



FACULTY APPOINTMENT MANUAL

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TABLE OF CONTENTS

TABLE OF CONTENTS.....	2
WELCOME.....	4
MISSION, VISION, VALUES.....	4
MISSION.....	4
VISION	5
VALUES.....	5
DIVERSITY	5
COLLEGE GOVERNANCE	5
GOVERNANCE	5
ORGANIZATION OF COLLEGE.....	5
ADMINISTRATION.....	6
ACADEMIC AFFAIRS.....	7
CMU HEALTH.....	7
RESEARCH ADMINISTRATION	7
ACADEMIC ORGANIZATION	8
OTHER ADMINISTRATIVE ORGANIZATIONS.....	8
<i>Institutes</i>	8
<i>Centers</i>	9
<i>Programs or Units</i>	9
CMED FACULTY	9
RESPONSIBILITIES OF INDIVIDUAL MEMBERS OF THE FACULTY	9
<i>Faculty from Other CMU Colleges</i>	10
<i>Staff with Faculty Appointments</i>	11
FACULTY APPOINTMENT TRACK, RANK AND CLASSIFICATION.....	11
<i>Appointment Track</i>	11
<i>Community Educator Appointment</i>	12
<i>Non-Tenure Appointment</i>	12
<i>Tenure-Track/Tenure Appointment</i>	13
<i>Visiting Faculty</i>	13
<i>Faculty Rank</i>	14
<i>Faculty Classifications</i>	Error! Bookmark not defined.
INITIAL APPOINTMENT	15
<i>Faculty Appointment with Tenure</i>	15
CARE MODEL DEFINITIONS.....	17
PERFORMANCE AND ACADEMIC REVIEW/EVALUATION	17
<i>Conferences for Faculty Members</i>	18
POST-TENURE REVIEW.....	18
OVERVIEW OF REAPPOINTMENT, PROMOTION AND TENURE.....	20

PROCESS FOR REAPPOINTMENT, PROMOTION AND TENURE OF CMU MEDICAL FACULTY AND CMU MEDICAL EDUCATION PARTNERS FACULTY	21
<i>Reappointment and Reappointment Eligibility</i>	21
<i>Promotion and Promotion Eligibility</i>	22
PROCESS FOR REAPPOINTMENT AND PROMOTION OF COMMUNITY EDUCATORS	24
<i>Reappointment and Reappointment Eligibility</i>	24
PROCEDURES FOR INITIATION OF REAPPOINTMENT, PROMOTION AND TENURE OF CMU MEDICAL FACULTY AND CMU MEDICAL EDUCATION PARTNERS FACULTY	25
<i>Deliberation</i>	26
<i>CMU Review</i>	26
<i>Notification</i>	27
<i>Appeal Procedure</i>	27
PROCEDURE FOR INITIATION OF REAPPOINTMENT AND PROMOTION OF COMMUNITY EDUCATORS	27
WITHDRAWAL OF APPOINTMENT	28
STANDARDS OF FACULTY CONDUCT	29
GENERAL CODE OF CONDUCT.....	29
<i>General Conduct</i>	29
<i>Clinical Code of Conduct and Program Objectives</i>	29
TEACHER LEARNER COMPACT	32
<i>CMED Policy on Standards of Conduct for the Teacher-Learner Relationship</i>	32
CMED MENTORSHIP PROGRAM.....	35
MENTORS.....	35
FACULTY MENTORSHIP.....	35
FACULTY APPOINTMENT RESOURCES	35
CREDENTIALING REQUIREMENTS	35
TEACHING EFFECTIVENESS	36
RESEARCH AND SCHOLARLY ACTIVITY.....	37
PROFESSIONAL DEVELOPMENT.....	37
<i>Faculty Education</i>	37
<i>University Support</i>	37
<i>Instructional Support</i>	38
<i>CMU Library Services/CMU Medical Education Partners Knowledge Services</i>	38
COLLEGE AND UNIVERSITY GUIDELINES	38
APPENDIX A: CLASSIFICATION, RANK AND APPOINTMENT TRACK OVERVIEW	ERROR!
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WELCOME

Welcome to the Central Michigan University College of Medicine (“CMU CMED”). Our faculty, residents, staff and students are proud to be part of CMU, which includes top-ranked programs in business, education, journalism, broadcast and cinematic arts, and health professions. These and a wide range of other programs provide countless opportunities for collaboration and innovation across the University and broader community in the areas of patient care, education and research.

The purpose of this manual is to provide an overview of the CMED, as well as to outline certain policies and procedures for faculty members regarding initial appointment, reappointment, promotion and tenure and will be reviewed, and revised if necessary, on a three year cycle. This manual serves only as a set of guidelines and is not intended to be a complete description of CMU’s policies and procedures. All faculty of the CMED, regardless of their employment status with CMU, are expected to review and abide by CMU’s policies, with regard to CMU property and student interactions. CMU Administrative Policies, Procedures and Guidelines can be found [here](#). This manual is not a contract of employment, expressed or implied, and should not be construed as such. This manual does not supersede Federal, State or local laws, or specific provisions of CMU policies and procedures.

We hope that you will use this manual as a reference for questions that may arise during your appointment with the CMU College of Medicine. The most current information is available electronically and periodic updates will be available via the Central Michigan University’s website under the [CMED Faculty Employment and Personnel Considerations](#) section. Every effort has been made to include all pertinent information regarding initial appointment, reappointment, promotion, and tenure; however, if you have questions that are not addressed or suggestions for future revisions, please contact your Discipline Chair or the CMED Faculty and Staff Affairs office at 989-774-4457 or via email at cmefsa@cmich.edu.

MISSION, VISION, VALUES

MISSION

The CMU College of Medicine will prepare physicians focused on improving access to high quality health care in Michigan with an emphasis on rural and medically underserved regions. Our graduates will aspire to excellence in providing patient-centered and evidenced-based care to their patients and communities. We will engage physicians in leading health care transformation, lifelong learning, and team-based education.

VISION

We will facilitate the transformation of health care in mid- and northern Michigan through:

- Delivering innovative programs in medical education
- Preparing our students to incorporate CMED values into their daily lives
- Promoting inter-professionalism and team-based approaches in progressive health care
- Creating team-based educational opportunities and programs
- Creating an environment supportive of lifelong learning for our graduates, faculty, staff, and partners
- Supporting and serving community educational needs across the continuum of medical education

VALUES

In all that we do we strive for integrity, respect, compassion, inclusiveness, social responsibility, excellence, and innovation.

DIVERSITY

The Central Michigan University College of Medicine strives to develop a culture of inclusion and mutual respect. As a core value of the College, diversity encompasses inclusiveness, mutual respect, and varied perspectives. In order to develop an inclusive culture, the College recognizes the importance of varied perspectives and experiences in the students we admit and the faculty and staff we recruit and retain. Striving for diversity and embracing inclusiveness in these groups enriches the learning environment across the continuum of medical education, fosters a more enriching workplace for faculty and staff may help reduce healthcare disparities in the patients that we serve. For more information regarding the CMED's commitment to diversity and inclusion, as well as information on current initiatives, visit the Diversity and Inclusion page ([here](#)) on the CMED intranet.

The University has a strong vision and strategy for diversity, including a number of diversity-focused programs and supports its colleges in diversity efforts. For more information on these efforts, visit the CMU Office of Diversity Education page [here](#).

COLLEGE GOVERNANCE

GOVERNANCE

See the CMED Bylaws, which cover the governance for the CMED [by clicking here](#).

ORGANIZATION OF COLLEGE

ADMINISTRATION

The administration of the CMED is responsible for all administrative support functions of the college and supporting the missions and goals of the CMED. For more information regarding the CMED organizational structure, click [here](#).

Role of the Dean:

The Dean will provide hands-on leadership and guidance to the CMED to assure that the programs are relevant to the university's mission, responsive to the needs of the state, and are of superior quality. The Dean will direct the development of all aspects of the curriculum. The Dean will facilitate strong, productive relationships with affiliated hospitals and academic departments to ensure high quality medical education, advance patient-centered care, recruit leadership and promote clinical innovation. The Dean will provide leadership and administrative skills to establish a strong, innovative medical education program that gains LCME accreditation and subsequent national recognition.

Role of the Discipline Chair:

The Discipline Chair's primary role is to administer and see to the success of the faculty in the specific disciplines. The chair will recruit faculty, have oversight of faculty evaluation, provide development and mentoring, and collaborate with and advise the Dean on reappointment, promotion, and tenure. The chair will provide input on the strategic direction of the specific disciplines and ensure the faculty's participation in the development and implementation of undergraduate and graduate medical education, research, and clinical programs.

Discipline Chairs are appointed by the Dean following a review and search process which shall be conducted in accord with University policy. The foundation science chair will hold the rank of professor. The medical and surgical Discipline Chairs will hold the rank of associate professor or professor in the educational or clinical classification in the appropriate field. Chairs serve at the will of the Dean with appointments made for periods of up to three years with reappointment determined by the Dean based upon performance and a survey of the faculty and senior institutional leaders.

