University of the Incarnate Word School of Osteopathic Medicine
Supplemental Faculty Handbook
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REVISIONS SINCE 1/3/2017– SUMMARY

Revised 8/2/2019 – Addition of UIWSOM Curriculum Committee description to Bylaws and title change for Associate Dean of Admissions to incorporate Student Affairs. Also added SOM Council to committee list (omitted). No vote needed.

Revised 2/11/2019 - Table of contents updated to reflect corrected page numbers and links - no vote needed.

Additional revision 2/19/2017 with vote for approval on 2/28/2017

Revised 1/29/2019 to include organization structure changes which affect committee appointments.

Revised 12/09/2018

Corrected 1/3/2017 when it was discovered that “Faculty Assembly” name and description had been inadvertently deleted during last minute work on the Self-Study, and the wrong document was submitted by RPM. No vote needed.
LETTER FROM THE DEAN

Dear SOM Faculty,

It is an honor to be working with you to educate future osteopathic physicians at the University of the Incarnate Word. Thank you for stepping out in faith and joining this worthwhile endeavor to increase access to compassionate health care in San Antonio, South Texas, and wherever our future graduates practice. We are privileged to follow the path created by the many heroic Sisters of Charity of the Incarnate Word, educators and health care professionals who have preceded us.

This SOM Faculty Handbook Supplement is written to address needed policies and procedures which are unique to the School of Osteopathic Medicine and its faculty. Because this is a developing school, this supplement will be reviewed and revised annually as more faculty are hired. Because shared governance is valued at UIW, your input is very important.

It is my deepest hope that as an esteemed contributor to the SOM learning community, you will find fulfillment in sharing the spirit and freedom exemplified by the mission of the Sisters, UIW, and SOM. Thank you for sharing your expertise, wisdom and service as we create this new socially accountable osteopathic medical school designed to educate physicians for the 21st Century, while respecting the legacy of the past and meeting student and community needs of the future.

Respectfully,

Robyn Phillips-Madson, DO, MPH, FACOFP
STATUS OF THE SUPPLEMENT

All faculty at the University of the Incarnate Word (UIW) are bound and protected by the UIW Faculty Handbook as approved by the UIW Board of Trustees. This supplement includes policies and procedures unique to the School of Osteopathic Medicine (SOM), but compatible with the Faculty Handbook.

All changes to the UIW Faculty Handbook must be forwarded to the provost for approval. The provost is responsible for posting the official edition on the provost website. These editions with any revisions are posted twice a year, in May and December. The provost oversees a comprehensive review of the Faculty Handbook every five years (2017, 2022, 2027, 2032, etc.)

Amendments to this supplement shall be presented in writing to each member of the faculty at least ten working days prior to a duly called SOM Leadership Council meeting at which such amendments shall be voted on. Amendments to the supplement shall require a two-thirds majority of the eligible voting members of the faculty to be adopted. The dean is responsible for maintaining the supplement and authorizing the comprehensive review of the SOM Faculty Handbook every year during pre-accreditation.

SOM Leadership Council recommendations shall become effective immediately upon approval of the dean and the provost. Any amendment(s) to this supplement shall be in accordance with the UIW Faculty Handbook.

The Employee Handbook on Blackboard – Organization – Human Resources includes the following for faculty information:

Chapter 5 - Benefits
Chapter 7 - Rules and Conduct
Chapter 8 - Life Threatening Illness Policy
Chapter 9 - Harassment-Free Work and Learning Environment Policy
Chapter 13 - Computer Policy
Chapter 14 - Intellectual Property
CHAPTER 1: INTRODUCTION

UNIVERSITY OF THE INCARNATE WORD MISSION STATEMENT

(Endorsed by the Board, 12/5/14; approved by the Congregation, 2/5/15)

The first Sisters of Charity of the Incarnate Word, three young French women motivated by the love of God and their recognition of God's presence in each person, came to San Antonio in 1869 to minister to the sick and the poor. Their spirit of Christian service is perpetuated in the University of the Incarnate Word primarily through teaching and scholarship, encompassing research and artistic expression. Inspired by Judeo-Christian values, the Catholic Intellectual Tradition, and Catholic Social Teaching,¹ the University of the Incarnate Word aims to educate men and women who will become concerned and enlightened citizens within the global community.

The University of the Incarnate Word is committed to educational excellence in a context of faith in Jesus Christ, the Incarnate Word of God. Thus, through a liberal education² the university cultivates the development of the whole person and values of life-long learning. To that end, faculty and students support each other in the search for and communication of truth, thoughtful innovation, care of the environment, community service, and social justice.³

The University of the Incarnate Word is a Catholic institution that welcomes to its community persons of diverse backgrounds, in the belief that their respectful interaction advances the discovery of truth, mutual understanding, self-realization, and the common good.

UNIVERSITY OF THE INCARNATE WORD SCHOOL OF OSTEOPATHIC MEDICINE MISSION STATEMENT

Preamble: The mission of the University of the Incarnate Word School of Osteopathic Medicine flows from the mission of the university and the founding call of the Sisters of Charity of the Incarnate Word to extend the healing ministry of Jesus Christ.

The SOM’s mission is to empower all members of the medical education community to achieve academic, professional and personal success and develop a commitment to lifelong learning. These goals require achieving excellence in learner–centered, patient-focused education, justice-based research, and meaningful partnerships of osteopathic clinical service across the spectrum of undergraduate, graduate and continuing medical education. The development and application of osteopathic principles of medicine across four years of physician training will promote culturally, linguistically, and community responsive care for all patients to enhance patient safety and improve patient outcomes.

PREAMBLE

The University of the Incarnate Word (UIW) School of Osteopathic Medicine (SOM) achieved candidate status (formerly pre-accreditation status) in September 2015, and pre-accreditation (formerly provisional accreditation) July 1, 2016. It has attracted a faculty with a wide range of teaching, research, and clinical care experience. The well-being of the SOM depends on utilization of faculty expertise through a free exchange of ideas between faculty and administration in an atmosphere of open communication and mutual understanding including civility, consideration and mutual respect; in effect, SOM supports the shared governance philosophy described in the UIW Faculty Handbook. To achieve this end, the Faculty Handbook and this SOM Supplement will guide faculty and administration.

In addition to the ethical standards expected of UIW faculty outlined in the UIW Faculty Handbook, the SOM has adopted the American Osteopathic Code of Conduct as required by the Commission on Osteopathic College Accreditation Standards. This code pertains to all SOM physician faculty. The AOA Code of Ethics is listed in the UIWSOM Bylaws, and accessible at: http://www.osteopathic.org/inside-aoa/about/leadership/Pages/aoa-code-of-ethics.aspx.
CHAPTER 2: STRUCTURE AND FUNCTION OF THE SCHOOL OF OSTEOPATHIC MEDICINE

General Administration

Dean

Reporting directly to the provost, the dean is the chief administrative officer responsible for all SOM faculty, staff, students and academic, administrative and clinical issues related to the mission of the SOM. In conjunction with the faculty of the SOM, the dean is responsible for maintaining consistency with the mission of UIW and the SOM, and for meeting accreditation standards. The role is further described in the dean’s job description.

