



MACON & JOAN BROCK  
**VIRGINIA HEALTH SCIENCES**  
AT OLD DOMINION UNIVERSITY

July 2024

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**Macon & Joan Brock  
Virginia Health Sciences Eastern  
Virginia Medical School and EVMS  
School of Health Professions at  
Old Dominion University  
Faculty Handbook**

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# INTRODUCTION

This *Faculty Handbook* is for Macon & Joan Brock Virginia Health Sciences Eastern Virginia Medical School and EVMS School of Health Professions at Old Dominion University, contains faculty, academic, research, leave and benefit, other, and SOM and SHP program policies, and information that is designed to assist certain faculty members of the Eastern Virginia Medical School and EVMS School of Health Professions with the performance of their various duties and responsibilities in support of the mission of Macon & Joan Brock Virginia Health Sciences and Old Dominion University (*Macon & Joan Brock Virginia Health Sciences Eastern Virginia Medical School and EVMS School of Health Professions at Old Dominion University Faculty Handbook*).

**Faculty governed by the *Macon & Joan Brock Virginia Health Sciences Eastern Virginia Medical School and EVMS School of Health Professions at Old Dominion University Faculty Handbook*.**

The *Macon & Joan Brock Virginia Health Sciences Eastern Virginia Medical School and EVMS School of Health Professions at Old Dominion University Faculty Handbook* contains policies that apply to Teaching and Research Medical Faculty, AP Medical Restricted Faculty, AP Medical Faculty, and AP Faculty with rank and TR Faculty who are appointed to a program within the School of Medicine and School of Health Professions. Certain policies apply only to some of the above-referenced classifications, and policies relating to appointment promotion and tenure apply only to faculty members with rank. Faculty should pay careful attention to the eligibility or scope sections of each policy to determine applicability.

**References in the *Macon & Joan Brock Virginia Health Sciences Eastern Virginia Medical School and EVMS School of Health Professions at Old Dominion University Faculty Handbook*.**

In sections II, III, IV, and V of the *Macon & Joan Brock Virginia Health Sciences Eastern Virginia Medical School and EVMS School of Health Professions at Old Dominion University Faculty Handbook*, references to EVMS Faculty shall mean Macon & Joan Brock Virginia Health Sciences Eastern Virginia Medical School and EVMS School of Health Professions at Old Dominion University faculty and references to approval by the Provost shall mean approval by the Executive Vice President for Health Sciences (EVP) as appropriate.

## **Eastern Virginia Medical School and EVMS School of Health Professions program policies**

The faculty governed by this *Handbook* are also subject to the Eastern Virginia Medical School and EVMS School of Health Professions program policies which are maintained to support program-specific needs and continued compliance with accreditation standards. For policies included in this *Handbook* with “†” in their title, faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies. Eastern Virginia Medical School and EVMS School of Health Professions program policies are under ongoing review.

**Effective Date:** July 1, 2024



# I. THE UNIVERSITY

## History

More information can be found at the following link:

<http://catalog.odu.edu/undergraduate/olddominionuniversity/#history>

## University Strategic Plan

The plan can be found at the following link:

<https://www.odu.edu/strategicplan>

# Code of Ethics

([University Policy, #1002](#))

**Responsible Oversight Executive:** Vice President for Human Resources

**Date of Current Revision or Creation:** January 31, 2013, October 8, 2018

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## I. PURPOSE

The purpose of this policy is to establish the University's Code of Ethics, which strives to demonstrate the University's commitment to ethics and adherence to all applicable laws, regulations, and University policies.

## II. AUTHORITY

[Code of Virginia Section 23.1-1301, as amended](#), grants authority to the [Board of Visitors](#) to make rules and policies concerning the institution. Section 6.01(a)(6) of the [Board of Visitors Bylaws](#) grants authority to the President to implement the policies and procedures of the Board relating to University operations.

## III. DEFINITIONS

**Supervisor** - The management level with the authority to hire, assign work, manage work schedules, approve leave, evaluate, and discipline employees.

## IV. SCOPE

This policy applies to all employees, students, volunteers, employees of affiliated organizations who are paid through the University, and vendors of the institution. Employees include all staff, administrators, faculty, full- or part-time, and classified or non-classified persons who are paid by the University. Students include all persons admitted to the University who have not completed a program of study for which they were enrolled; student status continues whether or not the University's programs are in session. Affiliated organizations are separate entities that exist for the benefit of the University through an operating agreement and include the Foundations, the Community Development Corporation, and the Alumni Association.

## V. POLICY STATEMENT

Old Dominion University recognizes its duty to uphold the public's trust and confidence, not only in following laws and regulations, but in following high standards of ethical behavior. Members of the Old Dominion University community are responsible for maintaining the highest ethical standards and principles of integrity. The Code of Ethics is a set of values-based statements that demonstrate the University's commitment to this goal. All University employees, students, volunteers, employees of affiliated organizations who are paid through the University, and vendors of the institution are expected to adhere to the following Code of Ethics.

**Old Dominion University  
Code of Ethics**

1. We will maintain the highest level of ethical standards, and comply with all applicable laws and regulations and University policies.
2. We will protect the integrity of all University business and transactions by avoiding engagement in any actions (directly or indirectly) that are inconsistent with the State and Local Government Conflict of Interests Act or Virginia Public Procurement Act. We will avoid even the appearance of a conflict of interest.
3. We will adhere to policies and programs that promote the highest standards of ethics, integrity, and professional practices in the performance of our educational, research, scholarly, and community outreach activities.
4. We will adopt policies and programs supporting the rights and recognizing the needs of all individuals regardless of race, color, religion, national or ethnic origin, age, sex (including pregnancy), political affiliation, veteran status, family medical and genetic information, sexual orientation, gender identity, gender expression, or disability.
5. We will maintain and protect the confidentiality and security of information entrusted to us by the University or its customers, except when disclosure is authorized or legally mandated.
6. We will not use University funds, property, equipment, or services, or things of value for or in aid of political parties or candidates for public office, except as otherwise allowed for student organizations (See [\*Student Organization Handbook\*](#)).
7. We will not use University funds, property, equipment, services, systems, information, time and effort or our position for personal gain. We will protect the University's assets and resources and ensure their proper use by preventing theft, carelessness and waste. We will promote efficient, effective, safe and economical means of accomplishing tasks.
8. We will adhere to the principle that the public's business should be conducted in the public view by observing and following the letter and spirit of the Virginia Freedom of Information Act.
9. We will adhere to good health and safety practices and comply with all environmental health and safety laws and regulations.
10. We will comply with the University's accounting policies and procedures and maintain strong internal controls at all times. We will not make any false or misleading entries in the University's records under any circumstances.
11. We will strive for excellence in the performance of our duties, mindful of cost and appropriate authorization.

12. We will nurture a climate of care, concern, and civility towards others.
13. We will report through appropriate means and channels any dishonesty, fraud, misconduct, violations or neglect of duty, when discovered. We will appropriately investigate all such reports and require warranted corrective action and discipline, in accordance with University policies and procedures and the law.

## **VI. PROCEDURES**

Supervisors are responsible for notifying employees of, and monitoring their adherence to, the Code of Ethics. The Office of Human Resources will send an annual notification of the obligation of all employees to adhere to the Code of Ethics.

The Department of Procurement Services will add a reference to the University's Code of Ethics in all contracts and solicitations.

## **VII. RECORDS RETENTION**

Applicable records must be retained and then destroyed in accordance with the [Commonwealth's Records Retention Schedules](#).

## **VIII. RESPONSIBLE OFFICER**

Director of Human Resources for Employee Relations and Strategic Initiatives

## **IX. RELATED INFORMATION**

- [Family Educational Right to Privacy Act \(FERPA\)](#)
- [Agency Risk Management and Internal Control Standards \(ARMICS\)](#)
- [America Competes Reauthorization Act of 2010](#)
- [Hatch Act for State and Local Employees](#)
- [The Health Insurance Portability and Accountability Act of 1996 \(HIPAA\) Privacy Rule](#)
- [Governor's Executive Order Number One \(2018\) – Equal Opportunity](#)
- [Governor's Executive Order 12 \(2006\) – State Employee Fraud, Waste, and Abuse Hotline](#)
- [Governor's Executive Order 41 \(2006\) – Banning Smoking in State Offices and Vehicles](#)
- [Governor's Executive Order 94 \(2005\) – Workplace Safety and Employee Health](#)
- [State and Local Government Conflict of Interests Act, Code of Virginia Section 2.2-3100, et seq., as amended](#)
- [Virginia Public Procurement Act, Code of Virginia Section 2-2-4300, et seq., as amended](#)
- [Virginia Freedom of Information Act, Code of Virginia Section 2.2-3700, et seq., as amended](#)
- [Virginia Department of Accounts Policies and Procedures \(including CAPP Manual\)](#)
- [Virginia Department of Human Resource Management Policy 2.05, Equal Employment Opportunity](#)
- [Board of Visitors Policy 1011 – Freedom of Expression](#)
- [Board of Visitors Policy 1014 – Threat Assessment](#)
- [Board of Visitors Policy 1210 – Authority to Act on Behalf of the University](#)
- [Board of Visitors Policy 1240 – Resolution Concerning Employment of Current or Former Public Elected Officials and Executives of Governmental Agencies](#)

- [Board of Visitors Policy 1403 – Academic Freedom](#) *(Transitioned to University-Level Policy 12/10/21)*
- [Board of Visitors Policy 1404 – Professional Ethics](#) *(Transitioned to University-Level Policy 12/10/21)*
- [Board of Visitors Policy 1426 – Policy, Procedures, and Timeline for Responding to Allegations of Misconduct in Scientific Research and Scholarly Activity](#) *(Transitioned to University-Level Policy 12/10/21)*
- [Board of Visitors Policy 1450 – Faculty Sanctions](#)
- [Board of Visitors Policy 1470 – Faculty Grievance Policy](#)
- [Board of Visitors Policy 1502 – Student Rights and Freedoms](#)
- [Board of Visitors Policy 1530 – Code of Student Conduct](#)
- [University Policy 3003 – Detection, Investigation, and Reporting of Fraud, Waste and Abuse](#)
- [University Policy 3220 – Policy on the Use of Tobacco and Smoking-Related Products, and Electronic Cigarettes and Vaporizers](#) *(Interim Policy Revisions 06/28/2024)*
- [University Policy 3223 – Environmental Health and Occupational Safety](#)
- [University Policy 3230 – Vehicular Access to University Property](#)
- [University Policy 3231 – Use of Bicycles and Other Motorized and Non-Motorized Personal Transport Devices on University Property](#) *(Policy Revisions 07/10/2024)*
- [University Policy 3240 – Accident Review Committee](#)
- [University Policy 3500 – Policy on the Use of Information Technology Resources](#)
- [University Policy 3507 – Information Technology Accessibility Policy](#)
- [ODU Teaching and Research Faculty Handbook](#)
- [Adjunct Faculty Handbook](#)
- [Classified Employee Guidebook](#)
- [Wage Employee Guidebook](#)
- [Monarch Citizenship](#)

## Old Dominion University Notice of Non-Discrimination

Old Dominion University (“ODU”) does not discriminate in admissions, treatment, employment, or access to its programs or activities on the basis of race (or traits historically associated with race including hair texture, hair type, and protective styles such as braids, locks, and twists), color, religion, national or ethnic origin, age, sex (including pregnancy, childbirth, or related medical conditions), political affiliation, marital status, veteran status, family medical and genetic information, sexual orientation, gender identity, gender expression, or disability, as required by The Civil Rights Act of 1964; The Americans with Disabilities Act of 1990, as amended; The Age Discrimination Act of 1975; Title IX of the Education Amendments of 1972; Section 504 of the Rehabilitation Act of 1973; the Virginia Human Rights Act; the Governor’s Executive Order Number One (2018); and other state or federal laws and University policies [1005: Discrimination Policy](#) and [1008: Policy on Title IX and Sexual Misconduct](#). ODU prohibits sexual and sex-/gender-based misconduct, discrimination, harassment, and interpersonal violence, including sexual assault. ODU also prohibits discrimination against employees or applicants because they have inquired about, discussed, or disclosed their own pay or the pay of another employee or applicant.

As an affirmative action and equal opportunity employer, ODU promotes the full realization of employment opportunities for all persons, including minorities, women, individuals with disabilities, and veterans. ODU bases all employment decisions only on job requirements. These efforts apply to all employment actions, including but not limited to recruitment, selection, hiring, promotion, and compensation.

Any member of the ODU community has the right to raise concerns or file a complaint regarding discrimination without fear of retaliation. Any and all inquiries regarding the application of this statement and related policies may be referred to Heather Fuss, Civil Rights Title IX Investigator, Innovation Research Park I, 4111 Monarch Way, Suite 106, Old Dominion University, Norfolk, VA 23529, (757) 683-3141, [hfuss@odu.edu](mailto:hfuss@odu.edu).

The University’s designated **Title IX Coordinator** is Kate Couch, [Office of Institutional Equity and Diversity](#), Innovation Research Park I, 4111 Monarch Way, Suite 106, Old Dominion University, Norfolk, VA 23529, (757) 683-3141, [titleixcoordinator@odu.edu](mailto:titleixcoordinator@odu.edu).

### Title IX Coordinator

Kate Couch  
Innovation Research Park I  
4111 Monarch Way Ste. 106  
Norfolk, VA 23529  
757-683-3141  
[titleixcoordinator@odu.edu](mailto:titleixcoordinator@odu.edu)

## Deputy Title IX Coordinators

SEES, Dr. Vicki Williams  
Dean of Students and Associate Vice President for Engagement  
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Phone (757) 683-3442  
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Athletics, Carolyn Crutchfield  
Executive Senior Associate Athletic Director  
116 Jim Jarrett Athletic Administration Building  
Norfolk, VA 23529  
757-683-3569  
[cacooper@odu.edu](mailto:cacooper@odu.edu)

Equity and Diversity, Heather Fuss  
Civil Rights Title IX Investigator  
4111 Monarch Way Ste. 106  
Norfolk, VA 23529  
757-683-3141  
[hfuss@odu.edu](mailto:hfuss@odu.edu)

ODU Academic Affairs, Dr. Shanda Jenkins  
Director of Faculty Diversity & Retention  
2334 Education Building  
Norfolk, VA 23529  
757-683-4327  
[sjenkins@odu.edu](mailto:sjenkins@odu.edu)

ODU Human Resources, Debbie Howe  
Assistant Vice President for Human Resources  
1008A Koch Hall  
Norfolk, VA 23529  
757-683-4564  
[dhowe@odu.edu](mailto:dhowe@odu.edu)

EVMS Human Resources, Matthew R. Schenk  
Associate Vice President, Human Resources  
Waitzer Hall  
757-446-6043  
[mschenk@odu.edu](mailto:mschenk@odu.edu)



Complaints of discrimination, harassment, and retaliation may be directed to [Institutional Equity and Diversity](#) at <http://www.odu.edu/equity>. Complaint procedures may be found in [University Policy 1005: Discrimination Policy](#).

Complaints may also be filed with the [Department of Education Office for Civil Rights](#), [Equal Employment Opportunity Commission](#), [Commonwealth of Virginia Division of Human Rights](#), and the [Department of Human Resources Management](#).

## Title IX Non-Discrimination Statement

As part of its commitment to providing an educational environment free from discrimination, Old Dominion University complies with [Title IX of the Education Amendments](#), which prohibits discrimination and harassment based upon sex in an institution's education programs and activities. Title IX prohibits sexual harassment, including sexual violence, of students at Old Dominion University-sponsored activities and programs, whether occurring on-campus or off-campus. Title IX also protects employees from sexual harassment and discrimination. Prohibited harassment includes acts of verbal, nonverbal, or physical aggression, intimidation, or hostility based on sex, even if those acts do not involve conduct of a sexual nature; sex-based harassment by those of the same sex; and discriminatory sex stereotyping. Old Dominion University will take prompt action to investigate and resolve reports of sexual harassment or sexual violence in accordance with Title IX. Old Dominion University's **Title IX Coordinator** is Kate Couch, Innovation Research Park I, 4111 Monarch Way, Suite 106, Norfolk, VA 23529, [titleixcoordinator@odu.edu](mailto:titleixcoordinator@odu.edu). Retaliation against any person who initiates an inquiry or complaint or participates in the investigation of a complaint is prohibited. Such conduct will be further cause for disciplinary action.

## **Religious Accommodations Policy (*New Interim Policy*)**

**(University Policy, #6501)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6501>

## University Governance

([Board of Visitors Policy](#))

**NUMBER:** 1301

**APPROVED:** August 9, 1979; Revised June 19, 1986; Revised June 17, 2021

**SCHEDULED REVIEW DATE:** June 2026

**Governance** is a process of consultation, communication, and decision-making that produces institutional policies. These policies are the general guidelines that inform decision-making and the development of procedures throughout the University.

### Definitions

**Administrative Liaison:** an individual member of the President's Cabinet who serves as a conduit between and advocate for one or more representative governing bodies and the President's Cabinet for non-policy issues.

The **Dean's Council** advises the Provost and Vice President for Academic Affairs on strategic matters, reviews proposals for new degrees, and facilitates inter-unit communication and collaboration. Membership of the Council is comprised of the Deans, Vice Provost for Academic Affairs, and Vice Provost for Faculty Affairs and Strategic Initiatives.

The **Faculty Senate:** a governance body representing the faculty of the University.

**President's Cabinet:** the chief policy and decision-making body of the University and includes all persons of the rank of Vice President, the Athletic Director and all other persons designated by the President.

The **Provost's Council:** chaired by the Provost and Vice President for Academic Affairs and is comprised of the Deans, senior administrators in Academic Affairs, the Executive Director of International Programs, the Director of the Center for Faculty Development, the Director of Faculty Diversity and Retention, Provost's Fellows, and the Chair of the Faculty Senate. Council members assist the Provost in the development and implementation of policies, procedures, and academic initiatives.

The **Student Government Association:** a governance body representing the students of the University

### Governance Principles

The Governance Principles of Old Dominion University:

1. Seek to ensure widespread communication, understanding, participation and reasonable consensus.
2. Address pressing issues in a streamlined, adaptive, flexible way and encourages the appropriate use of sunset rules for committees and task forces.
3. Strive to generate widespread understanding throughout the University community of the differences among policy-making, implementation of defined policy, and consultation regarding policy.

4. Allow stakeholders in the policy-making process to express their views and suggestions when policies affecting them are being reviewed and when the best solutions are being considered.
5. Ensure regular, two-way communication between representatives of stakeholders participating in policy-making and those they represent.
6. Seek to guarantee that participants in the policy-making process are provided with the appropriate resources and information so that they may participate in a timely fashion.
7. Recognize that the primary responsibility for policy-making and decision-making in each area of University life must be clearly designated.

Each governance body of Old Dominion University is responsible for ensuring that these principles are reflected in their constitutions and bylaws and otherwise upheld by their operations.

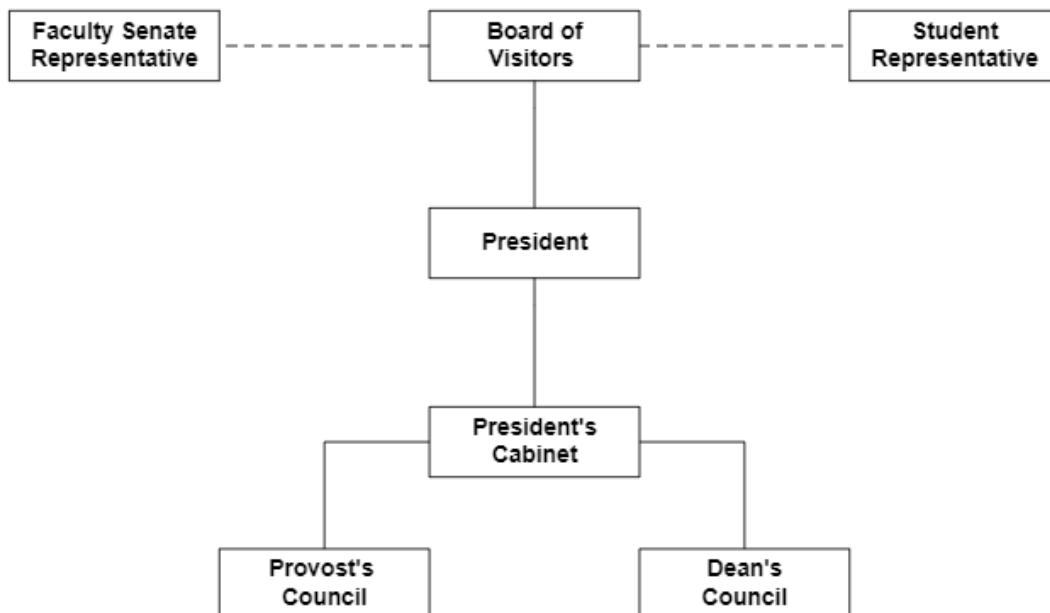
### **Governance Structure**

At Old Dominion University, governance is an internal process of policy development sanctioned by the University's Board of Visitors, which holds overall authority for the activities of the institution. The President is delegated the authority to be the chief decision-making and policy-making authority for the University. The President's Cabinet is the University's conduit for communication, consulting with the President on all issues related to governance and providing information to the President to assist in decision-making.

The Faculty Senate and the Student Government Association have direct access to the Board of Visitors through non-voting representatives selected annually by the Board of Visitors.

### **Committees and Other Affinity and Advisory Groups**

At Old Dominion University, there are a number of committees, taskforces, and advisory groups that contribute to campus dialogue, deal with special issues, and support the day-to-day operations of the institution. These groups, though not an official part of the University's governance system, can at various times be called to take part in the development of policy. Within each administrative division of the University, there are a number of advisory groups and other staff positions that play an important role in the development and vetting of policy.



## University Organizational Chart

The organizational chart can be found at the following link:

<https://www.odu.edu/sites/default/files/documents/odu-organizational-chart.pdf>

## II. THE FACULTY

### **Resolution Concerning Employment of Current or Former Public Elected Officials and Executives of Governmental Agencies**

(Board of Visitors Policy, #1240)

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/bov/board-of-visitors-policy-1240>

## **Criminal Background Checks (*Interim Policy Revisions*)**

**(University Policy, #6021)**

The policy can be found at the following link:

<http://www.odu.edu/about/policiesandprocedures/university/6000/6021>

## Dual-Career Resource for Those Hiring Full-Time Faculty

### Teaching – Research – Administrative

Old Dominion University is committed to assisting dual-career couples when one member of the couple has an offer of employment at the University and both are considering relocating to the area. Such assistance is extended within available resources and in cases that support the mission and goals of the University. This document outlines the basic services offered once an offer has been made to the primary candidate.

For couples with both members in academe, employment needs will vary from one case to another, and the University will assist with opportunities at ODU wherever possible and appropriate. However, these considerations do not create an entitlement. Given limited resources, the lack of disciplinary or administrative fit in some cases, and the University's strategic plan, it is impossible to respond to the employment needs of all dual-career couples in academe.

In an effort to support dual-career couples, the Provost and Vice President for Academic Affairs or designee will collaborate with [Human Resources](#) to help each prospective candidate who wishes to explore career options for his or her partner. The partner of a newly recruited faculty or faculty administrator may be offered job search assistance for up to one year. Such assistance may include general information on employment in the region, identification of appropriate employers, and connections with contacts in the partner's field.

Information about employment opportunities in the region may result in an appropriate position for some. In other instances, referral to existing vacancies on the ODU faculty or staff may provide an appropriate match between an employment opportunity and the partner's skills. In cases where a position does not currently exist, and the individual's credentials merit consideration for hiring, it may benefit the University to allocate funding to accommodate a dual-career couple. The following considerations address these instances.

**Note:** Hiring supervisors are advised that classified positions fall under Commonwealth of Virginia hiring policies and must follow the standard search/recruitment and hiring process as outlined by the [Department of Human Resource Management—DHRM](#).

1. Allocation of a position, either temporary or renewable, for a dual-career partner, should address demonstrated institutional and/or departmental needs and goals.
2. There must be an appropriate fit between the qualifications of the individual and the available or proposed position.
3. Following the interview and evaluation process, an offer of employment to the partner shall be extended only if there is strong support from the department and hiring supervisor/Chair where the position is to be located (the receiving department). Expression of departmental support will be obtained in a manner consistent with the normal hiring process for the receiving department.
4. University procedures allow an exemption to search requirements for a dual-career appointment to a faculty or faculty administrator position. Requests for an exemption to a search are approved by the President on the recommendation of the appropriate Vice President in consultation with the [Office of Institutional Equity and Diversity](#) and in cases of administrators, in consultation with Human Resources.



### Implementation Procedures for Hiring Managers Key Terms

- **Primary Hiring Manager:** Individual hiring initial candidate for open position
- **Primary Department:** Unit where initial candidate has applied for an open position
- **Receiving Manager:** Individual who may consider a partner or spouse for a position
- **Receiving Department:** Unit where the initial candidate's spouse or partner may be considered.

**Informing Primary Candidates of Dual-Career Resources:** Several strategies are available for informing the primary candidate who may be exploring positions at Old Dominion University:

1. Creating a link to the dual-career resources and the recruitment website
2. Distributing an information sheet or brochure to candidates
3. Providing information about a liaison to dual-career couples in the Provost and Vice President for Academic Affairs Office and in [Human Resources](#).

**Identifying Possibilities for Appointment:** The primary candidate informs the hiring manager about the need for dual-career consideration and supplies information regarding the partner's educational background, experience, and application materials. The primary hiring manager investigates and identifies the best possibilities for employment in consultation with the potential receiving departments(s), the dual-career liaison, and the respective Vice President, if needed. The relevant chain of command must be kept apprised of any discussions. This includes the Dean or department Chair and respective Vice President.

In cases where classified positions are appropriate and of interest to the individual, a referral should be made to Human Resources to review both opportunities and strategies for pursuing staff positions.

**Note:** Hiring supervisors are advised that classified positions fall under Commonwealth of Virginia hiring policies and must follow the standard search/recruitment and hiring process as outlined by [DHRM](#).

Other options are described below.

**Evaluating and Interviewing the Partner:** The unit in which the partner is being considered (the receiving department (and/or college) initiates an evaluation process, including a review of the vita/resume and references of the partner, and conducts an interview with the partner. If there is an appropriate personnel or standing search committee in the department, this committee would normally be involved, as would other faculty or faculty administrators. The partner's qualifications should be evaluated using criteria appropriate to the proposed role and credentials required in the field. For example, it must be determined that the partner is sufficiently qualified to have been a finalist in an external search if one were conducted for the position into which the partner is to be hired. Standard review and appointment procedures should be used to the extent possible, and the level of review should be consistent with that accorded similar positions and types of appointments.

**Taking Steps When There is an Existing Position or Funding Available in the Receiving Department and/or College:** Receiving departments (and/or college) that have available funds and/or positions and are prepared to make an offer for the partner develop an appropriate job description (if not already available) and offer and then seek an exemption to search, using the process in place by the [Office of Institutional Equity and Diversity](#). The search exemption includes a letter of explanation including a brief statement of how the proposed appointment benefits the receiving department (and/or college) and

documenting the process used to review and evaluate the candidate. The hiring manager also attaches the candidate's vita/resume. The exemption request must be approved by the department head, the relevant Dean or senior manager, the relevant Vice President, and the [Office of Institutional Equity and Diversity](#). A formal offer may not be made until approval has been granted.

**Taking Steps When a New Position Must be Allocated and Shared Funding Arranged:** In cases where the receiving department (and/or college) does not already have a position and/or adequate funds available to support the proposed appointment, the receiving department hiring manager and Vice President may develop a model for the position to be funded on a transitional basis.

Permanent funding, in the case of a base-funded appointment, is the responsibility of the receiving department (and/or college) at the end of the transition period. Temporary funding may be available from the Vice President, yet may not be available to support all requests. Typically, the highest priority would be to support a dual-career partner position alongside a tenure-track or tenured faculty hire or an administrative hire. If the receiving department (and/or college) accepts temporary funding from the Vice President, the understanding is that the dual-career appointment continues beyond the temporary period only if the performance and accomplishments of the individual warrant continuation. However, as noted above, this does not create an entitlement.

Departments requesting funding assistance should submit a written proposal through the responsible/appropriate chain of command. The following information is needed to evaluate the request:

1. A justification for the request;
2. An explanation of how the University will benefit from the appointment and how the proposed appointment fits within the priorities of the receiving department (and/or college);
3. The vita/resume of the individual under consideration;
4. The proposed salary, type of appointment, and job description;
5. A statement indicating the source and amount of funds from the participating units, and the amount requested for temporary funding, if available, from the Vice President, and the time period involved in the transition; and
6. Plan for potential future funding. (The goal is to move employees from temporary funds to permanent funds whenever feasible and appropriate.)

**Making an Employment Offer:** Upon approval by the Vice President and the Office Institutional for Equity and Diversity, the receiving department head is authorized to make the offer to the dual-career partner, using the standard Notice of Appointment detailing the nature and conditions of the appointment, including the length of the appointment if applicable. Expectations should be stated very clearly so that any special considerations are fully documented for the employment record and for performance reviews. Every effort should be made to welcome the new faculty member in the receiving department (and/or college) and to help make him or her become a full participating member of the University. Helping the individual succeed will serve both the department and the employee and help accomplish the primary goal of the dual-career-hiring program, which is to recruit and retain talented faculty members.

#### **Dual-Career Issues Associated with Retention**

Retention of talented individuals currently on the faculty can also be affected by employment opportunities for their partners. In the case where there is a determination that a dual-career

appointment is critical to retaining the faculty member, and it is in the University's interest to try to respond to this need, the process described in this document for new hires provides general guidance on how to proceed for retention of a faculty member. The nature and conditions of the appointment and the length of the appointment, if applicable, should be specified. In addition, expectations should be stated very clearly so that any special considerations are fully documented for the employment record and for performance reviews.

### **Options Other than Tenure-Track or Administrative Appointments**

**Research Faculty:** Status as an unpaid research faculty member may allow a fully credentialed person to pursue grants and contracts as a member of the ODU faculty. The host department may provide lab or office space or other resources, as available, to support the individual's efforts to obtain sponsored funding or to continue his or her research. The department Chair recommends appointment of a full-time research faculty member to the Dean. The Dean recommends it to the Provost and Vice President for Academic Affairs ("Provost"). The Provost, consulting if appropriate with the Vice President for Research and Economic Development, makes the final decision concerning the appointment and, if the appointment is approved, notifies the faculty member. With the appropriate credentials and research faculty rank, the individual may serve as PI on grant(s) with permission of the department.

**Research Appointments:** The ODU *Teaching and Research Faculty Handbook* includes a [Policy on Self-Supporting Research Professional Positions](#), which may provide employment opportunities for well-qualified partners of newly hired employees. If the individual fills the need on an existing grant or contract, the procedure for hiring is similar to that described above – a position description should be developed, credentials evaluated, the individual interviewed, and a request made for an exemption to search. The Vice President for Research and Economic Development approves such requests on the recommendation of the Provost.

**Other Restricted Appointments:** Individuals may fill important institutional or departmental needs that are not yet defined or funded as renewable positions. These can be full- or part-time, instructional, or administrative.

**Enrollment in Graduate School:** A spouse or partner may prefer enrollment in an ODU graduate program rather than full-time employment. Such potential students must be admitted through the usual program admission procedures and may be considered for whatever departmental funding is offered to all students.

- Approved by the President  
February 2, 2017

# Policies and Procedures Relating to Faculty Appointment, Promotion and Tenure of EVMS Faculty

([Board of Visitors Policy](#))

**NUMBER:** 1701  
**APPROVED:** June 16, 2023  
**SCHEDULED REVIEW DATE:** April 2028

## I. INTRODUCTION AND POLICY

It is the Policy of ODU that written standards, criteria and procedures for the review and recommendation of EVMS Faculty for appointment, promotion, and tenure be established, maintained and disseminated to all EVMS 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 EVMS Faculty, 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. All references to "faculty" herein mean EVMS Faculty as defined in this policy.

## II. FACULTY STATUS

**EVMS Faculty:** Full-Time Faculty, Part-Time Faculty, or Community Faculty (as defined below), who provide clinical, teaching, research, or administrative services, whether paid or unpaid, in the EVMS School of Medicine ("SOM") and/or EVMS School of Health Professions ("SHP").

**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 previously been designated by the EVMS Board of Visitors or who are designated by ODU 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 on a salaried basis and who have employment contracts with ODU.

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

*Full-Time Non-Salaried-VA Faculty:* Clinical faculty employed by the Veterans Administration and who have previously been designated by the EVMS Board of Visitors or who are designated by ODU 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 may be paid on a salaried, hourly, or per service basis and have employment contracts with ODU.

**Community Faculty:** Community faculty are unpaid faculty members who volunteer their time, efforts, and expertise to the SOM or SHP mission. Community faculty are expected to commit at least 50 hours to SOM or SHP 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 in the SOM or SHP, or by participating in other activities agreed to by the faculty member and a Department Chair of the SOM, Dean of the SOM, or the Dean of the SHP.

### III. FACULTY APPOINTMENT AND PROMOTION DEFINITIONS

**Academic Activities:** Those activities performed for SOM and SHP that fulfill one or more core mission areas.

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

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

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

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

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

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

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

**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 SOM or SHP. Faculty at the rank of Associate Professor or Professor who demonstrate excellence in at least two of the foregoing four areas are eligible for tenure subject to length of service requirements. (See [Tenure section](#))

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

**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 mission and vision of the SOM or SHP and for our community, all faculty pursue one pathway toward promotion, using an expanded description of activities in each area that will provide a clear opportunity for promotion of faculty who contribute in one or more areas of faculty endeavor.

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

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

Non-tenure track faculty appointments will have the title:

- Instructor
- Assistant Professor
- Associate Professor
- Professor

Tenure track faculty appointment will have the title:

- Associate Professor
- Professor

**Primary appointment:** Faculty members are evaluated, promoted, and/or awarded tenure in the academic unit where they hold their primary appointment. The Department Chair of the SOM or the Dean of the SHP 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 (1) department or school.

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

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

#### IV. FACULTY ROLES

The EVMS Faculty Appointments and Promotions Committee will take into account in its deliberations the roles assigned by the Department Chairs of the SOM or the Dean of the SHP 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 SOM or the Dean of the SHP in regular annual meetings and documented in the materials presented to the committee.

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

The primary criterion for academic appointment and promotion at the SOM or SHP is demonstrated excellence as a scholar. The EVMS Faculty Appointments and Promotions Committee recognizes that such excellence may be demonstrated in various ways, as addressed in this document.

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

Outlined below are examples of excellence appropriate to each academic rank. It is not expected that each candidate will meet all of these standards; these standards will serve to guide faculty members

and their Department Chairs of the SOM or Dean of the SHP in evaluation of faculty performance and in documenting excellence for faculty recommended for appointment and promotion.

#### A. To Rank of Instructor

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

The rank of Instructor is appropriate for:

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

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

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

#### B. To Rank of Assistant Professor

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

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



- Individuals with the highest degree in para-professional or related healthcare field (e.g., PharmD, DNP, MPA) or with the highest degree in a non-healthcare field (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 SOM or SHP 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 in the SOM or SHP, or at another academic institution to be considered for promotion. Candidates include:

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

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

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

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

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

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

### **1. Teaching**

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

### **2. Clinical Care**

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

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

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

### **4. Administration/Service**

- a. Is an officer/director of a scholarly society or member of an organizing committee for a scholarly meeting.
- b. Is an officer in local or regional clinical/professional society.

- c. Is an officer in national or international professional/clinical societies.
- d. Is a Chair and member on major hospital and standing school committees.
- e. Has testified before legislative bodies and/or involvement in policy-making at the regional or national level.

## **VI. INITIAL APPOINTMENT TERMS**

EVMS Faculty in the non-tenure track may be appointed for a term not to exceed three (3) years, as follows:

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

## **VII. REAPPOINTMENT AND NONRENEWAL**

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

# Policies and Procedures for EVMS Faculty Appointments

([Board of Visitors Policy](#))

**NUMBER:** 1702

**APPROVED:** June 16, 2023

**SCHEDULED REVIEW DATE:** June 2028

## I. INTRODUCTION AND POLICY

All initial EVMS 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. This Policy only applies to "EVMS Faculty" defined as Full-Time Faculty, Part-Time Faculty, or Community Faculty (as defined in the Policies and Procedures Relating to Faculty Appointment, Promotion and Tenure of EVMS Faculty), who provide clinical, teaching, research, or administrative services, whether paid or unpaid, in the EVMS School of Medicine ("SOM") and/or EVMS School of Health Professions ("SHP"). All references to "faculty" herein mean EVMS Faculty as defined in this policy.

## II. FACULTY APPOINTMENT PROCEDURES

**A. Initial Appointment** - Initial appointments at the ranks below Associate Professor are not considered by the Appointments and Promotions Committee. At these levels, appointments are reviewed by the Vice Dean for Faculty Affairs and Professional Development ("FAPD"), the Dean of the SOM if applicable, and approved by the EVP following receipt of the appropriate materials from the Department Chair of the SOM or Dean of the SHP. Nominations for appointment at the Associate Professor and Professor ranks are considered by the Appointments and Promotions Committee and must be approved by the Executive Vice President, the Board of Directors, and the Board of Visitors.

1. Following is an outline of the general process for initial faculty appointment.
  - a. Candidate submits required documents to the Department Chair of the SOM or the Dean of the SHP.
  - b. Department Chair of the SOM or Dean of the SHP 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 SOM or the Dean of the SHP.
  - e. Nomination package forwarded by Department Chair of the SOM, or the Dean of the SHP, addressed to the Executive Vice President ("EVP") in care of FAPD.
  - f. Package reviewed by FAPD to assure necessary information is submitted.
  - g. Nominations at the ranks of Assistant Professor and below are reviewed by the Vice Dean for FAPD, the Dean of the SOM, if applicable, and approved by the EVP.

- h. For the ranks of Associate Professor and Professor, the EVP forwards the nomination package to the Appointments and Promotions Committee in care of the FAPD.
- i. Nomination reviewed by the Appointments and Promotions Committee, the Dean of the SOM, if applicable, and recommendations forwarded to the EVP for review and approval.
- j. Nomination forwarded by the EVP to the Board of Directors for review and approval.
- k. Board of Directors forwards to the Board of Visitors for approval.
- l. The new faculty members shall be notified of appointment by the Vice Dean for FAPD.

#### **B. Appointment Nomination Package Required Checklist**

1. Department Chair of the SOM or Dean of the SHP 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 SOM or Dean of the SHP 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 SOM or Dean of the SHP. 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 SOM or Dean of the SHP.
  - a. Salaried Faculty
    - i. For Instructor:
      - (1) One letter from the Department Chair of the SOM or Dean of the SHP.
    - ii. For Assistant Professor:
      - (1) Three internal and/or external letters are required. They should be obtained from training directors, faculty members at the

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

b. Non-Salaried Faculty

i. For Instructor:



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

assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service).

c. Community Faculty

i. For Instructor:

- (1) One letter from the Department Chair of the SOM or Dean of the SHP.

ii. For Assistant Professor:

- (1) One internal is required. It should be obtained from program director, department chair or from the SOM Office of Medical Educations or other professionals at an equivalent or higher rank than that for which the candidate is being proposed
- (2) They should document the candidate's competence in one domain area (teaching) and provide evidence of teaching strengths and quality of teaching

iii. For Associate Professor:

- (1) Three external letters are required. They should be obtained from individuals with an academic appointment at an equivalent or higher rank than that for which the candidate is being proposed
- (2) They must come from three different institutions
- (3) One letter may come from an individual who holds a position within institutes/organizations such as the NIH and has previously held an academic appointment at an equivalent or higher rank
- (4) They should address how the candidate is recognized regionally or nationally
- (5) They should document the candidate's meritorious contributions in one or more domain areas and/or competence in other domain areas of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service)

iv. For Professor:

- (1) Three external letters are required. They should be obtained from individuals at an equivalent rank for which the candidate is being proposed.
- (2) They must come from three different institutions, at least two from outside the Commonwealth of Virginia.
- (3) One letter may come from the Commonwealth of Virginia, but outside ODU.
- (4) One letter may come from an individual who holds a position within institutes/organizations such as the NIH and has previously held an academic appointment at an equivalent rank.

- (5) They should address how the candidate is recognized nationally or internationally.
  - (6) They should document excellence in one or more domain areas and meritorious contributions in other domain areas of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service).
3. Curriculum Vitae and Additional Required Information. For the purpose of appointments, the candidate should provide the information requested on the 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 the [Guidelines for Appointment and Promotion of EVMS Faculty](#). 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 their terminal degree (only required for full-time faculty). Clinical faculty with appropriate credentials and a medical license within the Commonwealth of Virginia are not required to provide a transcript.

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

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

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

A unanimous positive evaluation ends the review, and the appointment is approved. Academic titles often differ from institution to institution. Therefore, if the submitted materials do not provide the required documentation, then additional information including letters of recommendations could be requested from the candidate's department chair and a full review by the entire A&P Committee may be initiated. FAPD is responsible for soliciting additional information from the institution from which a candidate is moving to understand the academic

expectations as they relate to the specific rank, especially when modifiers are used (i.e., clinical Associate Professor) to ensure alignment with promotion criteria.

**D. Provisional Appointments.** For initial salaried faculty appointments only, to all faculty ranks, the EVP may approve in emergency situations a provisional appointment provided:

1. The Department Chair of the SOM, with approval from the Dean of the SOM, or Dean of the SHP must provide to the EVP, in care of FAPD, a written reason for requesting provisional status for a potential new faculty member. The EVP 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 EVP may approve one extension of three (3) months. All faculty approved for provisional appointments must still submit all requirements for appointment as outlined under Policies and Procedures for Faculty Appointment, prior to expiration of their provisional appointment.
3. The required clinical credentials must be complete prior to the beginning of any clinical activity including direct patient care, consultation or preceptorship.
4. The EVP 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 ODU will have no continued contractual obligation beyond such date unless a permanent appointment has been approved.
5. The non-binding offer letter may not refer to provisional appointments.
6. New Faculty will not be added to the payroll until the EVP 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 EVP's approval) will not be granted.

## Guidelines for Appointment and Promotion of EVMS Faculty

([Board of Visitors Policy](#))

**NUMBER:** 1703  
**APPROVED:** June 16, 2023  
**SCHEDULED REVIEW DATE:** June 2028

### A. Introduction

The criteria for appointment and promotion requires that EVMS Faculty fulfill their assigned responsibilities in teaching, clinical care, research/discovery and administration/service, with a level of expertise befitting the rank. All EVMS 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 all EVMS Faculty in the School of Medicine ("SOM") or the School of Health Professions ("SHP"). The allocation of time to each activity should be developed a priori between the faculty member and the Department Chairperson. In turn, when discerning the quality of faculty activity, the Appointments and Promotions (A&P) 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 of the EVMS SOM and SHP. This Policy only applies to "EVMS Faculty" defined as Full-Time Faculty, Part-Time Faculty, or Community Faculty (as defined in the Policies and Procedures Relating to Faculty Appointment, Promotion and Tenure of EVMS Faculty), who provide clinical, teaching, research, or administrative services, whether paid or unpaid, in the SOM and/or SHP. All references to "faculty" herein mean EVMS Faculty as defined in this policy.

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

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

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

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

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

- Local and regional recognition

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

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

## **C. Faculty Accomplishments/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 they were the Chair or a member of the committee)
    - (i) Thesis (Dissertation)
    - (ii) Non-thesis
  - (b) Resident
  - (c) Fellow
  - (d) Visiting Scientist
- 2) Duration of mentoring
- 3) Accomplishment of scholarly activity by the trainee during the training interval
- 4) Current position of the trainee

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

Provide the level of involvement:

- 1) Officer/director of a scholarly society
- 2) Membership on advisory boards
- 3) Membership on editorial boards
- 4) Reviewer for journal
- 5) Reviewer for funding agency
- 6) Member of organizing committee for a scholarly meeting

**i. Consultancies**

**j. Serving as a Visiting Professor**

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

**k. Recognition for Scholarship**

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

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



## 1. Teaching Accomplishments

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

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

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

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

- Prepares curriculum material (new courses, syllabus materials, Blackboard materials, etc.)
- Supervises or coordinates the teaching by other faculty, residents or graduate students (i.e., Course or Unit director)
- Develops innovative approaches to improving students/resident learning and the enhancement of learning experiences (e.g., implements integration across disciplines; explores impact of innovation on learners' accomplishments)
- Develops or directs a postgraduate or continuing education course that serves a regional audience

- Invited to make presentations at the state or regional level
- Invited presenter at other institutions of higher education (i.e., universities, medical centers, health profession schools) or research and development facilities or institutes (i.e., NIH, Harvard-Macy, Max Planck Institute, etc.)
- Develops and participates in the teaching of major portions of a graduate course
- Supervises graduate students (Masters or PhD), MPH thesis for students in MD/MPH programs, serves as a project mentor for MD student or resident/fellow scholarly activity or research project requirement
- Demonstrates meritorious teaching ability as measured by learner evaluation and peer review
- Receives a local teaching award

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

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

## **2. Research/Discovery Accomplishments**

Research takes many forms. Traditional biomedical researchers strive to enhance our understanding of the fundamental mechanisms underlying health and disease. Translational and clinical researchers aim to take these findings from bench to bedside and provide new

tools and treatments to improve patient care. Public health is enhanced by the work of epidemiologists, behavioral scientists, and social scientists who identify areas of need and provide evidence in support of the most effective therapies. Educational research identifies the best methods and tools for imparting knowledge to our students, and administrators use research methodology to improve practices in their areas of expertise.

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

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

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

- *Extramural Funding:* PI on indirect cost bearing grant to support research and PI salary for effort on this project
- *Publications:* 2-3 journal articles/year in mid-tier journals with mid-tier impact or 1 journal article/year in top journal with high impact (assumes 100% effort to research; only consider those where candidate is listed as 1st or last author)
- *Communications:* Invitations to speak at universities, hospitals, other academic/medical facilities, professional meetings, to the lay public outside Hampton Roads but within our region/nationally
- *Patents:* Author on an issued patent or multiple submitted patent
- *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)
- *Communications:* Invitations to speak at universities, hospitals, other academic/medical facilities, professional meetings, to the lay public nationally/internationally

- *Patents:* Author on a patent which has been licensed and/or generates revenue for EVMS
- *Clinical Trials and Methods:* PI or Co-Investigator with a significant role in trial design, implementation, and/or acquisition of funding
- *Mentoring in Research:* Primary faculty involved in training multiple students in research, director of a training program, recognition/invitations for training at a national/international level, Chair of student committees
- *Service in support of Research:* Regular service to professional societies as committee chair or in other leadership positions; associate editor/editorial board member; member of standing grant review panel

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

### **3. Clinical Care Accomplishments**

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

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

- Demonstrates competence as defined by attaining/maintaining educational and/or professional accreditations/ Board Certifications (NCCPA, NSAA, ACGME, ABMS etc...) in areas such as (but not limited to) patient care, diagnostic, procedural and other clinical related activities
- Consistently rated highly by students, residents, fellows and faculty
- Provides evidence of consulting and collaborating at local levels
- Actively coordinates or develops additive activities within the academic unit or practice group
- Provides evidence of being a contributing/active member in specialty/subspecialty professional groups and societies
- Provides evidence of high rating of periodic validated patient experience surveys

- Consistently meets objective clinical/departmental benchmarks demonstrating quality care standards (length of stay, complication rate, utilization parameters, etc.) as compared to peer groups
- Provides evidence of providing a minimum of 50 hrs/year community clinical service/care to underserved /indigent /special needs populations in support of EVMS activities and missions
- Provides evidence of reflective self-evaluation and assessment to improve performance within the scope of practice
- Provides evidence of being a consistent life-long learner through activities such as faculty development, CME and other professional development sessions

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

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

- Presents evidences of being a consistent and persistent life-long learner who goes above and beyond the minimum standard (as compared to peers) to engage in regular activities such as faculty development, CME and other professional development sessions

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

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

**4. Administrative/Service Accomplishments**

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

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

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

- Independently develops or directs a major program/project/research laboratory
- Oversees, directs and interprets tests, procedures or data handling in support of a clinical or service laboratory

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

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

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

## Policies and Procedures for EVMS Faculty Promotion

([Board of Visitors Policy](#))

**NUMBER:** 1704

**APPROVED:** June 16, 2023

**SCHEDULED REVIEW DATE:** June 2028

### I. INTRODUCTION AND POLICY

Promotion to a higher rank is primary recognition of excellence. 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 an EVMS 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 ODU that EVMS 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. This Policy only applies to "EVMS Faculty" defined as Full-Time Faculty, Part-Time Faculty, or Community Faculty (as defined in the Policies and Procedures Relating to Faculty Appointment, Promotion and Tenure of EVMS Faculty), who provide clinical, teaching, research, or administrative services, whether paid or unpaid, in the EVMS School Of Medicine ("SOM") and/or EVMS School of Health Professions ("SHP"). All references to "faculty" herein mean EVMS Faculty as defined in this policy.

### II. FACULTY PROMOTION PROCEDURES

- A. Ongoing Evaluation.** Each Departmental Chair of the SOM and the Dean of the SHP 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 SOM (or designee) and the Dean of the SHP 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 SOM or Dean of the SHP (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 SOM or Dean of the SHP'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. Promotion Process.** Promotions at the ranks of Instructor and Assistant Professor are not considered by the Appointments and Promotions Committee. At these levels, promotions are reviewed by the Vice Dean for Faculty Affairs and Professional Development ("FAPD"), the Dean of the SOM, if applicable, and approved by the EVP following receipt of the appropriate materials from the Department Chair of the SOM or Dean of the SHP. 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 SOM or Dean of the SHP. 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 SOM or Dean of the SHP.
4. Department Chair of the SOM or Dean of the SHP 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 SOM or Dean of the SHP.
7. Nomination package forwarded by the Department Chair of the SOM or Dean of the SHP to the Executive Vice President ("EVP") in care of 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 Dean for FAPD, the Dean of the SOM, if applicable, and approved by the EVP.
10. For the ranks of Associate Professor and Professor, the EVP forwards the nomination package to the Appointments and Promotions Committee in care of the FAPD.
11. Nomination reviewed by Appointments and Promotions Committee, the Dean of the SOM, if applicable, and recommendations forwarded to EVP for review and approval.
12. If approved, FAPD sends letter of confirmation to faculty member and to Department Chair of the SOM or Dean of the SHP.

**D. Promotion Nomination Package Required Checklist**

1. **Department Chair of the SOM or Dean of the SHP 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 SOM or Dean of the SHP evaluation of candidate's ability, experience, accomplishments and performance (i.e., outstanding, excellent) in each of the four areas mentioned above.

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

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

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

- a. For Assistant Professor:
  - i. Three internal and/or external letters are required. They should be obtained from training directors, faculty members at the training institution or other

- professionals with an academic appointment at an equivalent or higher rank than that for which the candidate is being proposed.
  - ii. They should document the candidate's competence in one domain area and participation in at least another domain area of assigned responsibility. (i.e., teaching, clinical care, research/discovery and administration/service).
- b. For Associate Professor
- i. Three external letters are required. They should be obtained from individuals 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 the SOM.
  - v. They should address how the candidate is recognized nationally or internationally.
  - 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 than that for which the candidate is being proposed.
  - ii. They must come from three different institutions, at least two from outside the Commonwealth of Virginia.
    - (1) One letter may come from the Commonwealth of Virginia, but outside ODU.
    - (2) One letter may come from an individual who holds a position within institutes/organizations such as the NIH and has previously held an academic appointment at an equivalent rank.
  - iii. In addition, up to three recommendation letters can be obtained from faculty or department Chairs of the SOM.
  - 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 Curriculum Vitae form, available from FAPD <https://www.evms.edu/facultyaffairs>. In addition, the candidate should provide additional information not already included in the Curriculum Vitae format as required for documentation of scholarly activity as outlined in the [Guidelines for Appointment and Promotion of EVMS Faculty](#). 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 school.

