Article I: Preamble

1. Purpose

1.1. Mission

The College of Medicine is an educational unit of the University. It is constituted by faculty, students, and administrative officers with a common interest – to carry out a three-fold mission:

1.1.1. Instruction

To provide instruction in the areas of medical education, graduate medical education, biomedical education, and continuing education;

1.1.2. Research

To conduct research in the medical and biological sciences and engage in other creative scholarly activities in health-related areas; and

1.1.3. Service

To provide service in the delivery of health care and community outreach, in institutional governance, and to the professions of the college.

1.2. Establishment of Rules

In order to accomplish these goals, the College of Medicine recognizes its responsibility to establish its own rules and council/committee structure that are necessary for the performance of its mission. The following philosophy and operational framework reflect the college's establishment of policies which provide flexibility within the framework of the *Governing Regulations* (GRs), the *Administrative Regulations* (ARs), the *University Senate Rules*, and the *Rules of the Graduate Faculty*, and which are still compatible with the unique functions and operations of the College of Medicine.

1.2.1. Shared Governance Premise, Vision, and Philosophy: A Culture of Character and Shared Community

The College of Medicine is committed to a culture of character and shared community. In accordance with University GR I.E, the College of Medicine is committed to the following premise: "(t)he diverse expertise collectively available to the University in its faculty, administration, staff employees, and students is a valuable resource." The College of Medicine's vision emphasizes a transdisciplinary team approach and strategy in all its missions to achieve the greatest impact on instruction, discovery, and service to best benefit our campus, community, commonwealth, and the nation. This vision embraces and encourages a culture of character and community, in which all faculty think beyond themselves and acknowledge the importance of inclusion and support of others. The College of Medicine and "(t)he University as a whole will be able to function at maximum effectiveness where there is an environment in which the sharing of this expertise" is leveraged, valued, and promoted. If this expertise is valued and shared, it will enable policymakers at every level of the organization to make better decisions; enable greater innovation; encourage a culture of character and community; and ultimately result in the greatest impact in all missions. "To achieve this objective in an environment of shared governance, faculty bodies and administrators will reciprocally solicit and utilize the expertise of the other as each makes decisions in their respective areas of policymaking authority." As such, we are committed to attending to the composition of our committees by incorporating gender, race, ethnicity, and other diverse perspectives within committee membership. Through these empowering processes of shared governance, we can

maximize impact of the college's three-fold mission by engaging the strengths of our diverse expertise early in all processes, better solving problems, and creating innovative opportunities in a truly transdisciplinary strategy. Through shared governance, "the administration, faculty members, staff employees, and students all share the responsibility of attainment of the University's goals."

Shared governance, academic freedom, and inclusion and diversity are closely aligned core values of the University (<u>GR I.C.3</u>). Indeed, the above University policy of shared governance is established immediately following the University policy of diversity (<u>GR I.D</u>). The College of Medicine embraces shared governance as a core feature of its academic culture guided by the fundamental policy of inclusion and diversity.

This College of Medicine philosophy of shared governance must imbue and animate decisionmaking processes of the college. In relation to faculty, the membership of each committee defined within the Rules of the Faculty and Administration of the College of Medicine must include one (1) Faculty Council member or the designee of the Faculty Council. If a Faculty Council member also serves on a committee, that person may be designated as the Faculty Council's representative to that committee and retains voting privileges on that committee. However, if a Faculty Council member does not have membership on the committee, or the Faculty Council does not designate a representative, then the committee chair serves as the Faculty Council's representative designee, as long as the committee chair is a College of Medicine faculty member. Reciprocally, by GR VII.F.2.c, the Dean (or Dean's designee) is an ex officio, nonvoting member of all college faculty committees. In particular circumstances, the Faculty Council and Dean may agree that shared governance outcomes for the college will be most effectively obtained by joint establishment of a committee, with membership and accountability to be held jointly. For example, if a committee will be charged to consider both educational policy and its resource support, with input from constituents of both the college faculty and college administration, the committee will be most effective in joint membership and accountability.

1.2.2. Definition of Terms

Within this document:

- "The Faculty," refers to the voting membership of the College Faculty, unless otherwise specified;
- "College Rules" or "CR," refers to the present document;
- "College Administration," refers to the dean, and vice, associate, and assistant deans, as well as other direct report positions identified by the dean; and
- "Quorum," refers to greater than 50 percent of the voting members.

Article II: Rules of the College Faculty

1. Purpose

1.1. Aims and Objectives of the Faculty

The aims and objectives of the faculty are to achieve and maintain excellence and integrity in all aspects of medical instruction, research, service, and delivery of health care. The joint goal of the faculty and College of Medicine administration is the integration of health care delivery into the accomplishment of the above academic purposes that are the College of Medicine.

1.2. Delivery of Educational Content

In these Rules, in accordance with <u>AR 1:4.III.F</u>, programs of educational content are understood to be created and delivered by faculty in all primary functions of the University: instruction, research, and service.

1.2.1. Instruction in the College of Medicine

Instruction in the College of Medicine includes the following:

- "Medical Education," which refers to all aspects of the program of instruction leading to the Doctor of Medicine (MD);
- "Graduate Medical Education," which refers to all aspects of the instruction in the medical residency and fellow programs;
- "Biomedical Education," which refers to all aspects of the instruction of undergraduate (e.g., Bachelor of Science (BS)), graduate (e.g., Master of Science (MS), Doctor of Philosophy (PhD)), and postdoctoral levels; and
- "Continuing Medical Education," which refers to all activities for the continuing professional development of physicians, pharmacists, and other health care professionals.

1.2.2. Research in the College of Medicine

Research in the College of Medicine includes the following:

- The discovery and expansion of knowledge through collaboration and innovation, leading to scientific impact and improved health for the people of Kentucky and beyond; and
- Activities of educational unit multidisciplinary research centers/institutes that do not home degrees or credit-bearing courses (<u>GR VII.C.5</u>).

1.2.3. Service in the College of Medicine

Service in the College of Medicine includes the following:

- Delivery of health care and UK-related community outreach;
- Activities in the professional disciplines; and
- Institutional service at department, college, and University levels.

2. Functions

2.1. The Faculty

2.1.1. Assembly

Assembles at regularly scheduled times to be informed of, to discuss, and to act upon matters of concern to faculty members;

2.1.2. Responsibilities

2.1.2.1.

Makes recommendations to the University Senate Council on such matters as require the final approval of that body; and

2.1.2.2.

Determines, within the limits, established by the <u>Governing Regulations</u> and <u>University</u> <u>Senate Rules</u>, the educational policies and standards for degrees of the College of Medicine and shall identify, and when appropriate, make recommendations on, the academic priorities of the college. The informed faculty will vote on these issues identified by the Faculty Council (See CR 3.2.4.).

3. Composition, Organizational Structure, and Assembly

3.1. Composition

3.1.1. Membership

The Faculty of the College of Medicine consist of: 1) the dean, all vice, associate, and assistant deans with an academic appointment in any title series; and 2) all faculty employees having the rank of lecturer, senior lecturer, instructor (See CR 3.1.1.1.), assistant professor, associate professor, or professor. The faculty are composed of a voting faculty and a nonvoting faculty.

3.1.1.1.

The voting faculty consist of the following: 1) the dean, all vice, associate, and assistant deans; and 2) full-time professors, associate professors, assistant professors, senior lecturers, lecturers, and those instructors who are not enrolled as students in the MD program or a graduate degree program;

3.1.1.2.

Faculty listed in CR 3.1.1., who hold joint appointments where one (1) of the departments is outside of the College of Medicine, must have their primary academic appointment in the College of Medicine in order to have voting status;

3.1.1.3.

The nonvoting faculty consist of joint appointment members excluded by the limitation of CR 3.1.1.2., less-than-full-time appointees, including adjunct, voluntary, and visiting title series faculty, research fellows, and emeritus/emerita. These persons are encouraged to attend Faculty Meetings where they have the right of the floor but not voting privileges; and

3.1.1.4.

Within the eligibility provisions of <u>GR IV.A</u>, <u>GR VII.E.3.a</u>, <u>AR 2:5</u>, and <u>Human Resources</u> <u>Policy and Procedure AR 4.0</u>, elections for the University Senate Council must be conducted electronically, using a secure means that provides for ballot voting, by and from the eligible members of the College Faculty (See CR 3.1.1.1. and <u>GR IV.A</u>.).

3.2. Meetings

3.2.1. Regular Meetings

3.2.1.1.

The faculty must meet at least two (2) times each year. The Faculty Council and Dean secure the means for inclusive participation of all members (voting and nonvoting) who are off-site of the meeting room. The regular and special meetings generally must be open to students and visitors. The faculty, however, may vote themselves into executive session in accordance with the Kentucky Open Meetings law.

3.2.1.1.1.

The meeting must be conducted by the Dean or the Dean's designee. Traditionally, the Chair of the Faculty Council serves in this designated role; and

3.2.1.1.2.

In order to promote free and open expression of views and new business, no formal motions or amendments will be recognized until after matters under consideration have been fully discussed. An orderly discussion of the issues will be ensured by having reasonable time allocation for each agenda item rather than by the construction of formal parliamentary procedures. Procedures used when formal motions and amendments are reached must be those of Robert's Rules of Order.

3.2.2. Special Meetings

3.2.2.1.

Special meetings of the faculty may be called by the Faculty Council, Dean, Executive Vice President for Health Affairs, Provost, or President of the University;

3.2.2.2.

Special meetings may be called at the request of 10 percent of the voting faculty (See CR 3.1.1.1.). These requests must be submitted in writing to the Chair of the Faculty Council; and

3.2.2.3.

Minutes of each faculty meeting shall be made available to the faculty in either written and/or electronic form. A file of minutes will be maintained by the Dean's office, on behalf of the Faculty Council.

3.2.3. Agenda

3.2.3.1.

The Faculty Council develops the items of the agenda. If, in the judgment of the Faculty Council, the establishment of a new academic policy or a policy change is of such consequence that the appraisal by the faculty is required, the issue must be presented in the form of an agenda item to the assembled members; and

3.2.3.2.

