<td>Comparing Embryo Day of Transfer with Primary Outcomes at Pacific Fertility IVF Center</td>
</tr>
<tr>
<td>2010</td>
<td>Use of ivermectin as an anti-tick agent in humans</td>
</tr>
<tr>
<td>2010</td>
<td>Empathy Training for a Family Medicine Clerkship: A Pilot Training Program at Eastern Virginia medical School</td>
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</table>
Appendix Y

MPH Program Alumni Survey Report

2. Please specify which track you completed in the MPH program:

<table>
<thead>
<tr>
<th>Track</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>General MPH</td>
<td>3.85%</td>
</tr>
<tr>
<td>Epidemiology</td>
<td>69.23%</td>
</tr>
<tr>
<td>Health Management / Policy</td>
<td>26.92%</td>
</tr>
<tr>
<td>Environmental Health</td>
<td>0.00%</td>
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</table>

Count: 26

3. What is your highest level of education?

<table>
<thead>
<tr>
<th>Level</th>
<th>Percentage</th>
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</thead>
<tbody>
<tr>
<td>Post-Doctorate</td>
<td>3.85%</td>
</tr>
<tr>
<td>M.D. / Ph.D. / D.O.</td>
<td>23.08%</td>
</tr>
<tr>
<td>Masters (MPH or other)</td>
<td>73.08%</td>
</tr>
</tbody>
</table>

Count: 26
4. What was your primary goal in earning an MPH?

- Prepare for a new career in public health: 44.00%
- Prepare for a new career other than in public health: 8.00%
- Develop my existing skills in the field of public health and research, and increase possibilities for promotion in the field: 36.00%
- Improve my chances for admission into medical school: 4.00%
- Continue into a Ph.D., Dr.P.H., or other doctoral program (non-MD program): 8.00%

Count: 25

5. Has your MPH degree helped you to achieve this goal?

- Yes: 92.31%
- No: 7.69%

Count: 26
6. If you started a new career in Public Health because of the MPH degree, how long did it take you to obtain this new job after completing this degree?

- I already had the job at the time my MPH degree was completed: 45.83%
- 0 to 2 months: 8.33%
- 3 to 5 months: 12.50%
- 6 to 11 months: 16.67%
- 1 to 2 years: 4.17%
- > 2 years: 12.50%
- Count: 24

7. If you did not start a new career in Public Health because of the MPH degree, did you obtain a promotion because you earned this degree?

- Yes: 19.23%
- No: 11.54%
- Does not apply: 69.23%
- Count: 26
8. If you were employed in the Health Professions, prior to earning your degree, which of the following categories best describes that position? *

- Nonprofit: 19.23%
- Health Care: 46.15%
- Private Practice: 3.85%
- Non-Health Related: 0.00%
- Proprietary (private / corporate): 3.85%
- Further Education: 3.85%
- Self-employed: 0.00%
- N/A. I did not hold existing employment, prior to earning my degree: 23.08%

Count: 26

9. Which one job category best describes your current position? *

- Nonprofit: 19.23%
- Health Care: 42.31%
- Private Practice: 0.00%
- Non-Health Related: 0.00%
- Proprietary (private / corporate): 11.54%
- Further Education: 11.54%
- Self-employed: 0.00%
- Not currently employed: 15.38%

Count: 26
Appendix Y

MPH PROGRAM 2010 ALUMNI SURVEY REPORT

Epidemiology

- Very Useful: 53.85%
- Somewhat Useful: 38.46%
- Not Very Useful: 3.85%
- Not At All Useful: 3.85%
- N/A: 0.00%

Count: 26
Mean: 1.58

Health Management

- Very Useful: 30.77%
- Somewhat Useful: 53.85%
- Not Very Useful: 11.54%
- Not At All Useful: 0.00%
- N/A: 3.85%

Count: 26
Mean: 1.80

Biostatistics

- Very Useful: 50.00%
- Somewhat Useful: 38.46%
- Not Very Useful: 7.69%
- Not At All Useful: 3.85%
- N/A: 0.00%

Count: 26
Mean: 1.65
Environmental Health

<table>
<thead>
<tr>
<th>Rating</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Very Useful</td>
<td>26.92%</td>
</tr>
<tr>
<td>Somewhat Useful</td>
<td>50.00%</td>
</tr>
<tr>
<td>Not Very Useful</td>
<td>15.38%</td>
</tr>
<tr>
<td>Not At All Useful</td>
<td>7.69%</td>
</tr>
<tr>
<td>N/A</td>
<td>0.00%</td>
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<tr>
<td>Count</td>
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<td>Mean</td>
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Mean: 2.04

Health Behavior & Education

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<tr>
<td>Very Useful</td>
<td>46.15%</td>
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<tr>
<td>Somewhat Useful</td>
<td>38.46%</td>
</tr>
<tr>
<td>Not Very Useful</td>
<td>15.38%</td>
</tr>
<tr>
<td>Not At All Useful</td>
<td>0.00%</td>
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<tr>
<td>N/A</td>
<td>0.00%</td>
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<tr>
<td>Count</td>
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<td>Mean</td>
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Mean: 1.69

Research Methods

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<td>Very Useful</td>
<td>42.31%</td>
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<td>Somewhat Useful</td>
<td>53.85%</td>
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<td>Not Very Useful</td>
<td>0.00%</td>
</tr>
<tr>
<td>Not At All Useful</td>
<td>0.00%</td>
</tr>
<tr>
<td>N/A</td>
<td>3.85%</td>
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<td>Count</td>
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<tr>
<td>Mean</td>
<td>1.56</td>
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Mean: 1.56
Appendix Y

MPH PROGRAM 2010 ALUMNI SURVEY REPORT

Communication & Informatics

- Very Useful: 34.62%
- Somewhat Useful: 38.46%
- Not Very Useful: 11.54%
- Not At All Useful: 7.69%
- N/A: 7.69%
- Count: 26
- Mean: 1.92

Diversity & Culture

- Very Useful: 16.00%
- Somewhat Useful: 44.00%
- Not Very Useful: 20.00%
- Not At All Useful: 0.00%
- N/A: 20.00%
- Count: 25
- Mean: 2.05

Leadership

- Very Useful: 34.62%
- Somewhat Useful: 34.62%
- Not Very Useful: 15.38%
- Not At All Useful: 0.00%
- N/A: 15.38%
- Count: 26
- Mean: 1.77
Appendix Y

MPH PROGRAM 2010 ALUMNI SURVEY REPORT

Professionalism

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<tr>
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<tr>
<td>Somewhat Useful</td>
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<td></td>
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<tr>
<td>Not Very Useful</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not At All Useful</td>
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<td></td>
</tr>
<tr>
<td>N/A</td>
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34.62%  42.31%  11.54%  11.54%  0.00%  1.65%

Program Planning

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<tr>
<td>Somewhat Useful</td>
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<td></td>
</tr>
<tr>
<td>Not Very Useful</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not At All Useful</td>
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<tr>
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34.62%  57.69%  3.85%  3.85%  0.00%  1.77%

Public Health Biology

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<tbody>
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<tr>
<td>Somewhat Useful</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not Very Useful</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Not At All Useful</td>
<td></td>
<td></td>
</tr>
<tr>
<td>N/A</td>
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</table>

16.00%  28.00%  36.00%  0.00%  20.00%  2.25%
Appendix Y

MPH PROGRAM 2010 ALUMNI SURVEY REPORT

Systems Thinking

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<tr>
<th>Rating</th>
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<tr>
<td>Somewhat Useful</td>
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</tr>
<tr>
<td>Not Very Useful</td>
<td>7.69%</td>
</tr>
<tr>
<td>Not At All Useful</td>
<td>0.00%</td>
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<tr>
<td>N/A</td>
<td>23.08%</td>
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Count: 26
Mean: 1.80

Overall MPH Program

<table>
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<tr>
<td>Very Useful</td>
<td>46.15%</td>
</tr>
<tr>
<td>Somewhat Useful</td>
<td>53.85%</td>
</tr>
<tr>
<td>Not Very Useful</td>
<td>0.00%</td>
</tr>
<tr>
<td>Not At All Useful</td>
<td>0.00%</td>
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<tr>
<td>N/A</td>
<td>0.00%</td>
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</table>

Count: 26
Mean: 1.54

11. Would you recommend this MPH program to others?

<table>
<thead>
<tr>
<th>Response</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>Yes</td>
<td>57.69%</td>
</tr>
<tr>
<td>No</td>
<td>3.85%</td>
</tr>
<tr>
<td>Maybe</td>
<td>38.46%</td>
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</tbody>
</table>

Count: 26
Appendix Z

Peer-Reviewed Publications:
Eastern Virginia Medical School
Primary and Secondary Faculty
and
Old Dominion University
Faculty
A. David Matson

2007:


2008:


2009:

Appendix Z


B. Hind Baydoun

2007:


2008:


2009:


Appendix Z


C. Yueqin Zhao

2007:


2009:


Appendix Z

Peer-Reviewed Publications
EVMS Secondary Faculty
August 2011

A. Ana Colon

2007:


2009:


B. Berhanu Mengistu

2007:


2008:


2009:

Appendix Z

C. Fran Butterfoss

2008:


2009:


D. Hua Liu

2007:


2. Weng, Q., H. Liu and D. Lu. 2007. Assessing the effects of land use and land cover patterns on thermal conditions using landscape metrics in city of Indianapolis, United States. Urban Ecosystems, 10(2), 203-219

2008:


2009:

Appendix Z


Appendix Z

Peer-Reviewed Publications
ODU Faculty
August 2011

A. Andrew Balas

2008:


2009:


B. James Blando

2007:


Appendix Z


2008:


2009:


C. Anna Jeng

2007:


2008:


D. James Neff

2008:

2007:


Appendix Z


2008:


Appendix Z


2009:

Appendix Z


Appendix Z

F. Mariana Szklo-Coxe

2007:


2008:


G. Harry Zhang

2007:


Appendix Z

2008:


2. Elmer Abbo, Qi Zhang, Martin Zelder, Elbert Huang. 2008. “The Increasing Number of Clinical Items Addressed During the Time of Adult Primary Care Visits” Journal of General Internal Medicine; 23: 2058-2065. (Impact factor: 3.01)


2009:


The Community Practicum course provides students with real-world experience, with direction and guidance from a preceptor at the practicum site and an MPH faculty advisor. Practicum projects provide significant contributions to MPH Program research and service efforts at the community, regional and international levels.

### PRACTICUM PROJECTS – Epidemiology and Health Management/Policy: Class of 2008

<table>
<thead>
<tr>
<th>NAME</th>
<th>TRACK</th>
<th>PRACTICUM SITE</th>
<th>PRECEPTOR</th>
<th>PROJECT</th>
<th>FACULTY ADVISOR</th>
</tr>
</thead>
<tbody>
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<td>Joko Abubakar</td>
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<td>Navy Medical Center-Portsmouth</td>
<td>CDR Danny Denton, MSC, USN</td>
<td>Naval Branch Medical Clinic Appointment Booking: Comparison of Appointment Types and No-Shows</td>
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<td>Rex Anson-Dwamena</td>
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<td>Strelitz Diabetes Institute</td>
<td>Henri Parsons, PhD</td>
<td>Automated Telephone Disease Management in Patients With Type 2 Diabetes in the Hampton Roads Area</td>
<td>David O. Matson, MD, PhD</td>
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<td>Tony Barkey</td>
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<td>Virginia Beach Department of Public Health</td>
<td>Rebecca Sullivan Payne, MPH Statistical Analyst Sr.</td>
<td>Trend Analysis of the Virginia Beach Community Health Assessment</td>
<td>Kay Cherry, MS, RN</td>
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<td>Robert Bartholomew</td>
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<td>LCDR David Collins, MSC, USN, and CDR Andrea Parodi, NC, USN</td>
<td>Analysis of the factors affecting use and satisfaction with the electronic health record system within the Department of Pediatrics at Naval Medical Center Portsmouth</td>
<td>David O. Matson, MD, PhD</td>
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<td>Luarnie Bermudo</td>
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<td>Navy Environmental Health Center (NEHC) Portsmouth</td>
<td>Christopher Rennix, PhD</td>
<td>Determining the Burden of Injury Among Marine Recruits During Basic Training</td>
<td>Yueqin Zhao, PhD</td>
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<td>Elizabeth Carretta</td>
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<td>David H. Trump, MD, MPH</td>
<td>Analysis of Asthma in the Peninsula Health District</td>
<td>Yueqin Zhao, PhD Kay Cherry, MS, RN</td>
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<td>Candice Driskell, M.S.,R.N.,C.C.M. Executive Director</td>
<td>A Description of After Hours Call Center Service Models for Providing Medical Consultation and Guidance in the Greater Hampton Roads</td>
<td>David O. Matson, MD, PhD</td>
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<td>Andrew Curtis</td>
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<td>LogistiCare</td>
<td>Mary Eaglesfield Director of Operations, Regions 4, 5/6 and 7 LogistiCare Solutions LLC-Virginia Operations Norfolk, VA</td>
<td>Real and Perceived Barriers to Rural Medicaid Transportation</td>
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<td>Ellen Dieujuste</td>
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<td>Lachelle Gray, MPA, VCO, Administrative Support Coordinator</td>
<td>Community Needs Assessment: Mapping Areas of Health Deficiencies in the City of Chesapeake</td>
<td>Jeffrey A. Johnson, MPA</td>
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<td>Mark Eakes</td>
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<td>Presbyterian Hospital of Kasai</td>
<td>Leon Mubikayi, MD AND David O. Matson, MD, PhD, MD, PhD</td>
<td>Evaluation of the efficacy of sulfadoxine-pyrimethamine in the prevention of transmission of malaria from the mother to the infant</td>
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<td>Bette Brocke, RD</td>
<td>The Nutrition Project for Chesapeake Children</td>
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<td>David O. Matson, MD, PhD, MD, PhD</td>
<td>Relationship of Diagnostic Test Utilization to Cost of Care for Patients with Acute Gastroenteritis Caused by Rotavirus, Calicivirus, and Astrovirus Care</td>
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<td>Lake Taylor Transitional Care Hospital (LTTCH)</td>
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<td>From the Classroom to the Boardroom</td>
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<td>Virginia Beach Health District-Environmental Health</td>
<td>Frank J. Scanlon, MPA, Environmental Health Manager</td>
<td>Multilingual Food Safety Tool Used to Educate Food Service Employees at Restaurants</td>
<td>David O. Matson, MD, PhD, Kay Cherry, MS, RN, MS</td>
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<td>Susan Hinegardner</td>
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<td>Navy Medical Center-Portsmouth</td>
<td>CDR Michael Crichi, MSC, USN</td>
<td>Development of an emergency plan for Naval Hospital Portsmouth</td>
<td>Donald Buckley, PhD, LFACHE, Kay Cherry, MS, RN</td>
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<td>Jessica Hohman</td>
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<td>Navy Environmental Health Center (NEHC) Portland</td>
<td>John G. Muller, MD, MC, USN</td>
<td>Database Validation for the Military Thyroid Cancer Cases</td>
<td>Gavin Welch, PhD, Kay Cherry, MS, RN</td>
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<td>Louise Lockett</td>
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<td>City of Norfolk, Department of Recreation, Parks &amp; Open Spaces</td>
<td>Ann Gastoukian Division Head, Recreation and Leisure Activities, City of Norfolk, Department of Recreation, Parks &amp; Open Spaces</td>
<td>Improving Youths’ Physical Activity Through Recreation Center Programming</td>
<td>Donald Buckley, PhD, LFACHE</td>
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<td>Leonore Okwara</td>
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<td>Kay Cherry, MS, RN</td>
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<td>Tasha Pounds</td>
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<td>Evaluation of the Healthy Generation Health Promoter Program: A Measure of the Success of Community Lay Health Advisors</td>
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<td>Jay Reyes</td>
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<td>Assessment of Issues and Concerns of Health Care Professionals Regarding Malpractice and Liability Coverage for Providing Charitable Care</td>
<td>Richard D. Vroman, MS</td>
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<td>Bart Rodriguez</td>
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<td>Impact of HIV Serostatus in Comparison to the Navy’s Physical Readiness Test</td>
<td>Donald Buckley, PhD, LFACHE Kay Cherry, MS, RN</td>
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<td>Kelly Sullivan</td>
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<td>Evaluation of Online Educational Tool for Healthcare Providers Regarding Clinical Treatment of Possible Rabies Exposure</td>
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<td>Amanda Steeves</td>
<td>HM</td>
<td>The Re-design of the Bloodborne Pathogens Training on Blackboard at Eastern Virginia Medical School in Norfolk, Virginia</td>
<td>Donald Buckley, PhD, LFACHE</td>
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<td>Blake Towns</td>
<td>HM</td>
<td>Analysis of the factors affecting use and satisfaction with the electronic health record system within the Department of Pediatrics at Naval Medical Center Portsmouth</td>
<td>Kay Cherry, MS, RN</td>
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### Appendix AA