# EVMS Faculty Tenure Policy

[\(Board of Visitors Policy\)](#)

**NUMBER:** 1705

**APPROVED:** June 16, 2023

**SCHEDULED REVIEW DATE:** June 2028

## I. INTRODUCTION AND POLICY

A decision to award tenure allows ODU to retain its best faculty and preserve academic freedom. ODU extends tenure to EVMS Faculty being promoted to the rank of Professor or Associate Professor based on the merit of the EVMS Faculty member and the needs of the EVMS School of Medicine ("SOM") and/or EVMS School of Health Professions ("SHP") in accordance with this Policy. This Policy only applies to "EVMS Faculty" defined as Full-Time Faculty (as defined in the Policies and Procedures Relating to Faculty Appointment, Promotion and Tenure of EVMS Faculty), who provide clinical, teaching, research, or administrative services in the SOM or the SHP. All references to "faculty" herein mean EVMS Faculty as defined in this policy.

## II. TENURE ELIGIBILITY AND CRITERIA

- A. Tenure Definition.** Tenure relates to faculty rank and salary and is the status granted to qualified faculty members which is reviewed at five-year intervals and which protects faculty from dismissal, except for Cause as set forth in the Grounds for Dismissal of Faculty Policy.
- B. Length of Service Requirements**
1. Initial appointees at the rank of Associate Professor (and EVMS Faculty members promoted to the rank of Associate Professor) may be considered for tenure after three (3) years of service as an EVMS Faculty member at the rank of Associate Professor.
  2. Initial appointees at the rank of Professor may be considered for tenure after two (2) years of service as an EVMS Faculty member at the rank of Professor.
  3. Department Chairs of the SOM, the Dean of the SOM, or the Dean of the SHP 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 SOM, with approval by the Dean of the SOM, or for SHP, with the approval of the Dean of the SHP and with the concurrence of the Tenure Committee, the Executive Vice President ("EVP"), the Board of Directors. After the passage of these probationary periods of appointment and review, tenure may be granted or the faculty member may remain on a term contract basis with the institution applicable to all other non-tenured faculty.

5. Tenure is unrelated to the administrative position of a Department Chair or Program Director.
6. The terms and conditions of every tenure appointment and any revisions will be stated in writing at the time of the appointment, be provided to the affected EVMS Faculty member, and be made a part of the academic faculty file.
7. A tenured EVMS Faculty member relinquishes appointment with tenure upon resignation or termination of employment from ODU.

**C. Eligibility**

1. Full-time faculty in the Basic Science Departments and School of Health Professions are eligible to be considered for tenure and with full base salary. Full base salary is defined as the current level of compensation (not including incentive or bonus pay) for an EVMS Faculty member, but not to exceed the average salary of the tenured faculty within the relevant rank and department.
2. Full-time faculty in the Clinical Science Departments at the rank of Associate Professor or Professor are eligible to be considered for tenure. For the purposes of tenure, the base salary for clinical faculty is defined as the current average base salary support provided to the appropriate rank and department in the SOM or SHP.

**D. Criteria for Tenure Appointment**

1. EVMS, to encourage all EVMS Faculty members to achieve excellence in major academic activities, may award tenure to EVMS Faculty members at the rank of Associate Professor or Professor, provided a departmental or SHP tenure position is available in the appropriate department or SHP and the Department Chair of the SOM or Dean of the SHP so recommends.
2. Tenure decisions are based on rigorous standards of quality of performance. Therefore, all tenure decisions shall involve high academic unit standards and shall also involve comparisons of the qualifications of the candidate for tenure with the qualifications of those faculty who are at a similar stage in their careers and who might be available to the academic unit. Consistent with these guidelines, under which tenure is a privilege that is awarded by the institution in recognition of distinguished performance, the question to be asked when faculty members are considered for promotion to tenure is not whether that have performed adequately or even well during their previous years of their faculty appointment whether they have achieved distinction in their field and show promise of continued professional growth. The criteria used for awarding tenure include a higher level of effectiveness in four (4) areas:
  - a. Research/Discovery and publication;
  - b. Teaching;
  - c. Patient Care; and
  - d. Administration/Service.

3. The applicant must demonstrate excellence in at least two (2) of the foregoing four (4) areas.
4. The Department Chair of the SOM or Dean of the SHP must demonstrate that there is a need for the knowledge and skills of the candidate in the departmental/school program, and that such knowledge and skills will enable the department/school to substantially assist the EVMS to achieve its mission.

### III. TENURE APPOINTMENT AND REVIEW

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

**B. Initial Tenure Review and Appointment Procedures**

1. Each nomination for an initial review of faculty tenure status must originate with a letter of nomination from the Department Chair of the SOM or Dean of the SHP addressed to the EVP, in care of Faculty Affairs and Professional Development ("FAPD").

A letter of nomination should contain the following documentation:

- a. Description and evaluation of the candidate's teaching abilities and responsibilities.
  - b. Evaluation of the quality, originality, and significance of the candidate's research. A description of work in progress and relevant sources of funding should be included.
  - c. Description and evaluation of administrative and other services to the department and ODU.
  - d. Description of the role of the candidate in the department's program and the effect of the Institution's long-term commitment to the faculty member on the balance of skills required for a well-ordered department.
  - e. Letters from faculty/students of the SOM or SHP knowledgeable of the faculty member's qualifications should accompany the letter of the Department Chair of the SOM or Dean of the SOM or SHP. In addition, a list of four professional colleagues, external to ODU, knowledgeable of the candidate's qualifications should be provided. The EVP through the office of FAPD will contact at least two of them for recommendation relating to the nominee's candidacy for tenure.
  - f. Summation of the grounds on which the recommendation is based.
2. For EVMS Faculty who are also being nominated for promotion, the nomination package shall be submitted to the Appointments and Promotions Committee first to ensure that faculty nominated for tenure and promotion meet the guidelines for promotion/rank. Promotions will be considered as outlined in the [Policies and Procedures for Faculty Promotion](#).

3. Promotions approved by the Appointments and Promotions Committee, and nomination packages for eligible faculty without a request for promotion, will be sent to the Tenure Committee for review.
4. Recommendations of the Tenure Committee will be sent to the Dean of the SOM, if applicable, to the EVP, and if approved, to the President for presentation to the Board of Directors.
5. If the determination of the Board of Directors is in favor of tenure, the Chair of the Board of Directors shall forward the faculty member's name to the Board of Visitors for final approval.

**C. Post-Tenure Review**

1. All tenured faculty will undergo a post-tenure review at five-year intervals for approval of tenure for an additional five-year period.
2. The Department Chair of the SOM or Dean of the SHP shall submit a letter addressed to the EVP for submission to the Tenure Committee through the office of FAPD for review that outlines the basis for the original (or previous) award of tenure, the faculty member's accomplishments, and an assessment with documentation of whether the tenured faculty member's performance was consistent with the criteria for tenure. For a Department Chair of the SOM or Dean of the SOM or SHP, such assessment will be done by the EVP.
3. The Tenure Committee will be notified and will consider in its review any annual reviews with a summary evaluation lower than "meeting expectations."
4. It is recognized that standards for tenure may change over time. As we improve our quality standards for faculty performance, faculty who may have qualified for appointment, promotion or tenure previously may not meet more current standards. As we state and invoke higher standards, however, we should avoid unfairness to previously appointed faculty member, which might be caused by retroactive application of higher standards without reasonable time and opportunity to meet these standards.
5. The recommendation of the Tenure Committee will be sent to the EVP for approval.
6. If the recommendation of the Tenure Committee is that tenure should not be awarded after its post-tenure review, and the EVP approves the recommendation, the faculty will have a grace period not exceeding two years to redress tenure deficiencies. If after this grace period, the faculty member has not successfully redressed their deficiencies as determined by the Tenure Committee and approved by the EVP, contractual obligations for faculty without tenure shall apply.



## Faculty Remote Work Policy and Procedures

The following policy and procedures apply to full-time teaching and research faculty only.

### I. Policy

The University may grant the privilege for a faculty member to work remotely for a semester or academic year, providing that the appropriate conditions and approvals are met.

### II. Eligibility

All full-time teaching and research faculty employed by the University.

### III. Exceptions

- A. Faculty with approved accommodations on file with the [Office of Institutional Equity and Diversity](#)
- B. When there is a disaster or emergency that causes significant disruption to the continuity of University operations, such as a pandemic, that affects faculty
- C. Adjunct faculty
- D. Faculty on leave of absence without compensation, research leave, development leave, Fulbright or other Fellowship funded leave, or study abroad

### IV. Procedures

- A. The faculty member must make a formal written request to work remotely to the department Chair by the mid-term of the semester prior to the start of remote work. The time frame is waived if there is a documented emergency for the faculty member.
  - 1. The request must designate the time frame for the remote work, either a semester or an academic year.
  - 2. A rationale for the request must be provided.
  - 3. A list of the faculty's current professional activities at the department, college, and University levels and the Chairs' names.
  - 4. Need for any ODU equipment. Approval of this need is dependent on the funds available by the department. Faculty who have research funds for equipment should consult the [Office of Research](#) about funding their equipment needs.
  - 5. A brief description of how the faculty member can meet the professional academic needs of students and the department.
- B. The department Chair reviews and approves or disapproves the request and sends their recommendation to the Dean with a copy to the faculty member.
  - 1. The Chair considers the needs of the department in determining their recommendation.
  - 2. The Chair can arrange for remote attendance for service activities (see below).
  - 3. Other possible disruptions for students and the department are considered.

## **V. Faculty Responsibilities**

- A. Faculty are expected to continue meeting their teaching expectations that, include advising and/or supervision, dissertation or thesis participation, and so on.
- B. Faculty are expected to continue meeting their scholarship/research expectations.
- C. Faculty are expected to continue to meet their department, college, University, and/or national/international professional service activities as specified in the approval for remote work MOU (see the following section on [Department Chair Responsibilities](#)).

## **VI. Department Chair Responsibilities**

- A. The department Chair, in consultation with the faculty member, can make arrangements to set up hybrid meetings for department professional activities such as committee, department, and/or program meetings.
- B. Request that the Chairs of the faculty members' college and University committees provide hybrid meetings for remote attendance.
- C. Determine if department funds are available for providing technology and other supports for the remote work. The department is not obligated to provide devices such as computers, cell phones, or other devices for remote work.
- D. Review the faculty member's current use of office and other University space with the faculty member to determine if these spaces are needed for other faculty while this faculty member is working remotely and make a recommendation.
- E. Develop a written MOU detailing the expectations and responsibilities for the faculty while working remotely, including professional service activities. A copy will be given to the faculty member and sent to the Dean with the other documents for approval or disapproval of the request to work remotely.

## **VII. Dean Responsibilities**

- A. The Dean reviews the request, the department Chair's recommendation, and the MOU and makes a decision to approve or disapprove the request. If the request is disapproved, a rationale must be provided in writing to the department Chair and faculty member.
- B. If the Dean disapproves the request, the faculty member may appeal to the Provost and Vice President for Academic Affairs, whose decision is final.

- Approved by President  
May 15, 2023

## **Non-Instructional Part-Time Faculty Employment Policy**

**(University Policy, #6012)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6012>

## Philanthropic Support Policies

For questions related to gifts, grants, or other philanthropic support for the Macon & Joan Brock Virginia Health Sciences Eastern Virginia Medical School and EVMS School of Health Professions at Old Dominion University, please contact [donorrelations@odu.edu](mailto:donorrelations@odu.edu).

For all other philanthropic support questions, please see the following policies.

## **BOV Development Policy**

**(Board of Visitors Policy, #1801)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/bov/board-of-visitors-policy-1801>

## **University Development Policy**

**(University Policy, #1100)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/1000/1100>

## **Gift Management**

**(University Policy, #1101)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/1000/1101>

## **Acceptance of Gifts-in-Kind to the University**

**(University Policy, #1102)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/1000/1102>



## **Establishment and Operation of Annual and Endowed Scholarships, Fellowships, and Prizes**

**(University Policy, #1103)**

The policy can be found at the following link:

<http://www.odu.edu/about/policiesandprocedures/university/1000/1300>

## Guidelines for Named Chairs

### I. Statement of Purpose and Expectations

The purpose of the award of a named chair is to recognize and give support to a full professor who has demonstrated sustained excellence in research and teaching and will significantly contribute to the University. The holder of a named chair is a person of national stature.

The recipient must have a distinguished record of accomplishments in his/her field, as indicated variously by research, publication, external funding, creative endeavors, awards and honors, and leadership positions in professional organizations. The holder of a named chair will meet all requirements (or equivalents) for the rank of full professor. Named chairs serve as models of professional accomplishment and commitment to the mission of the University. Appointments to named chair positions are for a five-year period, and they are renewable based on an in-depth performance review. Each named chair shall receive a document from the dean, with input from the department/school chair or center director where appropriate, outlining research expectations over the next five years.

The named chair will hold a tenured, full-time faculty appointment or senior research appointment at the level of full professor. Normally, named chairs do not hold administrative posts such as department/school chair, dean, or provost and vice president for academic affairs ("provost").

### II. Selection Procedures

- A. The selection and appointment procedures followed shall be fully consistent with the institution's promotion and tenure policies and other applicable personnel policies.
- B. If candidates for the named chair are sought by a national search, they may be nominated or apply. If no national search is held, candidates may be nominated by the college dean(s), the provost, or the president.
- C. When an external candidate is an applicant for the named chair, the candidate must be reviewed for appointment according to the usual procedures and criteria of the department/school/college in which the appointment will be made.
- D. The college dean shall forward nominations for named chairs with his/her recommendation to the provost. The nomination must include the following.
  - 1. A letter stating the rationale for the nomination and addressing the criteria for the named chair.
  - 2. The nominee's curriculum vitae.
  - 3. A narrative description of the nominee's record of accomplishments meriting the appointment.
  - 4. A statement of the perceived relation of the appointment to achieving the University's mission and goals and strategic plan.

5. A brief statement of the nominee's interests, the future direction of his/her pursuits, and perceived benefits to the University, college, and department/school.
  6. The dean should provide an indication of the expected financial commitment.
- E. The provost shall call a meeting of the named chair selection committee, whose membership includes:
1. Provost, who will serve as committee chair
  2. Vice president for research and economic development
  3. Vice provost for academic affairs
  4. Three top scholars to be named by the president
  5. Donor or a representative, if the donor chooses to participate
- F. The named chair selection committee reviews the nominations and supporting materials and sends a recommendation to the president.
- G. The president reviews all supporting materials and makes a recommendation to the Board of Visitors for final approval of the appointment.

- Approved by the Board of Visitors  
June 15, 2004  
Revised December 4, 2014 (eff. 1/1/15)  
- Transitioned to University-Level Policy  
December 10, 2021

## Guidelines for Named Professorships

### I. Statement of Purpose and Expectations

The purpose of the award of a named professorship is to recognize and provide support to an Old Dominion University faculty member who has exhibited sustained excellence in teaching and/or research as well as a continuing, exemplary commitment to the University.

Appointments to named professor positions are for a five-year period, and they are renewable based on an in-depth performance review. Each named professor shall receive a document from the dean, with input from the department/school chair or center director where appropriate, outlining research, teaching, and service expectations over the next five years. The recipient will serve as a model of professional accomplishment and commitment to the mission of the University.

The recipient must hold a full-time faculty or senior research appointment at Old Dominion University.

### II. Selection Procedures

The selection and appointment procedures will be as follows.

- A. The candidate will be recommended by the department/school promotion and tenure committee.
- B. The college dean will forward the nomination and his/her recommendation to the provost and vice president for academic affairs along with:
  1. A letter stating the rationale for the nomination and addressing the criteria for the named professorship.
  2. The nominee's curriculum vitae.
  3. A narrative description of the nominee's record of accomplishments meriting the appointment.
  4. A statement of the perceived relation of the appointment to achieving the University's mission and goals and strategic plan.
  5. A brief statement of the nominee's interests, the future direction of his/her pursuits, and perceived benefits to the University, college, and department/school.
  6. The dean should provide an indication of the expected financial commitment
- C. The provost and vice president for academic affairs will consult the named chair committee and recommend to the president who will make a recommendation to the Board of Visitors for final approval of the appointment.

- Approved by the Board of Visitors  
June 15, 2004  
Revised December 4, 2014 (eff. 1/1/15)  
- Transitioned to University-Level Policy  
December 10, 2021

## EVMS Emeritus Faculty Appointments Policy

[\(Board of Visitors Policy\)](#)

<b>NUMBER:</b>	1709
<b>APPROVED:</b>	June 16, 2023
<b>SCHEDULED REVIEW DATE:</b>	June 2028

Emeriti status in the School of Medicine ("SOM") or School of Health Professions ("SHP") is an honor, and is granted to retired faculty members who have demonstrated a distinguished professorial career and have made significant contributions to the school. This Policy only applies to "EVMS Faculty" defined as Full-Time Faculty, Part-Time Faculty, or Community Faculty (as defined in the Policies and Procedures Relating to Faculty Appointment, Promotion and Tenure of EVMS Faculty), who provide clinical, teaching, research, or administrative services, whether paid or unpaid, in the SOM and/or SHP. All references to "faculty" herein mean EVMS Faculty as defined in this policy.

### 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 SOM or SHP 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 applicable catalogues and directories.
3. In person and online library privileges.

4. Emeritus email address and technical support for salaried faculty including listing applicable 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 institution public ceremonies.
8. Based on availability and the recommendations of the Department Chair with the concurrence of the Executive Vice President ("EVP"), 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 EVP, authorization to serve on thesis and dissertation committees or engage in other research or educational activities at the institution.
10. Be eligible for up to 8 hours/week of 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 EVP, Emeriti Faculty are welcome to:
  - a. Advise medical students, health professions students and residents. Co-author papers with them and other faculty members within or outside of the institution using institutional affiliation;
  - b. Teach classes as an emeriti faculty member;
  - c. Participate in sponsored research, as approved by the sponsor and the institution;
  - d. Attend departmental and collegial open meetings, as a guest, subject to the bylaws of said unit;
  - e. Eligible to serve on an Institutional Standing Committee as an ad-hoc or regular member.

## Procedure

Application for Emeriti status may be initiated by the candidate, Chair, or Dean with the understanding that granting of emeritus requires approval by the EVP, President, Board of Directors, 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 Curriculum Vitae, to the Department Chair by December 1st of the year of retirement.

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

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

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

The EVP shall make a recommendation and forward same, along with all prior recommendations, to the President, who shall forward their recommendation to the Board of Directors, which shall recommend to the Board of Visitors for approval.

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

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

### **Reconsideration**

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

### **Emeriti Review Committee Operations**

The Emeriti Review Committee consists of two representatives from clinical departments, one from a basic science department, and one from the SHP, who are appointed by the Vice Dean for FAPD for a term of three years. One or more of the Committee members should be an Emeritus faculty member. The Emeriti Review Committee operates under the jurisdiction of the EVMS Faculty Assembly 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 EVMS Faculty Assembly 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 the EVP through the appropriate processes and procedures, including with the advice and consent of the EVMS Faculty Assembly. Such amendments shall be promptly communicated to all Emeriti faculty.

## Guidelines for Appointment and Promotion of Librarians

### I. Appointment and Promotion in Rank

All appointments to and promotions in rank are based upon the evaluation of the librarian's professional performance and the established requirements for each rank. The University Libraries rank structure is equivalent to the teaching/research faculty rank structure<sup>1</sup>.

The following ranks are established for librarians at the Old Dominion University Libraries:

A. **Librarian IV:** Appointment or promotion to this rank is the highest honor that the University can bestow upon academic librarians. These are librarians who have made outstanding contributions to the University and to their profession. They shall have demonstrated excellence in professional performance, continued academic study, and additional professional service. Although few will excel equally in all three areas, those appointed or promoted to the rank of librarian IV shall have made demonstrable contributions in each area. A candidate with a doctorate and a minimum of 10 years of professional library experience may be appointed or promoted to this rank. In cases of unusual merit, a candidate with a master's degree in librarianship, a second master's degree, and six years as a librarian III or an equivalent rank may also be appointed or promoted to librarian IV.

For initial appointment to the position of dean of University Libraries, the candidate should meet the requirements for librarian IV. In the event of an opening in that position, the librarians shall have input toward the selection of the new dean of University Libraries and shall meet with all final candidates.

B. **Librarian III:** Appointment or promotion to the rank of librarian III is based upon established excellence of professional performance, continued academic study, and professional service, with pre-eminence and/or high-quality contributions in one or more of these areas. Degree requirements for this rank include a master's in librarianship and either a second master's degree or 30 credit hours approved by the University. The candidate is considered for promotion during the fifth year in rank as a librarian II or may be appointed to this rank after nine years of professional library experience. Exceptions should be made only in cases of unusual merit.

C. **Librarian II:** Appointment or promotion to the rank of librarian II requires a master's degree in librarianship, a minimum of 15 credit hours approved by the University, and three years of professional library experience. A candidate with a master's degree in librarianship and five years of professional library experience is also considered. Evidence of promise in professional performance, continued academic study, and additional professional service are also required.

D. **Librarian I:** Appointment to the rank of librarian I requires a master's degree in librarianship from a library school accredited by the [American Library Association](#). Evidence of promise in professional performance is also required.

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<sup>1</sup> See the "Policy on Academic Rank and Criteria for Ranks."



To be considered for promotion in rank, the librarian must make a written application to the Libraries Promotion Committee. The librarian will follow the calendar as given in the Schedule for Faculty Seeking Promotion in Rank found in the Appendix in the ODU *Teaching and Research Faculty Handbook*. The Libraries Promotion Committee is responsible for initial consideration of all applications for promotions in rank, appointments to rank for newly hired librarians, and also requests for extended appointments. The committee consists of five members elected by the University Libraries faculty and chosen from those librarians with the rank of librarian II or above with one or more years of experience in the University Libraries. The committee reviews the application and documentation and forwards its recommendation to the dean of University Libraries. The dean of University Libraries forwards his or her recommendation and that of the Libraries Promotion Committee to the provost and vice president for academic affairs ("provost"). On the basis of all the evaluations and recommendations, the provost makes a decision concerning promotion and extended appointments for the coming year. If the provost decides against promotion or extended appointment, the librarian may request a review by the president. The decision of the president is final.

## II. Evaluative Criteria for Promotion

An annual review of the performance of each librarian of the Old Dominion University Libraries staff will be conducted in order that he or she may receive full credit and reward for his or her contribution to the University Libraries and to the University. The criteria on which this evaluation will be based are as follows:

- A. **Professional Performance:** The basic quality which must be evident for promotion in academic rank is the ability to perform at a high professional level in areas which contribute to the educational and research mission of the University, such as reference service, collection development, management, bibliographic organization, and control. Each librarian should have the maximum possible latitude in fulfilling these responsibilities.

Demonstration of high standards of professionalism should include:

1. Demonstrated in-depth knowledge of the job.
2. Effectiveness in providing information to the University community and in the development and use of library resources.
3. Performance characteristics such as innovativeness and creativity, adaptability, and acceptance of responsibility.
4. Demonstrated ability as an administrator, if applicable, to the librarian's position description.

Additional evidence for promotion in rank may include.

- B. **Continued Academic Study:** This category includes a formal, practical effort to broaden one's academic base, to acquire an additional graduate degree, or to pursue a course of study related to professional growth.
- C. **Additional Professional Service:** This category includes activities beyond those of required professional performance and continued academic study, in which the librarian exercises

professional expertise in the service of the University Libraries, the University, the profession, or the community.

The following activities will be among those considered in the evaluation of additional professional services:

1. Teaching
2. Organization of workshops, institutes, or similar meetings.
3. Public appearances, such as presenting book reviews or addresses.
4. Contributions to the advancement of the profession such as active participation in professional and learned societies as a member, as an officer, as a committee member, or as a committee chairperson.
5. Activities related to inquiry and research, such as writing, editing, abstracting or reading for a professional journal, publishing in scholarly journals, presenting papers, reviewing books and other literature, developing grant proposals, serving as a member of a team of experts, review committee or similar body, developing, or applying computer programs, etc.
6. Preparation of the University Libraries' in-house publications such as manuals, guides, bibliographies, newsletters, etc.
7. Active and effective service to the University Libraries, to the University, to University-related agencies, or other community agencies.

The application and interpretation of all guidelines used in the evaluation of the librarians should be consistent with the principles of academic freedom as stated in the [1940 "Statement of Principles of Academic Freedom and Tenure."](#)

The basic responsibility for the evaluation of the librarian's performance rests on the dean of University Libraries and/or the department head.

Evaluation will be based on the aforementioned criteria, with evidence supplied by each librarian. Additional evidence may be supplied by request of the Libraries Promotion Committee. The evaluation process will conform with the Administrative and Professional Faculty Performance Appraisal policy as stated in the latest edition of the [ODU Administrative and Professional Faculty Guidebook](#).

### **III. Salary Increments**

Annual salary increments for librarians are based on the "Compensation and Human Resources Administration Plan for Administrative and Professional Faculty" in the latest edition of the *ODU Administrative and Professional Faculty Guidebook*. Initial recommendations for salary increments are made by the dean of University Libraries, who determines the salary increments from information supplied by the librarian's supervisor. The salary increments for librarians are within the total salary budget assigned to the University Libraries by the provost. After being notified by the dean of University Libraries of the salary increment, any librarian may request that the salary decision be reviewed by the provost. The decision of the provost is final.

### **IV. Grievance Policy**

Grievance policy and procedures for librarians follow the [Faculty Grievance Policy](#) as found in the latest edition of the *ODU Teaching and Research Faculty Handbook*.

## V. **Renewal and Non-Renewal of Appointments**

Two types of appointments are normally awarded to librarians: (1) annual appointment and (2) extended appointment.

A. **Annual Appointment:** The dean of University Libraries recommends to the president or his or her designee all librarian appointments, either initial appointment or renewal. For renewal, the dean of University Libraries writes each individual a letter in early spring indicating intent to recommend the same. Prior to the beginning date of employment or normally during the month of June for renewal appointment, each individual is sent a "Notice of Appointment."

B. **Extended Appointment:** The main purpose of the extended appointment is to provide and protect academic freedom and job security for librarians. The extended appointment is a pledge by the University of continuing employment to a librarian for a period of three years. The extended appointment is not a pledge of a specific administrative position or job assignment. Annual salary for each year of the extended appointment shall be in accordance with section III, Salary Increments. Changes in rank or position shall not affect the extended appointment.

The terms of the extended appointment are as follows:

1. Librarians at the librarian I rank are not eligible for extended appointment.
2. Librarians at the librarian II or III ranks are eligible for extended appointment after five full years of service in the University Libraries.
3. Librarians at the librarian IV rank are eligible for extended appointment after two full years of service in the University Libraries.

The Libraries Promotion Committee considers the applications for extended appointments using the same criteria as stated in section II, Evaluative Criteria for Promotion. The committee will recommend to the dean of University Libraries that the librarian be considered for an extended appointment or that the librarian remain on an annual appointment basis.

C. **Resignation and Release from Appointment:** The obligation to give due notice of termination of employment is reciprocal. A librarian, as part of his or her responsibility to the University and the profession, should make every effort to give the University Libraries administration adequate time to find a replacement if he or she desires to leave Old Dominion University. Release from a "Notice of Appointment" will be granted by the University only in exceptional cases, normally involving circumstances beyond the individual's control. In the case of a librarian who has signed a reappointment notice, release from appointment to take another position will be considered if (1) the offer of or the invitation to apply for another position did not come as a result of any solicitation or encouragement by the librarian, or (2) the position in question represents an opportunity for significant professional advancement.

When a librarian is unable to complete the term of service specified in the "Notice of Appointment," he or she must request release from the terms of that appointment. To request a release from appointment, the librarian should submit a letter to the dean of University Libraries for his or her review and approval. The letter should state the reason for the release,

the release date, and the last actual working day if the remaining annual leave must be utilized. A minimum of 30 days' notice, in addition to accrued leave, is expected.

Release from appointment is recommended by the dean of University Libraries and is subject to the approval of the provost or his or her designee.

A librarian may voluntarily resign from his or her appointment by June 30. A minimum of 30 days' notice, in addition to any accrued leave days, is expected. The letter of resignation, including the reason for and the effective date of resignation, should be sent to the dean of University Libraries.

- D. Non-Renewal of Appointment:** The dean of University Libraries may recommend the non-renewal of appointment for the librarian whose evaluated performance is below acceptable professional standards. Said recommendation is made by the dean of University Libraries to the provost or his or her designee in accordance with the following timetable as found in the policy on Administrative and Professional Faculty in the latest edition of the [ODU Administrative and Professional Faculty Guidebook](#):

1. At least 90 days for librarians in their first 24 months of service.
2. At least 180 days for librarians with more than 24 months of service.

As stated in section I, Appointment and Promotion in Rank, on the basis of all the evaluations and recommendations, the provost makes a decision concerning extended appointments for the coming year. If the provost decides against an extended appointment, the librarian may request a review by the president. The decision of the president is final.

- E. Termination with Cause:** The procedures for termination with cause for librarians follow the procedures for Notice of Termination of Administrative and Professional Faculty Members holding rank without departmental designation as found in the policy on Administrative and Professional Faculty in the latest edition of the *ODU Administrative and Professional Faculty Guidebook*.

- Approved by the Board of Visitors  
June 14, 1979; Revised June 20, 1991;  
Revised June 13, 2013 (eff. 7/1/13)
- Transitioned to University-Level Policy  
December 10, 2021
- Revised and Approved by the president  
May 16, 2022

# Annual Review of EVMS Faculty Performance

([Board of Visitors Policy](#))

**NUMBER:** 1708

**APPROVED:** June 16, 2023

**SCHEDULED REVIEW DATE:** June 2028

## I. POLICY

It is the policy of ODU that all EVMS Department Chairs of the School of Medicine ("SOM") or the Dean of the School of Health Professions ("SHP"), referred to as academic unit's administrative head, or their designees, annually evaluate all faculty members appointed within their departments or programs with the exception of those faculty members who are appointed with an "Adjunct" or "Visiting" title. Academic units shall make reasonable efforts to inform faculty of the promotion process, including tenure, and encourage participation in professional development activities aligned with their career goals. This Policy only applies to "EVMS Faculty" defined as Full-Time Faculty or Part-Time Faculty, (as defined in the Policies and Procedures Relating to Faculty Appointment, Promotion and Tenure of EVMS Faculty), who provide clinical, teaching, research, or administrative services in the SOM or SHP. All references to "faculty" herein mean EVMS Faculty as defined in this policy. Adjunct or Visiting Faculty shall be subject to ODU policies governing the review of ODU faculty.

## II. PURPOSE

The SOM and SHP value excellence in teaching, clinical care, research/discovery and administration/service. The institution believes that an ongoing performance management process supports these values by providing faculty with performance feedback in order to understand what is expected, how they are performing in each four domains as applicable to the faculty member, and what is required to achieve or sustain excellence for promotion or tenure. Specifically, annual reviews of faculty performance are intended to: 1) involved faculty members in the design and evaluation of objectives and goals of their academic programs and in the identification of the performance expectations central to their own personal and professional growth; 2) assess actual performance and accomplishments in the areas teaching, clinical care, research/discovery and administration/service; 3) promote the effectiveness of faculty members through an articulation of the types of contributions they might make to enhance the SOM and SHP; 4) provide a written record of faculty performance to support personnel decisions; 5) recognize the special talents, capabilities, and achievements of faculty members; 6) correct unsatisfactory ratings in one of more areas of responsibility through specific faculty improvement plans designed to correct the deficiencies in a timely manner; and 7) fulfill reappointment, promotion and post-tenure reviews (when appropriate) for faculty.

## III. PROCEDURE

### A. Review Process

1. **Notice.** Faculty Affairs and Professional Development (FAPD) will notify all faculty, chairs and administrators via email in the spring of each year that the annual performance review process has begun with directions and a link to the evaluation form and activity report.
2. **Faculty Submission.** Each faculty member shall submit an annual evaluation form and any other materials that may be deemed relevant to the academic unit's administrative head of their past year's performance and their goals and priorities for subsequent year in a timely manner for review. Information provided on the annual evaluation form shall be based on the appropriate criteria for subsequent annual review, reappointment, promotion, and (as applicable) tenure and post-tenure review. In the area of teaching, student evaluation of faculty performance and other expressions of teaching performance are required. Student evaluations of faculty should become available to the academic unit's administrative head from the Office of Medical Education, SOM and SHP.
3. **Review Meeting.** The academic unit's administrative head, or designee, shall meet with each faculty to discuss progress toward meeting last year's goals in all domains aligned with the institution's mission areas and determine goals and priorities for the upcoming year in accordance with the faculty's percentage of effort directed toward teaching, clinical care, research/discovery and administration/service. Reasonable efforts shall be made to inform faculty of the promotion process and promotion guidelines, including tenure, and encourage participation in professional development activities aligned with their career goals. If faculty members are making exceptional contributions, they should be encouraged to apply for promotion consistent with guidelines time frame. As soon as possible thereafter, the academic unit administrative head or their designee shall prepare a written report of the evaluation that is acknowledged by both parties verifying that the evaluation was completed, and the feedback was read and discussed.
4. **Alternate Reviewers and Multiple Appointments**
  - a. In the event that the academic unit's administrative head does not have routine contact or knowledge of the performance of a faculty member, they may select another individual within the academic unit as a designee (i.e., associate chair, division chief or program director) who is in a supervisory role and has knowledge of the individual faculty member's performance.
  - b. When the faculty member holds an appointment that involves an administrative assignment that involves more than 50% effort, the annual performance review shall be conducted by the supervising administrator with appropriate input from other units when appropriate. Decisions on academic advancement remains under the responsibility of the academic unit's administrative head.
  - c. When the faculty member holds multiple appointments involving administrative, professional, or other assignments, the annual performance

review is conducted by the academic unit's administrative head, or designee, and shall address contributions under each of these assignments.

5. **Failure or Denial to Submit.** If the faculty member does not timely submit or denies to submit annual performance review information to the academic unit administrative head, or designee, the faculty member shall receive an overall unsatisfactory performance rating, which will initiate the Faculty Improvement Plan described below, unless the administrative head determines the good cause exists for an exception.
6. **Review File.** A copy of all signed annual evaluations shall be maintained with FAPD as part of the faculty member's academic file.
7. **Use of Review.** The appropriate Dean of each school as well as the appropriate committees shall have access to the annual performance reports for subsequent annual review, reappointment, promotion, and, if applicable, tenure decisions. Annual performance reviews completed in the last three years, may be considered on the promotion and tenure process, but such evaluations are not determinative on promotion and tenure decisions. Satisfactory ratings in the annual performance reviews do not necessarily indicate successful progress toward promotion and tenure. Progress toward promotion and tenure requires scholarly accomplishment over a period of years in the broader range of faculty responsibilities, and includes evaluation by external referees, which is not part of the annual review process. Criteria and decisions regarding promotion and tenure are detailed in the applicable policies.

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

1. **Overall Unsatisfactory Rating.** In the event a faculty member receives an overall annual performance review rating as unsatisfactory, the faculty member's immediate supervisor shall work with the faculty member to develop an individualized Faculty Improvement Plan (FIP). The FIP should be created within 30 days after the completion of the annual performance review. It should take into consideration the reasons for under performance by the faculty member including professionalism issues that interfere with the faculty member's performance; lack of knowledge/skills to perform assigned tasks and willful or deliberate neglect of roles, responsibilities or tasks, and include specific benchmarks to enhance faculty's performance over the next academic year period, or may choose to initiate other actions in accordance with institutional policy.
2. **Faculty Improvement Plan.** The objective of the Faculty Improvement Plan (FIP) is to resume the faculty member's place as a fully contributing member of the faculty. The faculty member must take responsibility for meeting to develop the FIP and submitting any necessary materials in a timely manner, and for following the FIP once it is developed.
  - a. FIP aims to address a) two or more areas of performance rated as unsatisfactory; b) one area of performance rated as unsatisfactory, depending on the emphasis assigned to that area or the extent of the

deficiency; c) the faculty member's failure to provide annual performance review information on time to their academic unit's administrative head (or designee); d) the faculty's member denial to submit annual performance review information on time to their academic unit's administrative head (or designee); e) ratings of needs improvement in more than one area of performance before they become sufficiently serious to impair the faculty member's overall performance.

- b. FIP will generally:
    - i. Describe specific deficiencies;
    - ii. Provide of list of clear and reasonable outcomes needed to correct deficiencies;
    - iii. Describe the process to be followed to achieve outcomes;
    - iv. Provide the timeline for accomplishing the process, including frequent reviews and feedback;
    - v. Describe benchmarks and expectations.
    - vi. Describe the criteria to be used in evaluating progress in the FIP.
  - c. The academic unit's administrative head (or designee) develops the plan in collaboration with the faculty member and the appropriate department/unit committee, when available.
  - d. The plan has a maximum of one-year duration, has clear and attainable objectives for the faculty member and includes appropriate interim monitoring and feedback. When appropriate, the plan includes a commitment of departmental or institutional resources (i.e., mentoring, faculty development).
  - e. The plan may also include a reallocation of the faculty member's workload distribution in accord with the department workload standards and is signed by the faculty member, the academic unit's administrative head (or designee) and the Dean of the appropriate School.
3. **Expected Outcomes of the Faculty Improvement Plan.** Faculty members are expected to demonstrate improvement in the deficient area to a level that meets expectations within one year. If the faculty member fails to demonstrate reasonable progress relative to the benchmarks and performance goals, dismissal for cause or non-renewal of contract may be initiated, and if initiated will proceed in accordance with the applicable policies.
4. **Refusal to Participate.** If the faculty member refuses to participate in the development of the Faculty Improvement Plan, an unsatisfactory rating will be assigned to the faculty, which will initiate other actions in accordance with institutional policy.

### C. Appeals of Annual Performance Review Ratings

Faculty members have the right to appeal their overall annual performance review when: 1) there are errors of fact that may impact the rating; or 2) the facts may be correct, but there



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

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

## **Declaration of a State of Bona Fide Financial Exigency or Severe Financial Difficulty**

**(Board of Visitors Policy, #1461)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/bov/board-of-visitors-policy-1461>

## **Dismissal of Faculty from Employment Due to Financial Exigency or Discontinuance of a Program of Study or a Department of Instruction**

**(Board of Visitors Policy, #1463)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/bov/board-of-visitors-policy-1463>

## **Fitness for Duty**

**(University Policy, #6028)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6028>

## Grounds for Dismissal of EVMS Faculty

([Board of Visitors Policy](#))

<b>NUMBER:</b>	1706
<b>APPROVED:</b>	June 16, 2023
<b>SCHEDULED REVIEW DATE:</b>	June 2028

The appointment of tenured and non-tenured EVMS Faculty may be revoked and terminated and the faculty member dismissed from the faculty during the term of their appointment for any one of the following reasons or grounds. This Policy only applies to "EVMS Faculty" defined as Full-Time Faculty or Part-Time Faculty, or Community Faculty (as defined in the Policies and Procedures Relating to Faculty Appointment, Promotion and Tenure of EVMS Faculty), who provide clinical, teaching, research, or administrative services, whether paid or unpaid, in the EVMS School of Medicine ("SOM") and/or EVMS School of Health Professions ("SHP"). All references to "faculty" herein mean EVMS Faculty as defined in this policy.

### Dismissal for "Just Cause"

Adequate cause for a dismissal will be related, directly and substantially, to the fitness of the EVMS Faculty member in their 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.

EVMS 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 SOM or Dean of the SHP with a right of appeal through the EVMS Faculty grievance process. "Just Cause" is defined as any act or patterns of behavior considered to be seriously detrimental to the interests of ODU, the SOM or the SHP, 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 the EVMS Faculty member's employment agreement.
4. Conviction of a crime deemed to render the faculty member unfit to carry out their professional activities.
5. Professional incompetence.
6. Refusal to perform legitimate work assigned by the faculty member's supervisor, Department Chair of the SOM or Dean of the SHP.

# EVMS Faculty Grievance Policy

([Board of Visitors Policy](#))

**NUMBER:** 1707

**APPROVED:** June 16, 2023

**SCHEDULED REVIEW DATE:** June 2028

## I. Introduction and Policy

It is the policy of ODU that all EVMS 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, EVMS 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. All references to "faculty" herein means EVMS Faculty as defined in this policy.

## II. Definitions

For purposes of this policy, the following definitions apply:

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

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

*Committee* – the Grievance Committee

*EVMS Faculty* - Full-Time Faculty, Part-Time Faculty, or Community Faculty (as defined in the Policies and Procedures Relating to Faculty Appointment, Promotion and Tenure of EVMS Faculty), who provide clinical, research, or administrative services, whether paid or unpaid, in the EVMS School Of Medicine ("SOM") and/or EVMS School of Health Professions ("SHP").

*FAPD* – The Faculty Affairs and Professional Development office.

*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 ODU to take a formal course of action.

*Grievant* – the EVMS 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 an EVMS Faculty member has been directly and adversely professionally affected by an Action that deviated materially from the existing policies and procedures related to appointment, promotion, tenure and dismissal of EVMS Faculty, or those of ODU, the SOM or SHP, or was arbitrary, capricious, unreasonable, or contrary to the facts.
- B. Exclusions. Certain matters that are not EVMS Faculty or academic matters and/or where ODU 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 ODU Institutional Review Board and the Institutional Animal Care and Use Committee;
  6. An act by ODU, pursuant to federal or state law, directive of the Board of Visitors, Board of Directors, or any governing body that regulates ODU, the SOM, or the SHP.
- 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 EVMS Faculty appointment, matters involving a decision by an ODU 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. FAPD 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 their 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 or can demonstrate that the Grievant was unable to meet the Grievance deadline due to mitigating circumstances, the Chair may extend the Grievance filing period in their sole discretion.

## **VI. Grievance Committee**

- A. The President of the EVMS Faculty Assembly shall select four members from the Faculty Assembly to serve on the Grievance Committee in addition to the Chair. The President of the EVMS Faculty Assembly 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 University Counsel's office 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 ODU's power to grant, is reasonable and appropriate, and would not disregard any ODU, SOM or SHP policy or procedure if implemented in accordance with Section X;
3. The Grievance has been timely filed in accordance with Section V(C);
4. Required preliminary steps in accordance with Section IV have occurred; and
5. The requirements for the Statement of Grievance, as outlined in Section V(A) have been met.

B. Deficient Grievances.

1. If the Committee determines that the Grievance is deficient because it does not meet a requirement set forth in Section VII (A) 1-4, the Grievance shall be rejected and the Chair shall provide such written notice.
2. If the Committee determines that the Grievance is deficient because it does not meet the requirements for the Statement of Grievance, as outlined in Section V(A), the Chair shall notify the Grievant of the deficiencies and provide the Grievant with 30 days to correct all deficiencies and return to the Chair. The Committee shall have 60 days to review a revised

Grievance. If the Grievance remains deficient, the Committee may reject the Grievance. At any time, the Chair may meet with the Grievant in order to provide or obtain clarification from the Grievant.

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

### **VIII. Mediation**

Upon receipt of the response from Respondent, the Committee shall consider whether the matter may be suited to an informal mediation, which, if determined, shall be arranged and guided by the Chair with support and involvement by the Committee, and may include but is not limited to, informal fact gathering and individual or collective discussions with the Grievant and Respondent. The Chair may request assistance from the Office of Faculty Affairs and Professional Development. 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 the Chair's 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 EVMS Faculty Assembly 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 EVMS 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 their 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 they have been directly and adversely professionally affected by the Action of the Respondent which deviated materially from the existing policies and procedures related to appointment, promotion, tenure or dismissal of EVMS Faculty, or policies and procedures of ODU, the SOM or SHP, 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 other areas with relevant information. The Committee may request assistance from the Office of Faculty Affairs and Professional Development.
- G. Post-Hearing Report. Within 30 days of the hearing, the Grievance Committee will prepare a written report to the Executive Vice President (the “EVP”) 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 ODU or the SOM or SHP has the authority to provide, that is appropriate to the Grievance, and does not disregard existing policies and procedures related to appointment, promotion, tenure or dismissal of EVMS Faculty, or policies and procedures of ODU, the SOM or SHP. A remedy may include a proper reconsideration of the matter through the applicable procedures related to appointment, promotion, tenure or dismissal of EVMS Faculty, or procedures of ODU, the SOM or SHP. The Committee may decline to review a Grievance that requests a remedy that is not within ODU’s authority to provide, is clearly unreasonable or inappropriate, including enlisting resources outside of ODU, or that would disregard any ODU, SOM or SHP policy or procedure.

## **XI. Decision by the EVP**

Upon receipt of the Committee's report and recommendations, the EVP, in their 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 EVP. The EVP shall issue a written decision to the Grievant, with a copy to the Respondent, the Chair, and FAPD, 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 EVP shall be final. The EVP shall cause the implementation of any remedy provided in their 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 FAPD 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 FAPD 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.

## Separation Process for Faculty and Staff

([University Policy, #6060](#))

**Responsible Oversight Executive:** Vice President for Human Resources, Diversity, Equity, and Inclusion

**Date of Current Revision or Creation:** January 10, 2024

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### A. PURPOSE

The purpose of this policy is to ensure the timely notification and processing of faculty and staff separations from employment.

### B. AUTHORITY

[Code of Virginia Section 23.1-1301, as amended](#), grants authority to the [Board of Visitors](#) to make rules and policies concerning the institution. Section 7.01(a)(6) of the [Board of Visitors Bylaws](#) grants authority to the President to implement the policies and procedures of the Board relating to University operations.

[Virginia Department of Human Resource Management Policy 1.70 - Termination/Separation from State Service](#)

[Department of Accounts' Commonwealth Accounts Policies and Procedures Manual #50320 Terminations](#)

### C. DEFINITIONS

Banner Administrative Information System - The term used to reference the information technology system, Banner® Digital Campus. Banner is the administrative software system used to manage student information, financial aid, finance, and human resources at Old Dominion University.

Classified Employee - A salaried employee whose terms and conditions of employment are subject to the [Virginia Personnel Act, Code of Virginia Section 2.2-2900 et seq., as amended](#), and who is employed in a classified position.

Department Records Coordinators - Individuals who serve as a liaison between the University Records Manager and their respective department.

Hiring Supervisor - The management level with the authority to hire, assign work, manage work schedules, approve leave, evaluate employees, and discipline employees.

Separation - Cessation of employment with Old Dominion University. Types of separation include, but are not limited to, voluntary resignation, retirement, discharge, involuntary termination, layoff, transfer to another State agency, or death while in service.

University Property – Land, facilities, equipment purchased with University or Foundation funds, and other materials that are owned by Old Dominion University or controlled by Old Dominion University via leases or other formal contractual arrangement.

Web Time Entry (WTE) – A web-based system designed to enable employees to submit hours worked and leave information electronically, eliminating the paper submission of time slips, time and attendance forms, leave activity forms, and leave reports.

#### **D. SCOPE**

This policy applies to the following types of employees of the University and their supervisors: administrative and professional faculty, teaching and research faculty, and classified or wage staff. This policy does not apply to adjunct faculty, non-instructional part-time faculty, or student employees.

#### **E. POLICY STATEMENT**

This policy provides specific procedures to be followed to ensure the timely processing of separations as follows:

- ensure accurate computation of compensation and disbursement;
- facilitate final pay actions;
- protect and account for University property; and
- provide faculty and staff with an opportunity to exercise appropriate benefit options.

#### **F. PROCEDURES**

University hiring supervisors are responsible for immediately notifying the Department of Human Resources concerning the separation of faculty and staff. Notification to the Department of Human Resources must occur no later than one workday upon the hiring supervisor's receipt of this information.

An employee is responsible for providing advance notice and written notification of his/her intent to resign to his/her hiring supervisor as soon as the decision has been made to separate from University employment. The written notification should provide an explanation for the separation and must state the effective date of separation, which is the last day the employee will work.

Reasonable advance notice of separation for classified employees is at least two weeks or longer for professional level positions. As contractual employees, faculty members should make every effort to give the administration adequate time to find a replacement when they desire to leave Old Dominion University.

Upon being notified of an employee's intention to separate, the hiring supervisor shall request the written separation letter. On the bottom of the document, the hiring supervisor should note the date the separation letter was received, sign his/her name acknowledging receipt, and submit the document to the Department of Human Resources immediately. If an employee wishes to rescind the retirement notice, the employee shall send a written request to withdraw the retirement notification to the hiring supervisor and the Department of Human Resources. The hiring supervisor shall forward the request to withdraw to the hiring supervisor's vice president. The vice president shall decide whether to approve the request to withdraw the notice of retirement. The vice president shall notify the employee, hiring supervisor, and the Department of Human Resources if the withdrawal request is approved or denied.

The Department of Human Resources will provide the hiring supervisor with an e-mail message confirming receipt of the separation notice within five (5) business days. The Department of Human Resources will enter the termination of the job record in Banner on or before the separation date or immediately upon receipt if the separation date is on or prior to receipt of notification of employee's separation by the supervisor. This will set off the Employee Separation Workflow which terminates system access within twenty-four hours of the separation date.

The hiring supervisor will receive a checklist to ensure that the hiring supervisor's responsibilities for the separation process are communicated and completed in Banner Workflow on or before the separation date and no later than two business days after the separation date.

Hiring supervisors are responsible for the following checklist actions:

- certifying that all leave activity has been submitted via WTE to the Payroll Office;
- collecting University property;
- directing the return of keys to the Department of Facilities Management;
- referring departing faculty and staff to the Department of Human Resources for benefits information;
- if applicable, ensuring that contractual obligations are fulfilled by the separating faculty member or reassigned as appropriate;
- maintaining all departmental personnel and timekeeping records\* in a safe and confidential manner;
- if the separating employee is a faculty member working on projects funded through ODURF, he/she must contact the grant manager before his/her last day of work;
- if the employee is transferring to another Virginia state agency and DID NOT state this in his/her resignation letter, please contact the Department of Human Resources right away.

\*Department Records Coordinators are responsible for securing such physical records as are uniquely created, received and maintained for the position concerned, contacting the Office of Information Technology Services regarding the secure storage of such electronic records, including email, as are associated with the position concerned, and advising the University Records Manager about the separation so that inquiries can be made to ascertain if any litigation, investigations, or Freedom of Information Act requests are in effect that would suspend the routine destruction of records associated with the position concerned.

Also, the separating employee will receive an e-mail message to inform the employee about his/her responsibilities in completing the separation process. The Department of Human Resources is responsible for inactivating the employee's pay status in the Banner Administrative Information System upon notification of an employee's separation. The Department of Human Resources is also responsible for providing timely notification to the Payroll Office of separating employees.

The Payroll Office is responsible for processing final salary payments, processing final leave payouts, terminating direct deposits, and terminating employee records in the Banner Administrative Information System.



### Records Retention

Applicable records must be retained and then destroyed in accordance with the [Commonwealth's Records Retention Schedules](#).