Administrators

Those appointed to administer specific responsibilities delegated to them by the dean shall assist the dean. Such additional officers may include: (1) the associate dean of medical and interprofessional education, (2) associate dean of admissions and student affairs, (3) associate dean for graduate medical education, (4) associate dean for clinical affairs, (5) associate dean for UIW health services, (6) chair of clinical and applied science education, and (7) other program directors. Administrators are appointed by and serve at the discretion of the dean. The dean may delegate some aspects of the evaluation or supervision of these administrators, the faculty and staff to her/his designee. These roles are further described by the job descriptions for each administrative position.

Faculty

The primary function of the faculty at the SOM is to educate students in the Doctor of Osteopathic Medicine program. The faculty of the SOM shall have an opportunity to participate in the ongoing development, implementation and assessment of the curriculum, and regular review of student policies and faculty status. To achieve this goal, all SOM faculty may engage in a range of teaching, university and community service and scholarship activities.

A. Individuals with a 0.2 FTE and above faculty appointment are members of the SOM Faculty Assembly and are eligible to participate in committee work at the SOM.
B. If the majority of the assigned FTE is administrative, the individual does not have faculty voting rights.
C. Faculty who hold less than a 0.75 FTE are ineligible to participate in the University Faculty Senate or Faculty Senate standing committees.

Academic Departments

The faculty of SOM may be organized into academic departments, which may be created to meet future needs of the school and its programs. Any such departments shall be formed and governed in accordance with this supplement. The organization or creation of academic departments is determined by the dean in consultation with the president, provost, faculty and other administrators.

UIWSOM departments include:

- Clinical and Applied Science Education
- Clinical Affairs
- Department of Translational Medicine
The UIWSOM Bylaws contained in Chapter 3, list the standing committees and administrative councils, their authority and responsibility, function, composition, and general provisions. In addition, the AOA Code of Ethics is presented.
CHAPTER 3: UNIVERSITY OF THE INCARNATE WORD SCHOOL OF
OSTEOPATHIC MEDICINE COUNCIL BYLAWS

ARTICLE I: PURPOSE

The purpose of the Bylaws of the University of the Incarnate Word- School of Osteopathic Medicine (UIWSOM) is to provide policies and operating procedures within the policies of the University of the Incarnate Word, while recognizing the uniqueness of the UIWSOM. These policies and procedures provide processes while ensuring a forum for faculty, staff and administrative participation in the leadership of the UIWSOM.

The employees of the UIWSOM fully acknowledge that authority for operation of the University is vested in the President by the policies approved and enacted by the Board of Trustees. The UIWSOM agrees that there will be alignment with shared governance policies described in the UIW Bylaws, UIW Faculty Handbook, and UIW Administrative Guidelines as the UIWSOM is developed.

The goals of these Bylaws and shared governance are the maintenance of respect and communication among faculty, staff and administration in order that the University and UIWSOM function smoothly. The faculty, staff and administration commit to working together to foster collegiality among all members of the UIWSOM learning community, and create a robust, innovative, supportive, and positive educational environment.

ARTICLE II: VISION, MISSION AND VALUES

UIWSOM Vision

Inculcate a culture of service to the community, the osteopathic profession, and the health and well-being of all.

UIWSOM Mission Statement

Preamble: The mission of the University of the Incarnate Word School of Osteopathic Medicine flows from the university mission and the founding call of the Sisters of Charity of the Incarnate Word to extend the healing ministry of Jesus Christ.

UIWSOM’s mission is to empower all members of the medical education community to achieve academic, professional and personal success and develop a commitment to lifelong learning through excellence in learner–centered, patient-focused education, justice-based research and meaningful partnerships of osteopathic clinical service across the spectrum of undergraduate, graduate and continuing medical education. The development and application of osteopathic principles of medicine across four years of physician training will promote culturally, linguistically, and community responsive care for all patients to enhance patient safety and improve patient outcomes.

Core Values of the UIWSOM Mission

- Leadership
- Transformative Education with Integration of Osteopathic Principles and Practice
- Social Accountability
- Person- and Community-Centered Care
ARTICLE III: THE UIWSOM DEAN

Powers and Responsibility:

The dean is the senior administrative officer of the University of the Incarnate Word School of Osteopathic Medicine. The dean reports to the provost of the University.

The dean works full-time for the UIWSOM and will not engage in other gainful employment outside of the institution.

The dean is AOA board certified.

The dean is the Chief Academic Officer of the UIWSOM.

The dean is responsible for and has the authority for fiscal management of the UIWSOM and ensuring compliance with COCA Standards.

The dean chairs the UIWSOM Council, which convenes at least once a year or as major issues warrant; chairs the Leadership Council and serves as an ex-officio member of all other standing committees of the UIWSOM Council.

The dean is responsible for the review, analysis, and implementation of existing educational, research, and administrative programs of the School of Osteopathic Medicine.

The dean shall appoint or approve members of all School of Osteopathic Medicine committees. The dean shall nominate to the provost of the University all chairs of the departments after considering advice from appropriate search committees.

The dean shall appoint all vice, associate and assistant deans, with the approval of the provost, after considering advice from appropriate search committees.

The dean shall approve, in advance of their submission, all applications for grant monies for the support of teaching, training, and research sponsored by the School of Osteopathic Medicine.
ARTICLE IV: COMMITTEES

General Provisions of the Standing Committees:

The following general conditions shall apply to all standing committees except where otherwise specified in these Bylaws.

a) Rights and Responsibilities: Standing committees have the responsibility for recommending policy to the Leadership Council in their areas of concern; for receiving instructions from this Council; for establishing procedures for the conduct of committee business consistent with these Bylaws; and for implementing such policies and instructions. The establishment of new standing committees or abolition of existing standing committees requires amendment to these Bylaws.

Each standing committee will:

i. Specifically define its policies, procedures, objectives and scope of activity and transmit same annually in writing to the Faculty Assembly and Leadership Council for their approval; and

ii. File an annual report on the work of the standing committee with the dean. These reports will be kept on file by the Dean's Office and shall be made readily available to members of the faculty, administration and staff.

b) Membership: Each standing committee shall have representation from various constituents of UIWSOM, and may, where appropriate, include faculty and administrators from other schools of the university, as well as representative(s) from the community where appropriate.

c) Voting Privileges: Each member of each committee shall have one vote and must be present, either in person or by contemporaneous electronic participation, to cast that vote, unless otherwise specified.

d) Conduct: The chair shall preside at meetings of each committee or, if absent, the chair may delegate this responsibility to another member of the committee. Each committee may establish subcommittees as needed. The meetings of standing committees shall be open, except those where confidential or sensitive matters are being discussed, or when designated as executive sessions by majority vote of the members present. Absence from three consecutive meetings of the committee may constitute grounds for removal of a member from a committee.
Faculty Appointments, Promotions and Retention Committee

Function:

The Appointments, Promotions and Retention Committee reviews new appointments at the Associate Professor level and above. This committee likewise reviews all recommendations for promotion to the Associate Professor level and above. These recommendations are submitted to the dean. The dean then forwards his/her recommendation to the provost.