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<th>NAME</th>
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<td>Ellie Ventura</td>
<td>HM</td>
<td>Navy Environmental Health Center (NEHC) Portsmouth</td>
<td>Paul D. Rockswold, MD, MPH CDR, MC, USN</td>
<td>Screening Protocol for Host Country Nationals on U.S. Military Bases in Afghanistan</td>
<td>Kay Cherry, MS, RN</td>
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<td>John Ventura</td>
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<td>Paul D. Rockswold, MD, MPH CDR, MC, USN</td>
<td>Screening Protocol for Host Country Nationals on U.S. Military Bases in Afghanistan</td>
<td>Kay Cherry, MS, RN</td>
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**PRACTICUM PROJECTS – Epidemiology and Health Management/Policy: Class of 2009**

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<td>Victoria Harris</td>
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<td>Access Partnership</td>
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<td>Increasing Access to Diabetes Education: Externship Experience at Access Partnership</td>
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<td>Michelle Smith</td>
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<td>Candice Driskell, M.S., R.N., C.C.M. Executive Director</td>
<td>An Externship at Access Partnership</td>
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<td>Andrea Gutnick</td>
<td>HM</td>
<td>Alzheimer’s Association</td>
<td>Patricia Lacy, MBA, Director of Education &amp; Family Services</td>
<td>Support Group Criteria Assessment for the Alzheimer’s Association</td>
<td>Donald Buckley, PhD, LFACHE</td>
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<td>Andria Tatem</td>
<td>HM</td>
<td>American Cancer Society</td>
<td>Colleen Lucas, Regional Mission Delivery Director, Region 7, American Cancer Society</td>
<td>Identifying the barriers that prevent African-American and Hispanic women from obtaining preventive breast and cervical cancer screenings</td>
<td>Kay Cherry, MS, RN</td>
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<tr>
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<td>Jessica Dail</td>
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<td>Chesapeake Health District</td>
<td>Lisa Engle, MPH, District Epidemiologist</td>
<td>Evaluating geographical patterns of Chlamydia trachomatis and Neisseria gonorrhoeae through the utilization of a geographic information system to determine primary focus areas for prevention methods</td>
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<td>Kimberly Cole</td>
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<td>Chesapeake Health District</td>
<td>Jerry E., Strohkor, MD, MPH</td>
<td>Impact of Contact Investigation on Neisseria Gonorrhoea Reinflection Rates in Chesapeake, VA</td>
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<td>David MacLaurin</td>
<td>HM MD/MPH</td>
<td>Congo Project</td>
<td>David O. David O. Matson, MD, PhD, MD, PhD</td>
<td>Household Survey of Malnutrition and Moringa oleifera Tree Location in the Four Villages of Western Kasai, DRC</td>
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<td>Staysi Blunt</td>
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<td>EVMS AIDS Resource Center</td>
<td>Tanya K. Kearney, MPA, Director</td>
<td>A Peer assisted approach to HIV/AIDS Treatment Adherence</td>
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<td>Sary Nicole Baker</td>
<td>HM</td>
<td>EVMS AIDS Resource Center</td>
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<td>Examining the Effects of Medical Case Managers on Medication Adherence of HIV clients in a Treatment Adherence Program at Three Rivers Health District and Eastern Shore Health District</td>
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<td>Bethrand Ugwu</td>
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<td>EVMS AIDS Resource Center</td>
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<td>The resurgence of syphilis in eastern region of Virginia: A project at EVMS AIDS Resource Center</td>
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Yueqin Zhao, PhD
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<tr>
<th>Ashley Augustus</th>
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<th>Consortium for Infant and Child Health</th>
<th>Taegen McGowan, MPH/Amy Paulson, BS</th>
<th>CINCH: Connecting Communities, Addressing Children’s Health in Hampton Roads</th>
<th>Kay Cherry, MS, RN</th>
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<td>Anin Auandee</td>
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<td>Externship Experience with CINCH</td>
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<td>Joseph Andrew Webb</td>
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<td>HIV/AIDS-Non-profit=Self</td>
<td>Donald Buckley, PhD, LFACHE, PhD</td>
<td>Banding Together Youth Center</td>
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<td>Nicholas Sicignano</td>
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<td>Jones Institute for Reproductive Medicine, EVMS</td>
<td>Helena Russell, MS</td>
<td>Cross-Sectional Analysis of In Vitro Fertilization Young Adults and Asthma</td>
<td>Hind Baydoun, PhD</td>
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<td>Jessica Williams</td>
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<td>Navy and Marine Corps Public health Center (NMCPHC, previously NEHC)</td>
<td>Cynthia Judy, CDR, NC, USN Head, Health Promotion and Wellness</td>
<td>NMCPHC Tobacco Metric Development: “Screens vs. Vitals”</td>
<td>Hind Baydoun, PhD</td>
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<td>Hilary Polk</td>
<td>HM</td>
<td>National Oceanic and Atmospheric Administration (NOAA)</td>
<td>LCDR Les Cruise, NOAA</td>
<td>Public Health Policy on Ship Sanitation for the National Oceanic and Atmospheric Administration</td>
<td>Richard D. Vroman, MS</td>
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<td>Matthew Herman</td>
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<td>Peninsula Health District</td>
<td>Bettina Velena-Lam, MPH</td>
<td>Coalition Program Management and Evaluation of Heal-thy Generations, Community Coalition on Southeast Communities in Newport News, Virginia</td>
<td>Richard D. Vroman, MS</td>
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<td>Ashley Self</td>
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<td>EVMS/Peru Project</td>
<td>David O. Matson, MD, PhD, MD, PhD</td>
<td>Evaluating the Effectiveness of Short Term Medical Missions: An Example from Peru</td>
<td>Hind Baydoun, PhD</td>
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## PRACTICUM PROJECTS – Epidemiology and Health Management/Policy: Class of 2010

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<td>Chukwuma Ifeanyi</td>
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<td>Chesapeake Free Clinic</td>
<td>Cathy Revell, RN</td>
<td>Study of compliance with clinic directed tests</td>
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<td>Sarah DiCarlo</td>
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<td>Chesapeake Health District</td>
<td>Robert Rendin, Director of Emergency Planning</td>
<td>Determine the most effective approach to emergency planning for an anthrax attack</td>
<td>Kay Cherry, MS, RN</td>
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<td>Michael Chijioke</td>
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<td>Consortium for Infant and Child Health (CINCH)</td>
<td>Amy Paulson, BS</td>
<td>Asthma Coordinator.</td>
<td>Richard D. Vroman, MS, MS</td>
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<td>Paige Birdsall</td>
<td>EPI</td>
<td>Department of Family and Community Medicine EVMS</td>
<td>David O. Matson, MD, PhD, MD</td>
<td>Design and implement a project to determine barriers to MDs identifying obesity</td>
<td>Yueqin Zhao, PhD</td>
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<td>Manuel Olivares</td>
<td>HM</td>
<td>Dept of Family and Community Medicine EVMS</td>
<td>Agatha Parks-Savage, MD</td>
<td>How does the use of EHR’s affect patient – provider communications?</td>
<td>R. Clinton Crews, MPH</td>
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<td>Patricia Miller</td>
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<td>Dept of Pediatrics EVMS</td>
<td>Erin McGuire, MS</td>
<td>Determine effectiveness of interventions for Adverse Drug Events (ADE)</td>
<td>Yueqin Zhao, PhD</td>
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<td>Natalie Lee</td>
<td>HM</td>
<td>Div of Pediatric Hospital Medicine CHKD</td>
<td>Brian Fine, MD</td>
<td>Participate in the formation of a non-profit health policy education center</td>
<td>Richard D. Vroman, MS, MS</td>
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<td>Adrienne Rust-Chester</td>
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<td>Div of Pediatric Hospital Medicine, CHKD</td>
<td>Assist in updating pediatric inpatient evidence based order sets</td>
<td>R. Clinton Crews, MPH</td>
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<td>Eric Chow</td>
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<td>Obstetric fistula in the Congo</td>
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<td>Peru – ID diagnoses that can be evaluated for outcomes on a future visit</td>
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<td>Serge Tankeu</td>
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<td>EVMS MPH Program</td>
<td>Parents’ awareness of nutritional issues related to childhood obesity in Suffolk</td>
<td>Kay Cherry, MS, RN</td>
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<td>Stephanie Appling</td>
<td>HM</td>
<td>Executive Evaluation Center and Dedicated Care Center, Sentara Medical Group.</td>
<td>Kim Hartman</td>
<td>Efficacy of elective tests</td>
<td>Richard D. Vroman, MS</td>
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<td>Rex Biedenbender</td>
<td>EPI</td>
<td>Glennon Center for Geriatrics, EVMS</td>
<td>Thresholds and Barriers to Screening and Evaluation of Cognitive Decline in Older Adults: A Physician’s Perspective</td>
<td>Yueqin Zhao, PhD</td>
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<td>Leonard Emuren</td>
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<td>Infant mortality rate reduction project</td>
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<td>Luis Rodriguez</td>
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<td>Hampton Roads Metropolitan Medical Response System</td>
<td>Determine emergency response requirements of special needs person</td>
<td>R. Clinton Crews, MPH</td>
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<td>Natasha Wiggins</td>
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<td>What is the relationship of PCOS to heart disease?</td>
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<td>Emergency management plan for readiness requirements for shore based populations</td>
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<td>Jennifer McLeod</td>
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<td>Navy-USMC Public Health Center</td>
<td>Robert MacDonald, MS, CHES</td>
<td>Measure awareness and challenges among Navy clinicians of sexual health promotion policies and services</td>
<td>Yueqin Zhao, PhD</td>
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<td>Navy Medical Center Portsmouth</td>
<td>CDR Andrea Parodi, NC, USN (PhD)</td>
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<td>Patient safety</td>
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<td>Navy-USMC Public Health Center</td>
<td>Paul D. Rockswold, MD, MPH CAPT, NC, USN (PhD)</td>
<td>Development of diabetes management related metrics to support health promotion program</td>
<td>David O. Matson, MD, PhD</td>
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<td>Suparna Navale</td>
<td>EPI</td>
<td>Norfolk Public Health District</td>
<td>Dwayne Merritt</td>
<td>Community needs assessment</td>
<td>Hind Baydoun, PhD</td>
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<td>Amir Abdolahi</td>
<td>EPI</td>
<td>St. Mary’s Home for Disabled Child</td>
<td>Carla Aquino</td>
<td>Study communicative diseases (e.g. staph) within pediatric long-term care facilities for children with disabilities and how they can be controlled.</td>
<td>Hind Baydoun, PhD</td>
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<td>Virginia Beach Health District</td>
<td>Rebecca Sullivan Payne, MPH Statistical Analyst Sr.</td>
<td>Conduct an analysis of prevention programs in Virginia Beach</td>
<td>R. Clinton Crews, MPH</td>
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<td>Amber Richards</td>
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<td>Western Tidewater Health District</td>
<td>Lisa McCoy, MD, MPH</td>
<td>Western Tidewater Bioterrorism Preparedness</td>
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### PRACTICUM PROJECTS – Environmental Health and Health Promotion: Class of 2008

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### PRACTICUM PROJECTS – Environmental Health and Health Promotion: Class of 2009

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## Appendix AA

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<td>Navy Medical Center, Portsmouth, VA</td>
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## CAPSTONE PROJECTS – Environmental Health and Health Promotion: Class of 2008
(Capstone was originally one of the experiential learning courses for the Environmental Health and Health Promotion Tracks. As of 2010, the course is not offered to new students.)

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## CAPSTONE PROJECTS – Environmental Health and Health Promotion: Class of 2009

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### Appendix AA

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<td>Fish consumption, n-3 fatty acid intakes and their association with depressive symptoms among US adults: HANDLS study.</td>
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<td>Gender and age disparities in the prevalence of Chlamydia infection among sexually active adults in the United States.</td>
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<td>Associations of serum vitamin A and carotenoid levels with markers of prostate cancer progression among US men</td>
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<td>The Evolution of Medical Modeling and Simulation</td>
<td>MODSIM World 2008 Conference and Exposition</td>
<td>Virginia Beach, VA</td>
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<td>The Evolution of Medical Simulators</td>
<td>Medicine Meets Virtual Reality 2009</td>
<td>Long Beach, CA</td>
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<tr>
<td>Telemedicine in the Acute Care Setting: Is It Ready for Prime Time?</td>
<td>Trauma, Critical Care and Acute Care Surgery 2009 – Point/Counterpoint XXVII American College of Surgeons Committee on Trauma</td>
<td>Baltimore, MD</td>
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<tr>
<td>Imperatives in the Development of Medical Simulations</td>
<td>Grand Challenges in Modeling and Simulation 2009 (GCMS ’09)</td>
<td>Istanbul, Turkey</td>
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<tr>
<td>Strategic Decision-Making</td>
<td>2009 Annual Meeting of the Association of Academic Health Centers</td>
<td>Chicago, IL</td>
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<tr>
<td>Benchmark Your Plans for Leading-Edge Medical Education Facilities</td>
<td>TRADELINE, Inc. Academic Medical and Health Science Centers 2009 Conference</td>
<td>Boston, MA</td>
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<td>Modeling and Simulation in Health and Medicine</td>
<td>Virginia Summit on Modeling and Simulation</td>
<td>Virginia Beach, VA</td>
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<tr>
<td>Preparing Your Compliance Certification Report</td>
<td>2009 Annual Meeting of the Commission on Colleges of the Southern Association of Colleges and Schools</td>
<td>Atlanta, GA</td>
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<tr>
<td>EVMS 2.0: Technology and the QEP</td>
<td>2009 Annual Meeting of the Commission on Colleges of the Southern Association of Colleges and Schools</td>
<td>Atlanta, GA</td>
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<tr>
<td>The Challenges of Simulation and Other Emerging Technologies for Medical and Surgical Education</td>
<td>EVMS Department of Surgery Grand Rounds</td>
<td>Norfolk, VA</td>
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</tbody>
</table>
### Appendix BB