The Chair of the Faculty Council, in consultation with the Dean, will formalize the agenda for the faculty meetings. One (1) week prior to a regular meeting, the agenda and written descriptions of agenda items requiring faculty vote must be distributed to all members of the faculty in either written and/or electronic form.

3.2.4. Voting

3.2.4.1.

All voting on matters that require the approval of the faculty will be conducted by either a paper or electronic ballot. This format accommodates the size of the faculty of the College of Medicine as well as facilitates voting by faculty who are unable to participate in the General Faculty meetings. Approval of policy matters will require two-thirds vote of the faculty voting;

3.2.4.2.

All issues to be considered for a vote by the faculty must be presented at a College of Medicine General Faculty meeting. The faculty must be notified at least seven (7) calendar days before the scheduled meeting of any issues to be discussed that relate to

a subsequent vote. Voting will not occur less than 10 calendar days after the general faculty meeting in which the issue is to be voted on was discussed; and

3.2.4.3.

In circumstances when the Faculty Council and Dean agree that the governance goal of faculty impact will be further enhanced, the Dean, at a General Faculty meeting, may seek an informal 'straw poll' of members physically present and participating electronically. This planned activity must be shown as an item on the meeting agenda sent to all faculty members (See CR 3.2.3.).

3.3. The Faculty Council

3.3.1. Purpose

3.3.1.1.

The Faculty Council is a body of elected designees that will provide the means by which the faculty can expeditiously discharge their responsibility to deal with, and initiate, educational and academic policy matters which transcend departmental responsibilities. Councilors will be the faculty's voice and liaise with the Dean's office and the Executive Committee;

3.3.1.2.

The Faculty Council will serve as an avenue by which faculty members can register opinions, views and problems, and will provide a channel of communication to the Dean and Executive Committee; and

3.3.1.3.

The involvement of the Faculty Council members must be recognized by the faculty and college administration as an important and valued activity.

3.3.2. Membership

3.3.2.1.

The Faculty Council voting membership consists of 12 elected regular members, and two (2) at-large voting members, as described below;

3.3.2.2.

The 12 regular members of the Faculty Council shall consist of seven (7) from the clinical departments and five (5) from the basic science departments. No two (2) members of these 12 can be from the same department. For election purposes, the 18 departments identified as clinical are: anesthesiology, emergency medicine, family and community medicine, internal medicine, neurology, neurosurgery, obstetrics and gynecology, orthopaedics, ophthalmology and visual sciences, otolaryngology, pathology and laboratory medicine, pediatrics, physical medicine and rehabilitation, psychiatry, radiation medicine, radiology, surgery, and urology. The seven (7) departments identified as basic science are: behavioral science, molecular and cellular biochemistry, microbiology, immunology, and molecular genetics, neuroscience, pharmacology and nutritional sciences, physiology, and toxicology and cancer biology;

3.3.2.3.

There will be two (2) additional at-large elected, voting members;

3.3.2.4.

Persons appointed to administrative rank at/above the level of department chair or educational unit center director are not eligible for voting membership in the Faculty Council;

3.3.2.5.

The term of office for regular members is three (3) years. The term of office for at-large members is one (1) year, and no members may serve more than two (2) consecutive terms on the Faculty Council in any elected capacity;

3.3.2.6.

Every effort must be made to stagger the term of office for each of the 12 regular representatives such that no more than three (3) clinical department representatives and two (2) basic science department representatives are elected annually; and

3.3.2.7.

If the outgoing Chair is not continuing in term as a regular or at-large member, then the Chair will remain for one (1) year as a member of the Council in an ex officio, nonvoting capacity to serve as counsel.

3.3.3. Election

3.3.3.1.

Elections of regular members will be held annually and at a time such that new members are identified by July 1. Newly elected members will assume office on September 1; this will assure continuity throughout the summer months and would provide the opportunity for newly elected members to participate as ex officio, nonvoting, members from July 1 through August 31;

3.3.3.2.

Elections will be conducted in a manner to maintain the representation between basic science and clinical members of the 12 regular members as designated in CR 3.3.2.2.;

3.3.3.3.

Balloting for election of regular members: a ballot with faculty from all departments not having voting representation in the 12 regular members during the next academic year will be circulated to all voting faculty for nominations. Only faculty with primary appointments in departments without regular member representation the next academic year will be circulated to all voting faculty for nominations. The two (2) most nominated names from each department not having representation on the Faculty Council the next academic year will be eligible as nominees. The two (2) names from each department not having representation on the Faculty Council the next academic year will be forwarded to the Faculty Council who will ask those nominated if they are willing to serve on the Faculty Council. If they are willing to serve, their names will be placed on the final ballot. Two (2) names from each department will be placed on the final ballot, assuming there are two (2) faculty from each department who are willing to serve, if elected. The basic science faculty receiving the highest number of votes will be elected to fill the vacancy or vacancies created by the basic science faculty rotating off the Faculty Council. The clinical faculty receiving the highest number of votes will be elected to fill the vacancy or vacancies created by the clinical faculty rotating off the Faculty Council. There will be no more than one (1) voting faculty member from any one (1) department serving as a regular member of the Faculty Council during the same year;

3.3.3.4.

Balloting for election of at-large members: all voting faculty of the college (except as noted below) are eligible for election to either at-large seat on the Faculty Council, regardless of the primary department affiliation of any of the current regular or at-large members. However, when filling simultaneously the two (2) elected at-large seats, newly elected members cannot be from the same department. Persons ineligible are those identified in CR 3.3.2.4. and those who already occupy a regular or at-large position for which the term is not in its final year. Election will be held in the fall semester and completed by December 1. A ballot with all eligible faculty from all departments will be circulated to all voting faculty for nominations. In the initial election, the four (4) persons with the most nominations (thereafter, the two (2) persons with the most nominations) will be forwarded to the Faculty Council who will ask those nominated if they are willing to serve on the Faculty Council. If they are willing to serve, their names will be placed on the final ballot. The one-year Faculty Council membership begins on January 1; and

3.3.3.5.

In the event that a vacancy (longer than three (3) months) occurs on the Faculty Council, the remainder of the term will be filled by the faculty member who received the next largest number of votes in the previous respective election behind those who were elected. For vacancy among the 12 regular members, the vacancy will be filled such that the ratio of clinical to basic science representation remains constant.

3.3.4. Officers

3.3.4.1.

The Faculty Council will select a Chair-Elect by ballot at a meeting in early October of the preceding year, who will succeed the Chair on September 1;

3.3.4.2.

When the Chair is a member of a clinical department, the Chair-Elect must be from a basic science department and vice versa; and

3.3.4.3.

If at the time for election of a Chair-Elect no eligible members of the Faculty Council are willing or able to serve as Faculty Council Chair, then a Chair-Elect will be determined in the following order of contingencies:

3.3.4.3.1.

The current Chair, if willing, will continue to serve as Faculty Council Chair until a willing member becomes identified and elected as the new Chair by the Faculty Council;

3.3.4.3.2.

Otherwise ineligible persons of the 12 elected Faculty Council members are eligible to be elected as Faculty Council Chair to serve for the entire year; and

3.3.4.3.3.

Persons of the 12 elected Faculty Council members are eligible to be elected as Faculty Council Chair to serve on a three-month rotating basis.

3.3.5. Responsibilities of the Faculty Council

3.3.5.1.

May develop and recommend educational policy affecting the instruction, research/creative productivity, and service responsibilities to the faculty;

3.3.5.2.

May utilize the standing committees of the faculty, subcommittees of the Faculty Council, or ad hoc committees that it appoints, in developing its determinations and recommendations about these academic matters. Any changes or new policy approved by the Faculty Council which is judged by the Faculty Council to require approval of the faculty must be included on the agenda of the next regularly scheduled General Faculty meeting. If approved by the faculty, the Faculty Council must apprise the Dean. Faculty Council decisions about academic policy matters which, in the opinion of the Faculty Council, do not require a college-wide faculty vote of approval, are recommended directly to the Dean for implementation or for submission to the University Senate Council, as appropriate; and

3.3.5.3.

Study and, when necessary, recommend changes in current practices to the faculty on all issues dealing with educational and other academic matters including but not limited to:

- The curriculum and other educational policies;
- Student admissions criteria and procedures;
- Size of the student body;
- Procedures for evaluation and academic promotion of students;
- Standards and criteria required for purposes of awarding degrees (e.g., PhD and MD degrees as part of the combined degree programs); and
- The quality of the educational programs.

3.3.5.4.

When recommendations about these issues have been submitted to the Faculty Council by Committees of the Faculty (See CR 3.4.), the Faculty Council must study these recommendations and assess their strengths and weaknesses. Except where provided otherwise below, if the Faculty Council approves the recommendation as submitted on its academic merits, the Faculty Council must notify the Dean and request that changes be administratively implemented. When a recommendation is not approved, the Faculty Council must notify the committee and provide an explanation for its action. This notification may include suggestions for strengthening the committee recommendations;

3.3.5.5.

Serve as the final level of college faculty action on proposals to establish new multidisciplinary research centers/institutes (MDRC; MDRI; <u>GR VII.C.5</u>), and on any other proposals to change the academic organization of educational units, in accordance with the <u>University Senate Rule 3.4</u>;

3.3.5.6.

Pursuant to <u>GR VII.F.2.c</u>, the Faculty Council may advise the Dean or the Dean's designee on the planning for physical facilities, personnel, and other resources when these may affect the attainment of educational objectives of the College of Medicine;

3.3.5.7.

In accordance with <u>University Senate Rules 1.3.1.1 and 1.3.1.3.1.12</u>, the Faculty Council will utilize, as appropriate, communication and information sharing with University Senate Council, to increase the effectiveness of educational policymaking by the University Senate Council and the college faculty. The University Senate Council may call to the attention of the appropriate administrative officer any need for compliance with the University rules or regulations;

3.3.5.8.