Discipline Chairs are responsible for the development and academic advancement of faculty in their discipline. Discipline Chairs, or designee, will conduct periodic performance reviews of all faculty in their discipline. In addition, the Discipline Chair, or designee, will develop a mentoring program for all faculty in their discipline separate from the performance evaluation process.

The Deans and team serving the core administrative structure for the CMED include the Discipline Chairs, general administration, finance, faculty and staff affairs, facilities management, information technology, compliance, risk management and research administration. Click [here](#) for a listing of the CMED administration.

ACADEMIC AFFAIRS

Academic Affairs encompasses undergraduate, graduate, and continuing medical education at all CMED locations and with affiliates of the CMED (e.g. hospitals and physician's private practices). The leadership team for Academic Affairs addresses issues including, but not limited to,

- 1.) curriculum development and implementation,
- 2.) course/clerkship development, including director and faculty selection,
- 3.) off-campus clinical education site selection, development, and maintenance
- 4.) program evaluation and LCME continued readiness and educational research,
- 5.) student affairs, admissions and financial aid and counseling and advising,
- 6.) graduate medical education,
- 7.) continuing medical education, and
- 8.) faculty professional development in teaching.

A listing of the administration for Academic Affairs may be found on the CMED website ([here](#)).

CMU HEALTH

CMU Health encompasses the clinical mission of the CMED including the clinical training of medical students, residents, and fellow physicians. CMU Health provides clinical services, clinical health education, and clinical research. CMU Health is managed by the Faculty Group Practice (FGP) of the CMED and includes the clinical activities of CMU Medical Education Partners ("CMU Partners"), Central Health Advancement Solutions, and University Health Services.

The leadership team for CMU Health is also responsible for management of the CMED clinical practice development, regional hospital relations, clinical strategic planning, and the clinical operations structure for the FGP.

RESEARCH ADMINISTRATION

Research Administration is responsible for basic science, clinical, translational, rural health systems, and educational research programs.

As our mission and vision speaks to medical care in underserved areas, the CMED is eager to establish and develop a community health services research program, aimed at integrating students and faculty in research dedicated to understanding and improving health care in rural and medically underserved environments.

The aim of the College of Medicine is to continually seek collaborative opportunities and recruit

and retain researchers that will facilitate the development of a sustainable research strategy consistent with advancing our mission.

ACADEMIC ORGANIZATION

Unlike traditional models where various departments have budget and financial responsibility within the larger structure, the CMED is comprised of one common organizational structure. Faculty within this structure are organized around three central disciplines, and each has a Discipline Chair:

Foundational Sciences - includes all non-clinical content areas such as anatomy, biochemistry, genetics, histology, immunology, microbiology, pharmacology, physiology, decision science, biostatistics, epidemiology, anthropology, psychology and related disciplines.

Medical Disciplines - includes all non-interventional/non-invasive clinical content areas. Included are: adolescent medicine, allergy and immunology, cardiology, dermatology, gastroenterology, family medicine, internal medicine and non-interventional subspecialties, medical genetics, neurology, nuclear medicine, pediatrics, physical medicine and rehabilitation, preventive medicine, and psychiatry.

Surgical Disciplines - includes all interventional/invasive specialties and those specialties providing support for invasive procedures. Included are: anesthesiology, colon and rectal surgery, cardiology-interventional/electrophysiology, emergency medicine, neurosurgery, obstetrics and gynecology, ophthalmology, orthopedic surgery, otorhinolaryngology, pathology, plastic surgery, radiation oncology, radiology-diagnostic, surgery-general, thoracic/cardiovascular surgery, vascular surgery, and urology.

OTHER ADMINISTRATIVE ORGANIZATIONS

Other various administrative organizations of faculty and staff outside the disciplines may be created from time to time in order to facilitate the conduct of teaching, research, or service activities. These other administrative organizations are established by the Executive Committee and include:

INSTITUTES

Generally, these are inter-school organizations of faculty, established by CMUs Governance on recommendations of the President, for the conduct of teaching, research, or service activities. The executive functions of an Institute shall be performed by a Director and Executive Committee appointed by the President and responsible to the appropriate University Office.

CENTERS

Generally, these are interdepartmental (within the CMED) organizations of the faculty, established on recommendation of the President, for the conduct of teaching, research, or service. Generally, Center faculty are from within the CMED, although there may be faculty from other Colleges of the University. The executive functions of Centers are performed by a Director and Executive Committee appointed by the President and responsible to the Dean and Executive Committee of the CMED.

PROGRAMS OR UNITS

These may be established from time to time, generally by the Dean and Executive Committee. The Directors of such entities are usually appointed by the Dean and Executive Committee, in consultation with appropriate Chairs; and they are usually responsible to the Dean.

CMED FACULTY

RESPONSIBILITIES OF INDIVIDUAL MEMBERS OF THE FACULTY

The faculty of the CMED consists of a diverse organization of health care professionals and scientists who perform the teaching, research, health care and service missions of the CMED. CMU is a public university and the faculty serves the public interest. Faculty members provide instruction to the learning community which includes medical students, allied health workers, graduate students, residents, postdoctoral fellows, physicians, undergraduates, professional colleagues through continuing medical education, and the public.

Members of the faculty must maintain and demonstrate competence in their discipline, as well as integrity in their behavior and work. Faculty members are expected to offer mentorship within the entire learning community, including mentorship to faculty colleagues. Faculty members are expected to represent a high level collegial presence in the workplace with respect for personal boundaries and diversity. Confidentiality in clinical, research, educational, administrative and other professional roles must be upheld.

As an appointed faculty member, CMU expects members of the faculty to give primary commitment to the duties of their assignment during the time of appointment. With this in mind, the CMED believes that an individual's participation in institutional citizenship is vitally important to any faculty member's role. The CMED defines "institutional citizenship" as service to the larger organization - CMU – that helps meet the mission of excellence in patient care, education and research.

Individuals demonstrate institutional citizenship through their commitment and service to CMU. Examples may include, but are not limited to:

- Attending, and actively participating in, the CMED and CMU faculty meetings and functions
- Teaching
- Demonstrating the CMED values of integrity, respect, compassion, inclusiveness, social responsibility, excellence and innovation
- Serving on various CMU or CMED committees, programs or initiatives

In addition to CMU and CMED policies and/or bylaws which apply to each appointed faculty member, special rules such as laboratory and research guidelines pertain where applicable. CMED faculty who provide clinical patient care must have clinical credentials.

The CMED recognizes the value of its faculty participating in intellectual activities and relationships outside of the obligations of research, teaching and scholarly activities at the CMED. However, each faculty member also is required to ensure that outside interests are not in conflict with any/all standards set by the University, the CMED, applicable state and federal laws. For additional information regarding the CMED policies regarding Outside Clinical Practice, Outside Employment/Activities, and Conflict of Interest/Commitment click [here](#). For additional information regarding CMU policies regarding Conflict of Interest, click [here](#).

Volunteer faculty whose principal activity is focused on the care of patients have a signed affiliation agreement, memorandum of understanding or similar document that outlines the expectations for providing for the education of CMED students or training of CMED residents at their clinical site or provide topical didactic instruction.

FACULTY FROM OTHER CMU COLLEGES

The CMED may appoint tenured, tenure-track, or fixed-term faculty from other colleges at CMU. Faculty appointed from another college will retain primary faculty status in the home (primary) department/college and receive a secondary appointment to the CMED. Such faculty should contact [CMU Faculty Personnel Services](#) for any questions related to their employment with CMU. Similarly, faculty members appointed on a primary basis to the CMED may also hold secondary appointments in other CMU departments, schools, or colleges.

In either case, secondary appointments must not conflict with the primary appointment. Secondary appointments must be less than full-time, for periods of up to three (3) years, and are contingent upon an annual review and approval by the Deans of the primary and secondary colleges for continuation. In instances where the secondary appointment of a tenured, tenure-track, or fixed-term faculty member is considered to be within his/her regular workload (i.e. "inload"), the standard practice will be to reduce the primary appointment by the amount of the secondary appointment. In instances where the secondary appointment of a tenured tenure track, or fixed-term faculty member is considered to be beyond his/her regular workload (i.e. "overload"), and the faculty member is represented by a collective bargaining agreement, the procedures outlined in the collective bargaining agreement will apply.

Personnel decisions will be made according to the policies and procedures of the primary (home) department/college. When appropriate, the secondary department/college will be consulted.

STAFF WITH FACULTY APPOINTMENTS

The CMED may appoint staff from the CMED or other colleges at CMU. Staff appointed from either will retain primary staff status in the home (primary) department/college and receive a secondary faculty appointment to the CMED. Such staff should contact [CMU Faculty Personnel Services and/or CMU HR](#) for any questions related to their employment with CMU.