<table>
<thead>
<tr>
<th>Faculty Member/Presentation Title</th>
<th>Organization</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>C Donald Combs (cont’d)</strong></td>
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<tr>
<td>An Analysis of Trends in the Medical Modeling and Simulation Research Literature</td>
<td>International Conference of the Society for Medical Innovation and Technology, 2008</td>
<td>Vienna, Austria</td>
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<tr>
<td>Assessing Emerging Technologies in Medicine and Health</td>
<td>International Policy Summer Institute, 2007</td>
<td>Amalfi, Italy</td>
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<tr>
<td>Analyzing the MMVR and the MMSD Research Spaces: Understanding Rapid Growth</td>
<td>Annual Conference, Medicine Meets Virtual Reality, 2007</td>
<td>Long Beach, CA</td>
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<tr>
<td>Medical Modeling and Simulation at Eastern Virginia Medical School and Old Dominion University</td>
<td>Virginia Congressional Delegation</td>
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<table>
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<tr>
<th>Kay Cherry</th>
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<tbody>
<tr>
<td>Testing a Multi-lingual training tool to educate food service workers regarding food safety</td>
<td>136th Annual Meeting of the American Public Health Association, 2008</td>
<td>San Diego, CA</td>
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<td>Developing the Suffolk Community Garden Project</td>
<td>Holland District Ruritan Clubs, Zone 1, District Meeting, 2009</td>
<td>Suffolk, VA</td>
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<tr>
<td>Developing the Suffolk Community Garden Project</td>
<td>South Hampton Roads Resource Conservation and Development Council, 2009</td>
<td>Smithfield, VA</td>
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<tr>
<td>Developing the Suffolk Community Garden Project</td>
<td>Clean Community Commission, 2009</td>
<td>Suffolk, VA</td>
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<td>Chorey Park Community Garden: A project of the Suffolk Partnership for a Healthy Community</td>
<td>Chorey Park residential evaluation of the community garden, 2009</td>
<td>Suffolk, VA.</td>
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<td>Suffolk Partnership for a Healthy Community: Suffolk Community Gardens</td>
<td>Suffolk Master Gardeners, 2010</td>
<td>Suffolk, VA</td>
</tr>
<tr>
<td>Faculty Member/Presentation Title</td>
<td>Organization</td>
<td>Location</td>
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<td>Kay Cherry (cont’d)</td>
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<tr>
<td>History and Community Impact: The Suffolk Community Garden System</td>
<td>Suffolk Partnership for a Healthy Community, Civic Recognition Program, 2010</td>
<td>Suffolk, VA</td>
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<tr>
<td>Utilizing a community garden project as a health change agent:</td>
<td>137th Annual Meeting of the American Public Health Association, 2008</td>
<td>Philadelphia, PA</td>
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<tr>
<td>Growing fruits and vegetables to grow a healthy community.</td>
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<tr>
<td>“Haiti: Emerging From Crisis”: Forum Moderator</td>
<td>Public Health Week forum, Eastern Virginia Medical School</td>
<td>Norfolk, VA</td>
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<tr>
<td>Development and Outcomes: First Year of the Suffolk Community Garden System</td>
<td>South Hampton Roads Resource Conservation and Development Council</td>
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<tr>
<td>Development and Outcomes: First Year of the Suffolk Community Garden System</td>
<td>Holland Ruritan Club, 2010</td>
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<td>Development and Outcomes: First Year of the Suffolk Community Garden System</td>
<td>Driver Ruritan Club, Suffolk VA, 2010</td>
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<td>Development and Outcomes: First Year of the Suffolk Community Garden System</td>
<td>Liberty Spring Ruritan Club, 2010</td>
<td>Suffolk, VA</td>
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<tr>
<td>Report to the Commission: Outcomes of the Community Garden Project</td>
<td>Clean Community Commission, 2010</td>
<td>Suffolk, VA</td>
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<tr>
<td>Development and Outcomes: First Year of the Suffolk Community Gardens</td>
<td>Eastover Wilroy Ruritan Club, 2010</td>
<td>Suffolk, VA</td>
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<tr>
<td>Seeding the Future: Suffolk Community Gardens</td>
<td>Obici Healthcare Foundation Diabesity Summit, 2011</td>
<td>Suffolk, VA</td>
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<tr>
<td>Plant and Play Strategies: The Suffolk Community Garden Project</td>
<td>WHRO and Virginia Interfaith Center for Public Policy – Community Summit to Combat Childhood Obesity, 2010</td>
<td>Suffolk, VA</td>
</tr>
</tbody>
</table>
### Clinton Crews

<table>
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<tr>
<th>Faculty Member/Presentation Title</th>
<th>Organization</th>
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<tr>
<td>Partners In Survival Workshop</td>
<td>Sisters Network Conference, 2007</td>
<td>Chicago, IL</td>
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<tr>
<td>Partners In Survival Workshop</td>
<td>Annual Conference for Young Women Affected by Breast Cancer, 2008</td>
<td>Jacksonville, FL</td>
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<tr>
<td>Surgical Assistant Education: Curriculum Issues</td>
<td>Association of Surgical Technologists Instructors Forum, 2008</td>
<td>Memphis, TN</td>
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<tr>
<td>About Men Against Breast Cancer’s Partners In Survival</td>
<td>Annual Breast Cancer Awareness Symposium, Naval Medical Center, 2007</td>
<td>Portsmouth, VA</td>
</tr>
<tr>
<td>Techniques for Training Male Caregivers</td>
<td>International Psycho-Oncology Society Psychosocial Academy and World Congress of Psycho-Oncology, University of Ferrara, 2007</td>
<td>Ferrara, Italy</td>
</tr>
</tbody>
</table>

### Holly Gaff

<table>
<thead>
<tr>
<th>Faculty Member/Presentation Title</th>
<th>Organization</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clinical and Economic Impact of Several Active Surveillance (AS) Strategies, Including Rapid PCR Testing, for Methicillin Resistant Staphylococcus aureus (MRSA) Control in Intensive Care Units (ICU)</td>
<td>Annual Scientific Meeting, Society for Healthcare Epidemiology of America, 2008</td>
<td>Orlando, FL</td>
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<tr>
<td>Results from a metapopulation model for Human Monocytic Ehrlichiosis</td>
<td>International Conference on Rickettsiae and Rickettsial Diseases, 2008</td>
<td>Marseille, France</td>
</tr>
</tbody>
</table>

### Hueiwang (Anna) Jeng

<table>
<thead>
<tr>
<th>Faculty Member/Presentation Title</th>
<th>Organization</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Polycyclic aromatic hydrocarbons and health effects</td>
<td>Seminar, Graduate Institute of Occupational Safety and Health, Kaohsiung Medical University, 2010</td>
<td>Kaohsiung, Taiwan</td>
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<tr>
<td>Impacts of particulate matter on oxidized lipids in endothelial cells</td>
<td>Annual Meeting, Association of Southeastern Biologists, 2010</td>
<td>Asheville, NC</td>
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<tr>
<td>Polycyclic aromatic hydrocarbons and male reproductive health</td>
<td>Seminar, School of Public Health, Tulane University, 2011</td>
<td>New Orleans, LA</td>
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<tr>
<td>Particulate Matter Induced Lipid Profile Alterations in Human Endothelial Cells</td>
<td>Oxidative Stress and Redox Biology, Society of Toxicology, 2011</td>
<td>Washington, DC</td>
</tr>
</tbody>
</table>
## Appendix BB

<table>
<thead>
<tr>
<th>Faculty Member/Presentation Title</th>
<th>Organization</th>
<th>Location</th>
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<tbody>
<tr>
<td><strong>Hueiwang (Anna) Jeng (cont’d)</strong></td>
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<tr>
<td>Sperm methylation and spermatogenesis</td>
<td>Annual Meeting, Association of Southeastern Biologists, 2011</td>
<td>Asheville, NC</td>
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<tr>
<td>Environmental Epidemiology on assessing the effect PAHs on male reproductive health</td>
<td>Conference, International Society for Environmental Epidemiology, 2011</td>
<td>Barcelona, Spain</td>
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<tr>
<td>Public Health in a Joint Environment</td>
<td>Armed Forces Public Health Conference, 2011</td>
<td>Hampton, VA</td>
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<td>Advanced Occupational Health Research</td>
<td>Taiwan Minister of Education, Kaohsiung Medical University, Taiwan, 2010</td>
<td>Kaohsiung, Taiwan</td>
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<td>Coal Plant and Health Impact</td>
<td>Hampton Roads Coal Plant Forum, 2010</td>
<td>Virginia Wesleyan College, Norfolk, VA</td>
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<tr>
<td>Climate Change and Public/Environmental Health</td>
<td>Annual Meeting, Sierra Club</td>
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<tr>
<td>David O. Matson</td>
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<tr>
<td>“Rotavirus Vaccines Update”</td>
<td>Boston Children’s Hospital Pediatric Noon Conference, 2007</td>
<td>Boston, MA</td>
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<tr>
<td>“Clinical Implications of Rotavirus Epidemiology and Immunology”</td>
<td>Dartmouth Hitchcock Medical Center, 2007</td>
<td>Manchester, NH</td>
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<td>“Clinical Implications of Rotavirus Epidemiology and Immunology”</td>
<td>Grand Rounds, Phoenix Children’s Hospital, 2008</td>
<td>Phoenix, AZ</td>
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<tr>
<td>Typhoid Mary: the first recognized asymptomatic typhoid carrier in North America”</td>
<td>Pediatric Noon Conference, Dartmouth-Hitchcock Medical Center, 2008</td>
<td>Lebanon, NH</td>
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<tr>
<td>“Rotavirus Vaccine Development, Efficacy, and Safety”</td>
<td>Portuguese Pediatric Society, 2009</td>
<td>Sintra, Portugal</td>
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<tr>
<td>Public Health Projects in International Resource-Poor Settings”, for National Medical Laboratory Professionals Week</td>
<td>Life Net Health, 2010</td>
<td>Virginia Beach, VA</td>
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<tr>
<td>“Rotavirus Diversity”</td>
<td>Japanese Pediatric Society, 2010</td>
<td>Tokyo, Japan</td>
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<tr>
<td>“Rotavirus Diversity”,</td>
<td>Pediatric Grand Rounds, University of West Virginia Medical Center, 2010</td>
<td>Morgantown, WV</td>
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<tr>
<td>Update on Rotavirus and HPV Vaccines</td>
<td>Annual Meeting, Project Immunize Virginia, 2006</td>
<td>Newport News, VA</td>
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<td>Update on New Vaccines</td>
<td>Grand Rounds, Riverside Medical Center, 2006</td>
<td>Newport News, VA</td>
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<td>Rotavirus</td>
<td>Best Practices in Pediatrics, Primary Care Network, 2006</td>
<td>Richardson, TX</td>
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<td>Rotavirus</td>
<td>Best Practices in Pediatrics, Primary Care Network, 2006</td>
<td>Los Angeles, CA</td>
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<tr>
<td>Rotavirus Disease and Its Prevention</td>
<td>Dr. R. Chinnock Memorial Lecture, Loma Linda Medical Center, 2007</td>
<td>Loma Linda, CA</td>
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<tr>
<td>Faculty Member/Presentation Title</td>
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<tr>
<td>Rotavirus Diversity</td>
<td>Society of Pediatric Osteopathy, 2011</td>
<td>Pittsburg, PA</td>
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<tr>
<td>RotaTeq®: ensure successful vaccination</td>
<td>symposium speaker, “New Vaccines in Children’s Protection”, European Academy of Pediatrics, 2006</td>
<td>Barcelona, Spain</td>
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<tr>
<td>Burden of rotavirus pediatric gastroenteritis and rationale for rotavirus vaccines: safety and efficacy of pentavalent rotavirus vaccine</td>
<td>Annual Meeting, Portuguese Pediatric Society, 2006</td>
<td>Agueda, Portugal</td>
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<tr>
<td>Pentavalent rotavirus vaccine reduced hospitalizations and emergency department visits for rotavirus Acute gastroenteritis: assessing robustness of the results</td>
<td>Annual Meeting, European Academy of Pediatrics, 2006</td>
<td>Barcelona, Spain</td>
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<tr>
<td>Efficacy of the pentavalent rotavirus vaccine (PRV) in subjects after 1 or 2 doses in the rotavirus efficacy and safety trial (REST).</td>
<td>Infectious Diseases Society of America Annual Meeting, 2006</td>
<td>Toronto, Canada</td>
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<td>Importance of human caliciviruses among hospitalized children in Hungary</td>
<td>Annual Meeting, Hungarian Society for Microbiology, 2006</td>
<td>Keszthely, Hungary</td>
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<td>Calicivirus (genus Vesivirus) associated with post-transfusion hepatitis</td>
<td>Annual Meeting, American Society for Virology, 2007</td>
<td>Corvallis, Oregon</td>
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<td>Automated calculation of follicular volumes using 3D sonography in women undergoing assisted reproduction: A prospective evaluation of a novel software</td>
<td>Annual Meeting, International Society of Ultrasound in Obstetrics and Gynecology, 2007</td>
<td>Florence, Italy</td>
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<tr>
<td>Clinical evaluation of a novel automated follicular assessment software in women undergoing controlled ovarian hyperstimulation for vitro fertilization using three dimensional sonography</td>
<td>American Society of Reproductive Medicine, 2007</td>
<td>Washington, DC</td>
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<tr>
<td>Automated calculation of ovarian follicular diameters using three dimensional sonography in women undergoing in vitro fertilization: a prospective evaluation of a novel software</td>
<td>American Society of Reproductive Medicine, 2007</td>
<td>Washington, DC</td>
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<tr>
<td>Efficacy of the Pentavalent Rotavirus Vaccine, RotaTeq®, between Doses: Potential Benefits of Early Protection.</td>
<td>Late Breaker Session, Pediatric Academic Societies Annual Meeting, 2008</td>
<td>Honolulu, HI</td>
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<tr>
<td>Efficacy of the Pentavalent Rotavirus Vaccine, RotaTeq®, between Doses: Potential Benefits of Early Protection</td>
<td>Europediatrics 2008</td>
<td>Istanbul, Turkey</td>
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<td>Scientific and financial collaboration by faith-based institutions in the Democratic Republic of Congo and a private medical school in the United States</td>
<td>Annual Meeting, Association of Departments of Family Medicine, 2009</td>
<td>Orleans, LA</td>
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</table>
### Appendix BB

<table>
<thead>
<tr>
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<tr>
<td><strong>David O. Matson (cont’d)</strong></td>
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<tr>
<td>Criteria for short-term international medical missions</td>
<td>Family Medicine Global Health Workshop, 2009</td>
<td>Denver, CO</td>
</tr>
<tr>
<td>Household survey of malnutrition and <em>Moringa oleifera</em> tree location in four villages of Western Kasai</td>
<td>Family Medicine Global Health Workshop, 2009</td>
<td>Denver, CO</td>
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<tr>
<td>Rotavirus: multiple serotypes and the argument for rotavirus vaccination</td>
<td>Roundtable, National Foundation for Infectious Diseases, 2007</td>
<td>New York, NY</td>
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<tr>
<td>Academic Partnership with Faith-based Organizations</td>
<td>Annual Meeting, Presbyterian Women, Presbytery of Eastern Virginia, 2010</td>
<td>Zuni, VA</td>
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<tr>
<th><strong>James Neff</strong></th>
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<tr>
<td>Concept Mapping vs. Confirmatory Factor Analysis Models of the Dimensionality of Faith Based Substance Abuse Treatment Programs</td>
<td>Annual Meeting, Addictions Health Services Research Conference, 2007</td>
<td>Athens, Georgia</td>
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<td>Longitudinal Predictors of Caregiving Type in Elderly Stroke Survivors</td>
<td>Annual Meeting, American Public Health Association, 2007</td>
<td>Washington, DC</td>
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<tr>
<td>Children's Role in Women’s Compliance in a Treatment Program for Substance Abuse</td>
<td>Annual Meeting of the Association for Psychological Sciences, 2008</td>
<td>Chicago, IL</td>
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<tr>
<td>Alcohol Use, Predisposing, Enabling, and Oral Health Need Variables as Predictors of Preventive and Emergency Dental Service Use: A Secondary Analysis of 2002 National Health Examination Survey Data</td>
<td>American Public Health Association, 2008</td>
<td>San Diego, CA</td>
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<tr>
<td>Predicting Oral Health Status: Examining Sociodemographic, Dental Service Access, Dental Service Utilization, and Alcohol Use Predictors in Adults</td>
<td>American Public Health Association, 2008</td>
<td>San Diego, CA</td>
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<tr>
<td>Factors Influencing Readiness to Adopt Dental Practice-Based Screening and Brief Intervention Protocols for Alcohol Abuse</td>
<td>Annual Meeting, Research Society on Alcoholism, 2009</td>
<td>San Diego, CA</td>
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</table>
## Appendix BB

