“Eastern Virginia Medical School is accredited by the Southern Association of Colleges and Schools Commission on Colleges to award the Doctor of Medicine degree, Master’s degrees, Doctoral degrees, and Certificates. Contact the Commission on Colleges at 1866 Southern Lane, Decatur, GA 30033-4097 or call 404.679.4500 for questions about the accreditation of Eastern Virginia Medical School.”

Last Approved by the Board of Visitors: 2000
Updated by Faculty Affairs and Professional Development: 6/2020
Pending Board of Visitors Approval
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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 and procedures exclusively applicable to the faculty 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 President, Provost and Dean of the School of Medicine and the EVMS Board of Visitors. EVMS adheres to a policy of non-discrimination and harassment and statements made in this manual are made without reference to, race, color, sex (including sexual orientation, gender identity/transgender status, and pregnancy or parental status), national origin, religion, age, disability, veteran status, genetic information, opposition to unlawful discrimination (i.e. retaliation), or any other protected basis as set forth in federal or state law.

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 and Provost, who further delegates authority to the 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. The Faculty Handbook is also located on the EVMS My Portal at http://myportal.evms.edu/. Changes in policies and procedures will be updated on the website as soon as practicable. In addition, paper copies of policy changes are available from Faculty Affairs and Professional Development (FAPD).

Other EVMS policies may be found on the EVMS My Portal. For information pertaining to student issues, faculty should refer to the Catalog and/or Student Handbook. For primary policy and procedure information pertaining to fringe benefits, vacation, retirement, and other human resources issues, faculty should refer to Human Resources Policies and Procedures. For primary information pertaining to payroll, purchasing, budgets, travel, business related expenses, and other financial issues, faculty should refer to the Financial Services Policies and Procedures. 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.
MISSION, VISION, VALUES, GOALS AND DIVERSITY STATEMENT

Mission

Eastern Virginia Medical School is an academic health center dedicated to achieving excellence in medical and health professions education, research and patient care. We value creating and fostering a diverse and cohesive faculty, professional staff and student body as the surest way to achieve our mission. Adhering to the highest ethical standards, 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 and Health Professions. Our commitment to ensuring institutional effectiveness is demonstrated by the continuous assessment processes we use to improve program performance and student learning outcomes.

Vision

Eastern Virginia Medical School will be recognized as the most community-oriented school of medicine and health professions in the United States.

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**: Maintain the highest professional standards for our residential and distance learning programs to prepare graduates to excel in their chosen profession and to respond to societal healthcare 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.

**Diversity Statement**

The education, research and patient care mission of Eastern Virginia Medical School (EVMS) is shaped by many considerations: the demographics of the surrounding communities, the significant presence of military personnel, retirees and their families, the rural and underserved communities of the Commonwealth of Virginia, and the broader national and global need to address gaps in the health workforce and the accessibility of health care.

Eastern Virginia Medical School has a unique history as one of the few institutions in the United States established by the local community to serve the local community. Indeed, its vision is to be the most community-oriented school of medicine and health professions in the nation. In fulfilling that vision, EVMS strives to attract talented students, trainees, faculty, staff and leaders who bring diverse attributes and experience to drive our collective commitment to excellence.

Eastern Virginia Medical School embraces diversity broadly defined, but places a special emphasis on recruitment of women, traditionally underrepresented minorities in medicine and the health professions (African Americans, Latinos, American Indians and Native Alaskans, and Native Hawaiians and Pacific Islanders), veterans and individuals who come from socioeconomically disadvantaged backgrounds. Acknowledging that diversity is a fluid and evolving concept, we will continually strive to be inclusive of individuals and groups in the broadest possible manner.  

Adopted June 11, 2013, Last Board Approval: June 9, 2020
EQUAL OPPORTUNITY POLICY

EVMS is committed to establishing recruitment and selection procedures which provide for consistent application, clear communication, and complete documentation in order to ensure equal employment opportunity. EVMS’ hiring policies are designed to seek out the best possible candidate for each available position while promoting a culture that embraces diversity.

Proper consideration will be given to such factors as education, experience, skill, and professional ability and all aspects of the employment process will be administered without regard to race, color, religion, gender, national origin, age, marital status, disability, sexual orientation, veteran status, genetic information, or any other basis protected by law. It is our intent and desire that equal employment opportunities will be provided in employment, recruitment, selection, compensation, benefits, promotion, demotion, layoff, termination and all other terms and conditions of employment.

Employees are directed to bring any violation of this policy to the immediate attention of Human Resources. An employee who violates this policy or knowingly retaliates against an employee reporting or complaining of a violation of this policy shall be subject to immediate disciplinary action, up to and including discharge. Complaints brought under this policy will be promptly investigated and handled in accordance with the EVMS Compliance Reporting/Anti-Retaliation Policy.

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 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 in accordance with Virginia Code §23.1-3000 et. seq. The Board is composed of seventeen nonlegislative citizen members appointed as follows:

- Two members are appointed by the Governor;
- Two members are appointed by the Senate Committee on Rules;
- Three members are appointed by the Speaker of the House of Delegates;
- Six members are appointed by the Eastern Virginia Medical School Foundation;
- Two members are appointed by the City Council of Norfolk;
- One member is appointed by the City Council of Virginia Beach;
- One member is appointed by city councils of Chesapeake, Hampton, Portsmouth, Suffolk, and Newport News, in a rotating manner.

President and Provost

The President and Provost is the Chief Executive Officer and Chief Academic Officer of EVMS and reports to the Board. The President and Provost shall have the following powers and duties as set forth in the EVMS Board of Visitors Bylaws:

- The President and Provost shall have responsibility for the operations of EVMS in accordance with §23.1-3000 et. seq., the bylaws, and policies and resolutions of the Board;
- The President and Provost shall act as an advisor to the Board and shall recommend the policies and programs that will best promote the interests of EVMS to the Board for consideration;
- The President shall assure the financial integrity of EVMS and develop and recommend to the Board an annual financial plan and budget;
- The President and Provost shall assure that EVMS maintains current strategic, financial, and operational plans, and establishes policies and procedures that support those plans;
- The President and Provost shall have the power to establish and modify the internal administrative structure of EVMS;
- The President and Provost shall manage EVMS academic services in accordance with policies of EVMS and the Board;
- The President and Provost shall appoint a Dean for each school division, subject to the approval of the Board, and all Vice Presidents and Vice Provosts;
- The President and Provost shall appoint or provide for the appointment of other administrative and academic officers and such professors, teachers, staff members, agents, and other personnel as necessary and according to the processes adopted by the Board;
- The President and Provost shall serve as an ex-officio, non-voting, member of all committees of the Board;
- The President and Provost shall control the fundraising activities of EVMS.
- The President and Provost shall be responsible for approving 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;
- The President and Provost shall design, implement, manage, and recommend final approval to the Board all faculty promotion and tenure, compensation and incentive plans;
- The President and Provost shall prepare and administer the academic plan for EVMS, which meets all requirements for accreditation and the service needs to the public;
• The President and Provost shall oversee all academic and student affairs;
• The President and Provost shall develop, coordinate and oversee the basic, clinical and research programs of EVMS; and,
• The President and Provost shall have such other powers and perform such other duties as given, assigned or delegated by the Board; and,
• The President and Provost may designate another EVMS officer or employee to exercise, in whole or in part, the authority of the President and Provost, provided that the President and Provost shall be responsible to the Board for the actions of his designee.

Dean of the School of Medicine

The Dean of the School of Medicine (SOM) is responsible for advancing the integration of the educational, clinical and research programs of the medical school. The Dean also provides leadership in medical education, scholarly activity, research, patient care and service. In this capacity, he/she serves as the Chair of the EVMS Medical Group Board.

• The Dean shall manage EVMS clinical and academic services of the School of Medicine in accordance with policies of EVMS and the Board.
• The Dean shall design, implement, manage, and recommend final approval of all faculty promotion and tenure, compensation and incentive plans for the EVMS School of Medicine.
• The Dean shall prepare and administer the academic plan for the EVMS School of Medicine, which meets all requirements for accreditation and the service needs to the public.
• The Dean shall oversee all academic and student affairs for the EVMS School of Medicine.
• The Dean shall recruit, appoint and reappoint vice deans, assistant/associate deans, department chairs, center directors, institute directors, and other academic faculty and administrative staff for the EVMS School of Medicine.
• The Dean shall develop, coordinate and oversee the basic, clinical and research programs of the EVMS School of Medicine.
• The Dean shall have such other powers and perform such other duties as given, assigned or delegated.

Vice Presidents, Vice Provosts, and Deans

Vice Presidents, Vice Provosts, and Deans of a school division shall report to and be responsible to the President and Provost and shall be responsible for the coordination, supervision and direction of those activities assigned by the President and Provost. Upon appointment of other executive, administrative and academic officers and employees, the President and Provost 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 personnel policies.

FACULTY AFFAIRS AND PROFESSIONAL DEVELOPMENT

The mission of Faculty Affairs and Professional Development (FAPD) is to maintain and ensure the integrity of the Eastern Virginia Medical School faculty records database and to administer and facilitate the faculty appointment/reappoint process in both the School of Medicine and School of Health Professions.

FAPD is responsible for maintaining comprehensive records of all staff holding faculty appointments in both Schools mentioned above. 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 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 President, Provost and Dean of the School of Medicine, faculty, and staff regarding interpretation and application of faculty policies.
- Coordinate and organize Institutional Standing Committees.
- Facilitate applications of faculty nominated for local, state and national awards.
- Plan for the presentation of two 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.

**BUSINESS MANAGEMENT**

The mission of the Business Management office 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 Business Management is to ensure the financial integrity of the school through prudent application of sound business practices.

The office reports to the President, Provost and Dean of the School of Medicine 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 OF THE SCHOOL OF MEDICINE AND VICE PRESIDENT AND DEAN OF THE SCHOOL OF HEALTH PROFESSIONS

The Chair of any academic department of the School of Medicine and the Vice President and Dean of the School of Health Professions (VPDSHP) of 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 School of Medicine and School of Health Professions at Eastern Virginia Medical School, including area-wide cooperation in regional program development.

Specific responsibilities of the Department Chair of the School of Medicine and VPDSHP are to:

Departments of the School of Medicine and School of Health Professions

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 President, Provost and Dean of the School of Medicine.

Academic

Implement the courses of study and portions of the integrated undergraduate/graduate medical education curriculum related to the department of the School of Medicine or the School of Health Professions. The learning objectives of the curriculum will be developed by the department, program, and/or
interdepartmental curriculum planning groups and be approved by School of Medicine Medical Education Committee or School of Health Professions Curriculum Committee.

Determine and recommend to the President, Provost and Dean of the School of Medicine 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.

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 President, Provost and Dean of the School of Medicine’s Council and approved by the President, Provost and Dean of the School of Medicine.

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 President, Provost and Dean of the School of Medicine for their retention, tenure, promotion and annual salary increments where appropriate.

Budgetary Affairs

Develop the annual departmental budget request to be recommended to the President, Provost and Dean of the School of Medicine.

