

FACULTY GUIDE OF THE HACKENSACK MERIDIAN SCHOOL OF MEDICINE

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PREAMBLE

Welcome to the **Hackensack Meridian School of Medicine (SOM)**. The purpose of this Guide is to orient you as a faculty member to the School and its policies. The Faculty Guide is not a comprehensive statement of all policies and procedures, nor does it preclude the implementation of changes in policies or procedures. All official policies for the School are published in PolicyStat and are considered the governing policies for the School. Changes to SOM policies, procedures, or requirements will be communicated in emails, on the SOM website, at Faculty Assembly Meetings, or in information memos. Please keep this Faculty Guide as a reference. It can also be found in the Office of Faculty Affairs and on the SOM website.

All provisions of this Faculty Guide apply to the SOM and the jurisdiction of this Faculty Guide extends to all educational programs of the SOM.

Please feel free to check in with the Office of Faculty Affairs for any updates or changes in the Faculty Guide.

SECTION 1: SCHOOL OF MEDICINE VISION, MISSION, PROFESSIONALISM, AND DEFINITIONS

1.1 VISION, AND MISSION STATEMENTS

Vision Statement

Each person in New Jersey, and in the United States, regardless of race or socioeconomic status, will enjoy the highest levels of wellness in an economically and behaviorally sustainable fashion.

Mission Statement

To develop our students, residents, faculty, and healthcare environment to deliver the highest quality care for all.

- Embrace and model our professional reverence for the human condition, empathy toward suffering, excellence in medical care, and humility in service;
- Continue to serve and learn from the engagement of underrepresented minority populations among students, faculty, staff, and community;
- Integrate lifelong learning and inquiry into our students' practice;
- Work in communion with scholars and practitioners of other disciplines to integrate their perspectives, experiences, and tools; and
- Understand that context, community, and behavior drive wellbeing.

1.2 PROFESSIONALISM

The following statement on professionalism embodies the behaviors and attitudes expected for students to develop and demonstrate, and for faculty to role model at all times.

The SOM Statement on Professionalism was adapted from the Charter on Medical Professionalism, a joint project of the American Board of Internal Medicine, American College of Physicians-American Society of Internal Medicine, and the European Federation of Internal Medicine. It was further informed by the SOM's Competencies and Program Level Objectives.

SOM Statement on Professionalism

Medical professionalism forms the foundation of the relationship between the physician and society. Encompassed within this framework are the ethical and moral principles that guide interaction of the physician with patients, the medical profession, and the health care system. The principles of professionalism should pervade all of our activities in medicine, including patient care, education, administration, and scholarship.

Responsibility to Patient

Honesty: Physicians must ensure that patients are completely and honestly informed before the patient has consented to treatment and after treatment has occurred. While patients may not be involved in every minute decision about medical care, they must be empowered to decide on the overall course of therapy. Physicians should also acknowledge that in health care, medical errors that injure patients do sometimes occur. Patients should be informed promptly if medical errors occur, and these errors should be reported and analyzed to provide the basis for appropriate prevention and improvement strategies.

Patient Confidentiality: Earning the trust and confidence of patients requires that appropriate confidentiality safeguards be applied to disclosure of patient information. This commitment extends to discussions with persons acting on a patient's behalf when obtaining the patient's own consent is not feasible. Physicians recognize, however, that their commitment to patient confidentiality must occasionally yield to overriding considerations in the public interest.

Maintenance of appropriate patient-physician relationship: Given the inherent vulnerability and dependency of patients, certain relationships between physicians and patients must be avoided. In particular, physicians should never exploit patients for any sexual advantage, personal financial gain, or other private purpose.

Maintenance of trust: Trust is foundational to the patient-physician relationship and provides a platform onto which appropriate and informed decisions can be made by the patient. This is especially crucial in consideration of the vulnerable state that patients are often in. It is the responsibility of the physician to actively build and maintain this trust by demonstrating attention to all aspects of medical professionalism.

Advocacy and altruism: In their role as an advocate, the physician must consistently support the medical and social needs of the patient to the best of their ability. This advocacy must be carried out in an unselfish manner, and self-interest should not interfere in the care provided to a patient.

Humility: Physicians should be cognizant of the limits of their knowledge and abilities, while consistently striving to improve. Humility helps the physician let go of certainty and provides greater control to the patient in decision-making.

Sensitivity and responsiveness to diversity: Respect for others, regardless of their demography, abilities or philosophy, is central to being a humanistic physician. The physician must be aware of the diversity of the patient population and be able to see beyond their own life to show empathy for all types of patients.

Responsibility to Profession

Maintenance of professional competence: Physicians must be committed to lifelong learning and be responsible for maintaining the medical knowledge, and clinical and team skills necessary for the provision of quality care.

Identifying and managing conflict of interest: Medical professionals have many opportunities to compromise their professional responsibilities by pursuing private gain or personal advantage.

Physicians have an obligation to recognize, disclose to the general public, and appropriately address conflicts of interest that arise in the course of their professional duties and activities.

Creation, use and application of scientific knowledge: Much of medicine's contract with society is based on the integrity and appropriate use of scientific knowledge and technology. Physicians have a duty to uphold scientific standards, to promote research, and to create new knowledge and ensure its appropriate use. The profession and its practitioners are responsible for the integrity of this knowledge, which is based on scientific evidence and physician experience.

Role-modeling: By virtue of their position, physicians act as role models to their colleagues, trainees, and patients. It is their responsibility to be mindful of this aspect of their practice, to reflect on the attitudes and behaviors that they exhibit, and to facilitate discussion in an atmosphere of respect. This includes maintenance of personal wellbeing (mental, emotional, and physical) so as to best serve others.

Responsibility to System, Community and Society

Improving access to care: Healthcare systems must provide a uniform and adequate standard of care. Physicians must individually and collectively strive to reduce barriers to equitable health care. Within each system, the physician should work to eliminate barriers to access based on education, laws, finances, geography, and social discrimination. A commitment to equity entails the promotion of public health and preventive medicine, as well as public advocacy on the part of each physician, without concern for the self-interest of the physician or the profession.

Improving quality of care: Physicians must be dedicated to continuous improvement in the quality of health care. This commitment entails not only maintaining clinical competence but also working collaboratively with other professionals to reduce medical error, increase patient safety, minimize overuse of health care resources, and optimize the outcomes of care. Physicians must actively participate in the development of better measures of quality of care and the application of quality measures to assess routinely the performance of all individuals, institutions, and systems responsible for health care delivery. Physicians, both individually and through their professional associations, must take responsibility for assisting in the creation and implementation of mechanisms designed to encourage continuous improvement in the quality of care.

Just distribution of resources: While meeting the needs of individual patients, physicians are required to provide health care that is based on the wise and cost-effective management of limited clinical resources. They should be committed to working with other physicians, hospitals, and payers to develop guidelines for cost effective care.

1.3 DEFINITIONS

- a. "Faculty" or "Faculty Member" denotes a person or persons who is/are employees of the SOM, **Hackensack Meridian Health (HMH)**, or an affiliate of HMH, or are self-employed or employed in a private practice, having duties in the SOM, and an approved faculty appointment commensurate with their experience and credentials. Faculty in the SOM are not tenured; they have term appointments.
- b. "Core Faculty Members" include those who dedicate comprehensive efforts in support of the academic mission of SOM or HMH through scholarship, teaching, and service; this group may include those who are self-employed or employed in a private practice by an affiliate of HMH. The academic titles for Core Faculty members are Instructor, Assistant Professor, Associate Professor, or Professor of Department (e.g., Assistant Professor of Pediatrics) and Clinical Assistant Professor. Only core faculty members who hold the title of Professor, Associate Professor, or Assistant Professor are voting members of the faculty assembly and can serve on committees.

Core faculty members may not hold a tenure position at another institution. Such individuals will be considered adjunct faculty members as described below. Core faculty members also include "**Clinical Instructor**" and "**Clinical Assistant Professor**" who have teaching as their primary commitment to the Mission of the SOM; this group may also include those who are self-employed, employed in a private practice, or an affiliate of HMH. This option, designed to be chosen between the academic Chair and the candidate, requires fewer steps and less documentation of recognition by the medical community and is typically faster. They are non-voting members of the faculty assembly and cannot serve on committees.
- c. "Adjunct Faculty Members" have a primary appointment at another academic institution who will teach or host students or engage in research at the SOM. Terms are for two years; renewals require an up-to-date rationale for the appointment from the Department Chair and are at the discretion of the SOM. There is no rank associated with this appointment. Adjunct faculty members may not hold leadership positions within the SOM, are not members of the faculty assembly, and cannot serve on committees within the SOM.
- d. "Visiting Faculty" are scholars visiting the SOM for teaching, learning, and/or scholarship (including research) for variable periods and have an approved faculty appointment commensurate with their experience and credentials. Terms are for one year.
- e. "Emeritus/a Faculty" The academic title for an Emeritus/a faculty member is Emeritus Professor. They are retired professors from their professional activities but continue to contribute to the academic milieu.
- f. "School", "School of Medicine", or "SOM" refers to the Hackensack Meridian School of Medicine.
- g. "Academic Calendar Days" - days of the academic year (Monday through Friday), excluding academic holidays.
- h. "Academic Year" - July 1 to June 30.
- i. "Accredited Institution" - an academic institution accorded that status by an accrediting agency approved by the specific relevant professional organizations and agencies.
- j. "Accredited Program" - an academic program within an accredited institution, accorded that status by an accrediting agency approved by the specific relevant professional organizations and agencies.
- k. "Administration" or "Administrators" - includes the SOM Dean, Vice Dean, Associate Deans, Assistant Deans, Department Chairs and Vice Chairs.

- l. "Affiliate" or "Affiliated Institution" - a hospital, organization, or health care entity that has a formal relationship or association with Hackensack Meridian Health.
- m. "Appointment" - the written notification of a decision regarding initial faculty rank, promotion, or specific committee assignments, signed by both the Dean and Faculty Member, and articulating: (i) a rank, (ii) full- or part-time status, (iii) Primary (and, if appropriate, Secondary) department, and (iv) specified duration.
- n. "Calendar Days" - the seven days of the week.
- o. "Conflict of Interest" - any situation in which a faculty member's judgment and impartiality may be impaired by considerations of their own interest; or a clash between the personal interests of the individual and their professional obligations, when the individual tries to perform that duty, while at the same time tries to achieve personal gain; the understanding and application of which will be guided by generally-accepted standards of similar institutions of higher learning or as otherwise proscribed by HMM and/or SOM policy, including the [SOM] Conflict of Interest and Commitment Policy.
- p. "Department" - an academic instructional unit composed of one or more faculty members. It is headed by a "Chair" or "Chairperson" who is the functional head of the Department. Chairs may appoint one or more "Vice Chairs", who assist the Chair in their duties. The position of Chair and Vice Chair are administrative positions representing the Departments of the SOM, and are distinguished from administrative positions within HMM (e.g., "Clinical Chair", "Section/Division Chief", "Service Line Director")
- q. "Fiscal Year" - HMM's fiscal year; January 1 to December 31.
- r. "HMM" - Hackensack Meridian Health.
- s. "Notification" - a written communication that shall be effective if delivered personally to the faculty member either by certified mail to the Member's residence or sent electronically by the suggested date with a "read and receipt" response.
- t. "Search Committee" - a committee appointed and convened for identifying potential candidates for an open position and recommending one or more of the candidates to the Administration for further consideration.