<table>
<thead>
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<th>Faculty Member/Presentation Title</th>
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<td><strong>James Neff (cont’d)</strong></td>
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<tr>
<td>Use of ‘5A’ Preventive Practices (Ask, Advise, Assess, Assist, Arrange) for Tobacco and Alcohol Risk Reduction in Dental Practice Settings among Dentists and Dental Hygienists: Implications for Screening and Brief Interventions for Alcohol Abuse in Dental Practice</td>
<td>American Public Health Association, 2009</td>
<td>Philadelphia, PA</td>
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<tr>
<td>A Descriptive Study of Readiness to Adopt Screening and Brief Interventions for Alcohol Abuse in Dental Practice: Comparison of Dentists and Dental Hygienists/Assistants.</td>
<td>American Public Health Association, 2009</td>
<td>Philadelphia, PA</td>
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<tr>
<td>An SEM Analysis Predicting Current Use of Alcohol Screening and Brief Intervention Techniques in Dental Practice</td>
<td>Annual Meeting of the American Academy of Health Behavior, 2010</td>
<td>Clearwater Beach, FL</td>
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<tr>
<td>Using the Aday-Andersen Behavioral Model to Predict Oral Health Services Utilization</td>
<td>American Public Health Association, 2010</td>
<td>Denver, CO</td>
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<tr>
<td>Practitioner and Practice-Level Predictors of Initial Interest in Alcohol Screening and Brief Intervention Techniques in Dental Practice</td>
<td>Annual Meeting, Society for Behavioral Medicine, 2011</td>
<td>Washington, DC</td>
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<td><strong>Mariana Szklo-Coxe</strong></td>
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<td><strong>Longitudinal Relationship of Insomnia to Subsequent Trait-Anxiety</strong></td>
<td>Annual Sleep Meeting, Associated Professional Sleep Societies, 2010</td>
<td>San Antonio, TX</td>
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<td><strong>Chronic Insomnia and All Cause Mortality in the Wisconsin Sleep Cohort Stud</strong></td>
<td>Annual Sleep Meeting, Associated Professional Sleep Societies, 2010</td>
<td>San Antonio, TX</td>
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<td><strong>Qi Zhang</strong></td>
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<tr>
<td>Food Stamp Program Participation, Food Price, and Body Weight Status: New Findings</td>
<td>World Congress International Health Economics Association, 2007</td>
<td>Copenhagen, Denmark</td>
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<tr>
<td>An Integrated Research on Food Stamp Program Participation, Food Prices, and Bodyweight Status in the South</td>
<td>Southern Rural Development Center Grant Recipients Annual Meeting, 2007</td>
<td>Atlanta, GA</td>
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<tr>
<td>Impact of Local Food Prices on the Relationship between Food Stamp Program Participation and Body Weight Status among Adults in the South</td>
<td>Food Assistance and Nutrition Research Innovation and Development Grants in Economics (RIDGE) Conference, 2007</td>
<td>Washington, DC</td>
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<tr>
<td>Qi Zhang (cont’d)</td>
<td>Organization</td>
<td>Location</td>
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<tr>
<td>Socioeconomic Disparity in Health-Care Seeking Behavior among Chinese Women with Genitourinary Symptoms</td>
<td>Biennial Conference of the American Society of Health Economists, 2008</td>
<td>Durham, NC</td>
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<tr>
<td>Impact of Unhealthy Food Price on Food Stamp Program Participants’ Body Weight Status</td>
<td>Annual Conference of Western Economic Association International, 2008</td>
<td>Waikiki, HI</td>
</tr>
<tr>
<td>Effect of Food Prices on Dietary Intakes in US Food Stamp Program Eligible Populations</td>
<td>World Congress on Health Economics, International Health Economics Association, 2009</td>
<td>Beijing, China</td>
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<tr>
<td>Socioeconomic Disparities in Obesity</td>
<td>World Congress on Health Economics, International Health Economics Association, 2009</td>
<td>Beijing, China</td>
</tr>
<tr>
<td>Secular Trends in the Relationship between Food Stamp Program Participation and Body Weight Status among Low Income Population in U.S.</td>
<td>World Congress, International Union of Anthropological and Ethnological Sciences, 2009</td>
<td>Kunming, China</td>
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<tr>
<td>Intergenerational Distribution of Income and Obesity</td>
<td>Biennial Conference, American Society of Health Economists, 2010</td>
<td>Ithaca, NY</td>
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<tr>
<td>Health Outcomes and Behaviors in the Economic Recession</td>
<td>Biennial Conference, Hong Kong Economic Association, 2010</td>
<td>Tianjin, China</td>
</tr>
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<table>
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<tr>
<th>Yueqin Zhao</th>
<th>Organization</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Missed opportunity: Clinician recognition of overweight and obesity 10 years after the publication of NIH guideline</td>
<td>American Public Health Association, 2009</td>
<td>Philadelphia, PA</td>
</tr>
<tr>
<td>Levonorgestrel Effect on Vascular Endothelial Growth Factor (VEGF) and B-Fibroblast Growth Factor (B-FGF) in Serum, and Uterine Fluid, and Endometrial VEGF</td>
<td>Annual Meeting, American Society for Reproductive Medicine, 2009</td>
<td>Atlanta, GA</td>
</tr>
<tr>
<td>Household Survey of Malnutrition and Moringa oleifera Tree Location in Four Villages of Western Kasai</td>
<td>Family Medicine Global Health Workshop, 2009</td>
<td>Broomfield, CO</td>
</tr>
<tr>
<td>Application of Quadratic Entropy in measuring Dinosaur Biodiversity</td>
<td>Joint Statistical Meetings, 2009</td>
<td>Washington, DC</td>
</tr>
<tr>
<td>Implementing an anticoagulation clinic in the patient-centered medical home</td>
<td>Annual Meeting, Society of Teachers of Family Medicine, 2009</td>
<td>Denver, CO</td>
</tr>
<tr>
<td>Impact of polycystic ovary syndrome on selected indicators of in-vitro fertilization treatment outcomes</td>
<td>Annual Congress, Women’s Health, 2009</td>
<td>Williamsburg, VA</td>
</tr>
<tr>
<td>Expectations of benefit in survival in patients choosing treatment for localized prostate cancer</td>
<td>Biennial Cancer Survivorship Research Conference, 2008</td>
<td>Atlanta, GA</td>
</tr>
<tr>
<td>Variations in Asthma Hospitalizations in Eastern Virginia</td>
<td>American Public Health Association, 2008</td>
<td>San Diego, CA</td>
</tr>
<tr>
<td>Performance in Repeated Driving Simulator Tests - Rural Drive.</td>
<td>Annual, Assoc. Professional Sleep Societies, 2007</td>
<td>Minneapolis, MN</td>
</tr>
</tbody>
</table>
### 2006 – 2011 Faculty Consultation and Technical Assistance

<table>
<thead>
<tr>
<th>Faculty Name</th>
<th>Role</th>
<th>Organization Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>Andrew Balas</td>
<td>Member</td>
<td>Board of Directors, Allied Health Research Institute St. Louis MO, 2007-present</td>
</tr>
<tr>
<td>Andrew Balas</td>
<td>Conference Chair</td>
<td>The ePatient: Digital and Genomic Technologies for Personalized Health Care”, Friends of the National Library of Medicine NIH, 2010</td>
</tr>
<tr>
<td>Andrew Balas</td>
<td>Conference Chair</td>
<td>Personal Electronic Health Records: From Biomedical Research to People’s Health” Friends of the National Library of Medicine NIH, 2009</td>
</tr>
<tr>
<td>Andrew Balas</td>
<td>Project Director</td>
<td>Conference on personal electronic health records, from biomedical research to individual health, 2009 Robert Wood Johnson Foundation</td>
</tr>
<tr>
<td>Andrew Balas</td>
<td>Project Director</td>
<td>A New Model of Chronic Disease Management, Centene Corporation, 2005-2007</td>
</tr>
<tr>
<td>Dr. James D. Blando</td>
<td>Chair</td>
<td>Air Pollution Education and Research Grant Committee, 2010-present</td>
</tr>
<tr>
<td>Charlene Brassington</td>
<td>Consultant</td>
<td>environmental sampling, for Marton Technologies, Inc., 2008-present</td>
</tr>
<tr>
<td>Kay Cherry</td>
<td>Community Practicum Course Director</td>
<td>In this role, developed and supervised partnerships with ~20 community organizations each year, to conduct hypothesis-based student projects in collaboration with the Program, 2006-2009</td>
</tr>
<tr>
<td>Kay Cherry</td>
<td>Capstone Course Director</td>
<td>In this role, coordinated presentation and critical review of community public health cases from regional public health workforce, 2006-2007</td>
</tr>
<tr>
<td>Kay Cherry</td>
<td>Consultant</td>
<td>AMOR Projects—permitting and construction of a technical training center, 2006</td>
</tr>
<tr>
<td>Kay Cherry</td>
<td>Member</td>
<td>Chesapeake Health District Workgroup, Management of Chronic Disease in Adults, 2006</td>
</tr>
<tr>
<td>Kay Cherry</td>
<td>Member</td>
<td>Committee for Pectus Study: Children’s Hospital of the King’s Daughters, 2006-2008</td>
</tr>
<tr>
<td>Kay Cherry</td>
<td>Member</td>
<td>Virginia Beach Health District Mobilizing for Action through Planning and Partnerships Review Team, 2007–2010</td>
</tr>
<tr>
<td>Faculty Name</td>
<td>Role</td>
<td>Organization Served</td>
</tr>
<tr>
<td>---------------</td>
<td>-----------------------------------------------</td>
<td>-------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>C Donald Combs</td>
<td>Founding Director</td>
<td>National Center for Collaboration in Medical Modeling and Simulation, 2006-present</td>
</tr>
<tr>
<td>C Donald Combs</td>
<td>Conceived, obtained funding for, and helped to develop</td>
<td>Virginia Healthy Start Initiative, 2006-2010</td>
</tr>
<tr>
<td>C Donald Combs</td>
<td>Project Director</td>
<td>Resource Mothers Program, 2006-2009</td>
</tr>
<tr>
<td>C Donald Combs</td>
<td>Project Director</td>
<td>Every Woman’s Life (breast and cervical cancer screening program), 2006-2009</td>
</tr>
<tr>
<td>C Donald Combs</td>
<td>Project Director</td>
<td>Virginia Healthy Start Initiative, 2006-2009</td>
</tr>
<tr>
<td>C Donald Combs</td>
<td>Project Director</td>
<td>Eastern Virginia Perinatal Council, 2006-2009</td>
</tr>
<tr>
<td>C Donald Combs</td>
<td>Project Director</td>
<td>Eastern Virginia Area Health Education Center Programs, 2006-2009</td>
</tr>
<tr>
<td>C Donald Combs</td>
<td>External Reviewer</td>
<td>Commission on Colleges, Southern Association of Colleges and Schools, 2010</td>
</tr>
<tr>
<td>C Donald Combs</td>
<td>Chair</td>
<td>3M Group (vice-presidents and deans of the state’s three academic health centers), 2006-2007</td>
</tr>
<tr>
<td>Clinton Crews</td>
<td>Author</td>
<td>Partners In Survival National Training Program Grant Close-out Report to the CDC, 2008</td>
</tr>
<tr>
<td>Clinton Crews</td>
<td>Technical Training/Consultant</td>
<td>Coalitions Works, 2008 – current</td>
</tr>
<tr>
<td>Clinton Crews</td>
<td>Advisory Board Director</td>
<td>Accessible Solutions, 2010 – current</td>
</tr>
<tr>
<td>Clinton Crews</td>
<td>Director of Education</td>
<td>National Male Caregivers Conference, 2008</td>
</tr>
<tr>
<td>James English</td>
<td>National Faculty Advisor</td>
<td>Student National Environmental Health Association, 2007-present</td>
</tr>
<tr>
<td>James English</td>
<td>Member</td>
<td>International Environmental Faculty Forum, 2007-present</td>
</tr>
<tr>
<td>James English</td>
<td>Proctor</td>
<td>National Food Manager Certification Examination in Food Sanitation., Educational Foundation of the National Restaurant Association, 2007-present</td>
</tr>
<tr>
<td>Joseph Flannery</td>
<td>Consultant</td>
<td>Safety &amp; Accreditation, Sentara Healthcare System, 2010-potent</td>
</tr>
<tr>
<td>Joseph Flannery</td>
<td>Site Visitor and Instructor</td>
<td>The Joint Commission (for accreditation of hospitals and programs), 2010-present</td>
</tr>
<tr>
<td>Faculty Name</td>
<td>Role</td>
<td>Organization Served</td>
</tr>
<tr>
<td>----------------------</td>
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</tr>
<tr>
<td>Holly Gaff</td>
<td>Math and Science Education Expert</td>
<td>DIMACS BioMath Connection, the Consortium for Mathematics and its Applications, 2008-2010</td>
</tr>
<tr>
<td>Holly Gaff</td>
<td>Workshop Leader</td>
<td>Integrating Curricula in the Mathematical, Biological, and Environmental Sciences, Longwood University, 2008</td>
</tr>
<tr>
<td>Holly Gaff</td>
<td>Webmaster</td>
<td>Society for Mathematical Biology, 2007-2010</td>
</tr>
<tr>
<td>Holly Gaff</td>
<td>Webmaster</td>
<td>Association for Women in Mathematics, 2007-2010</td>
</tr>
<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>Fellow</td>
<td>Kaohsiung Medical University, Taiwan, 2010</td>
</tr>
<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>Proposal Reviewer</td>
<td>Jeffress Research Foundation, 2009</td>
</tr>
<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>Proposal Reviewer</td>
<td>Environmental and Occupational Medicine Section, Taiwan National Science Foundation, 2010</td>
</tr>
<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>Discussant</td>
<td>Building a Healthier Workforce Conference, University of Iowa, 2011</td>
</tr>
<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>Section Chair</td>
<td>Virginia Environmental Health Association Annual Education and Training Meeting, 2009, 2011</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Member</td>
<td>Board of the Old Dominion University Research Foundation, 2007-present</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Consultant</td>
<td>Rotavirus Vaccine Program, PATH and the Gates Foundation, 2006-2008</td>
</tr>
<tr>
<td>David O Matson</td>
<td>External examiner</td>
<td>MSc candidate, University of Pretoria Sout Africa, 2008-2010</td>
</tr>
<tr>
<td>David O Matson</td>
<td>External Reviewer</td>
<td>Doctoral Program in Medical Sciences, Faculty of Medicine, Pontifical Catholic University of Chile, 2009</td>
</tr>
<tr>
<td>David O Matson</td>
<td>External Reviewer</td>
<td>Faculty and Programs, Department of Virology, University of Pretoria, South Africa, 2006</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Capstone Course Director</td>
<td>In this role, coordinated presentation and critical review of community public health cases from regional public health workforce, 2008-2010</td>
</tr>
<tr>
<td>Faculty Name</td>
<td>Role</td>
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</tr>
<tr>
<td>David O Matson</td>
<td>Collaborator/Technical Consultant</td>
<td>Impact of distribution of moringa trees to village compounds to prevent pediatric malnutrition, Christian Medical Institute of the Kasai, Democratic Republic of the Congo, 2008-2009</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Conceived project and obtained funding</td>
<td>Credit line for re-capitalization of medical clinic laboratories, Presbyterian Community of Kinshasa, Democratic Republic of the Congo, 2008-2010</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Collaborator/Technical Consultant</td>
<td>Prevalence of “western” diseases in young mothers, Presbyterian Community of Kinshasa, Democratic Republic of the Congo, 2010-2011</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Collaborator/Technical Consultant</td>
<td>Reasons for failure to seek family planning resources, Mama Bemba Mutombo Hospital, Kinshasa, Democratic Republic of the Congo, 2010-2011</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Member (ad hoc)</td>
<td>Board of Scientific Counselors, National Institute of Allergy and Infectious Diseases, 2008</td>
</tr>
<tr>
<td>David O. Matson</td>
<td>Director</td>
<td>Commonwealth Public Health Training Center, 2010-present</td>
</tr>
<tr>
<td>David O. Matson</td>
<td>Collaborator/Technical Consultant</td>
<td>Clinical documentation, AMOR Projects, Pucallpa, Peru, 2008-2010</td>
</tr>
<tr>
<td>David O. Matson</td>
<td>Collaborator/Technical Consultant</td>
<td>Health and Demographic Survey in Squatters’ Camps, AMOR Projects, Pucallpa, Peru, 2009-2010</td>
</tr>
<tr>
<td>David O. Matson</td>
<td>Collaborator/Technical Consultant</td>
<td>De-Worming of Squatters’ Camps, AMOR Projects, Pucallpa, Peru, 2010-2011</td>
</tr>
<tr>
<td>David O. Matson</td>
<td>Collaborator/Technical Consultant</td>
<td>Point estimate of the prevalence of pterygium of the eye, AMOR Projects, Pucallpa, Peru, 2010-2011</td>
</tr>
<tr>
<td>James Neff</td>
<td>Member</td>
<td>NIAAA AA-2 (Epidemiology, Prevention, and Behavioral Research) Review Committee, 2007-2011</td>
</tr>
<tr>
<td>Richard Vroman</td>
<td>Community Practicum Course Director</td>
<td>In this role, developed and supervised partnerships with ~20 community organizations each year, to conduct hypothesis-based student projects in collaboration with the Program, 2009-present</td>
</tr>
<tr>
<td>Richard Vroman</td>
<td>Consultant</td>
<td>Disaster Preparedness Review, Norfolk Health Department, 2010</td>
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## Appendix CC