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 EVMS Medical Group.
DEPARTMENTAL/SCHOOL OF HEALTH PROFESSIONS (SHP) FUNDS: GUIDELINES FOR DEPARTMENT CHAIRS OF THE SCHOOL OF MEDICINE OR VICE PRESIDENT AND DEAN OF THE SCHOOL OF HEALTH PROFESSIONS (VPDSHP)

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 Chairs of the School of Medicine or VPDSHP, 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 Department Chair or VPDSHP as to how much of their fund balance will be spent in the fiscal year. Every attempt should be made by each Department Chair of the School of Medicine or VPDSHP 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 President, Provost and Dean of the School of Medicine 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 President, Provost and Dean of the School of Medicine.

New Faculty Salaries (not to exceed two fiscal years for any individual)

Alteration and Renovation of Departmental Space
INSTITUTIONAL STANDING COMMITTEES

Academic Occupational Health and Safety Committee

Charge: To protect students, faculty and staff through policies and procedures involving occupational and environmental hazards. We strive to ensure appropriate and timely responses to all injuries, illness, and exposures involving occupational hazards. This includes, but is not limited to, advising on health surveillance and other occupational issues, as well as providing increased safety health awareness through campaigns and drives on campus. Collectively, the committee reviews safety and health policies and procedures in a broad spectrum of risks facing EVMS. In addition, we will coordinate activities with and advise other EVMS health and safety committees regarding federal, state and local regulatory bodies to ensure compliance and make written recommendations to Dean and Provost regarding occupational health and safety issues.

Admissions Committee (Doctor of Medicine Admissions Committee)

Charge: To recommend to the Dean of the School of Medicine the criteria for MD admission: to implement the selection process leading to a recommendation to the Dean of the School of Medicine of the students for admission into the MD program.

Animal Care and Use Committee (Institutional 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 and adhere to all 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: To manage institutional practices and policies promoting health and safety as related to environmental management and chemical hazards that comply with current regulations for the welfare of our students, faculty, and staff. The committee pursues and endeavors to instill institutional practices that will lead to ecologically responsible decisions towards such area’s concerning sustainability, recycling, pollution prevention, and greenhouse emissions. Members will develop written recommendations relating to safety concerns, and report annually to the President, Provost and Dean of the School of Medicine.

Committee on Committees

Charge: To recommend annually to the President, Provost and Dean of the School of Medicine, 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 to reduce or eliminate significant financial interests disclosed by faculty, students and staff in research and/or sponsored projects.

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 CME office, 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, recommend, and present to the President, Provost and Dean of the School of Medicine (or designee) faculty who have achieved significant accomplishments as a member of Eastern Virginia Medical School for institutional, state and national awards.

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 Boards are 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 and other local, state and federal agencies. The IRB also applies ethical principles found in the Belmont Report, the World Medical Association (WMA) Declaration of Helsinki - Ethical Principles for Medical Research Involving Human Subjects, and the Nuremberg Code. In addition to living human individuals, human subject research includes tissues, specimens, records and data sets from living human individuals. The EVMS IRB will prospectively review all research activities with living human subjects, or their tissues, specimens, records or data, and also have responsibility for making determinations on whether some activities meet the 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 which is applicable to both living and decedent individuals.
**Institutional Wellness Committee**

**Charge:** Oversee a comprehensive and coordinated EVMS Institutional Wellness program for all wellness focused activities across the institution.

**Library Advisory Committee**

**Charge:** To guide the President, Provost and Dean of the School of Medicine on policy related to library function, facilities and resource, to support ongoing operation and long-term development of the institutional library.

**Medical Education Committee**

**Charge:** The Medical Education Committee (MEC) is responsible for reviewing the structure, integration, sequencing and evaluation of the medical education curriculum and to advise the Vice Dean for Academic Affairs of its findings and recommendations; to recommend fundamental changes in the curriculum; and to develop and recommend institutional policies and procedures for student evaluation and grading.

**Phoenix Committee**

**Charge:** 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. 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 provide oversight, regulation and guidance of all aspects of radiation safety at EVMS according to the Virginia Administrative Code, and all other applicable regulations. This includes all concerns regarding ionizing radiation sources, their safe handling, and other pertinent topics.

**Research Advisory Committee**

**Charge:** To assess the research environment of EVMS and recommend strategies for its improvement; facilitate research-related activities; review cores and the use of all institutional research funds and make recommendations for their distribution, including capital equipment requests; cultivate and update the Vice Dean on research-related fund raising opportunities and communication of research advances to highlight EVMS discoveries.

**Student Affairs Committee**

**Charge:** To serve in an advisory and support capacity to Student Affairs in the oversight and review of student services related to health and wellness, the learning environment, and academic development. The Committee will inform best practices developed by Student Affairs to maintain a supportive, professional, safe, and enriching experience for all students and to fulfill applicable accreditation requirements.
**Student Progress Committee**

**Charge:** To review, evaluate and develop policies and procedures concerning the progress and promotion of MD students. To recommend to the Dean of the School of Medicine, and the Faculty, the promotion of MD students within the instructional program. To recommend to the Dean of the School of Medicine 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**

1. **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 President, Provost and Dean of the School of Medicine.

   B. Consider such policies, programs, and other matters as the President, Provost and Dean of the School of Medicine, the administration, the President, Provost and Dean of the School of Medicine’s Executive Committee, Council of Chairs, 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 President, Provost and Dean of the School of Medicine and the appropriate Standing Committee of EVMS outlining support or any suggested revisions prior to presentation at the President, Provost and Dean of the School of Medicine’s Executive Committee.

   D. Help create, maintain, and protect an environment conductive 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:

   - Anatomy/Pathology
   - Pediatrics
   - Emergency Medicine
   - Physical Medicine and Rehabilitation
   - Family Medicine
   - Physiological Sciences
   - Internal Medicine
   - Psychiatry
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 President, Provost and Dean of the School of Medicine
   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 President, Provost and Dean of the School of Medicine'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 President, Provost and Dean of the School of Medicine 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 President, Provost and Dean of the School of Medicine’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 President, Provost and Dean of the School of Medicine’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:
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, Provost and Dean of the School of Medicine, 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” or “EVMS Medical Group”) 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”).
I. THE FACULTY

INTRODUCTION

An effective academic medical center requires a diverse faculty. Accordingly, the policies and procedures contained within this document pertain to the initial appointment, subsequent promotion, and tenure (when applicable) of all faculty at Eastern Virginia Medical School engaged in the diverse areas of teaching, clinical care, research/discovery and administration/service. In order to affirm the multiple roles that EVMS faculty contribute to the school’s mission and vision and for our community, all faculty pursue one pathway toward appointment and promotion.

A. Academic Faculty

The criteria for appointment and promotion of academic faculty at EVMS require that faculty fulfill their assigned responsibilities in teaching, clinical care, research/discovery and administration/service, with a level of expertise befitting the rank. Faculty may seek initial appointment or promotion in one system (pathway) with agreement from the faculty member and the Department Chair as to the role of the member.

This document outlines the institution's expectations for scholarly accomplishments and expertise in order to justify a recommendation for initial appointment or promotion to the ranks of Instructor, 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 teaching, clinical care, research/discovery and administration/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.

B. 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.

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 Chairs of the School of Medicine or the VPDSHP.

Community faculty may seek initial appointment or promotion in one system (pathway) with agreement from the faculty member and the Department Chair as to the role of the member using the same criteria as for full-time faculty.
II. POLICIES AND PROCEDURES RELATING TO FACULTY APPOINTMENT, PROMOTION AND TENURE

INTRODUCTION AND POLICY

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

A. Faculty Status Definitions

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

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

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

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

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

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

*Non-Promotion Eligible Faculty:* Individuals primarily employed by EVMS in a non-academic role who have been invited to participate in the institution’s research, teaching, or clinical care missions, to pursue collaborative efforts, or to provide other services to EVMS, on an intermittent, irregular, or seasonal basis. They may, for example, teach one or more courses for one semester, give a series of lectures within a course developed by an EVMS full-time faculty member, supervise students or prepare them for various professional roles, teach specific clinical skills or graduate seminars, or oversee graduate research conducted by EVMS students (they may not be principal advisors on masters or doctoral theses, but may serve on thesis committees).
Community Faculty: Community faculty are unpaid faculty members who volunteer their time, efforts, and expertise to the EVMS mission. Community faculty are expected to commit at least 50 hours to EVMS academic activities per year. This time commitment can be met by actively participating in grand rounds or other department conferences, serving on committees, delivering didactic lectures, providing ward attending coverage, precepting students or residents, participating in other teaching activities at EVMS, or by participating in other activities agreed to by the faculty member and the Department Chair of the School of Medicine or the Vice President and Dean of the School of Health Professions (VPDSHP).

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

Emeritus Faculty: Emeritus or emerita is an honorary faculty appointment, awarded upon retirement, for distinguished or exceptional service and outstanding dedication to EVMS as further outlined in the Emeritus Faculty Appointment Policy.

B. Faculty Appointment and Promotion Definitions

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

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

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

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

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

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

Track: Two faculty tracks exist; tenure and non-tenure. Appointment and promotion on the tenure track is available to full-time salaried faculty at the rank of Associate Professor and Professor. Part-time and community faculty are appointed exclusively to the non-tenure track.
The consideration of a candidate for tenure versus non-tenure track is a major distinction in the evaluation of individuals for appointment and promotion, and it is only available to full-time salaried faculty.

1. **Tenure**: Although there are no absolute criteria, tenure is generally awarded to full-time salaried faculty based on accomplishments beyond achieving academic recognition, and should reflect exceptional, continuous and substantial contributions to EVMS. Faculty at the rank of associate professor or professor who demonstrate excellence in at least two of the foregoing four areas are eligible for tenure subject to length of service requirements. (See Tenure section pages 63-65)

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

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

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

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

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

   - Non-tenure track faculty appointments will have the title:
     - instructor
     - assistant professor
     - associate professor
     - professor

   - Tenure track faculty appointment will have the title:
     - associate professor
     - professor

   **Types of Appointment**

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

• Secondary appointment
A faculty member may have a secondary appointment in one or more departments or schools for the purpose of contributions and collaborative relationships in any of the mission areas. Secondary appointments are recommended by Department Chairs of the School of Medicine or the VPDSHP of both primary and secondary departments with the agreement of the individual faculty member. Performance expectations of the individual faculty member should be agreed upon in writing prior to the appointment. An individual faculty may not hold academic rank in a secondary appointment higher than in the primary appointment.

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

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

D. Annual Review of Faculty Members’ Performance

INTRODUCTION AND POLICY
It is the policy of EVMS that all EVMS Department Chairs of the School of Medicine or the Vice President and Dean of the School of Health Professions, or their designees, provide annual evaluations of all faculty members appointed within their departments or programs. Academic units shall make reasonable efforts to inform faculty of the promotion process, including tenure, and encourage participation in professional development activities aligned with their career goals.