SECTION 2: PROCEDURE AND STANDARDS FOR FACULTY MEMBERS OF THE SCHOOL OF MEDICINE: APPOINTMENT, APPOINTMENT RENEWAL, PROMOTION, ANNUAL REVIEW, AND DISMISSAL

2.1-2.9 GENERAL CONDITIONS AND ELIGIBILITY TO BE A FACULTY MEMBER OF THE SCHOOL OF MEDICINE.

[Click here to be linked to the Guide to Navigating Appointments and Promotions document.](#)

To contact the Office of Faculty by email, please message SOMAPC@hmhn.org, or call (862) 220-4418.

2.10 ANNUAL EVALUATION OF FACULTY

It is the responsibility of SOM (Department) Chairs or their designees to provide annual evaluations of all faculty members appointed within their Departments. Written notification shall be provided by the Department Chair to each faculty member, i.e., Assistant, Associate and Full Professor, but not Clinical Assistant Professor, giving him/her at least 30 days before the evaluation to provide the materials required herein.

The materials to be provided for the annual evaluation shall include an annually updated Annual Evaluation Form developed by the Office of Faculty (and approved by the dean) and associated documentation of achievements, an updated CV, and a copy of the physician's current license (if relevant).

- a. The Department Chair shall assess the materials submitted by each faculty member and writes his or her annual evaluation. If a Department Chair does not have routine contact or knowledge of the performance of a faculty member, the Department Chair may elect to solicit feedback from the Clinical Chair at the hospital wherein this faculty member is based, or one of their Vice Chairs or other individuals in a supervisory role who has knowledge of the individual faculty member's performance.
- b. The Department Chair shall meet annually with each faculty member in their department by June 30 to review the evaluation and to discuss the goals of each faculty member for the upcoming year.
- c. The Department Chair and the faculty member shall each sign the Annual Evaluation Form to acknowledge that it was read and discussed.
- d. In the case of joint faculty appointments, the Department Chair representing the faculty member's Primary departmental appointment may elect to solicit feedback from the Chair representing the faculty member's secondary departmental appointment. If there is disagreement between the evaluations of the Primary and secondary department chairs, the opinion of the Primary departmental chair will prevail.

2.11 RESIGNATION OF FACULTY MEMBERS

- a. Notice of resignation must be given in writing to the dean of the SOM before the next teaching assignment and at the earliest opportunity, but no later than 90 days before the date of termination
- b. Under extreme circumstances, the faculty member may request a waiver of this requirement of notice or may request to leave before the end of the academic phase or term in which they have a primary teaching responsibility. Notification of resignation or of a waiver request shall be submitted in writing by the faculty member to the dean of SOM.

2.12 DISMISSAL OF FACULTY MEMBERS

- a. Termination of a term appointment before its specified end shall be affected by the SOM only for adequate cause as specified in this Section. Termination may be initiated by the SOM Chair or the dean of the SOM. Final decision for termination requires agreement between both the Department Chair and the dean.
- b. Adequate cause for dismissal shall be related directly and substantially to the fitness of the faculty member in his or her professional capacity. The burden of proof that adequate cause exists rests with the SOM. Such a termination shall not be used to restrain a faculty member in the exercise of academic freedom or exercise of other rights normally granted to American citizens generally.

- c. Adequate cause may exist only for one or more of the following reasons:
- i. Continued neglect of scheduled duties despite being notified of same in writing previously; Serious violation of the rights and freedoms of fellow faculty members, administrators, or students including, but not limited to, violations of Title VII and/or Title IX or equivalent local and state laws;
 - ii. Failure to follow SOM procedures and policies (including, but not limited, satisfactory completion of a background investigation and completion of other pre-employment requirements);
 - a. Title IX Contact
Laurie Sullivan, Associate Dean for Student Affairs and Wellbeing
340 Kingsland St. Building 123, Office 4237
Nutley, NJ 07110
(973) 542.6778
laurie.sullivan@hmhn.org
 - iii. Unethical professional behavior related to teaching, scholarship, or service, and/or unethical professional behavior with regard to the general standard of performance expected as a faculty member, and/or unethical professional behavior as dictated by the profession generally, which would normally lead to revocation of licensure or certification. In the context of scholarship (including research), misconduct is defined as the intentional, knowing, or reckless fabrication, falsification, or plagiarism in proposing, performing, or reporting research results, or other serious act(s) of academic dishonesty;
 - iv. Conviction of or discovery of a crime directly related to the faculty member's fitness to practice his or her profession;
 - v. Intentional falsification of credentials or academic experience;
 - vi. Permanent loss of required professional licensure and/or certification (not including suspension without revocation);
 - vii. Illegal immigrant status or losing permanent resident status, loss of work visa, or right to reside or work within the United States;
 - viii. Moral turpitude, extensive malpractice history, being/becoming uninsurable in regard to clinical status, and fitness to practice his or her profession, if relevant to the faculty member's duties.
- d. The faculty member shall have 30 calendar days after being notified in writing by the SOM Department Chair regarding the reason(s) for dismissal to respond. The reasons for dismissal should be clearly described to the faculty member. In the written response by the faculty member, he/she may elect to have the process for the determination reviewed by the Grievance Committee, as set forth in Section 7 of the Faculty Guide. The Grievance Committee shall have 30 calendar days to make its recommendations regarding the process and procedures followed and provide their findings in writing to the faculty member and the SOM Department Chair.
- e. After considering the Grievance Committee's report, if the faculty member is still dissatisfied, he/she may appeal to the dean. The dean will review the reasons for dismissal, the faculty member's grievance, the Grievance Committee's report, and shall inform the faculty member, the SOM Department Chair and the Grievance Committee, in writing, of their decision. After review of all documents and conferring with the Department Chair, if it is the dean's decision to modify or reject the Department Chair's recommendation for dismissal, the dean shall state his or her reason(s) in writing.
- f. A decision by the dean to sanction a faculty member before the end of a specified term may be appealed for a joint review by the HMH CEO and the BOG Chair. Such an appeal must be filed with the dean, the HMH CEO and the BOG Chair by the faculty member within 30 calendar days after the faculty member has received notice of the dean's decision, according to Section 2.5(d) herein.

SECTION 3: STANDARDS FOR DEPARTMENT CHAIRS OF THE SCHOOL OF MEDICINE: RESPONSIBILITIES, APPOINTMENT, REVIEW, RESIGNATION/REMOVAL, AND PROMOTION

RESPONSIBILITIES AND DUTIES OF CHAIRS

- a. A Chair is responsible for all faculty members and functions of his or her SOM Department. In addition to faculty responsibilities, the Department Chair shall perform the following duties either personally or by prior agreement through a Vice Chair, or by delegation on a case-by-case basis to a Vice Chair:

Administration:

- i. Recognize the potential importance of physician-patient and faculty-student congruency with regard to race, ethnicity, and/or gender in health care outcomes, seek to recruit, retain and develop members of 'underrepresented in medicine' minority populations in all disciplines and professions. Such efforts will include, but are not limited to, increasing awareness of health care disparities, and emphasizing these issues within Departments. Help in SOM efforts to increase diversity among its faculty, resident programs, student, and staff.
- ii. Make decisions concerning the appointment, reappointment, promotion, and dismissal in accordance with approved procedures. Note: Development and constitution of departmental Appointment and Promotions Committee (APC) are to be considered on a department-by-department basis. Prior to constituting such a committee, the Department Chair is expected to notify the Dean of this intention and to share the departmental plan with the departmental Vice Chairs and the Dean for their consideration and feedback. The Dean's approval is necessary for said committee to be activated.
- iii. Support, collaborate on, and initiate strategic plan-driven projects including those related to the quality of medical education, service, and research/scholarship and innovation, as appropriate, with the support of the Office of Medical Education and of Research and Graduate Studies, respectively. These efforts should ensure regular data-driven assessment of programmatic initiatives and identification of **Specific - Measurable - Achievable - Realistic - Timely (SMART)** goals.
- iv. Assist in the preparation of the Department budget, using mission-based budgeting to clearly delineate the clinical, administrative, educational, service and research units therein.
- v. Approve or disapprove requests for purchases by the SOM originating with Department Faculty Members. Purchases funded through the SOM budget must be approved to applicable SOM budgetary and finance procedures. Propose, seeks approvals, and implement expectations and amendments to broader HMM network policy when justifiable as per the needs of the Department or SOM.
- vi. Arrange for mentoring activities within the Department for faculty, trainees, and students as needed, requested, and/or when referred by other SOM departments or offices.
- vii. Present at the end of the academic year, a written evaluation containing standardized data reflecting teaching, service, and scholarship activities, progress in reference to goals and objectives, as well as subjective comments for each faculty member – and copied to the Dean. Notify faculty of upcoming evaluations and their obligations to submit annual performance data in a timely manner. (Note that initial annual review reminders are issued to the faculty by the Office of Faculty).
- viii. Submit an annual report to the Dean on the work of the Department – providing the scope of teaching, service, and scholarship activities undertaken by the faculty. Prepare other reports as requested by the Dean.
- ix. Prepare material for accreditation catalogues, webpages, and other documents, as required and requested by the Dean, or his or her SOM designees.
- x. Hold at least two (2) meetings of the entire Departmental Faculty each year (either in person or electronically). Plan meetings with the goal of allowing as many Faculty to attend as possible. Provide and forward minutes of all Department meetings to the department faculty and retain them for review by the Dean if requested.
- xi. Support the recruitment of physician faculty with experience in medical school teaching, research/scholarship, and related service.
- xii. Appoint an Acting Chair or clearly articulate the role(s) of the Vice Chair(s) who will serve during scheduled or emergency absences of the Chair of more than 15 calendar days and inform the Dean and the department personnel of this temporary appointment and of the expected dates of absence.

- xiii. Develop departmental infrastructure such that the needs of the Chairs, Vice Chairs, and the educational and research units are met.
- xiv. Deploy a common SOM metric for identifying the amount of time spent by Faculty Members on SOM activities requested by the Department Chair and/or SOM Dean. This data – prepared semi-annually – is to serve as a guide to assessments/reassessments of a faculty members efforts on behalf of the SOM and will constitute the basis for commensurate reimbursement from the SOM. Perform such other duties as are necessary for the efficient operations of the Department.