Admissions Committee

Function:

The Admissions Committee is responsible for making recommendations to the dean regarding acceptance or rejection of candidates for the UIWSOM. The Admissions Committee, in collaboration with the dean, establishes the criteria and threshold for acceptance to the UIWSOM. The Admissions Committee examines and evaluates each applicant’s credentials and determines the progression of each applicant through the admissions process. The Admissions Committee annually reviews and evaluates its processes and procedures and makes recommendations to the dean with respect to the overall admissions process and the criteria used to make decisions about applicants.

SOM Leadership Council

Function:

The SOM Leadership Council shall provide the dean with informed and representative faculty, office and departmental opinion. The SOM Leadership Council will provide informed counsel in the areas of administrative and operational policies that directly impact medical student education. Reports from appropriate committees will be referred to the SOM Leadership Council for discussion and final recommendations will be forwarded to the dean. SOM Leadership Council shall also entertain questions/issues related to constitutional interpretation and make recommendations to the dean.

Powers and Responsibility:

The SOM Leadership Council as a standing committee, is responsible for its powers, but shall act as an autonomous body in execution of its major functions, which are to serve as a policy-formulating body and to instruct and assist the dean in the implementation of policy decisions. In addition, the SOM Leadership Council shall assist and counsel the dean in her/his duties and responsibilities.

The SOM Leadership Council shall also:

a) Consider and act upon all matters pertaining to educational affairs that involve or determine School of Osteopathic Medicine policy;
b) In concert with the dean, prepare the agenda for regular and special meetings of the UIWSOM Council;
c) Except for volunteer faculty adjunct appointments, consider and make recommendations to the dean for initial faculty appointments to the rank of instructor and above;
d) Discuss all recommendations and reports referred to it by standing committees of the School of Osteopathic Medicine, and to respond as indicated;
e) Discuss and act upon, as indicated, all recommendations and reports submitted to it for a vote by ad hoc and other committees, by special panels and subcommittees, and by search committees. Such recommendations shall come before the SOM Leadership Council as seconded motions;
f) Perform other functions as indicated elsewhere in these bylaws.

  
g) The dean serves as the final authority in decision-making for the SOM Leadership Council, and, as such reserves the right to review and implement/not implement any/all recommendations from the faculty and administration.

**Composition:**

The SOM Leadership Council shall be composed of the dean; all assistant and associate deans; the faculty representative to the UIW Faculty Senate; two (2) medical students (one from the pre-clerkship years and one from the clerkship years); and one resident member. Student and resident representatives shall serve for one year. The dean of the School of Osteopathic Medicine shall chair the SOM Leadership Council. In the absence of the dean, the person designated by the dean shall serve as chair.

**Meetings:**

The SOM Leadership Council shall meet regularly at no less than monthly intervals, September through June (excluding holidays), and at such other times as determined by the dean.

Attendance at meetings of the SOM Leadership Council shall be restricted to its members, recorder (appointed by the dean), and such other persons invited by the dean for specific purposes.

Student and resident representatives, faculty representative, and assistant and associate deans, as well as the dean shall be voting members of the SOM Leadership Council. When a voting member cannot attend, a substitute designated by the member and approved by the dean shall have voting privileges. In the absence of the dean, the person designated by the dean shall serve as chair and shall have voting privileges. Quorum for action shall be a majority of the voting membership.

The SOM Leadership Council shall act in closed session of the voting members when requested by the dean or by majority vote of its members in attendance or by specified requirement of these bylaws.

SOM Leadership Council meeting minutes shall be recorded by the recorder and shall be distributed in writing electronically to its members. Minutes of open meetings will be made available for the UIWSOM learning community.

Matters requiring a vote shall be presented to the SOM Leadership Council as motions with appropriate seconds. A majority vote by voice or by hand is required to pass a motion, except as otherwise specified by these bylaws. Any voting member may demand a closed, written ballot.

An agenda shall be prepared by the dean and distributed electronically to the SOM Leadership Council members in advance of all regular monthly meetings.
Curriculum Committees

The UIWSOM currently offers two programs: The Doctor of Osteopathic Medicine and Master’s in Biomedical Sciences. A Master’s in Public Health program is also under development. In anticipation of these additional programs, a curriculum oversight committee (UIWSOM Curriculum Committee) has been established, and each program will have its own curriculum. Below are bylaws for the Committee (DOCC).

SOM Curriculum Committee (SOMCC)

The SOM Curriculum Committee governs all curricula that reside in the School of Osteopathic Medicine. This committee is an oversight committee that ensures UIWSOM achieves the school’s overall education program objectives, aligns with University requirements for graduate programs and meets required accreditation standards specific to each program. Each degree or program has its own curriculum committee that has representation on the SOMCC. The SOMCC meets a minimum of twice annually or as needed.

Membership:
Associate Dean for Medical and Interprofessional Education (Chair)
Director of MBS
Director of MPH
Associate Dean Clinical Affairs
Chair CASE and/or Phase I Director
Associate Dean of Admissions and Student Affairs
UIWSOM Faculty who is UIW Graduate Council Representative

DO Curriculum Committee

The DO Curriculum Committee is the decision-making authority for the UIWSOM undergraduate medical student curriculum. The charge of the DOCC is the design, oversight and maintenance of the undergraduate medical student curriculum. This is achieved through the DOCC’s ongoing review, appraisal and revision of the UIWSOM competencies, goals and objectives. The DOCC also ensures that the competencies, goals and objectives are achieved by all learners. The DOCC provides decision-making and leadership in all matters of curriculum and coordinates with departments, teaching committees, students and faculty members etc. in the design, development, and evaluation of a contemporary and effective undergraduate medical student curriculum.