Purpose:
EVMS values excellence in teaching, clinical care, research/discovery and administration/service. The institution believes that an ongoing performance management process supports these values by providing faculty with performance feedback in order to understand what is expected, how they are performing, and what is required to achieve or sustain excellence for promotion or tenure.
Process:

- In the spring of each year, Faculty Affairs and Professional Development (FAPD) sends an email notification to faculty, chairs and administrators that the annual performance review process has begun with directions and a link to the form.
- Prior to the annual evaluation, each faculty member shall submit an annual evaluation form to the academic unit’s administrative head of her/his past year’s performance and her/his goals and priorities for subsequent year. The report shall be based on the appropriate criteria for subsequent annual review, reappointment, promotion, and (as applicable) tenure and post-tenure review.
- The academic unit’s administrative head shall meet with each faculty member to review the submitted evaluation and to discuss progress toward meeting the goals and priorities of each faculty member and determine goals and priorities for the upcoming year in accordance with the faculty’s percentage of effort directed toward teaching, clinical care, research/discovery and administration/service.
- In the event that the academic unit’s administrative head does not have routine contact or knowledge of the performance of a faculty member, she/he may select another individual within the academic unit as a designee (i.e., associate chair, division chief or program director) who is in a supervisory role and has knowledge of the individual faculty member’s performance.
- The academic unit administrative head or his/her designee shall prepare a brief written report of the evaluation that is acknowledged by both parties verifying that the evaluation was completed and the feedback was read and discussed.
- A copy of all signed annual evaluations shall be filed with FAPD and Human Resources as part of the faculty member’s personnel file. The appropriate Dean of each school as well as the appropriate committees shall have access to the annual reports for subsequent annual review, reappointment, promotion, and (if applicable) tenure decisions.

III. POLICY AND PROCEDURES FOR FACULTY APPOINTMENT

INTRODUCTION AND POLICY

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

Appointment Procedures

A. Authorization of Faculty Positions

1. New Faculty Position Establishment

   The President, Provost and Dean of the School of Medicine must authorize and approve all requests of Department Chairs of the School of Medicine and the VPDSHP 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 Chairs of the School of Medicine and the VPDSHP must provide the following information and any other pertinent information 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 EVMS Medical Group Professional Services Committee. The Professional Services Committee forwards its recommendation to the EVMS Medical Group Executive Committee.

- Justification for the teaching, clinical care, research/discovery and administration/service 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 President, Provost and Dean of the School of Medicine notifies the Department Chair of the School of Medicine or the VPDSHP 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, 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).

2. 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 President, Provost and Dean of the School of Medicine must authorize and approve all requests of the Department Chairs of the School of Medicine and the VPDSHP to fill vacant faculty positions. For vacant clinical faculty positions, approval may also be required by the EVMS Medical Group Professional Services Committee and Executive Committee. In requesting permission to fill a vacant faculty position the Department Chairs of the School of Medicine or the VPDSHP must provide the following information to support and facilitate the approval process.

- List the position number previously assigned.
- Describe any changes in the primary responsibilities of the position including changes in the percent or amount of effort originally approved for teaching, clinical care, research/discovery and administration/service.
- Anticipated effective date of filling the vacant position.
- Proposed/recommended faculty rank.
- Affirm any co-terminus condition(s) previously attached to the faculty position and/or indicate new co-terminus condition(s).
- Anticipated salary compensation for the vacant 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 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 President, Provost and Dean of the School of Medicine notifies the Department Chairs of the School of Medicine or the VPDSHP in writing regarding approval or disapproval to fill the vacant faculty position.

B. Faculty Recruitment and Letter of Offer

Upon approval of the President, Provost and Dean of the School of Medicine for the establishment of a new faculty position or permission to fill an existing vacant faculty position, the Department Chair of the School of Medicine or the VPDSHP 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 Department Chair of the School of Medicine or the VPDSHP 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 IV, “Standards of Excellence for Each Rank.” Section IV also provides examples of excellence standards appropriate for each academic rank. These standards guide the Department Chair of the School of Medicine and the VPDSHP when recommending candidates for initial faculty appointment.

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

Upon completion of the interview process and selection of a candidate for a faculty position, the Department Chair of the School of Medicine or the VPDSHP prepares a Letter of Offer.

The Letter of Offer must include the following components:

1. Proposed faculty track and 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 Faculty Affairs and Professional Development (FAPD). 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 FAPD).

7. Describe the primary duties and responsibilities, and percentage of effort 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 are required to sign a Faculty Employment Agreement or a Clinical Faculty Employment and Non-Competition Agreement, which will be attached for the candidate’s review (attachment provided by FAPD).

10. Make reference to the Applicant’s Consent and Release Agreement for completion and signature by the candidate upon acceptance of the offer (attachments provided by FAPD).

11. 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.”

12. Requested response date from the candidate.

13. Signature lines for execution by the Department Chair of the School of Medicine or the VPDSHP, President, Provost and Dean of the School of Medicine, Vice Provost for Faculty Affairs and Institutional Effectiveness, Vice President for Administration and Finance, and EVMS Medical Group Chief Executive Officer (clinical).

14. Candidate acceptance signature line.

Process for Letter of Offer

a) Department Chair of the School of Medicine or VPDSHP prepares Letter of Offer and forwards to Faculty Affairs and Professional Development (FAPD).

b) FAPD reviews the Letter of Offer and sends it to Business Management for review.

c) FAPD performs a preliminary verification of candidate’s terminal degree and licensure before letter of offer is processed.

d) FAPD returns the reviewed Letter of Offer to the Department Chair or VPDSHP to place on letterhead, sign and return to FAPD.

e) FAPD routes the Letter of Offer to the President, Provost and Dean of the School of Medicine, Vice Provost for Faculty Affairs and Institutional Effectiveness, Vice President for Administration and Finance and EVMS Medical Group Chief Executive Officer (if applicable) for signature.

f) FAPD returns signed Letter of Offer with attachments to the Department Chair of the School of Medicine or VPDSHP.

g) The Department Chair of the School of Medicine or VPDSHP sends the Letter of Offer and attachments to the candidate.

h) Candidate signs Letter of Offer accepting position, attaches signed Applicant’s Consent and Release Agreement and returns the documents to the Department Chair of the School of Medicine or VPDSHP.

i) The Department Chair of the School of Medicine or VPDSHP notifies FAPD by providing the original signed acceptance letter and signed Consent and Release Agreement.
j) FAPD notifies Business Management and, for clinical faculty, the EVMS Medical Group Credentialing Coordinator by providing copies of the above documents.
k) The Department Chair of the School of Medicine or VPDSHP, Office of FAPD, and EVMS Medical Group initiate the process of faculty appointment and credentialing.

C. Credentialing Process

1. Verification of Credentials

Following receipt of the accepted Letter of Offer, signed Applicant’s Consent and Release Agreement, CV on EVMS form and documentation for faculty appointment from the Department Chair of the School of Medicine or VPDSHP, Faculty Affairs and Professional Development (FAPD) will initiate the verification of the applicant’s credentials.

FAPD 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 EVMS Medical Group Credentialing Coordinator verifies the following clinical credentials:
   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 Department Chair of the School of Medicine or Vice President and Dean of the School of Health Professions (VPDSHP), and President, Provost and Dean of the School of Medicine.

2. Clinical Credentialing 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
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 EVMS Medical Group Credentialing Coordinator will facilitate the process by assisting the candidate with obtaining and completing these applications. If Hospital Privileges are required, the EVMS Medical Group 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 EVMS Medical Group Credentialing Coordinator notifies the candidate, the Department Chair of the School of Medicine or the VPDSHP when appropriate, and the Office of FAPD when the clinical credentialing process is complete.

**D. 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 reviewed by the Vice Provost for Faculty Affairs and Institutional Effectiveness and approved by the President, Provost, Dean of the School of Medicine following receipt of the appropriate materials from the Department Chair of the School of Medicine or VPDSHP. Nominations for appointment at the Associate Professor and Professor ranks are considered by the Appointments and Promotions Committee. Following is an outline of the general process for initial faculty appointment.

a) Candidate submits required documents to the Department Chair of the School of Medicine or the VPDSHP.

b) Department Chair of the School of Medicine or VPDSHP obtains letters of reference.

c) [Optional] Nomination sent to Departmental Appointments Committee for consideration.

d) [Optional] Recommendation from Departmental Appointments Committee to Department Chair of the School of Medicine or the VPDSHP.

e) Nomination package forwarded by Department Chair of the School of Medicine or the VPDSHP to the President, Provost and Dean of the School of Medicine in care of Faculty Affairs and Professional Development (FAPD).

f) Nomination reviewed by FAPD to assure necessary information is submitted.

g) Nominations at the ranks of Assistant Professor and below are reviewed by the Vice Provost for Faculty Affairs and Institutional Effectiveness and approved by the President, Provost, Dean of the School of Medicine.

h) For the ranks of Associate Professor and Professor, the President, Provost and Dean of the School of Medicine forwards the nomination package to the Appointments and Promotions Committee in care of FAPD.
i) Nomination considered by the Appointments and Promotions Committee and recommendation forwarded to the President, Provost and Dean of the School of Medicine.

j) Nomination forwarded by the President, Provost and Dean of the School of Medicine to the Academic and Student Affairs Committee for review and recommendation.

k) Academic and Student Affairs Committee forwards to Board of Visitors for approval.

l) Board of Visitors sends letter of appointment to new faculty member at the rank of Associate Professor and Professor.

m) The Vice Provost for Faculty Affairs and Institutional Effectiveness sends letter of appointment to new faculty member at the rank of Instructor, Assistant Professor and Non-Promotion Eligible Faculty.

E. Appointment Nomination Package Required Checklist

1. Chair of the School of Medicine or VPDSHP Letter

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

2. Letters of Recommendation

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

   a. For Instructor:
      i. No letters are required.

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

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

3. Curriculum Vitae and Additional Required Information

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

4. Original Transcript of Terminal Degree

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

F. Notification and Employment Contracting

FAPD notifies the Department Chair of the School of Medicine or VPDSHP when the faculty appointment has been approved. The Department Chair of the School of Medicine or VPDSHP receives a copy of the letter of appointment to the new faculty member. The EVMS Medical Group Credentialing Coordinator notifies the candidate, the Department Chair of the School of Medicine, and FAPD 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.

1. **Faculty Employment Agreements**

FAPD will initiate the completion of the faculty employment documents and issues the following documents to the new faculty member.

a) **Employment Agreement**

All new faculty are required to sign a Faculty Employment Agreement or a Clinical Faculty Employment and Non-Competition Agreement. The clinical agreement is made by and among the EVMS Academic Physicians and Surgeons Health Services Foundation, the Eastern Virginia Medical School, and the clinical faculty member. The specifics of the restrictive non-competition covenant will be specified in accordance with EVMS Medical Group policy. The Clinical Employment and Non-Competition Agreement is signed by EVMS Medical Group Chief Executive Officer, the President, Provost and Dean of the School of Medicine, the Vice President for Administration and Finance, and the Department Chair of the School of Medicine or VPDSHP. All faculty members must sign and return their agreements.

b) **Faculty Compensation Letter**

The Faculty Compensation Letter 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. A URL link to the Faculty Fringe Benefits is included in the letter. The format and wording of the Compensation Letter 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 President, Provost and Dean of the School of Medicine and Vice President for Administration and Finance. The Faculty Compensation Letter is signed by the President, Provost and Dean of the School of Medicine, Vice President for Administration and Finance, the Department Chair of the School of Medicine or VPDSHP, and Chief Executive Officer EVMS Medical Group (if applicable).