Teaching

- xv. Support the recruitment of faculty. Where possible, coordinate Chair/Vice Chair hiring between the HMH network and the SOM to assure that clinical and educational needs of both enterprises are accommodated.
- xvi. Advocate of behalf of faculty and petition the HMH network to ensure at least 10% supported teaching time which will be reevaluated for each Faculty Member on a semi-annual basis by the chairs to assess whether this accurately reflects the actual teaching time. If not, the Chair would be expected to increase or decrease the teaching/research time for the individual and report these changes in allocation to the Dean. If additional funds are needed for such reassessments, the Dean would deploy any available resources in the current budget year and seek to gain more resources for this person in the subsequent year.
- xvii. In consultation with the Office of Medical Education, assigns and approves/authorizes Faculty Member teaching schedules.
- xviii. Recognize the importance of faculty development in creating effective teachers and sustaining quality of education across the SOMs curriculum HMH residency programs – encourage participation in development activities (including through required attendance at SOM orientation, faculty development session(s), and/or creation of a teaching peer review program.
- xix. Offer orientation and other recommended faculty development sessions to enable usage of appropriate adult learning methodologies.
- xx. Request, evaluate, and monitor aggregate, overall and when appropriate, individual teaching data for all courses, clerkships, and faculty in the Chairs department. The SOM Office of Medical Education should provide such data to the Chairs at least on an annual basis, appropriately formatted and in a timely manner (e.g., no later than three months after the end of an academic year).
- xxi. Support Graduate and Continuing Medical Education programs, when applicable, including mentoring in teaching and scholarship, and encouraging attendance at SOM sponsored faculty development, research seminars and investigator training lectures.
- xxii. Prepare and deliver Department specific introductions to Phase 1 students. Cultivate opportunities to introduce and expose Phase 1 students to a wide variety of specialty and subspecialty practices at the request of the Dean's cabinet.
- xxiii. Respond to students' feedback comments and concerns regarding educational or research encounters offered through the SOM and involving the Department faculty. This may include an after learning session conversation or written course evaluation feedback.

Research / Scholarships and Service

- xxiv. Encourage and facilitate faculty and student scholarship and identify opportunities for research, including collaborative research across departments and centers. Provide mentoring and guidance to Faculty and students regarding opportunities for research including required qualifications and description of the protected time and/or funding available.
- xxv. Collaborate with and notify the Chief Medical Librarian regarding annual scholastic needs. Survey Department Faculty for recommendations.
- xxvi. Encourage, recognize, and reward service with the Department, the HMH network, the SOM, and/or the community.

3.1 APPOINTMENT OF CHAIRS

SOM Chair search

Overview: The 20 individuals filling the 20 positions of School of Medicine Department Chair (SOM Chair) must each oversee the distinct, and at time competing interests, needs, and obligations of the three critical domains of a Department: clinical service (for clinical departments); research, and education. (This responsibility differs from the responsibility of many Hospital Chairs who may be largely (or exclusively) focused on the clinical activities of the department or clinic with some (but more limited) educational activities.) Therefore, it is important that all of these responsibilities be reflected in the composition of the SOM Chair Search Committees.

- 1. From the time that the SOM Chair steps down until the new SOM Chair is appointed, an Interim Chair shall serve.**
 - a. The dean will select the Interim SOM Chair.
 - b. The dean will notify the HMMH CEO of this decision prior to any announcement.
 - c. The Interim appointment will allow for the continued functioning of the SOM Department and will enable an orderly search for the selection of the permanent SOM Chair. In general, it is expected that the dean would select the Interim Chair from among the existing Hospital Chairs and/or Vice Chairs. The dean may seek input from the SOM faculty from the impacted department, but this input would not be required. Although not time limited, it is expected that an appointment to the role of Interim Chair would not exceed two years. An Interim Chair may or may not be a candidate for the permanent Chair position.

- 2. Situations requiring the appointment of a new SOM Department Chair**
 - a. SOM Chair steps down (or announces the intention to do so within the next six (6) to twelve (12) months) from his or her roles as both SOM Chair and as Hospital Chair: Two scenarios are possible in this situation.
 - i. The SOM Chair search, and the separate but concurrent Hospital Chair search occur in parallel. In such case, the candidates for the vacant Hospital Chair position who are also interested in the SOM Chair position would need to be interviewed by both the SOM Chair Committee and the Hospital Chair Committee.
 - ii. In the situation in which a SOM Chair announces *in advance* of their intention to step down from both positions, the Hospital Chair search could first be conducted and completed, and then if the successful Hospital Chair candidate is also interested in the SOM Chair position, he/she could compete for this position along with the other interested Hospital Chairs who wish to be considered
 - b. SOM Chair wishes to stepdown as SOM Chair but retain Hospital Chair position: To be decided on a case-by-case basis by the HMMH CEO (or their designee), in consultation with the dean, if this will be permitted. If permitted, the other Hospital Chairs would proceed with SOM Chair search.
SOM Chair wishes to step down as Hospital Chair but remain active as SOM Chair: To be decided on a case-by-case basis by the Dean, SOM.

- 3. Configuration of the SOM Chair Search Committee:**
 - a. Selection of the Search Committee Leader:
 - i. The dean will select this individual, in consultation with the HMMH CEO.
 - ii. Typically, the search committee leader will be a sitting SOM Chair. Rarely, it may instead be a member of the dean's Cabinet.

- b. Formation and selection of the other search committee members:
- i. Three (3) faculty from the SOM department for which the Chair search is being conducted
 - ii. These departmental faculty will represent the departmental membership across the network and therefore should include representatives from all the North, Central and South regions
 - iii. The selected faculty will include at least one individual with substantial research experience and will be made in consultation with the Associate Dean for Research and Graduate Studies.
 - iv. Typically, the recommendations for the remaining two faculty will be made by the two network Chief Academic Officers and the Associate Dean for Research and Graduate Studies
 - v. Under optimal conditions, the selected faculty should not be located within the Hospital departments of the candidates for the Chair position. When this option is not realistic then: there should be parity (e.g. consideration should be given to selecting the faculty from the other Hospital department(s) from which a candidate has emerged); and, 2) the dean must meet each of these prospective search committee members to ascertain that they do not have a close personal relationship with any one of the Chair candidates, especially the one chairing the faculty member's current hospital department.
 - vi. Two (2) faculty from other clinical departments
 - These two faculty should be located in hospitals in different regions,
 - One of these members should be from a closely aligned department (e.g., from OB-GYN for the Chair, Department of Pediatrics; from Surgery for the Chair, ENT, etc.)
 - Typically, the recommendations for these two positions will be made by the two network Chief Academic Officers
 - vii. Three (3) faculty members representing Research
 - One faculty member of Department of Medical Science (to be selected by the Chair of this Department.)
 - One member of **Center for Discovery and Innovation (CDI)** (to be recommended by the Director of the CDI)
 - One community/population health or behavioral health researcher (To be recommended by the Associate Dean for Medical Education)
 - viii. Representative from the SOM Faculty Assembly-one (1) representative from the Faculty Assembly to be selected by the President of the Faculty Assembly
 - ix. Three HMM representatives outside of the SOM and clinical departments-- one representative from each category below to be selected by the HMM CEO or their designee
 - One HMM Leadership
 - One **Care Transformation Services (CTS)** President
 - One Regional President

3.2 REVIEW OF CHAIRS

a. Annual Review

The dean will meet with the Chair on an annual basis to review his or her Department's progress in each of the four (4) domains listed below and discuss goals and objectives for the forthcoming year. The Chair will present a plan to the dean based on and organized around the SOM's Strategic Plan. During this review, the dean will emphasize areas of success as well as those areas requiring remediation and develop specific plans to accomplish the latter. These remediation plans, as well as the Department's continuing progress in other areas, will be monitored through periodic reassessments with the Chair at regularly scheduled intervals, depending on the nature and magnitude of the issues. The review will focus on the academic mission (teaching and scholarly outputs of the department), the administrative leadership, oversight and support provided by the Chair to his or her Departmental faculty, including the ability to balance the clinical and financial demands in equilibrium with the academic demands. The domains in which the Chair will be evaluated are:

- i. **TEACHING:** Evidence may include, but is not limited to, SOM teaching data reports, data from SOM teaching evaluations of Departmental courses and programs by Departmental faculty, residents and students; departmental engagement in inter-professional efforts by the SOM; narrative comments from residents and students; materials from new courses prepared (or in preparation); samples of instructional materials such as syllabi, manuals, or other materials developed by the instructor for use by students in courses; records of supervision of graduate theses and dissertations; clinical supervision and practica; reports of classroom observations by Department Chair or senior faculty members; publication of books or articles on teaching methods; enrollment in courses or programs designed to improve teaching.
- ii. **SCHOLARSHIP:** Evidence may include, but is not limited to, Departmental faculty members' published articles including online medical education peer-reviewed sites, manuscripts in press (accepted for publication), copies of acceptance letters (or emails) for papers presented at professional meetings, copies of letters of invitation to present at professional meetings, copies of grant award notifications, and participation in grant review study sections.
- iii. **SERVICE:** Evidence may include, but is not limited to, letters appointing a faculty member to a school-wide; an affiliated hospital committee; a community-based committee relevant to the SOM's Mission or professional association committee; copies of awards received for service provided to professional and community-based organizations, and evidence of sustained clinical activity for Chairs of clinical departments.
- iv. **ADMINISTRATION:** Evidence may include, but is not limited to, contributions of the Chair's unit to the Vision and Mission of the SOM; active engagement in school-wide chair and other leadership committees; a listing of faculty and staff supervised; list of committees, chairmanships, and key committee accomplishments; description of programs developed or expanded; quality outcomes; achievement of budget and productivity targets; or explanation of negative variances.

b. Term Review

- i. All Department Chairs will be subject to a comprehensive performance review to be initiated 18 months before the end of the Chair's term. The evaluation will be conducted by the dean of the SOM.
- ii. Formal input from Department Faculty and other constituents beside Department faculty members (e.g., staff, students, representatives of other departments), may be requested at the discretion of the dean, and incorporated into the Chair's performance review.
- iii. Before their performance review, and according to a schedule determined by the dean of the SOM, Department Chairs must submit a portfolio to be used in their review. Chairs will be expected to provide an overview and examples of evidence to substantiate their department's administrative accomplishments in Teaching, Scholarship and Service (as well as their own personal accomplishments). They will also be requested to prepare a narrative regarding their own administration skills and accomplishments during the current term of appointment. This section should include a statement of the Chair's leadership philosophy, leadership challenges and achievements, and should describe strategies used to motivate and lead others. This section

should conclude with a statement (or list) of proposed leadership goals and objectives for the Department and the Chair. Following the narrative, the Chair should submit evidence of achievements in administration, such as a list of achieved goals, new policies, procedures, or initiatives, or Department documents created by the Chair for the current term of appointment. The Chair should provide evidence that substantiates the achieved goals.

- iv. Department Chairs, as all faculty, will be reviewed for all personal and academic performance.

3.3 RENEWAL OF CHAIRS

Department Chairs of the School of Medicine may have their appointment as Chair renewed for a term of up to five (5) years. There is no limit to the number of terms that a Chair may be appointed.

Renewal of Department Chairs for an additional term will be dependent on the outcome of the Chair's performance review and is at the discretion of the dean, with approval by the CEO of HMH. Renewal of a Chair will automatically serve as renewal of the Chair's faculty appointment at their existing rank. If an individual is not renewed as a Department Chair, or if they choose to step down as Chair, then they must follow the guidelines and procedures for faculty reappointment and promotions (Sections 2.6 – 2.9). Promotion of Chairs is described in Section 3.5 below.