The DOCC will continuously review the effectiveness of the curriculum and explore innovative medical education concepts, techniques and scholarship in order to optimize the education of UIWSOM medical students for purposes of better serving communities and improving patient and community outcomes.
Authority and Responsibility:

The DOCC holds authority and responsibility for creating, overseeing and managing the undergraduate medical education program, and ensuring compliance with all COCA accreditation standards. This authority is derived from the dean and through these Bylaws. The DOCC, with its various subcommittees:

a) Defines the learning objectives, outcomes and competencies for the osteopathic medical student education program;
b) Determines curricular content and workload, the order content is presented, and the goals and competencies addressed by each curricular component;
c) Determines the types of patients, conditions, settings for educational experiences and the level of medical student responsibility;
d) Determines pedagogy and methods of teaching and assessment appropriate for each curricular component, including community and clinical learning, service learning, scholarly activities, interprofessional education, etc.
e) Identifies, develops, implements and evaluates innovative teaching methods across the curriculum;
f) Ensures that methods of curriculum delivery optimize opportunities for instructor collaboration, attainment of competencies and the integration of content and concepts across disciplines;
g) Reviews all feedback and recommendations, and utilizes information to improve the curriculum;
h) Creates educational policies that advance the curriculum and meet COCA and compliance standards; and sends all policies to the SOM Leadership Council for approval;
i) Reviews, revises if needed, and approves roles and responsibilities for curriculum directors, community and clinical preceptors and all other teaching faculty;
j) Sets expectations for and ensures adequate curricular opportunities and experiences for professional training, growth and development for medical students within the medical education program;
k) Ensures consistent implementation of a coordinated and coherent curriculum;
l) Submits the DO curriculum in a timely manner to the UIWSOM Curriculum Committee, the dean, and then the UIW Graduate Curriculum Committee for its approval per UIW policy.

Composition

a) Chair: The associate dean for medical and interprofessional education chairs the DOCC. The chair may appoint a co-chair.
b) Chairs of subcommittees (and may be included in c) and d) of this section)
c) 2-3 Clinical and Applied Science Education faculty selected and appointed by the dean and the Curriculum Committee Chair.
d) 2 Primary care clinical teaching faculty selected and appointed by the dean and Curriculum Committee chair.
e) 1-2 Community primary care physicians
f) Osteopathic medical students (1-2/class)
g) 1-2 GME representatives (residents, fellows, Program Directors)
Faculty Assembly

The Faculty Assembly is composed of all SOM faculty. SOM faculty are individuals who carry a teaching workload of 0.2 FTE and above, teach or supervise students for academic credit, and meet the academic qualifications as designated by their rank as described in this supplemental handbook. The Faculty Assembly is chaired by an elected representative of the faculty. The chairperson shall serve as the elected faculty representative to the UIW Faculty Senate and SOM Leadership Council.

The Faculty Assembly will meet twice annually (or as necessary) to elect its representative and discuss issues pertinent to all SOM faculty.

Resources Committee

Function:
The mission of the Resources Committee is to advise the dean on recommended resource allocation and needed improvements based on annual surveys of UIWSOM students and employees regarding the learning environment of the Brooks campus. Resource surveys will evaluate facilities, space allocation, IT, library, support staff adequacy, security and safety.

Composition: (need to consider additional members for security/safety reps)
Chair: Director of Accreditation and Planning
Members:
1 Member of Facilities Staff
1 Member of IT Staff
1 Member of Administrative Assistant Staff
1 CASE Faculty Member
1 Phase II Faculty Member
1 OMS I Student
1 OMS II Student
1 OMS III or IV Student
1 Member of Library Staff

Duties:
To meet a minimum of twice a year and review surveys of resources, prioritize needs, and advise the dean of its findings

Scholarly Activity and Applied Research Committee (SAARC)

Function:
The mission of SAARC is to advise the dean as requested concerning research policies and the allocation of research resources. SAARC will be comprised as follows:

Composition:
Appointed
Members:
1-2 Non-Clinical Faculty
1-2 Clinical Faculty
1 Faculty Representative from the Office of Graduate Medical Education
2 Student Representatives (1 from each phase)
Ex-Officio Members:
    Director of Public Health
    Associate Dean for Graduate Medical Education
    Director, Department of Translational Medicine
    Director of Assessment, Office of Medical and Interprofessional Education.

Duties and Responsibilities of the SAARC are as follows:

1. To advise the dean, through the SOM Leadership Council, on the implementation of administrative programs and policies instituted for the support of research.
2. To receive and disseminate information from the dean's Office on issues that impact research.
3. To serve as a forum for the discussion of improvement and expansion of research activity.
4. To communicate needs or problems related to research and the research environment to the Dean's Office.
5. To make recommendations for the coordination of programs to enhance research and the research environment.
6. To make recommendations for the coordination of activities with other committees involved with research.
7. To promote the dissemination of information regarding research at UIWSOM.
8. To promote collaborative research.

Scholarship and Awards Committee

Function:
The Scholarship and Awards Committee is established to recognize and honor current students, faculty, staff and community members who have distinguished themselves from their peers by their extraordinary, exemplary and sustained scholarship in areas such as academic, clinical, community service, discovery, application or teaching. The Committee is charged with soliciting nominations, gathering and identifying exemplary candidates to receive the award and submitting recommendations of candidates to the UIWSOM dean.

Duties and Responsibility:
1. To recommend policies and procedures to be followed by the UIWSOM in the interpretation, implementation, and operation of all Federal, State and other financial aid scholarships and awards.
2. To serve as collaborative consultants to the UIW Office of Institutional Advancement in identifying areas of need for scholarships while also maintaining accessible records of scholarship recipients.
3. To establish written criteria for each award or scholarship with recommendations accepted by contributing donors (if any) in collaboration with the dean.
4. To examine, discuss and evaluate nominations for both student and faculty awards in a timely manner.
5. To include student leaders to serve as consultants for faculty, staff or community leader awards.

Conflicts of Interest:
Committee members are not eligible to vote on a candidate if any conflicts of interest exist that includes but is not limited to:
    Being a mentor or advisor of the student nominee;
    Submitting a letter of recommendation on the candidate’s behalf;
    The committee member is an award candidate
Composition:

Chair: The Associate Dean of Admissions and Student Affairs or designee will chair the committee. This is a standing position unless otherwise noted by the dean. The chair will not have voting privileges but will assist the committee in making selections of scholarships and awards for the UIWSOM or resolve disputes/questions between or among the committee members.

Members:
One to Two UIWSOM Nonclinical faculty
One to Two UIWSOM Clinical faculty
One Non-faculty Staff member
Student member (when awards not involving students)

Ex-Officio Members without vote:
UIWSOM Director of Enrollment
Associate Dean of Admissions and Student Affairs

Student Progress Committee

Function:
The Student Progress Committee reviews the academic and professional development of all students enrolled in the medical student curriculum. Based on its review, the Student Progress Committee makes recommendations to the associate dean for medical and interprofessional education (ADMIE). These include, but are not limited to, promotion, dismissal, repetition of course work, and/or other special action(s) for individual medical students that must be successfully completed before that student matriculates to the subsequent Phase in the medical student curriculum and/or is able to graduate from the UIWSOM.

The Student Progress Committee makes recommendations to the ADMIE with respect to grading, evaluation, policies and procedures for promotion and other areas that relate to the academic and professional progress of students. The Student Progress Committee is charged with reviewing, hearing (if necessary) violations of student academic and professional conduct and recommending sanctions to the ADMIE. The ADMIE has the authority to approve, disapprove, and/or modify any recommendations from the Student Progress Committee. Decisions made by the ADMIE are forwarded to the dean of the School of Osteopathic Medicine for final approval.