FAPD issues the above faculty employment contracts to the new faculty member for execution. The fully executed documents are returned to FAPD and notifies EVMS Medical Group that the employment contracts are complete.

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.

**G. Provisional Appointments**

For initial salaried faculty appointments only to all faculty ranks, the President, Provost and Dean of the School of Medicine may approve in emergency situations a provisional appointment provided:
1. The Department Chair of the School of Medicine or VPDSHP must provide to the President, Provost and Dean of the School of Medicine, in writing, the reason for requesting provisional status for a potential new faculty member. The President, Provost and Dean of the School of Medicine must be given at least five (5) working days to respond with approval or disapproval.

2. The maximum provisional appointment period will not exceed three (3) months. In special situations the President, Provost and Dean of the School of Medicine may approve one extension of ninety (90) days.

3. The required clinical credentials under Section III C.2 of the faculty handbook must be complete prior to the beginning of any clinical activity including direct patient care, consultation or preceptorship.

4. The President, Provost and Dean of the School of Medicine notifies the prospective faculty member by letter of the provisional appointment stating: a) termination date, b) that the full appointment/credentialing process must be completed by such date, and c) compensation payments will automatically cease by such date and EVMS will have no continued contractual obligation beyond such date unless a permanent appointment has been approved.

5. The non-binding offer letter (Section III B) MUST NOT suggest the possibility of provisional appointments.

6. The provisional appointments approved by the President, Provost and Dean of the School of Medicine will each be reviewed by the President, Provost and Dean of the School of Medicine at the next Academic Affairs Committee of the Board of Visitors.

7. New Faculty will not be added to the EVMS payroll until the President, Provost and Dean of the School of Medicine has approved provisional status and the letter referred to in 4. above has been sent to the prospective faculty member. Retroactive pay (prior to the date of President, Provost and Dean of the School of Medicine’s approval) will not be granted.

H. Policies and Procedures for Reappointment

A. A reappointment shall be offered only following a substantive review of a faculty member’s performance during the previous appointment. The qualifications a candidate shall possess to be reappointed to a rank are specified in Section IV. Standards of Excellence for Each Rank. Reappointment is primary recognition of excellent performance. Reappointment decisions shall be based on rigorous standards and reappointment shall be denied if past performance is not sufficiently high quality or does not meet the EVMS standards of professional behavior. Reappointment may also be denied for financial or programmatic reasons (See Grounds for Dismissal of Faculty, pages 66-68)

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

1. Instructors shall be appointed for a term of one (1) year or less.

2. Assistant Professors shall be appointed initially for a term of one (1) year or less.
3. Assistant Professors 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 shall be appointed for one (1) or more terms of three (3) years each.

5. Full Professors shall be appointed to one (1) or more terms of three (3) years each.

C. Annual Compensation for faculty shall be made on a fiscal year basis from July 1 to June 30.

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

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

F. 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.

G. Contractual faculty shall be subject to dismissal during the term of their appointment on any of the grounds specified in the Grounds for Dismissal of Faculty section or as may be specified in the Faculty Handbook.

IV. STANDARDS OF EXCELLENCE FOR EACH RANK

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

All candidates are expected to demonstrate expertise commensurate with their academic rank in all of their assigned activities (teaching, clinical care, research/discovery and administration/service). In addition, each candidate must demonstrate accomplishment in scholarly activity as outlined in Section VI E.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 Department Chairs of the School of Medicine or VPDSHP in evaluation of faculty performance and in documenting excellence for faculty recommended for appointment and promotion.

A. To Rank of Instructor

**Eligibility:** The academic title and classification of Instructor is established to acknowledge individuals who demonstrate interest in, and the potential for, a successful academic career in teaching, clinical care, research/discovery and administration/service and to assist in the transition from training to a path that may lead to a faculty career in academic medicine. Individuals who hold a terminal degree may be eligible for promotion in rank, however,
EVMS is under no obligation to promote or appoint an Instructor to Assistant Professor. Candidates should engage in mentored research, teaching, clinical care or other instructional or programmatic support that advance the mission of the institution.

The rank of Instructor is appropriate for:

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

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

Duration of the appointment

Individuals appointed to the rank of Instructor are not tenure eligible. Instructor appointments are for a one year period. For individuals in training, these appointments are renewable until the training is completed. For individuals who are not in training, there is no limit on the number of times these individuals may be reappointed following a satisfactory performance review. Recommendations for or against reappointment should originate from the academic administrator of academic program unit in which the individual is assigned and must be approved by Faculty Affairs and Professional Development. The duties and salaries of such persons are specified in the letter of offer. All full-time and part-time Instructors are entitled to attend and participate in the faculty meetings of their respective School. They have the right to serve on departmental committees, vote in departmental meetings or serve on committees of the Faculty or Institutional Standing Committees, however, they shall not hold office on such committees.

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

B. To Rank of Assistant Professor

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

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

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

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

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

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

4. Administration/Service
   a. Actively participates in medical school and hospital committees.
   b. Actively participates in professional/clinical organizations.

C. To Rank of Associate Professor

Eligibility: Candidates for associate professor rank are expected to contribute substantially to EVMS academic activities, and have a substantial record of achievement and academic
accomplishments beyond that required for assistant professor. Promotion to associate professor usually requires between four (4) and six (6) years following initial appointment at the rank of assistant professor at EVMS, or at another academic institution or an equivalent experience is required to be considered for promotion. Candidates include:

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

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

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

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

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

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

D. To Rank of Professor

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

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

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

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

1. Teaching
   a. Is continually recognized as an outstanding teacher and educator. Candidate should present outstanding evaluations from students, peers, and others, as appropriate.
Teaching awards from students, faculty, or state or national organizations provide additional evidence of excellence.

b. Has widespread regional and national recognition for excellence as teacher or educator. Regular participation as a presenter in national review courses and professional meetings is expected.

c. Contributes to Board examination in specialty or subspecialty. Gives or administers oral examinations in specialty or subspecialty.

d. Course materials, syllabi, etc., should be widely respected by peers at other institutions. Candidates should serve as consultants in the design and evaluation of educational programs and curricula at the national level.

e. Has developed educational methods or protocols recognized at the local, regional and national level.

f. Is recognized as an authority by peers and invited to speak or chair sessions at national meetings.

g. Has had visiting professorships.

h. Provides mentoring at regional and national level.

2. Clinical Care

a. Has developed a new clinical program recognized at the regional and national level.

b. Has significantly improved an ongoing clinical activity.

c. Has devised or implemented a new diagnostic or therapeutic procedure, instrument or system.

d. Has developed an innovative infrastructure such as patient databases for patient tracking.

e. Has developed clinical pathways which are used on the local, regional or national levels.

f. Has developed outcome measures which are used at the local, regional or national levels.

g. Has a continuing active role in clinical investigation and clinical trials.

h. Has had a major impact on the development of national standards for patient care.

i. Establishes, consults and/or tracks patients on a regional, national or international level.

3. Research/Discovery

a. Has continually demonstrated expertise as first/senior author in peer-reviewed journals.

b. Has been editorial board member and peer reviewer on the national level.

c. Has had sustained and continuing success in generating financial resources necessary to undertake scholarly activity.

d. Is invited to speak at national specialty meetings.

4. Administration/Service

a. Is an officer/director of a scholarly society or member of an organizing committee for a scholarly meeting.

b. Is an officer in local or regional clinical/professional society.

c. Is an officer in national or international professional/clinical societies.

d. Is a Chair and member on major hospital and standing school committees.

e. Has testified before legislative bodies and/or involvement in policy-making at the regional or national level.

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V. GUIDELINES FOR APPOINTMENT AND PROMOTION

A. Introduction

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

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

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

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

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

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

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

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

C. Types of Evidence in the Four Faculty Roles

1. \textbf{Teaching Accomplishments}

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

Level 1. These activities should be recognized locally as being competent.
- Active participation in teaching activities of the department, such as a series of educational presentations, or coordinating a course
- Delivery of educational materials to students, residents, trainees, research fellows or peers in health professions training program
- Instructs in laboratory sessions for health science students
- Facilitates small group sessions for medical students, health science students, residents/fellows
- Serves as LGM Instructor
- Presents teaching rounds or patient conferences
- Supervises trainees performing outpatient or inpatient clinical service
- Participates in teaching or supervision of medical students or graduate students or residents/fellows
- Participates in postgraduate or continuing education courses that serve a local audience
- Receives satisfactory evaluations from learners or peer reviewers
- Demonstrates commitment to enhancing educational skills by participating in courses, conferences, workshops, on-line learning experiences, etc. related to one’s educational responsibilities
- Serves as Advisor for medical student, health sciences student, postgraduate student or resident/fellow

Level 2. These activities should be recognized locally or regionally as being meritorious.
- Prepares curriculum material (new courses, syllabus materials, Blackboard materials, etc.)
- Supervises or coordinates the teaching by other faculty, residents or graduate students (i.e., Course or Unit director)
- Develops innovative approaches to improving students/resident learning and the enhancement of learning experiences (e.g., implements integration across disciplines; explores impact of innovation on learners’ accomplishments)
- Develops or directs a postgraduate or continuing education course that serves a regional audience
- Invited to make presentations at the state or regional level
- Invited presenter at other institutions of higher education (i.e., universities, medical centers, health profession schools) or research and development facilities or institutes (i.e., NIH, Harvard-Macy, Max Planck Institute, etc.)
- Develops and participates in the teaching of major portions of a graduate course
- Supervises graduate students (Masters or PhD), MPH thesis for students in MD/MPH programs, serves as a project mentor for MD student or resident/fellow scholarly activity or research project requirement
Demonstrates meritorious teaching ability as measured by learner evaluation and peer review
Receives a local teaching award

Level 3. These activities should be recognized regionally, nationally or internationally as excellent.
- Develops a course, curricular component, educational software, or evaluation materials that are used regionally or nationally
- As course leaders, acknowledged by LCME or SACS reviewers as demonstrating ‘best practices.’
- Invited to organize and participate in a symposium or plenary session at a regional or national educational meeting
- Initiates and collaborates with colleagues at multiple institutions in major presentation at regional or state level (symposia; preconference workshops)
- Identifies exemplary ‘best practices’ from other institutions, adapts practices for EVMS curriculum, implements innovative approach to curriculum delivery and evaluation
- Implements inter-professional educational experiences that address leading community health needs; demonstrates improved educational outcomes.
- Supervises a training program, residency program or fellowship and achieves recognition of supervisory authority.
- Receives a regional or national teaching award
- Nominated to and serves on national professional organization’s education task force or initiative
- Invited to be a Visiting Professor at other institutions
- Provides educational leadership by serving as Editor of textbooks, journals or editorials.
- Achieves funding of innovative educational program through national or international funding agency
- Publishes educational works in peer-reviewed journals, television or radio or electronic sites
- Develops educational and evaluation tools acknowledged as advancing field in disciplinary or interdisciplinary teaching and evaluation.
- Citation by news bulletins, etc., of professional organizations