3.4 RESIGNATION OR REMOVAL OF SOM CHAIRS

- a. The term of Department Chairs shall be consistent with the terms as described above. In general, a SOM Chair of a Clinical Department will also be a Chair of said department at one of the HMH hospitals. *In such case*, should a SOM Chair of a Clinical Department resign or otherwise vacate their clinical Chair position at HMH, in general, said Chair would resign or otherwise be relieved of their Chair position at the SOM. This decision will be made by the dean in consultation with the CEO of HMH.
- b. At the end of a term, a Department Chair may choose to step down. Consistent with the process described in Section 3.2, the Chair must indicate to the dean, in writing, of the decision to step down at least six (6) months in advance, so that a new Chair search may be initiated and/or so that an acting/interim Chair may be appointed until the new Chair is appointed.
- c. Proceedings to relieve a Department Chair appointed by the SOM from administrative duties, during or at the end of a term, may be initiated by the dean of SOM. The Chair serves at the pleasure of the dean and thus may be removed as Chair by the dean at any time, although the dean is encouraged to consult with the Chair to express sources of dissatisfaction and to offer remedial assistance before taking any such action. Before removal, the dean must also consult with the HMH CEO. The dean will have discussed this decision with the HMH CEO.
- d. Relieving a Department Chair from their duties does not constitute removal of the individual from their position as a faculty member, and he/she may return to their pre-Chair faculty responsibilities, unless the faculty member's appointment with the SOM is terminated in compliance with Section 2.11.
- e. In case of the death, resignation, or removal of a Department Chair or of a vacancy in the office occurring for any other reason, the dean of the SOM (in consultation with the HMH CEO) shall designate an acting or interim Chair to serve until a new Chair is hired according to Section 8.1 herein. The dean shall convene a Chair Search Committee for hiring a new Department Chair, in consultation with the HMH CEO within 60 days of the vacancy.

3.5 PROMOTION OF CHAIRS

As faculty members of the SOM, Department Chairs are eligible to apply for promotion.

Promotion (i.e., from Assistant Professor to Associate Professor, from Associate Professor to Professor) of Chairs will follow the same policies and procedures for promotion of faculty members outlined in Sections 2.1 – 2.9.

3.6 RESPONSIBILITIES AND DUTIES OF VICE CHAIRS

- a. Each SOM Department Chair may elect to appoint one or more Vice Chairs (typically not to exceed three) with the role as described below. If the SOM Chair feels that the additional Vice Chair(s) is needed for effective management, he/she shall submit a written request to the dean specifying the need. Additionally, a Department Chair may elect not to appoint a Vice Chair if, after consultation with the dean, it is determined that there is not a necessity for a Vice Chair. The dean must be notified within 48 hours of the appointment of a Vice Chair.
- b. Vice Chair responsibilities and duties should be determined by the Department Chair in collaboration with the Vice Chairs. Vice Chairs should be assigned duties related to assisting in all matters requiring the use of the full HMH network, including:
 - i. In consultation with the Chair and SOM administration, assign Faculty Member teaching schedules.
 - ii. Participate personally in teaching, mentoring and precepting activities.
 - iii. Recommend to the Chair the appointment, promotion, dismissal, reappointment, and the leaves of all Department Faculty Members across HMH, in accordance with the proved procedures.
 - iv. Coordinate and support the Chair in the planning and coordination of the Department Faculty meetings.
 - v. Arrange for mentoring activities across the HMH system for Faculty, trainees and students with the Department.
 - vi. Assist the Chair in all mutually agreed upon matters.
 - vii. Encourage and facilitate SOM community service.
 - viii. Prepare material for accreditation and reaccreditation, catalogues, and other official documents, as required and requested by the Chair.
 - ix. Response to students' concerns.
 - x. Provide oversight of residency/fellowship/Continuing Medical Education programs when applicable.
- c. The Chair should clearly discuss the expectations of the vice Chair role and duties (which may change over time). A good practice is to review any specific responsibilities/duties at the beginning of the year and set clear, agreed upon goals for the upcoming twelve months.
- d. The Vice Chair may be dismissed from this administrative role at the Chair's discretion following consultation with and concurrence by the Dean. Relieving a Department Vice Chair from their duties does not constitute removal of the individual from their position as a faculty member, he/she may return to their pre-Vice Chair faculty responsibilities, unless the faculty member's appointment with the SOM is terminated in compliance with section 2.11.
- e. The Vice Chair may be considered for promotion as a faculty member while serving as Vice Chair. The same criteria apply to this promotion as for any other faculty member. Duties included in the role of Vice Chair qualify as Service, as described in Section 2.8 of the Faculty Guide.

SECTION 4: LEAVES OF ABSENCE FOR FACULTY MEMBERS OF THE SCHOOL OF MEDICINE

4.1 SABBATICAL LEAVE

Core faculty members of the SOM are eligible, consistent with the provisions of this Section, to apply for sabbatical leave. The SOM expects to activate its Sabbatical policy after receiving Full Accreditation from the Liaison Committee for Medical Education (LCME). Until that time sabbatical leave will not be approved. Details other than what is noted below regarding the sabbatical program will be determined at the time that a decision is made as to the nature and scope of any such program.

The major purpose of sabbatical leave is to provide an opportunity for continued professional growth and new or renewed intellectual achievement through study, scholarship (including research), scholarly writing, or professionally related travel.

The number of sabbatical leaves awarded each year shall depend on the financial ability of the SOM or HMH to meet its continuing obligation to provide a balanced, quality academic program to its student body.

Remunerated employment for faculty during the sabbatical leave period shall only be made with the advance written consent of senior administration of the relevant entity.

4.2 LEAVES OF ABSENCE

Each faculty member's employer establishes eligibility and terms concerning other leaves of absence (e.g., unpaid leave of absence; medical leave; and leave for political activity, government service, military service, and jury duty).

SECTION 5: RIGHTS AND RESPONSIBILITIES OF FACULTY MEMBERS

5.1 ACADEMIC FREEDOM

- a. All members of the Faculty in the SOM are entitled to academic freedom as set forth in the 1940 “Statement of Principles on Academic Freedom and Tenure with the 1970 Interpretative Comments” formulated by the Association of American Colleges and the American Association of University Professors (a copy of this document is available in the Office of the dean and at <https://www.aaup.org/file/1940%20Statement.pdf>).
- b. Academic freedom is essential to the purposes of the SOM and applies to both teaching and scholarship (including research). Freedom in scholarship (including research) is fundamental to the advancement of knowledge. Academic freedom in teaching is fundamental for the protection of the rights of the teacher and of the student.
- c. Faculty members are entitled to freedom in discussing their academic subjects.
- d. When faculty members speak or write they are free from SOM censorship, but their special position in the community imposes special obligations. As scholars and members of the SOM, they should remember that the public may judge their profession, the SOM, and HMH by their remarks. Therefore, they should always endeavor to be accurate to exercise appropriate restraint, and to show respect for the opinions of others. While properly identifying themselves to outside audiences, they should not purport to function as institutional spokespersons unless specifically commissioned by the dean, or his or her designee, to serve in such capacity.
- e. Faculty members’ primary responsibility to their subject matter is to seek and to state the truth as they understand it based on their study and experience. They are expected to devote their energy to develop and improve their scholarly competence. They are obligated to exercise critical self-discipline and judgment in using, extending, and transmitting knowledge. Faculty members must practice intellectual honesty.
- f. As teachers, faculty members encourage the free pursuit of learning in their students and protect student academic freedom. They foster honest academic conduct and, on their part, provide equitable evaluations of student performance. They respect the confidential nature of the relationship between faculty member and student. They acknowledge significant assistance from students and avoid any exploitation of students for their own private advantage. Consistent with the Student Assessment Recusal Policy, faculty members who have a pre-existing patient-provider relationship with a student or agree to establish a non-emergent patient-provider relationship, must recuse themselves from being involved in that student’s assessment or academic promotion.
- g. If a faculty member alleges that violation of academic freedom significantly contributed to a decision adverse to him/her, he/she should employ the grievance procedures specified in the General Grievance Policy, SOM.ADM.206.

5.2 GENERAL FACULTY RESPONSIBILITIES

- a. Core Faculty holding 12-month appointments for the fiscal year have professional responsibilities to the SOM for the period commencing July 1 and ending June 30.

A faculty member may utilize their vacation benefits (as established by their employer) with advance approval by the Departmental Hospital Chair, and so long as any vacation time(s) does not interfere with the faculty member’s responsibilities. If the Departmental Hospital Chair is not the same individual as the SOM Departmental Chair, the faculty member should also notify the SOM Chair that he/she will be on vacation.

- b. In addition to teaching, scholarship (including research), and service, the primary professional responsibility of each member of the faculty is to the SOM to HMH, and the profession. Because faculty members should display a high degree of professionalism, they shall:
 - i. keep informed of contemporary developments in pedagogy and in their fields of specialization; aspire to excellence in teaching, promote the learning process, and stimulate the intellectual development of their students;
 - ii. accept a reasonable number of assigned or elected committee responsibilities and conscientiously serve on those committees of which they are members;
 - iii. serve as a resource to the SOM, HMH, or departmental student organizations, when this is consistent with other obligations;
 - iv. recognize their obligations to the SOM, SOM graduates, and their families, and to HMH by attending annual academic and hospital events;
 - v. adhere to reasonable deadlines and schedules established for the timely reporting of grades and for other matters related to student registration and record keeping; and
 - vi. assume a reasonable share of responsibility in student academic advisement, the student academic review process, and in curriculum review and development.

5.3 SCHOOL OF MEDICINE FACULTY MEMBER DUTIES

a. **School of Medicine Faculty Expectations**

- i. Faculty members in the SOM will have widely varying roles and responsibilities. As such, specific expectations and limits related to didactic teaching, clinical productivity and supervision, clinical research targets, and scholarly productivity, as well as administrative assignments, should be developed for each faculty member in conjunction with the departmental SOM Chair, and in concordance with the needs of the department and the SOM, as included in their job descriptions.
- ii. If a faculty member believes that assignments or expectations are excessive, they shall resolve the concern with the Department Chair. If a solution cannot be achieved, they may request a meeting with the dean.
- iii. Faculty members are expected to advise students. Advising includes activities such as mentoring, remediation, and professional development.
- iv. Workload assignments shall be made in an equitable fashion.

b. **Professional activities and professional services**

The SOM and HMH encourage faculty participation in other unpaid professional activities that add to the faculty member's knowledge, qualifications, and reputation, and to the reputation of the SOM, so long as these activities do not interfere with their primary responsibility to the SOM or HMH. The faculty members shall cooperate with the SOM and HMH in striving to inform the SOM and HMH community, and the outside community of such achievements.

5.4 OUTSIDE FACULTY EMPLOYMENT

Non-clinical SOM faculty members hired directly by the SOM may pursue outside employment as related to their profession but must advise their Department Chair in writing of the faculty member's roles and responsibilities in advance of accepting such employment. Before accepting each new consulting position, the faculty member must update his or her SOM and HMH annual Conflict of Interest forms, as applicable to the terms of their employment. External faculty employment should not coincide with regular work hours at the SOM or require more than 20 percent of full-time employment during the course of a year in total.