#### **G. RESPONSIBLE OFFICER**

Recruitment and Employment Manager, Department of Human Resources

#### **H. RELATED INFORMATION**

[University Policy 3400 - Fixed Asset Control](#)

[University Policy 3700 – Records Management Policy](#)

## EVMS Sabbatical Leave

([Board of Visitors Policy](#))

<b>NUMBER:</b>	1710
<b>APPROVED:</b>	June 16, 2023
<b>SCHEDULED REVIEW DATE:</b>	June 2028

This Policy only applies to "EVMS Faculty" (as defined in the Policies and Procedures Relating to Faculty Appointment, Promotion and Tenure of EVMS Faculty), who provide clinical, teaching, research, or administrative services in the School of Medicine ("SOM") and/or the School of Health Professions ("SHP"). All references to "faculty" herein mean EVMS Faculty as defined in this policy.

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 SOM or SHP. 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 funds. All institutional benefits will remain in force during a sabbatical leave. The faculty member will be responsible for paying their 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 their functions at the SOM or SHP. 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 they propose 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 Dean of the SHP who recommends the request, giving assurance that the faculty member's activities will be adequately covered without additional cost to the department's budget and

justifying the faculty member's need for such a leave, to the Dean of the SOM, if applicable, and to the Executive Vice President for final review and approval.

*Upon Conclusion of the Sabbatical Leave*

Recipients of sabbatical leave are required to return to full-time service of ODU for at least one academic year. Failure to return to ODU service for one academic year shall create an obligation for the faculty member to pay ODU an amount equal to the compensation the faculty member received from ODU on a month for month basis. For example, if a faculty member was granted a sabbatical leave of one year, but only returned to ODU for six months, the faculty member would incur an obligation to pay ODU 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 Dean of SHP, and to the Dean of the SOM, if applicable, and to the EVP upon completion of the sabbatical leave.

## Academic Freedom

The University subscribes to the following 1940 statement on academic freedom of the [American Association of University Professors](#), which has been endorsed by all important national organizations of higher education.

- a. Teachers are entitled to full freedom in research and in the publication of the results, subject to the adequate performance of their other academic duties; but research for pecuniary return should be based upon an understanding with the authorities of the institution.
- b. Teachers are entitled to freedom in the classroom in discussing their subject, but they should be careful not to introduce into their teaching controversial matters which have no relation to their subject. Limitations of academic freedom because of religious or other aims of the institution should be clearly stated in writing at the time of the appointment.
- c. College and University teachers are citizens, members of a learned profession, and officers of an educational institution. When they speak or write as citizens, they should be free from institutional censorship or discipline, but their special position in the community imposes special obligations. As scholars and educational officers, they should remember that the public may judge their profession and their institution by their utterances. Hence they 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 for the institution.

- Approved by the Board of Visitors  
September 22, 1994  
- Transitioned to University-Level Policy  
December 10, 2021  
Revised July 15, 2022

## Faculty Code of Conduct

([Board of Visitors Policy](#))

**NUMBER:** 1451

**APPROVED:** April 22, 2021

**SCHEDULED REVIEW DATE:** April 2026

### Preamble

Ethical principles refer to general judgments that function as a basic justification for ethical prescriptions and evaluations of human actions. Old Dominion University employs the widely accepted Belmont Report (Belmont, 1979) as its Code to guide researchers in the protection of individuals who participate in research as human subjects. We extend Belmont's three principles protecting human research subjects to frame the Old Dominion University Faculty Code of Conduct intended to guide faculty and administrators in their mutual protection and in their duty to the community in the course of their activities at Old Dominion University: (1) Respect for persons, (2) Beneficence, and (3) Justice.

Part I of this Code sets forth the responsibility of the University to maintain conditions and rights supportive of the faculty's pursuit of the University's central functions.

Part II of this Code elaborates standards of professional conduct, derived from general professional consensus about the existence of certain precepts as basic to acceptable faculty behavior. Conduct which departs from these precepts is viewed by faculty as unacceptable because it is inconsistent with the mission of the University. The articulation of types of unacceptable faculty conduct is appropriate both to verify that a consensus about minimally acceptable standards in fact does exist and to give fair notice to all that departures from these minimal standards may give rise to disciplinary proceedings. This Code outlines principles that require interpretation by faculty members who have relevant experience and expertise in areas close to the behavior in question. As such, it lays out principles that require interpretation and application by a faculty member's peers. This Code, and any process for its enforcement, emphasizes faculty members' judgment as preferable to specific rules that are applied more mechanically.

In Part II a clear distinction is made between statements of (1) ethical principles, (2) expected behaviors and (3) types of unacceptable behavior.

The scope of this Code is inclusive of all faculty: full-time, adjunct, administrators with faculty appointments, faculty librarians, and research faculty. Usage of the term "faculty" hereafter uses this inclusive definition.

### Ethical Principles

#### A. Respect for Persons

1. Individuals should be treated as autonomous agents holding unique opinions and choices (self-determination). Faculty should refrain from obstructing free speech and other legally

protected rights and refrain from obstructing each other's actions that are not harmful to others.

2. Due to their position, status, or circumstance some faculty may have diminished autonomy and require additional protections in order to uphold the principle of respect.

#### B. Beneficence

1. Do no harm is a fundamental ethical principle guiding researchers, physicians, and the like. Faculty should refrain from actions that injure, damage, or otherwise expose each other to harm.
2. A corollary principle is ethical faculty should conduct themselves in ways that seek to maximize personal benefits for each other, that is, to act in the best interests of each other.

#### C. Justice

According to Belmont, an injustice occurs "when some benefit to which a person is entitled is denied without good reason or when some burden is imposed unduly" (p. 5). Benefits and burdens should be distributed fairly among faculty, and the criteria determining assignment of benefits and burdens should be transparent, with redress processes clear and respected. Differential treatment should be justified. Ethical faculty and administrators should conduct themselves in ways that maximize fairness and justice for each other.

In summary, faculty members are expected to conduct themselves in a manner, both on campus and in the community, that is in consonance with the University's reputation as an institution of high ethical values. At the same time, the University affirms and protects faculty members' rights to academic freedom, freedom of expression, and due process.

### I. Responsibilities of the University

#### Responsibilities of the University - Rights of Faculty

As an institution of higher learning, a major responsibility of the University and its academic community is to support faculty members in their teaching, learning, research, and professional service activities and to protect them in these functions. The authority to discipline faculty members derives from the shared recognition by the faculty and the University that discipline may sometimes be necessary to preserve conditions hospitable to these pursuits. In outlining expected behavior of its faculty, the University acknowledges that all expectations and discipline of departures from these expectations must be done respecting each faculty member's fundamental rights to Academic Freedom<sup>1</sup>, Freedom of Expression<sup>2</sup>, Due Process, and other legal requirements.

Examples of how faculty members enact these rights include, but are not limited to:

- A. Free inquiry and exchange of ideas;

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<sup>1</sup> University Policy 1403: Academic Freedom

<sup>2</sup> University Policy 1011: Statement on Freedom of Expression

- B. Presenting controversial material relevant to a course of instruction and the faculty member's expertise;
- C. Addressing any matter of institutional policy or action when acting as a member of the faculty;
- D. Participation in the governance of the University, as provided in the Bylaws and Policies and Procedures of the Board of Visitors and the regulations of the University, including:
  - 1. approval of course content and manner of instruction;
  - 2. establishment of requirements for matriculation and for degrees;
  - 3. appointment, reappointment, tenure and promotion of faculty;
  - 4. selection of chairs of departments and certain academic administrators;
  - 5. discipline of members of the faculty, and the formulation of rules and procedures for discipline of students;
  - 6. establishment of norms for teaching responsibilities and for evaluation of both faculty and student achievement; and
  - 7. determination of the forms of departmental governance.
- E. When appropriate, being evaluated or judged by one's colleagues, in accordance with fair procedures and due process, in matters of promotion, reappointment, tenure, and discipline, solely on the basis of the faculty members' professional qualifications and professional conduct.

## II. Responsibilities of the Faculty

This listing of faculty responsibilities, ethical principles, and types of expected and unacceptable behavior is organized around the individual faculty member's relation to teaching and students, to scholarship, to the University, to colleagues, and to the community. Since University discipline, as distinguished from other forms of administrative actions, should be reserved for faculty misconduct that is either serious in itself or is made serious through its repetition, or its consequences, the following general principle is intended to govern all instances of its application.

University discipline under this Code may be imposed on a faculty member only for conduct which is not justified by the ethical principles and which impairs the University's central functions as set forth in the Preamble. To the extent that violations of University policies mentioned in the examples below are not also inconsistent with the ethical principles, these policy violations may not be independent grounds for imposing discipline as defined herein. The guiding ethical principle for each section and examples of expected and unacceptable conduct are listed below. Examples of expected conduct listed below illustrate the standards of behavior, whereas examples of unacceptable conduct illustrate conduct that may be presumptively subject to University discipline. Other types of serious misconduct, not specifically enumerated herein, may nonetheless be the basis for disciplinary action if they also violate ethical standards of conduct<sup>3</sup> or professional ethics<sup>4</sup>.

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<sup>3</sup> University Policy 1002: Code of Ethics

<sup>4</sup> University Policy 1404: Professional Ethics

### Faculty's Responsibilities for Teaching and Students

Ethical Principles. "As teachers, professors encourage the free pursuit of learning in their students. They hold before them the best scholarly and ethical standards of their discipline. Professors demonstrate respect for students as individuals and adhere to their proper roles as intellectual guides and counselors. Professors make every reasonable effort to foster honest academic conduct and to ensure that their evaluations of students reflect each student's true merit. They respect the confidential nature of the relationship between professor and student. They avoid any exploitation, harassment, or discriminatory treatment of students. They acknowledge significant academic or scholarly assistance from them. They protect their academic freedom." (AAUP Statement, 1966; Revised, 2009)

The integrity of the relationship between faculty and students is the foundation of the University's educational mission. This relationship vests considerable trust in the faculty member, who, in turn, bears authority and accountability as mentor, educator, and evaluator. The unequal institutional power inherent in this relationship heightens the vulnerability of the student and the potential for coercion. The pedagogical relationship between faculty member and student must be protected from influences or activities that can interfere with learning consistent with the goals and ideals of the University. Whenever a faculty member is or will be responsible for academic supervision of a student, a personal relationship between them of a romantic or sexual nature, even if consensual, is inappropriate. Any such relationship jeopardizes the integrity of the educational process. Faculty members are expected to treat students with respect, providing guidance and mentoring in a manner that avoids verbally abusive interactions. **In this section, the term student refers to all individuals, whether undergraduates, graduate students, postdoctoral fellows, or other trainees, under the academic supervision of faculty.**

Faculty are expected to:

- A. Encourage student learning both in and out of the classroom;
- B. Demonstrate respect for students as individuals;
- C. Adhere to their roles as intellectual guides and counselors;
- D. Foster honest academic conduct;
- E. Ensure that faculty evaluations of students reflect the students' true merit;
- F. Acknowledge students' significant academic or scholarly contributions in publications, presentations, and other scholarly endeavors;
- G. Protect students' academic freedom;
- H. Avoid or appropriately manage dual relationships with students in a manner that respects their autonomy and the rights of other students;
- I. Where relevant, disclose conflicts of interest;



- J. Meet the responsibilities of instruction and refrain from:
  - 1. arbitrary denial of access to instruction;
  - 2. significant intrusion of material unrelated to the course;
  - 3. evaluation of student work by criteria not directly reflective of course performance;
  - 4. delay in evaluating student work that is excessive and beyond course and department standards.
  
- K. Abide by University policies governing discrimination<sup>5</sup>;
  - 1. sexual violence and sexual harassment;
  - 2. nondiscrimination against students on the basis of disability;
  - 3. participating in, tolerating, or abetting disruption, interference, or intimidation in the classroom;
  - 4. verbal abuse or harassment of a student.
  
- L. Refrain from entering into a romantic or sexual relationship with any student for whom a faculty member has, or should reasonably expect to have in the future, academic responsibility (instructional, evaluative, or supervisory);
  
- M. Refrain from exercising academic responsibility (instructional, evaluative, or supervisory) for any student with whom a faculty member currently has or has previously had a romantic or sexual relationship. Note: A faculty member should reasonably anticipate future academic responsibility of this nature (instructional, evaluative, or supervisory) for (1) students whose academic program will require them to enroll in a course taught by the faculty member, (2) students known to the faculty member to have an interest in an academic area within the faculty member's academic expertise, or (3) any student for whom a faculty member must have academic responsibility (instructional, evaluative, or supervisory) in the pursuit of a degree.

#### Faculty's Responsibilities for Scholarship

Ethical Principles. "Professors, guided by a deep conviction of the worth and dignity of the advancement of knowledge, recognize the special responsibilities placed upon them. Their primary responsibility to their subject is to seek and to state the truth as they see it. To this end professors devote their energies to developing and improving their scholarly competence. They accept the obligation to exercise critical self-discipline and judgment in using, extending, and transmitting knowledge. They practice intellectual honesty. Although professors may follow subsidiary interests, these interests must never seriously hamper or compromise their freedom of inquiry." (AAUP Statement, 1966; Revised, 2009)

Faculty are expected to:

- A. Practice intellectual and academic honesty in all interactions with students, colleagues, and academic communities, observe the canons of intellectual honesty and avoid research

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<sup>5</sup> University Policy 1005: Discrimination

- misconduct and/or intentional misappropriation of the writings, research, and findings of others;
- B. Accurately acknowledge the scholarly contributions of colleagues, students, other trainees, and relevant institutions and affiliations in work that is shared with the larger community;
- C. Practice scholarly activities within their bounds of expertise, making the distinction between public statements of expertise and non-expert personal opinion;
- D. Where relevant, disclose conflicts of interest;
- E. For full-time faculty members or part-time faculty members whose primary scholarly work was done at Old Dominion University, to acknowledge Old Dominion University as their primary institutional affiliation.

#### Faculty's Responsibility to the University

Ethical Principles. "As members of an academic institution, professors seek above all to be effective teachers and scholars. Although professors observe the stated regulations of the institution, provided the regulations do not contravene academic freedom, they maintain their right to criticize and seek revision. Professors give due regard to their paramount responsibilities within their institution in determining the amount and character of work done outside it. When considering the interruption or termination of their service, professors recognize the effect of their decision upon the program of the institution and give due notice of their intentions." (AAUP Statement, 1966; Revised, 2009)

Faculty are expected to:

- A. Seek above all to be effective teachers and scholars;
- B. Observe the stated regulations of the institution, provided the regulations do not contravene academic freedom;
- C. Maintain their right to criticize and seek revision of the institution's regulations;
- D. Give due regard to their paramount responsibilities within their institution in determining the amount and character of the work done outside it;
- E. When considering the interruption or termination of their service, professors recognize the effect of their decision upon the program of the institution and give due notice of their intentions. They do not engage in activities that may disrupt future research or instruction, such as deleting online course content from University-managed servers.
- F. Observe or abide by University policies and rules governing:
  - 1. intentional disruption of functions or activities sponsored or authorized by the University;
  - 2. incitement of others to disobey or disrupt functions or activities sponsored or authorized by the University;

3. unauthorized use of University resources or facilities for personal, commercial, political, or religious purposes;
4. forcible detention, threats of physical harm to, or harassment of another member of the University community, that interferes with that person's performance of University activities;
5. the professional conduct of faculty, including but not limited to policies applying to research, outside professional activities, conflicts of commitment, clinical practices, violence in the workplace, and whistleblower protections.

#### Faculty's Responsibility to Colleagues

Ethical Principles. "As colleagues, professors have obligations that derive from common membership in the community of scholars. Professors do not discriminate against or harass colleagues. They respect and defend the free inquiry of associates, even when it leads to findings and conclusions that differ from their own. Professors acknowledge academic debt and strive to be objective in their professional judgment of colleagues. Professors accept their share of faculty responsibilities for the governance of their institution." (AAUP Statement, 1966; Revised, 2009)

Faculty are expected to:

- A. Respect and defend the free inquiry of associates, in a manner that respects the Commonwealth of Virginia's workplace policies;
- B. Show due respect for the opinions of others;
- C. Acknowledge academic obligations;
- D. Strive to be objective in their professional judgment of colleagues;
- E. Accept their share of faculty responsibilities for the governance of their institution;
- F. Where relevant, disclose conflicts of interest;
- G. Make evaluations of the professional competence of faculty members using criteria directly reflective of professional performance;
- H. Act without discrimination or harassment, in violation of University policy and ethical standards;
- I. Act without violation of the University policy, including the pertinent guidelines, applying to non-discrimination against faculty on the basis of disability;
- J. Abide by established rules governing confidentiality in personnel procedures;
- K. Act without misrepresentation of faculty affiliations;

- L. Refrain from behavior that is disruptive to another faculty member's exercise of their academic freedom, freedom of expression, teaching, scholarship, professional service, or other pertinent academic duties.

#### Faculty's Responsibilities in the Community

Ethical Principles: "As members of their community, professors have the rights and obligations of other citizens. Professors measure the urgency of these obligations in the light of their responsibilities to their subject, to their students, to their profession, and to their institution. When they speak or act as private persons, they avoid creating the impression of speaking or acting for their college or University. As citizens engaged in a profession that depends upon freedom for its health and integrity, professors have a particular obligation to promote conditions of free inquiry and to further public understanding of academic freedom."

Faculty are expected to:

- A. In their professional roles, participate in their communities in a manner that represents their discipline and which upholds their responsibilities to their students, colleagues, and the institution;
- B. Communicate their credentials accurately;
- C. In public actions, fulfill the obligation to promote free inquiry and the public's understanding of their subject and the practice of scholarship in their discipline;
- D. Clarify in any communication or correspondence when they are speaking or acting as private persons to avoid the impression that they are speaking for the University or in a capacity of expertise represented in their role as professor;
- E. Observe the University's Code of Ethics and Values across platforms and venues in which communication takes place, including social media and other electronic media<sup>6</sup>;
- F. Where relevant, disclose conflicts of interest;
- G. Comply with criminal laws.

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<sup>6</sup> Virginia State Policy 1.75: Use of Electronic Communications and Social Media

## Professional Ethics

The University subscribes to the following [2009 statement on professional ethics](#) of the [American Association of University Professors \(AAUP\)](#).

1. Professors, guided by a deep conviction of the worth and dignity of the advancement of knowledge, recognize the special responsibilities placed upon them. Their primary responsibility to their subject is to seek and to state the truth as they see it. To this end, professors devote their energies to developing and improving their scholarly competence. They accept the obligation to exercise critical self-discipline and judgment in using, extending, and transmitting knowledge. They practice intellectual honesty. Although professors may follow subsidiary interests, these interests must never seriously hamper or compromise their freedom of inquiry.
2. As teachers, professors encourage the free pursuit of learning in their students. They hold before them the best scholarly and ethical standards of their discipline. Professors demonstrate respect for students as individuals and adhere to their proper roles as intellectual guides and counselors. Professors make every reasonable effort to foster honest academic conduct and to ensure that their evaluations of students reflect each student's true merit. They respect the confidential nature of the relationship between professor and student. They avoid any exploitation, harassment, or discriminatory treatment of students. They acknowledge significant academic or scholarly assistance from them. They protect their academic freedom.
3. As colleagues, professors have obligations that derive from common membership in the community of scholars. Professors do not discriminate against or harass colleagues. They respect and defend the free inquiry of associates, even when it leads to findings and conclusions that differ from their own. Professors acknowledge academic debt and strive to be objective in their professional judgment of colleagues. Professors accept their share of faculty responsibilities for the governance of their institution.
4. As members of an academic institution, professors seek, above all, to be effective teachers and scholars. Although professors observe the stated regulations of the institution, provided the regulations do not contravene academic freedom, they maintain their right to criticize and seek revision. Professors give due regard to their paramount responsibilities within their institution in determining the amount and character of work done outside it. When considering the interruption or termination of their service, professors recognize the effect of their decision on the program of the institution and give due notice of their intentions.
5. As members of their community, professors have the rights and obligations of other citizens. Professors measure the urgency of these obligations in the light of their responsibilities to their subject, to their students, to their profession, and to their institution. When they speak or act as private persons, they avoid creating the impression of speaking or acting for their college or University. As citizens engaged in a profession that depends upon freedom for its health and integrity, professors have a particular obligation to promote conditions of free inquiry and to further public understanding of academic freedom.

- Approved by the Board of Visitors  
September 22, 1994  
- Transitioned to University-Level Policy  
December 10, 2021, and updated

## Freedom of Expression

([Board of Visitors Policy](#))

<b>NUMBER:</b>	1011
<b>APPROVED:</b>	August 27, 1970; Revised April 22, 2022
<b>SCHEDULED REVIEW DATE:</b>	April 2027

Old Dominion University will at all times defend the right of free expression, including the right of free assembly.

This right will be protected on behalf of all persons associated with the academic community - students, faculty, administration, and official guests. No action by an individual or a group which seeks to restrict the exercise of these rights by any other individual or group on this campus will be tolerated.

Old Dominion University will not condone or allow any unauthorized occupation of University facilities, nor will it permit any interference with its normal and regular activities.

No discussion of any issue will be carried on or be conducted under any form of duress, nor will attempts to intimidate, frighten, or otherwise promote by force be tolerated.

The [University's Demonstrations Policy](#) articulates the University's commitment to the free and open exchange of ideas by members of the University community and establishes general provisions for orderly freedom of expression in compliance with Federal and State laws and Board of Visitors Policy.

## Resolution Supporting Intellectual Diversity

Whereas higher education should challenge students to think critically, debate, and explore ideas they are not familiar with;

Whereas a free exchange of ideas between students and faculty is the key to learning on a college campus;

Whereas freedom and open debate are the core of what makes learning at a college campus possible, and whereas it is this freedom that sponsors new ideas, fosters debate, exposes students to frames and theories they have never encountered, and challenges core beliefs;

Whereas restrictions on what content is taught in the classroom, what subjects are open to debate, and what ideas students can be exposed to would hamper education at Old Dominion University;

Whereas college and University teachers are citizens, members of a learned profession, and officers of an educational institution and should be free from institutional censorship or discipline;

Be it resolved that the [Faculty Senate of Old Dominion University](#) opposes any administrative or legislative attempts to place restrictions on what ideas and theories can be taught in our classrooms or to restrict open debate and discussion on campus;

Be it further resolved that the Faculty Senate of Old Dominion University believes that Old Dominion University should remain an open marketplace of ideas where free expression is exercised and where diverse views are expressed and debate of those ideas is encouraged.

- Approved by the president  
May 2008

## Faculty Teaching Load

1. The standard teaching load at Old Dominion University is 24 load hours for the academic year. Each chair will, in consultation with the faculty member, determine how the equivalent of that load is comprised for that faculty member in the department/school, after considering the goals and objectives developed by the faculty member and agreed to by the chair as a part of the annual evaluation process. Such load should be apportioned among teaching, research, administration, and other significant responsibilities approved by the chair. Responsibilities which the chair should take into account include curriculum development, academic advising, supervision of theses and dissertations, supervision of student internships, service in professional organizations, and special community or University services. Copies of the workload apportionment will be provided to each faculty member and forwarded to the dean for approval each semester and to the provost and vice president for academic affairs for information.
2. In courses where the credit hours equal the contact hours, one credit hour will be the equivalent of one load hour. Other factors that need to be taken into account in assigning class loads are: class enrollment, number of preparations, preparations for new courses, team teaching, number of honors, tutorials, independent study, or thesis courses, hours of graduate-level courses taught, and the number of registered thesis and dissertation students supervised.
3. In courses that have more contact hours than credit hours (for example, laboratories in some sciences and studio art), faculty compensation shall not exceed 0.75 load hours for each contact hour, assuming that no more than two contact hours per credit hour is, in any case, required. In courses consisting of both lecture and laboratory, only the laboratory will be calculated at 0.75 load hours for each contact hour, and the lecture at one load hour for each credit hour.
4. In the case of nontraditional or unusual teaching experiences such as student teaching, applied music, clinical experiences in an allied health program, or internships, the relationship between teaching time and load hours will be determined on a course-by-course basis by the faculty of the department/school with the approval of the dean and the provost and vice president for academic affairs.
5. The University, whenever appropriate, supports and encourages team teaching. Since team teaching allows for collaboration among peers and often results in an enhanced classroom environment or novel course content, there is potential for personal and professional growth for instructors and for broader and more stimulating experiences for students. Professors involved in team teaching will determine their individual contributions to the course and, in consultation with the chair(s) of their department(s)/school(s), calculate their load hours for the course. The total load hours for the team should equal at least the total teaching load hours for the course. However, since team teaching and the administration of assignments and grading may be significantly more time-consuming than for a course taught by one faculty member, the chair(s) may award additional load hours to team members. It is typically necessary for one member of the faculty team to be designated as course director for the semester to coordinate such course administrative activities as recording, completing, and submitting grades.
6. A faculty member's responsibility toward the University includes research and service in addition to teaching. Faculty members may not be assigned a teaching load beyond the standardized load hours



per academic year described above without their consent. If the department/school and the faculty member request a teaching load beyond this limit, approval of such a request must be forwarded to the provost and vice president for academic affairs on the recommendation of the chair and dean.

- Approved by the president  
Revised February 18, 1997; Revised November 17, 1997;  
Revised April, 2003  
Revised March 22, 2013  
Reviewed and Approved with No Changes May 16, 2022

## **Policy for the Support of Program Development and Growth in an Online Delivery Format**

### **Policy**

Old Dominion University delivers courses in a variety of modalities, and it is the expectation that faculty are able to deliver instruction in all of these different modalities. In support of further advancing online program offerings available to Old Dominion University students, academic units and faculty should be appropriately resourced. This policy explains how departments and other units may receive resources to support the development, instruction, and growth of programs in an online format.

### **Course Development**

For the development of an asynchronous course to be offered online, full-time and part-time faculty will be provided one-course release [In some instances, if release time is not possible, a stipend will be paid directly to the faculty developer]. The course may be developed following the Center for Learning and Teaching's (CLT) course development process and hosted by the designated content management system. A faculty member who, with the support of his/her department, develops an online course independent of CLT will be provided with release time or stipend after the program/course has been approved by Distance Learning.

The Office of Distance Learning will work with University administrators and departments to identify and agree upon programs to be developed in an online asynchronous format. Distance Learning will work with the academic unit and Academic Affairs to fund each online asynchronous program development initiative.

### **Course Revision**

For the major revision of an asynchronous course offered online, full-time and part-time faculty will be provided a course release of 0.5 of the total credit hours for the course (in some instances, if release time is not possible, a stipend will be paid directly to the faculty developer). The course may be revised following the Center for Learning and Teaching's course development process and hosted by the designated content management system. Departments/faculty that revise courses independent of CLT will be provided with course release time and/or stipends to support course revision once the revisions have been approved by Distance Learning.

Course revisions that are managed by the Office of Distance Learning will be handled on a program-by-program, or a course-by-course, basis and integrated into the production/revision cycles available through the Center for Learning and Teaching. Distance Learning will work with the academic unit and Academic Affairs to fund each revision initiative.

### **Online Delivery Resource Allocation**

Students are assessed a \$30 per credit hour fee for technology-delivered courses. Revenue generated from this source will be used to enhance the instructional and technological capacity of the institution. The Office of Academic Affairs will allocate 67% of the base technology fee revenue as follows: 10% to the Office of the Dean, 50% to departments, and 40% to the Office of Distance Learning. The remaining 33% of the technology fee revenue will be retained by the Office of the Provost for instructional expenses. Colleges, departments, and other units offering courses in an online format, per the terms of this policy, have the discretion to use the resources to support instructional and other program needs

and incentivize the growth of online programs and excellence in online teaching. Academic deans will be responsible for the oversight of the use of funds.

This policy will be reviewed every three years to make necessary adjustments.

- Approved by the president  
May 8, 2015; Revised May 2021

## **Class Audit (Non-Formal) by Faculty, Spouses, and Retired Faculty**

It is customary for faculty members to allow other faculty members, faculty spouses, and retired faculty members to audit classes without formality.

Information on tuition assistance for faculty and faculty administrators may be found in the [“Tuition Assistance Policy”](#) in section V of this *Handbook*. Tuition assistance may be considered as taxable income based on applicable IRS regulations.

- Approved by the provost and vice president for academic affairs  
September 5, 2003; Revised May 31, 2005

## Class Attendance by Guests

**Statement:** The propriety for non-student presence in the classroom will vary dependent upon the nature of curricular offerings, dangers inherent to certain classrooms and labs, the optimum classroom environment for each class, and the preferences of each instructor. Guidelines specifying whether non-student guests will be permitted in the classroom, which are consistent with departmental policy, will be established for each class by the instructor.

- Approved by the president  
March 10, 2000; Revised January 15, 2021

## **Full-Time Faculty Member as a Degree Candidate**

A full-time tenure-track faculty member should not be a degree candidate in the department in which he or she holds a contract. Requests for exception should be made by the department chair and must be approved by the dean and the provost and vice president for academic affairs.

- Adopted by the Council of Academic Deans
  - Approved by the provost and vice president for academic affairs
- January 25, 1977  
Revised February 29, 2012

## Faculty Class Attendance<sup>†</sup>

Faculty members are expected to meet classes as scheduled. In cases of an occasional faculty absence, the faculty member should make arrangements to cover the class, and those arrangements should be communicated to the chair.

Any rescheduling of a class other than for an occasional absence is permitted only with the written approval of the dean.

- Approved by the provost and vice president for academic affairs  
September 5, 2003; Revised May 5, 2023
- Reaffirmed and approved by the president  
January 15, 2021

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<sup>†</sup> Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Final Examinations<sup>†</sup>

The University firmly believes that a comprehensive evaluation of a student's achievement in a course is a vital part of the educational process. Final examinations for campus-based and higher education center courses, if given, are to be given at the time provided on the [University Registrar's Office website](#). Upon request of the instructor, exceptions to this regulation may be made only by the dean. Final examinations are normally scheduled in the classroom where the course has met throughout the semester.

In the event that a final examination is changed to another than that of the scheduled time, provisions will be made by the instructor for any student who cannot comply with the schedule change.

Any student who has three examinations scheduled in one calendar day and is unable to resolve the problem informally with the instructor or instructors may petition the dean for relief.

All examinations are to be retained for one year by the faculty members. Students have the privilege of requesting conferences with the instructors in regard to their final grades.

All distance learning final exams shall be available for students to complete in a minimum 24-hour window as defined by the professor, including one business day during the final examination period as defined for that course. Students may secure proctoring at a distance learning location or higher education center, at a distance learning partner site testing center, or with a third-party proctor. Students who do not secure proctoring with an ODU staff member must have all proctors approved in advance by the Office of Digital Learning at 1-800-968-2638. For more information about proctoring and distance learning examinations, visit <https://online.odu.edu/academics/exams-and-proctors>.

- Approved by the provost and vice president for academic affairs  
September 5, 2003; Revised May 5, 2005; Revised July 14, 2006
- Revised and approved by the president  
May 2, 2016  
Reaffirmed January 15, 2021

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<sup>†</sup> Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies



## Faculty Office Hours<sup>†</sup>

Faculty members are responsible for setting aside definite office hours so that students and other faculty members may confer with them. These hours should be communicated on the course syllabus and in other appropriate ways to students and departmental office personnel. Deans and department chairs are authorized to require faculty to designate a minimum number of office hours per week in the context of the faculty member's teaching responsibilities.

- Approved by the provost and vice president for academic affairs  
September 5, 2003; Revised March 25, 2004;  
Revised May 5, 2005

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<sup>†</sup> Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Course Syllabi<sup>†</sup>

During the first week of each semester, the instructor will provide the students with a syllabus in either electronic or hard copy form. Exceptions to this must be approved in writing by the dean. Course descriptions are found in the [Undergraduate](#) and [Graduate](#) Catalogs.

The syllabus should include the Catalog description for the course, an outline of the material to be covered during the semester, course objectives, course expectations of students, a statement about academic dishonesty, the instructor's requirements for student participation, required and optional textbooks/readings, assignments, the instructor's grading system, the attendance policy for the course, and an accommodation statement. The accommodation statement should read: "Students are encouraged to self-disclose disabilities that have been verified by the [Office of Educational Accessibility](#) by providing Accommodation Letters to their instructors early in the semester in order to start receiving accommodations. Accommodations will not be made until the Accommodation Letters are provided to instructors each semester."

Course syllabi are available through the office of the academic unit offering the course.

- Approved by the president  
December 1981  
Revised October 22, 2015  
Reaffirmed January 15, 2021

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<sup>†</sup> Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Class Rosters<sup>†</sup>

Electronic class rosters are available at [www.leonline.odu.edu](http://www.leonline.odu.edu) and are current as registrations occur. Faculty who have students attending class who are not on the roster must refer these students to the [Office of the University Registrar](#), as they are not officially registered, have not paid tuition, and will not be counted in the faculty workload reports. Faculty are advised not to permit students who are not on the class roster to attend class if they are not officially registered once the drop/add period has ended each semester. The course instructor may approve late registration by signing a drop/add form if the semester has not yet ended. Permission to add a course past the end of the semester must be approved by both the instructor and the department chair; if the department chair is the instructor, the request must be approved by both the instructor and the dean or designee.

- Approved by the provost and vice president for academic affairs  
September 5, 2003; Revised July 16, 2008  
Revised January 15, 2021

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<sup>†</sup> Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Grade Submissions<sup>†</sup>

The University believes that regular assessment of students and feedback to them is essential to effective teaching and learning. Therefore, faculty members will provide all students with an evaluation of their progress in a course prior to mid-semester. Faculty teaching 100- and 200-level undergraduate courses will provide specific feedback regarding progress in the course by submitting an early alert grade by the beginning of the fifth week of classes in the fall and spring semesters. Instructions for submitting early alert grades are sent out every semester by the [Center for Advising Administration and Academic Partnerships](#).

All faculty must report final grades through the secure website by logging into [www.leoonline.odu.edu](http://www.leoonline.odu.edu). At the end of exam week in the fall semester (exams finish on a Friday), the final deadline for grades for the semester will be the following Tuesday at noon. In the spring semester (exams finish on a Wednesday or Thursday), the final deadline for grades for the semester will be the following Monday at 5 pm. Official grades are maintained in the [Office of the University Registrar](#).

An online process for grade changes is available to faculty if the grade to be changed is not older than two semesters. In these cases, the instructor of record makes the change online. If the grade to be changed is older than two semesters, the instructor submits an Academic Record Change Form (H-1002) to the chair, who forwards it to the University Registrar if it is approved and notifies the instructor of reasons for denial if it is not approved. A report of grade changes made online is available to department chairs in [Leo Online](#) in the Faculty & Advisors menu. A department chair may object to a change of grade made by a faculty member online by emailing [studentrecords@odu.edu](mailto:studentrecords@odu.edu).

Faculty may choose to make grades available to students but should not post class rosters outside offices, classrooms, or other public areas. Students should be encouraged to view their posted grades through the secure website ([www.leoonline.odu.edu](http://www.leoonline.odu.edu)). Student records are guaranteed confidentiality by the [Family Educational Rights and Privacy Act of 1974 \(Buckley Amendment\)](#). In no case should the student's name, social security number, or any other personally identifiable information be posted or released verbally or in written format to anyone other than the student. Students should be referred to the Office of the University Registrar for official release of information.

- Approved by the provost and vice president for academic affairs  
September 5, 2003; Revised July 16, 2008;  
Revised January 12, 2020; Revised January 15, 2021;  
Revised November 17, 2022

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<sup>†</sup> Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Grade Appeals: Policy and Procedures<sup>†</sup>

### A. Policy and Purpose

- A. The purpose of the grade appeal procedure is to serve the needs of graduate and undergraduate students who believe that they were unjustly awarded a final course grade by a faculty member through prejudice or caprice. This policy applies to the final grade for the award of academic credit and does not apply to graduate and undergraduate examinations that are administered as part of the degree progression and certification processes (such as comprehensive examinations and candidacy examinations at the graduate level).
- B. The basis for a grade appeal is the student's charge that the final grade was awarded through prejudice or caprice. The burden of proof rests with the student.
- C. Students must initiate the first review of the appeal within 45 days of the official end of the semester in which the grade was awarded. For grades awarded and appealed from the fall and summer semesters, the entire appeal process must be completed before the official end of the next semester; the entire appeal process for grades awarded and appealed from the spring semester must be completed before the official end of the next fall semester.

### B. Procedure

Prior to initiating a formal appeal, the student must attempt to consult with the instructor to request an explanation of the method of evaluation and to determine whether an error has been made. This consultation may be face to face, via email, phone, or video conference if both agree, and efforts to consult with the instructor must be documented by the student. If at any point in the appeals process, the student and instructor, or the student and a subsequent appeals body, agree that a grade of P is acceptable, that grade shall be assigned for the course, and the appeals process will conclude. At all stages of the grade appeal processes outlined below, the instructor and student shall be notified of any actions recommended or taken by the Chair, Grade Appeal Review Committee, Dean (or designated Associate Dean), or Provost and Vice President for Academic Affairs (or designated Vice Provost).

#### A. First Review of Appeal

- 1. If the student is not satisfied with the results of the consultation with the instructor, or the instructor is not available as described in section IV.B, then the student may file a grade appeal. The Chair of the department in which the instructor is teaching will conduct the first review of the student's appeal unless the instructor is the department Chair. The student's case must be presented on the [Grade Appeal Form](#) with supporting documents/explanations to the instructor's department Chair within 14 days of the consultation with the instructor.
- 2. The student's Grade Appeal Form should (1) state specific reasons and give examples of faculty prejudice or caprice, (2) show that prejudice or caprice affected the awarding of the final course grade, and (3) be presented as a complete package and include all other supporting documentation.

3. The Chair shall notify the instructor of the appeal and provide the instructor with copies of the form and other documents that were submitted. The Chair or Dean (or designated Associate Dean) shall also request a response from the instructor that should include, at a minimum, the course syllabus, grade distribution for the course, attendance policy, the grading plan for the course, and other grading rubrics.
4. The Chair shall review all documents and may hold a hearing where both the instructor and student are present (see section V. for guidelines for hearings). No other persons will attend the hearing, and the hearing must be recorded.
5. If the Chair concludes that there is no cause for complaint, the student and the instructor will be notified in writing of the decision within seven days of receipt of the request for an appeal and the supporting documents. The student may request a second review of the appeal (see section II.B. for details).
6. If the Chair concludes that there is valid cause for the complaint, the Chair should consult with the instructor and student and attempt to mediate the dispute by working with both parties to agree on an appropriate course grade. Among the alternatives available for resolution of the case will be the assignment of the grade of P if the Chair, the instructor, and the student express their agreement in writing. If the instructor and student agree to a grade change or to award a grade of P, the instructor will make the official grade change.
7. If mediation fails, the Chair will notify the College Grade Appeal Review Committee of the need for a review and submit all documents to the committee. The instructor and the student will be notified of this action.
8. The chair will ask the College Grade Appeal Review Committee to appoint the reviewers within five working days (see section III for the composition of the committee).
  - a. The faculty and the student who form the Grade Appeal Review Committee will notify the instructor and student involved in the appeal when the review will take place and request needed documents.
  - b. The Grade Appeal Review Committee will review the documents, consult with relevant parties as needed, and determine if there is sufficient evidence in the documents to support the student's appeal or if more information is needed, in which case a hearing with the student and instructor may be held (see section V for details about the hearing). The review and hearing must be scheduled within 15 days of the receipt of the materials by the committee.
  - c. If the Grade Appeal Review Committee finds that there is sufficient evidence that the grade was awarded with prejudice or caprice, they may consult with the instructor to suggest a grade change and provide a rationale for that decision. The decision and rationale must be provided in writing to the instructor. The final outcome of the committee's review will be documented and communicated to the instructor, the student, the department Chair, and the Dean.

- d. If the committee finds on behalf of the student and recommends a change of grade and the instructor refuses to change the grade but is willing to assign a grade of P, then the committee will consult with the student about the advisability of accepting a P grade. Should the student agree to accept a grade of P, the instructor will make the official grade change.
  - e. If the committee finds on behalf of the student and recommends a change of grade and the student is unwilling to accept a grade of P, the Dean will review and make a recommendation to the Provost and Vice President for Academic Affairs. The Provost and Vice President for Academic Affairs (or a designated Vice Provost) will submit the recommended grade change to the [University Registrar](#). Only the Provost and Vice President for Academic Affairs (or designated Vice Provost) is authorized to change an instructor's grade. The instructor, Chair, student, and Dean will be notified. The Provost and Vice President for Academic Affairs' decision will be final.
  - f. If the committee finds on behalf of the instructor, the original grade will stand, and the instructor and the student will be notified.
9. If the instructor is the department Chair, the student will submit the [Grade Appeal Form](#) and documents to the Dean (or designated Associate Dean), and the Dean (or designated Associate Dean) will conduct the first review following the procedures described in II.A.1-8.
  10. If the instructor is a Dean or Vice President, the student will submit the Grade Appeal Form and documents to the Chair of the department in which the Dean or Vice President is teaching the course.

B. Second Review of Appeal

1. The student may request a second review of the appeal if the conclusion of the first review is that there is no cause for complaint. The request for a second review must be submitted within seven days of the denial of the first review. The student should request in writing that the person responsible for conducting the first review forward the grade appeal package to the person responsible for conducting the second review. The instructor is notified of this action.
2. When the instructor is a faculty member, the Dean (or designated Associate Dean) is responsible for conducting the second review. If the instructor is the Chair and the Dean (or designated Associate Dean) conducted the first review, the Provost and Vice President for Academic Affairs (or designated Vice Provost) is responsible for conducting the second review. If the instructor is a Dean or Vice President and the Chair of the department in which the Dean or Vice President is teaching conducted the first review, the Provost and Vice President for Academic Affairs (or designated Vice Provost) is responsible for conducting the second review.
3. The second review shall follow the same procedures as the first review, as described in section II.A.1–4.

4. If the person to whom the second review is submitted concludes that there is no cause for complaint, the student and the instructor will be notified in writing that the grade appeal process is complete. No further appeal will be allowed.
5. If the person to whom the second review is submitted concludes that there may be valid cause for the complaint, the procedures as described in section II.A.6–8 will apply.

### **C. Grade Appeal Review Committee**

#### **A. Committee Composition and Duties**

1. Each college will create a Grade Appeal Review Committee that has one representative from each department in the college and a list of potential student members. If an appeal is heard, the Dean will select two faculty members and one student from these lists.
2. Representatives must be full-time tenured or tenure-track faculty in an academic department elected by the department faculty. At least two committee members shall be tenured. No administrator, such as a Chief Departmental Advisor or Graduate Program Director, shall be eligible to serve on the committee.
3. Terms of service will be for two years. Members may be re-elected for an additional two-year term.
4. At the beginning of each academic year, each department in the college will submit a list of full-time students who are eligible and willing to serve on the committee. This list will be formulated each year. When needed, one student will serve on a review committee.
5. The committee will select its own chair and develop guidelines for the review process and procedures.
6. Two faculty members and one student selected from the names submitted by each department will review the appeal, including documents from the student filing the appeal and the instructor of record. Neither the faculty members nor the student member shall be from the instructor's or student's department.
7. Both the instructor and the student will have the right to challenge, for valid cause, any or all of the members of the committee, and in that event, replacements will be appointed, and no further challenge will be permitted.

### **D. Instructors' Responsibilities and Rights**

#### **A. The following are guides for the instructor's responsibilities and rights.**

1. Instructors have a responsibility to meet with students to explain the course grading procedure and the process for determining the final grade.
2. When requested, instructors must provide the documents requested for a review at all levels. These documents will include, at a minimum, the course syllabus, grade



distribution for the course, attendance policy, and grading procedures for course tasks with rubrics. Other documents may be included or requested.

3. The instructor must assist in making arrangements for a hearing when one is needed.
4. Instructors have the responsibility to participate in a grade appeal.
5. No instructor shall be forced or coerced into making a grade change.

**B. Unavailable Instructors**

1. In the event a student makes documented efforts to consult with an instructor and is unable to find the instructor or does not receive a response, the student shall seek assistance from the Chair.
2. When the Chair has made reasonable efforts to contact an instructor whose final grade is being appealed and is unsuccessful, the Grade Appeal Review Committee and chair will independently review available materials and reach a consensual decision. In the event that these two reviews reach different decisions that are not reconciled, the Provost and Vice President for Academic Affairs (or designated Vice Provost) will make a final decision. No other appeal can be made.
  - a. If the decision is in favor of the student, and the student is not willing to accept a grade of P, the Provost and Vice President for Academic Affairs (or designated Vice Provost) will submit the recommended grade change to the [University Registrar](#). Only the Provost and Vice President for Academic Affairs (or designated Vice Provost) is authorized to change an instructor's grade upon the recommendation of the College Grade Appeal Review committee.
  - b. If the decision is not in favor of the student, the instructor's original grade will remain.
3. In the event of an instructor's unavailability due to death, serious illness, or any other cause that would prevent the instructor from participating in the process in time for the process to be completed during the designated semester, the procedure in sections II.A.1. and IV.B.2 will be followed.

**E. Procedures for Hearings**

A hearing involving the faculty member and the student may be held at any level of appeal.

- A. After the Grade Appeal Review Committee reviews the appeal form and supporting documents and the instructor's documents, a hearing may be held to clarify issues and/or to receive further evidence. Both the student and the instructor may submit additional materials at the hearing.
- B. Hearings may be held at any level only when both the instructor and the student can participate. No other persons may attend this hearing.

- C. The conclusions, decision(s), and a rationale for these must be disseminated in writing to the instructor and to the student.
- D. If either the instructor or the student believes that the established procedures for the appeal of grades have not been followed, an appeal for an additional hearing may be made to the Dean (or designated Associate Dean), or when the Chair or Dean is the instructor, to the Provost and Vice President for Academic Affairs (or designated Vice Provost) The only basis for an appeal will be the failure to have been provided due process as prescribed by the policy.

**F. Records**

- A. If the grade appeal concludes after the first review, the original [Grade Appeal Form](#) and all decision letters for each level of review will be kept in a secure location in the department Chair's office for a minimum of one year.
- B. If the grade appeal advances to the second level, the original Grade Appeal Form and all decision letters for each level of review will be kept in a secure location in the Dean's office for a minimum of one year.
- C. Recordings of hearings will be kept in the department Chair's or the Dean's office for a minimum of one year.

**G. Assignment of P Grade**

A "P" grade established under this policy at any stage of the grade appeal process will be given irrespective of the University policy on hours permitted for P grades or restrictions on when a P grade is permissible and will not prevent progression in the degree program or courses for which this course is a prerequisite.

- Approved by the President  
May 2, 2016  
Revised February 13, 2018  
Revised May 16, 2022

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† Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Student Complaint Procedure<sup>†</sup>

The University subscribes to the following 2009 statement on professional ethics of the American Association of University Professors, according to which “As teachers, professors encourage the free pursuit of learning in their students. They hold before them the best scholarly and ethical standards of their discipline. Professors demonstrate respect for students as individuals and adhere to their proper roles as intellectual guides and counselors.” The University recognizes that the instructor has the authority to maintain appropriate classroom behavior and respects the academic freedom of the faculty (see [Policy on Academic Freedom](#)). The University will not normally interfere with the content or style of teaching activities. The University recognizes the responsibility to establish procedures for addressing student complaints about faculty conduct that is not protected by academic freedom and not addressed in other procedures (see [Board of Visitors Policy 1502 - Student Rights and Freedoms](#)).

This procedure describes how students may formally complain about inappropriate faculty behavior in formal academic, professional, or research settings. Student-initiated complaints in other areas, including grade appeals, sexual harassment, disability accommodations, and discrimination, are covered under separate policies and are not included in this procedure.

### I. General Provisions Procedures

#### A. Determination of Appropriate Procedure.

The student is responsible for filing the complaint under the proper procedure. Complaints should only be filed using this procedure if there is no other provision available. *Failure to follow the appropriate procedures may result in the complaint not being heard.*

#### B. Student Complaints and Concurrent Procedures

The act of filing a complaint under this procedure will not normally delay any pending process or procedure involving the student and/or faculty member. Normally, any concurrent process or procedure will move forward independently of the student complaint, though it may be delayed for good cause as determined by the appropriate University official(s).

#### C. Retaliation

No student who files a complaint under this procedure shall be subject to any form of retaliation by any person, department, program, or college.

### II. Procedures

#### A. STEP 1 - Informal Resolution.

Students must first attempt to resolve complaints informally. Given the nature of complaints covered by this procedure, it is expected that in all but the most unusual circumstances, students will first raise the issue with the faculty member. In the event this is not feasible, the student will contact the department Chair. In instances where there is no department Chair, the student should contact the Program Director.

#### B. STEP 2 - Formal Complaint.

If the issue is not resolved informally, the student may contact the department Chair or Program Director if there is no Chair. In instances where the Chair is the subject of the complaint, the student should contact the Dean of the college to which the Chair is assigned. The student must contact the Chair (or Program Director if there is no Chair or Dean if the Chair is the subject of

the complaint) within 30 business days of the action from which the complaint arises, or the complaint will be barred. The Chair or Dean has the discretion to accept a complaint filed after this deadline for good cause. The complaint must be submitted in writing on the [Student Complaint Procedure Formal Complaint Form](#) and contain:

- a. The student's name and University Identification Number,
- b. The faculty member's name, the course subject area prefix, and the number,
- c. A detailed description of the nature of the complaint,
- d. A detailed description of attempts at informal resolution with the faculty member and Chair or Program Director,
- e. A detailed description of the relief sought.

**C. STEP 3 – Investigation.**

The Chair may designate a faculty member to investigate the complaint. If the Chair is the subject of the complaint, the student shall contact the academic Dean, who will designate a faculty member to investigate the complaint. The person investigating the complaint will meet, either independently or collectively, with the student and the person who is the subject of the complaint within 10 business days from the filing of the complaint. The decision should be issued in writing to the student and the faculty member within 20 business days of the date the complaint is filed.

The complaint process is not intended to be an adversarial hearing, and both the interviews of the student and the faculty member will usually be conducted without the other present.

**D. STEP 4 - Appeal Procedure.**

If the student is not satisfied with the resolution in Step 3, the student may file a formal appeal with the appropriate academic Dean. The appeal must be filed within five business days after the decision in Step 3 has been sent. The Dean has the discretion to accept a complaint filed after this deadline for good cause.

The appeal must be submitted in writing on the [Student Complaint Procedure Formal Appeal Form](#) and contain:

- a. The student's name and University Identification Number,
- b. The faculty member's name, the course subject area prefix, and the number,
- c. A detailed description of the nature of the complaint,
- d. A detailed description of attempts at resolution with the faculty member and Chair or Program Director,
- e. A detailed description of the relief sought,
- f. A copy of the Chair's (or Program Director's) findings and supporting documents. No new information is permitted.

**III. Records**

- A. If the complaint concludes after Step 3 above, the [Student Complaint Procedure Formal Complaint Form](#) and all related documents will be kept in a secure location in the department Chair's or Program Director's office for a minimum of three years after the last action.

- B. If there is an appeal, the [Student Complaint Procedure Formal Complaint Form](#), the [Student Complaint Procedure Formal Appeal Form](#), and all related documents for each level of review will be kept in a secure location in the Dean's Office for a minimum of three years after the last action.

- Approved by the President  
May 13, 2011  
Revised May 16, 2022

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† Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Academic Functions<sup>†</sup>

University faculty meetings are held once each year in August and on call by the president. At other times during the school year, college and departmental meetings are held.