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

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

- Demonstrates competence as defined by attaining/maintaining educational and/or professional accreditations/ Board Certifications (NCCPA, NSAA, ACGME, ABMS etc…) in areas such as (but not limited to) patient care, diagnostic, procedural and other clinical related activities
- Consistently rated highly by students, residents, fellows and faculty
- Provides evidence of consulting and collaborating at local levels
- Actively coordinates or develops additive activities within the academic unit or practice group
- Provides evidence of being a contributing/active member in specialty/subspecialty professional groups and societies
- Provides evidence of high rating of periodic validated patient experience surveys
- Consistently meets objective clinical/departmental benchmarks demonstrating quality care standards (length of stay, complication rate, utilization parameters, etc.) as compared to peer groups
- Provides evidence of providing a minimum of 50 hrs/year community clinical service/care to underserved /indigent /special needs populations in support of EVMS activities and missions
- Provides evidence of reflective self-evaluation and assessment to improve performance within the scope of practice
- Provides evidence of being a consistent life-long learner through activities such as faculty development, CME and other professional development sessions

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

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

**Level 3. Candidates must demonstrate evidence that their activities are recognized nationally or internationally as consistently excellent.**
- Demonstrates outcomes and impact of clinical, educational or professional programs they have developed and implemented
- Presents evidence as an established consultant and collaborator at national or international levels
- Provides evidence that the scope of their clinical or professional practice has achieved consistently excellent feedback by multiple peers at national or international level
- Serves on national/international clinical committees (guidelines, peer review, etc.)
- Is recognized by media publications at national or international levels (“Best Doctors” surveys) for clinical care or professional achievements (note: this cannot include monetarily attained listings or self-promotion vehicles)
- Provides evidence of consulting and collaborating at national and international levels
- Presents evidence of a unique clinical program, diagnostic test, or interventions developed that has had wide spread and national/international impact
- Contributes significantly to board examination (i.e., board examiner, item test writer) in specialty/subspecialty
- Receives exceptional recognition by specialty/subspecialty society (Mastership or equivalent) or Fellowship in multiple societies
- Participates in national and international guideline setting or protocol writing panels
- Is elected to a significant leadership role in clinical or professional societies
- Receives outstanding recognition by grateful patients, institutions or societies for excellence in clinical care. May consist of special awards, endowments or substantial impact to EVMS mission and the community of scholars.
- Provides exceptional amounts of community clinical care to underserved /indigent /special needs populations in excess of 400 hrs/yr
- Makes broadly impacting clinical contributions internally and externally appropriate to the mission of the institution its students, faculty or staff
3. **Research/Discovery Accomplishments**

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

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

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

**Level 3. These activities should be recognized regionally, nationally or internationally as excellent.**
- **Extramural Funding:** PI on indirect cost bearing grants to support research and PI salary for total effort devoted to research; evidence of sustained support at this level
- **Publications:** 3-4 journal articles/year in mid-tier journals with mid-tier impact or 2 journal articles/year in top journals with high impact (assumes 100% effort to research; only those where candidate is listed as 1st or last author)
o **Communications:** Invitations to speak at universities, hospitals, other academic/medical facilities, professional meetings, to the lay public nationally/internationally

o **Patents:** Author on a patent which has been licensed and/or generates revenue for EVMS

o **Clinical Trials and Methods:** PI or Co-Investigator with a significant role in trial design, implementation, and/or acquisition of funding

o **Mentoring in Research:** Primary faculty involved in training multiple students in research, director of a training program, recognition/invitations for training at a national/international level, Chair of student committees

o **Service in support of Research:** Regular service to professional societies as committee chair or in other leadership positions; associate editor/editorial board member; member of standing grant review panel

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

4. **Administrative/Service Accomplishments**

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

o Demonstrates skills in managing activities or programs

o Serves on School or hospital committees

o Conducts tests, procedures or data handling in support of a clinical or service laboratory

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

o Independently develops or directs a major program/project/research laboratory

o Oversees, directs and interprets tests, procedures or data handling in support of a clinical or service laboratory

o Oversees a major research project as Principal Investigator or Co-investigator, which involves management of personnel and finances

o Offers major collaborative services with other faculty in attracting external funding not achievable without the administrator’s contributions.

o Serves as an officer in state or local professional society

o Serves as an Assistant or Associate Dean or other administrative appointment (i.e., Chairperson, Vice or Associate Chairperson of a department)

o Serves as a Program Director, Clerkship Director or other position related to the mission of the School that involves significant time in administrative activities, such as program development scheduling, evaluation, documentation of unit activities.

o Consults nationally regarding service-related activities

o Chairs medical subspecialty or professional society committee

o Chair a school or hospital committee

o Attracts substantial gifts or endowments to the School

o Serves as a regular or Ad Hoc member on a national research or clinical review committee

o Performs a service for the community or organizations within the community that are not directly associated with the School
Level 3. These activities should be recognized regionally, nationally, or internationally as excellent.

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

VI. POLICY AND PROCEDURES FOR PROMOTION

INTRODUCTION AND POLICY

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

FACULTY PROMOTION PROCEDURES

A. Ongoing Evaluation

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

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

C. Promotions Process

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

1. Initial and annual evaluation by the Department Chair of the School of Medicine or VPDSHP. Documentation should include time allocation to the areas of teaching, clinical care, research/discovery and administration/service.
2. Candidate identified for promotion in a Department.
3. Candidate submits required documents to the Department Chair of the School of Medicine or VPDSHP.
4. Department Chair of the School of Medicine or VPDSHP obtains letters of reference.
5. [Optional] Nomination sent to Departmental Promotions Committee for consideration.
6. [Optional] Recommendation from Departmental or School of Health Professions Promotions Committee to the Department Chair of the School of Medicine or VPDSHP.
7. Nomination package forwarded by the Department Chair of the School of Medicine or VPDSHP to the President, Provost and Dean of the School of Medicine in care of the Faculty Affairs and Professional Development (FAPD).
8. Nomination reviewed by FAPD to assure necessary information is submitted.
9. Nominations at the Instructor/Assistant Professor ranks are reviewed by the Vice Provost for Faculty Affairs and Institutional Effectiveness and approved by the President, Provost, Dean of the School of Medicine.
10. For the ranks of Associate Professor and Professor, the President, Provost and Dean of the School of Medicine forwards the nomination package to the Appointments and Promotions Committee.
11. Nomination considered by Appointments and Promotions Committee and recommendation forwarded to President, Provost and Dean of the School of Medicine.
12. Nomination forwarded by the President, Provost and Dean of the School of Medicine to the Academic and Student Affairs Committee for review and recommendation.
13. Academic and Student Affairs Committee forwards recommendation at Associate Professor and Professor ranks to Board of Visitors.
14. Board of Visitors sends letter of confirmation to faculty member and to Department Chair of the School of Medicine or VPDSHP.
D. Promotion Nomination Package Required Checklist

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

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

2. Letters of Recommendation

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

a. For Assistant Professor:
   i. Three internal and/or external letters are required. They should be obtained from training directors, faculty members at the training institution or other professionals with an academic appointment at an equivalent or higher rank than that for which the candidate is being proposed
   ii. They should document the candidate’s competence in one domain area and participation in at least another domain area of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service)

b. For Associate Professor:
   i. Three external letters are required. They should be obtained from individuals with an academic appointment at an equivalent or higher rank than that for which the candidate is being proposed
   ii. They must come from three different institutions
   iii. One letter may come from an individual who holds a position within institutes/organizations such as the NIH and has previously held an academic appointment at an equivalent or higher rank
   iv. In addition, up to three recommendation letters can be obtained from faculty or department Chairs of EVMS
v. They should address how the candidate is recognized regionally or nationally.

vi. They should document the candidate’s meritorious contributions in one or more domain areas and/or competence in other domain areas of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service)

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

3. Curriculum Vitae and Additional Required Information

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

E. Faculty Accomplishments to be Documented

A. Scholarly Activity

1) Definition

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

2) Evidence of Scholarly Activity

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

a) **Publications**
   List publications including author, title, year of publication, journal and pages. The candidate may indicate the number of times a work has been cited or other information that gives an indication of its impact.
   (1) Full-length publications
      (a) Peer-reviewed articles
      (b) Non-peer-reviewed articles
         (i) Book chapters
         (ii) Reviews
         (iii) Case reports
         (iv) Articles in lay publications
         (v) Procedures/protocols
         (vi) Electronic media
      (c) Books, monographs

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

b) **Presentations**
   List actual presentations, indicating whether the presentation was invited, the target audience, and whether the meeting was international, national, regional, or local.
   1) Oral presentations
      (a) Plenary
      (b) Workshop
      (c) Seminars
   2) Poster presentations
   3) Discussant
   4) Session Chairs

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

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

e) **Development of Original Clinical Programs and/or Techniques**
   1) Brief description, including goals
   2) Target population
   3) Impact
   4) Nature of dissemination
f) Development of Original Teaching Tools, Methods
   1) Description of product, including objectives
   2) Level of involvement
   3) Target audience
   4) Copyright status
   5) Impact
   6) Nature of dissemination

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

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

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

i) Consultancies

j) Serving as a Visiting Professor
   1) Site
   2) Date of visit
   3) Who invited the candidate?
   4) Contribution of candidate
k) Recognition for Scholarship
   1) Recognition
   2) Date
   3) Awarded by
   4) Award received for

B. Expertise in the Four Faculty Roles

1. Education

   a) 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.

   b) Evidence of Expertise
   The following criteria may be used to assess the teaching activities of all candidates:

   1) 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:
   a) Type of learners;
   b) Primary teaching methods used; and
   c) Contact time.

   2) 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:
   a) Evidence of desired outcomes in learners: test scores; evidence of
      preparation or subsequent educational activities; documentation of
      changes in physicians’ practice patterns; etc.
   b) Systematic peer reviews: by colleagues, departmental or other
      institutional committees, Department Chair, or peers from other
      institutions who have observed the teaching;
   c) Systematic reviews by learners and graduates, including ratings
      and/or written evaluative comments;
   d) Number of students who sign up for an elective;
   e) Reviews by external or internal education specialists;
   f) 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:

a) List of formal advisees and current status;

b) List (or summary) of informal advisees;

c) Letters from former advisees acknowledging value of the advisory process;

d) 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:

a) 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;

b) Evaluation data and written comments from learners;

c) Evaluative reviews from peers, external subject matter specialists, and education specialists;

d) Dissemination of curricular materials to, and use at, other institutions;

e) Successful grant proposals involving the curricular components designed.

f) 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:

a) Title

b) Primary or co-investigators, administrators and percent of effort

c) Concise description of aims and results

d) Source of funding

e) Site(s)

f) Dates of duration
g) 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.