Composition:
3 to 5 UIWSOM DO program faculty, including a minimum of two physicians
1 Representative from the Office of GME
1 Community member, if possible
Associate Dean of Medical and Interprofessional Education (ex officio, non-voting)
Associate Dean of Clinical Affairs (ex officio, non-voting)
Policy and Procedure Committee

Function:
The Policies and Procedures Committee is charged with the following:
1. Document all non-academic-related policies and procedures of UIWSOM when new structures or functions arise.
2. Review existing policies and procedures and update them annually to reflect current structures and functions as they may change.
3. Review, analyze and revise policies and procedures, and obtain direction from UIW as appropriate to ensure conformity with existing policies of UIW and UIWSOM.
4. Ensure that administrative processes are in place to retain and archive existing policies and procedures in an organized manner and for easy access when needed.

Composition:
Associate Dean of UIWSOM Health Services or designee
Director of Accreditation and Planning
2 Faculty Student Affairs designee
Admissions designee Administrative assistant designee
Student representatives (one from years 1 and 2; one from years 3 and 4)

UIWSOM Council

Function:
This Council acts as a “committee on committees,” providing guidance to the standing committees, and ensuring greater operational efficiency and continuity which will better serve the interests and needs of the UIWSOM learning community. The UIWSOM Council meets at least annually to review annual committee reports, review each committee’s composition, policies and charge, and add and delete committees. The Council is chaired by the dean.

Composition:
Dean
Chair of Clinical and Applied Science Education (or faculty designee)
SGA President or executive committee officer
Associate Dean of Clinical Affairs Associate
Dean of Admissions & Student Affairs
ARTICLE V: ADDITIONAL POLICIES

Confidentiality and Conflict of Interest Statements

All UIWSOM professional and non-professional full-time employees and all credentialed instructional staff must sign a Confidentiality and Conflict of Interest Disclosure statement annually.

UIWSOM Adoption of the AOA Code of Ethics

UIWSOM has adopted the AOA Code of Ethics in addition to the ethical standards which govern the faculty and employees of UIW.

The American Osteopathic Association (AOA) Code of Ethics is a document that applies to all physicians who practice osteopathically throughout the continuum of their careers, from enrollment in osteopathic medical college/school through post graduate training and the practice of osteopathic medicine. It embodies principles that serve as a guide to the prudent physician. It seeks to transcend the economic, political, and religious biases, when dealing with patients, fellow physicians, and society. It is flexible in nature in order to permit the AOA to consider all circumstances, both anticipated and unanticipated. The physician/patient relationship and the professionalism of the physician are the basis for this document.

The AOA has formulated this Code to guide its member physicians in their professional lives. The standards presented are designed to address the osteopathic and allopathic physician’s ethical and professional responsibilities to patients, to society, to the AOA, to others involved in health care and to self.

Further, the AOA has adopted the position that physicians should play a major role in the development and instruction of medical ethics.

Section 1. The physician shall keep in confidence whatever she/he may learn about a patient in the discharge of professional duties. Information shall be divulged by the physician when required by law or when authorized by the patient.

Section 2. The physician shall give a candid account of the patient’s condition to the patient or to those responsible for the patient’s care.

Section 3. A physician-patient relationship must be founded on mutual trust, cooperation, and respect. The patient, therefore, must have complete freedom to choose her/his physician. The physician must have complete freedom to choose patients whom she/he will serve. However, the physician should not refuse to accept patients for reasons of discrimination, including, but not limited to, the patient’s race, creed, color, sex, national origin, sexual orientation, gender identity, or disability. In emergencies, a physician should make her/his services available. View further interpretation.

Section 4. A physician is never justified in abandoning a patient. The physician shall give due notice to a patient or to those responsible for the patient’s care when she/he withdraws from the case so that another physician may be engaged.

Section 5. A physician should make a reasonable effort to partner with patients to promote their health and shall practice in accordance with the body of systematized and scientific knowledge related to the healing arts. A physician shall maintain competence in such systematized and scientific knowledge through study and clinical applications.

Section 6. The osteopathic medical profession has an obligation to society to maintain its high standards and, therefore, to continuously regulate itself. A substantial part of such regulation is due to the efforts and influence of the recognized local, state and national associations representing the osteopathic medical profession. A physician should maintain membership in and actively support such associations and abide by
their rules and regulations

Section 7. Under the law a physician may advertise, but no physician shall advertise or solicit patients directly or indirectly through the use of matters or activities which are false or misleading.

Section 8. A physician shall not hold forth or indicate possession of any degree recognized as the basis for licensure to practice the healing arts unless she/he is actually licensed on the basis of that degree in the state or other jurisdiction in which she/he practices. A physician shall designate her/his osteopathic or allopathic credentials in all professional uses of her/his name. Indications of specialty practice, membership in professional societies, and related matters shall be governed by rules promulgated by the American Osteopathic Association.

Section 9. A physician should not hesitate to seek consultation whenever she/he believes it is in the best interest of the patient.

Section 10. In any dispute between or among physicians involving ethical or organizational matters, the matter in controversy should first be referred to the appropriate arbitrating bodies of the profession.

Section 11. In any dispute between or among physicians regarding the diagnosis and treatment of a patient, the attending physician has the responsibility for final decisions, consistent with any applicable hospital rules or regulations.

Section 12. Any fee charged by a physician shall compensate the physician for services actually rendered. There shall be no division of professional fees for referrals of patients.

Section 13. A physician shall respect the law. When necessary a physician shall attempt to help to formulate the law by all proper means in order to improve patient care and public health.

Section 14. In addition to adhering to the foregoing ethical standards, a physician shall recognize a responsibility to participate in community activities and services.

Section 15. It is considered sexual misconduct for a physician to have sexual contact with any patient with whom a physician-patient relationship currently exists.

Section 16. Sexual harassment by a physician is considered unethical. Sexual harassment is defined as physical or verbal intimation of a sexual nature involving a colleague or subordinate in the workplace or academic setting, when such conduct creates an unreasonable, intimidating, hostile or offensive workplace or academic setting.

Section 17. From time to time, industry may provide some AOA members with gifts as an inducement to use their products or services. Members who use these products and services as a result of these gifts, rather than simply for the betterment of their patients and the improvement of the care rendered in their practices, shall be considered to have acted in an unethical manner.

SECTION 18. A physician shall not intentionally misrepresent himself/herself or his/her research work in any way.