Attendance at commencement exercises is an important duty of faculty members and faculty administrators. While it would be desirable for every faculty member and faculty administrator to attend every commencement, a minimum requirement is that each faculty member and faculty administrator attend at least one commencement per year. Departments are required to guarantee that at least one-third of their faculty and faculty administrators attend the fall commencement exercise and two-thirds of the spring exercise.

- Approved by the provost and vice president for academic affairs  
September 5, 2003

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<sup>†</sup> Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Outside Employment<sup>†</sup>

**Statement:** This policy recognizes the necessity of providing some opportunities for approved outside employment by full-time faculty but also recognizes the need for the University to be sure that faculty are devoting their full attention and energy to supporting the instructional, research, and service programs of the University. The intention of this policy is to ensure that there is no conflict of interest between a faculty member's outside employment activities and the job for which he or she is being employed at the University.

- A. Deans and department chairs should review their areas to assure that no situations exist where faculty are doing work that would interfere with the completion of their University duties. The same level of attention should be devoted to assuring that there is no misuse of University equipment, supplies, or facilities by faculty.
- B. Guidelines
  1. Work supported by grants and contracts awarded to the University does not constitute outside activity.
  2. The outside employment should not exceed 20% of the faculty member's time per week.
  3. A faculty member who engages in outside employment will not use the name of the University in such a manner as to suggest institutional endorsement.
  4. The department chair and dean shall review each outside activity. Requests that clearly interfere with the faculty member's ability to fulfill his or her responsibilities to the University will not be approved. If a request is denied, the faculty member should receive a written explanation of the basis for the denial. If the chair or dean does not approve a particular activity, the faculty member may appeal to the provost and vice president for academic affairs. In the instances where University services, supplies, or equipment are to be used, the faculty member must notify the chair of what facilities are to be used and why they are needed.
  5. No faculty member may engage in part-time or full-time teaching for another institution during the semesters he or she is employed by the University without prior approval of the provost and vice president for academic affairs. Any faculty member who accepts a full-time position elsewhere without prior approval will be considered to have resigned from his or her position with the University.
  6. If University space, services, supplies, or equipment are to be used to perform the outside activity for compensation, and where the work is in the interest of the University, permission must be obtained from the Office of Academic Affairs and arrangements made for payment of a reasonable fee for such use. University nonfaculty personnel will not be used to support outside employment activities by the faculty.
  7. Each college's annual report will include a summary of the college faculty's outside employment activities.

-Approved by the Board of Visitors  
April 22, 1971; Revised September 26, 1972;  
Revised September 14, 1984; Revised April 26, 2013 (eff. 6/1/13)  
September 5, 2003  
-Transitioned to University-Level Policy  
December 10, 2021

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<sup>†</sup> Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Faculty Incentive Options Policy

**Statement:** Incentive options provide opportunities to recognize and reward a faculty member's contributions to the overall objectives of Old Dominion University and to enhance the recruitment and retention of exceptional faculty.

### APPLICATION

This policy applies to full-time instructional and administrative/professional faculty.

### TYPES OF OPTIONS

**Hiring Incentive** - applies to new faculty agreeing to work for a specified period of time. A formal agreement must be executed, which includes requirements for satisfactory performance and payback if terms are not met.

**Retention Incentive** - applies to current University faculty agreeing to continue to work for a specified period of time. A formal agreement must be executed, which includes requirements for satisfactory performance and payback if terms are not met.

**Recognition Incentive** - to recognize faculty for exceptional performance, special acts, or innovative ideas. In addition to performance-related incentives, recognition awards may also be provided for employee appreciation and for team accomplishments.

### APPROVAL PROCESS

The president and the vice presidents have the discretion to award incentives to faculty for their contributions to the University.

Vice presidents are responsible for submitting nominees to the president for recruitment and retention incentives when warranted.

### PAYROLL-RELATED ISSUES

Incentives cannot be added to the faculty's base pay. Incentives are considered income for the faculty and will be taxed accordingly. The University may not increase incentive totals by the amount of payroll taxes normally deducted from the faculty's pay.

### PAYMENT SCHEDULE

Faculty may choose one of two methods for the payment of the incentive:

- A. Lump sum payment.
- B. Scheduled payments over a designated number of paydays within the fiscal year.

- Approved by the president  
July 1, 2001



## **Policy for Conflicts of Interests Arising from an Employee's or Family Member's Financial Interests, Employment at, or Representation of Old Dominion University**

(University Policy, #6220)

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6220>

## University Telephone System Usage

([University Policy, #3300](#))

**Responsible Oversight Executive:** Vice President for Administration and Finance

**Date of Current Revision or Creation:** February 14, 2018

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### A. PURPOSE

The purpose of this policy is to provide guidelines and procedures for the proper use of University-owned telephones and services.

### B. AUTHORITY

[Code of Virginia Section 23.1-1301, as amended](#), grants authority to the [Board of Visitors](#) to make rules and policies concerning the institution. Section 6.01(a)(6) of the [Board of Visitors Bylaws](#) grants authority to the President to implement the policies and procedures of the Board relating to University operations.

Old Dominion University has executed a Memorandum of Understanding (MOU) with the Commonwealth Department of Accounts and Department of the Treasury relating to the decentralization of non-payroll disbursements. The MOU documents the agreement in accordance with the Appropriations Act to delegate the operation of non-payroll disbursement to Old Dominion University as part of a program to grant relief from rules, regulations and reporting requirements in the areas of finance and accounting.

### C. DEFINITIONS

Budget Unit Director - The University employee on record with the Office of Finance Data Control as having signature authority and financial management responsibility for a specific budget code.

Collect Call - A call received where the caller is requesting that the University be charged for the call.

Operator Assisted Call - Calls or services requiring the assistance of an outside operator.

Progressive Discipline - A system of increasingly significant measures that are utilized to provide feedback to employees so that they can correct conduct or performance problems.

Supervisor - The management level with the authority to hire, assign work, manage work schedules, approve leave, evaluate, and discipline employees.

Third Party Billing - A call made from a non-University phone but charged to the University.

#### **D. SCOPE**

This policy applies to all employees, students, volunteers, employees of affiliated organizations who are paid through the University, and visitors to the institution. Employees include all staff, administrators, faculty, full- or part-time, and classified or non-classified persons who are paid by the University. Students include all persons admitted to the University who have not completed a program of study for which they were enrolled; student status continues whether or not the University's programs are in session. Affiliated organizations are separate entities that exist for the benefit of the University through an operating agreement and include the Foundations, the Community Development Corporation, and the Alumni Association. Visitors include vendors and their employees, parents of students, volunteers, guests, uninvited guests and all other persons located on property, owned, leased, or otherwise controlled by the University.

#### **E. POLICY STATEMENT**

The University telephone system is available to conduct official business. Abuse of the telephone system including, but not limited to, charging personal long distance phone calls to the University, conducting business related to outside employment or business ownership, making or receiving excessive personal calls, and disclosing confidential information over the phone may result in disciplinary action, including termination.

As a general rule, faculty and staff are discouraged from making or receiving personal telephone calls through the University's telephone system. It is recognized that under certain circumstances, however, an employee may need to make or receive a telephone call of a personal nature from a University phone. Those calls must be held to a minimum in both duration and frequency.

If, on rare occasions, the need arises for an employee to make a personal call that would result in an assessed charge, the employee should use his or her personal cell phone or calling card to place the call. If those options are unavailable, the employee must receive prior approval from his/her supervisor or designee before using a University phone, and any charges resulting from the call must be reimbursed to the University using established procedures.

Collect, operator-assisted and third-party billing calls are prohibited. Any such call will be investigated by the supervisor or designee and charged to the employee who accepted or placed the call.

#### **F. PROCEDURES**

1. Budget Unit Directors are responsible for reviewing the monthly telephone billing reports to ensure compliance with this policy and investigating any questionable calls, such as unexpected charges or unusual frequency of numbers called.
2. Budget Unit Directors noting questionable calls should inquire about the purpose of the call. If the call was for personal reasons, the employee's supervisor should be notified.
3. If the supervisor determines that inappropriate use of University telephones has occurred, he or she will address the issue with the employee using a progressive discipline approach, which may result in sanctions, including termination. The supervisor shall also notify the

University Auditor in order to pursue the matter in accordance with [University Policy 3003 – Detection, Investigation and Reporting of Fraud, Waste and Abuse](#).

**G. RECORDS RETENTION**

Applicable records must be retained and then destroyed in accordance with the [Commonwealth's Records Retention Schedules](#).

**H. RESPONSIBLE OFFICER**

Associate Vice President for Financial Services

**I. RELATED INFORMATION**

[Board of Visitors Policy 1450 – Faculty Sanctions](#)

[University Policy 1002 – Code of Ethics](#)

[University Policy 6600 – Standards of Conduct for Classified Employees](#)

## **Allowance for Usage of Personal Mobile Devices and Wireless Service for University Business**

(University Policy, #3310)

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3310>

## Faculty Credentialing Records Policy

All faculty members, including full- and part-time instructors and graduate assistants who are the instructor of record, are required to submit copies of their official transcripts directly from the issuing institution(s) for all graduate coursework completed and a current vita to the Office of Academic Affairs. Academic Affairs, in consultation with departments, is responsible for verifying and certifying the authenticity of academic transcripts (in electronic or paper form) once they are received and ensuring a copy is filed in the Office of the Dean. Faculty members should make sure their credentialing records, including, but not limited to, transcripts, certifications, licenses, etc., on file are current. Faculty records should be retained for five years after resignation, separation, or termination.

Employment records are maintained in the [Department of Human Resources](#), and payroll records are maintained in the [Payroll Office](#). Other records of faculty activity and credentialing records are stored electronically by Academic Affairs.

- Approved by the provost and vice president for academic affairs  
September 5, 2003;  
Revised September 23, 2014;  
Revised November 8, 2016;  
Revised February 26, 2019

## **Policy on Title IX and Sexual Misconduct**

**(University Policy, #1008)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/1000/1008>

## **Discrimination Policy**

**(University Policy, #1005)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/1000/1005>



## Disruptive Behavior Policy for Faculty and Faculty Administrators

**Statement:** Ensuring workplace safety is of vital importance. All members of the Old Dominion University community have an investment in fostering productive working relationships. Disruptive behavior will not be condoned by any faculty member or administrator.

Disruptive behavior may include verbal threats, harassment, non-verbal inferences that are viewed as intimidating, stalking, and other activities that interfere with the safe and effective operation of the university. Faculty members and administrators who engage in disruptive behavior will be sanctioned under the appropriate standards of conduct.

Additional information can be found in the [Faculty Code of Conduct](#) and the [Commonwealth of Virginia policy on Civility in the Workplace](#).

- Approved by the president  
July 18, 1995; Revised January 15, 2021

## **Communications With the Board of Visitors**

**(Board of Visitors Policy, #1102)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/bov/bov1102>

## **The University's Name and Identification**

**(Board of Visitors Policy, #1003)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/bov/board-visitors-policy-1003>

## **Authority to Act on Behalf of the University**

**(Board of Visitors Policy, #1210)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/bov/board-of-visitors-policy-1210>

## **University Spokesperson and Media Liaison (*Interim Policy Revisions*)**

**(University Policy #2001)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/2000/2001>

## **Advisory Councils**

**(Board of Visitors Policy, #1840)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/bov/board-of-visitors-policy-1840>

## **Institutional and Individual Memberships in Professional Organizations, Civic Organizations, and Social Clubs**

**(University Policy, #1060)**

The policy can be found at the following link:

<http://www.odu.edu/about/policiesandprocedures/university/1000/1060>

## ODU Faculty Receiving Nationally Competitive Fellowships

It is the policy of the University to encourage and support faculty who apply for and receive nationally competitive fellowships that provide a significant portion of their salary (e.g., Fulbright, NEH, NEW, German Marshall, etc.). The goal of this policy is for faculty members to remain on contract, receiving their current salary and full benefits. The assumption on which the policy is based is the reality that, while providing outstanding recognition for ODU faculty, these fellowships pay less than the average faculty member's current salary.

The following are the procedures and terms for full-time faculty members receiving such fellowships:

- A. If a faculty member is applying for a fellowship, he/she must consult the chair and dean to allow them to plan for future semesters and to be assured that the fellowship being sought meets the criteria of this policy (e.g., nationally competitive). In addition, there may be a limit to the number of fellowships supported over a period of time for one person. When the University's share of the faculty member's salary exceeds 50%, full benefits will be paid. If the University's share is less than 50%, the specifics will be dealt with on an individual basis at the point of application.
- B. If the granting agency will pay the award directly to the University, then the faculty member remains on his/her current salary, and the department/college will use the award as purchase release time to support the department and college in which the faculty member resides.
- C. If the granting agency (e.g., Fulbright) will only pay the faculty member directly, then the University will top off the award so that the faculty member maintains his/her current salary. This will be based on the stipend amount only.
- D. Fellowship money provided for maintenance and travel expenses is to be excluded from these calculations.
- E. These policies do not apply to faculty receiving fellowships for the summer only, as faculty are not on contract with the University.
- F. Faculty members must return for one year of full-time University service following the period of the fellowship. Therefore, those on terminal contracts are not eligible.

- Approved by the president  
June 6, 2002



## **Faculty Exchange Between Norfolk State University and Old Dominion University**

Since both institutions wish to encourage and facilitate further exchange of faculty, the following policy for faculty exchanges has been adopted.

A department chair or dean from either institution may request that a faculty member in a comparable department at the other institution be loaned for the purpose of teaching a course. If agreement is reached, the course taught at the other institution will be considered part of the faculty member's regular load, so the teaching load at the home institution will be reduced accordingly. Copies of the agreement will be forwarded to the vice presidents for academic affairs at both institutions for the purpose of record-keeping.

Since faculty are not under contract during the summer session, this arrangement applies only to the regular session. During the summer session, faculty from the other institution may be paid directly by the borrowing institution.

- Approved by the president  
October 1, 2003

## Department Chairs<sup>†</sup>

1. The chair is an administrative officer of the University and the chief executive officer of a department. The chair has primary responsibility for the development of quality programs in instruction, research, and professional service within the department.
2. Within the context of University and college policy and governance structure, the chair's responsibilities include, but are not limited to, the following:
  - a. The administration of University and college policies at the departmental level;
  - b. The development of departmental short- and long-range plans and the evaluation thereof;
  - c. The definition of the role of the discipline and department in the college and University and of its relationship to the needs of the community and state;
  - d. The development of departmental curricula;
  - e. The maintenance of an effective advising system within the department;
  - f. The preparation and administration of the departmental budget;
  - g. The administration of the departmental office and facilities and the supervision of the departmental staff;
  - h. The provisions of leadership in the development of faculty in teaching, research, and professional service;
  - i. The evaluation of faculty performance in teaching, research, and professional service, and of all departmental staff;
  - j. The promotion of an effective equal opportunity/affirmative action program within the department;
  - k. The recruitment and reappointment of faculty and the recommendation of them for tenure, promotion, and salary increases;
  - l. The promotion of the welfare of faculty, staff, and students;
  - m. The maintenance of liaison with other academic and administrative units of the college and University, and with appropriate external agencies.
3. The chair shall be a full-time member in the department appointed by the dean after a survey of the full-time faculty of the department and with the approval of the provost and vice president for academic affairs. In the case of internal appointments, except in the absence of a viable candidate or reasonable consensus among the faculty, the chair shall be a tenured member of the department.

- a. The chair normally serves a three-year appointment. When the term of a chair is ending, the dean shall notify the department no later than February 1 and invite anonymous written comments on the chair's performance from all full-time faculty of the department. Such response shall be submitted on a survey instrument appropriate to the department, to be developed by the dean in consultation with the Promotion and Tenure Policy Committee of the Faculty Senate and with the provost and vice president for academic affairs. The dean, taking into account the survey results, shall recommend to the provost and vice president for academic affairs either (a) reappointment of the incumbent chair, (b) appointment of a new chair from within the department, or (c) appointment of a new chair to be recruited from outside the department. Subsequent to the approval of the recommendation by the provost and vice president for academic affairs, the dean shall make a written report to the departmental faculty, summarizing important conclusions of the evaluation and announcing the decision.
  - b. A person normally may serve no more than two consecutive terms as chair; however, if the departmental survey reasonably supports such a conclusion, the dean may reappoint for one additional term subject to the approval of the provost and vice president for academic affairs. Appointments exceeding three consecutive terms may be made only in extraordinary circumstances with the approval of the provost and vice president for academic affairs and the president and with a full explanation to the faculty of the department of the reasons, therefore.
  - c. Termination of a chair's appointment prior to its normal expiration date may be effected by the dean for reasonable cause, subsequent to consultation with the faculty of the department and approval by the provost and vice president for academic affairs.
4. The annual evaluation of the performance of all chairs is the administrative responsibility of the dean and will be conducted by the dean. The evaluation shall be based on the annual identification and accomplishments of each chair's goals and objectives established in collaboration with the dean and conducted each spring prior to the salary adjustment process. Deans are encouraged to solicit anonymous comments from all full-time faculty in the department. The evaluation results shall be discussed with the chair and reported to the provost and vice president for academic affairs.
5. The chair does not hold tenure in the administrative office. In cases in which persons are recruited from outside the University to serve as chairs, recommendations for academic tenure effective upon initial appointment shall normally follow the established tenure review process. If time constraints preclude full employment of the regular tenure review process, academic tenure on initial appointment will be recommended by the president to the Board of Visitors if (a) the dean so recommends after consultation with tenured faculty of the department, and (b) the provost and vice president for academic affairs approves.

- Approved, as revised, by the Council of Academic Deans  
May 1978  
Revised by the president  
January 9, 1990; February 27, 2007  
Reviewed; No Changes Proposed April 20, 2022

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† Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Graduate Program Director<sup>†</sup>

### A. Introduction

The primary role of the graduate program director is to ensure the academic integrity of graduate degree programs in their academic program area. First and foremost, a graduate program director is charged with determining that policies and procedures outlined in the [Graduate Catalog](#) are followed by all program area faculty and students. Second, but of equal importance, a graduate program director facilitates faculty engagement around critical program functions such as recruitment, admission, and retention practices and procedures.

### B. Appointment

Many graduate programs are implemented and administered within a single department/school, while others are multidisciplinary in nature and involve the cooperative efforts of several individual departments/schools or colleges on a shared basis. Because of these variations, some graduate program directors report directly to a particular department chair or school director, while others report directly to an individual academic dean. The delineation of administrative authority should be established at the time a graduate program director is appointed and clearly understood by all parties involved. At the time of appointment, graduate program directors and their supervisors should develop a plan for regular consultation and a written position description that provides a clear understanding of the expectations for both parties about their duties and the attendant compensations, along with criteria for the annual evaluation.

The graduate program director should be tenured faculty from the program or department/school in which the program is located, if applicable, who is certified for graduate instruction at levels I or II (see the policy for [Certification of Faculty for Graduate Instruction](#)). The appointment of non-tenured faculty should be made only in exceptional circumstances that are approved by the dean (or designee) and the provost and vice president for academic affairs (or designee).

In the case of programs located within a single department/school, the graduate program director will be appointed by the department chair or school director after consultation with those faculty certified for graduate instruction in the program and with the approval of the academic dean in whose college the program is offered. The department chair or school director is the administrative supervisor for the graduate program director.

In the case of interdisciplinary programs within a college, the graduate program director will be appointed by the dean after consultation with the chairs of participating departments/schools and faculty certified for graduate instruction in the program, and deans of other colleges, if necessary. The dean is the administrative supervisor for the graduate program director.

In the case of interdisciplinary programs located within standalone schools residing outside of a college, the graduate program director will be appointed by the school director after consultation with the chairs or directors of participating departments/schools and faculty certified for graduate instruction in the program, and deans of other colleges, if necessary. The school director is the administrative supervisor for the graduate program director.

A graduate program director shall serve at the pleasure of the administrative supervisor and shall ordinarily be appointed to a term of three years with the possibility of renewal. A graduate program

director may ordinarily serve no more than two consecutive terms; however, the administrative supervisor may reappoint the individual for one additional term subject to the approval of the dean or the provost and vice president for academic affairs (or designee) if the dean is the administrative supervisor. An appointment exceeding three consecutive terms may be made only with the additional approval of the provost and vice president for academic affairs (or designee). The Office of Academic Affairs will be provided with a copy of the appointment letter or memorandum after approval by the dean and, if appropriate, the provost and vice president for academic affairs (or designee) for review and record purposes.

### C. Duties and Responsibilities

The duties of a graduate program director depend upon a number of factors: program level (master's, education specialist, or doctoral), a particular discipline, size of the program, and degree of staff support being some of the most important. While the ultimate responsibility for a graduate program rests with its graduate faculty, who may serve on specific committees or who may otherwise assist in various capacities, managing the following areas of responsibility will be considered the baseline duties for the graduate program director. Decisions made by the graduate program director in executing these responsibilities or duties may be overturned by their administrative supervisor in exceptional circumstances (e.g., to settle an unresolved disagreement between the director and graduate faculty over an action). If the graduate program director objects to the administrative supervisor's ruling, the matter shall be adjudicated by the program dean (or designee). If the program dean (or designee) is the administrative supervisor, the provost and vice president for academic affairs (or designee) shall adjudicate the matter.

**Program Marketing and Recruitment** – work with the [Graduate School](#) and the [Office of Graduate Admissions](#) to plan, initiate, and maintain contact with prospective students, prepare the content of promotional materials, and maintain the program website.

**Admission to Program** – work with the Office of Graduate Admissions and the program admissions committee to coordinate application review, oversee admissions decisions, maintain communication with admitted students, determine financial aid offers to candidates, establish program capacity, manage enrollment, and conduct student orientation.

**Advising and Problem Resolution** – mentor and advise students, establish student plans of study, coordinate thesis and dissertation schedules, handle student requests for exemptions and waivers, and coordinate graduate assistant evaluations.

**Thesis and Dissertation Coordination** – approve the appointment of faculty to serve on and/or chair thesis and dissertation committees. Such appointments must also be approved by the appropriate dean (or designee).

**Continuance** – work with the administrative supervisor and the Graduate School to monitor students' academic progress and work with the program faculty to coordinate the administration of candidacy examinations.

**Certifying Students for Graduation** – certify students for graduation, including making course substitutions and other exceptions to [Graduate Catalog](#) requirements, in coordination with the [Office of the University Registrar](#).

**Program Policies and Manual** – maintain the program manual and disseminate student guidelines.

**Scheduling and Curriculum Review** – advise the administrative supervisor on course demands and scheduling each semester and work with the [Graduate School](#) to revise and update the [Graduate Catalog](#) content, including all curricular changes, new course proposals, and old course deactivations.

**Program Assessment** – work with the administrative supervisor, the Graduate School, and the [Office of Institutional Effectiveness and Assessment](#) to collect graduate student productivity data, survey student needs and satisfaction, complete annual assessment reports, conduct periodic external reviews, and interact with accrediting bodies and the [State Council of Higher Education for Virginia \(SCHEV\)](#). Additional responsibilities may be assigned by the administrative supervisor, dean, or provost and vice president for academic affairs with appropriate levels of support.

**Regular Training** – attend regular graduate policy and procedure trainings offered by the Graduate School to stay current with University practice; regularly review the Graduate Catalog; participate in college-level meetings of directors convened by the dean's office.

#### D. Release Time and Remuneration

During the academic year, all graduate program directors will receive some release time and/or remuneration. The amount of release time and/or remuneration will be determined according to guidelines or criteria established by Academic Affairs and in consultation with the chair, dean, and the provost and vice president for academic affairs (or designee). Release time and/or remuneration may vary with the size, scope, and complexity of the program and the duties established for the particular position, as discussed in section C (above). Remuneration will be offered in the summer as guided by criteria established by Academic Affairs and determined in consultation with the chair, dean, and the provost and vice president for academic affairs (or designee).

#### E. Evaluation of Performance

The primary person responsible for evaluating the performance of the graduate program director will be the administrative supervisor, as indicated in section A (above). It is expected that a portion of the annual faculty evaluation of the graduate program director will be devoted to the performance in that capacity. The person responsible for the evaluation should seek as much input as appropriate to assist in the evaluation and should consult with the graduate faculty and academic dean, particularly when a new appointment is contemplated.

- Approved by the provost and vice president for academic affairs  
December 5, 1978  
Revised August 8, 1995  
Revised and approved by the president  
December 16, 1997  
Revised August 22, 2003; Revised July 24, 2006  
Revised November 5, 2010; Revised December 11, 2017  
Revised May 1, 2020; Revised March 30, 2023
- Revised October 20, 2023

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† Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Certification of Faculty for Graduate Instruction<sup>†</sup>

### I. Assignment of Graduate Faculty

All faculty assigned to teach graduate courses and/or supervise graduate student research must be certified using the [University's Certification of Faculty for Graduate Instruction](#) form. Faculty are to be certified for graduate instruction in their field of specialization based on their college's published criteria of required scholarly, creative, and/or professional accomplishments; satisfactory teaching performance; and necessary terminal degree. Faculty who are not graduate certified may not participate in any aspect of graduate education. The deans of the colleges are responsible for ensuring that all faculty are certified prior to assuming their graduate assignments. For those faculty who possess a terminal degree in one discipline but whose research has relevance in a second discipline, the department/school chair or relevant supervisor must submit a letter of justification to accompany the graduate certification form. For those faculty who do not possess a terminal degree but who have been appointed in recognition of their exceptional scholarly or creative activity or their professional expertise, the department/school chair or relevant supervisor must submit the Exceptional Certification of Faculty for Graduate Instruction form to the Office of the Provost and Vice President for Academic Affairs in accordance with the policy on Academic and Professional Preparation Requirements for Faculty. Research faculty who are not affiliated with a specific department/school and college shall have their credentials reviewed in consultation with the department/school and college most closely aligned with their research. Each college's graduate certification standards shall ordinarily be recognized reciprocally by the other academic colleges.

#### A. Role of the Graduate Committee

1. Each college must form a graduate committee, whose major duties include reviewing graduate degree curricula to ensure compliance with existing University policies and procedures, developing new college graduate policies and procedures, and certifying faculty for graduate instruction.
2. The college graduate committee will consist of graduate-level faculty from each department/school and independent program in the college. The associate dean or graduate administrator responsible for graduate studies in the college will serve as a non-voting ex-officio member of the committee.
  - a. Faculty in the college will be notified of the committee meetings, agenda items, decisions and other aspects affecting graduate programs in a timely manner.
  - b. Faculty will be afforded opportunities to attend meetings and to provide input on pending issues and other concerns related to the work of the committee.

#### B. Levels of Certification

1. Level I certification recognizes faculty who meet standards for scholarly and/or creative research productivity as specified by the college in which they are appointed. Faculty certified at Level I are eligible to participate in all levels of graduate education, including chairing and serving on doctoral dissertation committees and master's thesis committees.

2. Level II certification recognizes faculty who are engaged in scholarly and/or creative activity but who do not meet the minimum standards for Level I certification. Faculty certified at Level II are eligible to participate in selected levels of graduate teaching as defined by the college in which they are appointed. They may not chair doctoral dissertation or master's thesis committees, although they may serve on these committees.
3. Level III certification recognizes faculty who possess a terminal degree but who, in lieu of measurable research activity, possess advanced professional expertise in a particular field. Faculty certified at Level III are eligible to teach specific graduate-level courses germane to their professional expertise. They may not chair doctoral dissertation committees or master's thesis committees, although they may serve on these committees if their particular expertise is warranted with the approval of the department/school graduate committee, the college graduate committee, the dean (or designee), and the provost and vice president for academic affairs (or designee).

**C. Process for Certification**

1. Faculty must be certified for graduate instruction every five years. At the end of the initial approval period, a review is made by the appropriate department/school and college graduate committee for renewal of the certification. Specific certification standards at Levels I, II, and III are to be set by the individual colleges.
2. Initial Certification
  - a. Criteria
    - i. All faculty, full-time and part-time, who are certified for graduate instruction at Levels I, II, or III must have a terminal degree in the field of specialization as defined by the discipline.
    - ii. Faculty certified at Level I must show evidence of substantial scholarly and/or creative activity as defined by the discipline and the college in which they are appointed.
    - iii. Faculty certified at Level II must show some evidence of scholarly and/or creative activity as defined by the discipline and the college in which they are appointed.
    - iv. Faculty certified at Level III must show evidence of specific professional expertise.
  - b. Procedure
    - i. After reviewing the candidate's qualifications, the appropriate department/school submits the [Certification of Faculty for Graduate Instruction](#) form and the necessary documents (C.V., letter of justification, if relevant) to its college graduate committee for evaluation and recommendation for approval.



- ii. The college graduate committee submits to the dean (or designee) the completed [Certification of Faculty for Graduate Instruction](#) form and required documentation of qualifications of those faculty deemed eligible for certification and informs the department/school of its decision.
- iii. The dean (or designee) either approves or disapproves the recommendation and informs the college committee and the department/school of the decision. The dean (or designee) forwards a copy of the Certification of Faculty for Graduate Instruction form and required documents to the provost and vice president for academic affairs (or designee).
- iv. If questions arise concerning the qualifications of faculty for certification, these must be addressed to the prior level of recommendation for approval. Attempts should be made to resolve them among the recommending and approving authorities. An appeal may be made to the provost and vice president for academic affairs (or designee) if these efforts fail to resolve the problem.

3. Recertification

a. Criteria

- i. Faculty recertified at Level I must show continued evidence of scholarly and/or creative activity and, where appropriate, satisfactory teaching at the advanced level in the discipline and success in chairing completed dissertations, theses, or their equivalents.
- ii. Criteria for recertification at Level II include satisfactory teaching at the advanced level in the discipline, some evidence of scholarly and/or creative activity as defined by the discipline, and evidence of professional contributions to the discipline.
- iii. Criteria for recertification at Level III are the same as for the initial period of certification.

b. Procedure – see procedure under Initial Certification above.

**D. Exceptions and Termination**

1. Exceptions to this policy, for example, duration of certification and/or substitution of equivalent qualifications, will be granted only in extraordinary circumstances affecting the faculty member that can be documented in writing by the program and/or department/school. Such exceptions require the approval of the appropriate department/school committee, the college graduate committee, the dean (or designee), and the provost and vice president for academic affairs (or designee). However, any approved extension to a tenure-seeking faculty member's probationary period will automatically extend their graduate certification by the same period.

2. Under circumstances that hamper the performance of all scholarly and/or creative activity (e.g., a public health emergency), the provost and vice president for academic affairs (or designee) may extend the duration of graduate certifications for all faculty.
3. Failure to maintain the required level of creative, scholarly and/or professional activity and satisfactory teaching performance will result in termination of certification for graduate instruction.
  - Approved by the provost and vice president for academic affairs  
September 5, 2003  
Revised and approved by the president  
July 7, 2006  
May 21, 2014  
April 6, 2017  
February 21, 2021

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† Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Chief Departmental Advisor – Undergraduate Education<sup>†</sup>

### A. Introduction

Each college at Old Dominion University has the authority to design administrative and advising models that best support the needs of students and programs in each college. The most common departmental advising model is the appointment of a chief departmental advisor (CDA).

The CDA serves as the departmental lead in providing advising services to majors and minors and working with the faculty advisors to ensure everyone is current on University advising policies and procedures. The CDA assists the department chair in additional activities related to advising undergraduate students, retention initiatives, and other related areas.

### B. Appointment

1. CDAs are appointed by the chair, dean, or provost and vice president for academic affairs, depending on where the program is housed.
2. The length of the appointment is for three years. Additional three-year appointments are based on satisfactory annual performance evaluations. There is no limit to the number of three-year appointments for a CDA.
3. The CDA and the chair or dean shall develop a clear written job description to include the expectations, duties, and responsibilities for both parties, a plan for regular consultation, the compensation plan, and criteria for the annual evaluation.
4. The expectation is that the CDA should be a full-time faculty member from the program or department in which the program is located. In instances where it is necessary or desired to appoint a CDA who is not a faculty member, the appointment must be approved by the dean or provost and vice president for academic affairs.
5. The CDA for programs located within a single department will be appointed by the department chair after consultation with the other full-time faculty in the program and with the approval of the academic dean in whose college the program is offered.
6. In the case of multidisciplinary programs within colleges, the CDA will be appointed by the dean of the college, who has administrative responsibility for the program in consultation with the deans of other colleges.
7. In the case of multidisciplinary programs that involve more than one college, the CDA will be appointed by the provost and vice president for academic affairs or designee after consultation with the chairs and deans of the participating departments and colleges.
8. The Office of Academic Affairs will be provided with a copy of the appointment letter and agreement signed by all appropriate persons for review and record purposes.

### C. Duties and Responsibilities

The duties of the CDA depend upon a number of factors and will be determined by the administrator making the appointment. Baseline duties that are considered as areas of responsibility for the CDA are as follows.

**Mentoring and Advising:** assist students with setting academic and career goals, review plans of study, assist with student requests for exemptions to degree requirements and waivers, and consult with the [Office of the University Registrar's](#) graduation clearance designee when student issues arise.

**Problem Resolution:** assist students by referring them to resources for resolution to academic policy and procedural issues that may occur.

**Major and Minor Declaration:** serve as the point of contact for students declaring the major or minor unless this is done centrally through the [Advising Center](#) within the college.

**Continuance:** work with the department chair, undergraduate program director/assistant chair, or Advising Center director to monitor students' academic progress in the major, minor, or college.

**Coordination of Departmental Advising:** serve as the lead in providing advising services to majors and minors, working with the faculty advisors to ensure everyone is current on University advising policies and procedures, in consultation with the associate dean and the director of advising for the college. Assist/conduct training, provide support, and periodically review the advising system within the program. Keep abreast of the use of new technologies in advising and training others in the program on this technology. Ensure that faculty assignments to advisees are managed so that all students have an academic advisor.

**Summer Advising:** coordinate advising to students in summer months, ensuring that weekly advising appointments can be scheduled (where applicable and resourced through stipends).

**Transfer Course Management:** serve as program contact for reviewing whether courses transfer to ODU (unless otherwise provided by the chair or undergraduate program director).

#### **D. Release Time and Compensation**

1. The amount of release time and other compensation, such as a summer stipend, will vary with the size and scope of the program and the duties established in section C above. Summer stipends are expected for CDAs who do summer advising, Preview sessions, and transfer student review and advising. This stipend will be paid by Academic Affairs.
2. A CDA normally is provided with release time for this function. Unless there are exceptional circumstances, academic year stipends (if provided) should be alternatives to course releases, not granted in addition to course release. However, chairs or undergraduate program directors who are functioning as the CDA might be offered a stipend instead of an additional course release.
3. Course releases ordinarily should be three credit hours per year if the annual FTEs are under 200, with a recommended six credit hours per year if the total FTEs are higher. If an exception is needed, such as a CDA for a beginning program, exceptionally large programs,

or when there are other complexities, the dean can apply to the provost and vice president for academic affairs for the exception.

**E. Evaluation and Performance**

1. Written performance evaluations are expected as part of the regular annual evaluations. The performance evaluation must be based on the criteria set and agreed to by the appointing person.
2. The evaluation is usually completed by the person to whom the CDA reports to in this capacity.

- Approved by the president  
March 3, 2018

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† Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Undergraduate Program Director<sup>†</sup>

### A. Introduction

The primary role of the Undergraduate Program Director (UPD) is to assist the department Chair with the undergraduate programs located within a single college or Provost and Vice President for Academic Affairs for multidisciplinary undergraduate programs and to determine that policies and procedures outlined in the [Undergraduate Catalog](#) are followed by all program area faculty and students. Additionally, an Undergraduate Program Director facilitates faculty engagement in program activities related to marketing and recruiting, and issues related to the academic program integrity, such as curriculum development, program assessment, course scheduling, identification of qualified adjuncts, and other areas. The Undergraduate Program Director reports to the department Chair, Dean (or designee), or the Provost and Vice President for Academic Affairs (or designee). Undergraduate Program Directors serve in a distinct role separate from the Chief Departmental Advisors, who focus on the recruitment, advising, and retention of students, and Assistant Chairs, who focus on the administration of University and college policies at the departmental level.

### B. Appointment and Reappointment

The Undergraduate Program Director should be a full-time faculty member from the program or department in which the program is located. An Undergraduate Program Director may need to be tenured or tenure-track if indicated in accreditation requirements. Many undergraduate programs are implemented and administered within a single department, while others are multidisciplinary in nature and involve the cooperative efforts of several individual departments or colleges. Due to these variations, some Undergraduate Program Directors report directly to a particular department Chair, while others report directly to an academic Dean (or designee) or the Provost and Vice President for Academic Affairs (or designee). The delineation of administrative authority should be established at the time of appointment and clearly understood by all.

In the case of programs located within a single department, the Undergraduate Program Director will be appointed by the department Chair after consultation with the full-time faculty in the program and with the approval of the academic Dean in whose college the program is offered.

In the case of multidisciplinary programs within a college, the Undergraduate Program Director will be appointed by the Dean of the college, who has administrative responsibility for the program, after consultation with the Chairs of participating departments and full-time faculty in the program and Deans of other colleges, if necessary.

In the case of multidisciplinary programs that involve more than one college, the Undergraduate Program Director will be appointed by the Provost and Vice President for Academic Affairs (or designee) after consultation with the affected full-time Chairs, Deans, and full-time faculty of the participating departments.

At the time of appointment, the Undergraduate Program Director and the Chair from a single department, or the Dean or Provost and Vice President for Academic Affairs from multidisciplinary programs, should develop a plan for regular consultation and a written position description that provides a clear understanding of the expectations for both parties about the duties and compensation, along with criteria for the annual evaluation. The Office of Academic Affairs will be

provided with a copy of the appointment letter or memorandum after approval by the Dean (or designee) for review and record purposes.

An Undergraduate Program Director shall be appointed by and serve at the pleasure of the Chair or appropriate administrative supervisor and shall ordinarily be appointed to a term of three years with the possibility of renewal. Evaluation for reappointment typically begins in the third year with solicitation of input from the program faculty and other relevant sources. An Undergraduate Program Director may ordinarily serve no more than two consecutive terms; however, the Chair or the appropriate administrative supervisor may reappoint the individual for an additional term subject to the approval of the Dean or the next level of administrative supervisor. An appointment exceeding three consecutive terms may be made only with the additional approval of the Provost and Vice President for Academic Affairs (or designee).

### C. Duties and Responsibilities

The duties of an Undergraduate Program Director depend upon a number of factors: particular discipline, size of the program, number of academic programs covered by the Undergraduate Program Director, and degree of staff support. While the ultimate responsibility for a curriculum rests with departmental faculty, who may serve on specific committees or who may otherwise assist in various capacities, managing some or all of the following areas of responsibility are examples of duties for the Undergraduate Program Director:

**Program Marketing and Recruitment** – collaborate with the department Chair, Chief Departmental Advisor, [Student Engagement and Enrollment Services](#), the [Office of Admissions](#), and the Division of [Digital Transformation and Technology \(ODUGlobal\)](#) to plan, initiate, and maintain contact with prospects, prepare the content of promotional materials, and maintain the program website.

**Admission to Program** – where applicable, work with the Office of Admissions, the program admissions committee, and the Chief Departmental Advisor to coordinate application review, admissions decisions, and communication with admitted students. Assist the department Chair with the establishment of program capacity and manage enrollment.

**Program Policies** – may maintain the program policies and disseminate student guidelines.

**Curriculum Review** – work with the department Chair to revise and update the [Undergraduate Catalog](#) content, including all curricular changes, new course proposals, and old course deactivations.

**Scheduling** – advise the department Chair or appropriate administrative supervisor on course demands and scheduling each semester and assist with the hiring of adjuncts and assignment of courses to faculty and adjuncts.

**Program Assessment** – work with the department Chair or appropriate administrative supervisor and the [Office of Institutional Effectiveness and Assessment](#) to coordinate annual program evaluations to meet the requirements of accrediting bodies and the [State Council of Higher Education for Virginia \(SCHEV\)](#).

**Advising** – support the advising responsibilities of the faculty within the department and serve as the point of contact for transfer course evaluations and management of articulation agreements. This task may also be conducted by or in collaboration with the Chief Departmental Advisor.

**Problem Resolution** – assist the Chair in addressing instructor teaching questions and concerns and student questions and concerns, which may include directing them to a relevant office, contact, or policy.

#### **D. Release Time and Compensation**

The amount of release time and other compensation, such as a summer stipend, will vary with the size and scope of the program and the duties established, as discussed in section C (above). An Undergraduate Program Director is normally provided with release time and/or a stipend for this function. Summer stipends are expected for Undergraduate Program Directors who do summer program management of programs with an FTE exceeding 50. This stipend will be paid by Academic Affairs. Undergraduate Program Directors with dual roles, in which they are also functioning as Chief Departmental Advisors or Assistant Chairs might be offered a stipend instead of an additional course release. Course releases ordinarily should be three credit hours per academic year if the annual program FTEs are under 300 and three credit hours per semester if the annual program FTEs are above 300. When a new program is being started, or a program has other complexities (e.g., a program is being developed, and [SCHEV](#) proposal prepared, the program is exceptionally large, a program is seeking accreditation), the Dean can make exceptions for additional compensation.

#### **E. Evaluation of Performance**

The primary person responsible for evaluating the performance of the Undergraduate Program Director will be the person to whom the Undergraduate Program Director reports, as indicated in section B (above), and will include input from the program faculty and academic Dean. It is expected that a portion of the annual faculty evaluation of the Undergraduate Program Director will be devoted to the performance in that capacity.

- Approved by the President  
February 17, 2021  
Revised October 20, 2023

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† Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies



### **III. ACADEMIC POLICIES**

#### **Notifying the Southern Association of Colleges and Schools Commission on Colleges (SACSCOC) of Substantive Change (University Policy, #1800)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/1000/1800>

## General Statement on Program Review

**Statement:** Institutional vigor, integrity, and distinction are dependent in good measure on a regular and critical review of ongoing programs. This process should not be prompted solely by the imperative of visitations by professional, regional, or national accrediting agencies. The University should regularly affirm that its academic offerings continue to serve the legitimate professional, intellectual, and aesthetic needs of the community and region that it serves. Refinement and redefinition of the types and scope of programs should reflect changing societal needs while maintaining the selective educational core undergirding all baccalaureate programs and the selective and distinctive character and quality of graduate programs. Old Dominion University subscribes to this principle and shall continue to pursue a regular schedule of assessment.

A new impetus has been added to the need for program review. Universities are being confronted not only by changes in student demographics and societal needs but also by decreasing fiscal resources. The result is an added objective for program review. Besides identifying weak programs or programs that are no longer relevant, the developing need to reduce the scope of institutional offerings will require that choices be made between and among programs. Selective program curtailment or discontinuation will be necessary in order to maintain the level of support and excellence of the remainder.

The policy is designed to describe the process and the basis for making the choices. It is recognized at the outset that there is no simple way to quantify the inherent value of a discipline. The criteria are intended to explore each program in terms of the University mission, student demand, program interrelationship, cost factors (productivity), and the impact of program curtailment or discontinuation. Based on the responses and subsequent to broad-based institutional discussions, judgments will be made. While prompted by fiscal constraints, it is clearly understood that University status dictates that some program judgments will represent educational objectives and values and resource allocations, which mitigate comparison with the cost and other factors of other programs. The continuing objective of the assessment process is to retain the appropriate balance among academic programs, research, enrichment activities, and public service. In sum, the changing environment requires a dynamic and timely response in order to maintain levels of excellence and to fulfill the mission of the University.

- Approved by the president  
October 1, 2003

## **Policy for the Review of Academic Programs, Departments, or Colleges for the Purpose of Possible Curtailment or Discontinuance**

**(Board of Visitors Policy, #1462)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/bov/board-of-visitors-policy-1462>

## Guidelines for the Establishment of University Centers and Institutes

A proposed University center or institute should include one or more academic discipline areas which are to receive special emphasis by the institution because of their relevance to the overall mission and goals. Those who propose the establishment of a University center or institute should prepare, after preliminary discussion, a formal proposal and submit it through the appropriate academic and administrative channels. Establishment of a center or institute requires the written approval and commitment of the provost and vice president for academic affairs.

The proposal for the justification of a new University center or institute must specifically address the following areas:

1. How will the purposes and activities of the center or institute address an academic need and the mission of Old Dominion University?
2. What are the expected specific outcomes of the center or institute?
3. What is the rationale for establishing a center or institute?
4. Why does it need to be created in order to attain what specific goals and objectives?
5. What are the organizational and operational aspects of the proposed center or institute?
6. What are the cost and revenue projections for a five-year period of time, including space, library materials and services, equipment, personnel, and nonpersonal services?

- Approved by the provost and vice president for academic affairs  
October 16, 1984  
Under Review May 16, 2022

## Policies and Procedures for Academic Degree Program Approval

The policies and procedures for program approval are established by the [State Council of Higher Education for Virginia \(SCHEV\)](#) as part of its effort “to promote the development and operation of an educationally and economically sound, vigorous, progressive, and coordinated system of higher education in the state of Virginia” (Code of Virginia). These policies and procedures are intended to provide a systematic process for planning and initiating new academic programs.

Details regarding program proposals and procedures for review are contained in the Undergraduate and Graduate Curriculum Development and Change Policies and Procedures Manuals, which are available on the University’s website at [www.odu.edu/acadaffairs/faculty-resources](http://www.odu.edu/acadaffairs/faculty-resources) or from the vice provost for academic affairs.

- Approved by the provost and vice president for academic affairs  
September 5, 2003  
Reviewed; No Changes Proposed April 20, 2022

## Definition of the Credit Hour

In accordance with federal regulations, a credit hour is an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency reasonably approximating: A) Not less than one hour of faculty instruction (whether by classroom contact or by distance modes such as online podcasts) and a minimum of two hours of additional student work each week (such as reading or research) for approximately 15 weeks for one semester or trimester hour of credit, or 10 to 12 weeks for one-quarter hour of credit, or the equivalent amount of work over a different amount of time; or B) At least an equivalent amount of work as required in item A of this definition for other academic activities as established by the institution including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours.

- Approved by the President  
November 11, 2011  
Reviewed; No Changes Proposed April 20, 2022

## Guidelines for Noncredit Courses Simultaneously Offered as Credit

Old Dominion University offers noncredit courses in a variety of areas. These courses may be evaluated by an academic department to determine whether or not they might also be offered for academic credit. When the department has deemed that the noncredit course is equivalent to a designated credit experience (including appropriate contact hours as stipulated by the U.S. Department of Education and achievement of suitable learning outcomes), the academic department will submit the class to the [Office of the University Registrar](#) for scheduling during established class dates and times (or seek approval from the Office of Academic Affairs if they will not be offered during established dates and times).

In addition, the academic department must evaluate the faculty member's credentials for courses scheduled for academic credit. If a noncredit course is offered for credit at the graduate level, the faculty member must be certified to teach at this level. Questions about such credentials may be directed to the [Office of Institutional Effectiveness and Assessment](#).

Faculty should include a statement in the syllabus for all classes offered as both noncredit and credit coursework. This statement informs students that the course is offered in both formats and enrollment cannot be changed after the drop deadline. Further, the syllabus should state that the noncredit course will not meet undergraduate or graduate degree requirements.

Full-time faculty in academic departments may teach such noncredit/credit courses outside their contractual teaching load, with approval by the department chair and the dean. The [School of Continuing Education](#) will pay faculty for noncredit/credit offerings; the academic department offering the course for credit will not submit a payroll form for this instruction.

Documentation related to noncredit courses meeting credit course offerings, as well as faculty credentials, will be maintained by the department offering courses for credit.

- Approved by the President  
December 11, 2017  
Reviewed; No Changes Proposed April 20, 2022

## Policy on Certificate Programs

Old Dominion University offers a variety of certificate programs that meet the same high-quality standards as its academic degree programs while addressing the specific needs of students and professionals. Certificates may be pursued in conjunction with or independent from graduate or undergraduate degree programs.

Certificate programs offered by Old Dominion University include the following:

### **Credit-Bearing Programs**

**Certificate programs:** These programs are available for those seeking a formal award certifying completion of undergraduate- or graduate-level work in academic or occupational fields of study. Such certificates are ideal for individuals who wish to explore areas of professional interest or for those who need to fulfill accreditation requirements. Such programs generally include a minimum of nine credit hours and a maximum of 21 credit hours. An overall grade point average of 2.0 or above in all courses specified as a requirement for the certificate is required for the award of an undergraduate certificate. An overall grade point average of 3.0 or above in all courses specified as a requirement for the certificate is required for the award of a graduate certificate.

**Certificate of Advanced Graduate Studies (CAGS):** The curriculum in such programs is designed for those seeking a formal award certifying completion of study beyond the master's level in an academic or occupational field of study. These programs are usually intended for professional licensure or professional development and may be completed prior to or concurrent with doctoral studies for those interested in such pursuits. The programs generally require a minimum of 24 credit hours.

The [Curricular Request Form](#) must be completed for all new, revised, or discontinued credit-bearing certificate offerings and submitted to appropriate parties for approval within six months of program initiation or discontinuance. Following approval of the Provost and Vice President for Academic Affairs, proposals for new certificate programs are submitted to the [State Council of Higher Education for Virginia \(SCHEV\)](#) for final approval.

Faculty in departments offering certificates will identify residency requirements for all prescribed coursework. The [Office of the University Registrar](#) confers certificates to those who have met the requirements for these programs. The Office of Academic Affairs is responsible for working with unit heads, chairs, and deans to evaluate certificate programs.

### **Noncredit-Bearing Programs**

**Certificate programs:** Noncredit certificates in specific fields may be offered and awarded by colleges, the [School of Continuing Education](#), and the University upon approval by the appropriate faculty and administrators. These programs are designed to provide continuing education experiences to individuals or groups, usually in a specific profession or vocation. Content in these offerings alone will not meet the requirements of credit-bearing coursework unless otherwise specified. The Office of Academic Affairs is responsible for working with the School of Continuing Education or relevant academic units to evaluate noncredit-bearing certificate programs.



The design of all noncredit certificates must follow University guidelines as established by the Office of Academic Affairs.

- Approved by the President  
October 17, 1978; Revised May 21, 2014  
Revised February 27, 2017  
Revised May 16, 2022

## Approval of Curricular Changes, New Courses, and Course Changes<sup>†</sup>

### A. Curricular Changes

1. Significant curricular changes, such as the implementation or discontinuation of a major, concentration, minor, or certificate, modifications to existing programs (changes in credit hours, delivery modes, focus of program), degree policies or changes that exceed the University's minimum, or other substantial changes in curriculum will not be implemented without the approval of the Provost and Vice President for Academic Affairs or designee. Curricular changes must be submitted using the [Curricular Change Form](#). New minors or changes to minors must be submitted on the [Proposal for a New Minor, New Interdisciplinary Minor, or Significant Changes to an Existing Minor form](#).
  - a. Recommendations at the appropriate department/school, college, and University levels will precede the decision by the Provost and Vice President for Academic Affairs or designee. This process includes department/school Chairs, department/school and college governance committees related to curriculum, the Dean or designee of the academic college, and the [Faculty Senate](#) (when applicable, such as for general education requirements) or comparable approving bodies for programs not housed in a specific department/school or college.
  - b. In addition, all proposed changes in curriculum that rely upon the resources of another college or department/school will require consultation and agreement by the providing unit prior to approval by the Office of Academic Affairs.
2. All curricular changes will be fully documented and indicate all approvals. At a minimum, this documentation will include a full description of the change, rationale, resources needed, if applicable, and implementation process, which will include a plan for notification of students and a timetable, if applicable.
3. Approved changes will be effective with the publication of the next [Catalog](#). Changes shall not normally be applied to students graduating under earlier Catalogs.
4. Changes may not be accepted during the Catalog preparation period. Curricular changes that are intended to be effective at the beginning of the following academic year should ordinarily be submitted by December 10.