1) 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

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

3) Continuing Education

4) Recognition for Clinical Excellence or Practice

5) Consultant for Clinical Service to Other Institutions or Agencies

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

7) 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

2) 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)
3) **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

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

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

6) **Research Mentorship**
   a) Graduate students
      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**
   a) **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.

   b) **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) Institutional 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

**ADJUNCT FACULTY APPOINTMENTS AND PROMOTION POLICY**

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

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 of the School of Medicine or VPDSHP recommends the appointment to the President, Provost and Dean of the School of Medicine after consultation with the program director and faculty of the department in care of Faculty Affairs and Professional Development (FAPD). The candidate must complete the EVMS Curriculum Vitae form, which is available from FAPD. If the President, Provost and Dean of the School of Medicine approves the appointment, he/she notifies the faculty member and the Department Chair of the School of Medicine or VPDSHP. The faculty rank at EVMS will be commensurate with the faculty rank at the faculty member’s home institution.
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 of the School of Medicine or VPDSHP to the President, Provost and Dean of the School of Medicine documenting the rationale for promotion. The candidate must complete the updated EVMS Curriculum Vitae form. If the President, Provost and Dean of the School of Medicine approves the promotion, he/she notifies the faculty member and the Department Chair of the School of Medicine or VPDSHP.

EMERITUS FACULTY APPOINTMENTS

Emeritus Faculty: Emeritus or emerita is an honorary faculty appointment, awarded upon retirement, for distinguished or exceptional service and outstanding dedication to EVMS as further outlined in the Emeritus Faculty Appointment Policy. (Section II Faculty Status Definitions)

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

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

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

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

Emeriti Privileges
The privileges associated with having Emeriti status are as follows:

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

11. With approval of the Department Chair and the President/Provost, Emeriti Faculty will be welcomed to:
   i. Advise medical students, health professions students and residents. Co-author papers with them and with other faculty members within or outside of EVMS using EVMS’ affiliation;
   ii. Teach classes as an emeriti faculty member;
   iii. Participate in sponsored research, as approved by the sponsor and EVMS;
   iv. Attend departmental and collegial open meetings, as a guest, subject to the bylaws of said unit;
   v. Eligible to serve on a Dean’s Sanding Committee as an ad-hoc or regular member.

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

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

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

The Vice Provost for Faculty Affairs and Institutional Effectiveness shall convene the Emeriti Review Committee, as described below. The Committee shall deliberate and deliver its recommendations to Vice Provost for Faculty Affairs and Institutional Effectiveness by February 15th.

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

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

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

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

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

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

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

Reviewed and BOV Approved 12-12-2017
Revised and BOV Approved 3-13-2018

**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 66; or
   
   b. Reallocation of institutional resources, when determined as hereinafter specified beginning on page 67, or
   
   c. Severe institutional financial distress, when determined as hereinafter specified beginning on page 67.

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 67.

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

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 or School of Health Profession tenure position is available in the appropriate department or School of Health Professions and the Department Chair of the School of Medicine or VPDSHP so recommends.

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

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

4. The Department Chair of the School of Medicine or VPDSHP must demonstrate that there is a need for the knowledge and skills of the candidate in the departmental/school program, and that such knowledge and skills will enable the department/school to substantially assist the 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. Department Chairs of the School of Medicine or the VPDSHP at the professorial level may be considered for tenure at the time of initial appointment.

4. The foregoing probationary periods may be modified or waived upon recommendation of the Departmental Chair of the School of Medicine or VPDSHP and with the concurrence of the Tenure Committee, the President, Provost and Dean of the School of Medicine, 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 the School of Medicine or VPDSHP of whether the tenured faculty member’s performance was consistent with the criteria for tenure. For a Department Chair of the School of Medicine or VPDSHP, post-tenure review will include an assessment with documentation by the President, Provost and Dean of the School of Medicine of whether the tenured Chair of the School of Medicine or VPDSHP’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 President, Provost and Dean of the School of Medicine 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 President, Provost and Dean of the School of Medicine’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 President, Provost and Dean of the School of Medicine.

2. Each nomination for an initial review of faculty tenure status must originate with a letter from the Department Chair of the School of Medicine or VPDSHP addressed to the President, Provost and Dean of the School of Medicine 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 President, Provost and Dean of the School of Medicine as outlined in E-2 above.

3. Each nomination for post-tenure review must originate with a letter from the Department Chair of the School of Medicine or VPDSHP addressed to the President, Provost and Dean of the School of Medicine for submission to the Tenure Committee. Recommendations of the Tenure Committee shall be submitted to the President, Provost and Dean of the School of Medicine as outlined in E-2 above.

4. Each letter of nomination should contain the following documentation.

a. Description and evaluation of the candidate’s teaching abilities and responsibilities.
b. Evaluation of the quality, originality, and significance of the candidate’s research. A description of work in progress and relevant sources of funding should be included.

c. Description and evaluation of administrative and other services to the department and 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 Department Chair of the School of Medicine or VPDSHP’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 Department Chair of the School of Medicine or VPDSHP. In addition, a list of four professional colleagues, external to EVMS, knowledgeable of the candidate’s qualifications should be provided. The President, Provost and Dean of the School of Medicine will contact at least two of them for recommendation relating to the nominee’s candidacy for tenure. The President, Provost and Dean of the School of Medicine 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 of the School of Medicine or VPDSHP with a right of appeal through the grievance process as specified in the Policies and Procedures Manual. “Just Cause” is defined as any act or patterns of behavior considered to be seriously detrimental to the interests of the Medical School, its faculty, its students, or its employees, including, but not limited to, the following:

1. Neglect of duty, including, but not limited to, serious violation of faculty rules for governance or corporate by-laws, rules, and regulations.

2. Violation of generally accepted standards of professional ethics.

3. Material breach of contract with the Medical School.
4. Conviction of a crime deemed to render the faculty member unfit to carry out his or her professional activities.

5. Professional incompetence.

6. Refusal to perform legitimate work assigned by the faculty member’s supervisor, Department Chair of the School of Medicine or VPDSHP, 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 President, Provost and Dean of the School of Medicine to be of sufficient magnitude to require the termination of non-tenured faculty contracts or the termination of tenured faculty positions, the President, Provost and Dean of the School of Medicine will present such determination and recommendation to the President, Provost and Dean of the School of Medicine’s Executive Committee and will make a copy available to the Faculty Senate and to the Council of Chairs.

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

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

C. Dismissal for Severe Institutional Financial Distress

Faculty members holding tenure and non-tenured faculty during the term of their appointment may be dismissed in the event EVMS is confronted with a “severe institutional financial distress”, but only after such distress has been determined to exist in accordance with the following procedures:
1. In the event the President, Provost and Dean of the School of Medicine determines that, in his/her opinion, a financial situation exists which places the institution in such financial jeopardy that the termination of tenured and non-tenured faculty positions may be necessary, then the President, Provost and Dean of the School of Medicine shall discuss such financial condition with the President, Provost and Dean of the School of Medicine’s Executive Committee and the Faculty Senate.

2. In the event the President, Provost and Dean of the School of Medicine’s Executive Committee, after consultation with the Faculty Senate, concur that termination of non-tenured faculty contracts and/or termination of tenured faculty positions should solely (and/or in addition to other solutions) be involved in eliminating such financial distress, then the President, Provost and Dean of the School of Medicine, in consultation with individual Department Chairs of the School of Medicine or the VPDSHP, will proceed to make the decision concerning which, if any, non-tenured faculty will be subject to termination and which, if any, tenured faculty will be terminated.

3. In the event the President, Provost and Dean of the School of Medicine’s Executive Committee does not concur with the President, Provost and Dean of the School of Medicine that a severe institutional financial distress exists, then a special meeting of the President, Provost and Dean of the School of Medicine’s Executive Committee, the President, Provost and Dean of the School of Medicine, and the Board of Visitors will be convened to fully consider whether or not there exists a severe institutional distress requiring tenured and/or non-tenured faculty positions to be terminated. The decision of the Board following such joint meeting will be final.

4. The determination of which non-tenured faculty positions shall be terminated and/or which tenured faculty positions shall be terminated will be made by the President, Provost and Dean of the School of Medicine, whose decision shall be final. A report of the President, Provost and Dean of the School of Medicine’s decision shall be made to the President, Provost and Dean of the School of Medicine’s Executive Committee, and the President, Provost and Dean of the School of Medicine’s decision will be reported for approval to the Board of Visitors.

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

**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:

1. A request for revision is made by the Board of Visitors, the President, Provost and Dean of the School of Medicine, Vice Provost for Faculty Affairs and Institutional Effectiveness, Vice President and Dean of the School of Health Professions (VPDSHP), the appropriate standing committee of the school, the Faculty Senate or any other member of the faculty and administration.

2. The President, Provost and Dean of the School of Medicine shall consider whether such a request is appropriate. If a determination to consider a policy revision is favorable, the President, Provost and Dean of the School of Medicine 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.

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

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

5. The Council of Chairs shall review the various recommendations and make a recommendation to the President, Provost and Dean of the School of Medicine.

6. The President, Provost and Dean of the School of Medicine shall consider the points of view raised during the revision process and make a recommendation to the appropriate committee of the Board of Visitors.

7. 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.

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, clinical care, research/discovery and administration/service, either in the faculty member's original discipline or in a new area in which he/she proposes to embark. Work in a research laboratory, clinical training at another medical center or medical school or the pursuit of formal courses in an accredited institution of higher education in a relevant discipline are appropriate activities for sabbatical leaves. The writing of books or original papers is also an appropriate justification.

Approval of Request for Sabbatical Leave

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

Upon Conclusion of the Sabbatical Leave

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

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, PROVOST AND DEAN OF THE SCHOOL OF MEDICINE

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, Provost and Dean of the School of Medicine of EVMS.

No invitation by such organized group shall be issued to an outside speaker without prior written concurrence by the President, Provost and Dean of the School of Medicine, 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, Provost and Dean of the School of Medicine, 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 the President, Provost and Dean of the School of Medicine, 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, Provost and Dean of the School of Medicine, 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, Provost and Dean of the School of Medicine, 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, Provost and Dean of the School of Medicine or his/her authorized designee, in writing immediately of such acceptance. The President, Provost and Dean of the School of Medicine, 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

STANDARDS OF CONDUCT FOR THE TEACHER- LEARNER RELATIONSHIP

The EVMS School of Medicine and School of Health Professions are committed to maintaining a positive environment for study and training, in which individuals are judged solely on relevant factors such as ability and performance, and can pursue their educational and professional activities in an atmosphere that is humane, respectful and safe. As such, student and resident/fellow mistreatment is destructive of these fundamental principles and will not be tolerated within the EVMS community and its affiliated learning sites.

EVMS defines mistreatment as behavior that shows disrespect for learners and interferes with their respective learning process. Such behavior may be verbal, emotional, or physical. When assessing behavior that is perceived as mistreatment, students are expected to consider the conditions, circumstances, and environment surrounding such behavior. Provision of healthcare is inherently stressful. Medical and health professions student training is a rigorous process where the welfare of the patient is the primary focus and that, in turn, may impact behavior in the training setting.