SECTION 6: FACULTY SCHOLARSHIP (INCLUDING RESEARCH) AND SPONSORED ACTIVITIES

6.1 SCHOLARSHIP (INCLUDING RESEARCH)

Teaching and scholarship (including research) are complementary activities. A faculty member's professional development requires a continuing commitment to scholarly research and publication. The SOM encourages faculty members to engage actively in scholarship (including research) and other professional activities for the advancement and dissemination of knowledge. Such encouragement includes the promulgation of policies and procedures necessary to foster a climate for scholarship (including research), the provision for internally funded scholarship (including research), and the endorsement and support of acceptable proposals to external sources for sponsorship.

Administrative structures and policies are in place at HMH, and the SOM to support and protect investigators' patent, copyright, and intellectual property rights.

6.2 GENERAL PRINCIPLES OF SCHOLARSHIP

The following are the general principles established by SOM policy:

- a. The SOM imposes no limitation on the freedom of the faculty members in the choice of fields of inquiry or the dissemination of the results obtained.
- b. The SOM shall accept or administer only those research grants and contracts that do not restrict faculty investigators with respect to the manner in which the scholarship (including research) is conducted, or the conclusions that are reached.
- c. SOM Faculty will be aware of patent, copyright, and intellectual property-related rights and responsibilities.

6.3 OBLIGATIONS OF SPONSORED ACTIVITIES

The responsibilities of the SOM in accepting grants and contracts, and the responsibilities of Departments, faculty members and staff, are as follows:

- a. HMH, and the SOM encourage the development and implementation of projects involving fundamental and applied scholarship (including research), training and community-service activities by faculty, administrators, and students.
- b. To further these activities, the SOM, the HMH Office of Grants, and the SOM Research Committee shall provide all necessary assistance that may be required by individuals and groups seeking to attract extramural funds to support such endeavors. The solicitation, acceptance, execution, and administration of grants and contracts, however, impose legal, fiscal, and moral obligations by the sponsoring groups and agencies upon HMH and/or the SOM. It is therefore important and necessary that requests for extramural funding for projects be reviewed and approved before submission to potential sponsors. In accepting a grant or contract, the SOM must provide the appropriate share of the time and effort of its personnel to perform work mutually agreed upon with a sponsor. Charges for the work shall be based on the employee's regular compensation, which, in accordance with HMH and SOM, practice, constitutes the basis of their salary. Payroll distribution records must substantiate all personnel costs.
- c. Negotiation of special circumstances attendant to the grant application that may affect salary and compensation shall be addressed on an *ad hoc* basis between the grant applicant, HMH, the SOM, the SOM Research Committee, and the Office of the dean before submitting the application.

6.4 ADMINISTRATION AND PROCEDURES

- a. The dean of the SOM and the HMH CEO are responsible for the formation of policies and procedures relating to extramurally-sponsored projects. This responsibility is carried out with the advice of the Hackensack Meridian Research Enterprise, and the SOM Research Committee.

- b. Proposals for scholarship support (including research), in the form of grants from or contracts with outside agencies must be approved in accordance with HMM's Bylaws and the HMM Office of Grants and Research including campus facilities at the **Interprofessional Health Sciences (IHS)** site in Nutley, NJ. The Department Chair and the dean shall be advised periodically in writing of the progress of such programs.
- c. No faculty member is empowered to enter into any grant or contract in the name of the SOM or HMM without the express written permission of the appropriate parties.
- d. Faculty interested in applying for a sponsored project should contact the Office of Research and Graduate Studies and/or the SOM Research Committee, which shall assist them in identifying appropriate sources and in preparing proposals.

6.6 PATENT, COPYRIGHT AND INTELLECTUAL PROPERTY RIGHTS POLICIES

- a. The respective rights of individual faculty members to patents, copyrights, and intellectual property rights are outlined in periodic SOM announcements/policy changes, and in faculty members' employment contracts. The Faculty Assembly of the SOM reserves the right to consider any changes made to the SOM Faculty Guide in this regard for possible adoption, inclusion, and amendment to this document.
- b. Intellectual property matters are handled through the HMM Office of Grants and Research Services, which works closely with the Office of the General Counsel as appropriate.
- c. HMM's Office of Commercialization and Technology Ventures facilitates and promotes the development of intellectual property by investigators at, or affiliated with, HMM.
- d. Approved updates to existing policies on patent, copyright, and intellectual property rights and responsibilities shall supersede provisions delineated herein.

SECTION 7: GOVERNANCE OF THE SCHOOL OF MEDICINE

7.1 ROLE AND RESPONSIBILITY OF THE DEAN OF THE SOM

As per Section 6.5 of the Post-Transition Amended and Restated Bylaws of the Hackensack Meridian School of Medicine, and Section VIII of the Faculty Bylaws, "The chief executive officer of SOM shall be the Robert C. and Laura C. Garrett Endowed Chair for the School of Medicine Dean. The dean may also hold the position and title of President of the Academic Enterprise at HMA in the Discretion of the CEO of HMM, although such position and title shall not confer on the dean any authority, responsibilities or privileges not otherwise set forth herein or granted to the dean HMM (and in all events subject to compliance with SOM's conflict of interest policies).

The responsibilities of the dean include:

- a. The dean shall create annual operating and capital budgets for SOM and the M.D. Program pursuant to the M.D. Program Requirements and propose those budgets to the Board of Governors, which shall consider the dean's recommendation, and if appropriate, approve and adopt such budgets by a majority vote, pursuant to Section 4.I(a)(vi)-(vii). In creating these annual budgets, the dean shall make recommendations as to class size, tuition and appropriate annual growth, and shall ensure that the medical students and faculty have access to appropriate resources for medical student education.
- b. The dean will report on and be accountable for all academic matters related to the M.D. Program to the SOM BOG and the HMM CEO. The dean shall also serve in the HMM leadership position of President, Academic Affairs, with reporting relationships in such a role to HMM leadership and management. Subject to the reserved powers of the Members, the dean shall be responsible for the day-to-day operations of medical education (including clinical education), scholarly activity, and service in the M.D. Program and SOM. Without limiting the foregoing, the dean shall be responsible for:
 - i. the Vision, Mission, and Strategies of SOM and the M.D. Program;
 - ii. academic standards and appropriate learning environment, including the responsibilities and privileges of SOM's and the M.D. Program's administrative officers, faculty, medical students, and committees;
 - iii. proper operations of the Office of Admissions consistent with the Vision and Mission of SOM and the M.D. Program, LCME accreditation standards, and state and federal law, provided, however, that the dean shall have no input into or oversight of individual admissions decisions;
 - iv. curriculum development of the M.D. Program;
 - v. an appropriate balance between teaching, clinical and research activities of students and faculty and at levels necessary to attain SOM's and the M.D. Program's academic and reputational objectives;
 - vi. subject to approval by the Members and the Board of Governors, development of a faculty effort and compensation model that appropriately values academic contributions, encourages sponsored research and fosters SOM and the M.D. Program recruitment objectives as well as recognizing clinical performance, and is supported by appropriate teaching and research funding within the HUMC Faculty Practice;
 - vii. appointment, promotion, renewal, and removal of School of Medicine faculty, subject to applicable faculty governance documents; and
 - viii. other responsibilities as currently or in the future may be required by Regulatory Bodies or the Board of Governors.

7.2 FACULTY BYLAWS OF THE SOM

A proposed amendment to the Faculty Bylaws may only be raised by the dean or a SOM faculty member. For a proposed amendment to become an official part of the Faculty By-Laws, it must be approved by the dean. For this to occur, the proposed amendment must be reviewed and ratified first by a quorum - an approved vote of two-thirds majority of the voting Faculty of the SOM, before it can be moved to the dean's Office for final consideration.

7.3 SOM STANDING COMMITTEES AND MEMBERSHIP ON SOM STANDING COMMITTEES

The following elected and/or appointed standing committees and subcommittees (collectively, “committee” or “committees”) of the SOM shall be established in the SOM. Each standing committee shall create bylaws to govern the activities and membership of the committee. Unless noted otherwise, SOM standing committees report to the dean, who also approves their bylaws.

New SOM standing committees may be approved through the SOM Policy on Creation of New Standing Committees.

SOM standing committees are not committees of the Faculty Assembly. The Faculty Assembly has the right to form its own committees (as outlined in Section 7.4), provided that these do not overlap or conflict with the functions of the SOM standing committees.

In voting on matters presented to SOM standing committees, committee members (including the Chair) must recuse themselves from votes in which they have a prior personal involvement or known conflict of interest. Unless noted below, or included as an *ex officio* member, SOM Department Chairs are excluded from service on SOM standing committees.

All committee members with the exception of those serving in an *ex officio* role, will serve three year terms. Beginning in calendar year 2021, the committee terms will be staggered so that in any given year, one third of the committee membership (including those who are elected or appointed) will be up for re-election or reappointment.

1. Medical Education Committee

a. Responsibility

The **Medical Education Committee (“MEC”)** is responsible for making recommendations to the dean regarding the design, implementation, management, assessment, and enhancement of the medical school curriculum. The MEC is responsible for review of all its subcommittee reports and recommendations, and votes on final decisions regarding all elements of the curriculum.

All curricular modifications will occur via the MEC and its curricular subcommittees. Proposals for changes to the curriculum may be suggested by faculty members, course/clerkship directors, and students. Faculty members should approach the course/clerkship directors in the relevant department, who will then initiate the appropriate procedure through the Phase 1 Curriculum Subcommittee, Phase 2 Curriculum Subcommittee, Phase 3 Subcommittee or the MEC. Faculty can also contact the Office of Medical Education to discuss ideas and proposed changes.

The MEC and its subcommittees supervise the educational program leading to the Doctor of Medicine (MD) degree. Changes to courses or clerkships that impact the SOM curriculum as described below must be reviewed and approved by the MEC or its subcommittees before implementation.

- i. The SOM has a horizontally and vertically integrated curriculum. Curricular changes at any level can impact the coherence of the curriculum, and its integration. This procedure is promulgated to describe the scope of such issues, for which approval by the MEC and potentially the dean is required.
- ii. Changes in the curriculum that require MEC (and potentially Dean or Associate Dean) approval include, but are not limited to: changes to the Educational Program Objectives, major modifications to a course or clerkship (e.g., changes in structure or duration of a course, or a substantial change that impacts another course, or impacts the relationship between courses).
- iii. Changes that require Phase 1 and 2 Curriculum Subcommittee approval: addition, deletion, or substantial change to the content in course or clerkship-level objectives and/or significant alterations in the instructional or evaluation methods in the course or clerkship.

b. **Membership**

The MEC is composed of 20 members, There are 15 voting members : seven (7) faculty members elected by the Faculty Assembly [distributed proportionally across Departmental clusters]; medical librarian appointed by the Associate Dean of Medical Education; Chairs of the Phase 1, Phase 2, Phase 3 and IQI Subcommittees; and three (3) student members elected by the Student Government Association and representing the second, third and fourth academic years) and five (5) non-voting members (Associate Dean of Medical Education; Vice Dean of the Medical Education Continuum; Assistant Dean of Medical Education; Associate Dean of Student Affairs and Wellbeing; one (1) student member elected by the Student Government Association representing the first academic year). In the event of a tie, the final vote goes to the dean.