### B. Credit-Bearing Courses

All requests for new credit-bearing courses or course changes must be submitted electronically using the [University's Catalog management system](#). After the initial submission, new course and course change requests proceed through an electronic workflow consisting of the department/school Chair, the College Curriculum Committee (graduate or undergraduate), the college Dean designee (graduate or undergraduate), the Catalog administrator in Academic Affairs (graduate or undergraduate), and the [Office of the University Registrar](#). In addition, general education courses at the undergraduate level must be approved by Committee A of the Faculty Senate; the committee is included in the electronic workflow for these courses.

1. Changes in courses and course deactivations that are offered as service courses or requirements for majors in other departments/schools should be discussed with the Chairs of such departments/schools prior to submission.
2. Requests for changes in existing courses to be active for the next academic year should ordinarily be submitted by December 1. Approved changes in existing courses will be effective with the publication of the next [Catalog](#). Requests for new courses may be submitted at any time; these will be effective no sooner than the next semester.
3. The Office of Academic Affairs will identify courses not offered for five years and inform the affected department/school Chair and Dean that the courses will be deactivated. These courses will remain active only upon the request of the department/school Chair and approval from the Office of Academic Affairs.

#### **C. Noncredit Courses**

All requests for new noncredit courses or course changes must be submitted electronically using the University's registration system for noncredit courses. Requests are submitted to the [School of Continuing Education](#) after review and approval by the appropriate Budget Unit Director or designee.

- Approved by the President  
January 22, 1988  
Revised August 4, 1996  
Revised October 28, 2004  
Revised April 9, 2007  
Revised October 17, 2012  
Revised May 25, 2021

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† Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Policy On Accelerated Courses<sup>†</sup>

This policy is based on the following general principles:

- A. The University is committed to giving faculty the flexibility to deliver instruction in a variety of traditional and nontraditional formats.
  - 1. The University provides and supports the traditional semester credit courses of 15 weeks of instruction during the fall and spring semesters, eight weeks of instruction during the fall and spring, and courses of varying lengths during the summer sessions. Accelerated courses are defined as credit courses provided in a shorter time frame and must meet the following guidelines.
- B. Guidelines
  - 1. Accelerated courses should be clearly the academic equivalent of courses taken on the normal semester schedule.
    - a. Traditional lecture courses require students to spend approximately two hours of preparation, research, or writing time outside of class for each one hour of class time.
    - b. Laboratory courses usually require less out-of-class time, but the in-class time is greater, usually twice as many contact hours as would be expected in a lecture course.
  - 2. No more than one-semester credit can be earned in a week or weekend of instruction if the entire work of the class is contained in that week or weekend.
    - a. Under unusual circumstances, and only upon the approval of the Dean of the college, two hours of credit may be offered in a single week or weekend.
    - b. The Chair must provide the Dean with the proposed syllabus, a written evaluation of the proposed accelerated course comparison with the same or similar course that is conducted during the usual time frame, and other evidence of its suitability for acceleration. Other evidence to be provided includes the following.
      - 1. The course is of a highly intensive nature, and the students admitted to the course are carefully picked for their ability to handle such an intensive program, or
      - 2. The course required graded work done prior to or subsequent to the week or weekend of classroom instruction so that the total amount of work required for the course is the clear equivalent of the same number of semester hours during a regular session.
  - 3. If any request is submitted for offering a course at a rate of more than two hours of credit per week or weekend of class sessions, prior approval of the Provost and Vice President for Academic Affairs is required. Such approval will only be given upon clear evidence that

substantial work is required of the student outside of the week or weekend of classroom instruction, and the course is clearly equivalent to similar courses offered in the regular session.

4. In cases of dispute, an appeal may be made to the Provost and Vice President for Academic Affairs. The decision of the Provost and Vice President for Academic Affairs is final.

- Approved by the Council of Academic Deans & Provost and Vice President for Academic Affairs  
June 21, 1977
- Approved by the President  
November 28, 2012  
Revised July 15, 2022

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† Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

# Course Materials Adoption Policy

([Board of Visitors Policy](#))

**NUMBER:** 1419

**APPROVED:** April 25, 2019

## I. Policy Statement and Purpose

In accordance with the Code of Virginia §23.1-1038, it is the policy of Old Dominion University to encourage efforts to minimize the cost of course materials for students while maintaining the quality of education and academic freedom. In addition, pursuant to §23.1-1308, Old Dominion University shall implement guidelines for the adoption and use of low-cost and no-cost open educational resources in courses offered at the University.

## II. University Compliance

To the maximum extent practicable, each institution of higher education receiving Federal financial assistance shall disclose, on the institution's Internet course schedule and in a manner of the institution's choosing, the International Standard Book Number (ISBN) and retail price information of required and recommended college textbooks and supplemental materials for each course listed in the institution's course schedule used for preregistration and registration purposes.

Pursuant to § 23.1-1038.3:1 of the Code of Virginia, no employee at Old Dominion University shall demand or receive any payment, loan, subscription, advance, deposit of money, services or anything, present or promised, as an inducement for requiring students to purchase a specific textbook required for coursework or instruction, with the exception that the employee may receive

- A. sample copies, instructor's copies, or instructional material, not to be sold, and
- B. royalties or other compensation from sales of textbooks that include such instructor's own writing or work.

Faculty members may require course materials they have authored or co-authored for classes they teach. However, the selection of one's own course material should be communicated to the department chair (or the Dean if the faculty member teaching the course is the chair) prior to adoption. The chair should determine that the course materials are appropriate for that class and keep a copy of the communication in the department file.

## III. Definitions

- A. **Course materials** - For the purpose of this policy, course materials include but are not limited to textbooks, articles, videos, streaming media, software applications, and/or media bundles designed to be used in a course to introduce students to a subject or continue basic instruction at the intermediate or advanced level. Commonly, although not always, course materials include study questions, discussion topics, study guides or exercises at the end of each chapter and may be published in subsequent editions in order to update information in

previous editions. Course materials may be designed for use in undergraduate courses, graduate courses, or for use in professional programs.

- B. **Open Education Resources** – For the purposes of this policy, the definition of the U.S. Department of Education is followed. Open education resources (OER) are openly licensed educational resources as teaching, learning, and research resources that reside in the public domain or have been released under a license that permits their free use, reuse, modification, and sharing with others.
- C. **Open Education Resources Committee** – The University-level committee that establishes overall policy and guidelines for implementation and expansion of OER course materials in accordance with existing University policies.

#### **IV. Open Education Resources (OER) Adoption Practices**

- A. To reduce costs and provide access to course materials, faculty and departments are encouraged to use open education materials in their courses to minimize the costs of course materials for students.
- B. Faculty are encouraged to adopt or adapt existing, or create new OER, including open textbooks.
- C. Faculty and departments who develop OER can have those resources digitally stored at Old Dominion University.
- D. The Libraries and Academic Affairs, where feasible, will provide resources and training for faculty to identify and use open education resources.
- E. A University OER Committee will be responsible for coordinating the expansion of OER materials across the University.

#### **V. Additional Actions to Minimize the Cost of Course Materials for Students**

- A. Course materials and related class supplies shall be part of the financial aid Cost of Attendance budget used to award financial aid to students.
- B. Faculty are encouraged to utilize the ODU Libraries' collection and electronic books, journals, image databases, audio and video materials, and other supplemental items available.
- C. Faculty are encouraged to limit their use of new edition non-OER textbooks when previous editions do not significantly differ in a substantive way. The appropriate faculty and the University Village Bookstore should ensure adequate supply of the older edition. Faculty members are also encouraged to adopt the best practice of using the same non-OER textbooks for consecutive semesters. Except in unusual circumstances, non-OER textbooks used in sequential courses (e.g., PHYS 101N and PHYS 102N) should not be changed after the first semester.
- D. Faculty are encouraged to use new technologies and packaging techniques such as e-text and bundles that reduce the cost of course materials to students.

- E. Faculty are encouraged to provide instructional materials for students to use through their respective departments and/or the ODU Libraries.
- F. No funds provided for financial aid from University Village Bookstore revenue shall be counted in the calculation for state appropriations for student financial aid.
- G. Faculty should avoid requiring students to purchase materials that will not be used for pedagogical purposes in their courses. For instance, faculty are discouraged from requiring students to purchase technology or software simply to track attendance.
- H. Courses with zero- or low-cost educational resources should be advertised to students.

## **VI. Responsibilities of the Faculty**

- A. Faculty, departments and/or schools should provide required or assigned OER and non-OER course materials information for each particular course to the University Village Bookstore by the specified due date published by the University Village Bookstore. Exceptions will be made for faculty who are hired or assigned after the course adoption due dates. Chairs are encouraged to make the appropriate course adoption adjustments as soon as possible in these cases.
- B. Faculty members shall affirmatively confirm their intent to use each item in a bundled package when placing an adoption for such a package. If the faculty member does not intend to use all items in the bundle, he/she shall notify the University Village Bookstore of the items required, and the Bookstore shall order the individualized items when the store's procurement is cost effective for both the institution and students and such items are made available by the publisher.
- C. Departments offering courses that have adopted OER course materials should submit an OER course material adoption report to the Assistant Vice President for Auxiliary Services.
- D. Instructors of courses adopting OER course materials should post the resources online prior to the beginning of the semester and notify students in the class how to access it.

## **VII. Responsibilities of the University Village Bookstore**

- A. The University Village Bookstore Textbook Manager will communicate the requirements and due dates for course adoptions each academic session. Follow-up communications will be sent to the department chairs and the faculty if the requested materials are not available from the publisher or obtained in a timely manner.
  - 1. The University Village Bookstore continuously works directly with instructors and departments to collect adoptions throughout the process.
  - 2. The OER course material adoption report should be submitted prior to the beginning of the semester.



3. Leading up to and after the due date passes, a course material adoption report is sent to the Assistant Vice President for Auxiliary Services and the Provost's Office to be forwarded to the deans and chairs. This process continues through the beginning of classes each semester.
  4. Approximately one month after the start of the fall and spring semesters, the University Village Bookstore alerts the Provost's Office about textbook submissions. The Provost's Office sends an email to deans, chairs, and instructors informing them that it is time to submit course material orders for the next semester to the University Village Bookstore.
- B. The University Village Bookstore shall provide a convenient course materials adoption process, including a web-based method, to expedite the ordering process for non-OER course materials.
  - C. The University Village Bookstore shall note courses that utilize OER course materials on the course materials website.
  - D. Centralized listings of course materials required or assigned for particular courses shall be available from the University Village Bookstore's website after the relevant instructor or academic department notifies the University Village Bookstore. The University Village Bookstore shall post the relevant information received from the faculty in a timely manner. The listings shall be in a standard format and include the International Standard Book Number (ISBN), when applicable, along with other relevant information.

#### **VIII. Responsibilities of the OER Committee**

The OER Committee reports to the Provost and Vice President for Academic Affairs on the development and enforcement of the University's Course Materials Adoption Policy. The Provost appoints Committee members, to include representatives from the faculty, University Libraries, Information Technology Services (ITS), University Bookstore, Institutional Effectiveness and Assessment, Student Engagement and Enrollment Services (SEES) representative (and/or student), Center for High Impact Practices (CHIP) representative, Center for Learning and Teaching (CLT), Center for Faculty Development, and senior University management. The Provost will solicit recommendations from the Deans for the faculty representatives, who will constitute the majority of the committee. The OER Committee may create subcommittees and task forces as needed to carry out its responsibilities.

Other Committee responsibilities include:

- A. Guiding updates to this policy.
- B. Developing strategies and actions, setting timelines, and determining outcomes that will advance the University's efforts to facilitate adoption of OER.
- C. Tracking local, national, and international developments within the area of OER.

- D. Implementing and coordinating a training program available to faculty on OER. Stimulating discussion, generating supporting material and developing venues for communication and education.
- E. Seeking collaborative ventures internally and with other institutions.
- F. Exploring and identifying possible high impact initiatives that the University could either launch or support, such as pilot projects that promote creation and/or adoption of OER.
- G. Consulting broadly with individuals, groups, and units as needed.

**IX. Contacts:**

The Office of the Provost and Vice President for Academic Affairs officially interprets this policy. The President may revise or eliminate any or all parts as necessary to meet the changing needs of Old Dominion University and the Commonwealth of Virginia.

## **Accommodations for Individuals with Disabilities**

**(University Policy, #5406)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/5000/5406>

## Honorary Degrees: Criteria and Procedures

([Board of Visitors Policy](#))

<b>NUMBER:</b>	1233
<b>APPROVED:</b>	August 9, 1979; Revised February 14, 1985; Revised February 13, 1986; Revised September 13, 2012; Revised December 10, 2020
<b>SCHEDULED REVIEW DATE:</b>	December 2025

### I. Purpose

Honorary degrees are awarded to bring national recognition to the University; recognize outstanding contributions to society through scholarship, artistic production, or humanitarianism; and recognize major contributions in areas relevant to the mission of the University through significant research or a career of dedicated service. Honorary degrees may be awarded at the University's commencements.

### II. Eligibility for Consideration

Since the recipients of honorary degrees will be forever associated with the University, recipients must be of sufficient stature and character so as to honor the University. Examples of such persons might be: prominent graduates, important business leaders, outstanding professional persons, leaders in public affairs, statesmen, prominent educators, outstanding humanitarians, and persons distinguished in the arts, sciences, and the humanities.

- A. There should be clearly outstanding achievement that demonstrates why these individuals should be recognized by Old Dominion University for their contributions to ODU or to society.
- B. Present employees of the University, emeriti faculty and former members of the board may only be considered for honorary degrees on an extraordinary basis. Current members of the Board of Visitors are not eligible to receive an honorary degree. Current and former benefactors of the University should be excluded unless they clearly meet the other criteria for being included for degree consideration. There should be no suggestion that an individual is being awarded an honorary degree because of his or her past or possible future financial contributions to the University.

### III. Selection Process

- A. The Honorary Degree Committee will be comprised of: four faculty members selected by the Faculty Senate, two students selected by the Student Government Association, one member of the Alumni Association selected by the Alumni Association, one member of the Board of Visitors appointed by the Rector, and one administrator appointed by the President. The Provost and Vice President for Academic Affairs shall serve as an *ex officio* non-voting member of the committee and shall be responsible for overseeing the nomination process.
  - 1. The President will designate the coordinator of the committee.

2. The names of committee members will be submitted to the President by the selection body by June 1.
- B. The committee will publicize the criteria and guidelines for making nominations. Nominations will be invited from all constituencies at the University, including the Board of Visitors.
- C. The committee will review and vote on nominations recommended for honorary degrees. The coordinator of the committee will submit the committee's recommendation, including the votes, to the President.
- D. The President will submit to the Board of Visitors for approval the names of the President's nominee(s) and recommend the appropriate degree(s) to be awarded.

#### **IV. Schedule and Procedure**

- A. The committee members are appointed and notified of the appointment by the President.
- B. The Honorary Degree Committee will be appointed and prepared to begin work by September 1.
- C. The President will submit the names of the nominees to the Board of Visitors for approval. The recipients approved by the Board of Visitors may be awarded their honorary degrees at one of the University's commencements. After approval by the Board of Visitors, the President shall contact the approved recipients concerning acceptance and conferral of the honorary degrees.

#### **V. Honorary Degree Types**

Among the appropriate honorary degrees to be awarded are:

Doctor of Fine Arts (D.F.A.)  
Doctor of Humane Letters (L.H.D.)  
Doctor of Letters (Litt.D.)  
Doctor of Music (Mus.D.)  
Doctor of Science (Sc.D.)

## **Closure of the University Due to Inclement Weather and Emergencies**

**(University Policy, #1020)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/1000/1020>

## IV. RESEARCH POLICIES

### University Research Administration

Sponsored program agreements and funding will be accepted and administered through the [Old Dominion University Research Foundation](#) or, under certain circumstances and with the approval of the vice president for research and economic development, through Old Dominion University.

The terms and conditions by which grants and contracts will be accepted and administered by the Old Dominion University Research Foundation are agreed to by the Board of Visitors, the president of the University through a designee, the vice president for research and economic development, and by the Board of Trustees of the Old Dominion University Research Foundation through their designee, the executive director.

Conditions of acceptance of grants and contracts by the Research Foundation are as follows:

1. The commitment of the University for each grant or contract shall be the responsibility of the vice president for research and economic development and the executive director of the foundation.
2. Members of the faculty and other employees and students of the University, as well as visitors and residents of the University, will participate in a project only with the approval of, and on terms and conditions satisfactory to, the vice president for research and economic development and the executive director of the foundation.
3. The supervisor(s) of each project shall submit reports as required by the sponsors through, or at the direction of, the respective department chair to the executive director of the foundation or designated foundation staff.
4. The University shall cause all discoveries, improvements, inventions, and copyright materials resulting from a project to be assigned to the foundation by the person(s) making such discovery, improvement, invention, or copyright.
5. Upon termination of each project, all notes, records, and data resulting from, or collected in the course of, the project shall belong to and shall be delivered, if so, requested to, the foundation, although the University may, if it desires, retain a copy of any or all such documents.

Regarding each accepted sponsored program agreement, the foundation will do the following:

1. Pay monthly to the University the relevant salaries and wages reimbursable under the terms and conditions of each grant or contract.
2. Procure and provide to the University all materials, supplies, apparatus, equipment, and other items as stipulated in the contractual agreement, with the exception that the University may itself make such purchases, providing that approval of the executive director of the foundation is obtained prior to each and every such purchase. If the University elects to purchase, as herein outlined, the foundation will reimburse the University for such cost upon presentation of proof of purchase.
3. Maintain and provide administrative support services related to activities such as agency reporting, travel, and human resources associated with the sponsored program.

The University will incur no other obligations or expenses, other than as stipulated in the approved budget of the grant or contract, without the written approval of the vice president for research and

economic development. All apparatus and equipment procured for a project by or at the expense of the foundation, except that which, pursuant to the foundation's contract with the sponsor, is the property of the sponsor, will at the termination of the project become the property of the [Old Dominion University Research Foundation](#).

In special cases, at the discretion of the vice president for research and economic development, some grants and contracts may be accepted through the [Old Dominion University Office of Administration and Finance](#). Examples of grants and contracts which may be accepted through the Office of Administration and Finance include those in which the agency requires, with accompanying documentation, that the University accept and/or administer the award and those in which the Research Foundation is ineligible to receive the award by virtue of its corporate status. Whenever possible, administration of the award will be achieved through the Research Foundation. In the event that administration is also constrained to the University, the Office of Administration and Finance will manage the award. This will be viewed as an exception to the normal procedure for grants management and will require consultation between the vice president for research and economic development and the executive vice president for administration and finance or their appointed staff.

Conditions of acceptance of grants and contracts by Old Dominion University through its designee, the vice president for research and economic development, are as follows:

1. The commitment of the University for each grant or contract shall be determined through consultation between the PI and the vice president for research and economic development, which should begin no later than 30 days prior to the proposal submission deadline. One of the conditions of acceptance is the identification of project dates prior to establishing an account to support project activities.
2. Faculty and other employees and students of the University, as well as visitors and residents of the University, will participate in a project only with the approval of, and on the terms and conditions satisfactory to, the vice president for research and economic development.
3. The supervisor(s) of each project shall submit reports as required by sponsors through, or at the direction of, the respective department chair to the administrative office charged with the management of the sponsored program.
4. The University shall cause all discoveries resulting from a project to be assigned to the University or the Research Foundation by the person(s) making such discovery, improvement, invention, or copyright.
5. Upon termination of each project, all notes, records, and data resulting from, or collected in the course of, the project shall belong to, and shall be delivered, if so, requested to, the vice president for research and economic development or his/her designee.

- Approved by the president  
October 1, 2003  
Revised July 17, 2006



## **Facilities and Administration Cost Recovery**

The policy can be found at the following link:

<http://www.odu.edu/facultystaff/research/forms-policies-procedures>

## **Policy on Intellectual Property**

**(Board of Visitors Policy, #1424)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/bov/board-of-visitors-policy-1424>

## Visiting Scholar/Volunteer Policy

The University's ownership interest in intellectual property and confidentiality in research conducted by the University must be protected. Volunteers and international Visiting Scholars are permitted wide access to research and provide substantial advancement in many instances. This collaboration, while valuable, must not compromise the ownership of the intellectual property or the confidential nature of the projects. All Volunteers and international Visiting Scholars granted access to research projects at the University shall execute an approved agreement regarding intellectual property and security. An international Visiting Scholar is an individual who is invited by a faculty member to study, conduct research, or teach at the University and may be paid through the University or the [Research Foundation](#) or from an outside source. All international Visiting Scholars must be issued visa documentation through the [Visa & Immigration Service Advising Office](#) (or approved to come to campus on alternate documentation). A Volunteer is an individual who has agreed to assist the University without compensation in a research or academic undertaking.

The following procedures shall be followed:

1. Any faculty member inviting an international Visiting Scholar to conduct research on campus must request visa documentation (DS-2019) or approval for the scholar to arrive on campus on alternate visa documentation from the Visa & Immigration Service Advising Office. The responsible faculty member and international Visiting Scholar will complete and submit the exchange visitor packet to the Visa & Immigration Service Advising Office. The packet will include an agreement regarding intellectual property created by the [Office of Research](#). Visiting Scholars and Volunteers who come to the University to work with faculty must also be reviewed and approved by the Dean of the appropriate college and the Provost and Executive Vice President for Academic Affairs. In the case of sponsoring units that report to the Office of Research, approval must come from the Vice President for Research and Economic Development.
2. Each unit of the University shall be responsible for identifying all international Visiting Scholars and Volunteers involved in the development or improvement of intellectual property. Once an international Visiting Scholar or Volunteer is identified, the unit must have the Visiting Scholar or Volunteer sign the sample agreement, which is included in the Exchange Visitor packet. Non-citizen scholars residing in the US are required to comply with this policy. The agreement will provide that the University shall control the disposition of all intellectual property resulting from the research and shall strictly comply with all Federal Export Control laws and regulations. To this end, international Visiting Scholars or Volunteers will be subject to background checks to ensure that they are not on a sanction list maintained by the [Office of Foreign Assets Control](#); any background checks that are indicated will be charged to the sponsoring unit.
3. Proposed Visiting Scholars from countries identified as being at "high risk" for espionage by the FBI must provide credentials for review and written approval by the Office of Research before the University will submit Visa and other applications on their behalf. The Office of Research will periodically update a list of those countries for use by Academic Affairs and International Programs.

4. The unit shall maintain a copy of the agreement and the original shall be sent to the Office of the Vice President for Research and Economic Development, where the documents are to be maintained.
5. No Volunteer or international Visiting Scholar shall be issued a visa document (DS-2019) or approved to arrive on campus with alternate documentation until the agreement has been approved by the Dean, the Provost and Executive Vice President for Academic Affairs, and the Vice President for Research and Economic Development and executed by a University representative authorized to bind the University.
6. The [Office of Research](#) shall monitor the implementation of the policy and provide training to affected units.

- Approved by the President  
May 13, 2010  
Revised March 4, 2019

## Sponsored Research Guidelines

Old Dominion University recognizes the importance of sponsored research<sup>1</sup> in the academic development of the faculty and in the training of graduate students. Although research benefiting the region is given particular emphasis, the University supports the right of and encourages faculty members to engage in any sponsored research, so long as that research does not compromise the educational objectives established by the departments, colleges, and the institution.

The University's principal research officer is the vice president for research and economic development. This person has been designated by the president of the University as the official signatory for the University for all research and sponsored programs. The executive director of the [Old Dominion University Research Foundation](#) has the responsibility for submitting and accepting grants and contracts and establishing and enforcing administrative procedures necessary to assure compliance with regulations of funding agencies for the operation of sponsored projects. The executive director is responsible, subject to the Board of Trustees of the Research Foundation, for the direct administration of, and immediate executive authority with respect to, the conduct of the business and affairs of the foundation.

The Old Dominion University Research Foundation is the grantee for projects under its purview, but responsibility for the technical direction of the project is vested solely in the principal investigator.

Since the guidelines are intended to facilitate the research endeavors of the faculty while protecting the interests of both the faculty and the institution, exceptions to the procedures should be rare and must be with the written approval of the vice president for research and economic development.

### Guidelines

University policies relating to sponsored research are based on the following guidelines:

1. Sponsored research to be undertaken must support the instructional and research objectives established by the department(s) and college(s) in which the research is to be conducted. Each proposal is reviewed, weighing cost against benefit, to determine its appropriateness by the chair(s), the dean(s), and the vice president for research and economic development.
2. Sponsored research normally is not accepted when the terms and conditions contain restrictions that prevent disclosure of the sponsor or the existence of the contract or adequate review of suitability to the academic program of the University.
3. In cooperation with the principal investigator and his or her department and college, the University exerts every effort to minimize publication restrictions imposed by accepted research contracts.
4. Except under special circumstances, all research grants and contracts are submitted through and administered by the Old Dominion University Research Foundation.

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<sup>1</sup> Research performed by faculty members that is supported by non-Commonwealth funds

5. Sponsored programs that require matching funds by the University (i.e., equipment) or projects that involve the transfer of Commonwealth funds from a state agency to the University will normally be submitted by the University and fiscally administered by the [Office of Finance](#).
6. If tenure-accruing faculty positions are to be funded from grant or contract funds, this practice is an exception to the usual policy of the University and requires the review and approval of the provost and executive vice president for academic affairs with a written understanding of how the position would be backed up should the external funding be disrupted.

### Procedures

Preliminary discussions between faculty members and potential sponsors are encouraged and often precede the preparation of a formal proposal. The vice president for research and economic development and his or her staff are available for discussion at any stage in the preparation of proposals. Formal procedures are based on the following guidelines:

1. A faculty member interested in submitting a proposal should consult with the department chair and dean to determine whether or not the proposed project is desirable with respect to the goals of the department and college. In addition, the faculty member should consult with the vice president for research and economic development and his or her staff on application and proposal development guidelines. The [Research Foundation](#) should also be contacted for information and assistance in proposal budget preparation.
2. The faculty member then submits a proposal to the vice president for research and economic development for administrative review and any necessary modifications in light of specific requirements of the University and the proposed sponsor. The proposal is then typed and prepared for submission by the Research Foundation; the proposed project director is responsible for obtaining the signatures of the department chair and the dean on the final copy. Proposals must be submitted to the Research Foundation for production not less than five working days preceding the project deadline and be accompanied by a signed proposal.
3. In the event that a proposal is disapproved for submission, the proposing faculty member may appeal the decision to the provost and executive vice president for academic affairs for reconsideration and decision. The decision of the provost and executive vice president for academic affairs is final.
4. If the proposed project involves special requirements (i.e., human subjects, radioactive materials, biohazardous materials, or animals), the principal investigator is responsible for notifying the appropriate review board and providing all required justification for University and sponsor approval.
5. All financial reports and statements, property and equipment reports, inventions reports, interim and final technical reports, and closeout reports are submitted through the Research Foundation, where copies are retained on file in accordance with grant or contract requirements.

- Approved by the president  
October 1, 2003

## **Individual Research Conflict of Interest and Commitment**

**(University Policy, #5201)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/5000/5201>

## **Research and Scholarly Digital Data Management Policy**

**(University Policy, #5350)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/5000/5350>



## Review of Research Proposals

**Statement:** Principal investigators, department chairs, and college deans are responsible for ensuring that proposals are complete when they arrive at the [Research Foundation](#) or [Office of Research](#) for signature. To be complete, a proposal narrative and all required forms should be in final form and accompanied by a completed and signed Proposal Transmittal Form that contains:

1. A named source and associated signature of approval for any proposed matching funds and/or cost-sharing;
2. Any required signatures from the Institutional Review Board, Institutional Animal Care and Use Committee, Radiation Safety Committee, and/or Institutional Biosafety Committee as relevant based on the subject area and activities proposed;
3. An abstract describing the project;
4. Signatures of the appropriate chair(s) and dean(s) assuring the merit and quality of the proposal as well as assurance that the project can be carried out should an award be made;
5. Explicit allocations of credit for portions of the project when multiple investigators are collaborating.
6. For electronic submission, the principal investigator will be expected to upload the proposal narrative and required forms and documents into electronic submission mechanism with the exception of the budget and/or other documents that are within the purview of the authorized institutional administrator/official or the Research Foundation staff. A completed proposal transmittal form is required for electronic submissions as well as those in hardcopy form. The Research Foundation is not authorized to submit proposals to the sponsor unless they are complete.

- Approved by the president  
December 1, 1988  
Revised July 17, 2006

# Policy, Procedures, and Timeline for Responding to Allegations of Misconduct in Scientific Research and Scholarly Activity

## I. Introduction

### A. General Policy

It is the responsibility of every member of the Old Dominion University community to ensure integrity in scientific research and scholarly activity. Research misconduct injures the reputation of the University and restricts its ability to compete for external research support. Old Dominion University is dedicated to intellectual integrity and requires the same commitment from all of its faculty, staff, students, and research contributors. Hereafter, “research” connotes any type of scientific research or other scholarly activity and “misconduct” connotes misconduct in scientific research or in other scholarly activity.

The U.S. Public Health Service (PHS) and the National Science Foundation (NSF) regulate the management of research misconduct in programs they fund. These agencies require notification upon the discovery of misconduct. The regulations also provide guidelines for protecting the reputations and privacy of both the accuser and the accused. The Old Dominion University policy seeks compliance with these regulations. With the exception of reporting requirements, this policy applies also to research funded by sources other than the PHS and the NSF and to unfunded research.

### B. Scope

This policy and the associated procedures apply to all individuals engaged in scientific research or other scholarly activity at Old Dominion University. Special notes identify procedures that are particular to PHS- and NSF-funded research. This policy applies to any person paid by, under the control of, or affiliated with Old Dominion University, such as faculty, trainees, technicians, and other staff members, students, fellows, guest researchers, or collaborators.

The policy and associated procedures will normally be followed when an allegation of possible misconduct is received by an institutional official. A summary of the procedures and associated timelines for completion is found in the Appendix.

## II. Definitions

- A. Allegation means any written statement of possible misconduct made to an institutional official, either to the dean of the affected college or to the Research Integrity Officer (“RIO”).
- B. Complainant means a person who makes an allegation of misconduct in scientific research or other scholarly activity.
- C. Confidentiality means a state or quality of being confidential. It connotes the entrustment with secret affairs or purpose and a shared intent to operate secretly. In many cases of research misconduct, confidentiality is a legal requirement. Each member involved in the

process bears the duty of protecting the privacy of both the Complainant and the Respondent; a member who breaches this duty may be subject to discipline.

- D. Conflict of interest means the real or apparent interference of one person's interests with the interests of another person, where potential bias may occur due to prior or existing personal or professional relationships.
- E. Day means calendar day.
- F. Deciding Official "DO" means the University official who makes final determinations on allegations of misconduct and any responsive institutional actions. The DO will normally be the provost and vice president for academic affairs. For this reason, he or she cannot serve as the RIO. If the provost and vice president for academic affairs has had direct, prior involvement in the research, inquiry, investigation, or allegation assessment, he or she will be required to recuse him or herself, and the president will appoint an alternate DO.
- G. Good Faith Allegation means an allegation made with the honest belief that misconduct may have occurred. An allegation is not in good faith if it is made with reckless disregard for or willful ignorance of facts that would disprove the allegation.
- H. Inquiry means gathering information and initial fact-finding to determine whether an allegation or apparent instance of misconduct warrants an investigation.
- I. Investigation means the formal examination and evaluation of all relevant facts to determine if misconduct has occurred and, if so, to determine the responsible person and the seriousness of the misconduct.
- J. Old Dominion University defines Misconduct in Scientific Research and Other Scholarly Activity as:
  - 1. Fabrication, Falsification, Plagiarism, or other practices that seriously deviate from those that are commonly accepted within the scientific community for proposing, conducting, or reporting research. It does not include honest errors or honest differences in interpretations of results or judgments in the collection of data.
  - 2. The Retaliation against a person who reported or provided information about suspected or alleged misconduct and who has not acted in bad faith. (In such cases, agency notification is limited to the NSF.)
  - 3. Any form of Attribution of another's work as the Respondent's own work.

The ODU definition is based on how research misconduct is defined in the regulations promulgated by the National Science Foundation and Public Health Service.
- K. NSF means the National Science Foundation.

- L. NSF Regulation means the National Science Foundation regulation establishing standards for institutional inquiries and investigations into allegations of scientific misconduct, which is set forth in 45 C.F.R. Part 689, entitled "Misconduct in Science and Engineering."
- M. ORI means the Office of Research Integrity, the office within the Department of Health and Human Services (DHHS) that is responsible for the scientific misconduct and research integrity activities of the U.S. Public Health Service.
- N. PHS means the U. S. Public Health Service, an operating component of the DHHS.
- O. PHS Regulation means the Public Health Service regulation establishing standards for institutional inquiries and investigations into allegations of scientific misconduct, which is set forth at 42 C.F.R. Part 50, Subpart A, entitled "Responsibility of PHS Awardee and Applicant Institutions for Dealing With and Reporting Possible Misconduct in Science."
- P. PHS or NSF Support means PHS or NSF grants, contracts, or cooperative agreements or applications therefore.
- Q. Preponderance of the Evidence means that the evidence shows that it is more likely than not that the Respondent committed misconduct in scientific research or scholarly activity.
- R. Research Integrity Officer "RIO" means the institutional official responsible for assessing allegations of misconduct and investigations, for determining when such allegations warrant inquiries, and for overseeing inquiries and investigations.
- S. Research Record means any data, document, computer file, computer diskette, or any other written or non-written account or object that reasonably may be expected to provide evidence or information regarding the proposed, conducted, or reported research that constitutes the subject of an allegation of misconduct. A research record includes, but is not limited to: grant or contract applications, whether funded or unfunded; grant or contract progress and other reports; laboratory notebooks; notes; exhibitions, productions, or displays; correspondence; videos; photographs; X-ray film; slides; biological materials; audio-tape recordings; computer files and printouts; manuscripts and publications; equipment use logs; laboratory procurement records; animal facility records; human and animal subject protocols; consent forms; medical charts; and patient research files.
- T. Respondent means the person against whom an allegation of misconduct is directed or the person whose actions are the subject of the inquiry or investigation. There can be more than one Respondent in any inquiry or investigation.
- U. Retaliation means any action that adversely affects the employment or other institutional status of an individual that is taken by an institution or an employee because the individual has, in good faith, made an allegation of misconduct or of inadequate institutional response thereto or has cooperated in good faith with an investigation of such allegation.
- V. Sequester means to separate or isolate documents or material from the individual concerned and into the custody of a disinterested institutional official designated by the RIO, such as the general counsel, who can provide confidential and secure storage.

### III. Rights and Responsibilities

#### A. Research Integrity Officer

The president will appoint the RIO, who will have primary responsibility for the implementation of the procedures set forth in this document. The RIO will be an institutional official who is well qualified to handle the procedural requirements involved and is sensitive to the varied demands made on those who conduct research, those who are accused of misconduct, and those who report apparent misconduct in good faith. In general, the provost and vice president for academic affairs, general counsel, and vice president for research and economic development are unavailable for service as the RIO.

The RIO will appoint the Inquiry and Investigation Committees and ensure that necessary and appropriate expertise is secured to carry out a thorough and authoritative evaluation of the relevant evidence in an investigation. The RIO will ensure that confidentiality is maintained.

The RIO will assist the Inquiry and Investigation Committees and all institutional personnel in complying with these procedures and with applicable standards imposed by government or external funding sources. The RIO is also responsible for maintaining files of all documents and evidence and for the confidentiality and security of the files.

The RIO, through the vice president for research and economic development<sup>1</sup>, will report to ORI or NSF, as required by regulation, and keep the appropriate agency apprised of any developments during the course of the investigation that may affect current or potential funding for the individual(s) under investigation or that the agency needs to know to ensure appropriate use federal funds, and otherwise protect the public interest.

#### B. Complainant

The Complainant will have an opportunity to testify before the Inquiry and Investigation Committees, to review portions of the inquiry and investigation reports pertinent to his or her allegations or testimony, to be informed of the results of the inquiry and investigation, and to be protected from retaliation. Also, if the RIO has determined that the Complainant may be able to provide pertinent information on any portions of the draft report, these portions will be given to the Complainant for comment.

The Complainant is responsible for making allegations in good faith, maintaining confidentiality, and cooperating with an inquiry or investigation.

#### C. Respondent

The Respondent will be informed of the allegations when an inquiry is opened and notified in writing of the final determinations and resulting actions. The Respondent will also have the opportunity to be interviewed by and present evidence to the RIO during his or her inquiry, an opportunity to be interviewed by and present evidence to the Inquiry and Investigation Committees, to review the draft inquiry and investigation reports, and to have

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<sup>1</sup> As a general rule, whether or not specifically stated, Agency contact by the RIO should be through the vice president for research and economic development/Office of Research.

the advice of counsel. Counsel (licensed attorney or lay advisor) may not address the Inquiry and Investigation Committees in place of the Respondent or question other witnesses in place of the Respondent. Counsel's role shall be restricted to acting only as an advisor to the Respondent.

The Respondent is responsible for maintaining the confidentiality of all information received from the inquiry or investigation and for cooperating with the conduct of an inquiry or investigation. If the Respondent is found to be not guilty of misconduct, he or she has the right to receive institutional assistance, reasonable and diligent under the circumstances, to restore his or her reputation.

**D. Deciding Official "DO"**

The DO will receive the inquiry and investigation reports and any written comments made by the Respondent or the Complainant on the draft report. The DO will decide whether misconduct occurred, whether to impose sanctions, or whether to take other appropriate administrative actions.

#### **IV. General Policies and Principles**

**A. Responsibility to Report Misconduct**

All employees or individuals associated with Old Dominion University should report observed, suspected, or apparent misconduct to the RIO directly or through the dean of the affected college. If an individual is unsure whether a suspected incident falls within the definition of misconduct, he or she may informally and confidentially discuss the suspected misconduct with the RIO. If the circumstances described by the individual do not meet the definition of misconduct, the RIO will refer the individual or allegation to other offices or officials with responsibility for resolving the problem.

At any time, an employee may have confidential discussions and consultations about concerns of possible misconduct with the RIO, the vice president for research and economic development, or the dean of the affected college and will be counseled by the RIO about appropriate procedures for reporting allegations.

**B. Protecting the Complainant**

The RIO will monitor the treatment of individuals who bring allegations of misconduct or of inadequate institutional response thereto and those who cooperate in inquiries or investigations. The RIO will ensure that these persons will not be retaliated against in the terms and conditions of their employment or other status at the institution and will review instances of alleged retaliation for appropriate action.

Employees should immediately report any alleged or apparent retaliation to the RIO.

Also, the institution will protect the privacy of those who report misconduct in good faith to the maximum extent possible. For example, if the Complainant requests anonymity, the University will make an effort to honor the request during the allegation assessment or inquiry within applicable policies and regulations and state and local laws, if any. The Complainant will be advised that if the matter is referred to an Investigation Committee and the Complainant's testimony is required; anonymity may no longer be guaranteed. Old

Dominion University will undertake reasonably diligent efforts to protect the positions and reputations of those persons who, in good faith, make allegations.

C. Protecting the Respondent

Inquiries and investigations will be conducted in a manner that will ensure fair treatment to the Respondent(s) in the inquiry or investigation and confidentiality to the extent possible without compromising public health and safety or thoroughly carrying out the inquiry or investigation.

Institutional employees accused of misconduct may consult with legal counsel or a non-lawyer personal adviser (who is not a principal or witness in the case) to seek advice and may bring the counsel or personal adviser to interviews or meetings on the case.

D. Cooperation with Inquiries and Investigations

All individuals involved will cooperate with the RIO and other institutional officials in the review of allegations and the conduct of inquiries and investigations. This affirmative duty includes the obligation to provide relevant evidence to the RIO or other officials on misconduct allegations.

E. Preliminary Assessment of Allegations

Upon receiving an allegation of misconduct, the RIO will immediately assess the allegation to determine whether there is sufficient evidence to warrant an inquiry, whether PHS or NSF support or applications for funding are involved, and whether the allegation falls under the PHS or NSF definitions of scientific misconduct.

## V. Conducting the Inquiry

A. Initiation and Purpose of the Inquiry

Following the preliminary assessment, if the RIO determines that the allegation provides sufficient information to allow specific follow-up and falls under the definition of misconduct, he or she will immediately initiate the inquiry process. In initiating the inquiry, the RIO should identify clearly the original allegation and any related issues that should be evaluated. The purpose of the inquiry is to determine whether there is sufficient evidence of possible misconduct to warrant a full investigation. The inquiry should not reach a final conclusion about whether misconduct definitely occurred or who was responsible. The findings of the inquiry must be set forth in an inquiry report.

B. Inquiry Process

After determining that an allegation falls within the definition of misconduct, the RIO must ensure that all original research records and materials relevant to the allegation are immediately secured. The RIO may consult with federal agencies through the Office of Research for advice and assistance in this regard.

The RIO, in consultation with other University officials as appropriate, will normally interview the Complainant, the Respondent, and key witnesses, as well as examine relevant research records and materials. The RIO will evaluate the evidence and testimony and decide whether there is sufficient evidence of possible misconduct to recommend further investigation.

The RIO will submit a draft report to the DO, Complainant, and Respondent that describes his or her conclusion regarding sufficient evidence of possible misconduct that would justify further investigation. The RIO will establish reasonable conditions for review to protect the confidentiality of the draft report.

Within 10 days of their receipt of the draft report, the Complainant and Respondent will provide their comments, if any, to the RIO. Any comments that the Complainant or Respondent submits on the draft report will become part of the final inquiry report and record. Based on the comments, the RIO may revise the draft report as appropriate.

The RIO will transmit the final report and any comments to the DO, who will have 10 days in which to make the determination of whether findings from the inquiry provide sufficient evidence of possible misconduct to justify conducting an investigation. The inquiry is completed when the DO makes this determination, which will be made within 60 days of the RIO's commencement of the inquiry. Any extension of this period will be based on good cause and recorded in the inquiry file.

The RIO will notify both the Respondent and the Complainant in writing of the DO's decision of whether to proceed with an investigation and will remind them of their obligation to cooperate in the event an investigation is opened. The RIO will also notify the president, the general counsel, the vice president for research and economic development, and the dean of the affected college or other University unit.

## **VI. The Investigation**

### **A. Purpose of the Investigation**

The purpose of the investigation is to explore in detail the allegations, to examine the evidence in depth, and to determine specifically whether misconduct has been committed, by whom, and to what extent. The investigation will also determine whether there are additional instances of possible misconduct that would justify broadening the scope beyond the initial allegations. This is particularly important where the alleged misconduct involves clinical trials or potential harm to human subjects or the general public or if it affects research that forms the basis for public policy, clinical practice, or public health. The findings of the investigation will be set forth in an investigation report.

### **B. Sequestration of the Research Records**

The RIO will immediately sequester any additional pertinent research records that were not previously sequestered during the inquiry. This sequestration should occur before or at the time the Respondent is notified that an investigation has begun. The need for additional sequestration of records may occur for any number of reasons, including the institution's decision to investigate additional allegations not considered during the inquiry stage or the identification of records during the inquiry process that had not been previously secured. The procedures to be followed for sequestration during the investigation are the same procedures that apply during the inquiry.

### **C. The Investigation Committee & Process**



The RIO, in consultation with the president and general counsel, will appoint an Investigation Committee and the Committee chair within five days of the notification to the Respondent that an investigation is planned or as soon thereafter as practicable. These individuals may be scientists, colleagues, administrators, subject matter experts, lawyers, or other qualified persons, and they may be from inside or outside the institution.

The RIO will notify the Respondent of the proposed Committee membership within five days of appointing members of the Investigation Committee. If the Respondent submits a written objection for cause to any appointed member of the Investigation Committee, the RIO will immediately replace the first challenged member and determine whether to replace the other challenged members with qualified substitutes.

The investigation will normally involve the examination of all documentation, including, but not necessarily limited to, relevant research records, computer files, proposals, manuscripts, publications, correspondence, memoranda, and notes of phone calls. Whenever possible, the Committee should interview the Complainant(s), the Respondent(s), and other individuals who might have information regarding aspects of the allegations. Interviews of the Respondent and all other interviews should be transcribed, or tape-recorded transcripts of the interviews should be prepared, provided to the interviewed party for comment or revision, and included as part of the investigatory file.

**D. Charge to the Committee and the First Meeting**

The RIO will define the subject matter of the investigation in a written charge to the Committee that: (i) describes the allegations and related issues identified during the inquiry; (ii) defines misconduct; and (iii) identifies the name of the Respondent. The charge will state that the Committee is to evaluate the evidence and testimony of the Respondent, Complainant, and key witnesses to determine whether, based on a preponderance of the evidence, misconduct occurred and, if so, to what extent, who was responsible, and its seriousness.

During the investigation, if additional information becomes available that substantially changes the subject matter of the investigation or would suggest additional Respondents, the Committee will notify the RIO, who will determine whether it is necessary to notify the Respondent of the new subject matter or to provide notice to additional Respondents.

The inquiry report will be available to the Investigation Committee. However, the report in no way limits the evidence available to the Committee for consideration. Inasmuch as any decision of an investigation might conflict with any conclusion of the inquiry, the investigation will be considered a de novo process.

The RIO, with the assistance of the general counsel, will convene the first meeting of the Investigation Committee to review the charge, the inquiry report, and the prescribed procedures and standards for the conduct of the investigation, including the necessity for confidentiality and for developing a specific investigation plan. The Investigation Committee will be provided with a copy of these instructions and, where federal funding is involved, the PHS or NSF or other granting agency regulations, if any.

## **VII. The Investigation and Report**

An investigation should ordinarily be completed within 60 days of its initiation. This includes conducting the investigation, preparing the report of findings, making the draft report available to the subject of the investigation for comment, submitting the report to the DO for approval, and submitting the report to the appropriate agency, if relevant. Any extension of this period will be based on good cause and recorded in the investigation file.

A. Draft Report

The draft report must describe the policies and procedures under which the investigation was conducted, describe how and from whom information relevant to the investigation was obtained, state the findings, and explain the basis for the findings. The report will 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 imposed and administrative actions taken by the institution.

B. Comments on the Draft Report

1. Respondent

The RIO will provide the Respondent with a copy of the draft investigation report for comment and rebuttal. The Respondent will be allowed 10 days to review and comment on the draft report. The Respondent's comments will be attached to the final report. The findings of the final report should take into account the Respondent's comments in addition to all the other evidence.

2. Complainant

The RIO will provide the Complainant, if he or she is identifiable, with those portions of the draft investigation report that address the Complainant's role and opinions in the investigation. The Complainant will be allowed 10 days to review and comment on that part of the draft report provided by the RIO. The report should be modified, as appropriate, based on the Complainant's comments.

3. General Counsel

The draft investigation report will be transmitted to the general counsel for a review of its legal sufficiency. The general counsel's comments should be incorporated into the report as appropriate.

4. Confidentiality

In distributing the draft report, or portions thereof, to the Respondent and Complainant, the RIO will inform the recipient of the confidentiality under which the draft report is made available and will establish reasonable conditions to ensure such confidentiality. For example, the RIO may request the recipient to sign a confidentiality statement or to come to his or her office to review the report.

C. Final Report

After comments have been received and the necessary changes have been made to the draft report, the Investigation Committee should transmit the final report with attachments, including the Respondent's and Complainant's comments, to the DO through the RIO. The

final report, if applicable, will be submitted through the Office of Research to ORI and/or NSF.

**D. Institutional Review and Decision**

Based on a preponderance of the evidence, the DO will make the final determination whether to accept the investigation report, its findings, and the recommended institutional actions. The DO may also return the report to the Committee with a request for further fact-finding or analysis. The DO's determination together with the Investigation Committee's report, constitutes the final investigation report for purposes of agency review. If the DO's final determination varies from that of the Investigation Committee, the DO will explain in detail the basis for rendering a decision different from that of the Investigation Committee in the institution's letter transmitting the report to PHS (ORI), NSF, or other funding agency. The DO's explanation should be consistent with the particular agency's definition of misconduct, the institution's policies and procedures, and the evidence reviewed and analyzed by the Investigation Committee.

The DO will also notify both the Respondent and the Complainant in writing. In addition, the DO will determine whether law enforcement agencies, professional societies, professional licensing boards, editors of journals in which falsified reports may have been published, collaborators of the Respondent in the work, or other relevant parties should be notified of the outcome of the case. The RIO is responsible for ensuring compliance with all notification requirements of funding or sponsoring agencies.

**VIII. Requirements for Reporting to ORI or NSF Inspector**

- A. The decision to initiate an investigation of PHS- or NSF-funded research must be reported in writing, through the Office of Research, to the director of ORI (at DHHS) or the inspector general of NSF before the date the investigation begins. At a minimum, the notification should include the name of the person(s) against whom the allegations have been made, the general nature of the allegation as it relates to the definition of misconduct, and the agency applications or grant number(s) involved. ORI or NSF must also be notified of the final outcome of the investigation and must be provided with a copy of the investigation report. Any significant variations from the provisions of these policies and procedures should be explained in any reports.
- B. Prior to any decision to terminate an inquiry or investigation without completing all relevant requirements of the PHS or NSF regulations, the RIO, through the Office of Research, will submit a report of the planned termination to ORI or the NSF inspector general, including a description of the reasons for the proposed termination.
- C. If the University determines that it will not be able to complete an inquiry and investigation of federally funded research in 120 days, the RIO will submit to the respective agency a written request for an extension that explains the delay, reports on the progress to date, estimates the date of completion of the report and describes other necessary steps to be taken. The request will be submitted through the Office of Research. If either NSF or the PHS is the funding agency, the Office of Research may authorize an extension of the investigation such that the investigation and all administrative actions will be completed

within an additional 60 days. If the request is granted, the RIO will file periodic progress reports as requested.

- D. When PHS or NSF funding or applications for funding are involved, and an admission of misconduct is made, the RIO, through the Office of Research, will contact the agency for consultation and advice. Normally, the individual making the admission will be asked to sign a statement attesting to the occurrence and extent of misconduct. An admission of misconduct does not constitute a sufficient basis for closing a case involving PHS or NSF funds without prior approval from the agency.
- E. When PHS or NSF funding is involved, the RIO, through the Office of Research, will notify the agency at any stage of the inquiry or investigation if:
  - 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 interests of the person(s) making the allegations or of the individual(s) who is the subject of the allegations as well as his or her co-investigators and associates, if any;
  - 4. it is probable that the alleged incident is going to be reported publicly;
  - 5. the allegation involves a sensitive public health issue, e.g., a clinical trial;
  - 6. there is a reasonable indication of possible criminal violation. In this instance, the institution must inform the agency within 24 hours, excluding weekend days, of obtaining that information;
  - 7. for any other reason, the scientific community or the public should be informed.

## **IX. Administrative Actions**

Old Dominion University will take appropriate administrative actions against individuals when an allegation of misconduct has been substantiated.

If the DO determines that the alleged misconduct is substantiated by the findings, he or she will decide on the appropriate actions to be taken after consultation with the RIO. The actions may include:

- 1. withdrawal or correction of all pending or published abstracts and papers emanating from the research where misconduct was found.
- 2. removal of the responsible person from the particular project, letter of reprimand, and/or special monitoring of future work.
- 3. sanctions such as probation, suspension, salary reduction, or initiation of steps leading to possible rank reduction or termination of employment.