Reflective of this philosophy, all EVMS faculty, including community faculty, will abide by the Association of American Medical Colleges Compact between Teacher and Learners of Medicine, modified to be inclusive of the School of Health Professions faculty and students, and referred to as The Compact.

COMPACT BETWEEN TEACHERS AND LEARNERS OF MEDICINE AND HEALTH PROFESSIONS

Preparation for a career in medicine or health professions demands the acquisition of a large fund of knowledge and a host of special skills. It also demands the strengthening of those virtues that undergird the relationship between professionals and patients that sustain the health care profession as a moral enterprise. Likewise, professional training entails both formal education in a specific discipline and an apprenticeship in which the graduate student trains under the supervision of investigators who are qualified to fulfill the responsibilities of a mentor. This Compact serves both as a pledge and as a reminder to teachers and learners that their conduct in fulfilling their mutual obligations is the medium through which the medical and health professions inculcate their ethical values.

Guiding Principles
Duty. Medical and health professions educators have a duty not only to convey the knowledge and skills required for delivering their profession’s contemporary standard of care or research, but also to inculcate the values and attitudes required for preserving their profession’s social contract across generations.

Integrity. The learning environments conducive to conveying professional values must be suffused with integrity. Students learn enduring lessons of professionalism by observing and emulating role models who epitomize authentic professional values and attitudes.

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

Commitments of Faculty

- We pledge our utmost effort to ensure that all components of the educational program for students and residents/fellows are of high quality.
- As mentors for our student and resident/fellow colleagues, we maintain high professional standards in all of our interactions with patients, colleagues, and staff.
- We respect all students and residents/fellows as individuals, without regard to gender, race, national origin, religion, or sexual orientation; we will not tolerate anyone who manifests disrespect or who expresses biased attitudes towards any student or resident/fellow.
- We pledge to uphold the duty hour requirements for students and residents/fellows as stipulated in the applicable accreditation standards.
- In nurturing both the intellectual and the personal development of students and residents/fellows, we celebrate expressions of professional attitudes and behaviors, as well as achievement of academic excellence.
- We do not tolerate any abuse or exploitation of students or residents/fellows.
- We encourage any student or resident/fellow who experiences mistreatment or who witnesses unprofessional behavior to report the facts immediately to appropriate faculty or staff; we treat all such reports as confidential and do not tolerate reprisals or retaliations of any kind.

Commitments of Students and Residents/Fellows

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


Reporting of Student Mistreatment

Students are encouraged to report incidences of mistreatment via four avenues:
• Notify clerkship or program director, or departmental chair
• Notify a Dean: the Dean of the School of Health Professions, Associate Dean for Medical Education, or Assistant Dean for Student Affairs
• Report the incidence on a course/clerkship evaluation
• Report anonymously using Alertline at 1-877-874-8416 or https://evms.alertline.com/gcs/welcome. This mechanism can be used to report mistreatment by staff members of EVMS or affiliate institutions as well.

Reporting of Resident/Fellow Mistreatment

• Notify residency director or departmental chair
• Report anonymously using Alertline at 1-877-874-8416 or https://evms.alertline.com/gcs/welcome

If deemed appropriate, reports will be investigated by Human Resources (for faculty, residents/fellows, or staff accused), by the Assistant Dean for Student Affairs (for students accused), or by a departmental chair (for community faculty accused).

Retaliation and False Claims

Retaliation against a person who reports, complains of, or provides information in a mistreatment investigation or proceeding is prohibited. Alleged retaliation will be subject to investigation and may result in disciplinary action up to and including termination or expulsion.

A person who knowingly makes false allegations of mistreatment, or who knowingly provides false information in a mistreatment investigation or proceeding, will be subject to disciplinary action and, in the case of students, will be considered a violation of the Honor Code.

CONFLICT OF INTEREST

To ensure that COIs, or the appearance thereof, do not impact teaching, research, or patient care, as well as to ensure that personal interests in procurement or other related business activities do not create a conflict of interest, EVMS has the following established COI Policies:

1. **Policy on Disclosure of Interests.** EVMS recognizes that faculty may have financial or other interests outside of EVMS. To ensure that such interests do not create a COI or conflict of commitment with a faculty member’s educational duties, or any appearance thereof, EVMS has a Policy on Disclosure of Interests. The Policy requires all faculty members to complete a disclosure of interests form at the time of hire, within 30 days of any change, and annually thereafter which includes information on (1) all private consultation activities, (2) all outside activities, commitments, or affiliations that shift, or may appear to shift a faculty member’s primary duty of loyalty away from EVMS, or (3) any financial interests that the faculty member or a covered family member (a spouse, domestic partner, dependent child or other household member) may have. All faculty disclosures are submitted through the EVMS InfoEd electronic portal and faculty members are required to complete/recertify their annual disclosures during the Annual Training for Faculty. Once submitted, the disclosure is released to the faculty member’s chair/department head for review. If the faculty member should be a chair or department head, such disclosure will be reviewed by the president/provost of EVMS and dean of the SOM. The chair/department head shall evaluate the disclosure and determine whether a COI exists. If a conflict is
deemed to exist, the chair shall direct the faculty member to modify the commitment to alleviate the conflict.

2. **Policy on Conflicts of Interest in Research and Sponsored Projects.** To ensure objectivity in research and to manage, reduce, or eliminate COIs in research and sponsored projects, including those projects on which medical students may participate, EVMS has a Policy on Conflicts of Interest in Research and Sponsored Projects. All disclosures for faculty members who are key personnel or principal investigators listed in grant applications, contracts, or other sponsored projects, must be disclosed in accordance with the Policy on Disclosure of Interests and reviewed by the EVMS Designated Institutional Official (DIO).

3. **Conflict of Interest in Procurement.** To ensure that all members of the EVMS community uphold their duty of loyalty to EVMS and avoid self-dealing to take advantage of an opportunity for personal gain, EVMS has a Policy on COI in Procurement. The policy prohibits any individual with responsibility or decision-making authority in procurement activities from soliciting or accepting gifts. In addition, any EVMS community member with an actual or perceived COI must disclose it to the executive director of materials management to determine if such interest can be managed by public disclosure, disqualification in procurement participation, divestiture of the personal interest, or withdrawal from the procurement activity.

4. **Interactions with Industry Policy.** The practice of medicine must be free from undue influence and conflicts that can be created by the goals of industry (pharmaceutical and medical device firms, medical and research service providers, or other businesses with an economic interest in patient care). To ensure that medical students will embrace this philosophy, EVMS has an Interactions with Industry Policy that, among other things, limits access to clinical areas by industry representatives; restricts gifts such as entertainment, food, department meeting and social event support, and other promotional items; prohibits samples (except for starter medication samples for those with financial need); places restrictions on speaking engagements; discourages faculty, students, residents, and trainees from attending industry promotional events unless such events are to promote evidence-based clinical care or advance scientific research; and prohibits speakers bureaus, detailing, and ghostwriting. In addition, EVMS departments and faculty are prohibited from accepting support for educational activities unless such activities and support conform with the Accreditation Council for Continuing Medical Education (ACCME) Standards for Commercial Support.

5. **Commercial Support and Disclosure of Relationships.** As an ACCME-accredited provider, EVMS has a policy on Commercial Support and Disclosure of Relationships, which requires that all activities conform with the ACCME Standards for Commercial Support: Standards to Ensure the Independence of continuing medical education (CME) Activities. This ensures that the CME Program at EVMS is guided by what is in the best interest of the public, and decisions are made with the principles of independence from commercial interests, transparency, and keeping CME separate from product promotion.

The COI policies apply to all faculty and to ensure compliance with these policies, EVMS maintains an electronic system where faculty disclosures are collected and maintained. New disclosures are collected from faculty as part of the new hire orientation, and the system reminds individuals to certify their disclosures at least once per year. Additionally, the Research Office manages COI in research through a series of checks and balances that requires disclosures to be completed in order for research to move forward.
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 of the School of Medicine or VPDSHP; 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.

An EVMS committee is charged with reviewing and taking action to manage and/or reduce or eliminate significant financial interests disclosed by faculty, students, and staff in research/sponsored projects. The Conflict of Interest Committee (COIC) is comprised largely of faculty in the basic, clinical, and health professions programs. The COIC, led by an EVMS faculty member with academic research experience, meets monthly with the purpose of promoting objectivity in research by establishing standards that provide a reasonable expectation that research/sponsored projects conducted by EVMS will be free of COI issues. Investigators are expected to be free from bias resulting from the financial COIs of its investigators, and faculty are also required to disclose personal financial interests by those involved in design, conduct, or reporting of research/sponsored project data. The key duties of the COIC involve reviewing disclosed potential financial interests, developing and implementing management plans in COI cases, and monitoring and certifying compliance with the plan for the life of the project.

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 President, Provost and Dean of the School of Medicine 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 President, Provost and Dean of the School of Medicine.

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 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 President, Provost and Dean of the School of Medicine.

*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.

SCIENTIFIC MISCONDUCT GUIDE

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 of the School of Medicine or VPDSHP and Vice Dean of Research 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 Vice Dean of Research and Department Chair or VPDSHP, or Dean of the School of Medicine 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 hereinafter defined, the Vice Dean of Research shall notify the Investigator. In addition, the Vice Dean of Research 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 Vice Dean of Research 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 Vice Dean of Research 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 Vice Dean of Research 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 Vice Dean for Research 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 Vice Dean for Research 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 Vice Dean for Research 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 Vice Dean for Research 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 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 Vice Dean for Research 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 or Associate Dean 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 of EVMS 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.
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 of the School of...
Medicine or VPDSHP. Additional time devoted to private consulting activities may be appropriate in unusual circumstances but only with the prior approval of the Department Chair of the School of Medicine or VPDSHP and the President, Provost and Dean of the School of Medicine. Fees received in connection with private consulting activities will ordinarily be retained by the faculty member. Department Chairs of the School of Medicine or VPDSHP 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 President, Provost and Dean of the School of Medicine, 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 of the School of Medicine or VPDSHP and President, Provost and Dean of the School of Medicine after discussions with the faculty member.

POLICY ON INTERACTIONS WITH INDUSTRY

https://www.evms.edu/media/evms_public/departments/faculty_affairs/Interactions_with_Industry_06-14-11_(00000002).pdf

Approved by the EVMS Board of Visitors
June 14, 2011

FACULTY RECORDS

Faculty Affairs and Professional Development(FAPD) 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, Provost and Dean of the School of Medicine, Vice Dean for Academic Affairs, VPDSHP, or Department Chairs of the School of Medicine 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. Introduction and Policy

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

II. Definitions

For purposes of this policy, the following definitions apply:

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

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

*Committee* – the Grievance Committee

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

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

*Grievant* – the faculty member filing the Grievance.

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

III. Grievable Matters and Exclusions

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

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

1. Discrimination, harassment, retaliation, hostile working environment, or workplace violence allegations;

2. The amount or source of compensation including annual increases and co-terminus provisions;

3. Allegations regarding students or student conduct;
4. Any Grievance review or recommendation made by the Committee;

5. Decisions by the EVMS Institutional Review Board and the Institutional Animal Care and Use Committee;

6. An act by EVMS pursuant to federal or state law, directive of the Board of Visitors, or any governing body that regulates EVMS.