<table>
<thead>
<tr>
<th>Faculty Name</th>
<th>Role</th>
<th>Organization Served</th>
</tr>
</thead>
<tbody>
<tr>
<td>Qi (Harry) Zhang</td>
<td>Proposal Reviewer</td>
<td>Health Care Quality and Effectiveness Research (HCQER) Study Section, AHRQ, 2009-present</td>
</tr>
<tr>
<td>Qi (Harry) Zhang</td>
<td>Abstract Reviewer</td>
<td>American Diabetes Association 71st Scientific Sessions, 2011</td>
</tr>
<tr>
<td>Qi (Harry) Zhang</td>
<td>Discussant</td>
<td>“Obesity”, Southern Economic Association 80th Annual Meeting, 2010</td>
</tr>
<tr>
<td>Qi (Harry) Zhang</td>
<td>Discussant</td>
<td>“Social Determinants of Health” and “Economic Well-Being Measurement”, Southern Economic Association Annual Meeting, 2010</td>
</tr>
<tr>
<td>Qi (Harry) Zhang</td>
<td>Discussant</td>
<td>“Efficiency and Equity: Statistical Inference and Applications using the Health Achievement Index”, American Society of Health Economists Biennial Conference, 2008</td>
</tr>
<tr>
<td>Qi (Harry) Zhang</td>
<td>Session Chair</td>
<td>World Congress, International Health Economics Association, 2007</td>
</tr>
<tr>
<td>Yueqin Zhao</td>
<td>Lead Consultant</td>
<td>Epidemiology-Biostatistics Core, EVMS, 2006-2011; in this role, provided consultants for ~10 organizations in Program service region</td>
</tr>
</tbody>
</table>

Includes period from 2006 onwards, for activities begun before 2006. Includes only period while Program Core Faculty, for those faculty who joined the Program as Core in 2007 or later.
### Appendix DD

#### 2007 – 2011 FACULTY MEMBERSHIP OF NON-ACADEMIC BOARDS AND COMMITTEES

<table>
<thead>
<tr>
<th>Faculty Name</th>
<th>Membership Period</th>
<th>Organization/Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Andrew Balas</td>
<td>Member</td>
<td>Board of Directors, Friends of the National Library of Medicine, Washington, DC, 2007-present</td>
</tr>
<tr>
<td>Andrew Balas</td>
<td>Member</td>
<td>Leadership Council, eHealth Initiative and Foundation, Washington DC, 2008-present</td>
</tr>
<tr>
<td>Andrew Balas</td>
<td>Member</td>
<td>Board of Directors, Virginia Business Coalition on Health, 2006-present</td>
</tr>
<tr>
<td>Andrew Balas</td>
<td>Member</td>
<td>Board of Directors, American Red Cross of Southeastern Virginia, 2006-present</td>
</tr>
<tr>
<td>Andrew Balas</td>
<td>Chair</td>
<td>Board of Trustees, Forerunner Federation, Norfolk, VA, 2009-present</td>
</tr>
<tr>
<td>Andrew Balas</td>
<td>Member</td>
<td>Advisory Board, Zynx Inc., Cedars Sinai Medical Center, Los Angeles, CA, 2006-present</td>
</tr>
<tr>
<td>James Blando</td>
<td>Member.</td>
<td>International Board of Directors, Air and Waste Management Association, 2008-2011</td>
</tr>
<tr>
<td>James Blando</td>
<td>Chairperson</td>
<td>New Jersey Clean Air Council, 2010</td>
</tr>
<tr>
<td>Kay Cherry</td>
<td>Chair</td>
<td>Suffolk Partnership for a Healthy Community, Executive Board and of Community Garden Taskforce, 2009 – present</td>
</tr>
<tr>
<td>Kay Cherry</td>
<td>Member</td>
<td>Food and Environment Working Group of the American Public Health Association, 2008–present</td>
</tr>
<tr>
<td>Kay Cherry</td>
<td>Chair</td>
<td>Community Garden Taskforce of the Suffolk Partnership for a Healthy Community, 2009-present</td>
</tr>
<tr>
<td>C. Donald Combs</td>
<td>Chair</td>
<td>Health Care Subcommittee of the Hampton Roads Partnership’s Vision Hampton Roads: Opportunities Task Force, 2010-2011</td>
</tr>
<tr>
<td>C. Donald Combs</td>
<td>Member</td>
<td>Senator Mark R. Warner Modeling and Simulation Task Force, 2010-2011</td>
</tr>
<tr>
<td>C. Donald Combs</td>
<td>Member</td>
<td>Virginia Governor’s Health Information Technology Advisory Committee, 2010-2011</td>
</tr>
<tr>
<td>C. Donald Combs</td>
<td>Member</td>
<td>Society for Simulation in Health Care Standing Committee for Certification, Accreditation, Technology and Standards, 2010-2011</td>
</tr>
<tr>
<td>C. Donald Combs</td>
<td>President</td>
<td>Virginia Network for Geospatial Health Research, 2009-2011</td>
</tr>
<tr>
<td>C. Donald Combs</td>
<td>Member</td>
<td>Virginia Health Information Technology Interoperability Advisory Committee, 2008-2010</td>
</tr>
<tr>
<td>C. Donald Combs</td>
<td>Member</td>
<td>Martin Luther King, Jr., Living History and Public Policy Center Board of Trustees, 2008-2011</td>
</tr>
<tr>
<td>C. Donald Combs</td>
<td>Member</td>
<td>The Center for Public-Private Partnerships CP3 Board of Directors, 2008-2011</td>
</tr>
<tr>
<td>Clinton Crews</td>
<td>Member</td>
<td>Prime Care Credit Union, Commissioner’s Board, 2010 – Present</td>
</tr>
<tr>
<td>Clinton Crews</td>
<td>President</td>
<td>Mariner’s Quay Condominium Home Owners’ Association Board, Board, Presiden, 2008 – Present t</td>
</tr>
<tr>
<td>Clinton Crews</td>
<td>Member</td>
<td>GlaxoSmithKline’s Patient Advocacy Leadership Summit, National Planning Council Member, 2008 - Present</td>
</tr>
<tr>
<td>Clinton Crews</td>
<td>Member</td>
<td>National Planning Council for GlaxoSmithKline’s Patient Advocacy Leadership Summit, 2006-2008</td>
</tr>
<tr>
<td>James English</td>
<td>Chairman</td>
<td>Norfolk Environmental Commission, 2007-2009</td>
</tr>
<tr>
<td>James English</td>
<td>President</td>
<td>Hoffler Creek Wildlife Foundation Board, 2007-present</td>
</tr>
<tr>
<td>James English</td>
<td>Member</td>
<td>Board of Directors, Friends of Norfolk’s Environment, 2007-present</td>
</tr>
<tr>
<td>James English</td>
<td>Member</td>
<td>Norfolk Turning Point Partnership, 2007-present; Environmental Area of Inquiry Committee, 2007-present</td>
</tr>
<tr>
<td>Faculty Name</td>
<td>Membership Period</td>
<td>Organization/Activity</td>
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<td>-------------------</td>
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<tr>
<td>James English</td>
<td>Member</td>
<td>Norfolk Public Health Advisory Board (appointed by City Council), 2007-present</td>
</tr>
<tr>
<td>James English</td>
<td>Member</td>
<td>Food Protection Technical Section and Editorial and Publications Board, 2007-present</td>
</tr>
<tr>
<td>James English</td>
<td>Board Member</td>
<td>Virginia Environmental Health Association, 2007-present</td>
</tr>
<tr>
<td>James English</td>
<td>Chairman</td>
<td>Environmental Health Professional Registration/Credentialing Committee, Virginia Environmental Health Association, 2007-present</td>
</tr>
<tr>
<td>James English</td>
<td>Member</td>
<td>Educational Committee, Virginia Conference of Food and Drug Officials, 2007-present</td>
</tr>
<tr>
<td>James English</td>
<td>Member</td>
<td>Chesapeake Health Departments Foodservice Advisory Council, 2007-present</td>
</tr>
<tr>
<td>James English</td>
<td>Chair</td>
<td>Wards Corner Task Force Codes and Public Safety Committee, 2007-present</td>
</tr>
<tr>
<td>James English</td>
<td>Member</td>
<td>Norfolk Police Citizen Advisory Council 2nd Precinct, 2007-present</td>
</tr>
<tr>
<td>James English</td>
<td>Member</td>
<td>Norfolk Environmental Commissions “Green Team” Planning Committee for new building expansion, 2004-present</td>
</tr>
<tr>
<td>James English</td>
<td>Chair</td>
<td>Conferencing Committee, Virginia Public Health Association, 2010-present</td>
</tr>
<tr>
<td>Holly Gaff</td>
<td>Chair-Elect</td>
<td>BioSIGMAA, Special Interest Group of the Mathematical Association of America, 2009-2010</td>
</tr>
<tr>
<td>Holly Gaff</td>
<td>Executive Council</td>
<td>Association for Women in Mathematics, 2007-2010</td>
</tr>
<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>Member</td>
<td>Virginia Board of Health, 2009-present</td>
</tr>
<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>Board Member</td>
<td>Virginia Environmental Health Association, 2007-present</td>
</tr>
<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>Professional Development Vice President</td>
<td>Virginia Environmental Health Association, 2008-2009</td>
</tr>
<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>Committee Member</td>
<td>Global Warming Subgroup, Environmental Health Section, American Public Health Association, 2010</td>
</tr>
<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>Member</td>
<td>Advisory Committee, Joint Environmental Education Program of the Lynnhaven River Now Project, Chesapeake Bay Foundation, and Elizabeth River Project, sponsored by U.S. EPA, 2009</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Member</td>
<td>National Rotavirus Advisory Board, Glaxo-Smithkline, 2006-present</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Member</td>
<td>Working Party on Caliciviruses, International Committee on Taxonomy of Viruses, 2006-present</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Member</td>
<td>Working Party on Astroviruses, International Committee on Taxonomy of Viruses, 2006-present</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Member</td>
<td>International Rotavirus Advisory Board, Merck Research Laboratory, 2006-2007</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Member</td>
<td>National Pediatric Vaccine Advisory Board, Merck Research Laboratory, 2008-present</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Board of Directors</td>
<td>Virginia Public Health Association, 2009-present; President-Elect, 2009-2011; President, 2011-present</td>
</tr>
<tr>
<td>Faculty Name</td>
<td>Membership Period</td>
<td>Organization/Activity</td>
</tr>
<tr>
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<td>-------------------</td>
<td>----------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Member</td>
<td>Board of Directors, Overseas Medical Fund, 2009-present</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Member</td>
<td>Pan-Flu Advisory Board, Virginia Department of Health, 2007-present</td>
</tr>
<tr>
<td>David O Matson</td>
<td>Member</td>
<td>Board of Trustees, Spafford Children’s Center Foundation, Jerusalem, 2000-present</td>
</tr>
<tr>
<td>James Neff</td>
<td>Member and Treasurer</td>
<td>Board of Directors, Community Alternatives, Inc. Virginia Beach, Virginia, 2007-2009</td>
</tr>
<tr>
<td>Richard Vroman</td>
<td>Member</td>
<td>East Stroudsburg University Alumni Board of Directors 2009-2011</td>
</tr>
<tr>
<td>Qi (Harry) Zhang</td>
<td>Scientific Committee</td>
<td>International Health Economics Association World Congress, 2007, 2009</td>
</tr>
<tr>
<td>Qi (Harry) Zhang</td>
<td>Session Chair</td>
<td>International Health Economics Association World Congress, 2009</td>
</tr>
<tr>
<td>Qi (Harry) Zhang</td>
<td>Session Chair</td>
<td>World Congress, International Union of Anthropological and Ethnological Sciences, 2009</td>
</tr>
<tr>
<td>Qi (Harry) Zhang</td>
<td>Session Chair</td>
<td>Annual Conference, Western Economic Association International, 2008</td>
</tr>
</tbody>
</table>
## 2007 – 2011 FACULTY MEMBERSHIP IN PROFESSIONAL ORGANIZATIONS

<table>
<thead>
<tr>
<th>Faculty Name</th>
<th>Year(s)</th>
<th>Organization</th>
</tr>
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<tbody>
<tr>
<td>Andrew Balas</td>
<td></td>
<td>American Medical Informatics Association</td>
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<td>Andrew Balas</td>
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<tr>
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<td>Association of Schools of Allied Health</td>
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<tr>
<td>Hind Baydoun</td>
<td>2007</td>
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</tr>
<tr>
<td>Hind Baydoun</td>
<td>2009-Current</td>
<td>American College of Epidemiology</td>
</tr>
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<td>Hind Baydoun</td>
<td>2009-Current</td>
<td>Society for Epidemiologic Research</td>
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<tr>
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<td>2009-Current</td>
<td>Society for Pediatric and Perinatal Epidemiologic Research</td>
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<tr>
<td>Hind Baydoun</td>
<td>2009-Current</td>
<td>American Society for Nutrition</td>
</tr>
<tr>
<td>Kay Cherry</td>
<td>2006-Present</td>
<td>Delta Omega Honorary Society</td>
</tr>
<tr>
<td>Kay Cherry</td>
<td>2001-Present</td>
<td>Alpha Eta Honor Society for Allied Health Professions</td>
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<tr>
<td>Kay Cherry</td>
<td>2008-2010</td>
<td>American Public Health Association</td>
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<td>Kay Cherry</td>
<td>2009-Present</td>
<td>Virginia Public Health Association</td>
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<tr>
<td>C Donald Combs</td>
<td>2008-2011</td>
<td>American Society for Public Administration</td>
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<tr>
<td>C Donald Combs</td>
<td>2008-2011</td>
<td>Association of American Medical Colleges</td>
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<td>C Donald Combs</td>
<td>2008-2011</td>
<td>National Area Health Education Centers Organization</td>
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<tr>
<td>C Donald Combs</td>
<td>2008-2011</td>
<td>Delta Omega (Graduate Studies in Public Health)</td>
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<td>Clinton R Crews</td>
<td>2009 - 10</td>
<td>American Public Health Association</td>
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<td>2010</td>
<td>Professional Patient Advocate Institute (Charter Member)</td>
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<tr>
<td>Huei Wang (Anna) Jeng</td>
<td>2010</td>
<td>Virginia Environmental and Health Association</td>
</tr>
<tr>
<td>David O Matson</td>
<td>1994-present</td>
<td>Society of Pediatric Research</td>
</tr>
<tr>
<td>David O Matson</td>
<td>1994-present</td>
<td>American Academy of Pediatrics, Fellow</td>
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<tr>
<td>David O Matson</td>
<td>1994-present</td>
<td>Infectious Diseases Society of America, Member</td>
</tr>
<tr>
<td>Emmanuel Rudatsikira</td>
<td>1999-2008</td>
<td>Adventist International Medical Society.</td>
</tr>
<tr>
<td>Richard Vroman</td>
<td>2008-2011</td>
<td>Lee’s Friends Cancer Support Organization</td>
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<tr>
<td>Qi (Harry) Zhang</td>
<td>2008-2011</td>
<td>American Society of Health Economists</td>
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<tr>
<td>Qi (Harry) Zhang</td>
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</table>
### Appendix FF