4. restitution of funds as appropriate.

## **X. Other Considerations**

### **A. Termination of Institutional Employment or Resignation Prior to Completing Inquiry or Investigation**

The termination of the Respondent's institutional employment, by resignation or otherwise, before or after an allegation of possible misconduct has been reported will not preclude or terminate the misconduct procedures.

If the Respondent, without admitting to the misconduct, elects to resign his or her position prior to the initiation of an inquiry but after an allegation has been reported or during an inquiry or investigation, the inquiry or investigation will proceed. If the Respondent refuses to participate in the process after resignation, the Committee will use its best efforts to reach a conclusion concerning the allegations, noting in its report the Respondent's failure to cooperate and its effect on the Committee's review of all the evidence.

### **B. Restoration of the Respondent's Reputation**

If the institution finds no misconduct and the respective agency concurs, after consulting with the Respondent, the RIO will undertake reasonable efforts to restore the Respondent's reputation. Depending on the particular circumstances, the RIO should consider notifying those individuals aware of or involved in the investigation of the final outcome, publicizing the final outcome in forums in which the allegation of misconduct was previously publicized, or expunging all reference to the misconduct allegation from the Respondent's personnel file. Any institutional actions to restore the Respondent's reputation must first be approved by the DO.

### **C. Protection of the Complainant and Others**

Regardless of whether the institution, ORI, or NSF determines that misconduct occurred, the RIO will undertake reasonable efforts to protect Complainants who made allegations of misconduct in good faith and others who cooperate in good faith with inquiries and investigations of such allegations. Upon completion of an investigation, the DO will determine, after consulting with the Complainant, what steps, if any, are needed to restore the position or reputation of the Complainant. The RIO is responsible for implementing any steps the DO approves. The RIO will also take appropriate steps during the inquiry and investigation to prevent any retaliation against the Complainant.

### **D. Allegations Not Made in Good Faith**

The DO will determine whether the Complainant's allegations of misconduct were made in good faith. If an allegation was not made in good faith, the DO will determine whether any administrative action should be taken against the Complainant.

### **E. Interim Administrative Actions**

The vice president for research and economic development will take interim administrative actions, as appropriate, to protect federal funds and ensure that the purposes of the federal financial assistance are carried out.

## **XI. Record Retention**

After completion of a case and all ensuing related actions, the RIO will prepare a complete file, including the records of any inquiry or investigation and copies of all documents and other materials furnished to the RIO or committees. The RIO will transfer the file to the provost and vice president for academic affairs for safekeeping, who will maintain the file for three years after completion of the case to permit later assessment of the case. ORI, NSF, or other authorized personnel will be given access to the records upon request.

## **XII. APPENDIX**

This appendix summarizes the responsibilities assigned to the DO and the RIO. The appendix is a review of the duties assigned to these two officials.

#### **Responsibilities of the DO**

- Determines whether an investigation is warranted
- Determines whether to accept the investigation report
- Determines institutional administrative actions if misconduct is found
- Explains why the institution does not agree with the investigation report, if such is the case, in a transmittal letter to ORI or NSF
- Determines institutional administrative actions against bad faith Complainants
- Informs ORI or NSF that an investigation is not warranted if such is the case if the agency requested the inquiry

#### **Responsibilities of the RIO**

- Receives allegations of misconduct
- Receives allegations of retaliation
- Receives reports of bad faith allegations
- Receives reports of violations of PHS or NSF regulations

#### **Assessment of Allegations**

- Conducts preliminary assessment of allegations
- Determines whether an inquiry is warranted
- Refers non-scientific misconduct issues to appropriate institutional or federal office

#### **Conduct of Inquiry**

- Initiates inquiry process
- Notifies appropriate institutional officials, the Respondent, and, if necessary, the appropriate agency that an inquiry is underway
- Sequester research or other relevant records
- Conducts the inquiry
- Determines whether additional expertise is needed
- Establishes conditions of confidentiality
- Protects against bias or conflicts of interest
- Develops the charge
- Meets ORI or NSF notification requirements
- Takes appropriate interim administrative actions
- Seeks advice from federal agencies when an admission of misconduct is made
- Determines whether a time extension will be allowed
- Provides a draft report to the Respondent
- Provides appropriate portions of the draft report to the Complainant
- Transmits the final report and comments to the DO
- Communicates the decision of the DO to the Complainant and Respondent.
- Notifies ORI or NSF if an investigation will be conducted
- Provides the final report and inquiry file to ORI or NSF upon request, if relevant
- Retains all inquiry records
- Reports bad faith allegations to the DO
- Undertakes reasonable efforts to restore the reputation of cleared Respondents
- Undertakes reasonable efforts to protect good faith Complainants and others who cooperated with the inquiry

#### **Conduct of Investigation**

- Notifies the Respondent that an investigation will be conducted
- Sequester additional research records when necessary
- May conduct the investigation in appropriate cases
- Appoint the Investigation Official or Committee
- Replaces the first challenged person and determines whether to replace persons challenged later
- Determines whether additional expertise is needed
- Establishes conditions of confidentiality
- Protects against bias or conflicts of interest
- Develops the charge
- Convenes the first meeting of the Investigation Committee
- Provides the Investigation Official or Committee with advice on appropriate procedures
- Meets ORI or NSF notification requirements, if relevant
- Takes appropriate interim administrative actions
- Seeks advice from federal agencies when an admission of misconduct is made
- Requests time extensions, if necessary, from ORI or NSF and submits progress reports
- Submits plan to terminate an investigation to ORI or NSF
- Provides a draft report to the Respondent
- Provides appropriate portions of the draft report to the Complainant
- Transmits the final report and comments to the DO
- Notifies the Respondent and Complainant of the institution's findings and actions
- Retains all records of investigation
- Reports bad faith allegations to the DO
- Undertakes reasonable efforts to restore the reputation of cleared Respondents
- Undertakes reasonable efforts to protect good faith Complainants and others who cooperated with the inquiry

#### **Post-Investigation**

- A Responds to requests from federal agencies for additional information or assistance during the review process
- B Responds to requests from ORI for additional information or assistance during a Departmental Appeals Board ("DAB") appeal



## INQUIRY & INVESTIGATION PROCEDURES

TIMELINE	STEPS
Day 1 Inquiry Begins	RIO determines sufficient evidence of possible misconduct in scientific research or scholarly activities.  RIO immediately secures all original research records and materials relevant to the allegation. RIO may consult with federal agencies through the Office of Research
Days 2-29	RIO interviews the Complainant, Respondent, and key witnesses and examines relevant research records & materials.
Day 30	RIO completes the evaluation of evidence and testimony and submits a draft report of his or her conclusion to DO, Complainant, and Respondents.
Day 40	Deadline for Complainant and Respondent to submit to RIO their comments on the draft inquiry report.
Day 50	RIO submits to DO the final inquiry report and any comments from Complainant and Respondent.
Day 60 Inquiry Ends	DO makes the final determination of whether findings from the inquiry provide sufficient evidence of possible misconduct to justify conducting an investigation.
Day 61 Investigation Begins (if applicable)	The RIO notifies both the Respondent and the Complainant in writing of the DO's decision of whether to proceed to an investigation and will remind them of their obligation to cooperate in the event an investigation is opened. The RIO will also notify the president, the general counsel, the vice president for research and economic development, and the dean of the affected college or other University unit.  RIO immediately sequesters any additional pertinent research records.
Day 65	RIO, in consultation with the president and general counsel, completes the appointment of an Investigation Committee.
Day 65	RIO notifies the Respondent of the proposed members of the Investigation Committee.
Day 70	Deadline for Respondent to submit in writing any objection for cause to any appointed member of the Investigation Committee. The RIO will immediately replace the first challenged member and determine whether to replace the other challenged members or experts with qualified substitutes.
Day 75	First meeting of the Investigation Committee.
Days 76-100	Investigation Committee conducts its examination of evidence and submits a draft report of its findings to the RIO.

TIMELINE	STEPS
Day 101	RIO provides Respondent with a copy of the draft Investigation Committee report for comment and rebuttal. RIO provides the Complainant with those portions of the draft report that address the Complainant's role and evidence/testimony.
Day 110	Deadline for Respondent and Complainant to submit to the Investigation Committee comments and rebuttal on the draft report.
Day 113	Investigation Committee transmits its final report with attachments, including the Respondent's and Complainant's comments, to the DO through the RIO.
Day 120 Investigation Ends	<p>Based on the preponderance of the evidence, the DO will make the final determination. If this determination varies from that rendered by the Investigation Committee, the DO will provide a full explanation.</p> <p>Deadline for completion of the investigation if PHS or NSF funded activities. If it has not been completed by this day, the RIO must submit to ORI and/or NSF a written request for an extension that explains the delay, reports on the progress to date, estimates the date of completion of the report and describes other necessary steps to be taken. The request will be submitted through the Office of Research.</p> <p>DO will also notify the Respondent and Complainant in writing of the final determination.</p>

- Approved by the Board of Visitors  
December 13, 2002; Revised September 22, 2006;  
Revised June 17, 2010; Revised December 8, 2011 (eff. 1/1/12)  
Transitioned to University-Level Policy  
December 10, 2021

## Financial Interests in Sponsored Programs

The policy can be found at the following link:

<https://www.odu.edu/facultystaff/research/forms-policies-procedures>

## Faculty Research Time

Research, publication, and other scholarly activities are basic to the objectives and responsibilities of the University and its faculty. Recognizing this, the University is committed to the concept of research time for faculty to pursue individual intellectual inquiry, to publish, and to engage in creative activities designed to improve the educational experience of the students.

The awarding of time for research is not a routine matter. It is based on an assessment of the benefit of significant intellectual activity to the University and the department and provides for regular and periodic reviews of accomplishments. Such time is available to tenured/tenure-earning and clinical faculty engaged in either graduate or undergraduate teaching.

1. **Purchased and contributed faculty time for funded research** - Wherever possible, the cost of faculty time should be reimbursed to the University from grant or contract funds. When required, faculty time may be contributed, especially when the funded research has provision for financial support of graduate students or equipment. When such cost-sharing of faculty time is agreed to by the University, the contributed time will be planned in the schedule of the faculty member.
2. **Faculty time for unfunded research (departmental research)** - External funding is not always available to support the research activities of the faculty. To encourage creative activities, particularly in certain disciplines, time for departmental research is provided by the academic budget of the University. This time is awarded on the basis of a well-developed activity that has the approval of the chair and dean. It is essential that such time be based on an activity that is both scholarly and of benefit to the University, the department, and the faculty member.

It is essential to demonstrate, through regular and periodic evaluation of the benefits derived from departmental research, that these monies are being spent wisely. It is recognized that, while in certain departments, the results of scholarly activities come to fruition only after a period of two or more years, more frequent evaluation of departmental research time is necessary. Publication in a scholarly journal is certainly clear evidence, although not the only evidence, that the research is producing desirable results. Research in teaching, service-learning, and curriculum development may be more difficult to evaluate, but it is essential that an assessment be made. In extraordinary cases, outside expert review may be solicited in order to evaluate research.

- Approved by the provost and vice president for academic affairs  
September 5, 2003  
Revised July 15, 2022

## Criteria for Principal Investigators

- A The Principal Investigator (PI) is the lead person on the research project and is responsible for the ethical and professional conduct of all aspects of the project. In the case of doctoral students as the PI, this responsibility falls to the supporting faculty member.
1. All full-time faculty members, self-supporting research professionals, or new faculty who have signed full-time contracts are eligible to be PIs.
  2. Administrators holding the titles of vice president, associate vice president, assistant vice president, vice provost, dean, dean of University Libraries, associate dean, assistant dean, and emeritus full and associate professor may be named as PI on projects directly related to the mission and responsibilities of their offices.
  3. Doctoral students seeking funding for fellowships, tuition, or support of research leading to the dissertation may be named as PI when a full-time teaching or research faculty member is named on the project as the responsible PI. The faculty member is responsible for seeing that the terms of the grant or contract are fulfilled.
  4. Persons holding the following titles in the absence of a faculty appointment, as noted above, are not eligible to be a PI: director, associate director, assistant director, postdoctoral associate, visiting professors at all levels, and research associates at all levels.
    - a. Requests for exceptions for those within Academic Affairs can be made by the unit head with written approval of the college dean and the provost and vice president for academic affairs. For those in areas other than Academic Affairs, it will require that such an application for an exception has been recommended by the unit head and approved by the corresponding vice president. All requests must be accompanied by the curriculum vitae of the prospective investigator.
    - b. The [Research Foundation](#) will maintain a list of non-faculty individuals who have been granted permission to submit proposals. The list will note if permission was given on a one-time-only basis or for a more extended period of time. This list will be reported to the provost and executive vice president for academic affairs, vice president for research and economic development, and deans annually.

- Approved by the president  
August 21, 2003  
Revised July 17, 2006  
Revised March 8, 2013

## Faculty Purchased Release Time<sup>†</sup>

### Statement:

1. The control of funds for purchased release time rests with the college. Deans should work with department chairs to:
  - A. Determine the expected external support (purchased release time);
  - B. Plan the number of personnel that will be funded by external support;
  - C. Indicate which personnel will be supported by external funds;
  - D. Establish contingency plans for the use of unanticipated funds or a shortfall in external support;
  - E. Monitor, at regular intervals, the flow of external funds and ensure the effective use of funds.
2. The "line of credit" is established at the same time as the annual budget and is presented in the budget cycle. The plan and the resulting "line of credit" may be revised and amended as needed throughout the academic year.
3. Responsibility for establishing and meeting the external funds plan for each college rests with the dean. Any budget adjustment moving funds from or to the 4010 line must have the dean's or the dean's designee's approval.
4. Since the Office of Academic Affairs oversees the budgets of the colleges, that office serves as a "broker" to assist deans in meeting their respective commitments while fully utilizing all the external funds realized.

- Approved by the president  
December 1, 1988  
Revised July 15, 2022

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<sup>†</sup> Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Research-Funded Conversion to a 12-Month Faculty Contract

### 1. PURPOSE

Faculty on academic year (AY) appointments often desire to work during the summer months to continue their research, instruct graduate students in thesis and dissertation research, and supervise research staff. During the summer, between AY appointments, many faculty consistently earn summer compensation from sponsored research grants or contracts, but the income derived from these sources is not considered part of the annual employment contract. Under the current retirement program policy, the Commonwealth only recognizes annual contract pay when administering the employee retirement program. In recognition of their year-round commitments and contributions, AY faculty with a consistent history of sponsored project income from research grants and contracts should be given the opportunity to convert to a 12-month contractual period provided sponsored funds are available for summer salary payments and approval is given by the department chair and the college dean.

### 2. POLICY

A faculty member on an AY appointment who consistently generates support in the summer through sponsored projects may request conversion to a 12-month appointment reflecting all AY income and summer research payments. Conversion to a 12-month appointment allows retirement contributions to be made on summer income since the summer research payments would become part of the faculty member's annual salary. The conversion from an AY appointment to a 12-month appointment shall be made under the following guidelines:

- A. The faculty member presents written assurance that the required funds are available for the summer pay period and will cover the additional summer salary and fringe benefits costs. The source of such funds must come from sponsored project agreements. No conversion will take place without the appropriate confirmation of these salary funds.
- B. The faculty member initiates a request for a 12-month appointment, which is reviewed for approval by the department chair and college dean. Approved requests must be forwarded to Academic Affairs no later than the second week in April. The new 12-month appointment will begin on May 25 and end on May 24 of the following year.
- C. The 12-month appointment must be requested on an annual basis. If a request for the continuance of a 12-month appointment is not provided, subsequent faculty appointment letters will be issued as AY appointments.
- D. If a 12-month appointment letter is issued and the funding guaranteed in support of the conversion is not received, the funds already expended to extend the length of the appointment contract will be reimbursed from the faculty member's department and/or college's F & A cost accounts.
- E. The 12-month salary will be calculated by adding to the AY salary a minimum of 1/9 of the AY salary up to a maximum of 3/9 of the AY salary.
- F. Faculty members on 12-month appointments may receive additional compensation for summer school teaching or other academic support activities on an overload basis. The

combined summer pay from all University and grant/contract resources cannot exceed 3/9 of the AY annual salary. Only funds received from research activities will be used to convert AY appointments to 12-month assignments.

- G. Faculty on 12-month conversion appointments are not eligible for annual leave benefits as cited in this *Handbook* under the section on [Annual Leave for Administrative and Professional Faculty and Eligible Teaching and Research Faculty on 12-Month Contracts](#) and [Military leave](#). All other benefits remain the same.
- H. Requests for retroactive conversions will not be considered.

The [Virginia Retirement System \(VRS\)](#) takes into consideration for retirement benefits the length of service, employee age, and the highest consecutive 36 months salary. In terms of salary, the 36 consecutive months translates into the three highest consecutive annual salaries for a three-year period. The annual employment periods must be consecutive, with no breaks between them. Since VRS is using the annual contract amount for each of the three years, any amount added to the AY salary rate will add to the retirement benefit of the faculty member. Retirement benefits in other retirement programs (i.e., TIAA-CREF) are based on contributions. Thus, any extra contributions based on additional summer salary payments will benefit the faculty member's retirement account. The minimum amount needed to participate in the research-supported conversion to a 12-month faculty appointment is 1/9 of the AY salary.

- Approved by the provost and vice president for academic affairs  
September 5, 2003  
Revised July 17, 2006



## **Policy on Self-Supporting Research Professional Positions**

The policy can be found at the following link:

<http://www.odu.edu/facultystaff/research/forms-policies-procedures>

## Research Review Boards

The University maintains the following four research review boards, which are responsible for approving research proposals involving human subjects, recombinant DNA, radiation safety, and animals.

1. **Institutional Review Board:** It is University policy that all projects involving risk to human subjects must be approved by the Institutional Review Board. Approval is based on established University, state, and sponsoring agency guidelines for the protection of the rights and welfare of subjects at risk.
2. **Institutional Biosafety Committee:** It is University policy that all research projects involving recombinant DNA and that are considered non-exempt under the [NIH "Guidelines for Research Involving Recombinant DNA Molecules"](#) must be approved by the Institutional Biosafety Committee.
3. **Radiation Safety Committee:** It is University policy that all projects involving radioactive materials must be approved for usage and safety procedures by the Radiation Safety Committee.
4. **Institutional Animal Care and Use Committee:** It is University policy that all projects involving animals must be approved, in accordance with established University and sponsoring agency regulations, by the Institutional Animal Care and Use Committee.

It is the responsibility of the principal investigator to gain the approval of the appropriate review board(s) prior to the submission of a proposal to a funding agency or, in the case of unfunded research, prior to engaging in the research activity. The vice president for research and economic development is authorized to issue procedures in order to assure that these research policies are implemented in compliance with applicable regulations. Information on the review board policies is available from the [Office of Research](#).

- Approved by the president  
October 1, 2003  
Revised July 17, 2006

## **Guidelines for the Establishment, Operation, and Evaluation of Research Institutes and Centers**

The guidelines can be found at the following link:

<https://odumain.prod.acquia-sites.com/sites/default/files/documents/guidelines-for-the-establishment-and-operation-of-research-ctrs.pdf>

## Priority for External Funding on Limited Submissions

In the event that there are multiple faculty who desire to submit a proposal to the same funding agency's program that has limitations imposed on the number of proposals from an institution, strategic decisions will be necessary. Participants in the decision-making process will include the deans of the relevant colleges and the vice president for research and economic development. Certain background information may be requested of the faculty and deans to facilitate decision-making, and an attempt will be made to do so in a timely manner with respect to the deadline for proposal submission. The final determination will rest with the vice president for research and economic development.

- Approved by the president  
April 4, 1985  
Revised July 17, 2006

## **Export Control**

**(University Policy, #5340)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/5000/5340>

## Summer Research Fellowship Programs<sup>†</sup>

### A. Purpose and Eligibility

The University provides a number of fellowship awards for returning tenured and tenure-track faculty for summer research. The awards are made available through the [Office of the Vice President for Research and Economic Development](#).

1. The primary purpose of the awards is to provide support and encouragement for non-tenured, tenure-track faculty members who are initiating programs.
2. In special cases, up to 20% may be awarded to tenured faculty members initiating new research careers or developing new research programs.
3. Awards are given for projects that are designed to ultimately attract outside funding and for those traditional scholarly endeavors and creative activities basic to the goals of the University.
4. Faculty may apply for a research fellowship more than once, but repeat or successive awards will rarely be given within four years.
5. The awards, which carry a stipend and an allowance for justified expenses, are not intended as continuing sources of support.
6. The vice president for research and economic development sends out the call for submission of proposals to all faculty.

### B. Review and Approval Procedures

1. All proposals are evaluated and ranked on the basis of merit.
2. A faculty member can submit only one proposal, either as PI or Co-PI.
3. Faculty submitting proposals must not be a part of the review and evaluation process, either at the department, college, or University levels.
4. Proposals are submitted to the department chair for review and evaluation. The chair forwards the proposal with recommendations to the college research committee or to the dean's office in the absence of a college committee.
5. The college committee, or the dean's office in the absence of a college committee, reviews all proposals for the academic college and evaluates and ranks them in priority, noting strengths and weaknesses. The proposal, the department chair's recommendation and rankings, and the committee's ranking and recommendations, if applicable, are forwarded to the dean.
6. The dean completes an independent review and ranking and forwards all documents to the [Faculty Senate Scholarly Activity and Research Committee](#) with a copy to the [Office of Research](#).

7. The [Faculty Senate Committee](#) makes recommendations to the vice president for research and economic development, who awards the fellowships.

**C. Responsibilities**

1. Successful applicants are expected to devote a minimum of eight consecutive weeks exclusively to the project during the summer following the award. The department chair has the responsibility to ensure that any teaching duties are not simultaneous with the eight-week research period.
2. During the semester following their awards, successful applicants must make a Progress Report to the [Office of Research](#).
3. Those making satisfactory progress toward publication and/or securing outside funding may apply for additional funds for travel to meet with an external funding agency. When results are published, fellowship recipients are expected to acknowledge the support of the University.

**D. Any exceptions to this policy must be made by the vice president for research and economic development.**

- Approved by the president  
December 1984; Revised June 8, 1987; Revised April 19, 1991  
Revised September 26, 1995; Revised July 17, 2006  
Revised August 25, 2011

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† Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Research Foundation

The information can be found at the following link:

<https://researchfoundation.odu.edu>



## V. LEAVE AND BENEFIT POLICIES

### University Policies

#### **Annual Leave for Administrative and Professional Faculty and Eligible Teaching and Research Faculty on 12-month Contracts (*New Interim Policy*)**

(University Policy, #6308)

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6308>

## **Sick Leave Policy (*Interim Policy*)**

**(University Policy, #6307)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6307>

## **Parental Leave Policy**

**(University Policy, #6053)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6053>

## **Military Leave**

**(University Policy, #6304)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6304>

## **Bone Marrow and Organ Donation Leave (*Interim Policy Revisions*)**

**(University Policy, #6301)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6301>

## Emergency Disaster Leave

(University Policy, #6303)

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6303>

## **School Assistance and Volunteer Service Leave (*Interim Policy Revisions*)**

**(University Policy, #6305)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6305>

## **Immediate Recognition**

**(University Policy, #6306)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6306>



## **Lactation Support Policy**

**(University Policy, #6052)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6052>

## Leave of Absence Without Compensation

Leave of absence without compensation may be granted for reasons that are in the interests of the University. Faculty granted such leave shall return to their positions at the salary they were earning at the time the leave was granted, plus any increments that may have been awarded.

A faculty member's request for a leave of absence must be approved by the department chair, the dean, the provost and vice president for academic affairs, and the president. Such leaves are granted for one year at a time and no more than two consecutive years of leaves of absence shall normally be permitted. A faculty member on leave of absence without compensation may not become employed as a full-time faculty member at another institution unless such employment was proposed on the faculty member's request for a leave of absence and was approved.

Faculty authorized for leave of absence without compensation are eligible for extended benefits under life insurance, group medical programs, and some similar programs available to employees of the University.

- Approved by the Board of Visitors  
December 9, 1983; Revised November 16, 1989
- Transitioned to University-Level Policy  
December 10, 2021

## **Tuition Assistance Policy**

**(University Policy, #6400)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6400>

## Policy for Faculty Development Funds

Funds to support faculty development will be made available through the Office of the Provost and Vice President for Academic Affairs. These funds are for the purpose of improving the quality of instruction at Old Dominion University. The awards are available to all full-time faculty who are not on a terminal contract.

After evaluation and signature by the department chair and dean, the Office of the Dean should submit a copy of the faculty member's proposal to the [Faculty Senate Scholarly Activity and Research Committee \(D\)](#). The committee's recommendations for awards will be based on overall evaluations of competing proposals. The committee will forward its recommendations, along with the evaluation of the chair and dean, to the provost and vice president for academic affairs for final review, evaluation, and determination.

The following list provides some suggestions for funding, but it should not be considered exhaustive.

1. Reimbursement of expenses for workshops on teaching effectiveness.
2. Reimbursement of expenses for workshops which will make the faculty member proficient in some area and which subsequently may lead to course development.
3. Summer stipends, which will not exceed those awarded for summer research grants, to support faculty self-study, development of instructional materials such as videos, course packs, and workbooks, development of innovative educational approaches, or significant program curriculum revision.
4. Reimbursement of expenses for guest speakers and/or consultants as related to classroom instruction.

Faculty development funds cannot be used to support faculty attendance or presentations at conferences.

- Approved by the president  
December 13, 1991  
Reviewed; No Changes Proposed April 20, 2022

## Participation in Learned Societies

The University recognizes the necessity of attendance at professional meetings and its effect upon the enhancement of good teaching and related activities. Every effort is made to have funds available to faculty members for this purpose.

- Approved by the provost and vice president for academic affairs  
July 1, 2003

## Fee Waivers for Full-time Faculty, Staff and Dependents

**Statement:** Fees for admission applications and transcripts for full-time faculty, staff, and their dependents are waived.

- Approved by the president  
October 1, 2003

## Federal and Commonwealth Policies

### Virginia Sickness and Disability Program

This program applies to full-time faculty who elected the [Virginia Retirement System](#) and enrolled in the [Virginia Sickness and Disability Program \(VSDP\)](#). The VSDP provides short-term and long-term disability coverage when a faculty member incurs an extended illness or injury. The program also provides eight to 10 days of regular sick leave and four to five days of family and personal leave per calendar year, based on the length of service.

Short-term disability benefits begin after a seven-calendar-day waiting period. On the eighth calendar day, after medical certification by the VSDP administrator, short-term disability benefits provide an income replacement of 100, 80, or 60 percent of income for a maximum of 125 workdays. The exact number of days of each income replacement percentage depends on the faculty member's length of state service. (Employees hired on or after July 1, 2009, have a one-year waiting period before short-term disability benefits are available and a different schedule of short-term disability benefits.) Disability income replacement will be 60 percent for fewer than five years of service. On the fifth year, income replacement is 100, 80, or 60 percent.

Long-term disability benefits begin after a 180-calendar day waiting period, which begins on the day following the commencement of the disability. Long-term disability benefits provide an income replacement of 60 percent.

The use of leave under the VSDP must be reported on a pay-period basis in [Banner Web Time Entry \(WTE\)](#) by the established payroll deadlines. Please refer to the VSDP Reporting Procedures and the Quick Reference for [Employee Self-Service - Leave Reports](#) on Payroll's web page.

When a faculty member becomes ill or injured and expects to be unable to work for more than seven calendar days, the [Department of Human Resources](#) and the VSDP administrator must be contacted at 1-800-652-5602 to certify the absence with the treating physician and to notify the University what level of benefit to provide.

Detailed information concerning the VSDP is provided in the [Virginia Sickness and Disability Program Guidebook](#), which is distributed by the Department of Human Resources to each participant in the VSDP. Please contact the [benefits manager](#) at 757-683-3042 for additional information.

## **Family and Medical Leave Act Policy**

**(University Policy, #6050)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6050>



## Payroll Deductions

### Income Tax Withholding

Salaries, wages, or any other compensation for personal services paid to employees are subject to federal income tax at the time the income is earned.

Federal income tax is withheld from employee pay according to the information the employee provides on the W-4 form. Virginia taxes are withheld from employee pay according to the information provided on the VA-4 form. Both forms must be submitted to the [University Payroll Office](#).

Employees should submit new W-4 and VA-4 forms if their marital status or withholding allowances change during the year.

All income is subject to withholding for federal and state taxes with the exception of certain special classes as indicated in the [Internal Revenue Service Employer's Tax Guide and Employer's Supplemental Tax Guide](#). Additionally, the Tax Reform Act of 1986 imposed a penalty for underpayment of tax liability beginning in the calendar year 1987. Employees must pay (either through withholding or estimated tax payments) 90% of their current year's tax liability to avoid penalties.

### Social Security and Medicare Taxes

The combined employee rate for Social Security and Medicare tax is 7.65%. The Social Security portion is 6.20% of earnings up to the applicable taxable maximum amount. The Medicare portion is 1.45% of all earnings. Additionally, employees with earned income of more than \$200,000 pay an additional 0.9% in Medicare taxes.

## **Virginia Retirement System**

<https://www.odu.edu/human-resources/retirement-plans>

## **Virginia Retirement System Group Term Life Insurance**

Full-time salaried faculty are automatically enrolled in the group life insurance program, a mandatory benefit. Premiums are paid by the University. The amount of life insurance (natural death benefits) is equal to the amount of annual salary rounded up to the next higher thousand, and then doubled. An amount equal to four times the salary is payable in the event of accidental death. Coverage is also provided for accidental dismemberment.

Part-time salaried faculty in positions approved for a minimum of 0.5 FTE “time and effort” are eligible to participate in the [Virginia Retirement System Group Life Insurance Program](#). (The initial appointment period of faculty to be eligible for retirement benefits must be one year.)

If group life insurance coverage exceeds \$50,000 for natural death, the premiums paid by the University will be considered as income for federal, state, and FICA tax purposes.

Additional information is available from the [Department of Human Resources](#) or from the [Virginia Retirement System](#).

## Optional Benefits Through Payroll Deduction

The University offers a comprehensive optional benefits program for full-time faculty. Information on any of these programs is available by contacting the University benefits manager in [Human Resources](#).

### Health Insurance Benefits

Full-time faculty are eligible for health insurance benefits. Health insurance is provided under the [Commonwealth of Virginia Group Health Care Plans](#). The state's program includes medical, behavioral health, dental, vision and hearing, and prescription drug coverage. New faculty enrollment or transfer of existing coverage must be arranged through Human Resources. New faculty applications for enrollment must be completed and received by Human Resources within 30 days of the hire date.

Changes in coverage may be made during the annual open enrollment period or within 60 days of a qualified mid-year event. The state contributes a monthly amount toward the cost of this benefit for employees in full-time status. Part-time salaried AP faculty may participate in the [State Health Benefits Program](#) but do not receive a state contribution to their premium costs.

Detailed information is available in member handbooks and from [Human Resources](#).

## **Pre-Tax Health Care Premium Program**

<https://www.odu.edu/human-resources/benefits>

<https://www.odu.edu/human-resources/benefits/health-insurance>

## **Flexible Spending Accounts**

<https://www.odu.edu/human-resources/benefits>

<https://www.odu.edu/human-resources/benefits/flexible-spending-accounts>

## **Tax Sheltered Annuities**

<https://www.odu.edu/human-resources/benefits>

<https://www.odu.edu/human-resources/benefits/403b>

## **Deferred Compensation Plan (DCP)**

<https://www.odu.edu/human-resources/benefits>

<https://www.varetirement.org/dcp.html>

## **Employer Cash Match Contributions**

<https://www.odu.edu/human-resources/benefits>

<https://www.odu.edu/human-resources/benefits/403b>

## **Optional Life Insurance**

<https://www.odu.edu/human-resources/benefits>

<https://web1.lifebenefits.com/content/lifebenefits/vrs/en.html>

## **ODU Short-Term Disability**

<https://www.odu.edu/human-resources/benefits>

<https://www.reedgroup.com/vrs>

## **Aflac**

<https://www.odu.edu/human-resources/benefits>

<https://www.aflacenrollment.com/OLDDOMINIONUNIVERSITY/JFZ582807591>

## **Long-Term Disability**

<https://www.odu.edu/human-resources/benefits>

<https://www.odu.edu/sites/default/files/2024/documents/new-york-life-voluntary-ltd-insurance-enrollment-form.pdf>

## **Personal Accident Insurance**

<https://www.odu.edu/human-resources/benefits>

<https://www.odu.edu/sites/default/files/2024/documents/new-york-life-voluntary-accidental-death-insurance-enrollment-form.pdf>

## **Long-Term Care Insurance**

<https://www.odu.edu/human-resources/benefits>

<https://www.genworth.com/>

## **Legal Resources**

<https://www.odu.edu/human-resources/benefits>

<https://www.legalresources.com/>

## **Pre-Tax Parking Agreement**

<https://www.odu.edu/transportation-parking-services/parking/faculty-staff>

<https://odu.t2hosted.com/Account/Portal>

## **Changing Beneficiaries**

The enrollment forms that faculty complete for the [Virginia Retirement System \(VRS\)](#) retirement, supplemental retirement, and group and optional life insurance coverage typically require the designation of a beneficiary. It is important to keep beneficiary information current in case living situations change due to divorce, death, or marriage.

## **Workers' Compensation**

More information can be found at the following link:

<https://www.odu.edu/human-resources/employees/classified/leave/workers-compensation>



## Child Support Withholding Disclosure

All new employees are required by Virginia law to disclose whether they are subject to an income withholding order for child support. If an employee is subject to an income withholding order, the University is required to withhold wages according to the terms of the order. The University is authorized to charge a service fee of \$5.00 per remittance of child support payments. All new employees must complete the [Child Support Disclosure Form](#). Falsification or material misrepresentation in the completion of the form may subject the employee to immediate termination. For more information, contact the [Payroll Office](#).

## Liens and Garnishments

Tax liens and garnishments must be honored in accordance with the state garnishment law and the [Federal Wage Garnishment Act](#). A garnishment or lien is the result of a legal procedure through which part of the salary is required to be withheld for the payment of a debt. In accordance with current law, a fee is charged for the costs associated with the collection and disbursement of garnishments, tax liens, and child support orders. The fee applies to full-time and part-time faculty and staff. For information on the fee structure, contact the [Payroll Office](#).

## Unemployment Compensation

Full-time faculty terminated involuntarily may be eligible for unemployment compensation. Questions concerning unemployment compensation may be directed to the [employee relations manager](#) or the [Virginia Employment Commission \(VEC\)](#).

## **Personal Property Insurance**

The University provides no insurance on the personal effects of its employees unless the personal property is specifically included in the employment agreement. Any faculty member who wishes such coverage should investigate the addition of a “scheduled personal property endorsement” to his or her homeowner’s policy for specific coverage on property kept at the University. In some cases, a special “personal articles” floater policy may be preferred in place of an endorsement.

## **Liability Insurance**

The Commonwealth of Virginia is currently protected under a self-insurance program to provide liability coverage to all agencies as set forth in Section 2.1-191.11 of the Code of Virginia.

## VI. OTHER INFORMATION

### Immigration Reform and Control Act

The [Immigration Reform and Control Act of 1986](#) makes it the responsibility of Old Dominion University to verify the identity and employment eligibility of all new employees. In order to comply with the provisions of the Immigration Reform and Control Act, all new employees must complete the [I-9 Form](#), which verifies identity and employment eligibility.

Documents which establish identity and employment eligibility must be presented as stated in the [Handbook for Employers, M-274](#).

Employees in the following categories will complete the I-9 Form at the indicated office:

- Faculty (full-time and part-time) - Office of Academic Affairs
- Classified and hourly employees - [Department of Human Resources](#)
- International faculty and students - [Visa & Immigration Service Advising](#)
- Students (undergraduate and graduate) - [Office of Finance](#)

Contact the Office of Academic Affairs for any questions concerning the Immigration Reform and Control Act.

#### **Procedures:**

New full-time faculty/administrators and adjunct faculty will be notified by the Office of Academic Affairs of the verification requirements and procedures of the act at the time initial employment is offered.

New faculty/administrators (full-time and part-time) will present in person to the Office of Academic Affairs, not later than the third calendar day following the first actual day of work, documents demonstrating the individual's identity and authorization to work in the United States.

The required I-9 Form will be completed by the employee, certified by the Office of Academic Affairs, and retained in a master file in the Office of Academic Affairs. All requirements must be met prior to releasing the individual's initial paycheck.

## **Visa and Immigration Services Policy**

**(University Policy, #6026)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6026>

## Manner and Schedule of Payment to Faculty and Faculty Administrators

Faculty on 12-month contracts and faculty administrators are paid semi-monthly over a 12-month period. Faculty with academic year appointments are also paid over 24 pay periods for 12 months. Payments are issued by Old Dominion University through the [Payroll Office](#). Part-time faculty teaching during regular semesters and the summer session are paid on a modified schedule of payments available from the Office of the Provost and Vice President for Academic Affairs.

Direct deposit is mandatory for all newly hired employees and is strongly encouraged for all employees as a means to address many of the logistical issues associated with payment distribution. The form required to [establish direct deposit](#) is available on the Old Dominion University website. Additional information regarding direct deposit can be obtained by contacting the Payroll Office.

## Extra Compensation in Off-Term Sessions

Full-time faculty members may teach in the off-term session<sup>1</sup> and earn extra compensation. The rate for full-time off-term employment, including research employment, shall not exceed the weekly equivalent (1/39<sup>th</sup>) of the full-time academic year salary of the individual staff member, nor may the total salary payments in the off-term exceed 13/39 or 1/3 of the normal academic year salary. Six semester hours is normally considered a full teaching load in the off-term. Full-time faculty members' off-term salaries are calculated according to a step-by-rank schedule available from the Office of the Provost and Vice President for Academic Affairs.

- Approved by the President  
October 1, 2003

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<sup>1</sup> Off term is the semester or session not covered by the faculty member's contract. Refer also to the section of this Handbook on Faculty Performance Period



## **Responsibility of Budget Unit Directors**

**(University Policy, #3001)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3001>

## **Old Dominion University Travel Risk Management Policy**

**(University Policy, #1007)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/1000/1007>

## University Travel

The policy can be found at the following link:

<https://www.odu.edu/travel>

## **Business-Related Travel Allowance**

**(University Policy, #1050)**

The policy can be found at the following link:

<http://www.odu.edu/about/policiesandprocedures/university/1000/1050>

## **Business Travel Reimbursement Policy**

**(University Policy, #1051)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/1000/1051>

## **Vehicle Use Policy**

**(University Policy, #3250)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3250>

## **Policy on the Use of Information Technology Resources**

**(University Policy, #3500)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3500>

## **Identity Theft Protection**

**(Board of Visitors Policy, #1601)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/bov/board-of-visitors-policy-1601>



## **Identity Theft Protection (Red Flag) Program**

**(University Policy, #3011)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3011>

## **Information Technology Access Control**

**(University Policy, #3501)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3501>

## **Information Technology Infrastructure, Architecture, and Ongoing Operations**

**(University Policy, #3502)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3502>

## **Data Administration Policy**

**(University Policy, #3504)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3504>

## **Electronic Mail Policy for Official University Business**

**(University Policy, #3506)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3506>

## **Policy on the Use of Tobacco and Smoking-Related Products, and Electronic Cigarettes and Vaporizers (*Interim Policy Revisions*)**

(University Policy, #3220)

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3220>

## **University Drug and Alcohol Policy**

**(University Policy, #6603)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6603>

## Drug-Free Workplace

The [Federal Drug-Free Workplace Act](#) requires that faculty be informed that the unlawful or unauthorized manufacture, distribution, possession, or use of a controlled substance is prohibited in the workplace. The workplace consists of any state-owned, controlled, or leased property, or the site where state work is performed. Any employee who commits any prohibited act under this policy shall be subject to the full range of disciplinary actions, including discharge, and/or may be required to participate satisfactorily in an appropriate rehabilitation program. As a condition of employment, each employee must abide by the terms of this prohibition and notify his or her supervisor of any criminal drug statute conviction based upon conduct occurring either on or off the workplace no later than five days after such conviction.

The [state policy on alcohol and other drugs](#) generally parallels the Drug-Free Workplace Act. The policy expands the federal act by addressing violations of any alcoholic beverage control law or law which governs driving while intoxicated based upon conduct occurring in the workplace.

If there are any questions about this matter, please contact the [Department of Human Resources](#).

### Sanctions

Faculty and staff are expected to comply with state and federal law and state and University policies concerning alcohol and drugs. University sanctions for violating any of these policies or laws may include a warning through dismissal in accordance with the prescribed procedures. Faculty and faculty administrators are governed by the procedures in this *Handbook*. Violation of local, state, or federal law may also result in prosecution by the appropriate legal authorities.

### Resources

Old Dominion University's complete Drug and Alcohol Policy may be found in [University Policy #6603](#). Copies of the University's policy and the entire [Commonwealth of Virginia's Policy on Alcohol and Other Drugs](#) may be obtained by contacting the [Department of Human Resources](#).

For information regarding [employee assistance programs](#) and the University's health care programs' coverage for outside alcohol and drug treatment, contact the [benefits manager](#) in the Department of Human Resources at 683-3042.

Referrals (management or self) for assistance will not jeopardize job security in any manner.

- Approved by the president  
October 8, 1990



## Gun & Weapon Regulation

The regulation can be found at the following link:

<https://www.odu.edu/bov/gun-and-weapon-regulation>

## **Minors on Campus**

**(University Policy, #3014)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3014>

## **Policy for the Use of Non-Research Related Volunteers**

**(University Policy, #6023)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6023>

## **Use and Keying of Facilities and Grounds**

**(University Policy, #3200)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3200>

## **Use of Bicycles and Other Motorized and Non-Motorized Personal Transport Devices on University Property**

**(University Policy, #3231)**

The policy can be found at the following link:

<https://www.odu.edu/sites/default/files/documents/univ-3231.pdf>

## **Unmanned Aircraft Systems (UAS) aka Uncrewed, Drones, Aerials and Other Powered Model Aircraft**

**(University Policy, #3015)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3015>

## **Fixed Asset Control**

**(University Policy, #3400)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3400>

## **Solicitation Policy for Employees and Vendors**

**(University Policy, #1600)**

The policy can be found at the following link:

<http://www.odu.edu/about/policiesandprocedures/university/1000/1600>



## Old Dominion University Identification Card Program

### General Policy

Old Dominion University's full-time faculty and their dependents, or an adult member residing in the household, are eligible for an Old Dominion University identification card. Part-time faculty and staff are eligible for a temporary identification card. University chaplains, Board of Visitors members, and persons assigned to Old Dominion University but paid by other sources are also eligible for an identification card.

Monarch Plus Accounts are available with Debit Card capability to nearly all on-campus locations, including Monarch Dining, the University Bookstore, vending services, Parking Services, and Chartway Arena. Off-campus businesses also accept these accounts. Faculty, staff, and students are encouraged to open an account and support the campus and off-campus business partners.

### Replacement Cards

There is a fee assessed to faculty and staff members and their dependents for replacing their cards when there is a change of name or when a card is lost or stolen.

### Privileges

The holder of a valid identification card is entitled to:

- Purchase of a faculty/staff parking decal
- Borrowing privileges from the University Library
- Use of recreation facilities during appropriate hours
- Free printed official transcripts
- Reduced prices for Old Dominion University athletic events
- 10% discount toward purchases at the University Bookstore
- Reduced prices for performances of ODU Players

### Security Purposes

Faculty/staff members and dependents should carry their identification cards while on campus. Campus police officers may request the card for identification purposes.

### Surrendering Cards

Faculty and staff members who terminate employment with the University must surrender their cards and their dependents' cards during their exit interviews.

## **Threat Assessment**

**(Board of Visitors Policy, #1014)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/bov/board-visitors-policy-1014>

## **Whistleblower Retaliation Policy**

**(University Policy #3020)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3020>

## **University Demonstrations Policy**

**(University Policy, #1700)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/1000/1700>

## Procedures for Student Suicidal and Emotionally Disruptive Behavior<sup>†</sup>

In the case of behavior or statements which indicate that a student may be suicidal or is emotionally disruptive to the academic process, these procedures will be followed:

1. The student will be asked to meet with the vice president for student services/dean of students and the director of counseling and advising services, who will make an assessment. If action or a decision is required prior to the completion of an assessment, the vice president for student services/dean of students will determine what action will be taken.
2. If an assessment determines that further action is necessary, the student may:
  - a. be instructed by the vice president for student services/dean of students to voluntarily seek counseling and provide documentation to the Office of Student Services;
  - b. be charged with a violation of the [ODU Code of Student Conduct](#);
  - c. be summarily dismissed from the University in accordance with the University's disciplinary procedures.
3. If the student's behavior is threatening or results in serious injury to others, campus police will be called immediately.

In the case of an attempted suicide which requires immediate medical or professional counseling, the following procedures will be followed:

1. Call the Norfolk Emergency Number 911.
2. Call campus police and notify them that an emergency exists and that the emergency 911 number has been called. Campus police will dispatch an officer to the scene and will notify the vice president for student services/dean of students of the incident.

Students previously dismissed from the University due to emotionally disruptive behavior must follow the following procedures in order to be readmitted to the University:

1. The student must submit a letter to the director of counseling and advising services from the mental health professional who has treated him or her, indicating the student's readiness to participate successfully in the University environment.
2. The student will then be evaluated by a University mental health professional who will submit a recommendation to the director of counseling and advising services with regard to the student's reentry into the University. A positive recommendation may include provisions to which the student must agree prior to being granted readmission.

- Approved by the provost and vice president for academic affairs  
July 1, 2003

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<sup>†</sup> Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## Guidelines and Policy on Dealing with Disruptive Students<sup>†</sup>

Appropriate conduct by students is an absolute requirement in the college and distance education classroom, and the University must operate with a policy of zero tolerance for any disruptive behavior. The term "disruptive behavior" means any behavior that substantially interferes with the conduct of a class. Disruptive behavior may include but is not limited to:

- Persistent late arrivals or leaving early in a manner that disrupts the regular flow of the class.
- Talking while the instructor is talking.
- Speaking in class without first obtaining recognition and permission to speak.
- Use of electronic equipment, such as cell phones, computers, MP3 players, etc., in a manner that disrupts the class.
- A student who becomes belligerent or verbally abusive when confronted as a result of his/her inappropriate behavior.

These guidelines are designed to provide faculty members with their options when confronted with disruptive students as well as inform them of the mechanisms they may use to correct the problem.

The most powerful deterrent to classroom disruption is for the faculty member to provide class expectations concerning appropriate conduct in the classroom. Each faculty member should publish in the course syllabus the course attendance policy, behavior policies, and other expectations for appropriate conduct in the classroom.

A faculty member may consider disruptive behavior when assigning grades for the class if participation is part of the final grade.

Students do not have the right to engage in behavior that is disruptive in the classroom. The instructor of record has the authority to maintain appropriate classroom behavior in all courses offered by Old Dominion University, whether in traditional or distance modes. Faculty have the right to immediately confront any student causing disruptive behavior and request cessation of the behavior. A follow-up conversation with the student(s) is recommended to reinforce the faculty member's expectations for appropriate conduct in the classroom. In situations in which students are cooperative with the faculty member's request to cease disruptive behavior, the faculty member need only report the incident to the department chair.

Should any student choose not to respond to a request to cease disruptive behavior, the faculty member should ask the student to leave the classroom to prevent further disruption to the class. A disruptive student is to be reported to the [Office of Student Accountability & Academic Integrity](#) for disciplinary action under the [Student Disciplinary Policies and Procedures](#).

Students engaged in classroom disruption will normally be charged with:

1. Failure to comply with the directions of University officials, their authorized agents, and local police agencies acting in the performance of their duties; and/or
2. Obstruction or disruption of University activities.

Should a student refuse to leave a classroom when asked to do so, or should a faculty member become concerned about his/her personal safety or the safety of the class, the [Old Dominion University Police Department](#) should be called immediately to remove the student. Even if the student leaves the classroom before Old Dominion University police arrive, the student is to be reported to the Old Dominion University Police Department and the [Office of Student Accountability & Academic Integrity](#) for appropriate disciplinary action.

If a faculty member is concerned about the behavior of a student or a group of students, the dean and department chair will consult with the faculty member about ways to improve the situation and will intervene in order to correct the problem.

- Approved by the provost and vice president for academic affairs  
February 27, 1992
- Revisions approved by the president  
February 18, 2003  
December 1, 2010

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† Faculty should reference the applicable Eastern Virginia Medical School and EVMS School of Health Professions program policies

## **Safety and Security**

**(University Policy, #3012)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3012>



## **Emergency Management Policy**

**(University Policy, #1021)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/1000/1021>

## **Environmental Health and Occupational Safety**

**(University Policy, #3223)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/3000/3223>

## Old Dominion University Faculty Senate Constitution

### I. Name

The name of this body shall be the Faculty Senate of Old Dominion University.

### II. Purpose

The faculty of the University, by virtue of their particular competence, are essential participants in the development and implementation of academic policy. The Faculty Senate is a representative body of the faculty, deriving its authority from the faculty of the University. As such, it shall exercise the authority of the faculty with respect to policy on academic matters and the professional affairs of faculty and perform such other functions as are delegated to it by the faculty of the University. Specifically, the Faculty Senate shall represent the faculty of the University in recommending policies to the president and other appropriate individuals and bodies on curriculum, academic freedom and tenure, faculty status, academic standards, research, clinical practice education, and related matters.

### III. Membership

#### A. Faculty Forum

All faculty under full-time teaching and research contracts and all professional librarians of Old Dominion University are members of the Faculty Forum. Upon integration with ODU, all EVMS full-time faculty will become members of the Faculty Forum. All faculty senators shall attend meetings of the Faculty Forum as part of their duties. Meetings may be called by the chair of the Faculty Senate, a majority vote of the Faculty Senate, or by petition of at least 10 percent of the forum membership. The chair of the Faculty Senate shall preside at meetings of the forum.

#### B. Faculty Senate

1. All members of the Faculty Forum are eligible to serve in the Faculty Senate.
  - a. Excluded from the census of the Faculty Senate districts and, therefore, from Faculty Senate membership are those employees designated as teaching and research administrators or professional faculty. This includes all who hold academic ranks in the offices of the President, Provost and Vice President for Academic Affairs, Executive Vice Presidents, and other Senior Vice Presidents. Academic Deans, Associate, Assistant, and Vice Deans (whether full- or part-time) are also excluded.
  - b. All department chairs or equivalent are eligible for membership and, thus, will be included in the Faculty Senate census.
2. The Faculty Senate shall consist of one senator from each Faculty Senate district. The Faculty Senate districts and the academic units within which they reside and represent are defined in the Faculty Senate Bylaws.
  - a. At its discretion, the Faculty Senate may invite other members of the University community to participate in its meetings as nonvoting members.

- b. The term of office of faculty senators shall be two years, beginning the first day following commencement.
- c. Elections shall be held each spring by March 31. Senators from odd-numbered Districts shall be elected in odd-numbered years. Senators from even-numbered Districts shall be elected in even-numbered years.
- d. Vacancies shall be filled promptly through election by the original constituency.