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

IV. Required Preliminary Steps by Grievant

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

B. Informal Resolution.

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

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

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

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

V. Grievance

A. Statement of Grievance.

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

a. A statement as to the alleged Action, the date of the Action, and how the Grievant has been negatively affected.

b. A brief history or statement of facts that gave rise to the Grievance.

c. Identification of applicable policies and procedures on which the Grievance is based, if any.
d. The date and outcome of any required preliminary steps as outlined in Section IV, if applicable.

e. An explanation or reference to any attachments that will be included with the Statement of Grievance.

f. The remedy sought by the Grievant as more specifically described in Section X.

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

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

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

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

VI. Grievance Committee

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

VII. Initial Review by Grievance Committee

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

1. The subject of the Grievance is a Grievable Matter in accordance with Section III;

2. The requested remedy is within EVMS’ power to grant, is reasonable and appropriate, and would not disregard any EVMS policy or procedure if implemented in accordance with Section X;

3. The Grievance has been timely filed in accordance with Section V(C);

4. Required preliminary steps in accordance with Section IV have occurred; and

5. The requirements for the Statement of Grievance, as outlined in Section V(A) have been met.
B. **Deficient Grievances.**

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

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

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

**VIII.** **Mediation**

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

**IX.** **Review by Grievance Committee**

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

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

1. If any party does not appear, the hearing will be held in their absence;

2. The Grievant and Respondent may each bring an advisor of their choosing (see Section C2 below); and

3. The Grievant and Respondent must provide the Chair with the names of any witnesses.
C. Attendance

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

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

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

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

D. Hearing Procedure

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

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

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

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

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

X. Remedies

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

XI. Decision by the President

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

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

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

XIII. Records and Time Extensions

A. Records. For Grievances that are rejected by the Grievance Committee or which are concluded through mediation as set forth in Section VIII, the Chair shall forward all documentation received and a copy of the Committee’s decision or resolution to the Faculty Affairs and Professional Development to be maintained. For Grievances that continue through a hearing, the Chair shall forward a copy of the Post-
hearing report and the recording of the hearing to the Faculty Affairs and Professional Development to be maintained.

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

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

**ANTI-DISCRIMINATION/ANTI-HARASSMENT POLICY**

I. **POLICY**

It is the policy of Eastern Virginia Medical School to provide an environment that is free from discrimination and/or harassment. Discrimination and/or harassment in any form will not be tolerated.

I. **DISCRIMINATION/HARASSMENT, GENERALLY**

A. **Definition.** Discrimination and harassment are any unwelcome and/or offensive actions, remarks, or behaviors that interferes with a person’s work or academic performance or creates an intimidating or hostile environment, based on an individual’s gender, race, ethnic background, religion, national origin or citizenship, age, disability, marital status, sexual orientation, genetic information or other basis prohibited by law. Harassment also includes “bullying,” which is the repeated inappropriate actions referenced above of an individual or group directed towards another individual or group.

B. **Examples.** Discrimination and harassment can include, but are not limited to:

1. physical assault (also see EVMS Workplace Violence Policy);
2. display or circulation of written or electronic materials or pictures degrading to either gender or to racial, ethnic, or religious groups;
3. verbal abuse or insults directed at or made in the presence of members of a racial, ethnic, or minority group;
4. offensive or suggestive comments, letters, emails, or telephone calls;
5. insults, jokes, teasing, threats, embarrassing comments, or other remarks that belittle people or make them uncomfortable;
6. inappropriate pictures, cartoons, or other objects;
7. making obscene or rude gestures at someone or as an impersonation of someone;
8. unwanted or unnecessary touching or blocking someone’s movement; and
9. using communications and information technology (i.e. cell phones, email, social media) to intimidate, threaten, offend or embarrass an individual.

II. **SEXUAL HARASSMENT**

A. **Definition.** Sexual harassment is any unwelcome sexual advance, request for sexual favors, and other verbal or physical conduct of a sexual nature, whether between people of different sexes or the same sex, 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.

B. Examples. Sexual harassment can include, but is not limited to:
   1. physical assault/unnecessary touching of a sexual nature (pinching, patting, hugging, or brushing against a person’s body);
   2. sexual advances, flirtations, propositions, or suggestive comments;
   3. sexually explicit or offensive jokes, whether written or verbal;
   4. sexually degrading words used to describe an individual;
   5. sexually graphic or verbal remarks of a sexual nature about gender-specific traits, an individual’s clothing or body;
   6. displays of pornographic materials or sexually suggestive objects, pictures or cartoons; and
   7. inquiries, remarks, discussions, or gossip about a person’s sexual activity or sexual experiences.

III. DISCRIMINATION/HARASSMENT COMPLAINTS

A. Reporting. In fulfilling their supervisory responsibility to a positive, productive and discriminative/harassment free work environment, managers and supervisors are expected to immediately halt any discrimination and/or harassment that comes to their attention and are expected to report such violations to the Director of Human Resources immediately. Employees who believe they have experienced or witnessed any form of discrimination and/or 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 his/her designee. Reports may also be made to the EVMS Compliance AlertLine at 1-877-874-8416 or www.evms.alertline.com, which includes the ability to make an anonymous report. Allegations of discrimination and/or harassment must be reported within sixty (60) days of the occurrence of the alleged discrimination and/or harassment.

B. Investigations. Timely filed complaints of discrimination and/or harassment will be investigated in a fair and expeditious manner. The investigation will be conducted in accordance with EVMS’ customary procedures, and in such a way as to maintain confidentiality to the extent practicable under the circumstances and permissible by law. The investigation may, as appropriate, include private interviews with the person filing the complaint, with witnesses, and with the person alleged to have committed the discrimination and/or harassment.

C. Disposition. When the investigation is completed, the person filing the complaint and the person alleged to have committed the conduct will be notified, to the extent appropriate, of the results of the investigation. If it is determined that an employee has been engaged in discrimination and/or harassment, appropriate action will be taken immediately by Human Resources, in accordance with EVMS discipline policies. Such action may range from a verbal warning to termination of employment, and may include other forms of remediation activities such as attendance at discrimination and/or harassment training or other as deemed appropriate by Human Resources.

IV. PROTECTION AGAINST RETALIATION

Any individual who makes a good faith discrimination and/or harassment complaint shall be protected from retaliation in accordance with EVMS Compliance Reporting/Anti-Retaliation Policy. Retaliation may include, but is not limited to, adverse employment action, discrimination, discrimination and/or harassment, poor work assignments and/or threats of physical harm. Complaints of retaliation should be reported to the Director of Human Resources at 757-446-6043 or the Office of Compliance at 757-446-6008.

Last Board Approval: June 11, 2013
CONFIDENTIALITY OF OCCUPATIONAL HEALTH MEDICAL RECORDS

It is the policy of Eastern Virginia Medical School (EVMS) to use information obtained in interactions with the Employee Occupational Health staff for medical purposes only. Medical records are the property of EVMS and information contained in them will be released after specific consent of the employee or student or as required by statute.

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 and Provost as chief executive and academic 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 and Provost 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 and Provost is encouraged to invite other members of the school community to attend and participate in meetings of the Board or its committees. The President and Provost, 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 and Provost 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 and Provost to present those views to the Board, or request the President and Provost 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 and Provost 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 and Provost 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.

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 Department Chair of the School of Medicine or VPDHP, 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 President, Provost and Dean of the School of Medicine within five (5) working days of the final decision of the Space Committee. The decision of the President, Provost and Dean of the School of Medicine 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 President, Provost and Dean of the School of Medicine 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 Department Chair of the School of Medicine or VPDHP.

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 of the School of Medicine or VPDSHP 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.

**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 President, Provost and Dean of the School of Medicine 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 President, Provost and Dean of the School of Medicine 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 of the School of Medicine or VPDSHP who is responsible for that space or from the President, Provost and Dean of the School of Medicine or his/her designee.

Food functions present special problems for educational facilities. Coffee, soft drinks, and other light fare only can be served. The President, Provost and Dean of the School of Medicine 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 and to the host organization.

Exhibits are educational and offer information about new products or a products' 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.
   To book a room or venue, first review the complete listing of authorized schedulers and bookable space on the EVMS campus.

   EVMS Special Events grants permission to reserve the following “Lobbies & Lawns” restricted space in the Meeting Room Manager:
   - Andrews Hall 5th Floor Lobby
   - Brickell Library Atrium and The Beasley Foundation Rotunda
   - David Bernd Commons
   - Jones Institute Atrium
   - Lester Hall Lobby
   - Smith Rogers Lawn
   - TowneBank Lawn

   Please contact Sarahi Boykins at BoykinSB@evms.edu or 757.446.6018 to reserve one of the Lobbies & Lawns venues. All other space requests should be directed to the appropriate authorized scheduler found on the link above.

   **For external groups requesting use of space on the EVMS campus:** Please visit the [External Group Events](#) page or contact Abby Bailey at BaileyRA@evms.edu or 757.446.6174.

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**

Each Department Chair of the School of Medicine, VPDSHP and Dean/Director of special programs are required to submit an annual report to the Office of the President, Provost and Dean of the School of Medicine by September 30th of each year. These reports should cover activities for the fiscal year (July 1 through June 30).

**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 of the School of Medicine or VPDSHP together with a separate cost estimate from two moving companies, for the Department Chair of the School of Medicine or VPDSHP’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 President, Provost and Dean of the School of Medicine. 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, 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. 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 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. 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. **Environmental Health and Safety/Radiation Safety Office:** 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 bio-hazardous 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 EVMS Medical Group, Children’s Specialty Group, 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 President, Provost and Dean of the School of Medicine (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 President, Provost and Dean of the School of Medicine, 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 President, Provost and Dean of the School of Medicine.

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 President, Provost and Dean of the School of Medicine.

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 President, Provost and Dean of the School of Medicine 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
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 President, Provost and Dean of the School of Medicine 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 Financial Affairs Policy and Procedures Manual.

**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 President, Provost and Dean of the School of Medicine.

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 Inventors(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 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. The President, Provost and Dean of the School of Medicine with the approval of the EVMS Board of Visitors, and utilizing information and recommendations from other sources as the President, Provost and Dean of the School of Medicine 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, Provost and Dean of the School of Medicine pursuant to Section F.5 above.

8. With respect to the EVMS portion of any Net Invention Proceeds, EVMS’ President, Provost and Dean of the School of Medicine 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, Provost and Dean of the School of Medicine 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, Provost and Dean of the School of Medicine 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.

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, Provost and Dean of the School of Medicine 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, Provost and Dean of the School of Medicine 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, Provost and Dean of the School of Medicine 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, Provost and Dean of the School of Medicine 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, Provost and Dean of the School of Medicine 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, Provost and Dean of the School of Medicine 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, Provost and Dean of the School of Medicine 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, Provost and Dean of the School of Medicine shall issue a written decision in the matter to each of the parties to the dispute. The President, Provost and Dean of the School of Medicine 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, Provost and Dean of the School of Medicine’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:

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Approved Board of Visitors, November 14, 2006