In either case, secondary appointments must not conflict with the primary appointment. Secondary appointments must be less than full-time, for periods of up to one (1) year, and are contingent upon an annual review and approval by the Deans of the primary and secondary colleges, and continued need by CMED.

Personnel decisions will be made according to the policies and procedures of the primary (home) department/college. When appropriate, the secondary department/college will be consulted.

FACULTY APPOINTMENT TRACK AND RANK

Each faculty member's appointment will include appointment track, rank, and primary responsibilities.

The CMED has three disciplines, foundational sciences, medical and surgical, each led by a chair. Each faculty member is appointed to one discipline. Each discipline has a chair who has primary academic responsibility for the faculty appointed to their discipline including annual performance review, appointment, reappointment, promotions and tenure, and mentoring. The specialties within each discipline are set forth as described in the Academic Organization section of this Manual.

APPOINTMENT TRACK

Faculty members will be appointed to one of the following tracks:

- Community Educator
- Non-tenure track
- Tenure-track/Tenure
- Visiting Faculty

COMMUNITY EDUCATOR APPOINTMENT

The Community Educator track is for individuals whose principal activity is engagement in UME education, involvement with collaborative research or scholarship of CMED students, training for CMED residents or, provide education, education methods, research, research methods, research of educational methods, and educational domains related to the conduct and application of research. These individuals do not receive additional compensation and may or may not be collaterally employed by CMU or CMEP.

Community educator appointments recognize academic affiliations and collaborations with the CMED without the responsibilities and privileges of executive faculty with non-tenure track, tenure-track, or tenured appointments. Community educator appointments should enhance the CMED's education, research or clinical programs. Community educator appointments are also appropriate for individuals with special talents and contributions.

NON-TENURE APPOINTMENT

The non-tenure track is for individuals whose principal activity is focused on the care of patients and provide education for CMED students, training for CMED residents or, provide education, education methods, research, research methods, research of educational methods, and educational domains related to the conduct and application of research. These individuals are employed by CMU or CMEP.

The Dean appoints non-tenure track faculty with academic rank appropriate to their education and achievements. To advance in non-tenure track faculty rank, faculty are expected to show evidence of regional and national/international professional/scholarly reputation and/or quality scholarship in the faculty member's areas of expertise

Appointments are generally three years in length, however, depending on initial appointment date, the initial appointment may vary from two and one-half years to three and one-half years. Appointments are subject to review and reappointment. Faculty receive an annual performance and academic review and reappointment review which generally occurs every three years. Non-tenure track faculty work in cooperation with her/his respective Discipline Chair to assess her/his readiness and eligibility for rank advancement and follow the guidelines outlined in the process for promotion. Rank advancement for CMU employed faculty requires the approval of the Dean, Provost and Board of Trustees.

Faculty employed by CMU may move from non-tenure track to tenure-track appointment one time during the course of their employment and will require support of both the Dean and Discipline Chair and approval of the Provost. Any additional movement will only be considered under extenuating circumstances.

TENURE-TRACK/TENURE APPOINTMENT

Faculty appointed to the tenure-track/tenure are those who show promise of scholarship that includes obtaining external research/scholarship funding as principal investigator or significant collaborating investigator, and development of a regional, national, international professional and scholarly reputation.

Tenure-track appointments may be given to those who show promise of scholarship and ability to achieve external funding for research, publications and development of a scholarly reputation and who would like to be considered for a future tenure appointment. Tenure is conferred to CMU employed faculty by the Board of Trustees, upon recommendation of the Dean, Provost and the President. To advance in rank and achieve tenure, faculty are expected to show evidence of scholarship that includes obtaining sustained external funding as principal investigator or significant collaborating investigator for research, publishing in books, textbooks, and journals (value proportionate to impact factor), and developing a regional and national/international professional/scholarly reputation.

Faculty in a tenure-track appointment work in cooperation with their respective Discipline Chair to assess their readiness and eligibility for reappointment, promotion, and tenure and follow the guidelines outlined in this manual. CMU employed faculty rank advancement requires the approval of the Dean, Provost and Board of Trustees.

Faculty may move from a tenure-track appointment to a non-tenure track appointment one time during the course of their employment and will require support of both the Dean and Discipline Chair and approval of the Provost. Any additional movement will only be considered under extenuating circumstances.

Appointments are generally three years in length, however, depending on initial appointment date, the initial appointment may vary from two and one-half years to three and one-half years. Appointments are subject to review and reappointment. Faculty receive an annual performance and academic review and reappointment review which generally occurs every three years. Faculty work in cooperation with his/her respective Discipline Chair to assess his/her readiness and eligibility for reappointment, promotion and tenure. Faculty may hold a tenure-track appointment for up to 10 years. Circumstances may make it necessary to extend the length of time for consideration for tenure. Extensions of one year must be requested in writing by the faculty member to his/her Discipline Chair. Examples include but are not limited to an extended leave of absence for serious illness, childbirth, military service, or other extended leaves covered under the Family Medical Leave Act.

VISITING FACULTY

Appointments may also be made for visiting faculty and may or may not be employed by CMU or CMEP. Visiting faculty are defined as scholars with tenure or tenure-track status at another

higher education institution, visiting the CMED for teaching, learning and/or research activities. Such faculty shall be known as visiting professor, associate or assistant professor.

FACULTY RANK

Faculty titles and rank include the following:

- Professor
- Associate Professor
- Assistant Professor
- Clinical Professor
- Clinical Associate Professor
- Clinical Assistant Professor
- Clinical Instructor
- Instructor

Professor

The professor rank is used for faculty who show exceptional achievement consistent with their faculty position. They also have national/international recognition, presentations at national/international meetings, and sustained scholarship/research support.

Associate Professor

The associate professor rank is used for Faculty who show achievement consistent with their faculty position. They also have regional recognition, publications in peer-reviewed literature, and presentations at regional meetings with the potential to attain external research/scholarship support.

Assistant Professor

The assistant professor rank is used for Faculty who show proficiency as a clinician, investigator and/or educator that indicate the potential for growth.

Instructor

The instructor rank may be used for individuals that may or may not have terminal doctoral degrees, but have degrees consistent with their faculty position but do not qualify for the requirements of an Assistant Professor. Individuals appointed at this rank must be actively engaged in the teaching and evaluation of UGME/CME students.*

This rank is also for physicians with clinical responsibilities who have graduated from an ACGME or AOA accredited program and are licensed to practice medicine in their state of residency but who do not hold current board certification and are board-eligible/qualified based on the criteria of the American Board of Medical Specialties (ABMS) or AOA Specialty Certifying Boards. The Instructor will automatically be promoted to the rank of Assistant

Professor once the faculty member obtains their board certification.

Clinical Instructor

The clinical instructor rank is for physicians with clinical responsibilities who have graduated from an ACGME or AOA accredited program and are licensed to practice medicine in their state of residency but who do not hold current board certification and are board-eligible/qualified based on the criteria of the American Board of Medical Specialties (ABMS) or AOA Specialty Certifying Boards*. The Clinical Instructor will automatically be promoted to the rank of Assistant Professor once the faculty member obtains their board certification.

*For individuals currently employed by Central Michigan University or CMU Medical Education Partners, this faculty-level appointment will be in addition to their current employment classification, and the individual will be eligible for benefits consistent with their current employment classification.

INITIAL APPOINTMENT

Upon initial appointment each CMED faculty member shall receive a letter of appointment to include the following:

- a. The effective date of appointment;
- b. The rank at which appointed;
- c. Salary
- d. A statement that terms of appointment, including standards for reappointment, tenure and promotion, are subject to applicable department, college, and university policies;
- e. A statement of tenure status, if applicable; and
- f. The general clinical, administrative, research, and educational (CARE model) areas in which the faculty member will be initially expected to work as approved by the Dean.

The CMED will ensure that a draft of this letter for non-tenure track, tenure-track and tenure appointments is shared with the respective Discipline Chair for review and comments prior to being issued.

FACULTY APPOINTMENT WITH TENURE

An initial appointment with tenure recognizes an exceptional level of academic achievement at the rank of associate professor or professor and is conferred by the Board of Trustees, upon recommendation of the Dean, Provost and President.

In addition to submission of an Application for Employment and applicable documents identified in the job posting, for recommendation of Tenure by the Dean at time of Initial Appointment, a candidate must:

- Submit a letter to CMED FAAC indicating desire to be considered for Tenure recommendation at the time of Initial Appointment, containing:
 - Applicant's current tenure status and rank of current faculty appointment with current institution
 - Completed narrative specifically outlining achievements required for Tenure (as outlined in Appendix A); (and, associated reference documents, as applicable) indicating achievement(s) in applicable area(s) (Clinical/Patient Care, Administrative Leadership/Service, Research/Scholarship, Education)
- Curriculum Vitae

As soon as practicable once a finalist has been identified and they have indicated desire to pursue Tenure at Initial Appointment, above completed documents must be submitted to Discipline Chair assigned to position vacancy. The Discipline Chair will review submitted documents and draft a Letter of Recommendation, indicating level of endorsement for consideration of tenure recommendation.