SECTION 19. When participating in research, a physician shall follow the current laws, regulations and standards of the United States or, if the research is conducted outside the United States, the laws, regulations and standards applicable to research in the nation where the research is conducted. This standard shall apply for physician involvement in research at any level and degree of responsibility, including, but not limited to, research, design, funding, participation either as examining and/or treating provider, supervision of other staff in their research, analysis of data and publication of results in any form for any purpose.
CHAPTER 4: POLICIES AND PROCEDURES GOVERNING FACULTY EMPLOYMENT

Academic Rank and Promotion

Faculty Recruitment, Search, Hiring and Credentialing

The SOM faculty search and hiring policies and procedures follow those outlined in the UIW Faculty Handbook. All employed faculty undergo comprehensive credentialing as outlined in the UIW Faculty and Employee Handbooks. This includes but is not limited to a criminal background check, primary licensure verification, and verification of education. Transcripts are held in the Office of the Provost. Licensure and certification verification are kept in the Office of the SOM dean. All faculty on contract or hold adjunct status, including Phase II personnel, will undergo a modified credentialing process, including but not limited to completion of a contract or adjunct faculty application, confidentiality statement, photo/video release, sexual harassment acknowledgement.

Faculty Rank and Promotion

The faculty of SOM are not eligible for tenure at UIW. The dean in consultation with the department to which the faculty is being hired, determines the faculty rank at the assistant professor level or below. The SOM Faculty Appointments, Promotions and Retention Committee reviews new appointments at the associate professor level and above. This committee likewise reviews all recommendations for promotion at the assistant professor level and above. These recommendations are submitted to the dean for final approval. These recommendations are then passed along to the provost for approval per UIW policy.
CHAPTER 5: POLICY AND PROCEDURES RELATED TO INSTRUCTION

Preparing the Course Syllabus and Outline

In order to meet the requirements of the accrediting body for SOM, the Commission on Osteopathic College Accreditation, the SOM will use the SOM Syllabus and Course Outline for all courses created for medical education as found in the appendix (appendices). This template shall include required elements from the University’s accrediting body, the Southern Association of Colleges and Schools Commission on Colleges, University policy, and the Graduate Council.
CHAPTER 6: SCHOOL OF OSTEOPATHIC MEDICINE ADJUNCT CLINICAL FACULTY

Appointment of SOM Adjunct Clinical Faculty

Adjunct Clinical Faculty (ACF) are those who teach and contribute to the education of SOM students and regional medical residents or who participate in graduate or research programs associated with SOM.

ACF participation in SOM clinical, academic teaching and research programs is without compensation unless ACF moves to a part-time or full-time position at UIW (non-volunteer). Because ACF are not employees of SOM they are not eligible for employee benefits. They are classified by UIW as volunteer faculty who contribute to the instruction of students but do not enter grades into Banner. ACF do not have the responsibility of committee assignment except if they volunteer to do so and hold no voting privileges on the Faculty Assembly.

ACF may include health professionals such as physicians, pharmacists, nurse practitioners, physician assistants, and healthcare leadership who hold a master’s degree or above.

Credentialing (See Appendix 2)

A. Credentialing and approval is performed by the SOM Credentialing Committee. ACF must:
   1. Be credentialed and maintain appropriate board certification and state license to provide her/his designated scope of care,
   2. Hold appropriate hospital or practice privileges,
   3. Hold an unrestricted license to practice in the state where clinical training occurs.

B. SOM will accept the credentialing process as described in Appendix 2 with review of ACF every two (2) years and reappointment every four (4) years.

Rank

To qualify for appointment or reappointment, an ACF must demonstrate competence and growth in teaching, scholarship and service to the SOM, profession, and community. Institutional fit as described in the Faculty Handbook is also considered in these decisions.

A. **Adjunct Clinical Instructor**
   1. The instructor position normally holds a minimum of a master’s degree or the equivalent, unless this represents a terminal degree in the health professions;
   2. Has completed most or all of the requirements for the doctorate or the equivalent and is expected to demonstrate effectiveness primarily as a teacher.
      a. Residents in positions of advanced training are usually included in this category;
      b. Physician assistants and nurse practitioners are usually included in this category.

B. **Adjunct Clinical Assistant Professor**
   1. The assistant professor rank requires a doctoral or professional degree or the equivalent, commitment to teaching, scholarly activity, or professional work of high caliber. Evidence may include:
      a. Willingness to participate voluntarily in the education of first through fourth-year students and/or residents;
b. Participation in faculty development courses designed to improve teaching skills and evaluate performance;
c. Has received above average teaching evaluations;
d. Has served as ACF for medical students or residents with 1-3 or more students/residents per year for a 1-3 year period.

C. **Adjunct Clinical Associate Professor**
   1. Candidates for the rank of associate professor require a professional degree and three or more years of experience at the adjunct clinical assistant professor level.
   2. Appointment or promotion to the rank of associate professor requires sustained performance at a level above the minimal standards established for adjunct clinical assistant professor. Evidence of this may include:
      a. Meeting requirements for adjunct clinical assistant professor;
      b. Publication of original scholarly work in peer-reviewed professional journals;
      c. Presentation of research/scholarly activity at local, state, or national meetings;
      d. Participation at the local and regional level in professional society affairs;
      e. Professional specialty board certification;
      f. Presentation at local and regional Continuing Medical Education (CME) programs;
      g. Record of service to SOM or other programs, e.g., demonstrates sustained community service;
      h. Served as ACF for medical students or residents with four or more students/residents per year for a 4-5-year period;
      i. Has received above average teaching evaluations;
      j. Continued participation in faculty development courses;
      k. Mentors students, and or advises student organizations.

D. **Adjunct Clinical Professor**
   1. Candidates for the rank of professor have a professional degree plus a minimum of five years of experience at the adjunct clinical associate professor level.
   2. Appointment or promotion to the rank of professor requires sustained performance at a level above the minimal standards established for adjunct clinical associate professor.
   3. Appointment or promotion to the rank of professor also requires sustained academic accomplishment, meritorious scholarly activity, and service, some of which must be at the state or national level. Evidence may include:
      a. Meeting requirements for adjunct clinical associate professor;
      b. Publication of scholarly works which have made a significant impact in college or school-related professions;
      c. Regular publication of original scholarly work in peer-reviewed professional journals;
      d. Participation at the state or national level in professional society affairs;
      e. Participation at the state or national level in research peer-review process;
      f. Participation at the state or national level in the formulation and administration of governmental health care policy;
g. Presentations at local, state, or national society meetings;
h. A letter(s) of support from one or more outside colleagues attesting to the significance of the scholarly participation at the state or national level in professional association policy formulation or institutional review processes;
i. Participation as an invited speaker at national or international symposia, and/or professional contributions made by the candidate;
j. Sustained service to medical students and residents;
k. Evidence of state, national or international recognition as an excellent clinician or teacher;
l. Receipt of above average teaching evaluations;
m. Continued participation in faculty development courses;
n. Service as an ACF for medical students or residents with four or more students/residents per year for at least ten years.