#### **IV. Officers and Executive Committee**

- A. The officers of the Faculty Senate shall be the chair, the vice chair, the secretary, and such other officers as the Faculty Senate deems necessary, to be elected every two years by the Faculty Senate at its organizational meeting. Officers of the Faculty Senate comprise the core members of the Faculty Senate Executive Committee. Terms for officers will be two calendar years, beginning the first day after commencement.
- B. The Faculty Senate Executive Committee provides leadership for the Faculty Senate by serving as an agenda committee for the Faculty Senate, helping the Senate conduct its business consistent with the Constitution and By-laws, and representing the faculty and the Faculty Senate to University leadership and the University community. Executive Committee members will be elected every two years by the Faculty Senate at its organizational meeting. Terms for Executive Committee members will be two calendar years, beginning the first day after commencement. The functions and composition of the Executive Committee are defined in the Bylaws.
- C. The chair of the Faculty Senate shall preside at all meetings of the Executive Committee, the Faculty Senate, and the Faculty Forum.
- D. The vice chair of the Faculty Senate shall perform the duties of the chair in the chair's absence.
- E. The secretary shall prepare and distribute to the Faculty Senate the agenda and minutes of all meetings of the Faculty Senate and the Faculty Forum. The secretary shall have published in an appropriate publication a report to the faculty of the business conducted in each meeting of the Senate as soon as possible following such meeting.

#### **V. Meetings**

- A. Faculty Senate meetings shall be scheduled at least twice each term and at the call of the Executive Committee.
- B. A meeting of the Faculty Senate shall be called by the Executive Committee upon petition of at least 25 percent of the Senators.
- C. The meetings of the Faculty Senate shall be governed by Robert's Rules of Order Revised, latest edition.
- D. A quorum of the Faculty Senate during the fall and spring terms shall consist of 50 percent of the Senators. A quorum of the Faculty Senate during the summer term shall consist of 25 percent of the senate body.

#### **VI. Faculty Senate Committees**

In addition to the Executive Committee, the Faculty Senate shall provide in its Bylaws for such standing and ad hoc committees as are required for the senate to carry out its responsibilities. The Faculty Senate shall invite representatives of the student government and administrators to serve on its standing committees concerned with policies directly affecting the quality of instruction. In

such cases at least two-thirds of the membership of each committee shall be members of the Faculty Forum.

#### **VII. Joint Committees**

- A. In areas of joint interest, the Faculty Senate is empowered to participate with the student government or other organizations through joint committees or joint meetings to the end of preparing joint recommendations. Such recommendations are subject to the approval of the Faculty Senate unless the Senate expressly empowers such committees or joint meetings to act without such approval.
- B. Joint committees are not to assume responsibility for areas of concern beyond those assigned to them except by prior approval of the Faculty Senate.

#### **VIII. Referral of Faculty Senate Actions to the Faculty Forum**

Upon petition of at least 10 percent of the membership of the Faculty Forum to the chair of the Senate, any action of the Faculty Senate will be submitted within 30 days to a referendum of the forum. The result of this referendum shall be binding on the Faculty Senate.

#### **IX. Representation of Faculty in Other Bodies**

The formal representation of the faculty, or a part of it, can be legitimately accomplished only through consultation with the faculty group being represented or their elected representatives.

#### **X. Amendments**

This constitution may be amended by a majority of ballots cast in a referendum of the entire membership of the Faculty Forum, providing the proposed amendment and nature of the referendum are provided to the members of the Faculty Forum at least two weeks prior to the referendum. Amendments must be proposed by a two-thirds vote of the Faculty Senate or by petition of 10 percent of the forum membership to become the subject of a referendum conducted by the Faculty Senate.

## Old Dominion University Faculty Senate Bylaws

### **Faculty Senate Districts**

Representation in the Faculty Senate will be according to Districts. The Faculty Senate is comprised of Senators who represent Districts within the constituent Faculties of Old Dominion University and Eastern Virginia Health Sciences Center. The Districts are defined to reflect the size of the faculty, students, and the structures of the academic colleges and schools. In situations involving changes to the names of the units or entities (i.e., college, school, department) underpinning the Faculty Senate Districts, the naming of the Districts can be changed by the Faculty Senate Executive Committee without requiring approval of the Faculty Senate. However, fundamental changes to the number of Districts, such as the addition or removal of academic departments that grant tenure and promotion, will require review by the Faculty Senate.

### **College of Arts and Letters:**

Each academic department that grants tenure and promotion is considered a Faculty Senate District.

District 1: Art  
District 2: Communication and Theatre Arts  
District 3: English  
District 4: World Languages and Cultures  
District 5: History  
District 6: Music  
District 7: Political Science and Geography  
District 8: Sociology and Criminal Justice  
District 9: Philosophy and Religious Studies  
District 10: Women's and Gender Studies

### **College of Business:**

Each academic department and school that grants tenure and promotion is considered a Faculty Senate District.

District 11: Accounting  
District 12: Management  
District 13: Economics  
District 14: Information Technology and Decision Sciences  
District 15: Marketing  
District 16: Finance  
District 17: Public Service

### **College of Education and Professional Studies:**

Each academic department that grants tenure and promotion is considered a Faculty Senate District.

District 18: Special Education  
District 19: Counseling and Human Services  
District 20: Educational Foundations and Leadership  
District 21: Human Movement Sciences  
District 22: STEM Education and Professional Studies

District 23: Teaching and Learning

**College of Engineering and Technology:**

Each academic department that grants tenure and promotion is considered a Faculty Senate District.

District 24: Electrical and Computer Engineering

District 25: Engineering Technology

District 26: Mechanical and Aerospace Engineering

District 27: Civil and Environmental Engineering

District 28: Engineering Management and Systems Engineering

**College of Sciences:**

Each academic department that grants tenure and promotion is considered a Faculty Senate District.

District 29: Biological Sciences

District 30: Chemistry and Biochemistry

District 31: Computer Science

District 32: Mathematics and Statistics

District 33: Ocean and Earth Sciences

District 34: Physics

District 35: Psychology

**University Libraries:**

The University Libraries is considered one Faculty Senate District.

District 36: University Libraries

**Teaching Faculty Without Academic Home Departments:**

Teaching faculty without affiliation to an academic home department or in standalone schools that do not grant tenure and promotion constitute one Faculty Senate District.

District 37: Unaffiliated Teaching Faculty

**Emeritus Faculty:**

The Old Dominion University Emeriti Faculty Organization constitutes one Faculty Senate District.

Emeriti faculty shall be entitled to one Senator and no more.

District 38: Emeritus Faculty

**Unaffiliated Research Faculty:**

Research faculty without affiliation to an academic home department constitute one Faculty Senate District.

District 39: Unaffiliated Research Faculty

### **College of Health Sciences:**

Each school that grants tenure and promotion is considered a Faculty Senate District.

District 40: Medical Diagnostics and Translational Sciences

District 41: Rehabilitation Sciences

District 42: Dental Hygiene

District 43: Communication Sciences and Disorders

District 44: Kinesiology and Health Science

### **School of Health Professions:**

Two Faculty Senate Districts that will be represented by Senators elected through procedures defined by the Schools of Medicine and Health Professions Faculty Assembly.

District 45: Clinical Departments (PA/SA)

District 46: Non-Clinical Departments

### **School of Medicine:**

Seven Faculty Senate Districts that will be represented by Senators elected through procedures defined by the Schools of Medicine and Health Professions Faculty Assembly.

District 47-53: School of Medicine

### **School of Nursing:**

Two Faculty Senate Districts representing academic departments that grant tenure and promotion.

District 54: Entry-Level Nursing Education

District 55: Advanced Level Nursing Education

### **School of Public Health:**

Two Faculty Senate Districts representing academic departments that grant tenure and promotion.

District 56-57: School of Public Health.

## **Election of Faculty Senators**

Senators from odd-numbered Districts shall be elected in odd-numbered years. Senators from even-numbered Districts shall be elected in even-numbered years. Elections shall be conducted by each District independently or according to the procedures of their respective Faculty Assembly and validated by the Executive Committee.

## **Election of Officers**

Each spring, after the election of the new members of the Faculty Senate and prior to commencement, the incumbent Executive Committee shall convene the following year's Faculty Senate for the purpose of electing officers. The incumbent officers shall officiate at this meeting and shall distribute notices of the meeting and minutes as for regular meetings. Only the members of the following year's Faculty Senate are eligible to vote in this meeting.



## **Officers and the Executive Committee**

The officers of the Faculty Senate shall be the chair, the vice chair, the secretary, and such other officers as the Faculty Senate deems necessary. Officers will be elected every two years by the Faculty Senate at its organizational meeting.

The Executive Committee provides leadership for the Faculty Senate by serving as an agenda committee for the deliberations of the Faculty Senate, helping the Senate conduct its business consistent with the Constitution and Bylaws, and representing the faculty and the Faculty Senate to University leadership and the University community.

The officers plus six Faculty Senators will constitute the Executive Committee of the Faculty Senate. Executive Committee members will be elected every two years by the Faculty Senate at its organizational meeting. The terms of the Executive Committee will be two calendar years, beginning the first day after commencement.

The composition of the Executive Committee will include:

- Faculty Senate chair
- Faculty Senate vice chair
- Faculty Senate secretary
- Six at-large representatives

In the election of members to the Executive Committee (both officers and at-large members), the Faculty Senate should strive to achieve broad representation of all campus units with members in the Faculty Senate.

## **Functions of the Executive Committee**

- Prepare the agenda for all Faculty Senate and Faculty Forum meetings, including regular reporting on Executive Committee activities.
- Represent the faculty and the Faculty Senate to the University leadership.
- Represent the Faculty Senate to the University community.
- Manage assignments to Faculty Senate standing and ad hoc committees and the follow-up to Faculty Senate actions by other University entities.
- Administer elections for officers and the Executive Committee for the incoming Faculty Senate (led by the vice chair).
- Monitor participation by faculty Senators. The Executive Committee can declare vacant the seat of a District Senator who fails to attend more than three properly called meetings of the Faculty Senate.
- Appoint standing and ad hoc committees.
- Perform such other functions as assigned to it by the Faculty Senate or the Faculty Forum.

## **Committees of the Faculty Senate**

1. Recommendations of the committees of the Faculty Senate are to be presented to the Faculty Senate for its approval except when such committees have been specifically empowered by the Faculty Senate to act without such approval.
2. Recommendations of committees of the Faculty Senate shall be in the form of written motions placed before the Senate for its consideration, accompanied by written rationales for the specific recommendations made.

3. Each standing committee shall have at least two Faculty Senators among its membership, and at least two-thirds of the membership of each committee shall be members of the Faculty Forum. The chair of the Senate shall serve as an ex-officio/non-voting member of all Senate committees and shall receive materials and agendas distributed to other committee members.
4. The chair of each standing committee shall be a Faculty Senator and shall be appointed by the Executive Committee.
5. The student government shall be invited to appoint the student members to vacancies of Faculty Senate committees on which they have representation.
6. The Executive Committee shall be empowered to declare vacant the seat of a member on a committee who fails to attend more than three properly called meetings of the committee.
7. General Responsibilities
  - Committee chairs will have a special responsibility for keeping the secretary of the Faculty Senate informed of their current work.
  - It is the committee chair's responsibility to schedule committee meetings so that, to the extent possible, all members have the opportunity to attend.
  - Committee chairs will publicize and hold open hearings on issues where appropriate or when so directed by the Faculty Senate.
  - All Faculty Senate committees are required to file an annual report with the Executive Committee.
  - When a committee is ready to bring a resolution to the floor, the committee chair will inform the secretary of the Faculty Senate and submit a written copy of the resolution, with rationale, for consideration by the Executive Committee, which may place the resolution on the agenda of the Senate meeting. Resolutions and rationales shall accompany the agenda for the meeting at which the resolution is scheduled for action by the Senate.

## **Standing Committees**

### **I. Undergraduate Curriculum and Programs**

Areas of Responsibility: All matters related to undergraduate curriculum and programs.

Examples include but are not limited to:

- Undergraduate curriculum and degree requirements for existing and proposed programs
- General education curriculum and requirements
- Oversight of articulation agreements and course equivalency
- Registration and orientation

#### **Membership**

- Eight faculty members (at least one from each college)
- One student representative appointed by the Student Senate (ex officio/non-voting member)
- Vice Provost for Academic Affairs (ex officio/non-voting member)

## **II. Undergraduate Academic Policies and Procedures Committee**

Areas of Responsibility: All matters related to academic policies and procedures affecting undergraduate students, programs, and faculty.

Examples include but are not limited to:

- Academic policies and procedures relating to admissions, continuance, and exit standards for undergraduate students
- Policies and procedures relating to academic advising for undergraduate students (including advising of student-athletes)
- Interaction of intercollegiate athletics with academic units and programs
- Financial aid to undergraduate students (including oversight of financial aid to student-athletes)
- Undergraduate instruction
- Continuance regulations and disciplinary-related issues such as academic dishonesty and the code of student conduct
- Student concerns as they relate to intercollegiate athletics.

Membership

- Eight faculty members (one from each college and at least two chief departmental advisors)
- One student representative appointed by the Student Senate (ex officio/non-voting)

## **III. Graduate Curriculum, Programs, Policies, and Procedures Committee**

Areas of Responsibility: All matters related to graduate curriculum, instruction, programs, students, and faculty.

Examples include but are not limited to:

- Graduate curriculum and requirements for existing and proposed degree and certificate programs
- Academic policies and procedures relating to admissions and enrollment, continuance, transfer credits, graduate assistantships and financial aid, and other issues affecting graduate students
- Policies and procedures impacting the administration of and faculty in graduate programs
- Graduate instruction, including graduate certification of faculty and training and certification of graduate teaching assistants

Membership

- Eight faculty members certified for graduate instruction. At least six of these must be graduate program directors (one from each college)
- Two graduate student representatives appointed by the Student Senate (one master's and one doctoral student) (ex officio/non-voting members)
- Dean of Graduate School (ex officio/non-voting member)

#### **IV. Scholarly Activity and Research Committee**

Areas of Responsibility: All matters related to or impacting faculty scholarly activity and research.

Examples include but are not limited to:

- Policies and procedures for scholarly activity and research, including research institutes or centers
- Resource allocation for support of scholarly activity and research
- Policies and procedures related to the administration of sponsored research

Membership

- Six faculty members (one from each college)
- Associate vice president for research and economic development and Graduate Studies (ex officio/non-voting member)

#### **V. BLANK**

#### **VI. Promotion & Tenure Committee**

Areas of Responsibility: All matters related to policies and procedures for faculty promotion and tenure.

Examples include but are not limited to:

- Policies on academic rank and tenure
- Procedures on awarding various academic ranks and procedures for granting tenure
- Policy on hiring and terminating faculty
- Policy and procedures on evaluation of faculty

Membership

- Eight faculty members (at least one from each college)
- Vice Provost for Faculty Affairs and Strategic Initiatives (ex officio/non-voting member)

#### **VII. Faculty Status and Remuneration Committee**

Areas of Responsibility

- Faculty rights, privileges, responsibilities, and related matters
- Working conditions for faculty
- Faculty development (including review of Faculty Development Fund Program Proposals)
- Faculty Salaries
- Conditions and terms of faculty contracts
- Faculty fringe benefits
- Faculty retirement programs

Membership

- Six Faculty Members (one from each college)
- Vice Provost for Faculty Affairs and Strategic Initiatives (ex officio/non-voting member)

## **VIII. Digital Learning and Online Education**

Areas of Responsibility: All matters related to digital learning, online education, and academic programs

Examples include but are not limited to:

- Academic policies and procedures governing online education, programs, and courses
- Policies impacting faculty teaching online courses
- Policies and procedures relating to academic advising for online students
- Online instruction and assessment
- Resources and support for online programs and faculty teaching online

Membership

- Ten faculty members affiliated with online programs or teaching online courses
- One representative of University Libraries
- Vice President for Digital Learning or representative of the Division of Digital Learning (ex officio/non-voting member)
- Vice Provost for Academic Affairs (ex officio/non-voting member)

## **IX. Administrative and Academic Support Committee**

Areas of Responsibility: All matters related to administrative and academic support and resources for academic programs and faculty.

Examples include but are not limited to:

- Budget-related matters such as enrollment projections, budget priorities and policies, and tuition and fee changes
- Physical plant, landscaping, and parking
- Computing services to support research and teaching
- Instructional support services
- Oversight of continuing education and noncredit programming
- Oversight of planning and use of University physical and financial resources for intercollegiate athletics that affect the academic mission, units, and programs of the University.

Membership

- Eight faculty members, including one member of the Executive Committee and at least two members of the previous year's committee
- Vice President for Administration and Finance (ex officio/non-voting member)

## **X. Library Committee**

Areas of Responsibility: Advise the University Libraries' activities in support of students and faculty.

Examples include but are not limited to:

- Identifying and addressing issues affecting the ability of the University Libraries to meet the instructional and research needs of students and faculty

- Ensuring adequate communication between the University Libraries and students, faculty, and administrators
- Ensuring adequate coordination between the University Libraries and faculty and academic programs
- Advising the University Libraries on the allocation of resources for collection material and services, especially considering changes in academic programs, the student population, and faculty needs

#### Membership

- Six Faculty members (one from each college)
- Three professional librarians selected by the University

### **Procedures Concerning New Resolutions and Other New Business**

- A. All members of the academic community may submit matters for consideration to the Faculty Senate. The procedure to be used is as follows, except for emergency matters (see section C below).
  1. Resolutions, petitions, suggestions, or any other matters shall be submitted to the chair of the Faculty Senate in writing. A concise explanation of the rationale behind the petition should form part of the statement. Issues can be submitted via the online issue form (<https://www.odu.edu/faculty-senate/issue-logs/issue-form>) or via email to the Faculty Senate office ([jmoody@odu.edu](mailto:jmoody@odu.edu)).
  2. The Executive Committee will give careful consideration to all matters thus submitted. Depending on the issue and the way it is presented, the Executive Committee may do the following:
    - Bring a matter of special urgency directly to the floor of the Senate.
    - Assign the matter to the appropriate standing committee for deliberation and a report to the Senate, or appoint an Ad hoc Committee to investigate the issue and report its findings to the Senate.
    - Refer the matter to another officer or organization within the University for action.
    - Decide that the matter is outside the purview of the Senate or that it cannot be acted on in the form submitted.
- B. Whatever the decision of the Executive Committee, the secretary of the Faculty Senate will do the following:
  1. Inform the petitioner in writing of the decision taken by the Executive Committee, and in cases of refusal to take action, briefly explain the rationale for the decision.
  2. Inform the Faculty Senate of the actions of the Executive Committee and distribute with the agenda of the Senate meetings a list of all matters submitted, together with a statement of the action of the Executive Committee in each case. The Faculty Senate may reverse or revise any of the Executive Committee's actions at its next regular meeting.
  3. Maintain a complete register of all resolutions and issues with a file on each issue, including any action taken on the issue by the administration or Board of Visitors.

C. Emergency Issues

Any committee or Senator that wishes to bring directly to a meeting an item that is too urgent to be submitted in the normal manner may do so by the following procedures:

1. The resolution and its rationale, accompanied by a concise explanation of the nature of the emergency, must be distributed in writing to the Faculty Senate before the meeting is called to order.
2. Under "Approval of the Agenda," a motion must be made to add the item at an appropriate place in the agenda of the meeting. If the motion is passed, the item will be dealt with as a part of the Faculty Senate's business.

### **Attendance**

- A. Any Faculty Senator who, for any reason, misses three meetings of the Faculty Senate in an academic year shall be deemed to have vacated their seat and shall be replaced. In the event that a regular meeting is recessed to be reconvened at a later date, each session missed will be considered an absence for purposes of this role.
- B. Exceptions to the above provision may be made only by a two-thirds vote of the Senate conducted by a secret ballot.

### **Amendment**

- A. These Bylaws may be amended at any meeting of the Faculty Senate by a two-thirds vote of the members present, provided the amendment has been submitted in writing and read at the previous regularly scheduled meeting.

## VII. SOM AND SHP PROGRAM POLICIES

### VHS Organizational Chart

The policy can be found at the following link:

<https://myportal.evms.edu/integration/organization-chart/post-integration-orgstructure.pdf>



## Clinical Attendance Policy

**Responsible Oversight Executive:** Executive Vice President of HSC

**Date of Current Revision or Creation:** July 1, 2024

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### A. PURPOSE

Attendance and punctuality are essential elements of a Clinical Employee's job performance. In order to ensure that Clinical Employees report to work as scheduled and keep excessive unscheduled absences and tardiness to a minimum, attendance and punctuality will be monitored, and disciplinary action taken, as necessary, in accordance with this policy.

### B. AUTHORITY

[Code of Virginia Section 23.1-1301](#), as amended, grants authority to the [Board of Visitors](#) to make rules and policies concerning the institution. Section 7.01(a)(6) of the [Board of Visitors Bylaws](#) grants authority to the President to implement the policies and procedures of the Board relating to University operations.

[Virginia Department of Human Resource Management Policy 1.60 – Standards of Conduct](#)

### C. DEFINITIONS

**Administrative and Professional (AP) Faculty** - Employees who perform work directly related to the management of the educational and general activities of the institution, department, or subdivision or whose professional positions serve the educational, research, athletic, medical, student affairs, and development functions or activities of the institution. For purposes of this policy AP Faculty shall be those employees who have administrative duties in support of EVMS Medical Group operations.

**Administrative and Professional (AP) Medical Faculty** - Employees who have administrative or professional duties directly related to the management or administration of, or patient care services in, a clinical care setting on behalf of EVMS Medical Group.

**Classified Medical Staff** - A salaried employee whose terms and conditions of employment are subject to the [Virginia Personnel Act, Code of Virginia Section 2.2-2900 et seq.](#), as amended, and who is employed in a classified position to perform administrative or patient care services in a clinical setting on behalf of EVMS Medical Group.

**Clinical Employees** - Employees who are classified as AP Faculty, AP Medical Faculty, TR Medical Faculty, Classified Medical Staff, and Wage Employees under this policy.

**Health Sciences** - The Macon & Joan Brock Virginia Health Sciences at Old Dominion University.

**Occurrence** - Any documented instance of unauthorized leave by a supervisor where a Clinical Employee was either absent or late for a scheduled shift.

**Teaching and Research (TR) Medical Faculty** - Employees who hold academic rank and whose work assignments primarily involve instruction, research, or scholarly activity for trainees in a clinical setting and/or the management or administration of, or patient care services in, a clinical setting and who have a faculty appointment in a department of the School of Medicine.

**Wage Employee** - A non-salaried employee who receives pay for hours worked and is not covered by the provisions of the Virginia Personnel Act. Wage Employees are sometimes referred to as hourly employees. Wage Employees have no guarantee of employment for a particular term or a particular daily or weekly work schedule; they serve at the will of the designated hiring official and may be terminated at any time. Wage Employees may have clinical duties or may have non-clinical administrative duties in support of EVMS Medical Group operations.

#### D. SCOPE

This policy applies to all Clinical Employees within the Macon & Joan Brock Virginia Health Sciences at Old Dominion University.

#### E. POLICY STATEMENT

This policy outlines the attendance and punctuality expectations for Clinical Employees and the resulting Occurrences for individuals who do not meet such requirements. This policy supplements the Standards of Conduct that apply to Classified Medical Staff.

#### F. PROCEDURES

1. **Unauthorized Leave.** For most employees, unscheduled absences such as personal or family illness are legitimate, occur infrequently, and present few problems. Excessive Occurrences of unscheduled absenteeism and tardiness, however, place a burden on other employees who must perform the duties of the chronically absent or late employee. Leave types listed below are considered unauthorized and shall be considered Occurrences as follows:
  - i. **Unauthorized absence = 1 Occurrence.** An unauthorized absence occurs when an employee misses more than four (4) hours of work within a regularly scheduled workday as a result of a call-in or leaving early due to illness or family illness. An unauthorized absence of consecutive days due to the same illness will be counted as the same Occurrence up to a maximum of five (5) days. Each unauthorized absence for illness after the 5th day may be counted as an individual Occurrence unless the employee is eligible and has been approved for leave under the [Family and Medical Leave Act \(FMLA\)](#). For example, if an employee calls in sick on Monday, Tuesday, and Wednesday, this counts as one (1) Occurrence. If an employee calls in sick on Monday and reports back to work on Tuesday, this counts as one (1) Occurrence. If an employee calls in sick Monday, Wednesday, and Friday and works Tuesday and Thursday, this counts as three (3) Occurrences. Unauthorized absences of consecutive days for any reason other than illness will be counted as individual Occurrences. For example, if an employee calls in due to lack of transportation on Monday, Tuesday, and Wednesday, this counts as three (3) Occurrences.

- ii. **Tardy = .5 Occurrence.** An employee is considered tardy when he or she has an unauthorized, unapproved late arrival to work, is late from lunch, or is back late from a break, as determined by department policy and the time recorded on the Time and Attendance system in each department.
  - iii. **Unauthorized early departure = .5 Occurrence.** Leaving before the end of a scheduled shift or leaving for lunch early without having received prior approval is considered an early departure.
  - iv. **Failure to report for overtime =** If an employee is scheduled to work overtime and either fails to report or reports after the scheduled start time, an Occurrence will be charged as noted above.
  - v. **No-call/no-show = 7.5 Occurrences.** An employee is considered a no-call/no-show if he or she fails to report to work and fails to call in accordance with the department's call-in procedure. If there is no department-specific call-in procedure, employees who are not in approved leave status must provide notice to their direct supervisor via email or text message at least 30 minutes prior to their start time. A no-call/no-show will result in probation if no prior disciplinary action for attendance has been taken, regardless of the number of prior Occurrences. If an employee is involved in the disciplinary process for attendance and is considered a no-call/no-show, the next level of disciplinary action may include termination. Any no-call/no-show lasting three (3) days is considered job abandonment and will result in immediate termination of employment.
2. **Occurrence Calculations.** Occurrences are counted collectively (absences, tardies, and early departures combined) in a rolling six (6) month period (an approved leave status other than approved vacation will not count towards the rolling six (6) months) and shall result in disciplinary action as indicated below. Extenuating circumstances may be considered when determining discipline (for instance, the employee is in a serious accident or is hospitalized), and Health Sciences Human Resources reserves the right to combine or skip steps when the progressive discipline process, outlined in the chart below, has failed to remedy the unacceptable behavior and/or when there is evidence of a pattern for which multiple disciplinary actions have been taken within a one (1) year time frame. [Health Sciences Human Resources](#) must approve all disciplinary action before it is taken.

Number of Total Occurrences	Action
5.5	Verbal warning in accordance with Health Sciences Disciplinary Action and Termination policy.
6.5	Written warning in accordance with Disciplinary Action and Termination policy.
7.5 or No call/no show with no prior disciplinary action	90 Days Probation in accordance with Disciplinary Action and Termination policy
Greater than 7.5 or any future Occurrence while on probation	Termination in accordance with Disciplinary Action probation and Termination policy.

- 3. Exceptions.** The University recognizes the occasional need for Clinical Employees to be absent due to pre-scheduled medical appointments, authorized vacations, or certain other circumstances and offers various forms of leave benefits. Leave types listed below are considered authorized and shall not be included in any Occurrence calculation.
- a. Vacation leave must be approved in advance in accordance with ODU policy and will not be considered an Occurrence.
  - b. Sick leave for medical appointments or other foreseeable medical issues must be approved in advance by the department supervisor and taken in accordance with the ODU policy and will not be considered an Occurrence.
  - c. Late arrivals or early departures, when approved by the department supervisor in accordance with the department's policy, will not be considered an Occurrence.
  - d. Family and Medical Leave is authorized when taken in accordance with [University Policy #6050 - Family and Medical Leave Act](#) and will not be considered an Occurrence.
  - e. Military leave is authorized when taken in accordance with the [Virginia Department of Human Resource Management Policy #4.50 - Military Leave](#) policy and will not be considered an Occurrence.
  - f. Civil leave is authorized when taken in accordance with the [Virginia Department of Human Resource Management Policy #4.05 - Civil and Work-Related Leave](#) and will not be considered an Occurrence.
  - g. Inclement Weather/Emergency Leave is authorized when the clinical practices are closed in accordance with [University Policy #1020 - Closure of the University Due to Inclement Weather & Emergencies](#) and will not be considered an Occurrence.

## **G. RECORDS RETENTION**

Applicable records must be destroyed in compliance with the [Commonwealth's Records Retention and Disposition Schedules](#).

## **H. RELATED INFORMATION**

[Virginia Department of Human Resource Management Policy #1.60 - Standards of Conduct](#)  
[Virginia Department of Human Resource Management Policy #4.05 - Civil and Work-Related Leave](#)  
[Virginia Department of Human Resource Management Policy #4.50 - Military Leave](#)  
[University Policy #1020 - Closure of the University Due to Inclement Weather & Emergencies](#)  
[University Policy #6050 - Family and Medical Leave Act](#)

## **Virginia Health Sciences Disciplinary Action Policy (*New Interim Policy*)**

(University Policy, #6601)

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6601>

## **Virginia Health Sciences Grievance Policy (*New Interim Policy*)** (University Policy, #6604)

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6604>

## **Virginia Health Science Separation Policy for Clinical Employees (*New Interim Policy*)**

**(University Policy, #6061)**

The policy can be found at the following link:

<https://www.odu.edu/about/policiesandprocedures/university/6000/6061>

## 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 Medical Group at Old Dominion University (EVMS MG) program is not considered to be consultation services.

### Applicability

This policy shall be applicable to all Full-Time Salaried Faculty as defined in [Board of Visitors Policy #1701 - Policies and Procedures Relating to Faculty Appointment, Promotion, and Tenure of EVMS Faculty](#) full-time salaried faculty members of EVMS.

### Introduction

In general, reasonable consultation activities are mutually advantageous to the University 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 MG, in accordance with EVMS MG bylaws.
  - 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 20 days per year to these activities with the approval of the faculty member's Department Chair. Additional time devoted to private consulting activities may be appropriate in unusual circumstances but only with the prior approval of the Department Chair or Dean of the School of Health Professions, as applicable. Fees received in connection with private consulting activities will ordinarily be retained by the faculty member. Department Chairs shall maintain an accurate record of the time that each faculty member of the department devotes to private consultation activities.
- b. The University 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 their employment at the University.
- c. Use of University 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 VHS facilities or other resources may be granted to a faculty member by the EVP, 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 (1) year, and 3) the renewal period of such work will not exceed two (2) years.
  - iii. In instances where a faculty member is granted permission to use facilities or other resources of the VHS in order to carry out consulting activities, the appropriate disposition of applicable fees shall be decided by the Department Chair and Dean of the School of Health Professions, as applicable, after discussions with the faculty member.

## Interactions with Industry Policy

### I. APPLICABILITY

Unless otherwise specified in any section below, this policy applies to faculty/clinicians, staff, students, residents, and other trainees, volunteers, and community or otherwise affiliated faculty in their duties as faculty in the School of Health Professions (SHP) or School of Medicine (SOM) at Mason & Joan Brock Virginia Health Sciences at Old Dominion University (VHS), including acting as principal investigators on a University-sponsored project.

### II. ACCESS TO VHS

- A. Access to VHS by individuals who work for or represent the interests of Industry (“Industry Representatives”) is restricted to non-public, non-patient care areas and only upon invitation by a SOM or SHP department or [University Procurement Services](#) for non-marketing purposes such as device or equipment training.
- B. Industry Representatives may attend grand rounds on occasion for educational purposes if expressly invited by a department or division director or faculty member, and if no patient-specific information will be discussed, and no marketing activities will take place.
- C. Medical device or similar Industry Representatives may only be present for patient care interactions when:
  - 1. The purpose of the representative’s visit is to provide in-service training or assistance to an EVMS Medical Group at Old Dominion University (EVMS MG) clinician or staff member on devices or equipment;
  - 2. There is a formal written agreement between the University and the Industry Representative’s company;
  - 3. The representative is appropriately approved in accordance with EVMS MG policies; and
  - 4. There has been prior written disclosure to the patient (or his or her family) that Industry Representatives may be present in the procedure area.

### III. GIFTS TO INDIVIDUALS/PROMOTIONAL MATERIALS

- A. **Incidental Gifts and Promotional Items.** To avoid the implied expectation or perception of reciprocity, no gifts, entertainment, food items, or meals, regardless of value, from Industry may be accepted by any individual. In addition, Industry promotional materials may not be exhibited or displayed in the SOM or SHP unless part of an approved educational activity pursuant to section V of this policy.
- B. **Educational Materials.** Medical or scientific books, anatomical models and illustrations, posters, or other educational promotional items may not be accepted from Industry unless the item and its packaging are not branded (does not carry the Industry name or logo) and the

item is of nominal value. In addition, the items must be distributed through a SOM or SHP department or via University Procurement Services. Nominal value shall be determined by the Dean.

**C. Consulting Arrangements.** Consulting arrangements involving personal compensation without commensurate associated duties are considered gifts to individuals and are prohibited. This includes payment for attendance at activities and payment for being listed on Industry websites as associated with any Industry product or treatment modality. Specific policies regarding outside consulting for Industry are set forth in section VII of this policy.

**D. Travel Support.** Acceptance of payment or reimbursement for travel expenses to attend lectures and meetings is considered a gift and not permitted under this policy. Travel support may only be accepted for:

1. Contractual services, such as a disclosed and approved consulting activity;
2. Viewing of capital equipment that is being considered for purchase;
3. Travel related to sponsored research in accordance with University sponsored project policies;
4. Travel to professional meetings by faculty with donated funds provided that the decision to use the donated funds is made by the Department Chair; and
5. Travel by students and trainees if travel funds come from scientific societies, whether or not Industry is the source of funds, provided that Industry does not control the selection of the recipient of travel support.

#### IV. SUPPORT FOR EDUCATIONAL ACTIVITIES

**A. Continuing Medical Education (CME) Activities.** The [Office of Continuing Medical Education](#) (OCME) has been accredited by the [ACCME](#) to provide *AMA PRA Credit Category 1 Credit™* continuing medical education for physicians. All accredited CME activities for VHS, or using the University or VHS name or resources, must be sponsored directly by or jointly with the University and must be managed by the OCME to ensure compliance with both [ACCME Standards for Commercial Support](#) and VHS CME policy.

**B. Non-ACCME Accredited and Other Educational Activities.** Industry support may be accepted for non-ACCME accredited and other educational activities (i.e., grand rounds, lecture series) sponsored by the University, both on or off campus. In order for such support to be allowable, the educational activity must be free from the control of Industry and must have complete and autonomous control over all of the arrangements, including the choice of speaker, the setting, and invitations to attendees. Support must be used strictly for educational activities and managed by a department or program, not an individual faculty member or the individual developing the activity, and must substantially conform to the same guidelines as with ACCME-accredited educational activities as follows:

1. The terms and conditions of the educational activity must be set forth in a Letter of Agreement signed by Industry and the University;
2. Industry may not require that support be used for a specific topic, speaker, or activity, and support may not influence the curriculum or program in any way;
3. Industry Representatives may not bring, serve, or otherwise directly pay for food. Industry may, however, provide an educational grant to the department in support of food costs;
4. No Industry or product-specific promotion or marketing (e.g., corporate logos, slogans, signs, brochures, or other marketing materials) may be displayed as part of the educational activity. Vendor exhibits may only be allowed if separated from the educational activity and with approval from the Dean. Acknowledgment of the Industry support, including any in-kind support, must be displayed publicly and/or disclosed in program materials;
5. Faculty financial relationships that pose a conflict of interest or appear to pose a conflict of interest must be disclosed to the attendees; and
6. All guest lecturers must complete a [Disclosure of Relationships Form](#), and any conflicts of interest must be resolved or managed prior to the date of the educational activity.

**C. Department Meetings.** Industry funding may not be accepted to support the costs of internal department meetings, retreats, or social events, even if for “educational” purposes. In addition, Industry Representatives may only attend the meeting or event as a member of the general public if such meeting or event is open to the general public.

**D. Graduate Medical Education (GME).** All Industry-sponsored events taking place during scheduled didactic programs are considered part of the official curriculum for residents/fellows and are subject to the following:

1. The event must support or advance the overall education of the trainee(s) or have a benefit to patients.
2. The event and any speakers must be approved in advance by the GME Program Director.
3. There must be at least one faculty member present at the event to ensure a balance in the presentation, as well as offering counterpoints, opposing views, etc.

## **V. SAMPLES**

EVMS MG departments may accept free drug, equipment, or supply samples from Industry solely for distribution as starter medications for patients who would have financial difficulty purchasing the medication or would otherwise be non-compliant or have poor outcomes without the sample medication. Since distribution of non-formulary drugs or supplies to patients may encourage the use of costlier medications, EVMS MG clinicians should be judicious in distributing medications and, when samples are distributed, must advise the patient of the cost advantage of using a generic alternative or equivalent, if one is available. Samples may not be sold, may only be provided to

individuals with whom EVMS MG clinicians have a bona fide doctor-patient relationship, and must be dispensed, tracked, and stored in accordance with EVMS MG policies.

## **VI. INDUSTRY-SPONSORED ACTIVITIES**

**A. Attendance at Industry Meetings and Conferences.** In order to avoid the potential for an actual or perceived conflict of interest, faculty, staff, students, residents, and trainees are discouraged from attending Industry meetings and conferences that are promotional in nature (such as dinner meetings). Should the choice be made to attend, individuals must ensure that:

1. The activity is designed to promote evidence-based clinical care and/or advance scientific research; the lecturer/speaker has determined and prepared the content and is expected to provide a fair and balanced assessment of the topic and promote objective scientific and educational discourse;
2. The Industry sponsor discloses its support, and attendees are not required by the Industry sponsor to accept advice or services concerning speakers, content, etc., as a condition of attendance at the meeting; and
3. Attendees do not accept gifts or other compensation (including travel expenses) for attendance and pay for their own meals unless modest meals are being provided as part of the larger program.

**B. Speaking Engagements.** The terms of the speaking engagement shall govern whether or not the activity is acceptable under this policy. Faculty members may speak at an Industry-sponsored program and/or facilitate the participation of GME or student trainees in a program only if:

1. The relationship is disclosed and managed in accordance with the University's conflicts of interest policies;
2. The faculty member retains full control and authority over the engagement and does not allow Industry to control or direct the communication or the slide set (or other presentation materials) to be used by the faculty member;
3. The lecture provides a balanced assessment of therapeutic options promoting objective scientific and educational activities and discourse;
4. The faculty member is not required by the company sponsor to accept advice or services concerning teachers, authors, or other education matters, including content, as a condition of the sponsor's contribution of funds or services;
5. The faculty member is not being paid to act as a long-term Industry employee or spokesperson (see section VII.D.), the faculty member is not receiving any gift(s) in lieu of payment, and the faculty member is only receiving compensation commensurate to services performed;

6. The faculty member explicitly describes the nature of the support and all related relevant financial interests (past, existing, or planned) to the audience if disclaimers are not otherwise provided; and
7. The lecturer makes clear to the audience that the content of the lecture reflects the view of the lecturer and not the University.

**C. Consulting for Industry.** Faculty may consult with Industry in accordance with this *Handbook* only if:

1. The consulting relationships are approved by the faculty member's Department Chair and are disclosed and managed in accordance with the University's conflicts of interest policies.
2. The faculty member is not receiving gifts in lieu of payment, compensation is at fair market value for the services to be performed, and the arrangement is governed by a written agreement specifying the service(s) to be provided and the cost of such services;
3. The consulting arrangement is not exclusive and allows for the faculty member to prescribe or use any comparable equipment, devices, or treatment modalities;
4. The faculty member makes it clear that content reflects the views of that faculty member and not the views of the University (if consulting activities include speaking); and
5. University logos may not be used for any purpose, and the University and VHS name may only be used to identify the faculty member's position or affiliation with the University.

**D. Prohibited Activities.** Providing services for the following activities is not permitted under any circumstances:

1. Industry-sponsored "speakers bureaus" (i.e., contractual relationships to give talks in which the topic(s) and/or content are provided by the company);
2. Industry marketing and training programs designed solely or predominantly for sales or marketing purposes (i.e., "detailing"); and
3. Ghostwriting. Faculty, residents, and students may not allow their professional scholarly papers or presentations of any kind, oral or written, to be ghostwritten by any person from Industry, a medical education company, or another source. "Ghostwriting" refers to claiming authorship of a paper or presentation that was written or prepared by another person.

## VII. GRANTS, FELLOWSHIPS, AND SCHOLARSHIPS

**A. Scholarships & Other Educational Funds for Trainees.** Industry-sponsored scholarships and other educational funds from Industry may be given to a department or division through the [EVMS Foundation](#), provided that there is no expressed or implied quid pro quo for the funds. The evaluation and selection of recipients of such funds shall be made by the Department

Chair, GME Program Director, or in accordance with scholarship selection committee criteria, as applicable, with no involvement by Industry. Such gifts will be acknowledged in accordance with established gift acceptance policies.

**B. Other Gifts.** Industry may support the VHS mission through unrestricted gifts, gifts in-kind, or other gifts provided that there is no expressed or implied quid pro quo for the gift, no involvement by Industry in the distribution of the gift, and the gift complies with established gift acceptance policies. All gifts must be accepted through the [EVMS Foundation](#). Such gifts will be acknowledged in accordance with established gift acceptance policies.

## **VIII. RESEARCH**

The [University Individual Research Conflicts of Interest and Commitment policy](#) sets forth the rules governing investigators' financial interests as they relate to the design, conduct, and reporting related to research. All other matters related to interactions with Industry are subject to this policy.

## **IX. SANCTIONS FOR FAILURE TO COMPLY**

In the case of a single instance of an inadvertent failure to comply with this policy, [VHS Compliance](#) will remind the involved individual(s) of their obligation to comply with the policy. In the case of repeated or deliberate failure to comply with this policy, the matter will be referred to the Chair of the department and the Dean for disciplinary action.

## **X. QUESTIONS**

Questions about this policy or the chart should be directed to the [VHS Compliance Office](#) at 757-446-6008.

## **Responsibilities of a Departmental Chair of the School of Medicine and Senior Associate Vice President and Dean, EVMS School of Health Professions**

The Chair of any academic department of the School of Medicine and the Senior Associate Vice President and Dean, EVMS School of Health Professions (VPDSHP) 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 (SOM) and School of Health Professions (SHP) at the Macon and Joan Brock Virginia Health Sciences at Old Dominion University (VHS), including area-wide cooperation in regional program development. Specific responsibilities of the Department Chair of the SOM 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 SOM or SHP, as applicable, 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 SOM 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 SOM, SHP, and other meetings.
- Provide professional leadership and example in the department.

### ***Academic***

- Implement the courses of study and portions of the integrated undergraduate/graduate medical education curriculum related to the department of the SOM or SHP. The learning objectives of the curriculum will be developed by the department, program, and/or interdepartmental curriculum planning groups and be approved by the SOM Medical Education Committee or SHP Curriculum Committee.
- Determine and recommend to the Dean of the SOM 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's policy



developed by the relevant committee, and approved by the Executive Vice President for the Health Sciences (EVP).

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

### ***Faculty Affairs***

- Recruit and orient new faculty members whose qualifications are in accordance with school and department priorities.
- Assist and encourage faculty growth and high performance in teaching, research, and other professional activities; and in particular, to assist faculty in obtaining research and/or teaching grants.
- Oversee faculty responsibilities and protect academic freedom.
- Establish written expectations for each of the faculty members in the department on a yearly basis and make documented recommendations to the Dean of the SOM and/or the EVP for their retention, tenure, promotion, and annual salary increments where appropriate.

### ***Budgetary Affairs***

- Develop the annual departmental budget request to be recommended to the EVP.
- 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 at Old Dominion University.

## SOM and SHP Expectations for Student Conduct

### I. POLICY

School of Medicine (SOM) and the School of Health Professions (SHP) Expectations for Student Conduct

### II. PURPOSE

Old Dominion University (ODU) expects its students to assume responsibility for their behavior, to conduct themselves in the highest traditions of health professionals who are engaged in the pursuit and application of knowledge, and to abide by the laws of the United States, the Commonwealth of Virginia, and the rules and regulations of ODU. The policy defines the expectations for student behavior and the procedures for reporting and adjudicating violations of this policy. This policy applies only to students in the SOM and SHP at the Virginia Health Sciences at Old Dominion University (VHS).

### III. RESPONSIBLE PARTY AND REVIEW CYCLE

SOM and SHP Student Affairs will review this policy annually.

### IV. ACCREDITATION REFERENCES

LCME 3.5 – Learning Environment/Professionalism

SACSCOC 12.3 – Student Rights

SACSCOC 12.4 – Student Complaints

### V. DEFINITION(S)

**Appeal:** The request to have a decision in a case reviewed by a designated official.

**Business Day:** Any weekday ODU is open, regardless of whether classes are in session.

**Good faith:** Made with honest belief or purpose.

**Hearing Officer:** An individual assigned by the SOM and SHP Director of Student Rights and Responsibilities to hear alleged violations of institutional policy.

**ODU Official:** A staff or faculty member representing ODU or the SOM and SHP.

**ODU Premises:** Property owned and operated by ODU.

**ODU Activity:** Any activity, regardless of location, that is financed by ODU or the SOM and SHP, planned, and facilitated by a recognized student organization and approved by ODU.

**Preponderance of Evidence:** The standard of proof that applies to student conduct proceedings or determinations. This term means that the evidence supports the conclusion that it is more likely than not that a policy violation occurred.

**Retaliation:** Any adverse action, or credible threat of an adverse action, taken against an individual who has reported known or suspected misconduct, participated in an inquiry or investigation or disclosed concerning behavior to institutional officials. Retaliation also includes action to discourage an individual from disclosing concerning behavior to institutional officials. Disciplinary action resulting from student performance concerns or as a result of student misconduct is not considered retaliation.

**Respondent:** A student who is accused of violating institutional policy

**Sanction:** A required action or activity assigned to remedy a violation of institutional policy.

## VI. DESCRIPTION

### Prohibited Conduct

Students shall conduct themselves in a manner compatible with the educational mission of the SOM and SHP and shall be responsible for their conduct from the time of application for admission through graduation. These expectations shall apply to a student's conduct even if the student withdraws while a disciplinary matter is pending or if conduct is discovered after a degree is awarded. The following conduct, committed or attempted, is prohibited for all students and student organizations and is subject to disciplinary action, including dismissal:

#### Acts of Academic Dishonesty

The misrepresentation of another's work as one's own, regardless of intent, or a misrepresentation of the circumstances under which the work was done to gain an unfair advantage. This violation includes but is not limited to copying, unauthorized aid/collaboration, unauthorized divulging of information, using unauthorized equipment or devices on graded activity, intentionally commencing work, or failing to terminate work on any graded activity in violation of time constraints imposed, or plagiarism.

Plagiarism is considered any action by an individual with the intent to deceive or with reckless disregard for proper scholarship procedures, presents any information, ideas, or phrasing of another as if it were their own, and does not give appropriate credit to the source.

#### Acts of Dishonesty

Deliberately misrepresenting the truth made with the intent to mislead another or the untruth made with reckless disregard for the fact of the matter asserted. This includes forgery, alteration, or misuse of patient medical records or other official documents, records, or identification, and knowingly furnishing false information to an individual. Utilizing an official student ID outside of a scheduled rotation to gain access to a clinical record or area or to participate in a clinical activity, using a student ID to gain access to any individual or area on behalf of the SOM and SHP or ODU, its faculty, residents, staff, student body or student groups, or other members of the ODU community without institutional prior authorization.

The intentional taking or appropriating of the property of another without consent or permission or the use of the property without the owner's or the rightful possessor's authorization, including the theft of academic work or intellectual property.

#### **Disruptive, Disorderly, and Endangering Conduct**

Disruptive and/or disorderly behavior that interferes with the function of the SOM and SHP or ODU or interferes with the conduct of others and/or the performance of the duties by the SOM and SHP or ODU personnel, including, but not limited to, lewd, indecent, or obscene behavior that is not constitutionally protected speech. Behavior that threatens, endangers, or injures the health or safety of any person, including oneself.

#### **Failure to Follow Rules, Regulations, or Comply with an ODU Official or Institutional Directive**

Behavior that violates a law, rule, regulation, or the policies of the SOM and SHP or ODU or assigned academic or clinical site. Failure to follow the directions of an authorized SOM and SHP or ODU official acting in performing their duties or a directive issued by the SOM and SHP or ODU, including policies or procedures outlined in the student handbooks, including preceptors or staff of an assigned clinical staff. Failure to follow the conditions of a sanction imposed through ODU and the SOM and SHP disciplinary procedures. Any knowledge, witness, instigation, participation, encouragement, or facilitation of a violation of the expectations of behavior. All students have a duty to report known or suspected activities that would violate this standard, including, but not limited to, violating patient confidentiality; the misuse of records or official documents, including patient medical records; failure to follow the [SOM USMLE Procedures Policy](#); and adhering to the decisions of the Student Progress Committee.

#### **Harassment, Threats, or Intimidation**

Physical, verbal, graphic, written, or electronic behavior(s) that alarm another person or attempt to intimidate and/or threaten another person; limit an individual's ability to work, study, or participate in the activities of the SOM and SHP or ODU; or endanger the health or safety of any person. These behaviors serve no legitimate purpose and include, but are not limited to, unlawful coercion, extortion, or duress that places the recipient in fear. These behaviors may be singularly egregious acts or pervasive and persistent.

#### **Inappropriate Use or Abuse of Alcohol or Controlled Substances**

Unlawful production, consumption, distribution, or possession of alcoholic beverages. Consumption of alcoholic beverages on institutional property or other assigned clinical sites unless at an approved institutional or site event. Attendance of class or participation in an educational or other activity while under the influence of alcoholic beverages. Facilitation of or participation in the unsafe or irresponsible consumption of alcoholic beverages. Drunken or disorderly behavior which negatively impacts the learning environment and the general community. Use of ODU funds to purchase alcoholic beverages at or for a student event.

Unlawful possession, use, distribution, manufacture, or dispensing of narcotics or other controlled substances by Virginia law. Inappropriate or abusive use of prescription, over-the-counter medication, or other items to produce a drug-like effect. Failure to notify a supervisor or instructor of the use of medically authorized drugs or other substances that may alter job performance. Possession of drug paraphernalia, including but not limited to bongs, pipes,

roach clips, or other equipment whose primary use is for the storage, concealment, consumption, manufacture, or distribution of drugs.

Any other prohibited behavior as outlined in the [SOM and SHP Drug and Alcohol Screening Policy](#), including failing mandatory onboarding substance screens.

### **Vandalism, Trespassing, Unauthorized Use of, or Tampering with Property**

Unauthorized access or use of VHS or ODU facilities, educationally related clinical sites, or personal property of others without explicit permission. These behaviors include but are not limited to, unauthorized access to VHS or ODU buildings, grounds, or vehicles, as well as any educationally related clinical sites, and unauthorized possession, duplication, or use of the property of others, VHS, or ODU. Any behavior that defaces, damages, or destroys private, VHS, ODU, or other public property, including the unauthorized taking, keeping, or using of such property. Behavior that tampers equipment and/or property at VHS or ODU or other sites without prior authority from the appropriate VHS or ODU official, including safety and firefighting equipment.

### **Jurisdiction**

Jurisdiction and discipline shall be limited to conduct that occurs on institutional premises, at any official VHS or ODU function or activity regardless of location, an action that may limit a student's ability to complete educational rotations, or such action that adversely affects the communities of the VHS, ODU, or its partners in their pursuit of educational, clinical, or other legitimate objectives. Engaging in activities that are inconsistent with values expressed in institutional policy and/or the articulated expectation of student conduct, regardless of the location of the activity, may be addressed as potential violations of the [ODU Code of Student Conduct](#) and/or this policy.