It may review and advise the Dean about policies on faculty appointments, reappointments, decisions not to reappoint, termination of appointments, promotion, tenure, and merit evaluations in conformance with University regulations, College of Medicine policies, and individual departmental policies (not to involve specific cases); and

3.3.5.9.

It may serve in a consultative capacity to the Dean. The Faculty Council may address the Dean regarding any college matter.

3.3.5.10.

It may serve as a Committee on Rules of the Faculty and Administration of the College of Medicine:

- Recommend changes in the Rules of the Faculty and Administration of the College of Medicine according to the procedure described in CR V;
- Make editorial changes in the Rules when necessary for clarification; and
- Codify Rules changes that have been approved by the faculty.

3.3.5.11.

It shall function as a Committee on Committees:

3.3.5.11.1.

These are the standing committees of the faculty and advise the Dean about the committee structure of the college (See CR II.3.3.):

- Medical Student Curriculum Committee (MSCC);
- Biomedical Education Curriculum Committee (BECC);
- College of Medicine Admissions Committee (CMAC); and
- Student Progress and Promotion Committee (SPPC).

3.3.5.11.2.

These are the standing committees established by or designated to the Dean. Additional committees within the purposes below may also be established by the Dean:

3.3.5.11.2.1.

Relating to efficient management and conduct of the college:

• Executive Committee.

3.3.5.11.2.2.

Relating to the mission function of instruction, in all areas not specifically charged elsewhere:

- Committee on Instructional Vision (CIV);
- Graduate Medical Education Committee (GMEC);
- Scholarship Committee; and
- Student Advisory Council (SAC).

3.3.5.11.2.3.

Relating to the mission function of research, in all areas not specifically charged elsewhere:

- Trainees in Research Advisory Committee (TRAC); and
- Research Vision Committee (RVC).

3.3.5.11.2.4.

Relating to the mission function of service, including health care and community outreach, in all areas not specifically charged elsewhere:

• Practice Plan Committee (PPC).

3.3.5.11.2.5.

Relating to faculty personnel matters, in all areas not specifically charged elsewhere:

- Faculty Form F/Overload Committee; and
- Faculty Appointment, Promotion, and Tenure (APT) Committee.

3.3.5.11.3.

In order to facilitate information exchanged and to help the Faculty Council remain abreast of current faculty activities and attitudes, the membership of each committee defined within the Rules of the Faculty and Administration of the College of Medicine must include one (1) Faculty Council member or the designee of the Faculty Council. If a Faculty Council member also serves on a committee, that person may be designated as the Faculty Council's representative to that committee and retains voting privileges on that committee. However, if a Faculty Council does not have membership on the committee chair serves as the Faculty Council's representative designee, as long as the committee chair is a College of Medicine faculty member;

3.3.5.11.4.

The Faculty Council receives the written and/or electronic minutes of the Committees of the Faculty and reports of committee activities through the Faculty Council representative to these committees. All committee minutes

must be available to any faculty member who wishes to examine them. In the Council Chair's responsibility to construct the agenda for the General Faculty meetings, the Council Chair may agree for the Chair of each standing committee of the faculty to present a brief oral report directly to the faculty;

3.3.5.11.5.

The appointed members of the Committees of the Faculty are appointed by the Dean on recommendation from Faculty Council. The Dean appoints committee members representing the clinical faculty, the basic science faculty, post-graduate trainees, and the medical student body as appropriate. The appointment to the various committees must occur after having determined the individual's willingness to serve on the committees. If necessary, the Dean must obtain additional nominees from the Faculty Council;

3.3.5.11.6.

Nominate the membership of Committees of the Dean, including the Faculty APT Committee. Each year the Faculty Council may be requested by the Dean to nominate, and the Dean will appoint committee members representing the clinical faculty, the basic science faculty, and the medical student body, as appropriate. The appointment to the various committees will occur after having determined the potential appointee's willingness to serve on the committees; and

3.3.6. Meetings

3.3.6.1.

The Faculty Council determines how frequently to assemble, but in order to discharge its responsibility, it must meet typically monthly on the call of the Chair or upon request of a majority of the members of the Faculty Council;

3.3.6.1.1.

At these sessions, the members share information, and clarify data collected from faculty, students, the administration, and the respective committees of which they are members. They may consider the position the Faculty Council wishes to take as a group;

3.3.6.1.1.1.

Greater than 50 percent of the voting members of the Faculty Council constitutes a quorum. A member of the Faculty Council cannot send a substitute to the meeting. The Chair votes only in the case of a tie vote;

3.3.6.1.1.2.

Minutes of each meeting must be recorded and distributed to the Faculty Council membership. Copies of approved minutes must be filed in the Dean's office and on the Faculty Council webpage for future reference and may be examined by any member of the faculty; and

3.3.6.1.1.3.

The Chair, or a majority of the members of the Faculty Council, has the authority to invite any individual to a meeting.

3.3.6.2.

The Faculty Council may also meet separately with the Dean at the request of either the Faculty Council or the Dean;

3.3.6.3.

The Faculty Council must meet with the Student Advisory Council at the request of the Dean, Faculty Council, or the Student Advisory Council;

3.3.6.4.

It is incumbent on the Faculty Council to keep the faculty fully informed of its deliberations and activities; and

3.3.6.5.

The Chair of Faculty Council must periodically prepare a summary of the activity and deliberations of the Council for communication with the college faculty.

3.4. Committees of the Faculty

3.4.1. Purpose

The college is served by College Faculty Committees, which are established to expedite the work of the faculty. The Faculty Council members who serve in an ex officio, nonvoting capacity, or who are both regular committee members and the designated Faculty Council representative, are the liaisons between the standing Faculty Committees and the Faculty Council as the integrating body. In this spirit, each committee is encouraged to exchange ideas with the Faculty Council on the issues being considered within their respective charges; and

3.4.2. Standing Committees of the Faculty

The Standing Committees of the Faculty in relation to the primary function of the college in instruction, are the following: the MSCC, the BECC, the SPPC, and the CMAC.

3.4.2.1. The Medical Student Curriculum Committee (MSCC)

3.4.2.1.1. Purpose

The College of Medicine MSCC apprises the Dean and Faculty Council on broad instructional policy issues and makes the appropriate decisions and recommendations (See CR 3.4.2.1.5.3.) on the College of Medicine curriculum for the MD degree program.

3.4.2.1.2. Charge

3.4.2.1.2.1.

Develop and design all components of the curriculum;

3.4.2.1.2.2.

Establish college educational policy;

3.4.2.1.2.3.

Determine curriculum changes, including course revisions and enhancements, and make any appropriate recommendations thereto;

3.4.2.1.2.4.

Review and approve proposals for changes in curricular structure and appropriate time allotment for each course offered in the medical education program;

3.4.2.1.2.5.

Ensure an effective curriculum quality improvement process, including the quality, effectiveness, and integration of the overall program, curricular phases, and individual courses (including clerkships);

3.4.2.1.2.6.

With the Dean, manage the implementation of the curriculum and its assessment, ensuring that methods are appropriate for the achievement of the educational goals of the College of Medicine; and

3.4.2.1.2.7.

Consider whether resources for achieving the educational mission and objectives of the program are adequate and make recommendations to the Dean for improved measures.

3.4.2.1.3. Structure

3.4.2.1.3.1.

The MSCC may form additional committees or subcommittees organized by the MSCC, as deemed appropriate to fulfill the duties assigned to the MSCC;

3.4.2.1.3.2.

The Associate Dean for Curriculum and Assessment (or the Associate Dean's designee) serves as the Chair of the MSCC;

3.4.2.1.3.3.

Greater than 50 percent of the voting faculty representatives of the MSCC constitutes a quorum. All decisions require a quorum (See CR 3.4.2.1.4.1.1.) and a decision must be made by a majority vote of all voting members in attendance. The Chair votes only in the case of a tie vote;

3.4.2.1.3.4.

The committee determines how frequently to assemble, but in order to discharge its responsibility, it must meet typically monthly on the call of the Chair or upon request of a majority of the members of the committee; and

3.4.2.1.3.5.

Minutes of each committee meeting shall be made available to the faculty in either written and/or electronic form. A file of minutes will be maintained by the Dean's office, on behalf of the committee.

3.4.2.1.4. Membership

3.4.2.1.4.1.

The membership is composed of the Chair, voting faculty representatives, voting student representatives, and ex officio, nonvoting members as follows:

3.4.2.1.4.1.1. Faculty Membership

3.4.2.1.4.1.1.1.

A minimum of four (4) College of Medicine basic science department faculty members whose primary assignment is at the Lexington Campus appointed by the Dean on recommendation from Faculty Council;

3.4.2.1.4.1.1.2.

A minimum of eight (8) College of Medicine clinical department faculty members appointed by the Dean on recommendation from Faculty Council;

3.4.2.1.4.1.1.3.

Three (3) additional faculty members representing the basic science and clinical departments elected from the College of Medicine faculty;

3.4.2.1.4.1.1.4.

For each regional campus and the Rural Physician Leadership Program (RPLP), a minimum of one (1) College of Medicine faculty member with the regional campus primary assignment and the RPLP primary assignment, appointed by the Dean on recommendation from Faculty Council; and

3.4.2.1.4.1.1.5.

All faculty members serve staggered three-year terms, beginning July 1. Faculty members may be reappointed to consecutive terms twice for a maximum period of continuous service of nine (9) years.

3.4.2.1.4.1.2. Student Membership

3.4.2.1.4.1.2.1.

Student membership must include two (2) representatives from each class at the Lexington Campus, one (1) representative from each class at each regional campus, and one (1) representative from the RPLP. Two (2) students must be elected from the student membership to serve as voting members on the MSCC. Student members serve two-year terms. Student members may be reappointed to consecutive terms twice for continual service of four (4) years.

3.4.2.1.4.1.3. Ex Officio, Nonvoting Membership

3.4.2.1.4.1.3.1.

As deemed appropriate by the MSCC, the College of Medicine assistant deans, including regional campus assistant deans, may serve as ex officio, nonvoting members of the MSCC, and may serve as Chair of any additional committees or subcommittees.

3.4.2.1.4.1.3.2.