#### 2006 – 2011 - FACULTY SERVICE ON EDITORIAL BOARDS OF PROFESSIONAL JOURNALS

<table>
<thead>
<tr>
<th>Faculty Name</th>
<th>Year(s)</th>
<th>Journal</th>
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<tr>
<td>Hind Baydoun</td>
<td>2007-Current</td>
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<td>Hind Baydoun</td>
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<td>American Journal of Preventive Medicine</td>
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<tr>
<td>Hind Baydoun</td>
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<tr>
<td>Hind Baydoun</td>
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<td>Journal of School Health</td>
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<td>Hind Baydoun</td>
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<td>Journal of Women’s Health</td>
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<td>Hind Baydoun</td>
<td>2007-Current</td>
<td>Maternal and Child Health Journal</td>
</tr>
<tr>
<td>Hind Baydoun</td>
<td>2009-Current</td>
<td>American Journal of Public Health</td>
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<td>Hind Baydoun</td>
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<td>2009-Current</td>
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<td>Hind Baydoun</td>
<td>2009-Current</td>
<td>European Journal of Contraception and Reproductive Health Care</td>
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<td>Hind Baydoun</td>
<td>2009-Current</td>
<td>International Journal of Dermatology</td>
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<td>2010-Current</td>
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<td>Hind Baydoun</td>
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<td>International Journal of Clinical Practice</td>
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<td>Hind Baydoun</td>
<td>2010-current</td>
<td>Psychology of Violence</td>
</tr>
<tr>
<td>C Donald Combs</td>
<td>2008</td>
<td>Annals of Internal Medicine</td>
</tr>
<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>2007-Present</td>
<td>Journal Reviewer: Journal of Environmental Sciences and Health, Part A</td>
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<td>2009-present</td>
<td>Journal Reviewer: Journal of Exposure Science and Environmental Epidemiology</td>
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<td>Hueiwang (Anna) Jeng</td>
<td>2007-present</td>
<td>Journal Reviewer: Air, Soil and Water Sciences</td>
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<td>Hueiwang (Anna) Jeng</td>
<td>2008</td>
<td>Journal Reviewer: Chemical Research in Toxicology</td>
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<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>2008-present</td>
<td>Journal Reviewer: Science of the Total Environment</td>
</tr>
<tr>
<td>Faculty Name</td>
<td>Year(s)</td>
<td>Journal</td>
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<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>2009</td>
<td>Journal Reviewer: Journal of Toxicology</td>
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<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>2010</td>
<td>Journal Reviewer: Ecotoxicology and Environmental Safety</td>
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<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>2007-present</td>
<td>Abstract Reviewer: Environmental Section at APHA conferences</td>
</tr>
<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>2008</td>
<td>Abstract Reviewer: National Environmental Health Association Annual Education and Conference</td>
</tr>
<tr>
<td>Hueiwang (Anna) Jeng</td>
<td>2009-present</td>
<td>Editorial Board Member International Journal of Environmental Engineering, Open Access Journal</td>
</tr>
<tr>
<td>David O Matson</td>
<td>2008–to Present</td>
<td>Journal of the American Medical Association (JAMA)</td>
</tr>
<tr>
<td>David O Matson</td>
<td>2008–to Present</td>
<td>Pediatric Infectious Diseases Journal</td>
</tr>
<tr>
<td>David O Matson</td>
<td>2008–to Present</td>
<td>Guest Editor, Journal of Infectious Diseases, 2007:195; Supplement 1</td>
</tr>
<tr>
<td>Mariana Szklo-Coxe</td>
<td>2010</td>
<td>Manuscript reviewer, Biological Psychiatry</td>
</tr>
<tr>
<td>Mariana Szklo-Coxe</td>
<td>2010-2011</td>
<td>Manuscript reviewer, Sleep</td>
</tr>
<tr>
<td>Mariana Szklo-Coxe</td>
<td>2011</td>
<td>Manuscript reviewer, American Journal of Psychiatry</td>
</tr>
<tr>
<td>Yueqin Zhao</td>
<td>2011</td>
<td>Reviewer for Communications in Statistics</td>
</tr>
<tr>
<td>Yueqin Zhao</td>
<td></td>
<td>Statistical Session Reviewer for Annals of Surgery</td>
</tr>
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## Appendix GG

### 2007 – 2010 STUDENT REPORTED PRESENTATIONS AND TEACHING

<table>
<thead>
<tr>
<th>Reported Student Presentation and Teaching 2007-2010</th>
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</thead>
<tbody>
<tr>
<td>Measuring Response to Dementia Therapy: What Matters to Caregivers, Eastern Virginia Medical School, Norfolk, VA</td>
</tr>
<tr>
<td>Community Health Nursing Subspecialty, Naval Medical Center Portsmouth, VA</td>
</tr>
<tr>
<td>Tobacco-Free MTF: The Naval Medical Center Portsmouth Experience, 48th Navy and Marine Corps Public Health Conference, Hampton, VA</td>
</tr>
<tr>
<td>Ethnic disparities in infant mortality in Hampton Roads (Poster Presentation), 138th American Public Health Association Meeting and Exposition, Denver, CO</td>
</tr>
<tr>
<td>Chronic Disease Self-Management Leader Training, Peninsula Health Department/Stanford University, Newport News, VA</td>
</tr>
<tr>
<td>Gene Expression Profiles in the Insular Cortex Associated with Nicotine Seeking Behavior, University of Virginia; Undergraduate Research Network Symposium, Charlottesville, VA</td>
</tr>
<tr>
<td>Incubation of Nicotine-Seeking Behavior in Rats following Extended Access Self-Administration, The Society for Neuroscience, Washington, DC</td>
</tr>
<tr>
<td>Analysis of Infectious Diseases in a Residential Care Home for Disabled Children, Eastern Virginia Medical School; St. Mary's Home for Disabled Children, Norfolk, VA</td>
</tr>
<tr>
<td>Potential Reliability and Validity of Assessing the UPDRS remotely, Movement Disorder Society, Toronto, Canada</td>
</tr>
<tr>
<td>Clinical findings in the AMOR Projects, Eastern Virginia Medical School, Norfolk, VA</td>
</tr>
<tr>
<td>Evaluation of the efficacy of sulfadoxine-pyrimethamine in the prevention of transmission of malaria from the mother to the infant, VAPHA Presentation, 2ND place award, 2010</td>
</tr>
<tr>
<td>From the Classroom to the Boardroom, American Public Health Association Annual Meeting – Oral presentation – San Diego, 2008</td>
</tr>
<tr>
<td>Multilingual Food Safety Tool Used to Educate Food Service Employees at Restaurants, American Public Health Association Annual Meeting – Oral presentation – San Diego, 2008</td>
</tr>
<tr>
<td>Evaluation of the Healthy Generation Health Promoter Program: A Measure of the Success of Community Lay Health Advisors, Healthy Generation Health Promoter Workshops series of training sessions for community health workers, Newport News, VA, 2008</td>
</tr>
<tr>
<td>An Assessment of the Issues and Concerns of Health Care Professionals Regarding Malpractice and Liability Coverage for Providing Charitable Care, Access Partnership, Norfolk, 2008</td>
</tr>
<tr>
<td>Analysis of the factors affecting use and satisfaction with the electronic health record system within the Department of Pediatrics at Naval Medical Center Portsmouth</td>
</tr>
<tr>
<td>CINCH: Connecting Communities, Addressing Children’s Health in Hampton Roads, VA</td>
</tr>
<tr>
<td>Examining the Effects of Medical Case Managers on Medication Adherence of HIV clients in a Treatment Adherence Program at Three Rivers Health District and Eastern Shore Health District, EVMS AIDS Resource Center, VA</td>
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<tr>
<td>Support Group Criteria Assessment for the Alzheimer’s Association, Alzheimer’s Support Group leader, Norfolk, 2009</td>
</tr>
<tr>
<td>Clinical practice patterns regarding the identification of obesity, APHA, 2009, Philadelphia</td>
</tr>
<tr>
<td>Household Survey of Malnutrition and Moringa oleifera Tree Location in the Four Villages of Western Kasai, DRC, MPH Program Seminar Series, EVMS, Norfolk, VA</td>
</tr>
<tr>
<td>Counseling, An Externship at Access Partnership, Norfolk, VA</td>
</tr>
<tr>
<td>The resurgence of syphilis in eastern region of Virginia: A project at EVMS AIDS Resource Centre, Presentation regarding syphilis to weekly conference of EVMS AIDS Resource Center clients, Norfolk, VA, April 2009</td>
</tr>
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</table>
## 2007 - 2011 Student Development of Community Projects and Community Leadership

Information derived from student query: included periods of 2007-08, 2008-09 and 2009-10 to include classes graduating between 2008 and 2010.

<table>
<thead>
<tr>
<th>STUDENT</th>
<th>PROJECT/SITE/YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cynthia Judy</td>
<td>Girl Scout visit to Norfolk SPCA; pet food donation and Pet Care badge completion, Girl Scouts of the Colonial Coast, Troop 111, Norfolk SPCA, Norfolk, VA, 2008</td>
</tr>
<tr>
<td></td>
<td>Helping Hands Food Drive participant, Girl Scouts of the Colonial Coast, Troop 111, Foodbank of Southeastern Virginia, Chesapeake, VA, 2008</td>
</tr>
<tr>
<td></td>
<td>Habitat for Humanity South Hampton Roads June 2008 Builders Blitz volunteer, Girl Scouts of the Colonial Coast, Troop 111, Habitat for Humanity South Hampton Roads, Suffolk, VA, 2008</td>
</tr>
<tr>
<td></td>
<td>Assistant Troop Leader, Girl Scouts of the Colonial Coast, Junior Troop 111. Volunteered over 146 hours to develop and instill a sense of leadership and community service. Coordinated and participated in numerous activities in addition to the ones listed above, Chesapeake, VA, 2008</td>
</tr>
<tr>
<td>Serge Keusseu Tankeu</td>
<td>Volunteering providing foods and clothes to the homeless and families in need, church, Norfolk, VA, 2009</td>
</tr>
<tr>
<td></td>
<td>Data entry for chronic disease, Chesapeake Health Department, VA, 2009</td>
</tr>
<tr>
<td>Leonard Emuren</td>
<td>Project: “Predictors of infant mortality in Hampton Roads region and Hampton city, Hampton Health District”, Hampton, VA, 2010</td>
</tr>
<tr>
<td>Ashley Self</td>
<td>Volunteer, DreamCatchers, Toano, VA, 2008</td>
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<tr>
<td></td>
<td>Volunteer, FIMRC, Costa Rica, 2008</td>
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<tr>
<td></td>
<td>Volunteer: Medical/ Public Health, AMOR Projects, Peru, 2008 and 2009 Establishing “Guidelines for Assessing the Merits of a Short-term Medical Mission”, EVMS/Peru, 2009</td>
</tr>
<tr>
<td>Amir Abdolahi</td>
<td>Math Tutor for Day in the Life program, Charlottesville HS, Charlottesville, VA, 2008</td>
</tr>
<tr>
<td></td>
<td>Garden to School Project Coordinator, Kilby Shores Elementary School, Suffolk, VA, 2009</td>
</tr>
<tr>
<td></td>
<td>Analysis of Infectious Diseases in a Residential Care Home for Disabled Children, St. Mary's Home for Disabled Children, Norfolk, VA, 2009</td>
</tr>
<tr>
<td>Eric Chow, Shalini Navali, Suparna Navali, Lauren Matsko, Amir Abdolahi, Ebonnie Scott, Hayleigh Diamond, Paige Birdsell, Natalie Lee</td>
<td>Developing and implementing an extensive Public Health Week Celebration, with attendance from multiple academic and clinical departments and the Hampton Roads public health community; Please see Attachment/Appendix – 2010 Public Health Week Program</td>
</tr>
</tbody>
</table>
### VOLUNTEER EFFORTS RELATED TO THE GARDEN-TO-SCHOOL PROJECT AND SUFFOLK COMMUNITY GARDENS:

<table>
<thead>
<tr>
<th>STUDENTS</th>
<th>PROJECT/SITE/YEAR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Amir Abdolahi, Suparna Navali, Leonard Emuren, Paige Birdsall, Michael Chijioke, Sherriel Smith, Patricia Miller</td>
<td>Chorey Park Senior Apartments Community Garden: Establishing the first garden, Suffolk, VA 2009</td>
</tr>
<tr>
<td>Amir Abdolahi</td>
<td>Winter harvest, East Suffolk Community Garden, Suffolk, 2009</td>
</tr>
<tr>
<td>Amir Abdolahi, Lauren Matsko, Pey Goh, Aria Lans</td>
<td>Chorey Park Senior Apartments Community Garden: Planting the second year garden, Suffolk, VA 2010</td>
</tr>
<tr>
<td>Melissa Lorenzo</td>
<td>Kilby Shores Elementary School Garden Club Presentation/Teaching/Activity: Why and How to Plant a Research Garden; Creating Eco-Friendly Bird Feeders, VA, 2010</td>
</tr>
<tr>
<td>Amir Abdolahi, Serge Tankeu, Jerrica Nichols, Leonard Emuren</td>
<td>Kilby Shores Elementary School Research Garden: Planting the Small Research Garden with the school Garden Club, VA, 2010</td>
</tr>
<tr>
<td>Amir Abdolahi, Jerrica Nichols, Hayleigh Diamond, Michael Chijioke</td>
<td>Kilby Shores Elementary School Garden-to-School Program: Activity and teaching: decorating pots, planting seeds, Suffolk, VA 2010</td>
</tr>
<tr>
<td>Serge Tankeu, Amir Abdolahi, Jerrica Nichols</td>
<td>Earth Day Field Trip to the Farm, multiple classes from Kilby Shores Elementary School, Suffolk, VA, 2010</td>
</tr>
<tr>
<td>Priyangka Das, Pragati Shrestha, Pey Goh</td>
<td>Strawberry Picking at the Strawberry Fields, multiple classes from Kilby Shores Elementary School, Suffolk, VA, 2010</td>
</tr>
<tr>
<td>Amir Abdolahi, Tiffany Stradford, Luis Rodriguez, Ava Morrow, Priyangka Das, Andrew Bolton, Melissa Lorenzo, Dana Nunez, Larry Braithwaite, Aria Lans</td>
<td>Kilby Shores Elementary School Garden-to-School Program; Multiple volunteer events to plant seeds, weed, and maintain the spring/summer garden, Suffolk, VA, 2010</td>
</tr>
</tbody>
</table>
### Appendix II