All appointments are three-year renewable appointments, except for *ex officio* members. The MEC will meet monthly and at such other times as set forth in the bylaws of the MEC. Department Chairs may not serve on the MEC except by virtue of other *ex officio* appointments.

The Chair of the MEC is initially the Associate Dean of Medical Education, who will be considered a voting member until LCME Full Accreditation is achieved. This initial membership is actually 16 voting members and 4 non-voting members. Once the SOM achieves Full LCME Accreditation, the Chair will transition to a faculty member elected from the voting members of the MEC, at which time the Associate Dean of Education will become a non-voting member of the MEC, and the membership will be fifteen (15) voting members and five (5) non-voting members as described above

c. **Subcommittees**

There are three (3) subcommittees of the MEC. The subcommittees provide regular reports, as well as any recommendations for modifications for improvement or requests for significant curricular change to the MEC.

i. **Phase 1 Curriculum Subcommittee**

- The **Phase 1 Curriculum Subcommittee of the MEC (“Phase 1 Subcommittee”)** is responsible for making recommendations to the MEC regarding the development, review, and enhancement of objectives, content, student workload, student performance, evaluations, and integration related to the Phase 1 curriculum.
- The Phase 1 Subcommittee is composed of 22 members. There are 18 voting members (seven Sciences/Skills/Reasoning [S/S/R] Course Directors, the Human Dimension Course Director, the Director of the Clinical Skills, the Health Systems Science Curricular Lead, one additional Longitudinal Curricular Lead from the Department of Medical Sciences appointed by the Associate Dean of Medical Education, the Problem-Based Learning Director, the Phase 2 and Phase 3 Subcommittee Chairs, the Assistant Dean of Medical Education, and three student members elected by the Student Government Association and representing the second, third, and fourth academic years). There are four non-voting members, including the Associate Dean of Medical Education, the Assistant Dean of Student Affairs and Wellbeing, the Director of Institutional Effectiveness and Assessment, and one elected student member representing the first academic year. All appointed S/S/R Co-Course Directors may attend the meeting but there will be only one vote per course.
- The Chair of the Phase 1 subcommittee is elected from among the Phase 1 Course-Directors and Curricular Leads. The Phase 1 subcommittee will meet monthly and at such other times as set forth in the bylaws of the Phase 1 subcommittee.

ii. Phase 2 Curriculum Subcommittee

- The **Phase 2 Curriculum Subcommittee of the MEC (“Phase 2 Subcommittee”)** is responsible for making recommendations to the MEC regarding the development, review, and enhancement of objectives, content, student workload, student performance, evaluations, and integration related to the Phase 2 curriculum.
- The Phase 2 Subcommittee is composed of 20 members. There are 16 voting members (eight Clerkship Directors, Human Dimension Course Director [or designee], Director of Clinical Skills [or designee], the Phase 1 and Phase 3 Subcommittee Chairs, the Assistant Dean of Medical Education, and three student members elected by the Student Government Association and representing the second, third, and fourth academic years. There are four non-voting members, including the Associate Dean of Medical Education, the Assistant Dean of Student Affairs and Wellbeing, the Director of Institutional Effectiveness and Assessment, and one student member representing the first academic year. If there are co-Clerkship Directors, all appointed Directors may attend the meeting but there will be only one vote per clerkship.
- The Chair of the Phase 2 Subcommittee is elected from among the Phase 2 Clerkship Directors and is a three-year appointment. The Phase 2 Subcommittee will meet monthly and at such other times as set forth in the bylaws of the Phase 2 Subcommittee.

iii. Phase 3 Curriculum Subcommittee

- The **Phase 3 Curriculum Subcommittee of the MEC (“Phase 3 Subcommittee”)** is responsible for making recommendations to the MEC regarding the development, review, and enhancement of objectives, content, student workload, student performance, evaluations, and integration related to the Phase 3 curriculum.
- The Phase 3 Subcommittee is composed of 14 members. There are 12 voting members (Associate Dean of Research and Graduate Studies, Associate Dean of the Medical Education Continuum, Associate Dean of Student Affairs and Wellbeing, representatives of the Phase 1 and Phase 2 Subcommittees elected by the subcommittees, a Faculty representative of the Research Committee [elected by the Research Committee], three Faculty members elected by the Faculty Assembly and representing clinical medicine, dual-degree programs and an at-large member, two student members elected by the Student Government Association and representing the third and fourth academic years, an appointed SOM graduate who previously completed the Core Curriculum in three years) and two non-voting members (Associate Dean of Medical Education, Director of Institutional Effectiveness and Assessment).
- The Chair of the Phase 3 Subcommittee is the Associate Dean of Research and Graduate Programs until such time as the Charter Class has completed this Phase. Thereafter, the Chair of the Phase 3 Subcommittee will be elected by the committee members. All appointments are three-year renewable appointments, except for *ex officio* appointments. The Phase 3 Subcommittee will meet monthly and at such other times as set forth in the bylaws of the Phase 3 Subcommittee.

2. Appointments and Promotions Committee

a. Responsibility

The Appointments and Promotions Committee (“APC”) is responsible for making recommendations to the dean regarding all matters related to the appointment and promotion of faculty members of the SOM.

- b. **Membership**
The APC is composed of 19 members; there are 16 voting members (faculty members Associate Professor or Professor rank, elected by the Faculty Assembly and distributed proportionally across Departmental clusters; and three non-voting members (Associate Dean of Faculty; Associate Dean of Diversity and Equity, and the Chair of the APC). Department Chairs may serve on the APC.
The Chair of the APC is elected by the committee members and votes only in the event of a tie.
For the appointment of Clinical Assistant Professors, the APC Chair can make recommendations to the Dean without input from the APC.
The Chair and all members will serve a three-year renewable term. The APC will meet at least quarterly and at such other times as set forth in the policies and procedures of the APC Committee.

3. Student Performance Review Committee

- a. **Responsibility**
The Student Performance Review Committee (“SPRC”) is responsible for reviewing and discussing the academic standing of all enrolled students, including addressing deficits in academic performance and allegations of student breaches in professional behavior.
The SPRC makes recommendations to the dean regarding a course of action for students who do not meet expectations in any aspect of the SOM curriculum, including allegations of student breaches in professional behavior.
- b. **Membership**
The SPRC is composed of 10 members; 8 voting (three elected faculty members elected by the Faculty Assembly distributed proportionally across Departmental clusters and five faculty members appointed by the dean of the SOM distributed proportionally across Departmental clusters), and two *ex officio* non-voting members (the Associate Dean of Medical Education and the Associate Dean of Student Affairs and Wellbeing).
The Chair of the SPRC is elected from among the faculty members on the committee. The Chair and all members will serve a three-year renewable term. The SPRC will meet quarterly and at such other times as set forth in the bylaws of the SPRC Subcommittee.
A Course or Clerkship Director may not serve as a member of the SPRC and therefore may not run to be elected to membership on the SPRC. If a standing member of the SPRC is appointed to the role of course or Clerkship Director, he or she must resign from their SPRC membership.
- c. **Recusal**
A faculty member teaching in one or more courses may serve on the SPRC but must recuse him or herself from any recommendations and votes regarding a student for which they have taken an action that contributes to the adverse academic action being proposed against that student.
- d. **Subcommittees**
i. There is one subcommittee of the SPRC, the **Student Professionalism Subcommittee (“SPS”)**. The SPS is responsible for making recommendations to the SPRC related to student breaches of professionalism.
ii. The SPS is composed of 11 voting members; 5 faculty appointed by the dean, (one ethics expert, one medical science faculty, one mental health worker, one internal medicine/pediatrics/family medicine faculty member, and one other public health or medical professional); three faculty at large elected by the Faculty Assembly; and 3 student members (one from 1st, 2nd and 3rd year classes). The chair is elected by the members of the committee and serves a three-year term.

- iii. The Chair of the SPS is elected from among the faculty members on the subcommittee. The Chair and all members will serve a three-year renewable term. The SPS will meet at such times as set forth in the bylaws of the SPS.

4. Grievance Committee

a. Responsibility

The Grievance Committee is responsible for evaluating an allegation by any faculty member, student or non-faculty staff member that an action taken by a SOM official or committee was a violation of provision(s) of the SOM Faculty Guide or the Faculty Bylaws. The Grievance Committee does not have any jurisdiction over a claim concerning harassment or discrimination (or other violation of federal, state and/or local law); a party with such a claim shall utilize the most appropriate avenue provided by that person's employer.

The Grievance Committee Chair, in consultation with the members of the committee, shall decide whether the grievance presents a redressable issue. If a redressable grievance is not presented, the Grievance Committee Chair shall notify the aggrieved party in writing stating the reasons for the committee's decision.

b. Membership

The Grievance Committee is composed of six (6) voting members; the six voting members are elected by the Faculty Assembly distributed proportionally across Departmental clusters. Department Chairs may not serve on the Grievance Committee.

The Chair of the Grievance Committee is elected from among and by the SOM Faculty members on the committee. The Chair and all members will serve a three-year renewable term. The Grievance Committee will meet at such times as set forth in the bylaws of the Grievance Committee.

5. Nominations and Elections Committee

a. Responsibility

The **Nominations and Election Committee (NEC)** is responsible for managing the elections of faculty members to SOM committees, as well as to any SOM offices requiring the election of SOM faculty members.

b. Membership

The NEC is composed of three (3) voting members elected by the Faculty Assembly distributed proportionally across Departmental clusters. Department Chairs may not serve on the Nominations and Election Committee.

Members of the Nominations and Election Committee will serve a three-year renewable term. The NEC will meet at such times as set forth in the bylaws of the NEC.

6. Admission Committee

a. Responsibility

The Admissions Committee is responsible for establishing and reviewing admission requirements for the SOM and for reviewing, interviewing, and selecting applicants for admission to the SOM. The Admissions Committee is independent of the dean and does not report to her or him.

b. Membership

The Admissions Committee is composed of 22 voting (21 voting members plus the Assistant Dean of Admission who votes only in the event of a tie). The 21 voting members include six appointed and 15 elected members. As the school matures, two medical students who are elected by the student body will be added to the committee, for a total of 24 members at that time. Students are anticipated to join the Admission Committee for the admission cycle beginning June 2020.

The six appointed voting members include:

1. the Associate Dean of Student Affairs and Wellbeing, (ex officio)
2. one core faculty member appointed by the Associate Dean of Diversity and Equity
3. one core faculty member appointed by the Associate Dean of Research and Graduate Studies
4. one faculty member of the Seton Hall University community appointed by the Dean of the School of Theology
5. two appointed interprofessional faculty representatives, one each from the College of Nursing and the School of Health and Medical Sciences, selected by their respective deans

The 15 elected committee members include:

- Eight (8) core faculty members whose appointments are distributed across four clusters of departments
 1. Hospital-based (Anesthesiology, Emergency Medicine, Pathology, Radiology)
 2. Medical-based (Cancer Center, Family Medicine, Internal Medicine, Pain/Palliative Care, Pediatrics, Psychiatry/Behavioral Medicine, Physical Medicine, Rehabilitation, Neurology)
 3. Surgical-based (Neurosurgery, Obstetrics and Gynecology, Ophthalmology, Orthopedics, Otolaryngology, Plastics, General Surgery, Urology)
- Non-clinical (Department of Medical Sciences) five (5) core faculty members from across all HMSOM departments, elected by the HMSOM Faculty Assembly according to the rules of the Nominations and Elections Committee
- two (2) community members who are actively engaged at the HMSOM and who are either nominated by members of the HMSOM community or are self-nominated, based on their demonstrated commitment to the vision of the HMSOM
- two (2) student members (to be elected by the HMSOM Medical Student Association beginning with the 2020 admission cycle, at which time the Admission Committee will have 24 members, 17 of which will be elected).