The membership of the MSCC must include one (1) Faculty Council member or the designee of the Faculty Council. If a Faculty Council member also serves on the MSCC, that person may be designated as the Faculty Council's representative to the MSCC and retains voting privileges on the MSCC. However, if a Faculty Council member does not have membership on the MSCC, or the Faculty Council does not designate a representative, then the MSCC Chair serves as the Faculty Council's representative designee, as long as the MSCC Chair is a College of Medicine faculty member.

3.4.2.1.5. MD Program Change Procedures

3.4.2.1.5.1.

The Faculty Council reviews proposed MD program changes submitted by the MSCC, assesses strengths and weaknesses, and provides recommendations to the Dean on resource and budgetary issues and to the MSCC on academic content issues, for strengthening the final proposal;

3.4.2.1.5.2.

Routine matters related to course administration are coordinated by the Office of Medical Education by interaction with appropriate course directors; and

3.4.2.1.5.3.

The MSCC makes the final educational policy decision for the college and forwards that action to the Dean. All curriculum changes are carried out in accordance with <u>University Senate Rules</u> governing such processes.

3.4.2.2. The Biomedical Education Curriculum Committee (BECC)

3.4.2.2.1. Purpose

The BECC apprises the Dean and Faculty Council on broad instructional policy issues in biomedical education and makes appropriate decisions and recommendations (See CR 3.4.2.1.5.3.) on all biomedical education courses, curricula, and educational programs.

3.4.2.2.2. Charge

3.4.2.2.2.1.

Assess whether proposed changes to the biomedical education curricula meet the educational goals of the college;

3.4.2.2.2.2.

Propose curriculum changes for consideration by the Dean and Faculty Council;

3.4.2.2.2.3.

Determine for the college changes in content, emphasis, and approximate time allotment for biomedical educational programs and courses offered; and

3.4.2.2.2.4.

Consider whether resources to achieve the educational mission and objectives of the college are adequate and makes recommendations for quality improvement measures.

3.4.2.2.3. Structure

3.4.2.2.3.1.

The Associate Dean for Biomedical Education or the Associate Dean's designee serves as the Chair of the BECC;

3.4.2.2.3.2.

Greater than 50 percent of the voting faculty representatives of the BECC constitutes a quorum. All decisions require attendance by a majority of the voting BECC faculty representatives, and a decision must be made by a majority vote of those in attendance. The Chair votes only in the case of a tie vote; and

3.4.2.2.3.3.

The committee determines how frequently to assemble, but in order to discharge its responsibility, it confers typically monthly on the call of the Chair or upon request of a majority of the members of the committee; and

3.4.2.2.3.4.

Minutes of each committee meeting shall be made available to the faculty in either written and/or electronic form. A file of minutes will be maintained by the Dean's office, on behalf of the committee.

3.4.2.2.4. Membership

3.4.2.2.4.1.

The membership must be composed of the Chair, voting faculty representatives, and ex officio, nonvoting members as follows:

3.4.2.2.4.1.1. Faculty Membership

3.4.2.2.4.1.1.1.

A minimum of six (6) College of Medicine basic science department faculty members appointed by the Dean on recommendation from Faculty Council. Faculty members are identified based on their broad educational perspective and their involvement in biomedical education; and

3.4.2.2.4.1.1.2.

All faculty members serve staggered three-year terms beginning July 1. Faculty members may be reappointed to consecutive terms twice for a maximum period of continuous service of nine (9) years.

3.4.2.2.4.2.1. Ex Officio, Nonvoting Membership

3.4.2.2.4.2.1.1.

The membership of the BECC must include one (1) Faculty Council member or the designee of the Faculty Council. If a Faculty Council member also serves on the BECC, that person may be designated as the Faculty Council's representative to the BECC and retains voting privileges on the BECC. However, if a Faculty Council member does not have membership on the BECC, or the Faculty Council does not designate a representative, then the BECC Chair serves as the Faculty Council's representative designee, as long as the BECC Chair is a College of Medicine faculty member.

3.4.2.2.5. Curriculum Change Procedures

3.4.2.2.5.1.

The Faculty Council reviews proposed curriculum changes submitted by the BECC, assesses strengths and weaknesses, and provides the recommendations to the Dean on resource and budgetary issues and to the BECC on academic content issues for strengthening the final proposal;

3.4.2.2.5.2.

Final proposals approved by the BECC are sent forward to other University bodies (e.g., the Undergraduate Council, Graduate Council, University Senate Council) as appropriate;

3.4.2.2.5.3.

Routine matters related to course administration are coordinated by the Office of Biomedical Education by interaction with appropriate course directors; and

3.4.2.2.5.4.

All curriculum changes are carried out in accordance with <u>University</u> <u>Senate Rules</u> governing such processes.

3.4.2.3. The Student Progress and Promotion Committee (SPPC)

3.4.2.3.1. Purpose

The College of Medicine SPPC regularly evaluates each student's development to ensure that students graduating from the MD degree program have the necessary knowledge, skills, demeanor, and ethical principles essential to professional competence.

3.4.2.3.2. Charge

3.4.2.3.2.1.

Periodically review the performance of each medical student to ensure satisfactory progress toward attaining the medical degree and meeting all relevant standards;

3.4.2.3.2.2.

Develop remediation plans in collaboration with the Office of Medical Education for any student with deficiencies in meeting academic performance, professionalism, or technical standards;

3.4.2.3.2.3.

Determine and report SPPC's decision to the Dean on each student's eligibility for promotion, graduation, remediation, dismissal from, or leave of absence from the MD degree program; and

3.4.2.3.2.4.

In consultation with the MSCC, enforce uniform standards for satisfactory academic performance of medical students for all courses (including clerkships) within the medical degree.

3.4.2.3.3. Structure

3.4.2.3.3.1.

The Chair of the SPPC, appointed by the Dean from one (1) of the voting faculty representatives (See CR 3.4.2.3.4.1.), must have prior service on the committee and may serve consecutive terms as Chair;

3.4.2.3.3.2.

Greater than 50 percent of the voting faculty representatives of the SPPC constitutes a quorum. All decisions require attendance by a majority of the voting faculty representatives (See CR 3.4.2.3.4.1.) and a decision must be made by a majority vote of those in attendance. The Chair votes only in the case of a tie vote;

3.4.2.3.3.3.

The committee determines how frequently to assemble, but in order to discharge its responsibility, it must meet typically monthly on the call of the Chair or upon request of a majority of the members of the committee;

3.4.2.3.3.4.

Minutes of each committee meeting shall be made available to the faculty in either written and/or electronic form. A file of minutes will be maintained by the Dean's office, on behalf of the committee; and

3.4.2.3.3.5.

In order to expedite SPPC's activities, the Chair may organize subcommittees to meet separately for the purpose of evaluating student progress in the curriculum.

3.4.2.3.4. Membership

3.4.2.3.4.1.

The membership is composed of voting faculty representatives and ex officio, nonvoting members as follows:

3.4.2.3.4.1.1. Faculty Membership

3.4.2.3.4.1.1.1.

A minimum of nine (9) College of Medicine faculty members from basic science and clinical departments appointed by the Dean on recommendation from Faculty Council;

3.4.2.3.4.1.1.2.

For each regional campus, a minimum of one (1) College of Medicine faculty member with the regional campus primary assignment appointed by the Dean on recommendation from Faculty Council;

3.4.2.3.4.1.1.3.

Course or clerkship directors and co-directors of required courses do not serve on the committee; and

3.4.2.3.4.1.1.4.

All faculty members serve staggered three-year terms, rotating onto the SPPC each year on July 1. Faculty members may be reappointed to consecutive terms twice for a maximum period of continuous service of nine (9) years.

3.4.2.3.4.1.2. Ex Officio, Nonvoting Membership

3.4.2.3.4.1.2.1.

The associate and assistant deans of the Office of Medical Education and the Curriculum and Assessment Director are ex officio, nonvoting members; and

3.4.2.3.4.1.2.2.

The membership of the SPPC must include one (1) Faculty Council member or the designee of the Faculty Council. If a Faculty Council member also serves on the SPPC, that person may be designated as the Faculty Council's representative to the SPPC and retains voting privileges on the SPPC. However, if a Faculty Council member does not have membership on the SPPC, or the Faculty Council does not designate a representative, then the SPPC Chair serves as the Faculty Council's representative designee, as long as the SPPC Chair is a College of Medicine faculty member.

3.4.2.4. College of Medicine Admissions Committee (CMAC)

3.4.2.4.1. Purpose

The CMAC has the responsibility and final authority for the selection and admission of students to the College of Medicine MD degree program.

3.4.2.4.2. Charge

3.4.2.4.2.1.

Recommend policies and procedures for admission to the MD degree program for potential first-year students and those with advance standing in the educational program;

3.4.2.4.2.2.

Evaluate the qualifications of applicants based on their application and interviews;

3.4.2.4.2.3.

Make a final decision on admission for all students into the MD degree program, including dual degree programs and regional campuses; and

3.4.2.4.2.4.

Maintain awareness of trends in admission to the MD programs at the state, regional, and national levels.

3.4.2.4.3. Structure

3.4.2.4.3.1.

The Chair of the CMAC, appointed by the Dean from one (1) of the voting faculty representatives (See CR 3.4.2.4.4.1.1.), must have prior service on the committee, and may serve consecutive terms as Chair;

3.4.2.4.3.2.

Greater than 50 percent of the voting faculty representatives of the CMAC constitutes a quorum. All decisions require attendance by a majority of the voting CMAC faculty representatives (See CR 3.4.2.4.4.1.1.) and a decision must be made by a majority vote of all voting members in attendance. The Chair votes only in the case of a tie vote;

3.4.2.4.3.3.

The committee determines how frequently to assemble, but in order to discharge its responsibility, it must meet typically monthly on the call of the Chair or upon request of a majority of the members of the committee; and

3.4.2.1.3.4.

Minutes of each committee meeting shall be made available to the faculty in either written and/or electronic form. A file of minutes will be maintained by the Dean's office, on behalf of the committee.