**STUDENT MEMBERSHIP IN VOLUNTEER AND PROFESSIONAL ORGANIZATIONS 2007 - 2011**

<table>
<thead>
<tr>
<th>STUDENT</th>
<th>ORGANIZATION</th>
<th>YEAR</th>
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<tbody>
<tr>
<td>Amir Abdolahi</td>
<td>Society for Neuroscience</td>
<td>2007-2008</td>
</tr>
<tr>
<td>Amir Abdolahi</td>
<td>University of Virginia Persian Club</td>
<td>2007-2008</td>
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<tr>
<td>Amir Abdolahi</td>
<td>University of Virginia</td>
<td>2007-2008</td>
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<td>Amir Abdolahi</td>
<td>Virginia Public Health Association</td>
<td>2008-2010</td>
</tr>
<tr>
<td>Ashley Self</td>
<td>American Psychological Association</td>
<td>2007</td>
</tr>
<tr>
<td>Cindy Judy</td>
<td>American Public Health Association</td>
<td>2007</td>
</tr>
<tr>
<td>Keegan Ziemba</td>
<td>American Academy of Pediatrics</td>
<td>2010-2011</td>
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<tr>
<td>Keegan Ziemba</td>
<td>American Medical Student Association</td>
<td>2007-2011</td>
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<tr>
<td>Keegan Ziemba</td>
<td>Virginia Beach Emergency Medical Service</td>
<td>2006-2009</td>
</tr>
<tr>
<td>Leonard Emuren</td>
<td>Nigerian Medical Association</td>
<td>1997-Present</td>
</tr>
<tr>
<td>Serge Keusseu Tankeu</td>
<td>Society of Clinical Research Associates (SoCRA)</td>
<td>2010-Present</td>
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<tr>
<td>Serge Keusseu Tankeu</td>
<td>World Student Christian Federation (WSCF) Global</td>
<td>2000-Present</td>
</tr>
<tr>
<td>Serge Keusseu Tankeu</td>
<td>Young Adult Ecumenical Forum – USA</td>
<td>2009-Present</td>
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<tr>
<td>Serge Keusseu Tankeu</td>
<td>Cameroon Student Movement</td>
<td>2000-2008</td>
</tr>
<tr>
<td>Serge Keusseu Tankeu</td>
<td>Cameroon Youth Network</td>
<td>2000-2007</td>
</tr>
</tbody>
</table>
1. Which of the following occupational categories best describes your present job responsibilities? (Please choose one)

Manager: Implements and evaluates community/public health programs including budgeting, data management, staff coordination/supervision, and contracts/fiscal monitoring.

Administrator: Plans, directs, manages and evaluates the use of health services resources and personnel on an agency/organizational level. Includes medical directors and health officers.

Clinical Services Provider: May include nurses, nutritionists, pharmacists, physicians, counselors, patient health educators, psychologists, dentists, etc. providing direct clinical care or as clinical consultant to other providers.

Community Nurse, Social Worker or Outreach Worker: Provides nursing, social work or outreach services in community/public health settings.

Behavioral Researcher: Uses social and behavioral science research methods to develop and conduct research designed to prevent, resolve or ameliorate health problems. May include anthropologists, economists, sociologists, physicians, etc.

Biostatistician, Epidemiologist: Uses mathematical and/or epidemiological models for compilation, analyses and reporting of information on health status, program efficacy, etc.

Disease Investigator: Assists biostatisticians, epidemiologists or behavioral/social scientists in developing or conducting research and incorporating findings into programs.

Laboratory Scientist or Technician: Plans, designs or implements laboratory tests and procedures. Includes microbiologists, chemists, toxicologists, immunologists, etc. Also includes those who assist laboratory scientists in performing the aforementioned functions.

Occupational Health Specialist: Reviews, analyzes and evaluates work environments or designs programs to prevent disease or correct hazards. Includes industrial hygienists, safety specialists, etc.

Environmental Health Specialist or Environmental Engineer: Applies environmental health and engineering principles to prevent and control environmental health hazards. Includes sanitarians, environmental health specialists and technicians, and sanitary, chemical and civil engineers.

Health Communications Specialist: Develops and implements internal and external communications strategies to disseminate health information, programs and policies via channels including mass media, computer technology, and written reports and information.

Community Organizer/Health Educator: Works directly with community groups to assess needs, build coalitions, and develop, implement and evaluate programs addressing health needs.

Auditor, Inspector or Surveyors: Audits, inspects and surveys programs, institutions, equipment, products and personnel, using approved standards. Includes facilities and financial contract auditing.

Health Planner/Policy Analyst: Analyzes population needs, program and legislative policies, and allocation of health resources in relationship to community/public health goals and objectives.

Health Care Consultant: Provides technical assistance, training and consultation to individuals and/or groups in the aforementioned job categories.

Preparedness and Response Planner: Plans for health service and support during emergencies.

Office/Support Services Specialist: Provides range of office and ancillary support services for the operation of public health clinical and community programs.

No answer

Other

Count 77
Appendix JJ

MPH Public Health Workforce Survey 2010 Report

Patient/Client Education and Consultation: Provides, coordinates or consults regarding education, counseling, nutrition and social work.

- Spend no time on activity: 37.88%
- Spend some time on activity: 34.85%
- Spend a lot of time on activity: 12.12%
- Spend most of time on activity: 10.61%
- Spend all of time on activity: 4.55%

Count: 66
Mean: 2.09

Monitoring, Investigation and Surveillance: Assesses health and disease indicators for individuals and populations, or environmental quality.

- Spend no time on activity: 25.37%
- Spend some time on activity: 32.84%
- Spend a lot of time on activity: 22.39%
- Spend most of time on activity: 16.42%
- Spend all of time on activity: 2.99%

Count: 67
Mean: 2.39

Administration and Management: Develops policy and regulations, staff coaching/supervision, team building, strategic plan development, financial planning and managing resources.

- Spend no time on activity: 30.30%
- Spend some time on activity: 28.79%
- Spend a lot of time on activity: 15.15%
- Spend most of time on activity: 18.18%
- Spend all of time on activity: 7.58%

Count: 66
Mean: 2.44
Community Outreach and Planning: Works with communities to conduct needs assessments, develop plans, build coalitions and involve all populations including hard-to-reach groups.

<table>
<thead>
<tr>
<th>Activity Time Spent</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No time</td>
<td>36.36%</td>
</tr>
<tr>
<td>Some time</td>
<td>37.88%</td>
</tr>
<tr>
<td>A lot of time</td>
<td>15.15%</td>
</tr>
<tr>
<td>Most of time</td>
<td>7.58%</td>
</tr>
<tr>
<td>All of time</td>
<td>3.03%</td>
</tr>
</tbody>
</table>

Count: 66
Mean: 2.03

Communication, Public Education and Information: Develops and implements internal (organizational) and external (community) information dissemination strategies including mass media, information technology and interpersonal communication.

<table>
<thead>
<tr>
<th>Activity Time Spent</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No time</td>
<td>26.09%</td>
</tr>
<tr>
<td>Some time</td>
<td>39.13%</td>
</tr>
<tr>
<td>A lot of time</td>
<td>23.19%</td>
</tr>
<tr>
<td>Most of time</td>
<td>7.25%</td>
</tr>
<tr>
<td>All of time</td>
<td>4.35%</td>
</tr>
</tbody>
</table>

Count: 69
Mean: 2.25

Evaluation and Research: Develops and conducts evaluation of existing community or environmental health programs or policies, or develops and conducts formative research for development of new health programs and policies.

<table>
<thead>
<tr>
<th>Activity Time Spent</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No time</td>
<td>37.31%</td>
</tr>
<tr>
<td>Some time</td>
<td>32.84%</td>
</tr>
<tr>
<td>A lot of time</td>
<td>17.91%</td>
</tr>
<tr>
<td>Most of time</td>
<td>5.97%</td>
</tr>
<tr>
<td>All of time</td>
<td>5.97%</td>
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Count: 67
Mean: 2.10
Environmental Health skills

<table>
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<tr>
<th>Benefit</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>No Benefit</td>
<td>26.56%</td>
</tr>
<tr>
<td>Some Benefit</td>
<td>46.88%</td>
</tr>
<tr>
<td>Great Benefit</td>
<td>26.56%</td>
</tr>
<tr>
<td>Count</td>
<td>64</td>
</tr>
<tr>
<td>Mean</td>
<td>2.00</td>
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</tbody>
</table>

Health Promotion and disease prevention - theory and application

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Percentage</th>
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<tr>
<td>No Benefit</td>
<td>11.86%</td>
</tr>
<tr>
<td>Some Benefit</td>
<td>54.24%</td>
</tr>
<tr>
<td>Great Benefit</td>
<td>33.90%</td>
</tr>
<tr>
<td>Count</td>
<td>59</td>
</tr>
<tr>
<td>Mean</td>
<td>2.22</td>
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Overview of the community/public health system (including systems theory, financing and delivery)

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Benefit</td>
<td>26.15%</td>
</tr>
<tr>
<td>Some Benefit</td>
<td>49.23%</td>
</tr>
<tr>
<td>Great Benefit</td>
<td>24.62%</td>
</tr>
<tr>
<td>Count</td>
<td>65</td>
</tr>
<tr>
<td>Mean</td>
<td>1.98</td>
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Human Resource Management

<table>
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<tr>
<th>Benefit</th>
<th>Percentage</th>
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<td>No Benefit</td>
<td>39.68%</td>
</tr>
<tr>
<td>Some Benefit</td>
<td>46.03%</td>
</tr>
<tr>
<td>Great Benefit</td>
<td>14.29%</td>
</tr>
<tr>
<td>Count</td>
<td>63</td>
</tr>
<tr>
<td>Mean</td>
<td>1.75</td>
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</table>
Finance and budgeting

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<tr>
<td>No Benefit</td>
<td>31.75%</td>
<td>1.83</td>
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<td></td>
</tr>
<tr>
<td>Great Benefit</td>
<td>14.29%</td>
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Strategic planning

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<th>Mean</th>
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<tr>
<td>No Benefit</td>
<td>19.35%</td>
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<tr>
<td>Some Benefit</td>
<td>45.16%</td>
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<tr>
<td>Great Benefit</td>
<td>35.48%</td>
<td></td>
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</table>

Group facilitation (including team building, leading meetings and developing agendas)

<table>
<thead>
<tr>
<th>Level</th>
<th>Count</th>
<th>Mean</th>
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</thead>
<tbody>
<tr>
<td>No Benefit</td>
<td>12.90%</td>
<td>2.21</td>
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<tr>
<td>Some Benefit</td>
<td>53.23%</td>
<td></td>
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<tr>
<td>Great Benefit</td>
<td>33.87%</td>
<td></td>
</tr>
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</table>

Cross-cultural communication

<table>
<thead>
<tr>
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<th>Count</th>
<th>Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Benefit</td>
<td>22.95%</td>
<td>2.03</td>
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<tr>
<td>Some Benefit</td>
<td>50.82%</td>
<td></td>
</tr>
<tr>
<td>Great Benefit</td>
<td>26.23%</td>
<td></td>
</tr>
</tbody>
</table>
Appendix JJ

Public Health Workforce Survey 2010 Report

Interpersonal communication (including mentoring and coaching)

No Benefit 14.52%
Some Benefit 56.45%
Great Benefit 29.03%
Count 62
Mean 2.15

Community/Program Planning and Needs Assessments

No Benefit 19.05%
Some Benefit 55.56%
Great Benefit 25.40%
Count 63
Mean 2.06

Quality Assurance and Performance Improvement

No Benefit 14.06%
Some Benefit 45.31%
Great Benefit 40.63%
Count 64
Mean 2.27

Developing Private and Public Partnerships

No Benefit 25.40%
Some Benefit 44.44%
Great Benefit 30.16%
Count 63
Mean 2.06
Appendix JJ

MPH Public Health Workforce Survey 2010 Report

Disease Surveillance

<table>
<thead>
<tr>
<th>Benefit</th>
<th>Percentage</th>
<th>Count</th>
<th>Mean</th>
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<tr>
<td>No Benefit</td>
<td>21.31%</td>
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<tr>
<td>Some Benefit</td>
<td>52.46%</td>
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</tr>
<tr>
<td>Great Benefit</td>
<td>26.23%</td>
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Health and Risk Communication strategies

<table>
<thead>
<tr>
<th>Benefit</th>
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<th>Count</th>
<th>Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Benefit</td>
<td>14.06%</td>
<td>64</td>
<td>2.16</td>
</tr>
<tr>
<td>Some Benefit</td>
<td>56.25%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Great Benefit</td>
<td>29.69%</td>
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Mediation and negotiation

<table>
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<tr>
<th>Benefit</th>
<th>Percentage</th>
<th>Count</th>
<th>Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Benefit</td>
<td>35.94%</td>
<td>64</td>
<td>1.89</td>
</tr>
<tr>
<td>Some Benefit</td>
<td>39.06%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Great Benefit</td>
<td>25.00%</td>
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</table>

Participatory teaching/training skills

<table>
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<tr>
<th>Benefit</th>
<th>Percentage</th>
<th>Count</th>
<th>Mean</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Benefit</td>
<td>22.95%</td>
<td>61</td>
<td>2.07</td>
</tr>
<tr>
<td>Some Benefit</td>
<td>47.54%</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Great Benefit</td>
<td>29.51%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Appendix JJ

Public/community health program evaluation

| No Benefit | 20.00% |
| Some Benefit | 53.33% |
| Great Benefit | 26.67% |
| Count | 60 |
| Mean | 2.07 |

Community involvement/mobilization (including underserved populations, public/private partnerships)

| No Benefit | 26.23% |
| Some Benefit | 45.90% |
| Great Benefit | 27.87% |
| Count | 61 |
| Mean | 2.02 |

Legislative/policy planning and advocacy

| No Benefit | 35.00% |
| Some Benefit | 40.00% |
| Great Benefit | 25.00% |
| Count | 60 |
| Mean | 1.90 |

Provision of technical assistance/consultation services

| No Benefit | 37.29% |
| Some Benefit | 47.46% |
| Great Benefit | 15.25% |
| Count | 59 |
| Mean | 1.78 |
Electronic communication (including Internet and INPHO)

- No Benefit: 36.67%
- Some Benefit: 45.00%
- Great Benefit: 18.33%
- Count: 60
- Mean: 1.82

Data Analysis and utilization (including statistics)

- No Benefit: 17.74%
- Some Benefit: 46.77%
- Great Benefit: 35.48%
- Count: 62
- Mean: 2.18
Appendix JJ

MPH Public Health Workforce Survey 2010 Report

Survey Design and implementation
No Benefit: 30.00%
Some Benefit: 43.33%
Great Benefit: 26.67%
Count: 60
Mean: 1.97

Communicable disease investigation
No Benefit: 31.15%
Some Benefit: 40.98%
Great Benefit: 27.87%
Count: 61
Mean: 1.97

Written communication (e.g. analytic writing, report generation, policies and procedures)
No Benefit: 19.67%
Some Benefit: 52.46%
Great Benefit: 27.87%
Count: 61
Mean: 2.08

Grant writing
No Benefit: 33.87%
Some Benefit: 38.71%
Great Benefit: 27.42%
Count: 62
Mean: 1.94
Developing public speaking skills

No Benefit: 26.23%
Some Benefit: 40.98%
Great Benefit: 32.79%
Count: 61
Mean: 2.07

Volunteer recruitment/coordinator

No Benefit: 50.82%
Some Benefit: 34.43%
Great Benefit: 14.75%
Count: 61
Mean: 1.64

Legal issues in public health

No Benefit: 25.40%
Some Benefit: 47.62%
Great Benefit: 26.98%
Count: 63
Mean: 2.02

Leadership skills

No Benefit: 11.48%
Some Benefit: 39.34%
Great Benefit: 49.18%
Count: 61
Mean: 2.38
Appendix JJ

MPH Public Health Workforce Survey 2010 Report

Computer Software skills

<table>
<thead>
<tr>
<th>Level</th>
<th>Percentage</th>
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<tbody>
<tr>
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<td>30.00%</td>
</tr>
<tr>
<td>Some Benefit</td>
<td>40.00%</td>
</tr>
<tr>
<td>Great Benefit</td>
<td>30.00%</td>
</tr>
</tbody>
</table>

Count: 60
Mean: 2.00

Database design skills (SAS, SPSS, Excel)

<table>
<thead>
<tr>
<th>Level</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Benefit</td>
<td>24.19%</td>
</tr>
<tr>
<td>Some Benefit</td>
<td>43.55%</td>
</tr>
<tr>
<td>Great Benefit</td>
<td>32.26%</td>
</tr>
</tbody>
</table>

Count: 62
Mean: 2.08

Foreign Languages and medical terminology

<table>
<thead>
<tr>
<th>Level</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No Benefit</td>
<td>39.34%</td>
</tr>
<tr>
<td>Some Benefit</td>
<td>42.62%</td>
</tr>
<tr>
<td>Great Benefit</td>
<td>18.03%</td>
</tr>
</tbody>
</table>

Count: 61
Mean: 1.79

4. Any other area of training that you would benefit from additional training in that was not listed previously?

<table>
<thead>
<tr>
<th>Response</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No, I can’t think of any other areas.</td>
<td>89.23%</td>
</tr>
<tr>
<td>Yes, I would benefit from additional training in the following area(s)</td>
<td>10.77%</td>
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</table>

Count: 65
6a. Does your job include any managerial or supervisory responsibility?