The Chair of the Admissions Committee is the Assistant Dean of Admissions.

All appointments are three-year renewable appointments, except for ex officio appointments. The Admissions Committee will meet at least monthly and at such other times as set forth in the bylaws of the Admissions Committee.

c. **Subcommittees**

There is one subcommittee of the Admissions Committee; the Internal Advisory Committee. Membership includes the Assistant Dean of Admissions, the Associate Dean of Student Affairs and Wellbeing, the Associate Dean of Diversity and Equity, the Director of Admissions, the Director of Institutional Effectiveness and Assessment, and two members of the Admissions Committee elected by the full committee.

The Internal Advisory Subcommittee annually reviews the admission criteria and process. If changes are necessary, the subcommittee makes recommendations to the full Admission Committee. Data and feedback from other SOM committees form the basis for such recommendations.

7. **Research Committee**

a. **Responsibility**

The Research Committee is responsible for oversight, support, and making recommendations to the dean for the SOM research enterprise. The Research Committee responsibilities include

- i. Oversight of policies and procedures related to research and associated infrastructure,
- ii. Encouraging and supporting research activities among faculty and students,

- iii. Assuring compliance with regulatory requirements and safety mandates,
- iv. Promoting grant proposal submission,
- v. Identification and support of pharmaceutical/industrial/biotechnology partnerships,
- vi. Support of team-based, collaborative, interdisciplinary, and inter-professional approaches to research and project funding,
- vii. Coordination with institutional technology transfer/innovation offices to assure intellectual property protection, management, and development,
- viii. Identification of areas of research strength and assigning of resources, and
- ix. Working with HMM and the SOM to identify duplicative and or missing services, core facilities, and related policies and procedures.

b. Membership

The Research Committee is composed of nine (9) voting members that includes six (6) faculty members elected by the Faculty Assembly distributed proportionally across Departmental clusters, an Institutional Research Officer appointed by the dean of the SOM, and the Associate Dean of Research and Graduate Studies, and one (1) member from the IHS campus with demonstrated interest in interprofessional research appointed by the dean of the SOM. Department Chairs may serve as elected committee members.

The Chair of the Research Committee is the Associate Dean of Research and Graduate Programs. All appointments are three-year renewable appointments, except for *ex officio* and resident/fellow appointments. The Research Committee will meet at least three (3) times per year, and at such times as set forth in its bylaws.

8. Diversity and Equity Committee

a. Responsibility

Responsibilities of the Diversity and Equity Committee include:

- i. developing and maintaining a diversity database to establish data integral to sustaining effective recruitment, retention, and professional development of under-represented students, faculty, and staff;
- ii. ensuring that policies and procedures regarding diversity, inclusion, and equity in the SOM are consistent with those of HMM and the mission and vision of the SOM;
- iii. fostering the development of personal attributes in employees and students of the SOM that are necessary to achieve its mission;
- iv. encouraging and supporting culturally-relevant scholarly activities that acknowledge and respect systems of healing that emerge from different traditions;
- v. providing a culturally-competent, inclusive, and respectful environment; and
- vi. developing and/or recommending policies and programs to continue to grow a culture of diversity, inclusion, and pluralism in the SOM, and in collaboration with the Office of Cultural Diversity at HMM.

b. Membership

The Diversity and Equity Committee is composed of twelve (12) voting members. The twelve members include three (3) faculty members elected by the Faculty Assembly distributed proportionally across Departmental clusters, the dean of the SOM, the Associate Dean of Diversity and Equity, the Associate Dean of Faculty, the Assistant Dean of Admissions, the Human Dimension Course Director, a representative from the HMM Office of Cultural Diversity appointed by the dean of the SOM, and four (4) students elected by the Student Government Association and representing the first, second, third and fourth academic years. Department Chairs may serve as elected committee members.

The Chair of the Diversity and Equity Committee is the Associate Dean of Diversity and Equity. All appointments are three-year renewable appointments, except for *ex officio* and resident/fellow appointments. The Diversity and Equity Committee will meet quarterly and at such times as set forth in

the bylaws of the Diversity and Equity Committee.

c. **Subcommittees**

There is one subcommittee of the Diversity and Equity Committee; the Community Advisory Board. It is chaired by a community member appointed by the dean and meets quarterly.

The Community Advisory Board of the Diversity and Equity Committee is committed to fostering open communication between the SOM and its surrounding communities. Membership will consist of elected officials or their representatives, leaders of civic and religious organizations and community associations, neighborhood activists, and individuals representing the SOM.

Community Advisory Board meetings will consist of SOM staff leaders making presentations on topics including school infrastructure, funding issues, and health care public policy trends. A standing agenda item will be the status of the Human Dimensions Course of the SOM, which will take place in the community. In addition, a presentation about a specific health topic affecting residents and the local community also is made by one of the SOM directors or researchers.

Community Advisory Board members are given the opportunity to ask questions and raise concerns about how specific projects and conditions may affect communities served by the SOM. The goal is to create an ongoing dialogue that helps to prevent conflicts and ensures a smooth relationship between the SOM and its neighboring communities.

9. **Institutional Quality Improvement Committee (IQI)**

a. **Responsibility**

The four core responsibilities of the IQI are to:

- i. monitor compliance to accreditation standards (LCME, Middle States Commission on Higher Education);
- ii. review, recommend action, and monitor evaluation and assessment data for all aspects and actions of the SOM;
- iii. monitor and advise if the SOM is achieving its educational and strategic plan goals; and
- iv. promote, support, and/or implement Quality Improvement (QI) projects/activities.

b. **Membership**

There are fifteen (15) members on the committee, fourteen of whom are voting. The dean is non-voting except in the event of a tie. There are three (3) elected members representing different clusters, who serve three-year, renewable terms. All other members are *ex officio*, including Dean of SOM; the Assistant Dean of Admissions; Associate Dean of Faculty; Associate Dean of Finance and Operations; Associate Dean of Medical Education; Associate Dean of Student Affairs and Wellbeing; Associate Dean of Diversity and Equity; Associate Dean of Research and Graduate Studies; Director of Instructional and Curricular Design; Director of Clinical Skills; and the Director of Institutional Effectiveness and Assessment. Changes in membership must be approved by the dean. The IQI is chaired by the Director of Institutional Effectiveness and Assessment.

10. **Data Governance Committee**

a. **Responsibility**

The Data Governance Committee provides oversight and stewardship for protection of access to and best use of all data at the SOM, including student demographics, academic learning and outcomes data, curricular data, and administrative data. This committee reports to the dean of the SOM.

b. **Membership**

The Data Governance Committee has nineteen (19) members; thirteen (13) voting members and four (4) alternates within their units, including three (3) faculty members elected across clusters (medical sciences, surgical, and hospital departments clusters); the dean of the SOM; Assistant Dean of Admissions, Director Of Admissions, Associate Dean of Faculty, Director of the Office of

Faculty Affairs, Associate Dean of Finance and Operations; Associate Dean of Medical Education, Assistant Dean of Medical Education, Director Institutional Effectiveness and Assessment, Manager of Assessment Information Systems; Associate Dean of Research and Graduate Studies, Associate Dean of Student Affairs and Wellbeing, the HMH Associate Chief of Information Science, and the HMH Associate Chief of Data Science The committee will meet monthly. The Data Governance Committee is chaired by the Assessment Information Systems Manager.

11. Faculty Assembly and Officers

- a. Membership of the Faculty Assembly of the SOM shall consist of those holding appointments as Core Faculty, as defined in the Faculty Guide, in the ranks of Instructor, Assistant Professor, Associate Professor, and Professor. Clinical Assistant Professors are non-voting members and may not serve on a committee.
- b. The Faculty Assembly is free to create such officers and agencies (e.g., committees, task forces) as it deems appropriate to promote the interests of Faculty, provided that the role of these officers and agencies do not conflict or overlap with existing roles or standing committees of the SOM. The officers and agencies shall be elected to function in accordance with the Faculty Bylaws, and must, in all announcements and publicity, be clearly identified as officers and/or agents of the Faculty Assembly.
- c. The positions of Chair and Vice Chair of the Faculty Assembly are filled by candidates elected by the Faculty Assembly to serve a term of two years. These officers shall be selected and function in accordance with the Faculty Bylaws, and in all announcements and publicity, be clearly identified as officers of the Faculty Assembly.
- d. Nominations for the positions of Chair and Vice Chair of the Faculty Assembly shall be solicited in April of the year in which there will be an election by the current Faculty Assembly Chair. Voting shall be conducted by secret ballot following the April meeting of the Faculty Assembly and before the May meeting. The newly elected Chair and Vice Chair shall assume their positions after the June meeting.
- e. The Faculty Assembly will meet on a regular basis as determined by the SOM Faculty Bylaws. Attached in Appendix A

SECTION 8: FACULTY GUIDE APPROVAL, AMENDMENTS, AND SEVERABILITY

8.1 APPROVAL OF FACULTY GUIDE

- a. Prior to its approval by the dean, the Faculty Assembly will have the right to review the SOM Faculty Guide and provide suggestions for revisions. Final approval of the SOM Faculty Guide must be obtained from the dean of the SOM.
- b. Every two years, the Faculty Guide will be reviewed by an *ad hoc* subcommittee which includes the Faculty Assembly President, who will appoint the other eight (8) members (including two SOM Chairs appointed by the dean). At this time amendments, additions and/or deletions may be proposed. The Faculty Assembly will have the right to review and comment on the proposed revisions.

8.2 AMENDMENTS TO THE FACULTY GUIDE

A proposed amendment to the SOM Faculty Guide may only be raised by either the dean, or a member of the SOM Faculty Assembly. For a proposed amendment to become an official part of the Faculty Guide, it must be approved by the dean (in consultation and collaboration with the HMH CEO). For this to occur, any proposed amendment that does not also require revision of the Faculty Bylaws must be reviewed and ratified first by an approved vote of one-half plus one of the voting members of the SOM Faculty Assembly. If accepted, the amendment terms must be memorialized in writing before it can be moved to the dean for final consideration be appended to this document until the next printed version is distributed to all relevant parties. Final approval of amendments of the Faculty Guide must be obtained from the dean and the HMH CEO.

8.3 SEVERABILITY OF THE FACULTY GUIDE

If any provision of this Faculty Guide is held unenforceable, then such provision will be modified to reflect the parties' intention. All remaining provisions of the Faculty Guide shall remain in full force and effect.