The Discipline Chair will submit all documents, including Letter of Recommendation, for presentation to the Faculty Appointment and Advancement Committee (FAAC). The FAAC will review submitted documents against established criteria (Appendix A) and make a recommendation to the Dean regarding tenure for the candidate. A summary of FAAC and the Dean's recommendation, as well as any/all desired application materials, will be provided to the Provost for consideration. The Provost will then forward to the President and Board of Trustees for consideration as appropriate.

The CMED may allow a faculty member with a tenured appointment to switch to a non-tenure track appointment at any time, but this reclassification is unidirectional; under no circumstances will a reclassified faculty be eligible for reinstatement of tenure in the CMED.

CARE MODEL DEFINITIONS

The acronym CARE represents the type of duties and responsibilities for which employed faculty may be contracted to perform as follows:

C–Clinical

Patient care services provided directly to patients. Includes supervision of care provided by residents and students. Also includes work in identification of best evidence, proven practices, and development of protocols/clinical guidelines.

A-Administrative

Leadership and management services such as those provided by Senior, Associate and Assistant Deans, Department Chairs, Residency Directors, Medical Directors, Clerkship/Course Directors, etc. Includes duties such as program oversight, managing educational programs, and managing research programs.

R-Research

Clinical, basic science, educational, quality improvement, health services and/or health care operations research. Includes time spent in planning, conducting, and writing research – includes writing grant proposals, study descriptions, IACUC and IRB submissions, and papers/presentations. Includes working with residents, graduate students, undergraduate students, and medical laboratory staff.

E-Education & Teaching

Teaching of faculty, residents, medical students and other health care professionals. Includes classroom/clinical teaching, facilitation, and preparation activities. Includes development of instructional materials, assessments, and evaluations.

NOTE: All faculty may be expected to serve on CMU and College of Medicine committees as assigned or elected and admissions work in the form of providing secondary reviews and participating in the Multiple Mini Interview (MMI) process, ad hoc committees, LCME and other duties as assigned or in those activities associated with normal faculty service to the College and University.

PERFORMANCE AND ACADEMIC REVIEW/EVALUATION

On an annual basis, faculty members will meet with their Discipline Chair, or designee, as part of an annual performance and academic review. The objective of the review is to establish goals that are consistent between the mission of the CMED and the faculty member's academic growth and development. Because the Discipline Chair will guide faculty in reappointment, promotion and tenure requirements, the meeting is intended to be developmental in nature and to assess the faculty member's progress toward meeting the criteria, standards, and procedures

existing at the CMED and university.

CONFERENCES FOR FACULTY MEMBERS

Prior to the meeting to discuss the annual performance and academic evaluation, the faculty member shall provide to the Discipline Chair her/his current curriculum vitae and faculty activity report. The faculty members shall also complete a self-evaluation.

At the meeting, the Discipline Chair shall:

- a. Review the performance and achievements of the faculty member; and, if relevant, discuss any performance concerns which are perceived to exist.
- b. Plan roles, career development and set expectations for the coming year.
- c. For those seeking reappointment, promotion, or tenure (RPT), review with the faculty member the criteria, standards, and procedures existing at the CMED and university, and inform the member the extent to which he/she is or is not advancing toward those standards.
- d. Offer assistance for the member's continuing professional development.

Aspects of performance will be evaluated including teaching and scholarly activities, clinical scholarship activities (if applicable), service within the CMED and overall progress toward RPT. The Discipline Chair or designee will assess the appointment and recommend reappointment (if applicable), track the progress of the faculty member's progress and provide the final documentation of the outcome of the review to Faculty & Staff Affairs. The review update shall consist of the following: extent to which he/she is advancing towards RPT standards (if applicable) and as a faculty member, and progress towards goals. New goals for the following academic year will also be set. A written statement should also summarize other matters discussed pertaining to the faculty member's performance with regard to the criteria and standards.

POST-TENURE REVIEW

Once every six (6) years, a faculty member who has achieved tenure shall complete the Post-Tenure Review process. This process will include a review of the performance and achievements of the tenured faculty member since achieving tenure, and if relevant, identify any performance deficiencies which are perceived to exist.

The faculty member will be reviewed against the criteria and standards appropriate for her/his rank.

To complete the process of Post Tenure Review (PTR), a faculty member must submit a PTR packet to the appropriate Discipline Chair. Items in the packet should include:

- Cover letter from Faculty Member, summarizing achievements since the initial granting of tenure or previous PTR;
- Current CV;
- Evidence of continued achievement in the relevant CARE domains.

Following the Discipline Chair's review of the PTR packet, the Discipline Chair shall coordinate a meeting with the Faculty member to review the submitted materials and discuss any performance concerns. Following this meeting, the Discipline Chair shall submit the PTR Packet, along with a letter of recommendation that addresses support of continued tenure appointment, as described below.

Upon receipt of materials from the Discipline Chair, Faculty and Staff Affairs shall coordinate review of materials by the Faculty Appointment and Advancement Committee (FAAC).

The FAAC will complete an evaluation of the faculty member's achievement and overall performance. The written evaluation from FAAC will be presented to the Dean for review.

The Dean will consider the FAAC's evaluation and render an independent judgment on a faculty member's achievement and overall performance.

In instances where areas of deficiency are noted and further action is required, the Dean may allow the Discipline Chair to establish a Development Plan related to the areas of deficiency outlined in the PTR. This Development Plan will include specific goals or outcomes which could help the faculty member overcome identified deficiencies; outline specific activities which can be undertaken to achieve the goals or outcomes and set appropriate times within which the goals or outcomes must be accomplished; and indicate the criteria by which progress will be monitored. Development Plans are typically one (1) year in length. However, the Discipline Chair may extend a Development Plan for an additional year (maximum two years total) if the Faculty Member has demonstrated significant progress towards the outlined goals/outcomes (as deemed by the Discipline Chair), and extension of the Plan for an additional year would likely result in the attainment of all outlined goals/outcomes.

Upon the expiration of the Development Plan, the Discipline Chair will review progress towards PTR deficiencies and overall performance of Faculty Member and will make a recommendation to the FAAC regarding the continuation of tenure.

The FAAC will complete an evaluation of the faculty member's progress toward completion of the Development Plan. The written evaluation from FAAC will be presented to the Dean for review.

The Dean will consider the FAAC's evaluation and render an independent judgment on a faculty member's progress toward completion of the Development Plan. The Dean is the final decision-maker for PTR decisions.

Faculty members who do not complete a successful PTR and Development Plan may be offered a non-tenure track one-year appointment in the CMED. This appointment may be renewed based upon achievement and satisfactory annual review.

Each faculty member who has completed the PTR process shall be sent a notice, in writing, of the PTR decision following the review of the Dean. A faculty member who disagrees with the results of a PTR or a Development Plan can request an appeal of the review, following the same procedures as appeal during the granting of tenure.

OVERVIEW OF REAPPOINTMENT, PROMOTION AND TENURE

Central Michigan University is an institution dedicated to excellence in the collective pursuit of knowledge and learning by its faculty and student body. Its reappointment, promotion, and tenure policies are designed to facilitate the identification and reward of faculty excellence.

The CMED¹ defines scholarship broadly, including the domains of discovery, application, integration and teaching. For the purposes of reappointment, promotion and tenure, scholarship includes not only peer-reviewed manuscripts but also book chapters, reviews, creative syntheses, electronic publications, case simulations, policy papers, clinical guidelines, innovative curricula, educational and other creative contributions. These scholarship accomplishments are judged based on their originality, grounding in scientific evidence of competency or excellence in the candidate's primary areas of effort and expertise.

The CMED strives to maintain a faculty that is committed to excellence in patient care, research, education and service. The CMED has defined procedures for reappointment, promotion and tenure (RPT) that will recognize the importance of these activities. The procedures are intended to ensure faculty advancement criteria are addressed.

It is the responsibility of each faculty member to be familiar with the standards for reappointment, promotion and tenure and to determine when he/she is eligible for reappointment, promotion or tenure, as well as the criteria and standards by which he/she will be evaluated. An applicant for reappointment, promotion and/or tenure may withdraw his/her application at any time without prejudice. See "Faculty Personnel Considerations Calendar" for

¹ CMED accepts and employs the definition of scholarly activity that was initially adopted by Boyer (1990) and then modified for by Weiser (1996).

information regarding deadlines for material submission ([here](#)).

RPT decisions are based upon merit. RPT decisions result from deliberations and judgments occurring in sequence beginning with recommendations by the Discipline Chairs to the Faculty Appointment and Advancement Committee where, upon approval, recommendations are made to the Dean, the Provost and President. Conferral of tenure and promotion is made by the CMU Board of Trustees.