E. Adjunct Clinical Faculty in Additional Experiential Education Areas

Experts in related health professions fields may volunteer as “Adjunct Clinical Faculty-Research.” Depending on qualifications, their title may range from Assistant Professor to Professor of Research.
CHAPTER 7: FACULTY DEVELOPMENT

Faculty Continuing Education

An important part of osteopathic medical education is that faculty keep current in their fields of expertise. This requires meeting with other professionals beyond the university community to gain insight into innovative research and technological developments within the medical profession.

All SOM faculty will be provided professional development funds as follows:

A. Full-time physician (DO/MD) faculty receive $5000/year for licensure, dues, board certification, continuing medical education requirements, etc.
B. Non-physician faculty receive $2000/year for licensure, dues, continuing education, etc.
C. Those faculty employed at 0.5 to 0.9 FTE will receive the appropriate prorated amount for which they qualify.
D. Appropriate documentation, required absence requests, requests for funds, and completed documentation for the trip must be submitted prior to the trip, and all receipts must be submitted in a timely fashion after the event for reimbursement.
E. In addition, the faculty is expected to share pertinent and important information with faculty who did not attend the event in a brown bag lunch session or other informal setting.
APPENDIX 1: UIWSOM SYLLABUS TEMPLATE
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1. Contact Information

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1. UIWSOM Institutional Core Competencies

The UIWSOM curriculum is competency-based in accordance with accreditation requirements. For a comprehensive list of the UIWSOM Institutional Core Competencies, see pp. XXX of the Student Catalog. <http://www.uiwsom link to student catalog>

2. Course Purpose/Goals

3. Course Description/Overview

4. Course Learning Objectives

5. Course Format

6. Course Logistics

7. Student Roles and Responsibilities

a. Professionalism

Professional behavior is expected at all times during this course. It is important that students learn to discuss topics of a sensitive nature in a caring and professional manner. Use of cell phones or texting during class is prohibited. For further clarification of student professionalism expectations, see p. 35 of the Student Handbook.  https://osteopathic-medicine.uiw.edu/ docs/uiwsom-2017-2018-student-handbook.pdf
b. **Honor Code Reminder**
The highest standards of academic honesty are required of all UIWSOM students at all times. It is expected that no UIWSOM student will be dishonest in any way, or give the impression of dishonest behavior, nor will UIWSOM students tolerate dishonesty in others.

c. **Academic Support Policy**
Students with an overall course grade percentage below 75.0% are eligible for peer tutorial assistance. For further information, contact the Director of Learning Resources in the Office of Student Affairs.

d. **Sexual Harassment Policy**
UIWSOM has a zero-tolerance policy for sexual harassment. Refer to p. 37 of the Student Handbook for a copy of the UIWSOM sexual harassment policy.

https://osteopathic-medicine.uiw.edu/current-students/index.html

e. **Disability Statement**
The university is committed to providing a supportive, challenging, diverse, and integrated environment for all students. In accordance with Section 504 of the Rehabilitation Act—Subpart E and Title III of the Americans with Disabilities Act (ADA), the university ensures accessibility to its programs, services and activities for qualified students with documented disabilities. For more information, contact the Student Disability Services Office: Administration Building Room 105; Phone: 210-829-3997; Fax: 210-829-6078. www.uiw.edu/sds

f. **Policy on Academic Integrity**
The highest standards of academic honesty are expected in the course. Forms of academic dishonesty include, but are not limited to cheating, plagiarism, counterfeit work, falsification of academic record, unauthorized reuse of work, theft, and collusion. See the Student Handbook for definitions and procedures for investigation of claims of academic dishonesty under this policy.

8. **Learner Evaluation**

**Formative Assessments**

**Summative Assessments**

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a. Pass

b. No Grade

9. Grading Policy

10. Evaluations

11. Course Textbooks

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12. Disclaimer

This syllabus is based upon the current commitment of faculty and resources and is subject to change should those faculty and/or resources become unavailable. Students will be informed of any changes immediately.
# Appendix (Student groups)

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**Approval date:** September 2015
APPENDIX 2: CREDIT HOURS

For purposes of Standard 5.4.7, a credit hour is defined by the regulations of the U.S. Secretary of Education at 34 CFR 600.2 – Except as provided in 34 CFR 668.8(k) and (l), a credit hour is an amount of work represented in intended learning outcomes and verified by evidence of student achievement that is an institutionally established equivalency that reasonably approximates not less than:

1. One hour of classroom or direct faculty instruction and a minimum of two hours of out of class student work each week for approximately fifteen weeks for one semester or trimester hour of credit, or ten to twelve weeks for one quarter hour of credit, or the equivalent amount of work over a different amount of time; or
2. At least an equivalent amount of work as required in paragraph (1) of this definition for other academic activities as established by the institution including laboratory work, internships, practica, studio work, and other academic work leading to the award of credit hours.
APPENDIX 3: ADJUNCT CLINICAL FACULTY POLICIES AND PROCEDURES

PURPOSE
Outlines the volunteer position role for Adjunct Clinical Faculty (ACF), credentialing, and assignment of Adjunct Clinical Faculty rank.

PROCEDURE

A. Description: Adjunct Clinical Faculty (ACF) are those who voluntarily teach and contribute to the education of SOM students and regional medical residents or who participate in graduate or research programs associated with SOM and who are volunteer fully qualified and credentialed professionals.

B. Volunteer Position: Adjunct Clinical Faculty may also include those professionals who have an ongoing relationship with SOM who are committed to the clinical training programs such as physicians, pharmacists, nurse practitioners, physician assistants, and other healthcare professionals at the master’s level of education and above. ACF participation in SOM clinical, academic teaching and research programs is without compensation. Because ACF are not employees of SOM they are not eligible for employee benefits. ACF do not have the responsibility of committee assignment and hold no voting privileges, unless specified by the dean.

C. Credentialing and ACF Rank: Credentialing and approval will be done by the SOM Credentialing Committee (4.1.2). ACF must be credentialed and maintain board certification or state license to provide their designated scope of care, hold appropriate hospital or practice privileges, and an unrestricted license to practice in the state where clinical training occurs. SOM will accept the credentialing process as described in 4.1.2. with review every two (2) years of Adjunct Clinical Faculty and reappointment every four (4) years.

D. Reporting: ACF report to and meet with the Core Site Directors (CSD). CSD (UIW employed) report to the associate dean of clinical affairs and are supported by a number of both clinical and administrative UIWSOM employees.