3.4.2.4.3.5.

Additional regional advisory committees are organized by the CMAC to conduct interviews and make recommendations on regional campus candidates. The CMAC makes all final admissions decisions.

3.4.2.4.4. Membership

3.4.2.4.4.1.

The membership shall be composed of voting faculty representatives, voting student representatives, and ex officio, nonvoting members as follows:

3.4.2.4.4.1.1. Faculty Membership

3.4.2.4.4.1.1.1.

A minimum of 10 College of Medicine faculty members from basic science and clinical departments appointed by the Dean on recommendation from Faculty Council;

3.4.2.4.4.1.1.2.

Three (3) additional faculty members representing the basic science and clinical departments elected from the College of Medicine faculty;

3.4.2.4.4.1.1.3.

For each regional campus, a minimum of one (1) College of Medicine faculty member with the regional campus primary assignment appointed by the Dean on recommendation from Faculty Council;

3.4.2.4.4.1.1.4.

One (1) community physician representative appointed by the Dean on recommendation from Faculty Council; and

3.4.2.4.4.1.1.5.

All faculty members serve staggered three-year terms. Faculty members may be reappointed to consecutive terms twice for a maximum period of continuous service of nine (9) years.

3.4.2.4.4.1.2. Student Membership

3.4.6.4.1.2.1.

Student members shall include three (3) representatives each from the third- and fourth-year classes on the Lexington Campus and one (1) representative from the third-year class on each regional campus (Students may be appointed to serve two-year terms.).

3.4.2.4.4.1.3. Ex Officio, Nonvoting Membership

3.4.2.4.4.1.3.1. The Associate Dean for Admissions;

3.4.2.4.4.1.3.2.

The membership of the CMAC must include one (1) Faculty Council member or the designee of the Faculty Council. If a Faculty Council member also serves on the

CMAC, that person may be designated as the Faculty Council's representative to the CMAC and retains voting privileges on the CMAC. However, if a Faculty Council member does not have membership on the CMAC, or the Faculty Council does not designate a representative, then the CMAC Chair serves as the Faculty Council's representative designee, as long as the CMAC Chair is a College of Medicine faculty member; and

3.4.2.4.4.1.3.3.

Additional administrative faculty from the Lexington Campus, regional campuses, and persons from regional advisory committees may be appointed by the Dean.

4. Educational Policy Rule Concerning Supervision of Clinical Activities of Medical Students

4.1. Supervision of Student Clinical Activities

In order to ensure an appropriate learning environment for optimum patient and student safety, a College of Medicine faculty member must directly supervise or appropriately designate supervision of all student clinical activities involving patients. Faculty supervision must include the designation of the clinical setting, level of student involvement, and planned activities that are appropriate for the student's level of training and experience. The faculty member may designate the direct supervision of the student's activity to an appropriate resident, advanced practice provider, and/or other health care provider. In doing so, the faculty member must ensure that student's activities fall within the designated supervising provider's scope of practice. Further, the supervising faculty member must ensure that the supervisor is appropriately trained and credentialed to supervise the student's clinical activities. The necessity of faculty oversight, direction, and supervision, direct or designated, applies to all patient encounters by medical students, regardless of training level.

4.2. Compliance

This requirement must be incorporated into the planning and operation of all medical student activities. All courses that include patient interactions must delineate supervision guidelines in compliance with this requirement in the course syllabus. The course or clerkship director must assume primary responsibility for compliance with this requirement. Compliance with this faculty rule must be monitored by the Dean's office. Failure to comply with this requirement will result in suspension of student activities until compliance is ensured.

5. Additional Educational Policies Concerning the Primary Function Area of Instruction

5.1. Educational Policymaking

If additional college-level educational policy concerning the instruction mission area needs to be made that is not provided for by the above committee structure, and if such policy has not been made by or at the instance of the Faculty Council pursuant to CR 3.3.5.1., then the responsibility for securing that educational policymaking is here designated to the supervision of the Dean.

5.2. Program Updates

The Faculty Council must seek a yearly update on the status of College of Medicine programs of Graduate Medical Education (GME), Postdoctoral Education, and Continuing Education.

6. Educational Policies Concerning the Primary Function Area of Research

6.1. Educational Policymaking

If college-level educational policy needs to be made concerning the research mission area, and if such policy has not been made by or at the instance of the Faculty Council pursuant to CR 3.3.5.1., then the responsibility for securing that educational policymaking is here designated to the supervision of the Dean.

6.2. Program Updates

The Faculty Council must seek a yearly update on the status of College of Medicine programs of education relating to the research mission that are not under the supervision of a faculty committee, including non-credit-bearing educational activities homed in College of Medicine multidisciplinary research centers/institutes.

7. Educational Policies Concerning the Primary Function Area of Service

7.1. Education Policymaking

If college-level educational policy needs to be made concerning the service mission area, and if such policy has not been made by or at the instance of the Faculty Council pursuant to CR 3.3.5.1., then the responsibility for securing that educational policymaking is here designated by the Dean.

7.2. Program Updates

The Faculty Council must seek a yearly update on the status of College of Medicine programs of community outreach (See CR 1.2.3.).

Article III: Rules Developed by the Dean and Faculty

1. Review of Department Chairs/Multidisciplinary Research Center Directors

Policies and procedures for conducting reviews of department chairs and multidisciplinary research center directors are established jointly by the Dean and the college faculty. In consultation with the college faculty, the Dean establishes procedures used at the level of the college concerning faculty input in the evaluation of the performance of department chairs and multidisciplinary research center directors during the interval between periodic reviews. For this purpose, the Faculty Council shall act for the college faculty (<u>GR IX.III</u>, <u>AR 1:4.III.B</u>, and <u>GR VII.E.3.c</u>).

2. Review of Faculty Performance

In consultation with the college faculty, the Dean establishes procedures used at the level of the college concerning the faculty performance evaluations. The evaluation instrument or forms that are used in the college are to be developed by the Dean of the college and must involve consultation with an appropriate faculty governance body, i.e., the College of Medicine Faculty Council (<u>GR VII.E.3.c</u>, <u>AR 3:10</u>, Provost memorandum).

3. Faculty Personnel Decisions

In consultation with the college faculty, the Dean establishes procedures used at the level of the college concerning recommendations on faculty appointments, promotions, reappointments, decisions not to reappoint, terminal appointments, post-retirement appointments, and the granting of tenure (<u>GR VII.E.3.c</u>).

3.1. College Advisory Committee

The college must have a college advisory committee comprised of tenured faculty members from the college faculty, excluding educational unit administrators and assistant/associate deans. The college advisory committee shall be concerned with policy matters on, and individual cases related to, faculty appointment, reappointment, promotion, and the granting of tenure. Its members may be elected by

the college faculty, or appointed by the Dean after consultation with an appropriate faculty body of the college as documented in the *College Rules* (<u>AR 2:1</u>). For this purpose, the Dean must include consultation with the Faculty Council regarding nominations for, and the final membership of, the College of Medicine Faculty APT Committee. (For charge to the Faculty APT Committee, see CR IV.2.6.2.).

4. Post-tenure Review

In the case of individual tenure progress review pursuant to <u>AR 3:11</u>, if there is a three-member ad hoc committee then it must consist of tenured faculty employees, including one (1) member selected by the Dean, one (1) member chosen by the faculty employee, and one (1) member selected by the college faculty. For this purpose, the Faculty Council shall act for the college faculty.

5. Review of Educational Units

The Dean appoints review committees for educational units (departments, multidisciplinary research centers/institutes) after consultation with the Faculty Council (<u>AR 1:4</u>).

6. Joint Faculty and Administration Committees

The Faculty Council and Dean jointly determine: (a) charge, (b) respective members, (c) mechanisms by which the Faculty Council and Dean shall secure input and communicate with respective constituency, and (d) what approvals are needed prior to effectuation of committee actions/recommendations.

Article IV: Rules Developed by the Dean for the Administration of the College

1. The Dean

1.1. Charge

1.1.1.

The Dean is charged with overseeing the educational work of the college and its efficient conduct and management in all matters not specifically charged elsewhere. The Dean is authorized to establish and enforce such policies and procedures as are attendant to the administrative management of the operations of the college.

1.2. Responsibilities

1.2.1.

The Dean is responsible for:

- Implementation of the curricula of the college;
- Ensuring through the faculty the quality of instruction given therein;
- Assignment of duties to all personnel;
- The service provided by the faculty of the college, individually and as a whole;
- Review of faculty performance evaluations submitted by the department chairs;
- Recommendations on salaries, salary changes, appointments, reappointments, terminal appointments, post-retirement appointments, promotions, granting of tenure, and decisions not to appoint for members of the college or for ultimate action thereon when such authority has been designated by the President or the Provost;
- Submission of the budget request for the college and administration of the budget when it is approved;
- Enforcement of the <u>Governing Regulations</u>, the <u>Administrative Regulations</u>, <u>University</u> <u>Senate Rules</u>, <u>Rules of the Graduate Faculty</u>, and the Rules of College Faculty; and

• The role of the Chair of the Faculty Council and an ex officio, nonvoting member of all college committees.

1.2.2. Advice of the Faculty

In accordance with <u>GR VII.F.2.c</u>, in connection with the above major administrative functions, the Dean must seek the advice of the faculty of the college: 1) individually, 2) as a whole, 3) through the elected Faculty Council, 4) through the faculty advisory committees, 5) through meetings with individual department faculties, or 6) through another appropriate mechanism provided herein.

- The Dean speaks for the college. In the event the Dean believes it necessary to depart from recommendations of the college faculty, the Dean must communicate the college faculty's recommendation as well as the Dean's recommendation, stating reasons for differing from the college faculty's opinion, and notify the college faculty of such action.
- When required for accreditation or other specific reporting purposes, the number of College of Medicine faculty may refer to particular subsets of faculty employees relevant to particular college missions in instruction, research, and/or service/health care.