APPENDIX A: HACKENSACK MERIDIAN SCHOOL OF MEDICINE BYLAWS FOR THE GOVERNANCE OF THE FACULTY ASSEMBLY OF THE SCHOOL OF MEDICINE (SOM FACULTY BYLAWS)

SECTION I: NAME

The name of the organization is "The Faculty Assembly" (hereinafter referred to as "Faculty Assembly") of the Hackensack Meridian School of Medicine (hereinafter referred to as "School" or "SOM"). Members of the Faculty Assembly are hereinafter referred to as "Members" or "the Membership."

SECTION II: PURPOSE

The purpose of the Faculty Assembly is to provide faculty input and voice, consistent with shared governance, regarding both academic and non-academic matters of relevance to the SOM.

SECTION III: MEMBERSHIP

Membership in the Faculty Assembly of the SOM shall consist of those holding appointments as Core Faculty as defined in the Faculty Guide in the ranks of Instructor, Assistant Professor, Associate Professor, and Professor, as well as those who have been hired to serve in a Faculty position that is eligible for ranking but whose rank has not yet been assigned. Clinical Assistant Professors are non-voting members and cannot serve on committees.

SECTION IV: FACULTY OFFICERS

Article 1: A Chair and Vice Chair of the Faculty Assembly shall be elected from the Faculty for a term of two years. The election should take place after the regularly scheduled Spring meeting of the Faculty Assembly. In the event of a change in officers due to resignation or absence of elected individual, the Nominations and Elections Committee will conduct an election within 30 days.

Article 2: The duties of the Chair of the Faculty Assembly shall be:

- A. To prepare and distribute to the Faculty the agenda for the meetings of the Faculty Assembly.
- B. To preside over meetings of the Faculty Assembly.
- C. To distribute provisional meeting minutes (i.e., minutes that have not been approved by the Faculty organization) to the Faculty Assembly at least one week in advance of meetings and post them on the Faculty Assembly online page as "unapproved minutes."
- D. To distribute a copy of approved minutes to the dean and post a copy on the Faculty Assembly online page within one week of the meeting.
- E. To conduct such correspondence as may be necessary for transmitting any action taken by the Faculty Assembly or for informing the Faculty Assembly of any Faculty business.
- F. To undertake other duties as specified by the Faculty Assembly.

Article 3: The duties of the Vice Chair of the Faculty Assembly shall be:

- A. To function as the recording secretary of the Faculty Assembly.
- B. To keep a book/digital repository of the minutes of the proceedings of meetings; this shall include a record of those present.
- C. To preside over Faculty Assembly meetings in the Chair's absence.
- D. To undertake other duties as specified by the Faculty Assembly.

SECTION V: MEETINGS

Article 1: All meetings of the Faculty Assembly will be conducted according to the most current edition of *Robert's Rules of Order Newly Revised* (2011).

Article 2: A regular meeting of the Faculty Assembly will be held at least three times yearly, with the option to participate remotely by webinar. The exact dates and times shall be announced by the Chair of the Faculty Assembly at the beginning of the academic year. Additional sessions may be initiated on an as needed basis.

Article 3: The dean may call a special meeting of the Faculty Assembly, including in response to a written request of any

member of the Faculty Assembly. Only the item or items of business for which the special meeting was called, as set forth in the formal notice and agenda sent to the Faculty Assembly, may be considered.

Article 4: Individuals holding Core, Adjunct, Visiting, or Emeritus appointments shall have the opportunity to be present at all regular and special meetings of the Faculty Assembly, and may participate in the discussions. Only Core Faculty (the "Membership") may vote or participate in elections. The dean, Vice-Dean and Associate and Assistant Deans, may attend and participate in meetings of the Faculty Assembly.

Article 5: Non-SOM Faculty members of the School of Medicine community and others may be invited by the Faculty Assembly to attend meetings and take part in the discussions, but they are not eligible to vote or to participate in elections. The Chair must be advised at least one week in advance of the meeting when others (i.e., non-SOM Faculty members) are invited.

Article 6: The Faculty Assembly reserves the right, by two-thirds vote of members, to close a meeting or portion thereof, limiting attendance to members, as defined in Section III.

Article 7: Ten percent of the Faculty Assembly members shall constitute a quorum. The calculation of 10 percent includes those participating via webinar or conference call and shall exclude members of the Faculty Assembly on leave in any given semester.

Article 8: The standard order of business at all meetings shall be:

- A. Announcements by the dean or the dean's designee
- B. Approval of Agenda
- C. Approval of Minutes
- D. Reports of Officers and Standing Committees
- E. Special Committee Reports
- F. Special Orders
- G. Unfinished Business and General Orders
- H. New business

Article 9: Voting

- A. Unless otherwise specified in the Bylaws, all decisions concerning Faculty Assembly motions will be decided according to the vote required by *Roberts Rules of Order Newly Revised (2011)*.
- B. No proxies of any kind will be allowed.
- C. **Votes on Motions.** When a Faculty Assembly vote is to occur, only members who are participating in that meeting (either in person or virtually) are eligible to vote.
- D. **Votes on Elections.** The Nominations and Elections Committee shall publicize votes on elections with sufficient advance notice, organize the voting in person and/or electronically, and announce the outcome in person and/or via email communication in the case of an electronic vote.
- E. **Electronic voting mechanism.** The Faculty Assembly will utilize an online document management and inter-department collaboration tool. As a part of this suite of tools, the Faculty Assembly will have the capacity to send out polls securely for confidential voting on committee elections, policies, bylaws, Faculty Guide, and amendments, etc. Polls will be sent via email and Faculty will be required to sign in to cast their vote. Votes can be allowed once or multiple times depending on the needs of the Faculty Assembly. Aggregate results are calculated immediately for the administrator of the poll and can be summarized and shared amongst participants if desired.

SECTION VI: ESTABLISHMENT OF OFFICERS AND AGENCIES

The Faculty Assembly is free to create such officers and agencies (e.g., committees, task forces) as it deems appropriate to promote the interests of Faculty, provided that the role of these officers and agencies do not conflict or overlap with existing roles or standing committees of the SOM. The officers and agencies shall be selected and function in accordance with the Faculty Bylaws, and must, in all announcements and publicity, be clearly identified as officers and/or agents of the Faculty Assembly.

SECTION VII: ELECTIONS

Article 1: Nominations

When Faculty Assembly elections are required, the Nominations and Elections Committee shall be directed by the Chair of the Faculty Assembly to conduct an election, beginning with a call for nominations that specifies the position(s) to be elected.

Article 2: Elections

- A. Elections shall be by anonymous vote, utilizing the Faculty Assembly's Electronic voting mechanism.
- B. The ballot will be prepared by the Chair of the Nominations and Elections Committee and distributed to all members of the Faculty via email.
- C. The outcome of all elections will be determined by a majority count of those submitting votes.
- D. All ties shall be decided by a re-vote.
- E. All elected officers/representatives shall serve their full office term unless they cease to be a member of the Faculty Assembly, they are excused by the Faculty Assembly at the personal request of the individual officer/representative, or they are removed from office by two-thirds vote at any official regular or special meeting of the Faculty Assembly.
- F. Should an office/position become vacant during its term, the Faculty Assembly, at its next regular meeting, will elect an acting officer/representative by majority vote. At the same meeting the Nominations and Elections Committee will be directed to initiate an election for the position.

SECTION VIII: DEAN'S ROLE AND AUTHORITY

ROLE AND RESPONSIBILITY OF THE DEAN OF THE SOM

As per Section 6.5 of the Draft Post-Transition Amended and Restated Bylaws of the Hackensack Meridian School of Medicine, and Section VIII of the Faculty Bylaws, "The chief executive officer of SOM shall be the dean. The dean may also hold the position and title of President of the Academic Enterprise at HMA in the Discretion of the CEO of HMH, although such position and title shall not confer on the dean any authority, responsibilities or privileges not otherwise set forth herein or granted to the dean HMH (and in all events subject to compliance with SOM's conflict of interest policies).

The responsibilities of the dean include:

- a. The dean shall create annual operating and capital budgets for SOM and the M.D. Program pursuant to the M.D. Program Requirements and propose those budgets to the Board of Governors, which shall consider the dean's recommendation, and if appropriate, approve and adopt such budgets by a majority vote, pursuant to Section 4.I(a)(vi)-(vii). In creating these annual budgets, the dean shall make recommendations as to class size, tuition and appropriate annual growth, and shall ensure that the medical students and faculty have access to appropriate resources for medical student education.
- b. The dean will report on and be accountable for all academic matters related to the M.D. Program to the SOM BOG and the HMH CEO. The dean shall also serve in the HMH leadership position of President, Academic Affairs, with reporting relationships in such a role to HMH leadership and management. Subject to the reserved powers of the Members, the dean shall be responsible for the day-to-day operations of medical education (including clinical education), scholarly activity, and service in the M.D. Program and SOM. Without limiting the foregoing, the dean shall be responsible for:
 - i. the Vision, Mission, and Strategies of SOM and the M.D. Program;
 - ii. academic standards and appropriate learning environment, including the responsibilities and privileges of SOM's and the M.D. Program's administrative officers, faculty, medical students, and committees;

- proper operations of the Office of Admissions consistent with the Vision and Mission of SOM and the M.D. Program, LCME accreditation standards, and state and federal law, provided, however, that the dean shall have no input into or oversight of individual admissions decisions;
- iii. curriculum development of the M.D. Program;
 - iv. an appropriate balance between teaching, clinical and research activities of students and faculty and at levels necessary to attain SOM's and the M.D. Program's academic and reputational objectives;
 - v. subject to approval by the Members and the Board of Governors, development of a faculty effort and compensation model that appropriately values academic contributions, encourages sponsored research and fosters SOM and the M.D. Program recruitment objectives as well as recognizing clinical performance, and is supported by appropriate teaching and research funding within the HUMC Faculty Practice;
 - vi. appointment, promotion, renewal, and removal of School of Medicine faculty, subject to applicable faculty governance documents; and
 - vii. other responsibilities as currently or in the future may be required by Regulatory Bodies or the Board of Governors.

The dean has the authority to identify and assemble a Dean's Cabinet to serve as an advisory group, and to whom he or she may delegate specific responsibilities to the members.

SECTION IX: APPROVAL AND AMENDMENTS

Article 1: Approval of the Faculty Bylaws

Prior to approval by the dean, the Faculty Assembly will have the right to review the SOM Faculty Bylaws during an open review period of at least two weeks, provide suggestions for revisions to the SOM Office of Faculty, and vote to recommend approval. Final approval of the SOM Faculty Bylaws must be obtained by the dean.

Article 2: Amendments to the Faculty Bylaws

A proposed amendment to the SOM Faculty Bylaws may only be raised by the Office of the Dean, or a member of the SOM Faculty. For a proposed amendment to become an official part of the SOM Faculty Bylaws, it must be approved by the dean. For this to occur, the proposed amendment must be reviewed and ratified first by an approved vote of two-thirds majority of at least 20% of the voting faculty of the Faculty Assembly, before it can be moved to the dean's office for final consideration. Final approval of amendments of the SOM Faculty Bylaws must be obtained from the dean.