E. Adjunct Clinical Faculty and Standardized Curriculum: The academic and administrative support provided by SOM coupled with a well-established curriculum including objectives, reading assignments, online cases and standardized end of rotation exams, ensures that all Adjunct Clinical Faculty who precept medical students are free to focus on patient clinical teaching rather than having to develop an individual curriculum or components at their clinical site.

   a. The Core Site Directors (CSD) will meet at least annually to provide Adjunct Clinical Faculty with student feedback as well as to provide the preceptor the opportunity to make suggestions to improve the curriculum, the rotation experience and the preparedness of students.

   b. Adjunct Clinical Faculty complete student standardized evaluations at the end of each rotation which evaluate students on very specific components in areas of required core competencies. These forms may be completed online.

   c. This standardized curriculum ensures that all students, regardless of the geographic location of their clinical rotations, will have completed the same clinical objectives.
Adjunct Faculty Approval, Assignment of Rank & Review

Adjunct Clinical Faculty
a. The title of Adjunct Clinical Faculty (ACF) is used for appointments, after approval by the Credentialing Committee, for persons in a clinical and/or academic setting where students receive instruction (aka preceptors). These faculty are volunteer faculty per the UIW handbook, who contribute to the instruction of students but do not enter grades into Banner.
b. Adjunct Clinical Faculty duties generally fall into three basic categories: teaching, scholarly activity, and professional service. Adjunct Clinical Faculty often provide services to patients or the community, however the individual’s record of teaching effectiveness, scholarly achievement, and professional service most clearly marks advancement through their career.
c. At the time of initial credentialing and with the dean’s approval, the Credentialing Committee will appoint the ACF’s rank at one of four levels. Subsequent ACF rank review will be done by SOM Faculty Appointment, Promotions and Retention Committee (FAPRC) at the time of recredentialing.

Faculty Rank
a. These guidelines are intended to broadly define the minimum performance levels associated with the academic rank for volunteer Adjunct Clinical faculty (ACF). The following sections outline the general criteria for appointment at each academic rank.
b. Adjunct Clinical Instructor
c. Adjunct Clinical Assistant Professor
d. Adjunct Clinical Associate Professor
e. Adjunct Clinical Professor

A. Adjunct Clinical Instructor
a. Instructor normally holds a minimum of a master’s degree or equivalent, unless this represents a terminal degree in the health profession, has completed most or all of the requirements for the doctorate or equivalent, and is expected to demonstrate effectiveness primarily as a teacher.
   i. Residents in positions of advanced training are usually included in this category
   ii. Physician Assistants and Nurse Practitioners are usually included in this category.

B. Adjunct Clinical Assistant Professor
a. Adjunct Clinical Assistant Professor has been awarded a doctoral or professional degree or equivalent, exhibits commitment to teaching, scholarly activity, or professional work of high caliber.
   i. Evidence of this potential might include:
      1. Willingness to voluntarily participate in the education of first through fourth year students and/or residents
      2. Participation in faculty development courses designed to improve teaching skills and evaluate performance.
      3. Has received above average teaching evaluations
      4. Serves as Adjunct Clinical Faculty for UIW-SOM or other medical students or residents with 1-3 or more students/residents per year for a 1-3-year period.
C. **Adjunct Clinical Associate Professor**
   a. Candidates for the rank of Adjunct Clinical Associate Professor requires a professional degree and three or more years of experience at the Adjunct Clinical Assistant Professor level.
   b. Appointment or promotion to the rank of Adjunct Clinical Associate Professor requires sustained performance at a level above the minimal standards established for Adjunct Clinical Assistant Professor.
      i. Evidence of this may include:
         1. Meets requirements for Adjunct Clinical Assistant Professor
         2. Publication of original scholarly work in peer-reviewed professional journals
         3. Presentation of research/scholarly activity at local, state, or national meetings
         4. Participation at the local and regional level in professional society affairs
         5. Professional specialty board certification
         6. Presentation at local and regional Continuing Medical Education (CME) programs
         7. Record of service to SOM or other programs, e.g. Demonstrates sustained community service
         8. Served as Adjunct Clinical Faculty for medical students or residents with four or more students/residents per year for a 4-5-year period
         9. Has received above average teaching evaluations
         10. Continued participation in faculty development courses
         11. Mentors students, and or advises student organizations

D. **Clinical Professor**
   a. Candidates for the rank of Adjunct Clinical Professor have a professional degree plus a minimum of five years’ experience at the Adjunct Clinical Associate Professor level.
   b. Appointment or promotion to the rank of Adjunct Clinical Professor requires sustained performance at a level above the minimal standards established for Adjunct Clinical Associate Professor.
   c. Appointment or promotion to the rank of Adjunct Clinical Professor also requires sustained academic accomplishment, sustained meritorious scholarly activity, and sustained service, some of which must be at the state or national level
      i. Evidence of sustained academic accomplishment, sustained meritorious scholarly activity, and sustained service may include
         1. Meets requirements for Adjunct Clinical Associate Professor.
         2. Publication of scholarly works, which have made a significant impact in college or school-related professions.
         3. Regular publication of original scholarly work in peer-reviewed professional journals
         4. Participation at the state or national level in professional society affairs.
         5. Participation at the state or national level in research peer-review process.
         6. Participation at the state or national level in the formulation and administration of governmental health care policy.
         7. Presentations at local, state, or national society meetings
         8. A letter(s) of support from one or more outside colleagues attesting to the significance of the scholarly participation at the state or national level in
professional association policy formulation or institutional review processes.

9. Participation as an invited speaker at national or international symposia, and/or professional contributions made by the candidate.

10. Sustained service to medical students and residents.

11. Evidence of state, national or international recognition as an excellent clinician or teacher.

12. Has received above average teaching evaluations

13. Continued participation in faculty development courses

14. Has served as a preceptor for medical students or residents with four or more students/residents per year for at least ten years

Adjunct Clinical Faculty in Research

a. Experts in related health professions fields may volunteer as Adjunct Clinical Faculty- Research. Depending on qualifications, their title may range from Assistant Professor to Professor of Research.

Promotion in Rank

a. In general, promotion in rank represents the progression through increasing levels of academic performance, scholarly achievement, service, faculty development, and leadership.

b. A record of competence in discharging these responsibilities contributes positively to an Adjunct Clinical Faculty member’s evaluation for promotion

c. Adjunct Clinical Faculty, after the initial rank assignment approved by the dean, subsequent reassessment of rank is performed by the SOM FAPRC.
APPENDIX 4: STANDING COMMITTEES

Faculty Appointments, Promotions and Retention Committee
Chair: Appointed Faculty

Admissions Committee
Chair: Appointed Faculty

Faculty Assembly
Chair: Elected faculty (serves on UIW Faculty Senate)

Scholarly Activity and Applied Research Committee (SAARC)
Chair: Associate Dean of Research

DO Curriculum
Chair: Assoc. Dean of Medical and Interprofessional Education

Student Progress

Resources Committee
(Library, facilities, IT, security and safety)
Chair: Director of Accreditation/Planning

Scholarship and Awards Committee
Chair: Assoc. Dean of Admissions and Student Affairs or designee

Policies and Procedures Committee
Chair: Assoc. Dean Health Services

UIWSOM Council
Chair: Dean

SOM Leadership Council

Dean

Standing Committees