2. Councils and Committees of the Dean

2.1. Mission

This College of Medicine philosophy of shared governance must imbue and animate decision-making processes of the college. In relation to faculty, the membership of each committee defined within the Rules of the Faculty and Administration of the College of Medicine must include one (1) Faculty Council member or the designee of the Faculty Council. If a Faculty Council member also serves on a committee, that person may be designated as the Faculty Council's representative to that committee and retains voting privileges on that committee. However, if a Faculty Council member does not have membership on the committee, or the Faculty Council does not designate a representative, then the committee chair serves as the Faculty Council's representative designee, as long as the committee chair is a College of Medicine faculty member. Reciprocally, by <u>GR VII.F.2.c</u>, the Dean (or designee) is an ex officio, nonvoting member of all college faculty committees. In particular circumstances, the Faculty Council and Dean may agree that shared governance outcomes for the college will be most effectively obtained by joint establishment of a committee, with membership and accountability to be held jointly. For example, if a committee will be charged to consider both educational policy and its resource support, with input from both the college faculty and college administration, the committee will be most effective in joint membership and accountability.

Given the complexities and challenges of higher education in a college of medicine, with its multiple missions, the interdependence of its faculty, and the diverse expertise of its faculty, the College of Medicine will best solve our future challenges and create innovative opportunities through a shared governance transdisciplinary strategy, with a focus on purpose, integrity, and mission.

2.2. Councils and Committees on Management and Conduct of the College (See CR II 3.3.5.11.2.1.)

2.2.1. The Executive Committee

2.2.1.1. Charge

The Executive Committee is advisory to the Dean and is charged with recommending and reviewing administrative policies and programs.

2.2.1.2. Responsibilities

2.2.1.2.1.

Consider and make recommendations to the Dean on:

- The obligations, privileges, and status of the faculty;
- The budget planning, i.e., on the acquisition, allocation, and management of resources, and physical facilities of the college;
- The initiation of new departments and/or centers and their relationship to existing departments and programs;
- Policies on departmental review (not to involve specific departmental reviews);
- The relationships of the College of Medicine with other Health Care Colleges, with other units of the University and with agencies, citizen groups, or individuals;
- All other matters, not specifically in the province of the Faculty Council, or of the faculty, that relate to the activities of the faculty and college in instruction, research, patient care, community service, scholarship, and administration. These recommendations must be made known to the Faculty Council for its consideration and discussion;
- The College of Medicine administrative committee structure, organization, and function;
- Advice to the Dean about recommendations concerning college policy and practice that are submitted by the Faculty Council and the Practice Plan Committee; and
- Recommendation of potential agenda items for General Faculty meetings to the Faculty Council.

2.2.1.3. Meetings

2.2.1.3.1.

The Executive Committee must meet regularly, generally monthly, and at other times, on the call of the Dean or the Dean's designated representative, or upon request of a majority of the voting members of the Executive Committee;

2.2.1.3.2.

A notice of the meeting and its agenda and related material, including matters upon which the Dean will request an advisory vote, must be distributed to the members reasonably in advance of the meeting;

2.2.1.3.3.

The Dean or the Dean's designated representative will preside. Greater than 50 percent of the voting members constitutes a quorum. The Dean votes only in the case of a tie vote;

2.2.1.3.4.

The Dean, or a majority of the members of the Executive Committee, have the authority to invite any individual to the meeting, such as a member of the Executive Vice President for Health Affairs, Provost and University leadership team, or a University Senate Council representative; and

2.2.1.3.5.

The resume of the discussion and votes pertinent to agenda items will be circulated to all members of the faculty by the Dean. A file of minutes will be maintained by the Dean's office, on behalf of the Executive Committee.

2.2.1.4. Membership

2.2.1.4.1.

The Executive Committee consists of all regular or acting department chairs and center directors;

2.2.1.4.2.

All associate deans and the Chair of the Faculty Council will serve as ex officio, nonvoting members; and

2.2.1.4.3.

In the absence of the Chair, Acting Chair, or Director, the Chair's designee may attend the meetings with the approval of the Dean but will do so without vote.

2.3. Councils and Committees on Instruction (CR II 3.3.5.11.2.2.)

2.3.1. Committee on Instructional Vision (CIV)

2.3.1.1. Committee Philosophy on Instruction

2.3.1.1.1.

The CIV will advise the Dean on emerging challenges and opportunities in the mission of instruction. An ultimate goal of the instructional activities at the UK College of Medicine is to prepare future scientists and health care professionals who are "citizens of the world," capable of critically appraising and participating in solutions to state, national, and global challenges. The scope of our instructional mission includes undergraduate, graduate, and medical students; postdoctoral, resident, and fellow trainees; as well as adult and nontraditional learners in the community, all embraced in a diverse and inclusive educational environment. The college instructional team envisions and implements innovative pedagogical approaches that encompass not only traditional classroom setting, but also the full array of experiential, engagement, transdisciplinary research-intensive, on-line, and other learning formats.

2.3.1.2. Charge

2.3.1.2.1.

Initiate programmatic priorities that will leverage the expertise of the faculty to better meet the needs of and prepare student learners;

2.3.1.2.2.

Advise on emerging trends that will incorporate instruction and research efforts to create transformational educational experiences;

2.3.1.2.3.

Advocate for transdisciplinary educational objectives that will harness faculty affiliated through centers;

2.3.1.2.4.

Foster excellence in teaching and learning by promoting, incentivizing, and celebrating the successes of outstanding and cutting-edge instruction;

2.3.1.2.5.

Evaluate the effectiveness of instructional programs in their ability to develop in students their intellectual prowess for identifying crucial questions and accomplishing solutions;

2.3.1.2.6.

Ensure that all instructional activities successfully mold creative, thoughtprovoking, and inclusive learning experiences;

2.3.1.2.7.

Recommend on effective incorporation of advancing technologies into college instructional activities;

2.3.1.2.8.

Advance experiential activities in study abroad, exchange programs, development partnerships with other institutions, and other international mechanisms; and

2.3.1.2.9.

Identify and support opportunities for faculty to seek and obtain extramural funding support for instruction.

2.3.1.3. Membership

2.3.1.3.1.

The following criteria must be used by the Dean in making appointments of inspired academic leaders to the committee. Appointees will be recognized by peers as having demonstrated keen interest in student-learner progress and success, and be experienced in instructional program development, implementation, and evaluation. The Dean appoints the Chair. The Chair shall be the Associate Dean for Biomedical Education, unless the Dean determines otherwise in consultation with the Chair of Faculty Council;

2.3.1.3.2.

The membership of the CIV must include one (1) Faculty Council member or the designee of the Faculty Council. If a Faculty Council member also serves on the CIV, that person may be designated as the Faculty Council's representative to the CIV and retains voting privileges on the CIV. However, if a Faculty Council member does not have membership on the CIV, or the Faculty Council does not designate a representative, then the CIV Chair serves as the Faculty Council's representative designee, as long as the CIV Chair is a College of Medicine faculty member;

2.3.1.3.3.

Majority of committee membership is delineated by roles held within the College of Medicine;

2.3.1.3.4.

Includes one (1) faculty at-large basic science and one (1) faculty at-large clinical representatives. Nominations are made following a call from Faculty Council and appointed by the Dean, based on Faculty Council recommendation;

2.3.1.3.5.

Greater than 50 percent of the voting members constitutes a quorum. The Chair votes only in the case of a tie vote;

2.3.1.3.6.

The committee determines how frequently to assemble, but in order to discharge its responsibility, it must meet typically monthly on the call of the Chair or upon request of a majority of the members of the committee; and

2.3.1.3.7.

Minutes of each committee meeting shall be made available to the faculty in either written and/or electronic form. A file of minutes will be maintained by the Dean's office, on behalf of the committee; and

2.3.1.3.8.

Faculty at-large members serve staggered three-year terms, with a term start date of July 1; faculty members may be reappointed to consecutive terms twice for a maximum period of continuous service of nine (9) years.

2.3.2. Graduate Medical Education Committee (GMEC)

2.3.2.1. Charge

2.3.2.1.1.

Consistent with Accreditation Council for Graduate Medical Education (ACGME) institutional requirements and additional Graduate Medical Education (GME) training program accrediting body requirements, the GMEC is the committee that provides oversight of the GME programs at the sponsoring institution. Its responsibilities include verifying that individual training programs operate in a manner consistent with all institutional and program specific accreditation requirements. It establishes and implements policies and procedures regarding the quality of education and the work environment for residents and fellows in all training programs. GMEC also develops policies to govern GME activities at its participating clinical sites consistent with ACGME institutional and program requirements and GME affiliation agreements. The GMEC is responsible for demonstrating effective oversight of the sponsoring institution's accreditation through an annual institutional review.

2.3.2.2. Membership

2.3.2.2.1.

The GMEC is chaired by the College of Medicine Senior Associate Dean for GME, who also serves as the designated institutional official (DIO) for the ACGME sponsoring institution;

2.3.2.2.2.

Unless selected to serve as a voting member of the GMEC (as outlined below), core residency training program directors, fellowship directors, and additional

GME program directors are ex officio, nonvoting members and welcome to participate in GMEC meetings at any time;

2.3.2.2.3.

A minimum of five (5) peer-selected residents from GME Lexington Campus ACGME-accredited programs and a minimum of one (1) peer-selected house staff from GME regional campus ACGME-accredited programs shall serve as voting members;

2.3.2.2.4.

The following shall serve as ex officio, voting members:

- The ACGME DIO;
- GME Institutional Leadership (GME director and assistant deans);
- UK College of Medicine Office of Medical Education representative; and
- UK HealthCare quality and safety representative.

2.3.2.2.5.

The following must serve as ex officio, voting members for the GME Lexington campus:

- A minimum of 70 percent of core residency program directors;
- A minimum of 40 percent of fellowship directors; and
- A minimum of one (1) additional GME program director.

2.3.2.2.6.

The following must serve as voting members for GME regional campuses:

- A representative group of core residency program directors. If only one program is in place at the regional campus, that program director serves by default; and
- If fellowships are in place at the regional campus, a minimum of one fellowship director must serve.

2.3.2.2.7.