[SOM and SHP Student Affairs](#) administers this policy. SOM and SHP Student Affairs fosters student growth by promoting students' awareness and understanding of their rights and responsibilities as community members. It addresses student behavior and creates developmental learning opportunities in an effort to engage students in ethical decision-making. Any questions regarding the student conduct process should be directed to the [SOM and SHP Director of Student Rights and Responsibilities](#).

### **Scope**

As members of the VHS and ODU communities, SOM and SHP students have the right to be treated with respect and consideration, have freedom of inquiry, and have reasonable use of services and facilities. The VHS and ODU embrace and strive to uphold the freedoms of expression and speech guaranteed by the First Amendment of the United States Constitution and the Constitution of Virginia. The SOM and SHP have the right under appropriate circumstances to regulate the time, place, and manner of exercising these and other constitutionally protected rights.

The [ODU Code of Student Conduct](#) and this policy pertain to all students, whether registered for a SOM or SHP course, clerkship, or elective, visiting from another academic program, or rotating at the SOM or SHP for clinical activity. All students are responsible for conducting themselves in a manner that helps enhance an environment of learning in which the rights, dignity, worth, and freedom of each member of the academic community are respected. Upon acceptance of admission to ODU, students agree to abide by the policies of the institution and to conduct themselves on- and off-campus in a manner consistent with its educational mission. Student conduct occurring before classes begin, including orientation, or after classes end, during the academic year, and during

periods between terms of enrollment is governed by the [ODU Code of Student Conduct](#) and/or this policy.

Students have a responsibility to review all policies and to seek clarification, if necessary, from [SOM and SHP Student Affairs](#). The Expectations for Student Conduct Policy and related policies and procedures are available online. Upon request, printed copies are available in SOM and SHP Student Affairs, located on the first floor of Lewis Hall.

In addition to the consequences outlined in this policy, students who represent units within the ODU community might be subject to additional behavioral consequences under the standards set by those units.

### **Responsibility for Reporting Violations**

All students have a duty to report known or suspected activities that would be in violation of the [ODU Code of Student Conduct](#) and/or this policy. In order for the SOM and SHP to quickly address any violations of this policy, it is essential that reports be made to the [SOM and SHP Director of Student Rights or Responsibilities](#) in a timely manner.

Students may also utilize the [SOM and SHP Ethics and Compliance Hotline](#) (phone: 800-461-9330 or online at the above link) to make reports, including anonymous reports.

### **Respondent Rights**

1. The right to objective and impartial evaluation of complaints.
2. The right to receive written notification of any alleged violation.
3. The right to be present during the meeting with a hearing officer or during a conduct hearing.
4. The right to reasonable access to all information gathered throughout the investigation of the alleged violation.
5. The right to present information relevant to the alleged violation, including inviting witnesses.
6. The right to respond to information presented against him/her.
7. The right to a separate meeting with a hearing officer or a conduct hearing in cases involving multiple respondents.
8. The right to choose what information to share with the institution with the understanding that ODU will make a determination without the respondent's information.
9. The right, after receiving written notice of the outcome, to review the decision, including an appeal.
10. The right to challenge a member of the Student Progress Committee if the respondent believes that a member of the committee has a conflict with, bias about, or an interest in a case that may unduly influence the decision-making either positively or negatively.
11. The right to be informed of pertinent institutional support services.

### **Respondent Responsibilities**

1. The responsibility to be honest and direct in communication with individuals involved in the conduct process.
2. The responsibility to review pertinent conduct process policies and procedures and to seek clarification if necessary.
3. The responsibility to respond in a timely manner to institutional requests for information, to promptly schedule meetings when requested, and to arrive on time for scheduled meetings.

4. The responsibility to provide the institution with pertinent information that the respondent would like considered in the review of the alleged violation.
5. The responsibility to participate in the conduct process in a manner that is civil and respectful.
6. The responsibility to update personal contact information with the [Registrar's Office](#) as soon as it changes and to consistently monitor their ODU email account and voicemail, as ODU frequently communicates through these modes. U.S. Post letters will be sent to the local address provided by the student in the online student system or to the permanent address if attempted contact with the student through other means is unsuccessful.

### **Interim Actions**

[SOM and SHP Student Affairs](#), in conjunction with appropriate SOM administrators, may take one or more interim actions pending the investigation and resolution of a conduct case in order to preserve the safety and well-being of the ODU community and its members, including matters in which behaviors are negatively affecting patient care or the patient care environment. These interim actions include, but are not limited to, restriction of access or privileges; no-contact orders; suspension from academic, clinical, or research activities; and restriction from campus and/or ODU functions. For more information about the interim action process, please see the [SOM and SHP Interim Actions Policy](#) and the [SOM and SHP Student Emergency Procedures Policy](#).

### **Hearing**

Hearings are initiated when a complaint concerning student behavior is filed with SOM and SHP Student Affairs. Reports can be submitted using the online reporting form, email, or as a hard copy delivered to SOM and SHP Student Affairs in Lewis Hall. Although there is no statute of limitations for reporting violations, individuals should submit alleged conduct violations as soon as possible.

Students who are unable to participate in the conduct process for medical reasons shall be placed on an Administrative Leave of Absence in accordance with the [SOM and SHP Leave of Absence and Withdrawal Policy](#) and will be required to participate in the conduct process upon return from leave.

When a report is received, the [SOM and SHP Director of Student Rights and Responsibilities](#) shall conduct a preliminary investigation to determine if any behavior articulated in the report violates any relevant policies. The SOM and SHP Director of Student Rights and Responsibilities will also determine if the report should be referred for review by the [ODU Code of Student Conduct](#).

Once the preliminary investigation is complete, the hearing officer will review the evidence and determine if there is sufficient evidence to proceed with charging the student. If the decision is made to not charge the student the case will be considered closed, and the student will be notified in writing. Communications through this policy will be conveyed through ODU email by way of Maxient.

If it is determined that charges are warranted, the respondent will be contacted in writing, including the date, time, and location of the alleged incident, in addition to the charges, based on the information found during the preliminary investigation. This notification will also include information regarding scheduling a one-on-one conduct meeting with the hearing officer. In certain situations, based on the amount of evidence gathered during the preliminary investigation, students will be provided with an opportunity to forgo an in-person meeting, take responsibility for the violation, and complete a predetermined sanction(s).

During the one-on-one conduct meeting, the respondent student will be required to identify if they believe they are responsible or not responsible. The respondent student will also have the opportunity to share additional evidence. During the meeting, the student will have the opportunity to review all relevant documentation collected during the preliminary investigation.

After making a reasonable effort to meet with all individuals who have been identified as having relevant information to the incident, including identified witnesses, the hearing officer will determine whether the respondent has violated this policy based on the preponderance of the evidence. The hearing officer will then provide written notification of the outcome to the respondent. The outcome notification will include a determination of responsibility, assigned sanctions with instructions for completion (as appropriate), and information on appeal procedures. Students who receive recommended sanctions can appeal the hearing officer's determination of responsibility following the appeal procedures outlined below.

### **Sanctions**

Sanctions determined by the hearing officer are imposed by the appropriate institutional representatives based on the nature of the violation. Sanctions, which serve as the institution's response to misconduct in violation of the institution's policies, will be determined and imposed by institution administrators pursuant to the processes established in this policy and are not influenced by program, departmental, or organizational action. Possible sanctions for misconduct include the following:

1. Educational or Developmental Experience: Active remedies, such as research or reflection papers, projects, or participation in meetings, classes, assessments, programs, modules, or workshops.
2. Required Meeting with the Program Student Progress Committee (SPC) (or the Student Review and Advisory Committee for the SOM students): In such instances, a copy of the outcome letter will be provided to the assigned committee.
3. Community Service: A specified number of community hours in which a student or student organization must perform service to a non-profit organization designated by the institution.
4. Restitution: Reimbursement to the person or entity harmed by the violation.
5. No Contact Order: A ban requiring the respondent to have no contact with a designated individual, including, but not limited to, verbal, written, electronic, and/or physical contact or contact by a third party.
6. Loss of Privileges: Denial or restriction of privileges for a designated period of time, including, but not limited to, restriction or exclusion from ODU premises or ODU activities.
7. Monitoring: Meeting periodically with a member of [SOM and SHP Student Affairs](#) or designee to check the progress of completing a required educational or developmental experience.



8. Deferred Sanction: Deferral of sanction for a specified period. Should the student be found in violation of any institutional policy during the stated period, the deferred sanction shall be imposed without further review, in addition to any disciplinary action appropriate to the new violation.
9. Recommendation of Probation or Dismissal: If the hearing officer determines that the violation warrants a recommendation of probation (if applicable per program policies) or dismissal, the hearing officer shall notify the program director and the SPC, and the respondent will be required to appear in front of the SPC for sanctioning.
10. Revocation of Degree: If the hearing officer determines that the violation warrants a recommendation of revocation of degree, the hearing officer shall make such recommendation to the EVP of the VHS.

## **Appeal**

### Request for Appeal

The respondent may file a request for appeal of the outcome to the SOM and SHP Assistant Dean for Student Affairs or designee within five (5) days of the delivery of the outcome.

### Grounds for Appeal

Appeals are limited to the following grounds:

1. Procedural irregularity that affected the outcome of the matter;
2. New evidence that was not reasonably available at the time the determination regarding responsibility was made that could affect the outcome of the matter; and
3. The hearing officer had a conflict of interest or bias that affected the outcome of the matter.

If the request for appeal does not meet the grounds as set forth above, the appeal will be denied and the respondent will be notified accordingly.

### Appeal Consideration and Determination

1. Appeals granted are not intended to provide for a full re-hearing of the allegation(s). In most cases, appeals are confined to a review of the written documentation or record of the original hearing and pertinent documentation regarding the specific grounds for appeal.
2. The SOM and SHP Assistant Dean for Student Affairs or designee may consult with the hearing officer on questions of procedure or rationale for clarification if needed. Documentation of all consultations will be maintained.
3. Within 10 business days of receipt of appeal, the SOM and SHP Assistant Dean for Student Affairs or designee will notify the respondent of the outcome of the appeal to the respondent's ODU email or otherwise approved account.
4. Once an appeal is decided, the student has the right to file a formal student grievance. All formal grievances will be resolved using the [SOM and SHP Student Non-Academic Complaint and Grievance Policy](#).

#### Sanction Status During Appeal

1. Any sanctions, except those imposed for the safety of the campus as a result of the hearing officer's decision, are stayed during the appeal process.
2. ODU may still place "holds" on official transcripts, diplomas, graduations, and course registration pending the outcome of an appeal when the original sanctions included separation.

#### **Students' Protection Against Retaliation**

The SOM and SHP value integrity and honesty and endeavor to integrate these values into students' experiences in the learning environment. The SOM and SHP encourages all students to make good-faith disclosures about actual or suspected violations of federal and commonwealth laws, regulations, and the SOM and SHP or ODU and program policies. The SOM and SHP prohibit acts or threats of retaliation against any student who desires to make a good-faith report, has made a good-faith report, or is a witness and/or participant in any ensuing investigation or review. Retaliation is prohibited even when the underlying complaint is made in good faith but is determined to be without merit or substantiation.

Students who feel that they have been the subject of retaliation have the right to file a complaint. Students should consider [SOM and SHP Student Affairs](#) their primary point of contact for retaliation complaints, but may use any method of reporting a complaint using one of the following methods:

- a). Personal contact with a member of SOM and SHP Student Affairs. If the individual receiving the complaint is not the SOM and SHP Director of Student Rights and Responsibilities, the complaint shall be forwarded to the SOM and SHP Director of Student Rights and Responsibilities within one (1) business day.
- b). [SOM and SHP Student Affairs Incident Reporting Form](#). The reporting form is sent automatically to SOM and SHP Student Affairs.
- c). [SOM and SHP Ethics and Compliance Hotline](#). The SOM and SHP Ethics and Compliance Hotline is a third-party reporting system that is accessible online 24 hours a day or by contacting the hotline call center at 800-461-9330. Reports may be made anonymously if desired; however, the SOM and SHP may be limited in their ability to resolve the matter if the reporter is not identified.

Students who believe they have been assigned a lower than appropriate score or grade as a form of retaliation should utilize the appeal and complaint procedures in their program handbooks in addition to reporting the concern to SOM and SHP Student Affairs.

#### **Records**

All documentation related to this policy will be maintained with SOM and SHP Student Affairs in accordance with the [Family Educational Rights and Privacy Act \(FERPA\)](#) and [ODU Records Retention Policies](#). Students have the right to inspect and review their hearing record(s). For information on requesting a record, please contact the [SOM and SHP Registrar](#).

#### **Transcript Notations**

A student who is assigned a sanction of dismissal will have a notation added to their transcript.

## **VII. RELATED DOCUMENTS**

[ODU Board of Visitors Policy #1530 - Code of Student Conduct](#)  
[ODU University Policy #1008 - Policy on Title IX and Sexual Misconduct](#)  
[ODU University Policy #1005 - Discrimination Policy](#)  
[SOM and SHP Drug and Alcohol Screening Policy](#)  
[SOM and SHP Interim Actions Policy](#)  
[SOM and SHP Leave of Absence and Withdrawal Policy](#)  
[SOM and SHP Non-Discrimination and Anti-Harassment Policy](#)  
[SOM and SHP Student Complaint Processes](#) (per individual programs' handbooks)  
[SOM and SHP Student Emergency Procedures Policy](#)  
[SOM and SHP Student Non-Academic Complaint and Formal Grievance Policy](#)  
SOM and SHP Student Progress Procedures and Policies (per individual programs' handbooks)

## **VIII. HISTORY OF APPROVALS AND UPDATES**

On July 1, 2024, this policy was approved as a SOM and SHP Policy.

# Compact Between Teachers and Learners of Medicine and Health Professions

## I. POLICY

Compact Between Teachers and Learners of Medicine and Health Professions

## II. PURPOSE

This policy outlines the expectations for the faculty of the School of Health Professions (SHP) and the School of Medicine (SOM) at the Virginia Health Sciences at Old Dominion University (VHS) to abide by the Association of American Medical Colleges' Compact between Teachers and Learners of Medicine.

## III. RESPONSIBLE PARTY AND REVIEW CYCLE

[SOM and SHP Student Affairs](#) will review this document annually.

## IV. ACCREDITATION REFERENCES

LCME 3.5 – Learning Environment/Professionalism

LCME 3.6 – Student Mistreatment

SACSCOC 12.3 – Student Rights

SACSCOC 12.4 – Student Complaints

## V. DESCRIPTION

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 healthcare 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 ethics 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 students 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 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 laws and/or Old Dominion University (ODU) and/or SOM and SHP policy; 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 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 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 laws and/or ODU or SOM and SHP policy.
- 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.

**Adapted from:** J. Cohen, Academic Medicine, Vol. 77, No. 6 / June 2002

## **VI. HISTORY OF APPROVALS AND UPDATES**

The following list documents policy approvals and updates by oversight authority, date, and summary of changes. This policy is housed on the [Institutional Student Handbook webpage](#).

- On June 9, 2020, the Eastern Virginia Medical School (EVMS) Board of Visitors approved the update to separate the policy from the *Institutional Student Handbook*.
- On July 1, 2024, this policy was transitioned to a SOM and SHP policy as part of the integration with Old Dominion University.

# Students' Rights to a Professional Learning Environment

## I. POLICY

Students' Rights to a Professional Learning Environment

## II. PURPOSE

This policy outlines the rights of students to a professional learning environment that is characterized by appropriate treatment of students and by employee adherence to safe and ethical practices. This policy applies to students in the School of Health Professions (SHP) and School of Medicine (SOM) at the Virginia Health Sciences at Old Dominion University (VHS).

## III. RESPONSIBLE PARTY AND REVIEW CYCLE

[SOM and SHP Student Affairs](#) will review this document annually.

## IV. ACCREDITATION REFERENCES

LCME 3.5 - Learning Environment/Professionalism

LCME 3.6 - Student Mistreatment

SACSCOC 12.3 - Student Rights

SACSCOC 12.4 - Student Complaints

## V. DEFINITION(S)

**Learning Environment:** Diverse educational approaches, cultural contexts, or physical settings in which teaching and learning occur that influence student engagement and motivation, as well as students' sense of well-being, belonging, and personal safety. The SOM and SHP's holistic definition of the learning environment includes the following components:

- Student mistreatment
- Preceptor and student positive and negative professional behaviors
- Duty hour compliance
- Clinical supervision
- Educational resources and infrastructure
- Student well-being

## VI. DESCRIPTION

### **Students' Right to a Respectful Learning Environment**

Student and resident/fellow mistreatment is destructive to the learning environment and will not be tolerated within the SOM and SHP community and its affiliated learning sites.

The SOM and SHP define mistreatment as behavior that shows disrespect for learners and interferes with their respective learning process. Such behavior may be verbal, emotional, or physical. Types and examples of behaviors considered mistreatment are included below.

Public Embarrassment or Humiliation: Any behavior that dishonors or disgraces a student in a public space or uses shame or embarrassment to publicly hold a student accountable for their actions.

Examples:

- Outbursts, yelling, or exaggerated tone of voice in non-crisis situations
- Inappropriate nonverbal behaviors directed at the student (e.g., eye-rolling, face-making, turning away, or physical exclusion)
- Derogatory statements or names
- Cursing, cussing, or foul language directed at the student or with the effect of creating a negative environment, if not directed at the student
- Directly taunting, mocking, or humiliating the student through words or behaviors (e.g., mimicking something the student got wrong, giving highly pejorative feedback in the presence of others)
- Indirectly taunting, mocking, or humiliating the student through words or behaviors (e.g., texting other preceptors or a group of preceptors about the student's behavior)
- Ridiculing or degrading a person or group on the basis of a personal or cultural characteristic (e.g., "People like you are all stupid," "Your people all expect me to read your minds," "I can't believe you want to go into specialty X and become a drone")
- Using aggressive questioning to the point of badgering or humiliation in the guise of the "Socratic method" (e.g., after questioning the student to the limits of his/her knowledge, persisting in asking the same question the student cannot answer or more difficult questions for the purpose of humiliation)
- Using aggressive questioning about non-medically related topics (e.g., music, sports teams, etc.)
- Requiring performance of menial tasks with the intent to humiliate

Abuse of Power: Any behavior that uses one's position of power to negatively impact a student or that requires a student to complete tasks unrelated to learning.

Examples:

- Requiring the student to perform personal services at any time (e.g., obtain coffee for preceptor when the team does not rotate this favor, run errands in or out of the clinical setting, child or pet sit, listen to personal problems)
- Creating advantages or disadvantages in learning opportunities, teaching, or feedback based on the personal characteristics of the learner
- Grading based on factors other than performance on previously announced grading criteria (e.g., giving a better grade to the student who is going into the same specialty or who is the most fun of the group)
- Making a student feel intimidated or dehumanized or making threats about a recommendation, grade, or career
- Endangering the student's professional development (e.g., encouraging or telling the student to ignore institutional or school policy, inviting or requiring the student to do something unethical or illegal)
- Acting in retribution against any student who reports perceived inappropriate treatment (e.g., telling others that the student is a "snitch" or to "watch out for that one," giving the



student a lower-than-deserved grade, or calling a residency program to “warn” them about a student)

Physical Abuse: An intentional act that does or has the potential to cause injury, trauma, or other physical suffering or bodily harm to a student.

Examples:

- Standing over the student or getting “in the student’s face”
- Gesturing harm (e.g., raising hand)
- Pushing (student or furniture in which student is sitting), slapping, pinching, and/or striking the student
- Requiring the student to go somewhere unsafe or to be exposed to dangerous objects or substances without education and proper protection
- Asking the student to perform tasks they are not trained to do without appropriate supervision
- Asking or telling the student not to report an occupational exposure

Harassment Based on Sex: Behavior directed at a student based on their sex (including sexual orientation, gender identity/transgender status, and pregnancy or parental status) that is unwelcome by the student and alters the educational environment for the student.

Examples:

- Inappropriate physical or verbal advances
- Comments about student’s clothing, physical appearance, or level of attractiveness
- Verbal, nonverbal, graphic, or physical conduct of a sexual nature
- Requests for dates or other romantic interactions
- Requests for sexual favors with or without promise for educational benefits
- Intentional neglect, jokes or cartoons, derogatory remarks, physical gestures, or other mistreatment based on sex, sex or gender stereotypes, and/or sexual orientation directed at the student or with the effect of creating a negative environment, if not directed at the student
- Favorable evaluations or grades made explicitly or implicitly conditional for overlooking or submitting to sexually inappropriate conduct
- Stalking or threats of harm, made explicitly or implicitly related to sexually inappropriate conduct

Students can find more information concerning sex-based discrimination through [ODU’s Title IX policy](#).

Harassment Based on Race or Ethnicity: Behavior directed at a student based on their race or ethnicity that is unwelcome by the student and creates a hostile learning environment.

Examples:

- Comments and expectations based upon racial or ethnic stereotypes
- Intentional neglect, jokes or cartoons, derogatory remarks, physical gestures, or other mistreatment based on race or ethnicity directed at the student or with the effect of creating a negative environment, if not directed at the student

- Favorable evaluations or grades made explicitly or implicitly conditional based on racial or ethnic favoritism
- Stalking or threats of harm, made explicitly or implicitly related to race or ethnicity

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.

### **Students' Right to an Ethical and Safe Clinical Training Environment**

All licensed healthcare professionals have a duty to conduct themselves appropriately and provide healthcare services in an ethical, safe, and professional manner. SHP and SOM students may interact with physicians, nurses, physician assistants, and many other professionals during the course of their education and training, including didactic and clinical settings.

Whereas licensed health professionals have a duty to report unethical, unsafe, or unprofessional conduct that they observe in other licensed health professionals to the appropriate Board in the [Department of Health Professions](#), students have no such requirement. Students are generally less experienced and may be less capable of identifying certain types of actions, such as the accuracy of a diagnosis or the safety of a treatment plan, but are certainly in a position to recognize inappropriate or possibly illegal behavior, such as assault or sexual harassment. The hypothetical range of possible misconduct or inappropriate behavior is vast. Students are expected to exercise reasonable judgment based on specific circumstances and the degree of urgency, but as a general rule, should follow the guidelines below if they witness or suspect misconduct on the part of a licensed health professional:

1. Initially, and if reasonable under the circumstances, ask the preceptor or health professional about the incident.
2. If concerns are not resolved, discuss the incident or behavior with an appropriate program administrator or a member of [SOM and SHP Student Affairs](#). Students may provide a written description of the incident prior to, during, or after the discussion with a proper official. Written remarks should be as specific as possible without violating [HIPAA regulations](#) regarding patient identifiers and information.

### **Reporting of Student Mistreatment**

Students are encouraged to report incidences of mistreatment in accordance with the [student complaint process](#). They have four ways of reporting:

1. Program course or rotation [evaluation forms](#)
2. [Personal contact](#) with a member of SOM and SHP Student Affairs
3. [SOM and SHP Concerns in the Learning Environment Reporting Form](#). The form is sent automatically to SOM and SHP Student Affairs.
4. [SOM and SHP Ethics and Compliance Hotline](#)
  - a. The Hotline is a confidential and anonymous reporting system which may be accessed through the above link or via phone at 800-461-9330.
  - b. Complaints made through the Hotline will be investigated by the institutional compliance officer or his/her designee.

Students may also report observed incidences of resident mistreatment.

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 [SOM and SHP Expectations for Student Conduct Policy](#).

## **VII. RELATED DOCUMENTS**

[ODU University Policy #1005 - Discrimination Policy](#)

[ODU University Policy #1008 - Policy on Title IX and Sexual Misconduct](#)

[ODU University Policy #3020 - Whistleblower Retaliation Policy](#)

[SOM and SHP Appeal and Complaint Procedures Policy](#)

[SOM and SHP Compact Between Teacher and Learners of Medicine and Health Professions Policy](#)

[SOM and SHP Complaint and Anti-Retaliation Policy](#)

[SOM and SHP Non-Discrimination and Anti-Harassment Policy](#)

[SOM and SHP Student Complaint Processes](#) (per individual programs' handbooks)

[SOM and SHP Student Non-Academic Complaint and Formal Grievance Policy](#)

## **VIII. HISTORY OF APPROVALS AND UPDATES**

The following list documents policy approvals and updates by oversight authority, date, and summary of changes. This policy is housed on the [Institutional Student Handbook webpage](#).

- On June 9, 2020, the Eastern Virginia Medical School (EVMS) Board of Visitors approved the update to separate the policy from the *Institutional Student Handbook*.
- On July 1, 2024, this policy was transitioned to a SOM and SHP policy as part of the integration with Old Dominion University.

## Non-Involvement of Student Healthcare Providers in Education

### I. POLICY

Non-Involvement of Student Healthcare Providers in Education

### II. PURPOSE

The purpose of this policy is to prohibit healthcare providers (faculty or residents) from precepting or assessing students with whom they have or had a pre-existing patient-provider relationship and to avoid the disruption of a pre-existing patient-provider relationship due to educational assignment. This policy applies only to students in the School of Health Professions (SHP) and School of Medicine (SOM) at the Virginia Health Sciences at Old Dominion University (VHS).

### III. RESPONSIBLE PARTY AND REVIEW CYCLE

[SOM and SHP Student Affairs](#) will review this document annually.

### IV. ACCREDITATION REFERENCES

LCME 12.5 – Non-Involvement of Providers of Student Health in Student Assessment or Training

SACSCOC 12.3 – Student Rights

SACSCOC 12.4 – Student Complaints

### V. DESCRIPTION

The SHP and SOM affirm students' right to obtain healthcare from providers not associated with their education and training. All providers in the [SOM and SHP Student Health](#) or [Student Mental Health services](#) are prohibited from participating in student education in any capacity.

The SOM and SHP faculty and residents (including community preceptors) may not precept students or evaluate the academic performance of any student for whom they have provided healthcare, including psychological and reproductive services. Faculty or residents completing any evaluation of a student are required to certify that they have not been involved in providing healthcare to the student.

Prior to the start of a clinical experience, students who recognize they have been assigned to work with a faculty member or resident who has been a personal healthcare provider must contact their program director (for SHP students), the SOM Assistant Vice Dean for Pre-clinical Education (for Pre-clerkship Phase SOM students), or the SOM Assistant Vice Dean for Clinical Education (for Clerkship or Elective Phase SOM students) to facilitate a change in clinical assignment. They may alternatively contact the SOM and SHP Assistant Vice Dean for Student Affairs for confidentiality purposes. The respective administrator will facilitate the change prior to the start of the student's clinical experience.

Faculty or residents who recognize prior to the start of a clinical experience that they have been assigned to work with a student for whom they have provided personal healthcare must alert the director of the clinical experience (e.g., program administrator for SHP students, SOM Director of Clinical Skills for SOM Pre-clerkship Phase students, or SOM clerkship or elective director for SOM Clerkship or Elective Phase students) to facilitate a change in student assignment. This

communication will adhere to all standards of confidentiality of student health information and will note only that a change is needed. When a student has a pre-existing patient-provider relationship with a faculty member or resident, the patient-provider relationship should not be disrupted.

Students should not be involved in the provision of healthcare to fellow students. Similarly, students seeking care do not have the option of allowing peers to observe or participate in their healthcare.

#### **IX. RELATED DOCUMENTS**

[ODU University Policy #1005 - Discrimination Policy](#)

[ODU University Policy #3020 - Whistleblower Retaliation Policy](#)

[ODU University Policy #1008 - Policy on Title IX and Sexual Misconduct](#)

[SOM and SHP Compact Between Teacher and Learners of Medicine and Health Professions Policy](#)

[SOM and SHP Complaint and Anti-Retaliation Policy](#)

[SOM and SHP Student Complaint Processes](#) (per individual programs' handbooks)

[SOM and SHP Student Non-Academic Complaint and Formal Grievance Policy](#)

[SOM and SHP Non-Discrimination and Anti-Harassment Policy](#)

[SOM and SHP Students' Rights to a Professional Learning Environment Policy](#)

#### **X. HISTORY OF APPROVALS AND UPDATES**

The following list documents policy approvals and updates by oversight authority, date, and summary of changes. This policy is housed on the [Institutional Student Handbook webpage](#).

- On June 9, 2020, the Eastern Virginia Medical School (EVMS) Board of Visitors approved this policy.
- On July 1, 2024, this policy was transitioned to a SOM and SHP policy at the VHS as part of the integration with Old Dominion University.

# Student Non-Academic Complaint and Formal Grievance Policy

## I. POLICY

Student Non-Academic Complaint and Formal Grievance Policy

## II. PURPOSE

This policy outlines the rights of students to non-academic complaint and formal grievance procedures, defines the grounds for a student complaint or grievance, and describes the procedures for students to file a complaint or grievance. This policy also details procedures for student grievances that do not fall under this policy. This policy applies only to students in the School of Health Professions (SHP) and School of Medicine (SOM) at the Virginia Health Sciences at Old Dominion University (VHS).

## III. RESPONSIBLE PARTY AND REVIEW CYCLE

[SOM and SHP Student Affairs](#) will review this document annually.

## IV. ACCREDITATION REFERENCES

LCME 3.4 – Anti-Discrimination Policy  
LCME 3.5 – Learning Environment/Professionalism  
LCME 3.6 – Student Mistreatment  
SACSCOC 12.3 – Student Rights  
SACSCOC 12.4 – Student Complaints

## V. DESCRIPTION

### Non-Academic Student Complaint Procedure

1. SOM and SHP students who feel that they have not been fairly treated or have other non-academic concerns have the right to file a complaint. Students should consider SOM and SHP Student Affairs their primary point of contact for non-academic complaints, but a student may make a complaint using one of the following methods:

Program evaluation forms for courses, modules, clerkships, or rotations

- a). Personal contact with a member of SOM and SHP Student Affairs. If the individual receiving the complaint is not the [SOM and SHP Director of Student Rights and Responsibilities](#), the complaint shall be forwarded to the Director of Student Rights and Responsibilities within one (1) business day.
- b). [SOM and SHP Concerns in the Learning Environment Reporting Form](#). The reporting form is sent automatically to SOM and SHP Student Affairs.

- c). [SOM and SHP Ethics and Compliance Hotline](#)
  - i). The SOM and SHP Ethics and Compliance Hotline is a third-party reporting system that is accessible 24 hours a day, or by contacting the Hotline call center at 800-461-9330. Reports may be made anonymously if desired; however, the SOM and SHP may be limited in its ability to resolve the matter if the reporter is not identified.
  - ii). Complaints made through the Hotline related to a student complaint will be forwarded to the [SOM and SHP Director of Student Rights and Responsibilities](#) for further action.
2. Upon receipt of any report, as outlined in section 1, the SOM and SHP Director of Student Rights and Responsibilities shall conduct a preliminary review of the complaint to determine what policies are implicated and whether further investigation or fact-gathering is required.
3. Within 30 business days of receipt of the complaint, the SOM and SHP Assistant Dean for Student Affairs or the Director of Student Rights and Responsibilities shall issue a written determination, work with the parties to reach a resolution, and/or provide the reporter an update on the progress toward resolution of the complaint. For matters involving allegations of violations of the [SOM and SHP Expectations for Student Conduct](#) or the [ODU Code of Student Conduct](#), the Student Conduct Process shall be followed.
4. If the matter cannot be resolved, the student shall be advised of the right, if any, to pursue further action, such as filing a formal student grievance. Note that, in some instances where resolution may not be requested by the student, the SOM and SHP may have a legal duty to take action.

#### **Formal Student Grievance Procedure**

1. A student may formally accuse an individual of violating a policy or procedure that affects the student's ability to pursue their educational goals, that was not resolved under a student complaint process, and that the student is asking the SOM and SHP to remedy. Examples include allegations that a policy or procedure was applied arbitrarily or that student mistreatment has occurred and cannot be resolved. The formal student grievance procedure does not replace any existing grievance or appeal procedure, and a student may not use the formal grievance procedure to grieve the following:
  - Grades or academic performance. See the grade appeals or academic complaint procedures, as outlined in the SOM and SHP handbooks.
  - Outcomes of a Student Progress Committee (SPC). See the policies and procedures related to the SPC as outlined in the SOM and SHP handbooks.
  - Title IX Sexual Harassment. See [ODU Title IX policy](#).
  - Disputes over tuition, fees, or billing. Contact [SOM and SHP Financial Services](#).
  - Matters concerning students in their capacity as employees. Contact [Human Resources](#) for all matters outside of academic performance.

- General complaints about a program or method of instruction (e.g., curriculum, choice of faculty, etc.) where no remedy to the student would be available.
2. A student wishing to grieve a matter not otherwise excluded from the formal student grievance procedure must first use the student complaint process as outlined above. Grievances that are received but have not yet been reviewed in accordance with the student complaint process will be considered a student complaint, and the student will be notified accordingly.
  3. If the matter cannot be resolved through the student complaint process or if a student is unsatisfied with the outcome of the student complaint process and is eligible for grievance under the formal student grievance procedure, the student shall submit a written statement of grievance that contains the following to the SOM and SHP Assistant Vice Dean for Student Affairs within 30 days of the decision from the student complaint process:
    - a). A narrative of all circumstances giving rise to the grievance, including any procedural history (how prior complaints were made and any attempts at resolution);
    - b). Identification of all parties involved and contact information for such parties (students may not remain anonymous); and
    - c). A statement of the remedy is requested. Note that monetary damages such as fines or penalties or disciplinary action against an individual who is the subject of the grievance are not available remedies.
  4. Within 14 business days of the receipt of the grievance, the SOM and SHP Assistant Vice Dean for Student Affairs shall meet with the student and the responding party to discuss the grievance. If a response was not already provided, the SOM and SHP Assistant Vice Dean for Student Affairs shall permit the responding party to make a formal response within five (5) business days of the meeting.
  5. The SOM and SHP Assistant Vice Dean for Student Affairs may meet with witnesses such as relevant staff or faculty member(s), module director(s), clerkship director(s), administrators, or other persons as necessary. The SOM and SHP Assistant Vice Dean for Student Affairs may also appoint a Grievance Committee, consisting of one member of the SGA, a SOM and SHP faculty member, and a member of SOM and SHP Student Affairs, to review the matter and render a decision or to conduct an investigation if one has not already been conducted and/or if the SOM and SHP Assistant Vice Dean for Student Affairs believes that additional investigation is warranted.
  6. No later than 45 business days after receipt of the grievance, the SOM and SHP Assistant Vice Dean for Student Affairs will render a decision regarding the grievance. If a Grievance Committee has been formed to review the grievance or conduct an investigation, such decision shall be rendered no later than 60 business days after the receipt of the grievance. The decision of the SOM and SHP Assistant Vice Dean for Student Affairs shall be final.



## **Grievances/Complaints to Other Administrative Bodies**

In addition to the SOM and SHP complaint/grievance process outlined above, students have rights to grieve to outside administrative bodies as follows:

The [State Council of Higher Education for Virginia \(SCHEV\)](#) is the regulating body for all Virginia institutions of higher education. Once a student has exhausted all available grievance options for a complaint, a complaint can be filed with SCHEV, who will investigate all matters that fall within SCHEV's authority. This includes students enrolled in distance education programs. For more information, please see the [SCHEV student complaints webpage](#).

The Office for Civil Rights for the Department of Education enforces several federal civil rights laws that prohibit discrimination in educational programs or activities. For more information, see the [Office for Civil Rights complaint webpage](#).

For veterans, the [Virginia State Approving Agency \(SAA\)](#) is the approving authority of education and training programs for Virginia. Their office investigates complaints of GI Bill® beneficiaries. While most complaints should initially follow the SOM and SHP formal student grievance procedure, if the situation cannot be resolved at or by the SOM or SHP, the beneficiary should contact the SAA via email at [saa@dvs.virginia.gov](mailto:saa@dvs.virginia.gov).

*GI Bill® is a registered trademark of the U.S. Department of Veterans Affairs (VA). More information about education benefits offered by the VA is available at the official U.S. government website at <http://www.benefis.va.gov/gibill>.*

## **VI. RELATED POLICIES AND/OR REGULATIONS**

[ODU University Policy #1005 - Discrimination Policy](#)

[ODU University Policy #1008 - Policy on Title IX and Sexual Misconduct](#)

[SOM and SHP Compact Between Teacher and Learners of Medicine and Health Professions Policy](#)

[SOM and SHP Student Complaint Processes](#) (per individual programs' handbooks)

[SOM and SHP Students' Rights to a Professional Learning Environment Policy](#)

## **VII. HISTORY OF APPROVALS AND UPDATES**

The following list documents policy approvals and updates by oversight authority, date, and summary of changes. This policy is housed on the [Institutional Student Handbook webpage](#).

- On September 15, 2020, the Eastern Virginia Medical School (EVMS) Board of Visitors approved this policy.
- On September 8, 2023, the EVMS Office of General Counsel approved the addition of information regarding the registered trademark of the GI Bill®.
- On July 1, 2024, this policy was transitioned to a SOM and SHP policy as part of the integration with Old Dominion University.

# Student Emergency Procedures Policy

## I. POLICY

Student Emergency Procedures Policy

## II. PURPOSE

This policy defines the procedures implemented for students under various emergency conditions, including Impaired or Missing Students. This policy applies only to students (including Visiting Students as defined below) in the School of Health Professions (SHP) and School of Medicine (SOM) at the Virginia Health Sciences at Old Dominion University (VHS).

## III. RESPONSIBLE PARTY AND REVIEW CYCLE

[SOM and SHP Student Affairs](#) will review this document annually.

## IV. ACCREDITATION REFERENCES

LCME 10.8 – Visiting Students

LCME 12.3 – Personal Counseling/Mental Health/Well-Being Programs

SACSCOC 12.3 – Student Rights

SACSCOC 12.4 – Student Complaints

## V. DEFINITION(S)

**Campus Housing:** Property that is owned by ODU. This property includes Health Sciences Campus Housing (formerly known as Hague Club Apartments).

**Confidential Contact:** An individual registered by a SOM and SHP student with Campus Housing, who will be notified in accordance with this policy if the [ODU Police and Public Safety](#) and/or local law enforcement determines that a student who resides in Campus Housing has been missing for more than 24 hours.

**Emergency Contact:** An individual registered by an SOM and SHP student with the [Registrar's Office](#), who will be notified in accordance with this policy if the student is involved in an emergency or has been Missing for more than 24 hours.

**Impairment:** Being under the influence of alcohol or drugs, illicit or otherwise, in any academic, clinical, or research activities.

**Missing Student:** Enrolled SOM and SHP student or Visiting Student who has not reported for academic, clinical, or research duties at their assigned site for unknown reasons and who has been non-responsive to repeated attempts for contact by phone, email, or in-person means.

**Visiting Student:** Enrolled student of another institution who is engaged in approved academic, clinical, or research activities in the SOM or SHP or its affiliated entities pursuant to an agreement

between ODU and the student's institution or who is currently participating in ODU-sponsored travel activities pursuant to an agreement between ODU and the student's institution.

## VI. DESCRIPTION

The SHP and SOM are committed to ensuring the safety of all individuals affiliated with the institution. This policy applies to enrolled SHP or SOM students who are actively engaged in academic, clinical, or research activities, currently participating in ODU-sponsored travel activities, and/or engaged in academic, clinical, or research activities at another institution while on a leave of absence. This policy also applies to Visiting Students.

Students are encouraged to provide Emergency Contact(s) information and to review these designations at the start of each academic term. Students can register information for their Emergency Contact(s) and/or Confidential Contact(s) through [mySIS](#). Students can identify more than one Emergency Contact.

Students who reside at Campus Housing also have the option to provide information for a Confidential Contact(s), who will be notified if the student is determined to be Missing. Students can identify more than one Confidential Contact. Emergency Contacts and Confidential Contacts will be kept confidential and will only be accessible to ODU-authorized campus officials and law enforcement. Each student who files information for Emergency Contact(s) and/or Confidential Contact(s) is solely responsible for the accuracy of the contact information and for updating information as necessary.

### **Procedures for Emergency Situations Involving Students, Including Impairment**

Any individual who has information that a student may be experiencing an emergency should immediately call 911 or [Police and Public Safety](#) (757-446-5911). Examples of emergency situations include but are not limited to, medical emergencies (e.g., choking, chest pain and/or shortness of breath, loss of consciousness, uncontrolled bleeding, mental status changes), actions or threats of harm to self or others (e.g., violent behavior, signs or threats of suicide, threats of violence), signs of extreme distress, emergencies related to Impairment, crimes in progress, or any other unexpected events where immediate action is required. Reports should be made as soon as the concern has been noted, even if it is unclear if an emergency is actually occurring.

Upon notification of a student who may be experiencing an emergency, [ODU Police and Public Safety](#) or other law enforcement will coordinate efforts with [SOM and SHP Student Affairs](#) to locate the student, using one or more of the following methods: emails to the student's ODU or personal email accounts, calls or texts to available phone numbers, contact with relevant individuals at the student's current site placement, contact with colleagues or associates, and/or well-being checks to the student's local address on record.

Any individual who has information that a student has experienced an emergency (where an emergency call has already been made to 911) or has information or concerns about student Impairment must also report this information to ODU. Reports should be made as soon as the concern has been noted, even if it is unclear that an emergency occurred or that a student is actually Impaired.

If [SOM and SHP Student Affairs](#) receives a report that an SOM and SHP student or Visiting Student is experiencing an emergency, including demonstrating Impairment, they may initiate any or all the following procedures, as determined appropriate in the sole discretion of SOM and SHP Student Affairs:

- Remove the student from the academic, clinical, or research site;
- Initiate medical screening procedures, including having [ODU Police and Public Safety](#) escort the student to emergency rooms or other facilities;
- Enact the screening procedures of the student, as outlined in the [SOM and SHP Drug and Alcohol Screen Policy](#);
- Initiate emergency protocols established by travel protocols;
- Initiate the appropriate leave of absence, as outlined in the [SOM and SHP Leave of Absence and Withdrawal Policy](#);
- Contact the student's Emergency Contact(s) and/or other party as may be permitted by law;
- Contact SOM and SHP Student Affairs at the home institution of a Visiting Student; and/or
- Notify others at the institution about the student's circumstances.

Students will be notified of any procedures that are implemented as soon as possible.

SOM and SHP Student Affairs will also advise students on available supportive resources. Students who are experiencing financial difficulties are encouraged to contact SOM and SHP Student Affairs and/or [Financial Aid](#) to determine possible assistance.

### **Procedures for Missing Students**

Any individual who has reason to believe that a member of the ODU community is Missing should contact ODU Police and Public Safety by calling 757-446-5199 immediately. When making a report, individuals should provide as much information as possible regarding the Missing person, including a physical description; what they were wearing when last seen; where they were last seen; what physical condition they were in when last seen; if they were driving or had a vehicle and its description; whom they were with; any known information related to medical or other special conditions; and the length of time Missing. To best ensure students' safety, individuals are encouraged to report a potentially Missing student as soon as concern has been noted for the student's whereabouts, even if it is unclear if a student is actually Missing.

Students who are Missing from that day's duties must immediately be reported to one of the authorized individuals below.

1. SOM and SHP Student Affairs (757-446-5244; 757-446-7275; or 757-774-6577); and/or
2. ODU Police and Public Safety (757-446-5199)

Upon notification of a Missing student, SOM and SHP Student Affairs and ODU Police and Public Safety will immediately coordinate efforts to attempt to locate the student, using one or more of the following methods: emails to the student's ODU and/or personal email accounts, calls and/or texts to available phone numbers, contact with relevant individuals at the student's current academic placement, contact with colleagues or associates and/or well-being checks to the student's local address on record. SOM and SHP Student Affairs may initiate, at its discretion, any of the foregoing procedures prior to any statutorily designated time period if it is believed to be warranted, including contacting a designated Emergency Contact(s) and/or parent or guardian to help ascertain if a student

is Missing or to collect information helpful to a search for a student who has been determined to be Missing.

If a member of the ODU community has reason to believe or has received a report that a student who resides at Campus Housing has been Missing for 24 hours or more, they must contact [Police and Public Safety](#) by calling 757-446-5199 immediately. ODU Police and Public Safety will determine if a student is Missing no later than 24 hours from the report.

Within 24 hours of a determination that a student is Missing, [ODU Police and Public Safety](#) or [SOM and SHP Student Affairs](#) will initiate the following procedures:

- Notify the [City of Norfolk Police Department](#) (757-664-3277) within 24 hours of the determination that a student is Missing unless the City of Norfolk Police Department was the entity that made the determination that the student is Missing;
- Contact the student's Confidential Contact. If a student is under the age of 18 and is not emancipated, SOM and SHP Student Affairs shall notify a custodial parent or guardian within 24 hours of the determination that the student is Missing; and
- Notify others at the institution, as appropriate, about the student's status, as deemed necessary.

## **VII. RELATED DOCUMENTS**

[SOM and SHP Drug and Alcohol Screening Policy](#)  
[SOM and SHP Leave of Absence and Withdrawal Policy](#)

## **VIII. HISTORY OF APPROVALS AND UPDATES**

The following list documents policy approvals and updates by oversight authority, date, and summary of changes. This policy is housed on the [Institutional Student Handbook webpage](#).

- On June 20, 2023, the Eastern Virginia Medical School (EVMS) Board of Visitors approved the revision of this policy to combine multiple procedures under one policy.
- On July 1, 2024, this policy was transitioned to a SOM and SHP policy as part of the integration with Old Dominion University.

## Sick Leave Policy for Medical Faculty Classifications

**Responsible Oversight Executive:** Executive Vice President for Health Sciences

**Date of Current Revision or Creation:** July 1, 2024

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### A. PURPOSE

The purpose of this policy is to provide those faculty who have clinical responsibilities and who do not participate in the Virginia Sickness & Disability Program with paid leave from work for reasons related to their own health or the illness or death of an immediate family member.

### B. AUTHORITY

[Code of Virginia Section 23.1-1301](#), as amended, grants authority to the [Board of Visitors](#) to make rules and policies concerning the institution. Section 7.01(a)(6) of the [Board of Visitors Bylaws](#) grants authority to the President to implement the policies and procedures of the Board relating to University operations.

### C. DEFINITIONS

Administrative and Professional (AP) Medical Faculty - Employees who have administrative or professional duties directly related to the management or administration of, or patient care services in, a clinical care setting on behalf of EVMS Medical Group.

Administrative and Professional (AP) Medical Restricted Faculty - Employees who have been accepted in the Eastern Virginia Medical School Graduate Medical Education (GME) Program and have the title of Resident, Chief Resident, or Fellow.

Immediate Family - Immediate family of an employee, which includes parents, stepparents, spouse, domestic partner, children, stepchildren, foster children, legal ward, grandparents, siblings, stepsiblings, corresponding in-laws, and any relative, either by blood or marriage, living in the TR Medical Faculty or AP Medical Faculty member's home.

Teaching and Research (TR) Medical Faculty - Employees who hold academic rank and whose work assignments primarily involve instruction, research, or scholarly activity for trainees in a clinical setting and/or the management or administration of, or patient care services in, a clinical setting and who have a faculty appointment in a department of the school of medicine.

### D. SCOPE

This policy applies to full-time and part-time AP Medical Faculty and TR Medical Faculty who are enrolled in the Optional Retirement Plan (do not participate in the Virginia Sickness and Disability Program). This policy does not apply to AP Medical Restricted Faculty.

## **E. POLICY STATEMENT**

It is the policy of the university to grant sick leave with pay to administrative and professional medical faculty (AP Medical Faculty) and teaching and research medical faculty (TR Medical Faculty) at Virginia Health Sciences for use as set forth in this policy.

## **F. PROCEDURES**

### **1. Eligibility and Accrual.**

- i. AP Medical Faculty and TR Medical Faculty who elect to enroll in the Optional Retirement Plan are automatically eligible for sick leave under this policy and are not eligible for paid sick leave under any other University policy or plan.
- ii. AP Medical Faculty and TR Medical Faculty will be provided with 240 hours of paid sick leave every June 10.
- iii. Sick leave hours do not roll over each year.
- iv. Sick leave hours are not paid to the employee at separation.

### **2. Use of Sick Leave.**

- i. TR Medical Faculty or AP Medical Faculty may use their sick leave, up to 10 days at a time, for an illness or death of Immediate Family. Leave for this purpose may not exceed 10 days in a contract cycle for TR Medical or the University's fiscal year for AP Medical Faculty.
- ii. TR Medical Faculty or AP Medical Faculty may use sick leave with pay for the period of absence that is certified by a physician as medically necessary because of illness, or health conditions, or recuperation due to pregnancy or childbirth.
- iii. TR Medical Faculty or AP Medical Faculty may use sick leave with pay for the period of absence that is certified by a physician for recuperation due to pregnancy or childbirth. Any period of absence before, during, and after delivery that is certified by the attending physician as medically necessary may be charged to sick leave. Any additional period of absence that the faculty member elects to take must be taken as leave without pay. The provisions of the [Family and Medical Leave Act \(FMLA\)](#) apply to absences due to the birth of a child or the mother's health condition related to childbirth. FMLA specifies the conditions under which the University is required to allow eligible TR Medical Faculty and AP Medical Faculty up to 12 weeks of job-protected leave (paid or unpaid) during a 12-month period for several listed reasons. Please see the Family and Medical Leave section for more specific information. All such leave should be requested in advance or as soon as possible after an eligible need is known.
- iv. Sick leave will continue until the person is able to resume his or her responsibilities but shall not exceed six (6) weeks (240 hours) of sick leave during the time normally covered by the contract for TR Medical Faculty or the University's fiscal year (June 10 through the following June 9) for AP Medical Faculty.
- v. If a leave of absence without pay is granted after sick leave is exhausted, the position may be filled with a temporary appointment for the period of the leave.
- vi. Employees are required to inform their supervisor prior to or at the beginning of their shift each day that they will be out on sick leave and must follow departmental procedures regarding notice and approval when using sick leave. Medical appointments or other foreseeable medical issues shall be pre-scheduled as far in advance as possible

and approved by the department supervisor. Use of accrued sick leave is subject to the [Virginia Health Sciences Attendance policy](#).

- vii. Extended absences (five workdays or more) due to illness must be discussed with the Associate Vice President of Human Resources for Health Sciences because of the requirements of the [Family and Medical Leave Act \(FMLA\)](#).

### **3. Verification.**

- i. Sick leave is subject to verification. Supervisors have the discretion to request a doctor's note to verify any absence due to illness.
- ii. For absences of three or more days due to illness, a doctor's note will be required. An employee's use of accrued sick leave may be denied if the employee fails to comply with a request for verification.
- iii. A physician's note may be required prior to an employee returning to work in the following situations: a) five or more consecutive work days of absence due to illness; or b) absence is due to a work-related injury and the employee has been unable to work after the time of the injury.

### **4. Short-Term/Long-Term Disability.**

- i. Paid sick leave under this policy does not provide a short-term or long-term disability benefit. Employees are encouraged to purchase a voluntary disability policy, which is offered through the [Department of Human Resources](#).

## **G. RESPONSIBLE OFFICER**

Associate Vice President of Human Resources for Health Sciences

## **H. RELATED INFORMATION**

[DHRM Policy #4.57 - Virginia Sickness and Disability Program](#)

[DHRM Policy #4.60 - Workers' Compensation](#)

[ODU University Policy #6050 - Family Medical Leave Act](#)

[ODU University Policy #6307 - Sick Leave](#)

[Clinical Attendance Policy](#)