Reappointment promotion and tenure decisions will become effective at the beginning of the fiscal year following the date in which the conferral decision for reappointment, promotion and/or tenure is made.

See “Rank and Appointment Type” table to reference faculty rank advancement criteria.

PROCESS FOR REAPPOINTMENT, PROMOTION AND TENURE OF CMU MEDICAL FACULTY AND CMU MEDICAL EDUCATION PARTNERS FACULTY

The process for reappointment, promotion, and tenure (if applicable), for CMU medical faculty and CMU Medical Education Partners faculty is indicated below.

REAPPOINTMENT AND REAPPOINTMENT ELIGIBILITY

A faculty member who holds a non-tenured appointment is subject to review and reappointment. All tenure-track and non-tenure track faculty members shall normally receive an initial appointment of three (3) years. A faculty member seeking reappointment must begin the reappointment process in the fall of the calendar year preceding their current appointment end date. Reappointments will be effective July 1 and shall normally be for a three year period, except for 2nd reappointments for those in tenure-track appointments which will normally be for a four-year period.

As there is no limit on the length of a faculty member’s time in a non-tenure track appointment without achieving promotion, a faculty member in a non-tenure track appointment may apply for reappointment as many times as desired. Faculty in tenure-track appointments may also apply for reappointment without achieving promotion, however, they must receive promotion once before applying for tenure, and they must achieve tenure within ten (10) years of initial appointment. Tenure track faculty may also apply for promotion and tenure concurrently.

The CMED will give notice of non-reappointment according to the terms of the appointment letter for non-tenure track faculty, or at least six (6) months in advance for tenure-track faculty. The purpose of the notice period is to give faculty members an opportunity to make new professional employment arrangements.

PROMOTION AND PROMOTION ELIGIBILITY

Promotion of CMU employed faculty is conferred by the Board of Trustees only after the process of evaluation involving their Discipline Chair, external evaluators, and committees within the CMED, the Dean, and the Provost following consultation with the President. CMEP faculty promotion is conferred by the Dean. It is important to note that academic promotion is not a reward for services rendered but the reward for scholarly work that adds significantly to the specific field as well as for important contributions in clinical activities, teaching, and administration. At the rank of Professor, faculty are expected to be academic leaders in their field.

All faculty of the CMED (except those at the rank of Professor) in non-tenure track, tenure-track, and tenured appointments are eligible for promotion. A faculty member seeking promotion must begin the promotion process in the fall of the calendar year preceding the date in which the promotion decision would become effective. Promotions will be effective July 1.

There is no limit on the length of a faculty member's time in a non-tenure track appointment without achieving promotion. While faculty in tenure-track appointments may apply for reappointment without achieving promotion, they must receive promotion once before applying for tenure, and they must achieve tenure within ten (10) years of initial appointment. Faculty may apply for promotion and tenure concurrently.

The minimum time normally required in the rank of Assistant Professor before promotion to the rank of Associate Professor is five (5) years. The minimum time normally required in the rank of Associate Professor before promotion to the rank of Professor is five (5) years. If applicable, faculty appointed at the ranks of Instructor or Clinical Instructor may apply for promotion to Assistant Professor during the promotion process following the attainment of the necessary qualification for Assistant Professor.

Up to two (2) years in rank as a full-time faculty member at Central Michigan University or elsewhere, may be applied toward these time-in-rank requirements. Based on material supplied by the faculty candidate during the hiring process and a recommendation from the appropriate Discipline Chair, FAAC, and Dean, CMU will make a determination whether the new faculty member qualifies for such credit toward the normal time in rank, and this information shall be included in the letter of appointment. At the choice of the faculty member, some or all of the credited time in rank may be used when applying for promotion.

Faculty may apply for promotion prior to meeting the minimum time in rank; however, this may be granted only in extraordinary circumstances. Because of this, before a faculty member's promotion shall be considered and supported by the Faculty Appointment and Advancement Committee for approval and review by the Dean and Provost, the faculty member's Discipline Chair must endorse the recommendation for Promotion. Therefore, any application for promotion prior to meeting the minimum time in rank criteria that is not supported by their respective Discipline Chair shall not be forwarded to the FAAC, Dean, or Provost for

consideration. The lack of endorsement by the Discipline Chair for promotion prior to meeting the minimum time in rank criteria is not subject to appeal by the faculty member.

TENURE AND TENURE ELIGIBILITY

The grant of tenure to a faculty member is one of the most significant acts of the university. The university commits a portion of its resources for a number of years to the skills and capacity of one individual and offers a career to develop the individual's area of competency. Tenure results from a deliberative process involving the CMED and the Provost, resulting in a decision by the Board of Trustees. Conferral of tenure is effective July 1.

Non-tenure track faculty are not eligible for tenure, but CMU employed faculty may move between non-tenure track and tenure-track ranks one time within their employment. Additional movement will be considered only under extenuating circumstances and will require approval of the faculty member's respective Discipline Chair and the Dean.

Tenure-track faculty members, after completing the process for promotion (unless initial appointment was at the level of Professor), are eligible for tenure. In addition, unless otherwise stated in the appointment letter or other written communication from the Dean or Provost, tenure-track faculty members must possess a terminal degree.

A faculty member seeking tenure must begin the tenure process in the fall of the calendar year preceding the date in which the tenure decision would become effective. Conferral of tenure will be effective July 1.

A faculty member may hold a tenure-track appointment for up to 10 years before achieving tenure. Typically, this consists of an initial appointment of 2.5 - 3.5 years, a first reappointment of three years, and a second/final reappointment of four years.

Circumstances may make it necessary to delay consideration for the grant of tenure. Some examples include, but are not limited to, extended absence or disability due to illness or injury, acute family/personal responsibilities (including child care or the birth or adoption of a child), military service, unforeseen circumstances in the completion of a terminal degree (such as the death of a doctoral advisor), and unexpected delays in scholarly achievement due to circumstances beyond the control of the faculty member. Under such circumstances, the faculty member may submit a written request to delay consideration for the grant of tenure.

- a. If the request is due to medical, disability, military service or other non-academic related reasons, the request shall be submitted to Faculty Personnel Services. If the request is due to academic reasons, the request shall be submitted to the Discipline Chair. The request must be made in writing, and absent unforeseeable circumstances, at least six (6) months prior to the date the tenure application is due to the Discipline Chair.

- b. Such delays may not exceed two (2) years and are made only when consistent with the needs of the University and the professional development of the faculty member.
- c. Upon receiving the request, Faculty Personnel Services or the college, as applicable, shall provide its recommendation to the dean, with a copy to the faculty member within fifteen (15) business days. If no action is taken on the request by the end of that period, the faculty member may submit the request to the dean within the following five (5) business days.
- d. Upon receiving the request or appeal, as applicable, the dean shall provide his or her recommendation to the Provost, with a copy to the faculty member, within ten (10) business days. If no action is taken by the dean on the request by the end of that period, the faculty member may submit the request to the Provost within the following five (5) business days.
- e. The Provost may approve or deny the request and shall endeavor to provide his or her decision within fifteen (15) business days. If the dean's recommendation is negative, the faculty member may, within five (5) business days of receiving the dean's recommendation, request a meeting with the Provost to discuss the request. Upon receipt of the Provost's decision, the faculty member may request a meeting with the Provost to address any errors of fact, and answer any further questions. The faculty member may also submit a written statement to the Provost before, during, or in lieu of this meeting. The Provost will notify the faculty member in writing of her/his final decision within twenty (20) business days after the meeting or after receipt of the written statement if no meeting took place.

Faculty members who do not complete a successful tenure review (within the allowable time to tenure) may be offered a non-tenure track one-year appointment in the CMED. This appointment may be renewed based upon achievement and a satisfactory annual review.

PROCESS FOR REAPPOINTMENT AND PROMOTION OF COMMUNITY EDUCATORS

The process for reappointment and promotion for Community Educators is indicated below. Review the Faculty and Staff Affairs page on the CMED internet [here](#) to view information and requirements.

REAPPOINTMENT AND REAPPOINTMENT ELIGIBILITY

A faculty member who holds a community educator appointment is subject to review and reappointment. All community educator faculty members shall normally receive an initial appointment of three (3) years. A faculty member seeking reappointment must begin the reappointment process three months in advance of the expiration of their current appointment end date.

As there is no limit on the length of a faculty member's time in a community educator track appointment without achieving promotion, a faculty member in a community educator appointment may apply for reappointment as many times as desired.

The CMED will give notice of non-reappointment according to the terms of the appointment letter for community educators.

PROCEDURES FOR INITIATION OF REAPPOINTMENT, PROMOTION AND TENURE OF CMU MEDICAL FACULTY AND CMU MEDICAL EDUCATION PARTNERS FACULTY

To be considered for reappointment, promotion, or tenure, a faculty member must submit a Portfolio to the appropriate Discipline Chair, requesting the appropriate review. Review the Faculty and Staff Affairs page on the CMED internet [here](#) to view information and requirements.