The following shall serve as an advisory member without a vote:

- The Lexington Veteran Affairs Associate Chief of Staff for Education; and
- A medical staff representative from each primary clinical training site for ACGME residency and fellowship programs (e.g., UK HealthCare, Med Center Health of Bowling Green, St. Claire Regional Medical Center) is encouraged to attend each GMEC meeting as needed. GME regional campus core residency and fellowship program directors may be designated by the site to serve as the primary clinical site representative.

2.3.2.2.8.

A quorum is defined by greater than 50 percent of the voting members of the GMEC. All decisions require attendance of greater than 50 percent of the voting GMEC, and a decision must be made by a majority vote of those in attendance. The Chair votes only in the case of a tie vote. The committee determines how

frequently to assemble, but in order to discharge its responsibility, it must meet typically monthly on the call of the Chair or upon request of a majority of the members of the committee. Minutes of each committee meeting shall be made available to the faculty in either written and/or electronic form. A file of minutes will be maintained by the Dean's office, on behalf of the committee; and

2.3.2.2.9.

The membership of the GMEC must include one (1) Faculty Council member or the designee of the Faculty Council. If a Faculty Council member also serves on the GMEC, that person may be designated as the Faculty Council's representative to the GMEC and retains voting privileges on the GMEC. However, if a Faculty Council member does not have membership on the GMEC, or the Faculty Council does not designate a representative, then the GMEC Chair serves as the Faculty Council's representative designee, as long as the GMEC Chair is a College of Medicine faculty member.

2.3.2.2.10.

The term limit for membership is a three-year term beginning on July 1 of the subsequent academic year.

2.3.3. Scholarship Committee

2.3.3.1. Description

2.3.3.1.1.

The Scholarship Committee is for managing and distributing medical student scholarships.

2.3.3.2. Charge

2.3.3.2.1.

The Scholarship Committee complies with the University rules and standard administrative procedures for awarding scholarships. The committee is responsible for reviewing all scholarship applications and selecting recipients using a standardized award procedure. Specific duties include the following:

- Publicize scholarship opportunities;
- Provide a holistic review of each student who is eligible for a scholarship;
- Ensure that donor intentions are honored;
- Manage spending accounts for individual scholarships;
- Serve as the College of Medicine Financial Aid Satisfactory Academic Progress Appeals Committee for students with mitigating financial circumstances; and
- Recommend procedures to ensure that all available scholarship money is disseminated each academic year.

2.3.3.3. Membership

2.3.3.3.1.

The Scholarship Committee is composed of three (3) administrators: Associate Dean for Student Affairs, an Assistant Dean for Student Affairs, and the Associate or Assistant Dean for Admissions;

2.3.3.3.2.

A minimum of one (1) faculty representative appointed by the Dean on recommendation from Faculty Council for a three-year term. The faculty representative may be reappointed to two (2) additional terms for a total of nine (9) years;

2.3.3.3.3.

Ex officio, nonvoting members include the financial aid director, assistant director of financial aid, regional campus liaisons, the Office of Medical Education Department Administrator, and the Senior Director of Philanthropy; and

2.3.3.3.4.

The membership of the Scholarship Committee must include one (1) Faculty Council member or the designee of the Faculty Council. If a Faculty Council member also serves on the Scholarship Committee, that person may be designated as the Faculty Council's representative to the Scholarship Committee and retains voting privileges on the Scholarship Committee. However, if a Faculty Council member does not have membership on the Scholarship Committee, or the Faculty Council does not designate a representative, then the Scholarship Committee Chair serves as the Faculty Council's representative designee, as long as the Scholarship Committee Chair is a College of Medicine faculty member.

2.3.3.4. Structure

2.3.3.4.1.

The Scholarship Committee meets regularly throughout each academic year to review student applications. Minutes of each committee meeting shall be made available to the faculty in either written and/or electronic form. A file of minutes will be maintained by the Dean's office, on behalf of the committee; and

2.3.3.4.2.

Greater than 50 percent of voting members constitutes a quorum. All decisions require attendance by a majority of voting members and a decision must be made by a majority vote of those in attendance. The Chair votes only in the case of a tie vote.

2.3.4. Student Advisory Council

2.3.4.1. Purpose

2.3.4.1.1.

The Student Advisory Council serves as an official forum in which students may express their concerns and opinions concerning the conduct of the educational degree programs of the College of Medicine; and

2.3.4.1.2.

The Student Advisory Council meets at least biannually, once in the spring and once in the fall, with the Dean and members of the Dean's office and with the Faculty Council as requested by the Dean or Student Advisory Council.

2.3.4.2. Charge

2.3.4.2.1.

Makes recommendations on issues impacting degree-granting programs of the college; and

2.3.4.2.2.

Serves as a liaison and advisory group to the Dean's office on problems of student welfare and extracurricular activities.

2.3.4.3. Membership

2.3.4.3.1.

The Student Advisory Council is composed of representatives elected from biomedical and medical students across the four-year campuses, the Rural Physician Leadership Program, and representatives from other student organizations as designated by the Dean:

2.3.4.3.1.1.

It is the important responsibility of each student representative to adequately report to the Student Advisory Council the concerns of the student's constituency, and to adequately report to the student's constituency on the activity of the Student Advisory Council.

2.4. Councils and Committees on Research (CR II 3.3.5.11.2.3.)

2.4.1. Trainees in Research Advisory Committee (TRAC)

2.4.1.1. Charge

2.4.1.1.1.

The Trainees in Research Advisory Committee (TRAC) is charged with the mission of supporting the efforts of all research trainees in the College of Medicine as well as advising the Dean concerning issues related to the trainees. This committee is comprised of current students, postdoctoral fellows and scholars, faculty, and administrative staff. These members will be persons who are involved in the day-to-day interactions with the trainee community within the college.

2.4.1.2. Membership

2.4.1.2.1.

The membership is seven (7) faculty from the clinical and basic science departments, at least three (3) graduate students (Graduate School), and three (3) postdoctoral students. The Associate Dean for Biomedical Education is an ex officio, nonvoting member. Appointments are for three (3) years. Faculty members may be appointed to consecutive terms twice for a maximum period of continuous service of nine (9) years;

2.4.1.2.2.

The membership of TRAC must include one (1) Faculty Council member or the designee of the Faculty Council. If a Faculty Council member also serves on the TRAC, that person may be designated as the Faculty Council's representative to the TRAC and retains voting privileges on the TRAC. However, if a Faculty Council member does not have membership on the TRAC, or the Faculty Council

does not designate a representative, then the TRAC Chair serves as the Faculty Council's representative designee, as long as the TRAC Chair is a College of Medicine faculty member;

2.4.1.2.3.

Greater than 50 percent of the voting members constitutes a quorum. The Chair votes only in the case of a tie vote;

2.4.1.2.4.

The committee determines how frequently to assemble, but in order to discharge its responsibility, it must meet typically monthly on the call of the Chair or upon request of a majority of the members of the committee; and

2.4.1.2.5.

Minutes of each committee meeting shall be made available to the faculty in either written and/or electronic form. A file of minutes will be maintained by the Dean's office, on behalf of the committee.

2.4.2. Research Vision Committee (RVC)

2.4.2.1. Committee Philosophy on Research

2.4.2.1.1.

The RVC's philosophy is a shared governance approach to the sustainability, growth, and enhancement of research and well-being of faculty. This philosophy acknowledges the multidisciplinary nature of research and the value of input from many faculty. The RVC values the advancement of transformative research through collaboration and innovation leading to scientific impact and improved health of the people of Kentucky and beyond. The RVC is advisory to the Dean and is charged with recommending and reviewing polices, programs, and expenditures related to research. This committee will also assess metrics and tactics related to research, appropriate faculty effort, and support for research activities.

2.4.2.2. Charge

2.4.2.2.1.

Make recommendations on enabling and excelling support for impactful research focused on solving our most pressing health care problems in Kentucky and beyond;

2.4.2.2.2.

Make recommendations on research infrastructure to support exceptional programmatic research;

2.4.2.2.3.

Make recommendations on budget planning to support and enhance programmatic research;

2.4.2.2.4.

Address options to improve compliance in all research activities and financial conflict of interest;

2.4.2.2.5.

Make recommendations on research facilities management including space management regarding metrics, availability, maintenance and renovations, and equipment regarding large shared equipment purchases and maintenance contracts; and

2.4.2.2.6.

Make recommendations on research administrative services including webpage, weekly newsletter, limited submissions and internal grants, event facilitation, grant development, and R01 consultant review program.

2.4.2.3. Meetings

2.4.2.3.1.

The RVC meets regularly, generally monthly, and at other times, on the call of the Dean or the Dean's designated representative;

2.4.2.3.2.

Minutes of each committee meeting shall be made available to the faculty in either written and/or electronic form. A file of minutes will be maintained by the Dean's office, on behalf of the committee; and

2.4.2.3.3.

Greater than 50 percent of the voting members constitutes a quorum. The Chair votes only in the case of a tie vote.

2.4.2.4. Membership

2.4.2.4.1.

The Dean or the Dean's designated representative, which is the Vice Dean for Research, presides. All vice, senior associate, associate, and assistant deans for research will serve on the committee;

2.4.2.4.2.

Faculty representatives must include at least one Assistant, Associate and Professor ranks. Additional faculty at-large members can be added to meet this requirement;

2.4.2.4.3.

One (1) basic science department, one (1) clinical department, and one (1) center faculty representatives are appointed by the Dean. Nominations are made by department chairs and center directors, and each representative is appointed by the Dean;

2.4.2.4.4.

Includes one (1) faculty at-large basic science, one (1) faculty at-large clinical, and one (1) faculty at-large Center representative. Nominations are made following a call from Faculty Council and nominees are appointed by the Dean based on Faculty Council recommendation;

2.4.2.4.5.

Department faculty representatives and faculty at-large members serve staggered three-year terms, rotating onto the RVC each year on July 1; faculty

members may be reappointed to consecutive terms twice for a maximum period of continuous service of nine (9) years;

2.4.2.4.6.