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<thead>
<tr>
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<th>Yes</th>
<th>No</th>
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</thead>
<tbody>
<tr>
<td>Count</td>
<td>64.62%</td>
<td>35.38%</td>
</tr>
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</table>

7. Which of the training topics listed in question #3 would make the most positive difference in your ability to perform your current job effectively and efficiently? (Please check all that apply.)

<table>
<thead>
<tr>
<th>Training Topic</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Environmental Health skills</td>
<td>4.12%</td>
</tr>
<tr>
<td>Health Promotion/disease prevention</td>
<td>4.54%</td>
</tr>
<tr>
<td>Overview of the community/public health system</td>
<td>2.06%</td>
</tr>
<tr>
<td>Human Resource Management</td>
<td>1.86%</td>
</tr>
<tr>
<td>Finance/budgeting</td>
<td>2.27%</td>
</tr>
<tr>
<td>Strategic planning</td>
<td>4.95%</td>
</tr>
<tr>
<td>Group facilitation</td>
<td>2.47%</td>
</tr>
<tr>
<td>Cross-cultural communication</td>
<td>1.65%</td>
</tr>
<tr>
<td>Interpersonal communication</td>
<td>2.89%</td>
</tr>
<tr>
<td>Community/Program Planning/Needs Assessments</td>
<td>3.51%</td>
</tr>
<tr>
<td>Quality Assurance/Performance Improvement</td>
<td>5.98%</td>
</tr>
<tr>
<td>Developing Private/Public Partnerships</td>
<td>2.47%</td>
</tr>
<tr>
<td>Disease Surveillance</td>
<td>3.92%</td>
</tr>
<tr>
<td>Health/Risk Communication strategies</td>
<td>4.95%</td>
</tr>
<tr>
<td>Mediation/negotiation</td>
<td>2.27%</td>
</tr>
<tr>
<td>Participatory teaching/training skills</td>
<td>2.89%</td>
</tr>
<tr>
<td>Public/community health program evaluation</td>
<td>3.30%</td>
</tr>
<tr>
<td>Community involvement/mobilization</td>
<td>3.71%</td>
</tr>
<tr>
<td>Legislative/policy planning/advocacy</td>
<td>1.24%</td>
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<tr>
<td>Provision of technical assistance/consultation services</td>
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<td>Electronic communication</td>
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</tr>
<tr>
<td>Data Analysis and utilization</td>
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<tr>
<td>Survey Design and implementation</td>
<td>1.65%</td>
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<tr>
<td>Communicable disease investigation</td>
<td>2.89%</td>
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<tr>
<td>Written communication</td>
<td>3.51%</td>
</tr>
<tr>
<td>Grant writing</td>
<td>3.09%</td>
</tr>
<tr>
<td>Developing public speaking skills</td>
<td>3.71%</td>
</tr>
<tr>
<td>Volunteer recruitment/coordinator</td>
<td>1.44%</td>
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<tr>
<td>Legal issues in public health</td>
<td>4.12%</td>
</tr>
<tr>
<td>Leadership skills</td>
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<tr>
<td>Computer Software skills</td>
<td>2.68%</td>
</tr>
<tr>
<td>Database design skills</td>
<td>3.30%</td>
</tr>
<tr>
<td>Foreign Languages/medical terminology</td>
<td>1.24%</td>
</tr>
<tr>
<td>Other</td>
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</table>
8. Which of the training topics listed in question #3 would make the most positive difference in future options and career enhancement in public health? (Please check all that apply.)

<table>
<thead>
<tr>
<th>Training Topic</th>
<th>Percentage</th>
</tr>
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<tbody>
<tr>
<td>Environmental Health skills</td>
<td>2.85%</td>
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<tr>
<td>Health Promotion/disease prevention</td>
<td>4.56%</td>
</tr>
<tr>
<td>Overview of the community/public health system</td>
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<td>Human Resource Management</td>
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<td>Finance/budgeting</td>
<td>3.80%</td>
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<tr>
<td>Strategic planning</td>
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<tr>
<td>Group facilitation</td>
<td>3.42%</td>
</tr>
<tr>
<td>Cross-cultural communication</td>
<td>3.23%</td>
</tr>
<tr>
<td>Interpersonal communication</td>
<td>2.66%</td>
</tr>
<tr>
<td>Community/Program Planning/Needs Assessments</td>
<td>4.18%</td>
</tr>
<tr>
<td>Quality Assurance/Performance Improvement</td>
<td>3.61%</td>
</tr>
<tr>
<td>Developing Private/Public Partnerships</td>
<td>3.04%</td>
</tr>
<tr>
<td>Disease Surveillance</td>
<td>2.09%</td>
</tr>
<tr>
<td>Health/Risk Communication strategies</td>
<td>4.18%</td>
</tr>
<tr>
<td>Mediation/negotiation</td>
<td>2.85%</td>
</tr>
<tr>
<td>Participatory teaching/training skills</td>
<td>3.42%</td>
</tr>
<tr>
<td>Public/community health program evaluation</td>
<td>3.99%</td>
</tr>
<tr>
<td>Community involvement/mobilization</td>
<td>3.04%</td>
</tr>
<tr>
<td>Legislative/policy planning/advocacy</td>
<td>3.04%</td>
</tr>
<tr>
<td>Provision of technical assistance/consultation services</td>
<td>1.14%</td>
</tr>
<tr>
<td>Electronic communication</td>
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</tr>
<tr>
<td>Data Analysis and utilization</td>
<td>3.99%</td>
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<tr>
<td>Survey Design and implementation</td>
<td>2.09%</td>
</tr>
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<td>Communicable disease investigation</td>
<td>1.90%</td>
</tr>
<tr>
<td>Written communication</td>
<td>3.04%</td>
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<tr>
<td>Grant writing</td>
<td>4.75%</td>
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<tr>
<td>Developing public speaking skills</td>
<td>2.85%</td>
</tr>
<tr>
<td>Volunteer recruitment/coordinator</td>
<td>2.66%</td>
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<tr>
<td>Legal Issues in public health</td>
<td>1.71%</td>
</tr>
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<td>Leadership skills</td>
<td>3.61%</td>
</tr>
<tr>
<td>Computer Software skills</td>
<td>3.04%</td>
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<tr>
<td>Database design skills</td>
<td>2.66%</td>
</tr>
<tr>
<td>Foreign Languages/medical terminology</td>
<td>1.90%</td>
</tr>
<tr>
<td>Other</td>
<td>0.57%</td>
</tr>
<tr>
<td>Count</td>
<td>526</td>
</tr>
</tbody>
</table>

On-site training (instructor/classroom)

<table>
<thead>
<tr>
<th>Preference</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Least Preferred</td>
<td>18.97%</td>
</tr>
<tr>
<td>Preferred</td>
<td>36.21%</td>
</tr>
<tr>
<td>Highly Preferred</td>
<td>44.83%</td>
</tr>
<tr>
<td>Count</td>
<td>58</td>
</tr>
<tr>
<td>Mean</td>
<td>2.26</td>
</tr>
</tbody>
</table>
Appendix JJ

MPH Public Health Workforce Survey 2010 Report

Regional training (instructor/classroom)

Least Preferred 24.56%
Preferred 36.84%
Highly Preferred 38.60%
Count 57
Mean 2.14

Web-based eLearning (self-study modules)

Least Preferred 14.75%
Preferred 47.54%
Highly Preferred 37.70%
Count 61
Mean 2.23

Two-way videoconferences (instructor/remote site)

Least Preferred 47.46%
Preferred 32.20%
Highly Preferred 20.34%
Count 59
Mean 1.73

10. Highest level of education completed. (Select your highest degree from the drop-down list provided)

Some High School 0.00%
High School Diploma/GED 3.23%
Associates Degree/Junior College/RN 6.45%
Bachelors Degree 27.42%
Masters Degree 40.32%
Doctorate/MD 22.58%
Count 62
11. Please check any licenses, certifications, and/or registrations that you currently hold in the field of health care.

CHES 3.33%
LPN 0.00%
RN 13.33%
MD 15.00%
DO 0.00%
LPC 0.00%
LCWW 0.00%
PT 1.67%
OT 0.00%
DVM 1.67%
RPh 1.67%
PharmD 0.00%
RD 0.00%
AT 0.00%
None 30.00%
Other 33.33%
Count 60

Who is your employer (Please select one)?

Non-Profit/Not-for-Profit 8.20%
Academic/Education 11.48%
Local Health Department/Health District 45.90%
Other Office of State Department of Health 9.84%
Other State Agency (not Department of Health) 1.64%
Local Government 1.64%
Community Health Center 0.00%
Rural Health Center 1.64%
Municipal/State/Federal Clinic 0.00%
Other non-governmental community-based health clinic/center 0.00%
Private health clinic/center 3.28%
Hospital (non-governmental) 6.56%
Federal government/military 3.28%
Prefer not to answer 0.00%
Other 6.56%
Count 61
Appendix JJ

What is your gender?

<table>
<thead>
<tr>
<th>Gender</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>27.87%</td>
</tr>
<tr>
<td>Female</td>
<td>72.13%</td>
</tr>
</tbody>
</table>

Count: 61

Which age range currently describes you?

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>19 or under</td>
<td>0.00%</td>
</tr>
<tr>
<td>20 to 29</td>
<td>14.75%</td>
</tr>
<tr>
<td>30 to 39</td>
<td>19.67%</td>
</tr>
<tr>
<td>40 to 49</td>
<td>24.59%</td>
</tr>
<tr>
<td>50 to 59</td>
<td>27.87%</td>
</tr>
<tr>
<td>60 to 65</td>
<td>11.48%</td>
</tr>
<tr>
<td>66 or over</td>
<td>1.64%</td>
</tr>
<tr>
<td>Prefer not to answer</td>
<td>0.00%</td>
</tr>
</tbody>
</table>

Count: 61

Do you speak any language(s) other than English? (Please check one and fill in the blank, if appropriate)

<table>
<thead>
<tr>
<th>Response</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>No</td>
<td>86.89%</td>
</tr>
<tr>
<td>No answer</td>
<td>4.92%</td>
</tr>
<tr>
<td>Yes (Specify)</td>
<td>8.20%</td>
</tr>
</tbody>
</table>

Count: 61

Which of the following best describes your race/ethnicity? (Please check all that apply.)

<table>
<thead>
<tr>
<th>Race/Ethnicity</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hispanic/Latino(a)</td>
<td>4.92%</td>
</tr>
<tr>
<td>White/Caucasian</td>
<td>65.57%</td>
</tr>
<tr>
<td>Black/African American</td>
<td>22.95%</td>
</tr>
<tr>
<td>Asian/Pacific Islander</td>
<td>1.64%</td>
</tr>
<tr>
<td>American Indian/Alaskan Native</td>
<td>0.00%</td>
</tr>
<tr>
<td>Prefer not to answer</td>
<td>4.92%</td>
</tr>
<tr>
<td>Other</td>
<td>0.00%</td>
</tr>
</tbody>
</table>

Count: 61
Appendix KK

Graduate Program in Public Health
Informational Brochures 2011:

MPH Program Overview
Epidemiology Track
Health Management and Policy Track
Environmental Health Track
Health Promotion Track
MD/MPH Degree Overview
WELCOME TO THE EVMS/ODU GRADUATE PROGRAM IN PUBLIC HEALTH ORIENTATION
MONDAY, AUGUST 30, 2010
9:30 A.M. TO 5:00 P.M.

ORIENTATION EVENTS TO BE HELD IN
HOFHEIMER HALL ROOM 751/752
Located on the EVMS Campus in Hofheimer Hall 7th Floor
825 Fairfax Avenue, Norfolk, Virginia

AGENDA

9:30 – 10:00 a.m. Ms. Linda Lopez from the EVMS Parking Office (distributing EVMS parking tags (if you have received an EVMS ID badge) and Ms. Karen Kroll, Supervisor from the EVMS Accounts Receivable Office (collecting tuition)

10:00 –10:45 a.m. Dr. David O. Matson, MPH Program Director, introduction of EVMS faculty and staff

10:45 – 11:30 a.m. A. James English, MPH Program Associate Director, introduction of EVMS Administration and ODU faculty

- Dr. C. Donald Combs, Vice-Provost for Planning & Health Professions, EVMS
- Dr. Ann E. Campbell, Associate Dean for Student Affairs, EVMS
- Dr. Deanne Shuman, Interim Dean, College of Health Sciences, ODU, Dr. Emmanuel Rudatsikira, Chair, School of Community & Environmental Health, ODU and Richardan Benjamin, Associate Dean, College of Health Sciences, ODU

11:30 – 12:00 p.m. Erin Maple, Current Second Year MPH Student, brief overview on the Peru Project

Eric Chow, MPH Alumni, brief overview on the Congo Program

Lauren Matsko, Current President Second Year MPH Student, brief overview on the Honduras Project and MPH Program from a student’s perspective

Jimmy Ruiz, MPH Program Alumnus, MPH Class of 2005

12:00 – 1:00 p.m. Lunch for incoming students, faculty, staff, alumni and current MPH Students

1:00 – 2:00 p.m. Mr. Vincent Rhodes, Director, Marketing & Communications, Ms. April Pace, Educational Coordinator, Library Orientation, and Ms. Leslie Lipscomb, MPH Special Projects Coordinator

2:00 – 2:30 p.m. Student Health Insurance – Ms. Vera Potts

2:30 – 2:45 p.m. Lisa Pryse, Chief of Police and Public Safety - Security Services/ RAVE/Student Escort Services

2:45 – 3:00 p.m. Lisa E. Lee, RN, BSN, Director of Occupational Health

3:00 – 3:30 p.m. Sherry Allen, Office Coordinator, Family and Community Medicine, Student Health

3:30 – 4:30 p.m. Financial Aid Entrance Interview – Ms. Michelle Byers. Director, Office of Financial Aid

4:30 – 5:30 p.m. Human Resources Office - Ms. Nicole Thompson – taking photos for EVMS ID badges if you have not already done so

5:00 p.m. Dinner for incoming students, faculty, staff, MPH Alumni and current MPH students

Dinner will be served promptly at 5:00 p.m. with class beginning at 6:00 p.m. in Room 751 for Epidemiology and Health Management Track Students. ODU track students will be excused because they do not have class that evening.

Ms. Paula Swartz, MPH Program Supervisor, will be available to collect completed forms and answer questions.

We will attempt to follow the time frame as closely as possible so as not to rush through any segment of our planned agenda.