Simultaneous Application for Reappointment, Promotion and Tenure: Faculty members who apply for tenure may also apply for reappointment or promotion at the same time. In the narrative, applicants shall address how and to what extent he/she has met the standards set forth, for each personnel consideration. The CMED and the Provost shall make separate recommendations.

Following the Discipline Chair's review of the portfolio for reappointment, promotion and/or tenure, the Discipline Chair shall submit the portfolio, along with a letter of recommendation that addresses each personnel consideration for the faculty member, to Faculty and Staff Affairs.

For portfolios submitted for consideration for promotion or tenure, Faculty and Staff Affairs shall solicit external reviewers for an appraisal of the candidate and her/his work. All reviewers must hold an academic rank at least at the level of promotion desired. For tenure, academic rank at the level of the candidate and conferral of tenure is required. For advancement from Assistant to Associate, a minimum of three (3) external reviews are necessary, but as many as eight (8) may be requested. For advancement from Associate Professor to Professor, or for a tenure decision at either rank, a minimum of five (5) external reviewers are necessary, but as many as ten (10) may be requested.

For each faculty member being considered for promotion or tenure "arm's length" external review letters are required. Former teachers, advisors, mentors, and current faculty colleagues are not considered "arm's length". Co-authors and major research collaborators/former faculty colleagues are also not "arm's length" unless the most recent association occurred over 10 years prior to the application.

The external reviewers will typically be selected from a list provided by the candidate. The appropriate Discipline Chair, at her/his discretion, may also select one (1) external reviewer for

promotion to Associate Professor, and up to two (2) for promotion to Professor and/or for a tenure decision. The designated Discipline Chair may offer recommendations regarding evaluators if the faculty member desires assistance in evaluator selection. External reviewers should be given a specified deadline for return of their reviews and all reviews received prior to the deadline must be submitted with the portfolio. Upon receipt of the minimum number of reviewer evaluations the portfolio shall be deemed “complete”. All additional letters received prior to the committee deadline will be included in the faculty member’s portfolio and be forwarded to the Faculty Appointment and Advancement Committee (FAAC) for consideration.

In requesting external reviews, Faculty and Staff Affairs will provide the reviewers with the necessary portfolio information of the faculty candidate and all applicable CMU College of Medicine information that describes the CMED criteria for advancement. Reviewers should be requested to provide her/his faculty rank, tenure status, and relationship to the candidate (e.g. collaborator, prior colleague, mentor, etc.), if any.

DELIBERATION

Upon receipt of materials from the Discipline Chair, Faculty and Staff Affairs shall verify the eligibility of the faculty member and coordinate review of materials by the Faculty Appointment and Advancement Committee (FAAC). Only fully completed portfolios will be forwarded to the FAAC for review.

The FAAC shall evaluate the qualifications and for tenure-track faculty, an evaluation of sufficient progress towards tenure, of the faculty member as presented in the portfolio and make a written recommendation based on the criteria and standards for RPT. The recommendation from the FAAC will be presented to the Dean for review.

The Dean will consider the FAAC’s recommendation. The Chair of the FAAC, or designee, will present candidates to the Dean for appointment, reappointment, and tenure. The primary role of the FAAC in this process is to ensure the appropriate processes and procedures were followed. Upon rendering a final judgment, the Dean shall draft a written recommendation regarding the faculty member’s RPT application, and shall forward to Faculty and Staff Affairs. Notification regarding the Dean’s recommendation will be delivered to the candidate at the time it is delivered to the Office of the Provost (FPS). Faculty and Staff Affairs shall then be responsible for coordinating all materials and CMED recommendations to the Office of the Provost (FPS), following appropriate university-designated timelines.

CMU REVIEW

The Provost, using processes developed at the Provost’s level and applying the criteria and standards developed by the University, will consider the recommendations, and following consultation with the President, will render an independent judgment on the faculty member’s achievements as indicated by the documentation. The Provost is the final decision-maker for

reappointment decisions. The Provost will forward his/her recommendation for promotion and/or tenure to the President.

The President shall forward favorable promotion and/or tenure recommendations of the Provost to the Board of Trustees for appropriate action.

NOTIFICATION

Each faculty member who has applied for reappointment shall be sent a notice, in writing, of the reappointment decision following the decision of the Provost.

Each faculty member, who is a candidate for promotion and/or tenure, shall be sent notice in writing by the Office of the Provost of the promotion and/or tenure decision following the Board of Trustees meeting at which the recommendation of faculty member's promotion and/or tenure application was considered.

APPEAL PROCEDURE

Faculty members shall be notified by the CMED Faculty and Staff Affairs office of negative RPT recommendations at each level of review, and a copy of such notifications shall be provided simultaneously to Faculty Personnel Services. However, a formal appeal by a faculty member regarding negative RPT decisions cannot be made until a final RPT decision is made/conferred by the Office of the Provost.

Following a negative RPT decision at the Provost's level, and if the faculty member desires further review, a request for a review of a negative RPT recommendation shall be made in writing and delivered to the Provost within fifteen (15) business days after the notice of recommendation is issued to the faculty member. Once the appeal of the faculty member has been received by the Provost, the Provost shall review the appeal and render a written final decision, which is not subject to further appeal.

PROCEDURE FOR INITIATION OF REAPPOINTMENT AND PROMOTION OF COMMUNITY EDUCATORS

Promotion of Community educator faculty is conferred by the Dean only after the process of evaluation involving their Discipline Chair and the Faculty Appointment and Advancement Committee (FAAC). It is important to note that academic promotion is not a reward for services rendered but the reward for scholarly work that adds significantly to the specific field as well as for important contributions in clinical activities, teaching, and administration.

All faculty (except those at the rank of Professor) appointed as community educators are eligible for promotion. A faculty member seeking promotion must begin the promotion process three months in advance of the date in which the promotion decision would become effective

There is no limit on the length of a faculty member's time in a community educator appointment without achieving promotion.

If applicable, faculty appointed at the ranks of Instructor or Clinical Instructor may apply for promotion to Assistant Professor during the promotion process following the attainment of the necessary qualification for Assistant Professor.

WITHDRAWAL OF APPOINTMENT

Faculty appointments in the CMED are at the discretion of the Dean of the College of Medicine. These appointments are subject to the terms provided in any applicable affiliation agreement, memorandum of understanding, or similar document that outlines the expectations for appointment (including those contained in this Manual).

A faculty appointment in the College of Medicine may be withdrawn when in the judgment of the Dean, the good of the CMED requires such action. Such actions may be based on the following grounds, including, but not limited to:

- Demonstrable professional incompetence
- Neglect of duty
- Insubordination
- Conviction or a plea of no contest to a felony crime
- Conviction or plea of no contest to any criminal offense involving moral turpitude
- A violation of any University policy related to unlawful harassment or discrimination
- Research misconduct
- Learner mistreatment
- Other conduct which falls below the minimum standards of professionalism or expectations of the position

When a faculty appointment is withdrawn, written notification shall be provided to the individual by the applicable Discipline Chair.

Faculty employed by Central Michigan University should refer to the "Medical Faculty Employment Handbook" for information related to employment dismissal procedures.

STANDARDS OF FACULTY CONDUCT

GENERAL CODE OF CONDUCT

The College of Medicine expect all members of the College to be outstanding role models for students, residents, junior faculty and staff, as well as excellent colleagues for their peers. Therefore, the following expectations of conduct have been adopted.

GENERAL CONDUCT

- Deans, faculty and other College of Medicine leaders are role models for their peers and co-workers and as representatives outside the institutions.
- All deans, faculty, and staff are expected to demonstrate the highest level of conduct, in the mode of servant-leadership.
- All deans, faculty, and staff are expected to follow our stated values in making decisions and in working with our colleagues, students, patients, and members of the community.
- Our conduct is guided by the Leadership Behaviors
 1. Focus our attention on the activity on hand
 2. Be honest and sensitive to the needs of others
 3. Be generous with one's time
 4. Model high performance
 - Do right things
 - Do things right
 5. Respect and use the wisdom of the team
 6. Be open and receptive; seek understanding
 7. Be the change you wish to see in the world
 8. Have crucial, courageous and timely conversations
 9. Clear, timely and specific performance expectations and feedback
 10. Seek and provide coaching and mentoring
 11. Empower to make effective, appropriate and participative decisions
 12. Practice good project management

CLINICAL CODE OF CONDUCT

- Working cooperatively and respectfully with patients, families, and all other clinicians and support personnel within the College of Medicine, CMU Medical Education Partners and its practice sites or any other clinical sites
- Respectful communication stating essential information without verbal or physical intimidation.
- Discussion of perceived inadequate performance by another staff member with the staff member's supervisor. If there is immediate danger to a patient because of a staff member's action, it is expected that direct discussion with personnel take place giving all facts in a clear, non-intimidating manner to immediately correct the inappropriate

action. The faculty member must then promptly discuss the event and actions with the appropriate supervisor.