The membership of the RVC must include one (1) Faculty Council member or the designee of the Faculty Council. If a Faculty Council member also serves on the RVC, that person may be designated as the Faculty Council's representative to the RVC and retains voting privileges on the RVC. However, if a Faculty Council member does not have membership on the RVC, or the Faculty Council does not designate a representative, then the RVC Chair serves as the Faculty Council's representative designee, as long as the RVC Chair is a College of Medicine faculty member; and

2.4.2.4.7.

The Dean, or the Vice or Senior Associate Dean for Research, has the authority to invite any individual to the meeting.

2.5. Councils and Committees on Service, Including Health Care (CR II 3.3.5.11.2.4.)

2.5.1. Practice Plan Committee (PPC)

2.5.1.1. Charge

2.5.1.1.1.

The committee identifies and endorses compensation and clinical productivity expectations for physician faculty members and other faculty clinical providers;

2.5.1.1.2.

The committee must meet periodically, typically monthly, and shall review the operation of the College of Medicine Practice Plan and the College Addendum, including matters relating to the applicability of the plan to sources of income, standard schedules of charges for services, and any other aspects of the operation of the plan. The committee:

- Makes recommendations to the Dean on the use and expenditure of all monies and funds deposited in the plan services account;
- Receives, along with the Dean, reports from the plan administrator on the financial status of the plan;
- Receives from the Dean, for review and comment, the proposed annual plan budget;
- Receives from the Dean, for review and recommendation, changes in criteria utilized in determining the percentage of net revenue to be allocated for supplemental compensation; and
- Receives proposed changes to department/division practice plans that have been submitted to the Dean by departments/divisions and recommends to the Dean modifications it deems appropriate;

2.5.1.1.3.

The committee makes recommendations as it may deem appropriate to the Dean, with respect to the modification of the policies and procedures provided by this plan or utilized in its operation. In the event that changes are deemed necessary by the Dean, then through the committee, the changes must be

brought before the college plan members by the Chair of the committee (<u>AR</u> 3:14); and

2.5.1.1.4.

Minutes of each committee meeting shall be made available to the faculty in either written and/or electronic form. A file of minutes will be maintained by the Dean's office, on behalf of the committee.

2.5.1.2. Membership, Chair, and Quorum

2.5.1.2.1.

The college opts to utilize the six (6) elected members of the Kentucky Medical Services Foundation, Inc. Board as the Practice Plan Committee. At the beginning of each academic year, the Dean shall request nominations from the voting members of the committee for a Chair. The Dean makes the final decision on appointment of a Chair, and of any other appropriate committee officers. A quorum for the conduct of committee business shall be greater than 50 percent of the voting members of the committee. The Chair votes only in the case of a tie vote; and

2.5.1.2.2.

The Faculty Council must either appoint one (1) of its own elected members, or a designee, to the PPC as an ex officio, nonvoting member. If a Faculty Council member also serves on the PPC, that person may be designated as the Faculty Council's representative to the PPC and retains voting privileges on the PPC. However, if a Faculty Council member does not have membership on the PPC, or the Faculty Council does not designate a representative, then the PPC Chair serves as the Faculty Council's representative designee, as long as the PPC Chair is a College of Medicine faculty member.

2.6. Councils and Committees on Faculty Personnel Matters (CR II 3.3.5.11.2.5.)

2.6.1. Faculty Form F/Overload Committee

2.6.1.1. Charge

2.6.1.1.1.

The Faculty Form F/Overload Committee reviews requests submitted to the Dean by College of Medicine faculty members to perform any work outside their usual assignments such as (a) professional or educational outside activities; (b) services on boards, committees, commissions, or the like; (c) speeches or lectures; or (d) oversight, supervision, or other participation with any entity or person involved with health or medical care outside their usual job description. The outside opportunity must be reviewed to determine whether a conflict of commitment or a conflict of interest exists, how much, if any, of the remuneration, fee, compensation, or honoraria must be included in the College of Medicine Practice Plan, and whether vacation leave or professional leave is appropriate.

2.6.1.1.2.

Any change to the charge of the committee or related to the Form F policy shall be reviewed by Faculty Council.

2.6.1.2. Membership

2.6.1.2.1.

The Faculty Form F/Overload Committee is composed of the Senior Associate Dean for Faculty Affairs and Development, who will chair the committee as a nonvoting member, one (1) faculty member appointed by the Dean, two (2) faculty members nominated by Faculty Council and appointed by the Dean, a representative from the Office of Legal Counsel, and a representative from the UK HealthCare Office of Corporate Compliance;

2.6.1.2.2.

The membership of the Faculty Form F/Overload Committee must include one (1) Faculty Council member or the designee of the Faculty Council. If a Faculty Council member also serves on the Faculty Form F/Overload Committee, that person may be designated as the Faculty Council's representative to the Faculty Form F/Overload Committee and retains voting privileges on the Faculty Form F/Overload Committee. However, if a Faculty Council member does not have membership on the Faculty Form F/Overload Committee, or the Faculty Council does not designate a representative, then the Faculty Form F/Overload Committee Chair serves as the Faculty Council's representative designee, as long as the Faculty Form F/Overload Committee Chair is a College of Medicine faculty member;

2.6.1.2.3.

Greater than 50 percent of the voting members constitutes a quorum. The Chair votes only in the case of a tie vote;

2.6.1.2.4.

The committee meets periodically, typically quarterly, and shall review the overload requests. (See CR 2.6.1.1.1.); and

2.6.1.2.5.

Minutes of each committee meeting shall be made available to the faculty in either written and/or electronic form. A file of minutes will be maintained by the Dean's office, on behalf of the committee.

2.6.1.3. Outside Consulting by College of Medicine Faculty

2.6.1.3.1.

Before a faculty member engages in outside consulting, the faculty member must submit a formal request via the Form F/Overload Form on myUK to the department chair for approval as required by <u>AR 3:9</u>. The proposal must specifically state the anticipated remuneration (if any) and time commitment for the activity, whether the activity involves research activity, details regarding the sponsor, and must attach any contracts for review;

2.6.1.3.2.

Outside consulting may not create a Conflict of Interest or a Conflict of Commitment in violation of <u>GR XIV</u>;

2.6.1.3.3.

External activities that are deemed professional development (in general, defined as items that would be used in support of retention, tenure, and/or promotion) per the Chair and Senior Associate Dean for Faculty Affairs and Development may occur using faculty professional development time, rather than use of vacation time;

2.6.1.3.4.

Faculty members may not cancel clinical or instructional activities, including but not limited to scheduled clinics or scheduled lectures, in order to participate in outside consulting;

2.6.1.3.5.

The University of Kentucky does not provide liability insurance coverage for faculty members performing outside consulting services; and

2.6.1.3.6.

Prior to commencing outside consulting services, faculty members must submit the consulting agreement to the University of Kentucky Office of Legal Counsel for review.

- Faculty members may not enter into consulting agreements that infringe upon the faculty member's or the University's intellectual property rights; and
- Faculty members may not enter into consulting agreements that limit their ability to publish or present publicly their research findings.

2.6.2. Faculty Appointment, Promotion, and Tenure (APT) Committee

2.6.2.1. Purpose

2.6.2.1.1.

To review the curriculum vitae and other required information in accordance with University regulations on proposed appointments, decisions not to reappoint, terminal reappointments, or nominations for promotions as submitted by department chairs, and propose recommendations to the Dean.

2.6.2.2. Membership

2.6.2.2.1.

The selection of individual members of the committee and composition is at the discretion of the Dean, who may consult the Faculty Council. Basic science and clinical faculty need to be represented. The average term is three (3) years.

2.6.2.2.2.

The Chair of the committee is selected by the committee and is a voting member. The Senior Associate Dean for Faculty Affairs and Development and the Associate Dean for Faculty Development are ex officio nonvoting members.

2.6.2.3. Frequency of Meetings

2.6.2.3.1.

The frequency of meetings is usually biweekly between September and January or as otherwise necessitated by the Provost APT calendar policies.

2.6.2.3.2.

Greater than 50 percent of the voting members constitutes a quorum.

2.6.2.3.3.

Minutes of each committee meeting are not kept. (See CRs 2.6.2.4.2. and 2.6.2.4.3.)

2.6.2.4. Procedures

2.6.2.4.1.

The Faculty APT Committee shall review and consider all documentation in the dossier, including:

- Documentation of productivity in all areas of the Distribution of Effort (DOE) including research, administration, service, instruction, scholarly productivity, and professional development; and
- Internal and external, independent evaluations solicited by the department chair for each candidate (or solicited by the candidate in initial appointment) in accordance with University Administrative Regulations;

2.6.2.4.2.

Provides for the Dean a narrative evaluation stating the basis for its actions in response to recommendations for appointments, decisions not to reappoint, terminal reappointments, tenure, and promotions;

2.6.2.4.3.

The committee shall submit its recommendations only to the Dean; and

2.6.2.4.4.

The committee, in accordance with University regulations and College of Medicine policy, is advisory to the Dean on appointments or promotions of faculty to the academic ranks of assistant professor, associate professor, professor, lecturer, senior lecturer, and on tenure, decisions not to reappoint, and terminal reappointments. With the Dean's concurrence, the Faculty APT Committee's judgment will form the basis of the recommendations submitted to the Provost for review by the appropriate University Academic Advisory Area Committee.

Article V: Ratifications and Amendments

1. Amendments to Articles I, II and V

1.1. Discussion

May be introduced for consideration and discussion as agenda items of a regular or special faculty meeting by the Faculty Council or by 10 percent of the voting faculty;

1.2. Notification

Must be circulated to all voting faculty at least seven (7) days before the meeting;

1.3. Voting

1.3.1

Must be voted upon by ballot not earlier than 10 days following introduction and discussion in a General Faculty meeting; and

1.3.2

Which represent substantive changes in the established *Rules*, require the approval of twothirds of the voting faculty who ballot.

2. Amendments to Article III

2.1. Must be endorsed by the college faculty and approved by the Dean.

- 3. Amendments to Article IV
 - 3.1. Must be determined by the Dean following consultation with the Faculty Council.