- The faculty member will perform all duties within stated timelines, such as, completion of medical records as soon as possible and in accordance with the College of Medicine or other clinical site policies and/or applicable medical staff bylaws, to provide continuity of care. If for physical or mental reasons a physician is unable to perform these duties, the discipline chair, and the Senior Associate Dean for Clinical Affairs should be notified.
- Faculty must voluntarily remove themselves from patient care duties if affected by physical or mental impairment, such as drug or alcohol use. Other staff members are obligated to report unsafe clinician behavior.
- Confidential patient records must not be accessed or information shared unless the staff or faculty member has specific patient care responsibilities for that patient, or has an assigned appropriate quality, educational, or research role.
- Any potential or actual conflict of interest must be promptly disclosed to committee chairs and/or department chairs so that appropriate management can occur. Faculty should not directly endorse medical products to the general public.

Faculty leaders will work to improve individual and aggregate faculty performance through providing appropriate measurement of these expectations that provides positive and constructive feedback so each physician has the opportunity to grow and develop in his or her capabilities to provide outstanding patient care and valuable contributions.

Patient Care: Practitioners are expected to provide patient care that is compassionate, appropriate, and effective for the promotion of health, prevention of illness, treatment of disease and at the end of life as evidenced by the following:

1. Achieve patient outcomes that consistently meet or exceed generally accepted medical staff standards as defined by severity adjusted data, medical literature, and peer review activities.
2. Demonstrate caring and respectful behaviors when interacting with patients and their families
3. Assure that each patient is evaluated by a physician as defined in the bylaws, rules and regulations and document findings in the medical record at that time.
4. Make clinical decisions based on accurate patient information, patient preferences and available scientific evidence using sound clinical judgment to develop and carry out patient management plans
5. Counsel and educate patients and their families where appropriate in compliance with patient consent.
6. Cooperate with appropriate hospital efforts to implement methods to systematically enhance disease prevention and improve outcomes.
7. Address end-of-life issues in the patient care plan when appropriate to a patient's condition.
8. If applicable, supervise residents, students and allied health professionals to assure patients receive the highest quality of care.

Medical Knowledge: Practitioners are expected to demonstrate knowledge of established and evolving biomedical, clinical and social sciences, and the application of their knowledge to patient care and the education of others as evidenced by the following:

1. Maintain ongoing medical education and board certification as appropriate for each specialty
2. Use evidence-based guidelines when available, as recommended by the appropriate specialty, in selecting the most effective and appropriate approaches to diagnosis and treatment.
3. Demonstrate appropriate technical skills and medical knowledge using medical simulation technology where appropriate.

Practice Based Learning and Improvement: Practitioners are expected to be able to use scientific evidence and methods to investigate, evaluate, and improve patient care as evidenced by the following:

1. Review your individual and specialty data for all general competencies and utilize this data for self-improvement to continuously improve patient care.
2. Respond in the spirit of continuous improvement when contacted regarding concerns about patient care.
3. Use information technology to manage information and access on-line medical information.
4. Facilitate the learning of students, trainees and other health care professionals

Interpersonal and Communication Skills: Practitioners are expected to demonstrate interpersonal and communication skills that enable them to establish and maintain professional relationships with patients, families, and other members of health care teams as evidenced by the following:

1. Communicate effectively with other physicians and caregivers, patients and their families through appropriate oral and written methods to ensure accurate transfer of information according to hospital policies.
2. Work effectively with others as a member or leader of a health care team or other professional group
3. Maintain medical records consistent with CMED policies and/or the appropriate medical staff bylaws, rules, regulations and policies.
4. Maintain high patient satisfaction with physician care.

Professionalism: Practitioners are expected to demonstrate behaviors that reflect a commitment to continuous professional development, ethical practice, an understanding and sensitivity to diversity, and a responsible attitude toward their patients, their profession, and society as evidenced by the following:

1. Act in a professional, respectful manner at all times and adhere to the CMED Citizenship/Code of Conduct.
2. Respond promptly to requests for patient care needs.
3. Address disagreements in a constructive, respectful manner away from patients or other non-involved caregivers.

4. Respect patient rights by discussing unanticipated adverse outcomes with patients and/or appropriate family members.
5. Follow ethical principles pertaining to provision or withholding of clinical care, confidentiality of patient information, informed consent, and business practices
6. Utilize sensitivity and responsiveness to culture, age, gender, and disabilities for patients and staff.
7. Make positive contributions to the medical staff by participating actively in medical staff functions and serving when requested
8. Participate in emergency call as defined in the bylaws, rules and regulations.

Systems Based Practice: Practitioners are expected to demonstrate both an understanding of the contexts and systems in which health care is provided, and the ability to apply this knowledge to improve and optimize healthcare as evidenced by the following:

1. Comply with hospital efforts and policies to maintain a patient safety culture, reduce medical errors, meet national patient safety goals and improve quality.
2. Ensure timely and continuous care of patients by clear identification of covering physicians and by availability through appropriate and timely electronic communication systems.
3. Provide quality patient care that is cost effective by cooperating with efforts to appropriately manage the use of valuable patient care resources.
4. Cooperate with guidelines for appropriate hospital admission, level of care transfer, and timely discharge to outpatient management when medically appropriate.

TEACHER LEARNER COMPACT

CMED POLICY ON STANDARDS OF CONDUCT FOR THE TEACHER-LEARNER RELATIONSHIP

The College of Medicine and all its clinical affiliates shall collaborate to assure that professional standards and professional conduct are maintained by all students, faculty and staff involved in the delivery of all aspects of the medical education program.

Statement of Philosophy: The College of Medicine is committed to creating an environment that promotes academic and professional success in students and teachers at all levels. This success is dependent on an environment free of behaviors that can undermine the important mission of our institution. An atmosphere of mutual respect, collegiality, fairness, and trust is essential. Although both teachers and students bear significant responsibility in creating and maintaining this atmosphere, teachers bear particular responsibility for modeling appropriate professional behaviors. Teachers must be mindful of this responsibility in their interactions with colleagues, their patients, and those whose education has been entrusted to them.

Expectations of faculty and student conduct are included in the faculty bylaws and the CMED Student Handbook, and include a requirement that all students and faculty abide by the policies set forth in the American Associate of Medical College (AAMC) Teacher-Learner Compact.

Responsibilities in the Teacher/Learner Relationship

The College of Medicine will follow the guidelines of the AAMC Teacher-Learners Compact (<https://www.aamc.org/initiatives/residentcompact/>). The language has been adapted for use with both medical students and residents, who are designated as 'learners' and 'physicians-in-training'.

Commitments of Faculty – College of Medicine Faculty will:

1. Maintain the highest standards of care, respect the needs and expectations of patients, and embrace the contributions of all members of the health care team as role models for learners;
 2. Use the utmost effort to ensure that all components of the educational program for physicians-in-training are of high quality, including individual faculty contributions as teachers;
 3. Fulfill the responsibility to nurture both the intellectual and the personal development of learners, committing to foster academic excellence, exemplary professionalism, cultural sensitivity, and demonstrate a commitment to maintaining competence through life-long learning;
 4. Demonstrate respect for all learners as individuals, without regard to gender, race, national origin, religion, disability or sexual orientation; and will cultivate a culture of tolerance among the entire staff;
 5. Ensure physicians-in-training have opportunities to participate in patient-care activities of sufficient variety and with sufficient frequency to achieve the competencies required by their chosen discipline. College of Medicine faculty will ensure that learners are not assigned excessive clinical responsibilities and are not overburdened with services of little or no educational value;
 6. Provide physicians-in-training with opportunities to exercise graded, progressive responsibility for the care of patients, so students learn how to practice their specialty and recognize when, and under what circumstances, to seek assistance from colleagues and prepare physicians-in-training to function effectively as members of health care teams;
 7. Ensure learners receive appropriate supervision for all of the care they provide during their training;
 8. Evaluate each learners performance on a regular basis, provide appropriate verbal and written feedback, and document achievement of the competencies required to meet all educational objectives;
- 3 Approved by: Curriculum Committee 7/26/2016 – Standards of Conduct for Teacher-Learner Relationship

9. Ensure learners have opportunities to partake in required conferences, seminars and other non-patient care learning experiences and that they have sufficient time to pursue the independent, self-directed learning essential for acquiring the knowledge, skills, attitudes, and behaviors required for practice; and
10. Nurture and support residents in their role as teachers of residents and medical students.

Commitments of Learners – College of Medicine Learners will:

1. Acknowledge our fundamental obligation as physicians - to place our patients' welfare uppermost; quality health care and patient safety will always be our prime objectives;
2. Pledge our utmost effort to acquire the knowledge, clinical skills, attitudes and behaviors required to fulfill all objectives of the educational program and to achieve the competencies deemed appropriate for our chosen discipline;
3. Embrace the professional values of honesty, compassion, integrity, and dependability;
4. Adhere to the highest standards of the medical profession and pledge to conduct ourselves accordingly in all interactions. We will demonstrate respect for all patients and members of the health care team without regard to gender, race, national origin, religion, economic status, disability or sexual orientation;
5. Understand the need for faculty to supervise all our interactions with patients and, as physicians-in-training, learn most from being involved in the direct care of patients and from the guidance of faculty and other members of the health care team;
6. Accept our obligation to secure direct assistance from faculty or appropriately experienced residents whenever we are confronted with high-risk situations or with clinical decisions that exceed our confidence or skill to handle alone;
7. Welcome candid and constructive feedback from faculty and all others who observe our performance, recognizing that objective assessments are indispensable guides to improving our skills as physicians;
8. Provide candid and constructive feedback on the performance of our fellow residents, of students, and of faculty, recognizing our life-long obligation as physicians to participate in peer evaluation and quality improvement;
9. Recognize the rapid pace of change in medical knowledge and the consequent need to prepare ourselves to maintain our expertise and competency throughout our professional lifetimes; and 4 Approved by: Curriculum Committee 7/26/2016 – Standards of Conduct for Teacher-Learner Relationship

10. Fulfill our own obligations as professionals. We pledge to assist both medical students and fellow residents in meeting their professional obligations by serving as their teachers and role models.

The above guidelines serves both as a pledge and as a reminder to students, resident physicians, and their teachers that their conduct in fulfilling their obligations to one another is the medium through which the profession perpetuates its standards and inculcates its ethical values.

CMED MENTORSHIP PROGRAM

MENTORS

A faculty mentor is a veteran faculty member, either chosen by the newer faculty member or assigned by the Discipline Chair, who is available to answer questions, to work with new faculty on research or teaching needs, and to provide initial guidance on issues related to reappointment and employment with the university.

FACULTY MENTORSHIP

A central premise of the CMED vision is support of the faculty in an environment of collaboration. Mentorship is a key component of this support. The CMED is developing a mentoring program for its faculty. Participation in the program will be required for all faculty of the CMED. The CMED expects the program to foster an environment of clear vision, collaboration, and communication that will enhance faculty opportunities for scholarship success.

FACULTY APPOINTMENT RESOURCES

CREDENTIALING REQUIREMENTS

The CMED has an academic credentialing function within the faculty and staff affairs office. The academic credentialing function ensures faculty hired by the CMED have appropriate verification of credentials including (but not limited to) appropriate criminal background checks, national practitioner databank verification, federal programs exclusion list verification, valid state of Michigan, DEA license, etc. Faculty members are required to participate fully in the academic credentialing process not only upon initiation of appointment but for ongoing appointment to be maintained. If the status of a faculty member changes regarding an item reported, the faculty member should report this information to their Discipline Chair and the Assistant Dean of Faculty and Staff Affairs.

TEACHING EFFECTIVENESS

The evaluation of a faculty member's teaching efforts are iterative as data are collected, reviewed, and applied throughout an academic year. Instruments used to assess individual faculty members include written online evaluations, student assessments, self-assessments, and peer review. As a component of annual review, those faculty involved in instruction participate in a summative assessment process facilitated by the appropriate Discipline Chair. Individual feedback sessions are conducted to design a plan for professional development sessions that are documented and referred to as needed. Peer review and mentoring are components of the development process, and faculty are encouraged to have focus group meetings with their students to gather feedback concerning the methods of instruction being used and their effectiveness.

The criteria that medical students use for evaluating faculty instructional performance are listed below. These criteria apply to the CMED faculty providing lectures, small group facilitation, and/or clinical team facilitation.

Criteria relevant to all teaching settings:

- Effective use of resources (time, equipment, technology, information)
- Appropriate conduct (e.g., respectful attitude, establishes rapport, demonstrates tolerance/acceptance of diversity, etc.)
- Knowledgeable
- Effective preparation and organization
- Objective- and outcome-centered
- Effective communication (speaking, listening, facilitating)
- Effective use of instructional methods (e.g., active, interactive)
- Effective use of coaching with feedback to stimulate self-directed learning/independent study/curiosity
- Effective demonstration of the CMED values

Criteria relevant to block and longitudinal courses:

- Course directors (including large group facilitation): effectiveness in leadership, organization, resource utilization, instructional technique, flexibility, and overall effectiveness
- Small group facilitators: effectiveness in managing team dynamics, managing resources, coaching/feedback, timeliness/organization, instructional technique, and humanism
- Clinical settings/longitudinal courses/year 1,2 clinic mentors: availability, rapport with staff and students, professionalism, hospitality, organizational skills, effectiveness as role model, and effectiveness in coaching with feedback
- Laboratory settings (OSCE's, simulators): same criteria listed above for small group facilitators, plus technical skill/facility

Criteria relevant to clerkships and electives:

- Mentors/attending/supervising instructors: same criteria listed above for faculty in clinical settings

RESEARCH AND SCHOLARLY ACTIVITY

University resources, including training, funding, and funding for training, are available through the Office of Research and Graduate Studies (ORGS) and the Provost's Office. The ORGS provides support to CMU faculty in the form of pre-award guidance, grant writing expertise, budget development, and grant writing training. In the post-award phase, ORGS provides support and training in grant management, budget management, documentation, compliance, effort reporting and accounting.

PROFESSIONAL DEVELOPMENT

FACULTY EDUCATION

All faculty are engaged in the scholarship of education and teaching, making use of both internal and external resources in their efforts. The CMED Professional Development Office provides consultations and training opportunities to all College of Medicine faculty to improve their skills in teaching and assessing students and to support the patient-centered, evidence-based medical education program at Central Michigan University.

Certain faculty education opportunities are required; others are optional, depending on faculty interest in professional growth and development. Faculty members are encouraged to be involved in professional organizations such as Society for General Internal Medicine, Association of American Medical Colleges, Accreditation Council for Graduate Medical Education, International Association of Medical Student Educators, Society of Teachers of Family Medicine, and other similar organizations.

The Deans' offices of medical education, research, and clinical affairs review requests for support submitted on behalf of faculty by the appropriate discipline. Support requests may be made for internal and external development opportunities (e.g., funding, capital equipment, release time) to promote scholarship excellence. All requests receive careful consideration, and a written decision and recommendation will be delivered in return. Requests may be approved, approved with conditions, or not approved with recommendation for revision.

UNIVERSITY SUPPORT

External to the CMED are University offices that support the scholarly work of faculty of the CMED. These offices include the Office of Research and Graduate Studies (ORGS) and the

Center for Excellence in Teaching and Learning (CETL). Descriptions of the programs and support available to the faculty through these offices are available at the following links:

- https://www.cmich.edu/office_provost/ORGS/Pages/default.aspx
- <http://cetl.cmich.edu/>

INSTRUCTIONAL SUPPORT

The CMED provides a faculty medical education development program. All faculty members teaching for the CMED are oriented in detail to the program goals, student learning objectives, student expectations, assessments, and grading system for each course/clerkship. To provide ongoing faculty education, online CMU modules are currently available to faculty covering topics such as instructional techniques, small group facilitation, student observation and assessment, and in-class assessment.

CMU LIBRARY SERVICES/CMU MEDICAL EDUCATION PARTNERS KNOWLEDGE SERVICES

CMU Medical Education Partners Knowledge Services provides reference materials including medical books, journals and other medical printed and online resources. All faculty of the CMED are eligible for this service. The Library Services which support CMED-West are primarily located within the Opperman Learning Commons, which operates as an annex of the University Libraries. The Opperman Learning Commons is designed to be a 24-hour/7 day-a-week group study space, focusing on the promotion of both the educational objectives of the CMED and for life-long learning of medical professionals. The medical library collection is nearly 100% electronic, in order to provide 24/7 on-site and off-site access to library resources. . For additional information, visit the website [here](#).

COLLEGE AND UNIVERSITY GUIDELINES

The links below are provided as a general reference; detailed policies may be found on the CMED [Policies and College Governance](#) and CMU [Policies](#) websites. The listing below cites CMU policies/procedures that may be of particular interest, but is not intended to be an exhaustive listing of all policies and procedures applicable to faculty with an appointment in the CMU College of Medicine.

[Accommodation](#)

[Office of Civil Rights and Institutional Equity](#)

[Environmental Health and Safety Written Plans](#)

[Closing Campus or Buildings, Cancellation of Classes](#)

[CMU's Identity Standards](#)

[Drug-Free Workplace](#)

[Emergency Management](#)

- [Central Alert](#)

[Family Educational Rights and Privacy \(FERPA\)](#)

[Holidays](#)

[Intellectual Property Rights](#)

[Nepotism](#)

[Parking](#)

[Research Opportunities](#)

[Sexual Misconduct](#)

[Tobacco-Free Policy](#)

[Work-Related Injuries/Worker's Compensation](#)